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## Accreditation Becomes Law in 2010 Session

By: Aaron Campbell

During the 2010 Legislative Session, the Department put forward legislation to ensure that DCS continues to maintain accreditation. With the leadership of Senator Douglas Henry and Representative Jeanne Richardson, the Department was successful in passing SB3865/HB3850. The bill as passed became Public Chapter 1044. Public Chapter 1044 amends the powers and duties of the Commissioner to require DCS to maintain accreditation. It also states that if the Department fails to maintain accreditation, the Commissioner must report to the General Assembly the reasons why the department is no longer accredited.

During discussions on SB3865/HB3850, members of the General Assembly praised DCS for its accomplishment in achieving COA accreditation. Members also expressed their desire that DCS be held to the highest standards of service. By ensuring that DCS is open to outside COA evaluators, the Legislature affirmed their commitment to running a top-notch child welfare program that embodies best practice. Public Chapter became effective June 11, 2010.

To view a copy of PC1044, please visit: <http://state.tn.us/sos/acts/106/pub/pc1044.pdf>

## State CQI Team to Use Go-To-Meeting

The August State CQI Meeting is going to operate a little differently this time around. The team will meet via the Go-To-Meeting software program that is available for usage by DCS through the Tennessee Center for Child Welfare.

This is a cost savings measure in that it will allow team members to attend the meeting electronically through the computers in their own offices. This will help to cut down on travel costs and drive time. All documents for the meeting will be viewed electronically by everyone at the same time. This will cut down on the cost of paper and toner, not to mention it is a much more environmentally friendly option.

This software program is available for usage for all CQI teams. In the very near future all of the Regional CQI Coordinators will be trained on this program. After that point CQI Coordinators will be able to access this program for usage in their own regions or facilities.



## Social Worker's Corner



One of the primary roles of a Social Worker is to be an agent of change. As DCS employees, we determine what changes would benefit the children and families that we work with in a variety of both formal and informal assessments.

Family Service Workers utilize Structured Decision Making, Family Functional Assessments, CANS, Independent Living Assessments, psychological assessments, Child and Family Team Meetings, client interviews, and a whole plethora of other methods to assure that the needs of a family are met. This is just thought of as a part of simple daily job responsibilities.

It's also not just the Family Service Workers who use assessment on a daily basis. Supervisors use the Monthly Performance Briefings, Case Process Reviews, and Job Performance Plans to assess their employee's performance. Quality Service Review Leads and Coaches use the QSR protocol to assess the work we are doing with families. Almost every employee of the Department uses assessment as a part of their daily routine.

So, why do so many not think of the other assessment tool that DCS employees have in their back pockets, so to speak? The tool to which I refer is the CQI. CQI is not just a process of appointing a Leader and a Scribe. It's not about having to complete minutes and find someone to complete action steps. These are steps that generally need to be done in the CQI process. However, this is not the big picture of CQI at all.

CQI is about assessing what is and is not working, and trying to find ways in

which we can improve upon the work we do. This is truly no different than any other assessments that we do, other than CQI is generally not family specific.

Looking at data in the CQI process is just a formal assessment of whatever the team is looking at. This data could be about performance indicators or surveys, or other information collected by the team.

Survey data is a really good way to gather information about what is truly working and not working for the group that was surveyed. The DCS CQI Unit conducts seven surveys each year. Many of the Regional CQI Coordinators also conduct surveys within their own regions. This information is available to teams to use to brainstorm around ways to assure that the needs of that group being surveyed are met.

While a true Social Worker may have a primary focus on the families they are working with, they also have a responsibility to look at the big picture or macro-practice aspect of the agency in which they work. Reviewing performance data and surveys lets a Social Worker know about issues that may effect the services the families they work with receive.

Using the CQI process to truly assess and resolve these issues benefits not only the families of one Social Worker, but all of the families being served by the Social Workers in the Department. So, are you using the CQI Assessment tool the way you should?

*"A person  
hears only  
what they  
understand"*  
- Goethe -



## Family Service Workers Teaming to Get It Right

By Barbara K. Maners, M.S.



*Pictured: Cynthia Taylor, Janet Jones, and Tonia Marion*

*“It is easier to do a job right than to explain why you didn’t.”*

*-Martina Navratilova-*

Yes, COA is coming again; actually it never left as these three Family Services Workers in Shelby County understood and wanted to get all of their case files right. Cynthia, Janet and Tonya requested assistance to have all of their case files compliant for COA, QSR, CQI, all policy requirements and to develop a general understanding of the evidence of the road to permanency in their case files. They committed the time and willingness to get old cases redone and start off new cases in full compliance of Policy 31.5 for file organization and keeping their cases ready for any review. They worked through barriers of not having enough time or the correct supplies to reach their goal.

The short term goal of compliance is a part of the foundation towards best practice that will get to the long term goal of permanency for our children in the system. These workers wanted to move beyond the problem of poorly organized files and their feelings of frustration to some-

thing they could observe and measure with a sense of success and accomplishment. They realized that the organization of the case file was a reflection of their work. It became a process of looking at the notebook itself and at every page in the case file. Ensuring that the notebook and its contents were accurate, complete and according to policy as well as asking questions to complete their understanding of what was being required was the next step to reaching their goal. They came to a realization that it is more than just a case file or form in the file that must be completed. It is the measure of their professional work for the child and family that have been assigned to their case load; it is about diligently working to find family members and resources that are truly in the best interest of the child as well as the documentation of those efforts. The road to permanency is measured through the case files, and these Family Service Workers are committed to best practice.



## August Is ...

American Indian Heritage Month

Children's Eye Health and Safety Month

Happiness Happens Month

National Water Quality Month

Simplify Your Life Week (Aug. 1–7)

Single Working Women's Week (Aug. 1–7)

National Safe at Home Week (Aug. 23–27)

Be Kind to Humankind Week (Aug. 25–31)

Friendship Day (Aug. 1)

National Minority Donor Awareness Day (Aug. 1)

Assistance Dog Day (Aug. 8)

The Date to Create (Aug. 8)

International Day of the World's Indigenous People (Aug. 9)

International Youth Day (Aug. 12)

The Only Friday the 13th in 2010 (Aug. 13)

Best Friends Day (Aug. 15)

National Relaxation Day (Aug. 15)

National Homeless Animals Day (Aug. 21)

Be an Angel Day (Aug. 22)

National Dog Day (Aug. 26)

Women's Equality Day (Aug. 26)

Global Forgiveness Day (Aug. 27)

## BTA Quality Service Review *By Julie Carmean*

After the excitement of the statewide QSR reviews had calmed down and the +5 Reviews came to a close, the Smoky Mountain Assessment and Resource Team began planning our Regional QSR reviews. Since this review was slated for July, it would have been difficult to assess Learning and Development for our children. With this in mind and data in hand, the team decided to focus on a specific population of children which had a higher length of stay than the BTA goal we set in 2008. The current goal for children under 1 is for length of stay not to exceed 74 days but Smoky Mountain children were missing the mark by 3 days during the 6 month period between July and December 2009. We decided to use the Regional QSR to “dig down” and get a better understanding of why we are unable to meet our goal with one of our most vulnerable populations.

Four cases were chosen from children entering custody between July and December 2009 who were under 1 year old at the time of commitment. The reviews were held on July 20-21, 2010. Two of the cases were voluntary commitments by teenage mothers who had been placed in care themselves and the other two cases involved infants that were born drug exposed. This information alludes to why Smoky Mountain is unable to meet that BTA goal for length of stay. Termination of parental rights (on the infants born

drug exposed) may be increasing the length of stay. The voluntary commitments usually stay in care until their minor parent is able to find permanency or longer.

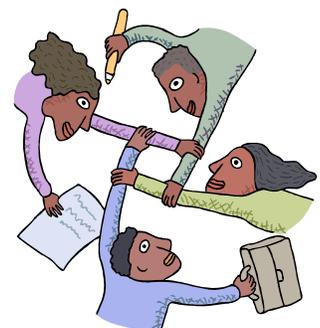
The interesting piece is the conversation that came from the voluntary commitments and how we prepare teenage parents to parent their children once DCS is no longer involved. How many youth in care have children of their own or are expectant parents? How are we ensuring that DCS staff members provide full disclosure about voluntary custody? Is this information something that should be included in the Clients Rights Handbook? Is voluntary custody avoidable so that later searches will not reveal prior DCS and court history? How can we build a better Interdependent Living Plan to prepare these youth? What resources are already available to assist?

While many of these questions still lack answers, it appears that this is a population worth looking into in Smoky Mountain. When Social Services and Juvenile Justice Team Leaders were polled, they report that approximately 25 youth in care either have a child (or children) or are expecting a child currently. Adequately preparing these youth for the challenges of parenting without the assistance of DCS and building up their informal supports may prevent future custodial episodes.




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*“Do not  
impose on  
others what  
you yourself do  
not desire.”  
- Confucius*



### Cost Savings Tip

When having meetings, send out the agenda and any attachments ahead of time. Ask those attending the meeting to print out what they feel they will need for the meeting and bring it with them. This will prevent unnecessary copies being made and “left over” at the end of the meeting. Using a laptop and projector during the meeting is also a good way to avoid having to make copies of information being discussed. CQI Teams also have access to the Go-To-Meeting software. This not only saves on making copies, but on travel costs for those who attend the meeting.

DEPARTMENT OF  
CHILDREN'S SERVICES

*Putting the Pieces Together*

A PUBLICATION OF THE  
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## Quality Service Review Schedule

2010–2011

**Davidson County Region:** August 30–September 3

**Mid-Cumberland Region:** September 27–October 1

**Southwest Region:** October 18–22

**East Tennessee Region:** November 15–19

**Knox County Region:** December 6–10

**Smoky Mountain Region:** January 24–28

**South Central Region:** February 7–11

**Northwest Region:** February 28–March 4

**Upper Cumberland Region:** March 21–25

**Shelby County Region:** April 4–8

**Tennessee Valley Region:** May 2–6

**Northeast Region:** May 23–27

## 2009 Resource Parent Survey

The 2009 Resource Parent Survey was conducted at the Tennessee Foster and Adoptive Care Association Conference in Nashville in October of 2009. A total of 310 surveys were collected at the conference.

The results of this survey are now available to any CQI team that would like to review them. Simply contact your Regional CQI Coordinator to obtain a copy. The Central Office CQI Unit would like to encourage Resource Parent Support Case Managers to review the results of this survey with their Foster Parent CQI Teams or Foster Parent Associations.

The survey consisted of eighteen Likert scale questions and one qualitative question. Of the Likert scale questions there were five where the Resource

Parents responded with less than a seventy percent satisfaction rate.

Those five questions would be great areas for regional CQI or Foster Parent CQI teams to focus on in order to improve outcomes.

Those questions were regarded to being provided with specific information about the children before they are placed in the resource home; responding proactively to challenges and conflicts with the placement; being given adequate notice for removal or placement of children into the resource home; the PATH training being effective in preparing the resource parent; and resource parents having access to respite care and other methods to reduce stress.

If you have questions about this survey or any of the surveys, please contact your Regional CQI Coordinator.