

Continuous Quality Improvement Project

QUALITATIVE REVIEWS

STATE

Alabama

The main elements of Alabama's CQI system are Quality Service Reviews (QSRs) and County Improvement Plans (CIPs).

Quality Service Reviews

Each County QA Committee must complete a minimum number of QSRs each year as a part of the function of the committee with the number based on the size of the county. Prior to committee members completing case reviews, a certified reviewer (someone who has completed the training process and has shadowed the review of a case) must train a prospective reviewer in the use of the protocol instrument. After receiving protocol training, the prospective reviewer must "shadow" a reviewer in completing a review and the protocol instrument, and must then attend the presentation of the case to the Committee. Following this, the individual may actively review cases for the county QA Committee. After completing the review, the entire protocol is given to the QA Coordinator. The [Alabama QSR Write-up](#) is completed and forwarded to the Office of Quality Assurance after the case has been debriefed by the QA Committee. It is the responsibility of the QA Coordinator to review the QSR write-up for completeness and correctness (including calculations for the overall ratings) prior to submitting it to the Office of Quality Assurance. See the [Quality Assurance Guide](#) (pg. 46) for more detailed information on the QSR process.

The Office of QA, in collaboration with the county QA Committees, conducts onsite reviews in each of the 67 counties on a 3-year rotating basis. A random sample is taken from CPS and foster care cases. See the [Quality Assurance Guide](#) for more detailed information on the case selection process. Prior to an onsite review a staff person from the Office of Quality Assurance will be in contact with county management to discuss onsite review preparation issues. The county will be provided with specific information that will need to be submitted prior to the onsite review. This information along with the county department's QA report and a data profile will provide the information needed to develop a preliminary assessment of the current status of practice and system performance for the county department.

While onsite team members will conduct QSRs using the [Alabama QSR Protocol](#) and interviews with community stakeholders to determine the current status of the county department's practice and system performance (modifications to onsite review format may occur as needed to individualize the process to the county). Safety and permanency assessments and resource record reviews are also completed. The safety assessments use data from CAN and preventions from the last 12 months and rate them on [Best Practice Indicators](#) in safety areas. The permanency assessments address data at the time of the onsite review as well as a review of randomly selected foster

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care cases with a focus on Best Practice Indicators in permanency areas. The resource record reviews look at licensing components of foster homes in the county being reviewed. Team members make a collective decision through a debriefing process on the status of each of the Best Practice Indicators, identifying strengths and needs and making recommendations on how case practice can be improved. Each team member contributes to the comprehensive report provided to the county after each on-site review.

County Improvement Plans

The [Quality Assurance Guide](#) outlines the purpose of the CIP and its process: In order to assist counties in addressing areas where strengthening is needed identified during an onsite review, a follow-up and planning process has been established. Generally within 30 days the county will receive a copy of the on-site review report. The areas identified during the onsite review that need strengthening will receive attention in terms of establishing county office strategies as to how these issues will be addressed. Progress made thereafter by the county will help guide decisions on the timing of subsequent review activity, the necessity/frequency of county improvement plan updates and completion of the county improvement plan. The assigned consultant from the Office of Quality Assurance will assist/support the county in monitoring of the plan and in the decision to submit the plan as complete to the Family Services Division. *See the Quality Assurance Guide (pg. 97) for more detailed information on the CIP process.*

Arizona

Case review is the primary component of Arizona's CQI Plan. Three different types of cases are reviewed: initial assessment, on-going foster care and adoption, and in-home cases. A statewide sample of cases is pulled monthly. Generally, each PI Specialist reviews four to six cases per month. Targeted reviews are completed as needed, but the majority of case reviews evaluate safety, permanency and well-being. Reviews of initial assessment cases focus on components of the investigation process, such as timeliness of initial response, sufficiency of information collection, and safety planning. Interviews are not completed for these reviews. Unlike the CFSR, the State's initial assessment case review sampling population includes all investigated reports, including reports that are closed at investigation and not opened for services. The in-home and out-of-home review instruments are similar to the CFSR instrument. The State's review instrument does not include items that can be measured through data extracted from the child welfare information system (e.g. reentry, timeliness of reunification and adoption, placement of siblings' together, proximity of placement). If an issue is identified in this data, a targeted case review can be performed. Interviews are conducted via telephone for all in-home and out-of-home cases. For out-of-home cases, one parent and the caregiver(s) are interviewed. Stakeholders are not interviewed.

The State's Reports and Statistics Unit pulls a random sample for case reviews. Each region is required to submit a calendar to the Practice Improvement Manager indicating the month during which each unit in the region will be reviewed. One intent

of Arizona's CQI system is to improve staff knowledge of the practice standards. To this end, sampling is designed to maximize the number of staff who experience a case review and receive feedback. Specialized in-home and adoption units are included in the sample. Juvenile justice and mental health cases are not covered by this CQI Unit because these populations are not served by the State's child welfare agency.

The PI Manager oversees all case reviews. The PI Specialists submit a list of the cases in the sample that are selected for review and the PI Manager ensures the proper procedures were followed for selection. The PI Manager also regularly reviews a sample of completed review instruments, making sure that all instructions have been followed and all questions have been answered accurately.

Inter-rater reliability is primarily addressed during case review team meetings and through the case reviews performed by the PI Manager. Detailed instructions were reported as helpful to addressing inter-rater reliability, as well as Practice Improvement Unit meetings.

Feedback Meetings

Feedback meetings are conducted with staff. The process is flexible, to meet the needs of field staff. Detailed case specific feedback is often provided in an in-person meeting between the reviewer, the CPS specialist and the supervisor. The Assistant Program Manager and the Region's Program Manager may also join the team meeting. The group discusses questions, including: What worked well? What can we share with others? What kind of barriers did you run into (e.g. resources, policy)? Is additional training needed? These meetings also serve as an opportunity to identify systemic issues. Feedback may also be provided in a meeting attended by an entire field unit, and can focus on a single practice issue rather than the full detail of the reviewed case.

Data Analysis

At the central office level, data analysis is conducted by the Practice Improvement Manager and the Practice Improvement Evaluation Specialist. At the regional level, Regional Automation Liaisons (RALs) monitor and analyze data, and produce summary reports and charts for distribution and discussion among regional staff and stakeholders.

The PI Manager and PI Evaluation Specialist monitor the state's performance on the CFSR measures, using county level permanency composite profiles that are generated by the state. CFSR permanency data is analyzed at the region, county or child level using AFCARS files produced by the state monthly. The state's Business Intelligence dashboard and many electronic data reports with child level data are also available for analysis by Practice Improvement staff, RALs and regional administrators.

Arizona is a member of the University of Chicago's Chapin Hall Center for State Foster Care and Adoption Data. The Practice Improvement Manager has been trained in the Advanced Analytics course offered by Chapin Hall, and the state is increasingly using the Chapin Hall Data Center to analyze data on children served in out of home care.

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Colorado

The ARD completes reviews on Colorado's out-of-home cases, in-home cases, assessments and screened out referrals. Approximately 15,000 reviews are completed annually.

Out-of-Home Reviews

Reviews must be completed every six months for each child in out-of-home care. Each review includes a case file review and interviews. The ARD's Compliance Investigator II review case files, answers questions prior to the interview and determines areas to explore further during the face-to-face meeting. Interviews include anyone involved in the case, including: caseworkers, client managers, parents, guardian ad litem, attorneys, foster care providers, etc. The intent is to make sure everyone has an opportunity to provide perspective on the child's progress and to make sure that all are in agreement on any recommendations. See the following documents for more information on the out-of-home case review: [ARD Out of Home Instructions](#); [ARD Out of Home Instrument](#).

In-Home Reviews

The in-home review is completed in the State's ten largest counties once every six months, and annually for the remaining counties. A random sample is pulled from cases receiving in-home services that have had an open case for at least six months. Cases six months or older are chosen because the ARD wants to focus on areas where they can have the most impact. The ARD uses a 90% confidence level and 10% confidence interval to determine sample size and ensure the findings can be generalized to the entire population. This helps establish legitimacy in their reporting. These reviews consist of case file reads followed by a review of findings with the caseworker. The review with the caseworkers also serves as an opportunity for training and technical assistance. See the following documents for more information on the in-home case review: [ARD In Home Instructions](#); [ARD In Home Instrument](#).

Assessment Reviews

The ARD also reviews assessments, regardless of whether they move on to become an open case or close after assessment. Assessment reviews are completed in tandem with the in-home reviews. A random sample is pulled, using the same 90/10 confidence level and interval, from any assessments accepted in the past six months. The intent of this review is to examine the up front process, to determine if assessments are conducted thoroughly and sound decisions are being made. These reviews are also known as the ARD's Quality Assurance reviews. See the following documents for more information on the assessment case review: [ARD Assessment Instructions](#); [ARD Assessment Instrument](#).

Report out meetings are organized with each county within three weeks from the date of the in-home and assessment reviews. Staff from the ARD will meet with the county to walk through findings from all of the reviews. Counties are encouraged to bring their supervisors to these meetings, as they are the most informed about practice and are directly involved in seeing that changes are implemented. Additionally, prior to in-home and assessment reviews, entrance interviews are conducted with the County Director and supervisors to go over systemic level issues, including: changes in staffing,

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practice, programming, etc.

Screen Out Reviews

Screen out reviews are also conducted annually. A random sample is pulled, by county, from all referrals that were not accepted for assessment. The 90/10 confidence level and interval is used. County staff are invited to the ARD's offices to join ARD staff to review these cases. County staff review cases from other counties, in order to facilitate peer learning. Approximately 1,500 referrals are reviewed during this week long review, with 40+ county staff participating each year. All data is then kept at the central office and used to make reports for each county and for the State. The random sample allows ARD to make generalizations about practice in each County and the State as a whole.

Connecticut

There are two major qualitative reviews completed by the CQI Department: the Connecticut Comprehensive Outcome Review (CCOR) and the Administrative Case Reviews (ACRs). Additionally, the Office for Research & Evaluation Division conducts some ad hoc reviews.

Connecticut Comprehensive Outcome Review (CCOR)

The purpose of the CCOR is to develop a better understanding of case practice using qualitative data to identify strengths and areas needing improvement. A review of case records provides basic information relating to documentation and progress toward achieving case goals. Interviews with social workers, families, providers, and youth (when appropriate) provide additional information revealing a full view of what occurred and how decisions are made within a particular case. The CCOR is a replication of the Federal CFSR, measuring for 23 indicators and 7 outcomes. Prior to the review, an entry meeting is held with local management to discuss any additional items they are interested in reviewing. Additional sections are then added to the instrument as needed.

CCOR is headed by a team from the Office for Research & Evaluation. In addition to experienced reviewers from the Research & Evaluation team, regional staff (e.g. managers, supervisors) are recruited to review as well. Having experienced reviewers on site helps with inter-rater reliability. All reviewers receive training on the instrument prior to completing the review. Additionally, the Chief of QI and the ACR Program Director perform QA on each review team's results.

The team reviews four offices per year (each of the six regions contains two to three offices). In the last three years, the team was able to review all offices across the State.

Administrative Case Reviews (ACRs)

The ACR is described in the State's 2nd round CFSR as an "orderly and structured meeting in which all participants are engaged in discussion focused on the permanency planning needs of the child." The Statewide Assessment reports that an ACR is held every 180 days for each child in foster care. The individuals who must be invited to the ACR include DCF staff, service providers, the child's parents, the child (if age 12 or

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District of Columbia	<p>older), the child's foster parents or residential care caseworker, the parent's and child's counsel, and the child's guardian ad litem. A total of 16,000 - 17,000 cases are reviewed annually by independent reviewers recruited from the field.</p> <p>Reviewers read six months of narrative on each case and review for three indicators. At the close of the review, those involved in the case are invited to participate in a meeting to discuss the case plan, activities, goals and progress. Following this meeting, the case reviewer completes a report which is then fed into the reporting system and made available to regional office staff. Focus groups are also held in offices during the review period to better understand practice issues.</p> <p>The six regional managers are responsible for supervising ACR reviewers around the State. Managers will periodically pull cases to have each reviewer independently review the case and then pull reviewers together to discuss discrepancies in their findings.</p> <p>The District conducts several different qualitative reviews. Following are descriptions of the qualitative reviews pulled from the District's 2011 CQI Report.</p> <p>Quality Service Reviews</p> <p>The Quality Service Review (QSR) unit conducts formal case reviews of both CFSA and private agency cases based on movement toward permanency, teaming, the status of the child and the parent, and casework practice in general. QSR reviewers provide strength-based feedback to the social worker and his or her supervisor. The following procedural steps are included in the overall QSR process:</p> <ul style="list-style-type: none">• Identification of Next Steps: The social worker is the first and generally the last person that the review team speaks with regarding an individual case. Reviewers discuss the strengths they have identified in the case, any obstacles or challenges to permanency or case closure, and recommendations they might have regarding specific actions. Participants then identify and document next steps that they anticipate can be completed within 60 days.• Involvement of Program Managers: Educated in the QSR model and approach to case practice, Program Managers (PMs) take ownership for QSR results and for ensuring that the lessons learned from the review are implemented and next steps are pursued. PMs also present the results of the QSRs to CFSA management. This presentation reinforces the program's accountability of findings and allows PMs to conduct an open and balanced discussion of strengths and challenges with their peers. In addition, PMs are working with their counterparts in private agencies to identify an equivalent process that would allow private agency representatives to report out their own findings and results.• Special Population Review: CFSA expressly utilizes the QSRs to gain insight into the needs of specific populations served by CFSA while looking at common practice issues across the board. Two populations are identified to focus on during the current calendar year with approximately 30-35 case reviews for each population. Cases are reviewed within a four-month time span with two months in between for data recording and reporting. Follow-up meetings are
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convened 30-45 days post-QSR to include outcomes in both reports. The first population to be reviewed in this manner (youth ages 18 years and older) was selected in response to the Agency's ongoing efforts to address the permanency needs of our older youth and to allow an examination of the redesign of OYE with a particular focus on the transition planning process. A sample of 34 cases was selected from CFSA and private agencies for the reviews, which were completed over a six-month period. The team is currently developing both a written report and presentation regarding the findings. A second population of children ages 0-17 in out-of-home care will be drawn from private agencies and CFSA units who have not had a QSR in at least 12 months.

To ensure consistency in review processes, case stories and scores for each case reviewed are read and compared by the QSR supervisor and one other manager experienced in QSR. In cases where the stories are unclear or do not appear to support the ratings provided by the 14 reviewers, the reviewers are asked for clarification or further evidence. If the scores cannot be supported to the supervisor's satisfaction, the scores are amended accordingly. In further support of inter-rater reliability, the QSR supervisor holds Case Judging meetings with QSR specialists to review rating and to go over the issues identified in the interviews. These meetings include both the QSR and QA supervisors as well as the QSR Specialists so that they can collectively review the justifications for the scores applied to individual cases.

The QSR unit strives to review a sample of cases that is both large enough and diverse enough to be representative of the population of children being served by the Agency. Although the actual number is usually less significant than the quality and thoroughness of the reviews, in 2011 the QSR unit will review 65 cases.

At present, the District is using the QSR tool to examine only out-of-home cases. The unit has used the tool for in-home cases in the past.

In addition to the QSR unit, experienced staff representatives from other divisions within CFSA and outside agencies serve as lead QSR reviewers. Prospective candidates must have the following qualifications:

- Complete formal (two-day) QSR training.
- Shadow a case with a QSR specialist or other qualified lead reviewer.
- Perform lead reviewer functions on at least one case under the supervision and direction of a lead reviewer. This includes writing the case story, completing the rating instrument and rollup sheets, and guiding the interviews and feedback sessions with staff.
- Be recommended for the task by the lead reviewer. Reviewers who are not assessed to have sufficient judgment and understanding of the tool or the process will not be designated lead reviewers.

Some community members help with the review process as well. For example, one community member participates in internal child fatality meetings; another member

from the court monitor office sits in on reviews.

Child Fatality Reviews

The District has a two-tiered process for reviewing child fatalities. At the macro level, the citywide Child Fatality Review Committee (CFRC) identifies broad systemic issues that influence child fatalities. Its multidisciplinary review team is composed of representatives from the community, and from public and private agencies working in education, health and mental health, human services, jurisprudence, law enforcement, and public safety. The CFRC issues an annual report of citywide statistics and recommendations. At the micro level, District child-serving agencies conduct internal reviews of deaths of children known to them. (The definition of children “known” to CFSA for review includes families that were involved in at least one CPS investigation or had an open CFSA case within the four years preceding the child’s death.) CFSA’s internal Child Fatality Review (CFR) team includes Agency employees from several programs in addition to representatives from the CFRC, the Center for the Study of Social Policy, and the community.

The number of fatalities reviewed monthly depends upon the number of fatalities reported to CFSA. The reviews are multidisciplinary staffings and include information related to the deceased child and his or her family, as well as the fatality. The internal CFR process also includes a report prepared by a CFR specialist. Recommendations regarding policy, training, documentation, or other issues made by participants at the monthly CFR meetings are recorded and collected. In addition, the CFR staff identifies the exact wording and appropriate contact persons for individual recommendations during the review meetings themselves. Each subsequent staffing updates CFR committee members on responses that have been received to date and the status of any recommendations that are still pending. This process allows recommendations to be addressed immediately and provides the committee with regular communication on the Agency’s progress.

CFSA also publishes a report of trends, findings and recommendations about fatalities of children known to the Agency. This report builds upon the individual case reviews by analyzing the fatalities during a year as a whole, and identifying demographic trends, geographical factors, types of fatalities and comparisons with prior years. Due to the nature of the report, it is not completed until all internal reviews have been held. This report is made available to the Agency, community participants, members of the Citywide Child Fatality Review Committee, as well as the general public.

DC ChildStat

The DC ChildStat is a monthly, macro-level case review process that includes both written and verbal presentations on one case made by a team consisting of the caseworker, supervisor, PM (or equivalent) and other persons critical to the case. Cases are selected using a stratified random sampling process from all administrations and private agencies. The presentation is made to senior staff and is followed by a discussion of case practice issues, obstacles to permanency, systemic barriers and other related issues.

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Presentations also include a review of FACES data related to the private agency or CFSA division's caseload using Tableau software, allowing for a point-in-time look at practice. This process allows for a discussion of how cases are moved towards permanency, what kinds of obstacles are faced in working towards permanency, and how children are exiting care, among others. Results of QSRs are also included as part of the presentation. Further, Structured Progress Review reviewers are invited to provide additional insight into cases.

A written summary of each ChildStat meeting is prepared immediately following the meeting and distributed to senior management and presenters. QA also maintains a summary of themes arising from the DC ChildStat, e.g., themes related to policy, practice and training issues. These summaries serve both as a record of the discussions held and a reminder of the key issues and questions that have been raised.

The DC ChildStat process also serves as an ongoing needs assessment in the context of case practice, allowing reviewers and evaluators to identify trends (both positive and negative) and to measure progress along various case practice indicators.

Structured Progress Reviews

The Office of Structured Progress Reviews (OSPR) is staffed by licensed clinical social workers (SPR specialists) who perform regular case reviews of children in out-of-home care to evaluate the progress of each case, provide recommendations, and maintain a system of accountability, including the prescriptive requirements for planning, participating in, and following up on the review. The SPR is among the Agency's most effective quality assurance vehicles for assessing service and permanency planning for children who have been in care for at least 180 days.

Since the inception of the SPR format in 2010, over 95% of reviews have occurred within the required timeframe (i.e., each case is reviewed within 180 days of a child's removal and every 180 days thereafter). Six weeks prior to a review, the OSPR sends written notification to parents and involved family members of the scheduled SPR. The SPR support staff also telephone family participants with a reminder two to three days prior to the review date. All parents are invited to attend and contribute to the SPR except in cases where parental rights have been terminated, the parent or their whereabouts is unknown, the parent is incarcerated or otherwise physically unable to attend, or attendance is prevented by court order. In addition, SPRs specifically encourage engagement and participation of fathers in the process through the Fathers Participation Enhancement Project (FPEP).

CPS Grand Rounds

Every month, QA selects three CPS investigations that have been open for approximately 15 days. At least one of the case-specific investigations will involve a family that has been the subject of four or more allegations. CPS supervisors and PMs, as well as CFSA-contracted private agency supervisors, and representatives from other divisions within CFSA (including legal, training services, policy, and ongoing services) all participate in these case-specific discussions. The "rounds" take place with both QA and CPS staff reading all existing FACES documentation on the investigation and

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completing a structured tool that addresses both compliance (e.g., timeframes for contact and completion of safety assessments) and best practice issues (e.g., consideration of prior history and evidence of supervisory direction).

Written narratives summarizing the Grand Rounds discussions are documented immediately after the meeting and updated after case closure to indicate the extent to which the discussion influenced practice on the particular investigation. The written documents are shared with the meeting attendees as well as with the CPS administrator and the Deputy Directors for OPPPS and Agency Programs. QA staff will also conduct a secondary review of the case record in FACES and update their case review notes to reflect any responses to the recommendations, as well as highlight actions that have not been addressed. In addition, a collection of individual summaries is maintained electronically as well as a spreadsheet for tracking compliance with the recommendations. This information is shared with senior staff for follow-up to address outstanding recommendations.

CPS Investigations

CPS has implemented a number of measures (described individually below) to ensure the high quality of CFSA investigations, especially completion of investigations in accordance with mandated timeframes. Two measures that have been particularly useful are the 24/48 Hour Case Review and the 18-Day Case Review.

- The 24/48 Hour Review takes place during the weekly supervision meeting between the program managers (PMs) and their social work supervisors. During these meetings, the PM and supervisor review the CPS management reports to determine unit trends related to successes and shortfalls in meeting the 24/48 hour timeframe of documented contacts, including contact with the alleged child victim. The PM will then use the information in conjunction with a supervisor's verbal assessment to better guide decision-making for each unit and for individual referrals. PMs may also employ peer-to-peer learning, develop training sessions, and guide disciplinary measures, if necessary, to address trends that prevent timely and quality documentation.
- Led by the PM for each division, the 18-Day Review Meeting occurs three times a week and includes a presentation by the social work supervisors on each referral within their units identified as an investigation that is 18 days or older. These presentations include systemic or internal issues that may have impacted the quality of an investigation. The supervisors will also present any proposed plans to address the issues or describe any resolutions already implemented to mitigate issues. Guidance, support, and recommendations for achieving safe and timely closure of the investigation are given.

In 2010, the QA unit collaborated with the federal Court Monitor to develop and implement an evaluation tool for the investigation process. This evaluation occurs on a quarterly basis and includes a review of 40 randomly-selected investigations per year. The review sample is comprised of those investigations that were closed within the month prior to the review. Each investigation is evaluated on the quality of practice according to the information provided in the written case record. The evaluation

instrument is based largely on a tool used by the Court Monitor in previous CPS reviews to promote consistency in findings.

Multidisciplinary Team Consultations

In order to provide consultation and guidance to social workers, supervisors, and program managers who may be facing challenges with individual cases that have not been selected for other QA review processes, QA has implemented the option of voluntary multidisciplinary case consultations. These confidential meetings are available to both CFSA and private agency staff. The case consultations allow staff to present specific, current case issues (e.g., timely case closure) and to gain the benefit of recommendations and brainstorming from clinical, legal, medical and other professionals. QA staff complete a written summary of the consultation which is forwarded to participants. This document is also forwarded to the OPPPS Recommendations Committee to determine if the conditions of the case indicate a need for training, guidance, or policy development.

Florida

Florida's CQI system has three main components: the Quality Service Review (QSR), Quality of Practice Standards Review, and the Child Protective Investigations (CPI) Quality of Practice Standards Review.

Qualitative Service Review

The State's [QSR Protocol](#), developed in conjunction with Human Systems and Outcomes, Inc., describes the QSR process:

The Quality Service Review (QSR) is a powerful self-evaluation tool, helping child welfare and social services agencies assess the effectiveness of their practices and the interventions provided to the families they serve. It helps agencies learn how families are doing and which service functions are working. Because the QSRs are directly tied to the core components of individualized practice - engagement, assessment, planning, implementation, and results - each QSR measures the degree to which true individualized and participatory practice is occurring with each individual family being reviewed.

During the QSR, a trained review team reads case documentation and interviews all parties involved in the case, most importantly the family, to qualitatively assess two broad categories - family status and system performance/case work practice. Within these two categories there are specific areas of interest including child safety, stability and parent/caregiver functioning, engagement, and teaming.

These intensive reviews usually occur in a short time frame to get a "snapshot" of how the family and practice supporting them are doing. Once the review is completed, a debriefing is held with the supervisor and workers to give feedback and recommendations about the case. In addition, themes, strengths, and areas of improvement are shared with the partnership's governing body and/or self-evaluation work group. Finally, the review team writes a "family story" to document what is going well with the family and service delivery and practical steps for improving what is not going well. These stories can be aggregated for content analysis and be an excellent strategy for putting standing data reports in the Florida Safe Families Network (FSFN) into context.

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QSRs are performed quarterly by each lead agency. Two cases per CBC are reviewed each quarter. The Regional QA Manager reviews all QSR findings before the information can be input in the web portal.

Quality of Practice Standard Reviews

Each Quarter, the CBC lead agency QA manager assigns 15-25 cases for review to trained/certified QA specialists employed by the CBC. The reviewer uses the Quality of Practice Standards for Case Management to assess practice. To accomplish this, the Office of Child Welfare data unit provides an extract for each lead agency that lists all children who are eligible to be reviewed by permanency goal. The extract is pulled the first week of the month that precedes the beginning of a new quarter. The extract consists of all children who were service recipients during a defined selection period. All children are assigned to a CBC's sampling population based on the CBC assignment of the primary worker as of the sample date or the service recipient end date, whichever is earlier. Each quarter, the CBC QA manager identifies cases from the extract and assigns their required number of QPS reviews and an additional two (2) cases for a Quality Services Review (QSR).

The sample for QPS and QSR reviews includes an equal share of in-home service cases (non-judicial and judicial) and Out-of-Home service cases. After the initial stratification, the CBCs may choose to stratify their samples further if they need to focus their reviews in specific areas of local practice. Decisions to discard a randomly selected case from the sample list must be approved by the CBC QA manager, who must also document the basis for the decision as it relates to the discard criteria. CBCs may choose to draw additional cases for their own review purposes in any random, stratified or purposive manner. For example, if they want to do expanded reviews by subcontractor or other factors, they may select more cases from the extract.

CBC QA managers must track the cases reviewed from quarter to quarter, discarding duplicate cases from subsequent samples, and conduct various data analyses. The CBC QA managers will ensure the list of cases selected for the QSR is unduplicated and make another random selection if the same case is identified for both review processes.

In addition to the QPS and QSR reviews, the CBCs will also select 10 more cases in order to assess practice in an identified category using only the QPSs related to that category. For these cases, only the applicable QA standards will be applied.

- Quarter 1 – Psychotropic medications (Standards 36.5, 37.5, 46.6, 67, 72.2)
- Quarter 2 – Independent Living (Standards 44, 45, 46, 47, 58,59)
- Quarter 3 – Adoptions (Standards 42, 43)
- Quarter 4 – Assessments (Standards 5, 6, 7, 9)
- Quarter 4 - Education (Standards 45, 58, 59, 60)

Prior to the review of a selected case, the reviewer researches the Florida SACWIS to

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learn about the prior child welfare history in order to effectively assess current work. Once the CBC QA specialist completes a case file review and inputs the responses into the QA web-based tool, the specialist “staffs” or “debriefs” the review findings with the CBC QA manager who must concurrently assess the data for consistency and accuracy, providing quality control and inter-rater reliability.

Child Protective Investigations (CPI) Case Review

The State’s [CPI Guidelines for QA Review](#) describes the CPI process:

Regional Quality Assurance staff will conduct a qualitative review of one recently closed case per CPI Unit in every circuit within the region, each quarter. In addition, each region will randomly select one case per region in which the investigation case is currently open. The closed investigation cases for review must be randomly selected from the "Child Investigations Closed within the Last 30 Days" report. These reviews will include a combination of Florida Safe Families Network (FSFN) research and paper file reviews.

As reviews are scheduled, regional QA staff will need to be linked to a local CPI Unit (or administrative unit) in order to be given authorization to access criminal background checks from the Hotline. Regional QA Managers will work with local operations staff and security officers to ensure this is completed.

As the reviews are being completed, reviewers will rate the [Quality of Practice Standards for Child Protective Investigations](#) and input findings into the web-based portal. Reviewers should provide comments as necessary so external parties understand the rationale behind the ratings. After the review has been completed, reviewers will enter a Case Note in FSFN documenting the investigations case was reviewed and briefly summarize the findings.

In addition to review of recently closed cases, the regions will select one open investigation case for review each quarter. The open investigation case must be randomly selected from the FSFN Daily Report and be at least 20 days into the investigation, but no more than 30 days. The region may choose to select an open case within a specific circuit, or unit within the circuit, if deemed more effective in identifying local practice.

Reviewing an open investigation case requires an onsite visit, whether the review is conducted in the actual unit locale or elsewhere within the circuit. Reviewers will input a FSFN Case Note documenting the review occurred. If concerns were identified during the review of an open investigations case, those concerns should also be entered into a FSFN Case Note. In this case, QA Reviewers should inform the CPI and the CPI Supervisor that QA staff will follow the case to ensure all concerns have been addressed before closure. This process is intended to coach or mentor investigative staff, not to usurp the supervisor’s role or responsibility.

After each investigations case review is completed, the reviewer must schedule a debriefing session to discuss review findings. The debriefing must always include the CPI and the CPI Supervisor. Others can be invited at the Regions’ discretion.

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Debriefings should be conducted as soon as possible upon completing the review, preferably within 48 hours of completion. If there are any concerns or disputes over the findings, the QA reviewer and the supervisor are expected to resolve any differences within this debriefing setting.

Once the reviews are completed for each circuit, region QA staff will summarize the findings (circuit-wide) into four practice areas: Conducting Thorough Assessments; Observing and Interviewing Children, Parents, Others; Determining Maltreatments, Family Needs and Services; and, Planning for Safe Investigation Case Closure. In addition to the narrative analysis, the data findings should be provided in excel format provided by the Office of Child Welfare, as an attachment to the summaries.

Other Qualitative Reviews

For those counties with sheriff offices in charge of investigations, a peer review process is used to satisfy the QA requirement. These offices are allowed to maintain their own CPI reviews by statute.

Reviewer Staff

The private sector Community Based Care lead agencies are required by contract to have a QA division with dedicated QA staff. There are over ninety dedicated QA reviewers statewide. By reviewing cases from another agency, peer learning is able to take place among caseworkers. All QA reviewers must complete the State's quality assurance training within six months of being hired. New reviewers shadow veteran reviewers prior to the training.

Georgia

Internal CFSR

Each region in Georgia is reviewed every 18 months. The State has just gone from 17 to 15 regions and added on additional CQI staff, so this schedule may change in the future. They use a comprehensive review tool that mirrors the Federal CFSR instrument with additional elements added particular to Georgia. They have added questions specific to Family Team Meetings, safety resources, and other Georgia specific items. There is also an added data piece where they are looking not just at the quality of the review but also the integrity of the data in the SACWIS system. This data piece is done simultaneously with the case review but is a separate set of information.

A different section within the Office of Quality Management (OQM) pulls a random sampling of cases; they try to conduct sampling similar to the Federal CFSR. Within every region they read 12 Child Protective Services cases and 12 foster care or placement cases (along with any investigations or foster homes attached to those cases). To address inter-rater reliability and ensure consistency across reviews, they have a second level review and in some situations a third level review. The CFSR team within the OQM is responsible for conducting these reviews. Within the CFSR team there is a Unit Manager that reads the same cases the reviewers are reading, with the Program Director reading a sample. Interviews are conducted on every case with the caseworker, supervisor, and other stakeholders.

There is a debriefing on each and every case with the caseworker and supervisor. During these debriefings they may also bring in other caseworkers doing similar work

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so that they can also learn from the review. Individual debriefings are done on every case at the county level to try and transfer learning. Exit interviews are conducted for all counties with county leadership and an overall exit interview happens with the region leadership.

The reviewers are selected through an interview process and are required to have a minimum of 1 year Georgia-specific supervision experience. They also have to have strong foster care, child protective services, and adoption knowledge. Typically, they're able to hire staff that have been in the system for quite some time and have proven themselves in their field. Periodically, Federal staff have provided training to reviewers but generally they receive on the job training. There is a mentoring structure in place so that new hires may job shadow and work alongside an experienced reviewer for a minimum of six months. There are approximately 12 reviewers on the CFSR team.

Kenny A. Consent Decree

Georgia has two specific units within the OQM that are dedicated to conducting reviews specific to the consent decree. One unit conducts reviews specifically for the 31 outcomes involved in the decree and produces information for the Court Monitoring Report. There are approximately 10 reviewers on this team. The second unit, consisting of six reviewers, reads cases specifically for permanency, looking at children that have been in care at 9 months, 13 months, and 25 months to determine what else needs to happen to move them to permanency. Staff conducting these reviews also sit in on permanency roundtables. This is any ongoing review where they spend approximately three months reviewing the previous six month time period (January-June; July-December). Georgia also conducts targeted reviews every other period specific to things like diligent search and sibling placement.

Although case-specific interviews are not conducted for this review, some caseworkers and supervisors may be interviewed about current barriers or challenges. A random sampling is pulled by the Court Monitors (with the exception of maltreatment in care cases as those are all reviewed). Georgia State University read 1/3 of these reviews then come together with the reviewers to talk about where they are consistent, not consistent, etc. The requirements for these reviewers are the same for those on the CFSR Team, though they typically have to have a strong background in permanency.

Hawaii

Hawaii has several qualitative reviews, including: an internal CFSR, supervisory reviews, and need-based reviews.

- **CQI Review / Internal CFSR**

Following the 2003 CFSR, Hawaii had adopted the federal CFSR process for their in-state reviews. Following specific search criteria, the Department's Management Information and Compliance Unit pulls a random sample from each of Hawaii's eight sections (i.e. office). Prior to the review, the CQI Project staff review each case from the sample to ensure that the cases meet review criteria, including whether it has been open for an appropriate amount of time and that they have a mix of case types (e.g. investigations, post TPR, case management, etc.). Three Project staff attend each site review and use the federal CFSR review tool to look at cases over a four-day period.

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Each instrument is reviewed by at least two of the three reviewers, if not by all three. In addition to providing two to three levels of QA at the review site, the CQI Project addresses inter-rater reliability by reviewing one case annually as a team. The purpose of this review is to make sure that all staff are rating appropriately.

Interviews are scheduled by the Review and Data Specialist prior to the review week. At minimum, the CFSR includes an interview of the caseworker. Additionally, they reach out to guardian ad litem, service providers, resource caregivers, biological parents, and the child (if appropriate). If interviews are not possible, a new case is chosen for review.

Following the review week, the CQI Project staff go through all instruments again while writing up their reports. They have access to an electronic database that allows them to validate all findings. After all instruments have been reviewed, the Project Director presents all questions and concerns about the cases to the Section Administrator and Section Supervisors. The intent of this meeting is not only to teach and help improve the process, but also to make sure that any disagreement around the findings is settled prior to writing the final reports.

Reviewers are recruited from the community and DHS. The Review & Training Specialist provides one day of training the week prior to the review. DHS staff—even those who are not reviewing—often review these trainings. All reviewers must have a minimum of a Bachelor's Degree and must be a professional in the field. New reviewers are teamed with veteran reviewers in order to improve inter-rater reliability. As a result of challenges in recruiting, the State requires that contracted agencies provide staff to review in their agency's geographic location.

Supervisory Reviews

Supervisory reviews were developed during Hawaii's first federal PIP. Each worker has one case randomly selected. The worker and supervisor use a tool to review the case together. This provides both an opportunity for training and supervision of the worker.

Need-based Reviews

In addition to the CFSR and Supervisory Reviews, the State also conducts qualitative reviews on an as-needed basis. For example, the State has just completed a review of threatened harm at intake, investigation, and case management. The State worked with the National Resource Center for Child Protective Services to create a review tool. A random selection of cases were reviewed and then results were shared with section staff.

Roundtables

A few years ago, the State teamed up with Casey Family Programs to create a Roundtable, modeled after Georgia's. Cases representing a certain age group without permanency plans were selected and reviewed for Permanency Roundtables. For Early Permanency Roundtables, the State looked at cases with children in foster care 3-8 months. Along with a consultant from Casey, a master practitioner (ie. DHS Supervisor or the CQI Project Director), former foster youth, cultural experts and others met with

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Idaho

caseworkers and supervisors to discuss what was working well, what should be happening on a case, and some strategies for achieving permanency. This program was time limited; however, the State plans to develop a case consultation process similar to the Roundtable model as part of their PIP.

The primary component of Idaho's CQI plan is a regional case review. Each regional review consists of 15 randomly selected cases, consisting of in-home and out-of-home cases. In an attempt to gather a sample that represents the entire region, the cases chosen for review are stratified by field office according to the number of in-home and out-of-home cases open in that field office. Reviews are completed twice per year (following change to hub system, may increase to 3x per year for the largest hub).

The CQI instrument is adapted from the federal CFSR and includes safety, permanency and well-being measures. Targeted case reviews have been completed in the past, including stability for foster care, ICWA, re-entry. The State is currently formalizing a review for older youth because the sample size does not collect enough older youth cases.

Interviews are conducted with the social worker, supervisor, foster parents, children/youth, parents and others. Qualitative information from these interviews is used in the final report.

Reviews are completed by Level I and Level II reviewers. Level I reviewers are teamed in pairs and typically review two cases in a three to four day period. These reviews are then turned over to Level II reviewers (also teamed in pairs). Level I and II reviewers then trade notes back and forth until both parties feel satisfied that each item has been measured correctly. If a reviewer is having difficulty fitting a case into the instrument, reviewers will discuss the case with one another until they feel they have found the most appropriate rating for the case.

When all case reviews are completed, the review team will enter the data from the summaries onto an Excel spreadsheet so that results will be available immediately. They will also review and summarize the Strengths, Areas Needing Improvement, Systemic and Training Issues identified by the reviewers. Case reviewers will provide feedback to the social worker whose case has been reviewed together with the worker's supervisor.

An exit meeting is held during which the regional Chief of Social Work presents a summary of findings to the group including identified strengths, systemic issues, areas needing improvement and training issues. All regional staff including supervisory and management staff, case reviewers when possible, second level reviewers and anyone else who may be interested should attend.

The regional management team also meets to review the results, including the practice strengths, ANI's, and systemic issues as a group. All together, this information should lead to a discussion of improvement planning.

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Level I reviewers are pulled from a broad range of areas in the State; they include: frontline workers, community partners, university partners, CASA workers, guardian ad litem, Keep Children Safe panel members, Citizen Review Panel members, imbedded trainers, etc. In addition to the mandatory introductory training ([CQI Reviewer Training Power Point](#)), all Level I reviewers receive on-site training from Level II reviewers, following what is described as an apprentice-like model. Level II reviewers are typically senior clinical staff from central office. The specific training given to Level I reviewers and the high level of expertise of Level II reviewers helps to address inter-rater reliability in the State. Additional training is provided on an as-needed basis for Chiefs of Social Work, regional review teams, and Level I and II reviewers.

Illinois

Outcome Enhancement Review (OER)

The OER in Illinois mirrors the federal CFSR review. The tool is comprehensive and has been customized to Illinois' policies and practices, so contains additional elements. Every six months 66 cases are reviewed Statewide. Data from these reviews is used to monitor the State's PIP progress. A random sampling of cases is selected, though it is pre-determined and stratified based on what they have included in their PIP measurement plan. Because they have a heavily privatized system, they adjust their sample accordingly (i.e. by pulling more foster care cases from the private sector than DCFS managed cases).

Case specific interviews are conducted for each review with the child, parent, caretaker, caseworker, and any other involved stakeholders (GALs, CASAs, service providers, etc.). Inter-rater reliability is addressed for these reviews. There is a first look at the case using SACWIS before the interviews are conducted, and reviewers meet with the team leader all throughout the process. These reviews are then looked at centrally.

The regional CQI staff are responsible for the oversight of these reviews, making sure that there is fidelity and integrity to the process. They also ensure that staff are adhering to what is in their Regional Quality Improvement Plans (and that it is consistent with what's in the Statewide PIP).

Agency Performance Team (APT) Reviews

Illinois has a highly privatized child welfare system. They have a performance based contracting system in place so private agencies are required to hit specific targets each year. The QA Division and Monitoring Division are responsible for conducting Agency Performance Team Reviews. The Monitoring Division reviews private sector cases while the QA Division reviews DCFS managed cases. Although DCFS cases aren't a part of performance contracting, Illinois is interested in looking at the system as a whole. For the purpose of the APT review, DCFS is treated as a private agency so their performance can be matched up with that of the private sector. The same tools are used to review both private agency and DCFS cases and all of the information is entered into a database that then enables them to rank the DCFS agency against the private agencies. No interviews are conducted for these reviews.

The APT reviews are going to be scaled down somewhat so more of an emphasis can

be placed on ensuring inter-rater reliability. Currently, the Deputy Director and Deputy Director of Quality Assurance work closely with one another to provide oversight and administration on this process.

Peer Reviews

Peer reviews are conducted on a quarterly basis. Three different review tools are used: one for investigation, one for in-tact families, and one for foster care. Both placement and permanency related practices are looked at (if there is a goal for adoption that work is also included). Regions are required to review 10% of their cases in each of those specialties over the course of a year (or 2.5% of cases on a quarterly basis). The regional CQI staff pull the random sampling for these cases. The Peer Review Committees in each of the regions then work out the details to get all cases reviewed. Validations are in place to ensure inter-rater reliability.

Consent Decree Review

The consent decree in Illinois focuses on sibling placement and visitation. These reviews are conducted by four QA Division staff using a standardized tool on a daily. Every agency has to be reviewed on an annual basis. Exit conferences are conducted based on the findings of these reviews, and TA and training is provided if staff are not clear on what is required of them. They've seen a drastic improvement in this area.

Specialized Reviews

The Field Review Unit generally takes the lead on any specialized reviews. For instance, right now they're looking at a certain area of the State that has a high number of pending investigations with complaints coming from the field that they're not staffed properly. They're in stage two of this lengthy review process. In addition to case reviews, they're surveying all staff in terms of how they feel about the supervision they're receiving and conducting a workload analysis. Following the first stage of this review they had given this particular area time to implement an action plan. They're now doing a second round of reviews.

Indiana

Quality Service Reviews (QSRs)

The [QSR Protocol](#) uses a thorough case review method and practice appraisal process to assess: (1) how children and their families are benefiting from services received; and (2) how well locally coordinated services are working for children and families. QSRs are conducted on a regional basis, one region reviewed per month with the exceptions of the months of August and November (ten reviews conducted per year). A total of 20 cases and four assessments are reviewed in each region, with the exception of 60 cases and 12 assessments are pulled in the State's two largest regions, and 30 cases and six assessments are pulled in the third largest region. The Office of Data Management pulls a random sample reflective of the region's population of cases. The sample selection should be distributed to reflect the population in the following areas: age of child; type of placement; case type; and length of time in care.

The QSR tool is used for assessment and ongoing cases to measure performance on 22 indicators in three areas: Child Status Indicators; Parent/Caregiver Status Indicators; System Performance Indicators. In the past, the Performance & Quality Improvement

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(PQI) Unit has completed targeted reviews for regions requesting them on high profile cases. The Unit expects that the use of targeted reviews for assessment and stalled cases will increase in the next round of QSRs.

Qualified reviewers are teamed with reviewers-in-training and each team is assigned one case per site review. To become a qualified reviewer one must:

1. Complete a two-day New Reviewer (protocol) training;
2. Shadow a Lead/Mentor Reviewer for one (1) case in a QSR;
3. Participate in two (2) QSRs as a Lead Reviewer in Training;
4. Complete one (1) day New Mentor training; and
5. Participate as a Mentor Reviewer.

New reviewers must have received the State's practice model training. Reviewers are hand-selected and must receive permission from the Regional Manager and/or management staff to become a qualified reviewer. The PQI Unit relies on the regional and management staff to screen reviewers for appropriateness.

To address inter-rater reliability, the PQI Unit facilitates the mini-rounds (discussed later), during which reviewers report out on their assigned case and their scores. The PQI staff checks to ensure that the scores align with the reviewers' justifications. Reviewers also fill out workbooks which are reviewed by PQI staff. If discrepancies are identified, the reviewer team is contacted and the scoring is discussed. The PQI Unit also periodically sends out cases for teams across the State to score. If any outliers are found, the Unit will contact those reviewers and discuss the case scoring with them. Additionally, the PQI staff are available upon request to help reviewer teams with scoring.

The PQI Analysts are responsible for organizing and facilitating the onsite review. There is a 16-week preparation period (See [QSR 16-Week Preparation Checklist](#)) prior to each review during which family case managers must gather information on their pulled case and schedule interviews with key stakeholders (i.e. relatives, resource parents, teachers, CASAs, providers). Three to four weeks prior to the review, the PQI staff will contact each case manager to review case preparation progress, address any questions they may have and finalize the review schedule. The review week includes the following steps (See [QSR Review Week](#) and [QSR Regional Orientation](#) for sample schedule and overview of process):

1. The Mentor Reviewer and the reviewer-in-training will review the file and meet with the assigned Family Case Manager (FCM). The status of the case will be checked in comparison to the information initially provided. The reviewers may request at any time that additional interviews be scheduled during the review process;
2. Interviews are completed;
3. Each review team will provide feedback Wednesday afternoon with the assigned FCM and/or Supervisor. After this debriefing, review teams will present to other review team members the reviewed cases, and determine

- common trends across case findings in what is known as the “mini-round”;
4. The Regional Service Council (RSC) meeting will be open to the regional staff under review and the regional stakeholders. There will be a presentation including trending data from the region’s previous reviews and analysis of the preliminary data collected during the regional review. Those in attendance will be asked to participate in the discussion over the results of the review and asked to focus their suggestions on how to improve overall system performance in areas where the regional scores reflect concerted action needed. During the RSC meeting, the region will select one indicator that they would like to work on for the subsequent 18 months;
 5. Lastly, the Regional Manager will write their plan for improving the Indicator and send it to the Deputy Directors for feedback and assistance in accomplishing their plans. Deputy Directors support the regional plans through completing action steps related to the requests made by the Regional Manager. For example, if the region feels that policy is impeding their process, they may ask the Deputy Director of Practice Support with oversight over Policy to change or write new policy around that issue.
 6. Following the QSR process, the PQI staff will track the progress the Deputy Director has made toward the completing the request and report it back to the Regional Manager. Every six months, Regional Managers will meet to update their peers on region’s progress related to their chosen indicator.

Quality Assurance Reviews (QARs) & Reflective Practice Surveys (RPSs)

The QAR provides an objective analysis of the Indiana Child Welfare System by evaluating systemic factors in each Department of Child Services (DCS) local office by identifying strengths and needs to ensure compliance with: federal and state laws, regulations, policies, and social work best practice. The DCS local office will conduct the QAR on a quarterly basis in conjunction with the RPS. Cases pulled for QAR will be randomly selected by the Office of Data Management.

The Supervisor will have one case pulled for each Family Case Manager (FCM) assigned to their unit. The Supervisor will:

1. Review the hard copy case file;
2. Review the case in the Indiana Child Welfare Information System (ICWIS);
3. Score each case using the appropriate form on the QAR SharePoint website; and
4. Submit the form electronically through the QAR SharePoint website.

The State is moving toward adjusting the QAR tool to strictly look at computer generated answers so that supervisors can easily pull the quantitative information and then move on to the qualitative work.

The [RPS tool](#) provides an analysis of case management services by identifying the strengths and needs of the family, as well as, those of the FCM. The RPS tool uses field observation and a FCM interview to review cases in order to evaluate the FCM’s practice skills. RPS will be completed quarterly in conjunction with the QAR.

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Only one case will be selected per FCM for the QAR and RPS for an overall comprehensive assessment. The Supervisor will:

1. Shadow the FCM on a home visit for the selected case;
2. Interview the FCM after the home visit using the RPS Indicator questions;
3. Score the case using information obtained from the field observation and FCM interview;
4. Provide feedback to the FCM.
5. Develop and submit a trends report summary to the DCS Local Office Director.
6. The DCS Local Office Director will submit a list of county trends to the Regional Manager.
7. The Regional Manager incorporates his regions plan for improvement of a select area into a report for the Deputy Director of Field Operation.

The PQI Unit is in the process of developing a QAR and RPS tool for the Institutional Child Protection Unit. At this time, the State is using the existing QAR and RPS tools for assigned assessments as their starting point and researching other State's compliance and quality review processes for ICPS units.

Hotline Quality Assurance Reviews

DCS researched Hotline QAR processes used in other child welfare organizations across the country to develop the current process. The objective is to ensure that the review identified strengths and areas that need specific attention in order to further strengthen the system and remain in compliance with federal and state laws, regulations, policies, and social work best practices.

Hotline: Intake QAR

PQI developed a computerized survey to assist in evaluating the intake reports to ensure that the Intake Specialists (IS) are following policies and procedures when gathering information from the report source and when documenting the information obtained. Specifically, the survey is designed to determine if the following areas are being addressed by the Hotline:

- Child and worker safety issues,
- The maximum amount of information about the child, family, and allegations are gathered by the IS from the report source,
- Adherence to the standards set within the Hotline protocols,
- Consistency in decision making is maintained by the Hotline.

Additionally, the survey is used to identify systemic trends.

After identifying an accepted margin of error of +/- 5%, a statistically significant, three month quarterly sample size was calculated based on the number of intake reports over a 12 month period. The quarterly sample size was obtained by dividing the calculated yearly sample size by 12, totaling 200 reports pulled. It was determined that

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the randomly pulled intakes would reliably represent the total annual number of intakes with a 95% level of confidence. Each quarter the randomly pulled intakes are reviewed by the QAR team.

The Hotline QAR team is composed of approximately 60 reviewers who are management level staff; supervisors, directors, regional managers, and an attorney. The reviewers supply third party oversight and accountability to the process.

Two hundred randomly pulled intakes are selected for each review. Every quarter each reviewer is assigned three (3) to four (4) intakes along with the correlating phone recording to evaluate the report using the standardized Hotline QAR tool. Responses are entered into a computerized survey for tracking and data assessment purposes.

After all of the surveys have been completed, a debrief phone call is conducted with the reviewers to discuss any patterns that they may have noticed with the reports. Reviewers also identify the strengths and areas that need specific attention in order to further strengthen the Hotline process.

Hotline: Screen-Out QAR

This review ensures that specific strengths and areas that need attention are identified in order to further strengthen the system and remain in compliance with federal and state laws, regulations, policies, and social work best practices are recognized.

A standardized set of questions, along with the references to the related DCS policies, are used during each Screen-Out QAR review. Participants evaluate each intake in the following areas:

- Specific reasons for screening out the report were documented by the Hotline Intake Specialist.
- The intake report was screened-out by Hotline, and the Screen-Out Review Committee confirmed the decision to screen-out the report was appropriate.
- The allegations in the report were solely of a criminal nature, and the report was referred to law enforcement.
- The intake report was screened-out, and an Information and Referral was made for the family when appropriate.
- There is no concern that this is a high risk case and immediate action is not needed.
- There are no overall safety or future maltreatment concerns about this case.
- The intake was screened-out by the Regional Manager after assignment and the committee decision is to reassign for assessment

After identifying an accepted margin of error of +/- 5%, a statistically significant, weekly sample size was calculated based on the number of screen-outs over a 12 month period. The monthly sample size was obtained by dividing the calculated yearly sample size by 12, totaling 31 reports being pulled per week. It was determined that the randomly pulled screen-outs would reliably represent the total annual number of screen-outs with a 95% level of confidence.

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The screen-out QAR process consists of a weekly random pull and review of the selected approved screen-outs. Each screen-out is reviewed for compliance with state and federal statutes as well as for best practice.

The screen-out review committee was established to review the randomly pulled screen-outs. The participants of the review committee will include the following eight (8) DCS representatives: Regional Manager; Local Office Director; Local Child Protection Team Member; (2) Local Office Supervisors; Local Office Attorney; Practice Support staff; and a Hotline Supervisor. This committee is an additional step in the agency's quality assurance process and began with the roll-out of the Hotline. The screen-out review committee will:

1. Meet weekly on Monday, unless there is a designated state holiday, in which case they will meet on Tuesday.
2. Received the selected reports, along with any prior DCS history for the families the Friday before the meeting.
3. Review the randomly pulled reports.
4. Review all screened out child fatality and near-fatality reports.
5. Discuss each report individually and address any questions regarding the reports.
6. Verbally vote on whether to screen a report back in if there are any objections to that report being screened-out.
7. Decide if a referral for community services was appropriate and completed for the family.

If there is concern that a screened-out report may need to be screened back in to be assessed, it is put to a vote. A majority vote is required to assign the report for assessment. Additionally, in the event of a split vote, the committee consults a Field Operations Executive Manager, who casts the deciding vote for the screened-out report in question.

The Hotline is about to institute a standardized decision making tool to improve consistency and adherence to formalized protocols. The staff will have select identified protocol section as justification for assigning a report for assessment. The SDM tool will required the IS to select the correct justification on the protocol for assigning the report and an initiation timeframe or provide a written explanation for assignment when the allegation does not meet a specific protocol. Adherence to the protocol design will improve consistency in assigned reports and screen outs.

Iowa

Iowa completes Case Readings for CFSR monitoring on a quarterly basis. Cases are stratified across five geographic service areas and sampled from the previous twelve months. Reviews are completed using a group of five or six Quality Assurance and Improvement (QA&I) Unit staff. These staff read cases, interview, complete second level reviews, and provide feedback. Findings are recorded in an electronic data set which mirrors the Federal review tool. Targeted reviews are completed on an as needed basis.

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Interviews are not completed as part of the Case Reading process. Primarily because of resources, the State has adopted a philosophy that their touch be as light as possible. Staff are contacted via phone to fill in any blanks in the case documentation. Though it's not required, approximately 80% of cases involve staff follow-up. Additionally, the impact of the interviews on scoring is monitored.

Inter-rater reliability is addressed by having an experienced reviewer sit in on all reviews to provide clarification and perform the 2nd level review. An analysis of findings is also completed using SPSS to look for trends in reviewers' findings that may look different from the universe of cases they review. During the first round CFSR, social work supervisors were hired as reviewers, however the State stopped that practice due to major inter-rater reliability issues. If supervisors are interested in the process, the QA&I Unit will teach them the principles and dynamics of the review.

Kansas

Kansas' [Performance Management](#) policy and [Case Read Methodology](#) documents describe the State's case read process:

Child and Family Services (CFS) has qualitative case read instruments for programs of intake and assessment, adoption assistance, AFCARS, and in home and out of home services. Case read instruments are utilized to review a sample of cases each quarter in each of the SRS regions. Cases are reviewed by Social and Rehabilitation Services (SRS) case readers for reliability, and as appropriate quality improvement staff from the Child Welfare Case Management Providers in each region. Questions in the instruments include replicates of the CFSR On Site Review Instrument and Kansas compliance procedures. Program services case reads focus on the timeliness and accuracy of service documentation and AFCARS case reads focus on the accuracy of FACTS (Kansas' SACWIS system) data. Additional targeted case reads are conducted as required for policy compliance or performance improvement projects.

The case read sample for each program is derived from the respective case population that has been active during the last three months in a twelve month period under review. A "Stratified Random Sample" strategy is utilized to establish the sample size. The statewide population is broken out by SRS Region. The number of cases in the sample for each Region is proportionate to the number of cases in the total population for each Region. Cases are assigned a random ID number and randomly selected until the correct percentage for each Region is achieved. The number of cases in the sample is set at a level sufficient to maintain statewide statistical validity. This level is established by consulting a table of recommended sample sizes from the SRS Office of Strategic Performance Management.

Following completion of the case reviews, readers enter their findings into a local data application. Tables are then sent to central office where the Performance Improvement (PI) Coordinator/Manager aggregates them into a central reporting application. Results are posted to a secure website and regions/contracted providers are able to access this data and report out.

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Data are analyzed to determine the performance of existing processes, and to identify opportunities for improvement. Outcomes are reviewed by the State and Regional Performance Management Groups. Opportunities for improvement will range from those that are systemic or statewide to those that are specific to SRS Regions, Child Welfare Case Management Providers or individual staff. Systemic opportunities shall be addressed and managed by the State PM staff and specific opportunities shall be addressed and managed by the SRS Regions and Child Welfare Case Management Providers.

The State PM Group reviews feedback from case read experts regarding case reader inconsistencies and supports follow-up discussion/training activities for case readers. Review meetings are attended by case read experts, supervisors, field staff and provider staff. The purpose of the meetings is to clarify for all involved the requirements contained in each case read instrument, the work necessary to satisfy those requirements, and the documentation required to demonstrate that the work was provided in a timely fashion. The State also produces reports which show comparisons between case readers statewide. This allows the State PM Group to address those readers falling outside the bell curve (either too lenient or too severe in their ratings).

The case read protocols do not include an interview component, however, the State is actively pursuing the addition of interviews to their PI structure.

The [Administrative Reviews of Child Placing Agencies](#) policy describes the administrative reviews process:

Child placing agencies are monitored through annual administrative site visits with the family preservation and foster care contractors. Two weeks prior to an annual site visit the provider shall send CFS program staff a list of employees by category and a list of the foster/adoptive homes sponsored by the provider. CFS will randomly select 15 employees and 15 resource homes for review. Five of the 15 resource homes will be homes approved for adoption. Specific information regarding each child placed with the foster family during the period under review shall be included in the file. One week prior to the site visit the three samples to be reviewed will be sent to the provider. The SRS review team is comprised of CFS program staff and SRS regional staff. On the day of the site visit the Provider shall make the file samples and documents required and referenced above available to the SRS review team.

CFS program staff shall provide technical assistance for compliance issues related to the family preservation and/or foster care contracts and provide a written report. Program improvement activities for securing compliance shall be completed within 30 days. The site visit report shall be maintained by program staff in CFS, forwarded to the provider, Kansas Department of Health & Environment, and the SRS Regional Office who maintains the provider agreement.

Kentucky

Kentucky's [CQI State Plan](#) describes the State's qualitative case review system, CQI-CARES:

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Case reviews in Protection and Permanency are completed on-line. The CQI-CARES (Case Automated Review and Evaluation System) web-based data entry site includes separate review tools for various types of cases as follows:

- CPS Intake and Investigation
- CPS Ongoing and Assessment
- CPS Case Planning
- CPS Out of Home Care
- CPS Status
- CPS Foster and Adoptive Resource Home

A random selection of cases is generated on or before the 5th of each month. The cases are automatically loaded in the CQI-CARES system for review. When the supervisor logs on, the cases for review are visible. The forms for each case review can be printed from the CQI-CARES if desired; however, the review is most efficiently completed with data directly entered into CQI-CARES. Summary reports will be immediately available to the Family Services Office Supervisor (FSOS) to track and monitor trends within their team.

Supervisor Review:

- Each month, supervisors review (4) cases/children in the CQI-CARES system.
- Supervisors begin the reviews and select the elements of the case for review (e.g., investigation or out of home care) by the 12th of the month.
- Supervisors complete the reviews by the last day of the month.
- The FSOS coaches and mentors the case managers or the team to discuss strengths, weakness and any corrective actions.

Regional Review:

- Regional reviewers complete 18 reviews per region each month in CQI-CARES.
- Regional reviews are completed by the end of the month following the initial random pull.

Central Office Review:

- Central office (CO) reviews 32 cases each month in CQI-CARES.
- CO reviews are completed by the end of the second month after the initial random pull.

CQI Specialists play an integral part of the CQI-CARES review process, including being responsible for sending out lists of cases to supervisors, tracking the completion of reviews, and gathering and inputting data into the central data system. By virtue of their positions, reviewers at the local, regional and state level have met the qualifications for reviewing cases. There are no additional qualifications for reviewers in terms of education or experience.

CQI-CARES reviews measure safety, permanency and well-being indicators, as well as some targeted indicators. Interviews are not completed as part of the process; CQI-

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CARES is primarily a paper review.

To address inter-rater reliability, the State hosts periodic trainings on the case review tool, primarily with frontline supervisors. CQI Specialists provide technical assistance to local offices to improve reliability among reviewers. Central Office also provides scoring guide instruments to assist case reviewers with answering questions in a consistent manner and to help guide reviewers with the case review tool. This system is integrated into the CQI process as the data is also used to monitor CFSR/PIP measures (e.g., to guide staff in focusing on areas needing improvement, strengths, progress over time, to assist with meeting agency/program goals and outcomes, etc.).

Maine

Internal CFSR Review

In support of the State Program Improvement Plan (PIP), Maine conducts a comprehensive internal CFSR-style review. Utilizing the full 23 item federal review instrument, Maine reviews one district per month. To conduct the reviews, the PQI team is paired among themselves by the Manager and the district-based PQI Specialist is paired up with at least one district staff member for one of the cases being reviewed. This provides an opportunity for the local staff to become familiarized with how the State is evaluated by ACF while looking at cases within their own District. A total of 16 cases are reviewed for each district. Records are reviewed, and interviews are conducted with the caseworker and any other relevant stakeholders identified. As each case review is completed by the team, it is sent to the PQI Program Manager who does a QA check of the tools to look for inconsistencies and address inter-rater reliability. The district under review is sent a final report at the end of the month. Based on the findings, each district is expected to develop their own local PIP to address two or three key items that had come up as a challenge within the review. Part of the information from these reviews is what the State also uses for data measures within the State PIP, as they had identified several item specific measurements that were areas needing improvement. Based on these areas identified, sampling is done to ensure they conduct reviews that will provide information specific to these areas. For each district they look at four in-home service cases, four cases with a goal of OPPLA, six cases with a goal of reunification, and at least two cases with a goal of adoption.

Finding Reviews

The Performance and Quality Improvement (PQI) Unit conducts Finding Reviews when people that are substantiated for child abuse or neglect appeal the finding. Four people within the PQI Unit review the findings as assigned (so PQI staff may be reviewing for a District that they do not sit within). As part of this, the PQI Program Manager and four PQI staff conduct inter-rater reliability reviews by reviewing the same case and getting together to discuss the outcomes.

Item-focused Reviews

Maine has recently started conducting qualitative case reviews focused on five specific items that they identified as areas where they'd like to see more improvement. Each PQI Specialist will be looking at 20 cases a month, and will focus on five items within the CFSR review tool. Upon completion of the reviews the PQI specialist will have a meeting and interact with the casework supervisor, and possibly the caseworker, to go

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over the findings. It is anticipated that focusing on the selected items will provide district staff with real time reviews on practice versus only having that level of detail once a year through the district Me-CFSR event. The specific items selected were those identified by the Child Welfare Central Office Management Group in consultation with their federal partners and relate to the PIP measurements Maine must demonstrate improvement on during the course of the next year.

Needs-based Reviews

Other reviews are conducted within Maine based on District or State needs and interests. For instance, they're currently half way through their PIP, and conduct reviews based on action steps within this. Three times during their PIP period, the PQI Unit is responsible for conducting reviews on 20% of the Family Team Meetings that are being held in a particular month. A tool was developed by the Unit to look at these meetings and how they're engaging and collaborating with team members in each case. This information is shared with the Federal partners during the PIP Quarterly Report as well as the districts involved.

Level of Care Assessment

Level of care assessments are conducted on a monthly basis. All youth that are in foster care in regular foster homes are assessed annually to look at what their needs and services are. The PQI Unit is part of the team that conducts these assessments.

Collaborative Tribal Child Welfare Review

The Maine PQI Unit conducted a review two years ago in partnership with Tribal Child Welfare staff to review cases of children in State Foster Care. The Indian Child Welfare Act Workgroup, which is composed of state child welfare representatives and tribal child welfare representatives, developed the tool that lends itself to this review, and PQI Specialists were paired up with local Tribal Child Welfare staff to conduct the reviews. There are plans to repeat a collaborative review like this, depending upon available resources it may not be as comprehensive.

Michigan

The Division plans to develop separate quality assurance protocols for review of Child Protective Services (CPS) Intake and Investigation, CPS – on-going cases, foster care cases and American Indian cases. Additionally, targeted case reviews will be conducted to cover compliance-based items that the Department has flagged as important indicators of good child welfare practice (e.g. face to face contact, medicals, dentals, etc.). The information from the targeted case reviews will be used to feed and support the information gathered from the quality assurance reviews. The DCQI have explored a variety of QA tools currently used in other states and may utilize existing tools when they can be appropriately modified to meet the requirements of Michigan.

Direct service cases from local county offices and cases managed by private agencies will be reviewed. The quality assurance and improvement process will utilize interviews with a variety of stakeholders, while QA reviews will limit interviews to staff and caretakers only. The frequency of reviews is yet to be determined. The Division will assess their capacity for reviews for 2012. The Division will work with the Data Management Unit to sample cases. The sample will reflect the population in care (e.g.

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Minnesota

age, permanency goals, length of time in care, etc.). An oversight function for these reviews has not been established yet. In the past, managers performed secondary reviews on a random sample from each analyst. The Division may consider having two analysts review and participate in interviews for each case and then compare findings.

Minnesota conducts a Child and Family Service Review for county and tribal agencies. Minnesota's 2011 Annual Progress and Services Report describes the State CFSR process:

The Minnesota Child and Family Service Review (MnCFSR) identifies strengths and areas needing improvement in child welfare practice and systems, with an emphasis on partnering with counties and tribes to use the results of the review to plan for program improvements. The review examines delivery of child welfare services from two distinct, but complementary, perspectives:

- Systemic factors define the agency's capacity to provide services that support improved outcomes for children and families
- Outcomes of services look at the safety, permanency and well-being of children and families engaged in the county child welfare system.
-

The MnCFSR is intended to improve outcomes by promoting family-centered, community based and solution-focused interventions to strengthen parental capacity. It is a challenge to evaluate the impact of the child welfare system on children and families engaged in this system. It is further challenging to accomplish meaningful practice and systemic changes that will result in improved outcomes for children and families. The department's goal is to build on the work completed in the first round of MnCFSRs and use as a baseline to measure ongoing quality improvements in the child welfare system.

[MnCFSR Administrator Meeting Packet](#)
[MnCFSR Caseworker Meeting Packet](#)
[MnCFSR Onsite Instrument & Instructions](#)

Pre-review

During the first round of MnCFSRs, the self-assessment process allowed counties to identify systemic strengths and areas needing improvement, and provided a method to examine data related to safety, permanency and well-being performance. Issues raised in the self-assessment were further evaluated through the onsite case reviews or community stakeholder interviews. In addition, information from the county self-assessment was shared with other program areas at the department to inform plans for statewide training, technical assistance, practice guidance and policy development.

During the second round of MnCFSRs, counties and tribes review their initial self-assessment and, using that as a baseline, update their evaluation of core child welfare practices and systems. Counties and tribes are also asked to provide comment on strategies that contributed to improved practice and/or barriers encountered.

[Self Assessment Template \(Round 3\)](#)

Onsite Review Stage

Between 2003 and 2006, all MnCFSR onsite reviews were conducted using a team of peer reviewers to examine cases and assess the quality of services for children and families. In response to county agencies, a second review model was developed in the later part of 2006. In this model, department Quality Assurance staff review cases. Both models involve an intensive examination of a select number of cases representative of child welfare practice during a defined review period. During the second round, counties and tribes can choose from two models for their review. The review process remains an inspection of the case record, as well as three interviews with those involved with the cases, such as parents, caseworkers, and when appropriate, children. The number of cases remains the same, but a higher percentage (66 percent) will be placement cases. In addition, the case sample will be stratified to reflect agency work with older youth.

Smaller numbers of individual and focus group interviews are conducted with community stakeholders who have the knowledge and experience to describe and assess the county/tribe's child welfare system. Starting in 2009, written stakeholder surveys are sent out to all county/tribal licensed foster parents in preparation for the county/tribal review. Community stakeholder input provides the review with a broader perspective in the evaluation of systemic factors, and an agency's capacity for achieving safety, permanency and well-being outcomes. At the end of the onsite review week, Quality Assurance staff conduct an exit conference. The exit conference focuses on outcomes and themes learned through the review, less focused on details associated with the 23 performance items.

Post Review Stage

The onsite case review results in findings, or ratings, on the seven outcomes and 23 performance items as they apply to each case. Findings from all cases reviewed are combined with data on national standard indicators to obtain overall findings.

Reviews in the two most populated urban counties generally occur each year (Hennepin and Ramsey counties), the plan is to review 18-20 counties each year, with the review frequency based on the counties' overall child population.

The scope of the MnCFSR mimics the federal CFSR (safety, permanency and well-being). Upon completion of the current federal PIP, the State would like to broaden its design to potentially conduct targeted case reviews as well.

The [Administrator Meeting Packet](#) describes the case selection and sampling process:

The period under review begins 12 months prior to the selection of cases, and generally includes the 14 months prior to the commencement of the on-site review. Case selection is conducted one to two months prior to the on-site review. For example, if the onsite review is scheduled to begin on May 15th, the case selection will occur anywhere from March 15th to April 15th to allow the county ample time to

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prepare the case files for review and complete the case review schedules. When the case selection list is generated it includes a 12 month retroactive time period. The entire period under review includes this 12 month period in addition to the time between the case selection and the onsite review. At times, when the case selection list results in a very small sample the period under review may be expanded.

The case sample size is determined by the child population in the county and ranges from 9 to 21 cases. The case sample includes both cases where children are in out-of-home care, and cases where children remain in the home and are receiving child protection services. Two-thirds of the cases reviewed will be placement cases, and one-third will be in-home cases.

For out-of-home care cases (placement cases) the child must have been in placement for a minimum of 60 consecutive days during the period under review. In cases where more than one child in a family is placed in out-of-home care, the reviewers will identify just one child as the subject of the review.

Similarly, in cases where child protection services are being provided and the child(ren) remains in the home (in-home cases), the case will be selected only if 60 days of post assessment services were provided during the period under review. All children in the family are subjects of the review in an in-home case.

Case selection reports are generated by SSIS (Minnesota's SACWIS system) at the request of DHS Quality Assurance staff. The SSIS report of in-home cases includes all child protection cases that meet the above criteria. The SSIS report of placement cases includes placement cases/workgroups that meet the criteria described above from the following program areas: child protection, adoption/guardianship, children's mental health and child welfare (in some situations).

The case selection is accomplished by a random selection from each of the two reports. The case selection also represents a distribution of cases across all primary case workers, to the extent possible. In addition, DHS and counties can stratify the sample to ensure that the sample adequately reflects county and case demographics and/or characteristics, e.g. Indian Child Welfare cases or cases involving domestic violence.

A larger case sample than the number that is necessary for the review is selected from the SSIS reports. This enables the agency to have a primary case selection list, as well as a back-up case selection list to be used in certain circumstances.

Each of the placement and in-home case sample lists will be reviewed by the DHS site leader and the agency to determine that they reflect an accurate representation of in-home and placement cases. Cases may be eliminated from the case sample for the following reasons:

- If enough of the individuals to be interviewed in the case are either unavailable or completely unwilling to be interviewed that sufficient information cannot be

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obtained to complete the review instrument, or

- If the case was selected in error and did not meet the selection criteria.

In the event that a case is eliminated from the case sample the agency supervisor and DHS site leader will consult to determine an appropriate substitution case from the back-up list. The substituted case will represent the same efforts of distributing cases between in-home and placement cases, and distributed across primary case workers.

The [Administrator Meeting Packet](#) describes the selection and qualifications of reviewers:

The number of peer reviewers needed for a Minnesota Child and Family Service Review (MnCFSR) depends upon the number of cases being reviewed in a particular county/tribe. Peer reviewers will be paired in teams of two and each team will review one case on each of the 3 case review days during the on-site portion of the MnCFSR.

Recruitment of competent and committed peer reviewers is vital to the overall success of the MnCFSR process. The input of agency administration is essential in the selection and recruitment of the peer review team. Agency administrators should first determine how many agency staff will participate as peer reviewers. Second, administrators should consider if there are any community/tribal persons, involved in some capacity with the county child welfare system, who may be interested in participating in the MnCFSR. The next step is for the county to provide the names and email addresses of county staff and community persons willing to serve as peer reviewers to the DHS site leader. The site leader will recruit child welfare professionals from other county/tribal agencies and DHS to complete the peer review team.

The DHS site leader will contact each of the peer reviewers to discuss expectations for their participation in the review and provide information regarding dates and locations of review activities.

In addition to the number of peer reviewers needed, the agency is asked to designate one staff person as a back-up/substitute reviewer in the event that a confirmed peer reviewer is unable to participate.

Inter-rater reliability is addressed during the MnCFSRs. The QA staff act as consultants to the peer reviewers and are available as needed during the review week. When the QA staff are conducting the reviews themselves, they discuss data during and after the review process. While onsite, consultants meet daily to discuss review consistency and again at the end of the review week. The QA Unit meets monthly to debrief and share review findings with each other. This helps to keep all QA staff informed about what is happening throughout the State.

Additional Qualitative Reviews

Because Minnesota is state-supervised, county-administered, there are some counties that conduct their own internal case reviews. These internal processes, in general, originated as a part of Program Improvement Plan (PIP) work following a MnCFSR as a

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way for counties to monitor progress on PIP goals established following a MnCFSR. A number of counties have continued these processes after successful completion of their PIP. State QA staff provide technical assistance to local county agency review teams as requested.

New Mexico

Internal CFSR

New Mexico's primary quality assurance review mirrors the Federal CFSR process. One quality review is conducted every month. Counties to be reviewed are identified in advance; 12 counties are reviewed within one year. It's a comprehensive review that uses the same OSRI tool used during the Federal CFSR process. A random sample is used based on reports generated that list all children in care and children served through voluntary in-home services. They look at both foster care and in-home services cases.

Case review includes case-related participant interviews with the goal of having a minimum of five interviews conducted for each case. Interviews are conducted with the child if they are school aged, parents, foster parents, workers, and service providers.

Review debriefing is conducted in the same way as the Federal CFSR. They spend approximately twenty minutes per case during debriefing, with additional case consultation available with the Quality Assurance Manager on an as-needed basis. After the QA Manager reviews and approves the instruments they are sent to a contractor that is an expert in the child welfare CFSR reviews. This is done to ensure their ratings are consistent with Federal standards and expectations. The preliminary results of the review are provided to the County Office Manager and Regional Manager. The County Office Manager and/or Regional Manager present and discuss the results of the review with all office staff at the end of the review week. Results of the review are finalized and sent to various agency management staff typically within four weeks of the on-site review.

The QA Unit staff conducting the reviews are paired with county office staff peer reviewers. These peer reviewers are provided a six hour training prior to participating in any kind of review. This training covers both the CFSR Federal structure in terms of safety, well-being and permanency outcomes (how the outcomes are operationalized and the information that is used to determine conformity with those standards), as well as how to apply the review instrument to cases. They also review the entire QA process including what a review looks like and the results that are generated.

Specially Designated Reviews

The QA Unit will conduct specially designated qualitative reviews as needed. For example, they recently completed a review on a cohort of investigations that were conducted by the agency. They added to material pulled from the CFSR instrument to look at conformity and alliance with the State's practice model. Periodically, they will assign specific types of case reviews and activities to the QA Unit based upon needs or issues that arise within the agency. Interviews are conducted as part of this process.

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New York

New York conducts four qualitative compliance reviews: Ongoing Monitoring and Assessments, Safety and Permanency Assessments, Permanency Panels, and Voluntary Agency Reviews.

Ongoing Monitoring and Assessments (OMAs)

These reviews occur once every three years and look specifically at safety and risk in child protective cases. They look at the whole case investigation (timeliness and quality of the investigation, the assessments, and the decisions) and determine whether or not the county met the key components. Each county is reviewed once every three years. After each review, if there are any areas noted as needing improvement, the local DSS is notified and asked to create an action plan. Sampling for these reviews is safety-focused but randomly selected. To address inter-rater reliability, all reviewers use the same tool. The tool includes a number of regulation-based questions and goes through the continuum of what is expected in a case all the way up to the decision to close the case. A coordinator within New York's Monitoring Unit oversees the work done by all of the reviewers. All reviewers have a child welfare background, and caseworkers within local districts are encouraged to participate. Interviews are not conducted, but there is a team that works in partnership on these reviews between the local DSS and the State.

Safety and Permanency Assessments

These assessments review foster care cases once every three years. They're primarily done with the largest districts in New York only – those who have the highest percentage of children in foster care. The reviewers are the same as those conducting the OMA reviews.

Permanency Panels

Permanency panels look at additional information around permanency and are completed annually. Regional offices decide which counties will have a permanency panel review. There are seven categories identified, and usually three different categories are looked at during a panel. The panel identifies children who are in foster care and then conduct a review of the casework practice regarding obtaining permanency for that particular child. The State is looking to change how they currently conduct permanency panels to become more aligned with the practices being promoted by Casey Family Programs. They're working with Casey this year and will be doing something similar to their model. They identify children in foster care and look at their case from the first day they entered care up until the day they reviewed the case to determine why permanency hasn't been found for that particular child.

Authorized Residential Care Agency Reviews

These reviews, done with the residential care agencies in New York, are conducted solely by Regional Office Staff. These reviews are labor intensive and focus on just a couple of cases. They look at case records and conduct interviews with children and stakeholders. Reviewers go onsite to the agency and participate in interviews with the child and caseworker, look at the building itself, any incident reports, and conduct a medical background review.

Oklahoma

Internal CFSR

The [Overview of the Oklahoma CFSR](#) document provides detailed information on the CFSR process. Following is a general overview:

The purposes of the CFSR is to determine whether the outcomes in the domains of safety, permanency and well-being are being achieved in particular sites, and to examine the capacity of the agency to deliver services that support positive outcomes for children and families. Reviews are held quarterly, one review per Area each quarter. Information is gathered at three to four sites within each Area. Each CFSR will normally be conducted over the course of four consecutive days (normally Monday through Thursday).

The sample of cases reviewed at each site will normally include six CPS cases, two In-home cases and four Foster Care cases. During every review, case-specific information will be drawn on 36 to 48 children's cases (12 cases per site). The sample is selected from the universe of children being provided services by the site being reviewed, including children in foster care and children receiving services in their own homes. Over the course of a year, the sample in each Area will be stratified, as necessary, to assure inclusion in the reviews of children and families: with initial complaint dispositions of both assessments and investigations; and who receive both in-home and a representative array of out-of-home services.

Since interviews may not be authorized in all cases, a preliminary over-sample of clients receiving services will be drawn. While this preliminary sample will normally be approximately 25 at each site, the size may be increased, if necessary, to assure that all types of cases are represented in the samples included in a CFSR.

The team at each site will be comprised of at least four members, including a Children and Family Services Division (CFS) CQI staff that acts as site team leader, Child Welfare Services (CWS) staff who are not assigned to the site under review, and another member selected by the Area Office or County Director. One member of the site teams involved in each CFSR must be an external stakeholder.

The review process begins with the site team leader and other available team members meeting with the County Director, or designee, and any other staff the County Director chooses to have present for the purposes of: reviewing the goals of the process; confirming the review schedule; discussing the activities involved and resources required; and affirming the time of the exit conference. Each site leader convenes briefings, as needed, with site team members for the purposes of reviewing information collected to that point, resolving issues or concerns which have arisen, and adjusting the schedule as needed.

Reviewers will review cases by reading the paper file, reading the SACWIS file and interviewing key participants in the case including parents, children, placement providers, service providers and child welfare workers. The information gathered will be used to answer questions regarding the seven outcomes for each case. See the [Out of Home Instrument](#) for the CFSR instrument.

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The site review concludes with the site team leader, and other available team members, meeting with the County Director, or designee, and any other staff the County Director chooses to have present. The results of the site review are presented by the site team leader at this time.

The CFSR concludes with the review leader and other site team leaders meeting with the Area Director, or designee, and any other staff the Area Director chooses to have present. The results of the CFSR are presented in writing and discussed. Please refer to the document [Overview of the Oklahoma CFSR](#) for more detailed information on: conceptual framework of the CFSR; outcomes & systemic factors; scheduling training for site coordinators and team members; composition of and roles within teams; scheduling interviews.

To address inter-rater reliability, the review team meets following each review to discuss scoring, findings, inconsistencies and any contradictory information. To ensure consistency, the site lead (a CQI Unit staff member) is responsible for approving and entering all findings into the database. Additionally, the database is programmed to ensure that all scoring follows the standardized federal scoring method.

CFSR reviewers include Area staff, CFSD staff and Area stakeholders. Child Welfare Field Liaisons are required to be involved in one review per year, and Supervisors and CW Specialist IIIs must review every two years; otherwise, all reviewers are volunteers. Selection of reviewers is made by the Area Coordinator.

All field staff reviewers, by nature of their position, have received Core Academy and Level I Training, including the CFSR required training. One week prior to the review, all reviewers receive a three-hour training which covers the logistics and process of the review and instruction on the instrument. See the [Training – CFSR PowerPoint for an overview of the reviewer training](#).

Contracted Provider Reviews (CPRs)

The State's 2011 APSR describes the CPR process:

The CPR Team assesses performance of all contractors providing in-home and residential supports on a regular basis. Agency contractors (Therapeutic Foster Care, Community Residential Care, Specialized Community Homes, Infant and Maternity, and In-patient Psychiatric Services) are evaluated yearly by a team consisting of CQI staff and area facility liaisons. Reviews evaluate performance in the context of child need, rules, and contractual expectations. This process promotes an outcome based examination of practice related to safety, permanence, and well-being for a random sample of children served by the contracted agency. Any deficiencies posing risk to child safety are immediately addressed while follow up assures the resolution of other identified concerns within negotiated intervals of time. Contract provisions for a given service are uniform across the state as are procedures to evaluate conformance. It is anticipated that contract revisions will include provider commitment to promote the

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realization of CFSR outcomes for children and families.

The CPR Section has now increased the participation of the contractors during the review process, including them as internal reviewers. This has increased the ongoing collaboration with contractual service providers to assess programmatic issues and concerns. Regular meetings during the fiscal year are held to get feedback from contractors and to provide updated information.

Pennsylvania

Pennsylvania's CQI process will be using American Public Human Service's (APHSA) DAPIM™ model of quality improvement. APHSA's DAPIM™ model outlines five main steps: Define; Assess; Plan; Implement; and Monitor to facilitate and sustain change.

Pennsylvania is currently in Phase II of the CQI roll out. Phase I began in October 2010 and included six counties. Phase II began in 2011 with an additional five counties. Counties interested in joining the effort are required to submit a letter of interest and the Self-Assessment for Participation (see [Quality Service Review Process Manual: Appendix I](#)) to their identified OCYF Regional Director and CQI Project Managers. The purpose of the assessment is to evaluate agency readiness and to identify resources already in place within the county as well as those resources that will be needed to support the county's successful participation in the CQI effort. OCYF will make the final determination on selection of counties for the upcoming phase and schedule notification meetings with those selected. The notification meeting is designed to prepare the county for the QSR process (see [Quality Service Review Process Manual: Appendix 2b](#)). During roll out, the State offers support to the counties, including guidance on building local site lead teams. State Site Leads then partner with the local teams to provide support throughout the remainder of the process. The ultimate goal is for counties to begin using the QSR on an on-going basis. For example, Philadelphia County has been completing internal reviews on a bi-monthly schedule. These reviews are targeted at specific practice areas (e.g. medically fragile children) or service system areas.

Pennsylvania, through a data analysis vendor, established the QSR sampling process. The State uses a stratified sample of cases active within 90 days of the review (see pgs. 14-18 in the [Quality Service Review Process Manual](#) for a detailed description of the process).

Inter-rater reliability is addressed during on-site reviews and in training. All reviews are completed in pairs and overseen by State and Local Site Leads. The statewide QSR protocol guides reviewers in the evaluation of Child/Youth Safety, Permanence and Well-Being Indicators, Caregiving Indicators and Practice Performance Indicators. During the review, reviewers can compare findings with each other and call in the Site Lead as needed. A case debriefing is held for each onsite review, during which the review teams present their findings and Site Leads and other reviewers ask questions about inconsistencies. Site Leads also complete a crosswalk of their reviewers' cases, comparing their qualitative written case review summaries with the indicator ratings. If there are specific sections of the protocol that are causing many reviewers confusion, CWRC will work to strengthen the training around these areas.

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QSR reviewers are recruited from across the State. Particularly, they target key stakeholder groups, including: County Children and Youth Agency (CCYA) staff, regional OCYF staff, central OCYF office staff, private providers, Guardian ad Litema, Court Appointed Special Advocates, community service agencies, and Technical Assistance providers. There are no specific qualifications to be a reviewer; however, prior to completing their first review, all reviewers must complete a two-day training focused on the QSR protocol and the overarching CQI process. Site Leads observe all trainings and if someone is identified as not yet ready to review, they may be asked to defer reviewing to a future session. Deferment is not common, however it provides a nice checks and balances for the process. All State Site Lead mentors must be certified QSR reviewers and must have been a State Site Lead mentee during a previous review. Mentors help mentees become familiar with the CQI process, sampling, quality assurance of the QSR, etc. Additionally, the State requires refresher trainings when adjustments or edits have been made to the QSR protocol or process for all certified reviewers and Site Leads.

The [Quality Service Review Process Manual](#) provides an exhaustive review of the core QSR components. Following is a summary of each:

Onsite Review: During the onsite review, pairs of reviewers apply the [QSR Protocol](#) to select cases (see *Sampling* for more details). Local and state site leads are encouraged to support the review team in any way needed to complete their review in a strength-based and objective manner.

Focus Groups and Key Stakeholder Interviews: The QSR process combines the use of focus groups and key stakeholder interviews with the use of in depth case reviews to create a multi-method qualitative inquiry process. Focus group and key stakeholder interviews provide information about local practices, resources, collaboration, coordination, and working conditions that helps to provide context for and explain the case-specific review findings which provide a set of micro-point, drill-down analyses that reveal how well children, youth and their caregivers are benefiting from practices and services they are receiving in local sites. The micro and macro views of practice are combined to develop a big picture understanding of local review results and factors that have shaped current outcomes. Feedback from the focus groups and key stakeholder interviews will be utilized in conjunction with results of reviewed cases and will be incorporated into the Next Steps Meeting so that the county can utilize this information in the development of their County Improvement Plan (CIP).

Feedback Session: The QSR provides an opportunity for the QSR reviewers to meet with the caseworker and supervisor at the conclusion of their review. The focus of this case-specific feedback session is to highlight the current strengths and accomplishments and current challenges or barriers that were identified within the case and also to provide recommendations for next steps that could move the practice forward.

Case Specific Team Debriefing: The case-specific team debriefing is designed to provide second level quality assurance. Each team presents their scores and rationale, and fellow reviewers and site leads provide input and feedback to the scoring process.

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In this way, the final scores have a higher level of fidelity to the indicator definitions. Additionally, the debriefing provides an opportunity for each review team to individually present system recommendations to state leaders and to local executive leadership. By including the managing chain of command in the debriefing, there is a higher degree of transparency within the county agency regarding the scoring process.

Exit Conference: At the Exit Conference, the State and Local Site Leads deliver the preliminary aggregate findings from the entire on-site review. The aggregate scores for each of the child/family status and system performance indicators are provided to county staff and the trends discovered from the focus groups and/or key stakeholder interviews are also presented. At the conclusion of this meeting, the county agency should have an overall picture of the trends and preliminary findings from the onsite review.

Post QSR Review Week: The findings from the QSR presented during the Exit Conference are only preliminary and therefore at the conclusion of the onsite QSR the Local and State Site Leads work collaboratively on a second level of quality assurance of the findings. Immediately following the onsite review, the State and Local Site Leads review, analyze, and distribute the data and information collected. This second level of quality assurance is critical to ensuring that ratings are consistent with the indicator definitions found within the Pennsylvania QSR Protocol, and all Written Case Review Summaries are standardized and in line with the core values of the QSR process. Qualitative data from the focus groups and/or key stakeholder interviews is coded and organized so that overarching themes and trends are identified. Finally, information is communicated to individual team members assigned to the QSR cases, and to the county agency.

Final Report: The Final Report provides an analysis of the qualitative and quantitative data collected during the week(s) of the onsite review, as well as relevant data from other sources. This includes an analysis of the demographic information, the final indicator scores, the Written Case Review Summaries, and the information obtained during the focus groups and/or key stakeholder interviews. The Final Report serves as a springboard for the Continuing Quality Improvement (CQI) process.

Next Steps Meeting: The Next Steps Meeting is designed to be an opportunity for the county agency's efforts to begin or continue their CQI process and developing an action plan for enhancing case practice and system performance. The Next Steps Meeting is the kickoff to the development of the County Improvement Plan.

County Improvement Plans: The County Improvement Plan (CIP) outlines the priorities and strategies on which the county agency will focus on to improve specific outcomes as a result of a comprehensive review of their practice. This review is not limited to the QSR findings, and may also include a review of additional data such as the County data packages provided by the State, quantitative measures produced by the county, licensing results, as well as the results of other qualitative data.

Other Qualitative Reviews: Following the first round CFSR, the State rolled out a QSR

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instrument that was modeled after the federal instrument. Though the State has since updated their QSR instrument and process, some counties continue to use the original QSR instrument for internal reviews, as the roll out of the new QSR protocol and process is occurring using a phased in approach across the state. The State is interested in moving all counties to the new tool as the previous QSR instrument was more compliance based. Pennsylvania has also recently finalized a Safety Assessment Quality Assurance Tool, which looks specifically at the assessment and planning process for the State's safety practice. This tool is being utilized in counties and via OCYF regional offices.

South Dakota

The primary component of the State's CQI system is the Safety, Permanency and Wellbeing (SPWB) Review.

The SPWB Review has adapted the federal CFSR tool, adding specific policy, practice, and procedure questions to measure South Dakota's CPS practice. The [Child Protection Services Procedures Manual](#) and the [South Dakota CQI Plan](#) provide an overview of the SPWB Review process:

Reviews are held eight months of the year. Based upon this schedule, the rotation of the offices in the State will be completed in three years. The Sioux Falls office is reviewed every year, as it is the largest office in the State. In choosing the cases to be reviewed, the Outcomes Management Program Specialist relies upon several reports in FACIS (South Dakota's SACWIS system). An attempt is made to choose children from a variety of placement types: residential treatment/group care, kinship, foster care. In jurisdictions that have both tribal court and State court, an attempt is made to choose cases from both types of court systems. The other consideration is to choose cases from a variety of workers, in order to provide the experience of the review for as many staff as possible.

The Outcomes Management Specialist chooses the teams that will be participating in the office reviews, which consists of one or two regional managers or supervisors, in addition to the Outcomes Management Program Specialist and the Tribal Contract Monitor Program Specialist. In the past, reviewers were selected based on previous experience with file reviews and experience in certain areas. However, two years ago, the State decided to allow all program specialists, supervisors, and regional managers to be reviewers. Each reviewer is responsible for two cases. Recently, the State began including a family services specialist as a co-reviewer on some cases. The Outcomes Management Specialist tries to assign an assortment of reviewers from the three position areas (program specialist, supervisor, and regional manager) to each review. To address inter-rater reliability, onsite reviewers meet during the review week to review their ratings and discuss any discrepancies in their ratings.

Interviews are conducted with stakeholders associated with the case being reviewed (e.g. case managers, therapists, youth, foster parents, kinship providers, mental health providers, CASA providers, etc.). Caseworkers who are currently on the case or who worked on the case in the past are also included. The Outcomes Management Program

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Specialist and the Tribal Contract Monitor Program Specialist also conduct interviews with stakeholders in the community, office staff, and office supervisors.

The Outcomes Management Program Specialist reviews all case write-ups completed by other reviewers, in addition to writing up her own case reviews. She then prepares a written report for each office, which includes the results of the staff and stakeholder interviews and the FACIS reports. A summary of the findings outlines both the strengths and areas for improvement in the 23 items, as well as in the area of policy, procedure, and best practice.

The State has recently reformed their post-review process to include Program Specialists and other representatives from the Core CQI Team returning to the site to provide instruction on CQI concepts, review the results of the SPWB Review, and help the office to develop a local CQI team. The results of the SPWB Review will be used as a learning tool to help local offices understand the concept of CQI. Previously, a phone call was held to go over the findings.

In addition to the SPWB Review, the EPICS Workgroups have conducted various reviews in the past. The State has also recently completed a Fidelity Review, which covered intake, initial family assessment, and protective capacity assessment.

Tennessee

CQI Coordinators with Master's Degrees participate in Quality Review Tools, which focus on quality issues as documented in case files. Recently, a statewide quarterly review targeted at visitation began for the Administration for Children and Families (ACF). These reviews will be completed through the end of the State's current Program Improvement Plan. Following completion, Tennessee will tailor these reviews to meet State-specific needs.

Quarterly reviews are also completed by independent monitors to track progress in the State's Brian A. lawsuit. Cases are pulled randomly within the given parameters that the lawsuit monitors are interested in examining. After the lawsuit is over, the State intends to roll the Brian A. monitors into the CQI Unit and to continue these case reviews. Like the ACF reviews, the focus of the reviews will be tailored to fit the State's needs. Both ACF and Brian A. reviews are computer-based; however, team leaders and/or frontline workers are called in when specific questions arise. Inter-rated reliability is not currently addressed in ACF and Brian A. reviews, but this will be added in the future.

Quality Service Reviews (QSRs) are completed annually, though regions are encouraged to complete several throughout the year. QSRs are technically covered by the Department of Children and Families (DCS); however, most Regional Coordinators also serve as a QSR coach or lead, so the CQI Unit is involved in these reviews. QSRs use a random sample to complete a comprehensive service review (22 indicators). Interviews are completed face-to-face with youth, birth parents, caretakers, case managers, and other stakeholders. Inter-rated reliability checks are completed.

[Click here to download the QSR Protocol.](#)

Quarterly Case Process Reviews (CPRs) were implemented in 2004 to determine that all case files contained the required documents. CPRs are considered part of the informal CQI process; however, the data from these reviews is used during the formal CQI process. Reviews are primarily completed by team leaders or case managers. Team leaders use CPR Tools during supervision sessions with case managers to discuss strengths and identified needs. Team Leaders then set a two-week deadline for corrections to be made. There are 8 CPR tools available on the PQI Website (Social Services, Child Protective Services, Juvenile Justice Probation/ICJ, Juvenile Justice Custody/After-care, Resource Home, Adoption Assistance, Subsidized Permanent Guardianship and Personnel Records). Though the CQI Unit is not directly involved in CPRs, they are responsible for conducting a random sample to test reliability.

[Click here to download the CPR Procedures Manual.](#)

Texas

Investigations

The Investigations Team's goal is to complete a statistically representative review of all closed investigation cases statewide (approximately 4,000 reviews annually). QA Analysts use a QA guide to answer questions about selected cases. The QA tool includes 107 questions and primarily focuses on child safety and investigation policy (see [Archive of INV QA Questions](#) for the list of questions used). The investigation's review is a review of all information contained in the case files, including recorded interviews. QA specialists do not interview staff as part of their review. . Once all cases in the region have been reviewed, Analysts compile the findings into a report that identifies trends and patterns in the data. Reports are distributed to the regions and each region is responsible for responding to items highlighted by the QA Analysts. For example, if they cannot locate case information or if a dashboard measure is particularly low, the region must make a plan for improving that item. The regions are given access to the QA database so that supervisors and workers can pull up information on cases within their unit that were reviewed. Theoretically, each worker has access to everything that was said about his or her case and each supervisor is able to see how their unit and their individual workers are doing on each item. Occasionally the QA Analysts will focus on a single issue during their quarterly read. These reads can identify with much more specificity how caseworkers are addressing the issues being examined.

To address inter-rater reliability, each QA Analyst reviews cases from several different regions. This way, the impact for an individual region is mitigated if a reviewer is reviewing differently from the rest of the team. The Team's monthly calls also serve the purpose of addressing inter-rater reliability, giving reviewers a chance to ask questions and gather feedback on ratings.

CFSR

The CFSR Team uses the federal CFSR instrument (23 items, 7 outcomes) to review 360 cases per quarter (20 cases per QA Specialist). Ten in-home cases and ten foster care

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cases (with any attached investigations) are reviewed per QA Specialist. The Team follows the federal CFSR standards for interviews; however, as a result of the size of the sample, the Team only requires that an attempt be made to interview the appropriate parties (e.g. parents, foster parents, worker, supervisor, etc.). QA Specialists review the cases and then enter them into a secure database, only accessible by CQI staff. At the end of the review, the QA Specialists pull reports from the database to share with caseworkers and their supervisors at a debriefing. Everyone in the chain of command is invited from caseworker up to Regional Director. On a quarterly basis, Program Improvement (PI) Specialists take the case review data and write [Structured Case Reading Summary Reports \(template\)](#), identifying high-level trends across the regions. Finally, Central Office creates 11 regional reports and then compiles them all into a statewide, very high-level report. The State also produces a quarterly item outcomes summary report. See [Outcomes Summary Report](#) for example. Reports are posted to the intranet and used in management meetings. The CFSR Team heavily promotes the use of the intranet page for staff to see where regions are strong and where they need improvements.

In addition to their monthly calls, the CFSR Team takes a number of steps to address inter-rater reliability. At minimum once annually the Team reviews a case individually and then gathers to discuss findings and any variances. As mentioned previously, the FAQ list is maintained on an ongoing basis with the most up-to-date interpretations of the tool. In the past, the Team has traded cases between regions to determine if there are any regional differences in interpreting the review instrument. QA Specialist in one region trades out four cases with QA Specialist in another region and these cases are then reviewed by the home region's PI Specialist to review for rating discrepancies among individual regional teams. Because QA Specialists report to different PI Specialists, this exercise helps to identify variances in review practices across the Team. QA Specialist will fill in for one another if there are vacancies in a region, resulting in even more cross-regional readings.

The Team's five PI Specialists oversee the CFSR process in their respective regions. Each Specialist supervises three or four QA Specialists. Of the 20 cases read by each QA Specialist, the PI Specialist reads behind five of them. Additionally, the State Office has two people who each review one case per QA Specialist. This means that each QA Specialist has seven secondary reviews of their cases quarterly. During the time of a CFSR Program Improvement Plan, all of the items that are measured for the PIP are subject to 100% QA.

Virginia

Virginia uses Quality Service Reviews (QSRs) to help local departments identify issues for improvement.

Virginia's 2011 APSR describes the history of the QSR:

The QSR instrument was developed in September 2010 at a design meeting with assistance and support through a contract with Child Welfare Policy and Practice Group (CWPPG) and Human Systems and Outcomes (HSO). The QSR protocol operationalizes

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the Virginia Children's Services Practice Model also addressing safety, permanency, and well-being. A group of Virginia Department of Social Services staff, local staff, community partners and stakeholders were involved in a 2.5 day meeting to develop the protocol.

The 2011 [QSR and System Improvement Plan \(SIP\) Process](#) manual describes Virginia's quality service reviews:

Quality Service Review for Virginia is a three step process consisting of: on-site review of cases, a written report of review findings, and a System Improvement Plan developed by the local department of social services on identified issues for improvement. A QSR assess child welfare case practice in two domains, child and family status and practice performance.

Step 1 – Quality Service Review conducted at a Local Department of Social Services (LDSS).

- Case review of a LDSS is conducted using a random sample of foster care and CPS ongoing cases. Cases are reviewed in a one week onsite review with interviews of agency personnel, child, family, and community partners. Immediate feedback is provided to the caseworker and supervisor on each case reviewed.
- Preliminary results are provided to the local department on Friday morning of review week through meetings with department staff, with the possible inclusion of community stake holders, offering immediate feedback on review findings.
- A final report covering strengths and opportunities for improvement is then issued within 60 days of the review to LDSS, Regional Consultants, Regional Directors, and Program Managers.

Step 2- Analysis of Information and Results

- LDSS reviews the full report and conducts internal discussion which may include Regional Consultants, to identify the systemic factors and processes that impact the outcomes in the QSR report. This discussion should include linkages between the QSR results, Safe Measures, Critical Outcomes Report (COR) data, and the VA Practice Model.

Step 3 – Next Steps Meeting

- Thirty days after receipt of the written report of the Quality Service Review a next steps meeting will be held with attendance to include the LDSS Director, Supervisors and staff as appropriate, VDSS Regional Consultants and VDSS Continuous Quality Improvement staff.
 - The purpose of the meeting is to discuss the results of the QSR, the analysis by the department and identify priorities for practice change and improvement that will impact outcomes for children and families. Some of these areas may include regulatory and policy compliance, casework processes, supervisory processes, case management, gaps in performance measures, training competencies, best practices and

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resource needs.

- Outcome of the meeting will be two fold. First, the prioritization and identification of one to three issues that the LDSS can commit to work on that will improve processes and outcome measures. Second, the identification of steps towards solutions and the development of specific action plans for the identified solutions.

Step 4 – System Improvement Plans (SIP)

- A System Improvement Plan is comprised of series of action plans to improve practice and outcomes for children and families. The purpose of the LDSS SIP is two-fold: 1) to outline how the LDSS will adjust their services/practice in response to the QSR results in order to improve their outcomes as reported in COR and Safe Measures, and 2) to serve as a mechanism for VDSS to report on progress made on both local and state levels to improve outcomes for children and families as outlined in VA's federal Program Improvement Plan (written in response to VA's 2009 CFSR).
- Regional Consultants and CQI staff are available for technical assistance in the development of the system improvement plans.
- Within 30 days of the Next Steps Meeting the LDSS will complete a SIP and forward to Regional Consultants and CQI staff. The LDSS will report on the status of the implementation and achievements of their SIP at least annually to the Regional Consultants and the Continuous Quality Improvement (CQI) Unit. On-going monitoring of the SIP will be part of the ongoing technical assistant provided by Regional Consultants.

Sampling

After identifying an agency and its number of caseworkers and caseload size, the CQI Unit pulls a random sample of CPS and foster care cases. The sample is sorted by caseworker and no more than one case per worker is chosen. For foster care cases, from the random sample a convenience sample is pulled to ensure that a variance in permanency goals is present. The sample is presented to the local department and a consent process is completed with the families. The Unit always oversamples, allowing the Unit to make substitutions if a pulled case is determined unacceptable.

Inter-rater Reliability & Oversight Function

To address inter-rater reliability, mini rounds are held during the review week. Reviewers share an overview summary of their cases and then discuss their ratings, particularly any areas of ambiguity. The Unit plans to implement in the next year a training in which reviewers individually complete electronic or in-person case scenario reviews and then convene to discuss their findings. All reviewers are mentored and shadowed during their initial reviews. The CQI Unit uses a reviewer assessment instrument; typically 2-4 reviews are completed before a reviewer is rated high enough to perform reviews independently. While writing the final report, CQI quality analysts contact reviewers to ask questions about any gaps or inconsistencies in the data. The CQI quality manager reviews all final reports, providing the final oversight function on the QSR process.

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West Virginia

West Virginia has adopted the federal CFSR instrument and process for their case reviews. Sampling is based on the 2008 Round Two CFSR. The review is based on a two-year cycle; each District is reviewed once every two years. Reviewers are teamed up to conduct interviews with parents, workers and providers. Following the interviews, a paper and electronic review is completed and finally, the team rates the case together. To address inter-rater reliability, all cases are staffed after completion with two review teams and one Program Manager to discuss all ratings.

Additionally, Office of Planning and Quality Improvement (DPQI) staff are responsible for conducting targeted reviews. Targeted reviews are organized around initiatives, PIP measures, and directives from the Commissioner. In conjunction with the State's implementation group (Special Forces), DPQI staff are currently reviewing for fidelity to a new model which the State has put into place for Child Protective Services.

Wisconsin

Wisconsin began using Quality Service Reviews (QSR) in 2005. The State brought in Human Systems and Outcomes, Inc. and the Child Welfare Policy and Practice Group to provide training to staff in order to develop internal capacity within the State.

Peer reviewers complete a two-day training on the QSR and spend time in the field to further develop their competencies. Once certified, peer reviewers accompany the CQI Team as reviewers for the QSR. Currently, there are 75 certified peer reviewers in the State; approximately twenty percent of peer reviewers are retirees with prior child welfare experience.

The CQI Section has created a rigorous set of protocols and tools to assess child welfare practice in the State, covering the following areas: Access, Initial Assessment, Ongoing, Permanency Pathway (post termination of parental rights/adoption), and Indian Child Welfare Act compliance.

- **Access and Initial Assessment (IA):** The QSRs analyze the critical decision points in a case at the point of, and following, the receipt of an allegation of maltreatment. The Access and IA reviews have a foundation in the Access and IA Standards with a qualitative focus on best practice.
- **Ongoing:** QSRs consider child safety and appraise the agency's ability, using local resources, to achieve federal and State performance standards for permanency and well-being.
- **Permanency Pathway:** QSRs assess post termination of parental rights cases as they move toward adoption finalization. While considering child safety, permanency, and well-being, they also consider outcomes as jurisdiction of a child moves from the county to the state via a contracted private adoption agency.
- **Indian Child Welfare Act (ICWA):** The ICWA review ensures compliance with requirements related to the identification of American Indian children, proper tribal notification, and tribal placement preferences. [In 2009 the state passed new legislation called the Wisconsin Indian Child Welfare Act (WICWA) and CQI is currently developing a qualitative protocol to measure outcomes of service delivery for children/youth who are tribal members.]

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Case reviewers work in teams. Typically six teams will review twelve cases over a four day period. The State conducts nine to twelve reviews annually. The State had originally agreed with the Children's Bureau to complete 12-16 reviews per year, but found this number to be too difficult to sustain. The Section uses a randomized, stratified sample. Stratification is based on age, gender, and caseworker. The Section may develop targeted QSRs to study parts of a system or target performance measurement in the future.

In addition to case file reviews, the peer reviewers and CQI team conduct interviews with those involved in the case (e.g. children, parents, out of home providers, service providers, informal supports, teachers, etc.). The Unit averages 8.5 interviews per case. Stakeholder focus groups are also held in order to look at the macro system i.e. how the stakeholders and practice partners work with one another and contribute to outcomes for children and families. Fifteen to eighteen focus groups are conducted during a county review, which typically include the following stakeholders: foster children, foster parents, ongoing caseworkers, access and initial assessment caseworkers, law enforcement, educators, supervisors, judges, Guardian ad Litem, attorneys, tribal leaders, etc.

Following the case interview process, the case is scored and the case review team lead puts together a debriefing summary which points to the strengths, challenges, and valuable information uncovered in the case. This information is presented to the caseworker and supervisor along with suggestions to achieve enhanced outcomes. Next Case Presentation (or "Grand Rounds") is held. This is a chance for the lead reviewers to give a ten minute summation of what was learned on the cases they reviewed. Agency personnel are invited to observe the meeting.

To address inter-rater reliability, the CQI Section has completed two inter-rater studies. With the help of Human Systems and Outcomes, Inc., the section used case simulation to test for degree of agreement across reviewers in the Ongoing protocol. All CQI Specialists and peer case reviewers participated in the study. Inter-rater studies have not been completed for the Access, Initial Assessment, or Permanency Pathways protocols as of yet.