Annual Performance & Quality Improvement Plan

Fiscal Year

2020/2021

Introduction

Kids First of Florida (KFF) utilizes a Continuous Quality Improvement (CQI) model to identify, describe, and analyze areas of strengths and growth, and then test, implement, learn from and revise solutions. KFF's Quality Assurance (QA) staff resources consist of a QA Manager and two QA Coordinators. The QA Manager and Coordinators coordinate and complete reviews, collect and analyze data, and coordinate quality improvement activities.

KFF's CQI infrastructure includes the KFF QA Department and other agency management and staff, the Department of Children and Families (DCF) (including the contract manager), subcontracted providers, and other stakeholders. Members of KFF management and staff, DCF, sub-contracted service providers and other stakeholders meet as necessary to address emerging issues. These meetings are used to set goals and develop plans to improve the quality of services. In addition, risk identification and management are a key component of KFF's CQI process.

Continuous Quality Improvement Process

Integral to the CQI approach is an atmosphere that is proactive and supports continuous learning. Through the early identification of areas in need of improvement, KFF can more efficiently and effectively develop corrective steps to increase compliance. Data collected from QA and CQI activities is utilized to develop improvement plans in support of achieving performance targets, program goals, client satisfaction, and positive client outcomes through a broad-based, community-wide process.

The KFF CQI process builds on the components of:
  a) Quality Control – narrow focus; the actual measurement and assessment of output to determine whether specifications are being met.
  b) QA – broader focus; any activity that impacts the maintenance of quality at the desired level. Refers to entire system of policies, procedures, and guidelines the project has established to achieve and maintain quality; extends from the design of services and processes through to the quality assessment of system outputs.
  c) CQI – broadest focus; integrative management concept directed at continuous improvement in the quality of services by involving all levels and functions of the organization. Goal is to build in quality from the beginning by making quality everyone's concern and responsibility.

KFF focuses on quality control, QA, and CQI in a comprehensive and continual systems evaluation process. Essential to the implementation and success of the CQI process is the participation of all KFF management, DCF, sub-contracted providers, and other stakeholders. All activities are equal in importance. Each manager, staff member, and other stakeholder have an equal responsibility in the quality improvement process. Successes are shared and celebrated among management, staff members, and other stakeholders.

Quality Improvement (QI) meetings are scheduled independently, along with, or in place of, a regularly scheduled staff/unit meeting. Meetings are scheduled at a time when all stakeholders can participate. Each meeting may consist of several members with varying roles within the agency and community who provide alternative perspectives on an issue. Each meeting may be attended by a member of the QA Department to provide support and guidance to the meeting participants. Meeting participants are encouraged to identify relevant issues and may also be asked to address an issue identified through QA case reviews, incident reports, client grievances, or satisfaction surveys. Allowing meeting participants to address issues ensures ownership of the action plan developed and the efforts required to achieve the desired outcome.

QI teams have decision-making authority. Meetings result in:
- The identification of needs, goals, and available resources.
- Discovery and utilization of strengths throughout the program.
- Development of action plans to implement identified improvements.
- Identification of unresolved issues to present to the next level.

An agenda for QI meetings may include, but is not limited to:
- Review and celebration of successes
- Review of incident reports—client, staff involved reports as well as service complaints
- Participant and other stakeholder satisfaction and input data
- Case review findings
- Program improvement data and barriers to achieving outcomes addressed
- QI projects/updates and new proposals
- Action planning

KFF's CQI process includes the following elements:
- QA Reviews (including Rapid Safety Feedback; Florida CQI and Federal Child and Family Services; and KFF executive management and DCF regional or circuit administration discretionary reviews and targeted reviews)
- Collaboration with DCF Quality Management
- Monitoring of Psychotropic Medication
- Review, Maintenance and Analysis of FSFN Data
- Local Collaboration and Meetings
- Performance and Contract Measures
- Subcontract Monitoring
- Strategic Planning
- Accreditation
- Risk Identification and Management
- Use of CQI Results
- QI Activities

Quality Assurance Reviews

Case reviews provide an understanding of what is "behind" the safety, permanency, and wellbeing numbers in terms of day-to-day practice in the field and how that practice is impacting child and family functioning and outcomes. At the frequency and sample size outlined below, KFF will conduct on-going Rapid Safety Feedback Reviews, Florida CQI (FLCQI) Reviews, and CFSR PIP Monitored Reviews of cases to determine the quality of child welfare practice related to safety, permanency, and well-being. The KFF QA Manager or designee will be responsible for assigning cases for review.

FY 2020-2021 Quality Assurance Review Schedule			
•1st Qtr. July-September:	•2nd Qtr. October-December:	•3rd. Qtr. January-March:	•4th Qtr. April-June:
●8 RSF ●5 FLCQI (1 with interviews) ●1 CFSR/PIP(with in-depth interviews ● Targeted Reviews	●8 RSF ● 5 Florida FLCQI (1 with interviews) ●1 CFSR/PIP (with in-depth interviews) ● Targeted Reviews	●8 RSF ● 8 Florida FLCQI (2 with interviews) ● Targeted Reviews	●8 RSF ● 8 Florida FLCQI (2 with interviews) ● Targeted Reviews

Rapid Safety Feedback Reviews

The Rapid Safety Feedback (RSF) review is a process designed to flag key risk factors in in-home services cases involving children ages 0-4 that could gravely affect a child's safety. These factors have been determined based on reviews of other cases where child injuries or tragedies have occurred. Factors include but are not limited to the parents' ages, evidence of domestic violence in the home, evidence of substance abuse, or previous criminal records, and prior abuse history. The critical component of the process is the case consultation in which the reviewer engages the Family Services Counselor and the supervisor in a discussion about the case and serves as a mentor and discusses the case strengths and opportunities for improvement.

The RSF samples are pulled using the Florida and Safe Families Network (FSFN) Business Objects report entitled Children Receiving In-Home-Services Daily QA Listing and selected based upon the identified risk factors for the RSF reviews that are identified in the 2019 Windows into Practice Guidelines. Upon completion of the review; the data is entered the Qualtrics Web Portal. A detailed listing of sample stratification criteria and the period under review is described can also be found in the 2019 Windows into Practice Guidelines.

The RSF review focuses on the following areas:

Item #	Rapid Safety Feedback Item
1	Are family assessments of danger threats, child vulnerability, and family protective capacities sufficient to identify safety concerns and case plan actions needed to effectively address caregiver protective capacities and child needs? 1.1 Is the most recent family assessment sufficient? 1.2 Is the most recent family assessment completed timely?
2	Are visits between case managers, children, and parent(s) or legal custodian(s) sufficient to ensure child safety and evaluate progress toward case plan outcomes? 2.1 Is the quality of visits between the case manager and the child(ren) sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes? 2.2 Is the frequency of visits between the case manager and the child(ren) sufficient to ensure child safety and evaluate progress toward case plan outcomes? 2.3 Is the quality of visits between the case manager and the child's mother sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes? 2.4 Is the frequency of the visits between the case manager and the child's mother sufficient to ensure child safety and evaluate progress toward case plan outcomes? 2.5 Is the quality of the visits between the case manager and the child's father sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes? 2.6 Is the frequency of the visits between the case manager and the child's father sufficient to ensure child safety and evaluate progress toward case plan outcomes?
3	Are background checks and home assessments sufficient and responded to with a sense of urgency when needed to address potential danger threats? 3.1 Are background checks and home assessments completed when needed? 3.2 Is the information assessed and used to address potential danger threats?
4	Is a sufficient safety plan in place to control danger threats to protect a child? 4.1 Is the safety plan sufficient?

	4.2 Is the safety plan actively monitored to ensure that it is working effectively to protect the child(ren) from identified danger threats?
5	Is the case manager supervisor conducting guided discussions at specific points in the case management process focused on promoting effective practice and decision-making? 5.1 Is the supervisor regularly consulting with the case manager? 5.2 Is the supervisor ensuring recommended actions are followed up on?

Continuous Quality Improvement Reviews (CQI) and PIP (Performance Improvement Plan Review):

The CQI and PIP monitored case reviews utilize the federal Child and Family Services (CFSR) standardized tool and the results are entered in the tool which is located on the CFSR website. The CQI and PIP case review focuses on eighteen items related to the child outcomes of safety, permanency, and well-being.

One in-depth CQI which includes a record review and in-depth case participant interviews; will be conducted in each quarter in addition to one in-depth PIP monitored review each quarter (began July 1, 2017). Interviews include case participants such as caregivers, service providers, and other essential persons involved in the case. The case will be debriefed with the Family Services Counselor (FSC) and supervisor to serve as a mentor and discuss the case strengths and opportunities for improvement.

The sample for CQI's are pulled and selected from the most recent Adoption and Foster Care Analysis and Reporting System (AFCARs) submission extract. Case selection criteria must consider a 60/40 split between out-of-home care and in-home services. A detailed listing of sample stratification, the period under review and case elimination criteria is described in the 2018 Windows into Practice document. The sample for the PIP monitored case is chosen by the Office of Child Welfare. The OOH sample is selected from the AFCARS submission extract and the in-home sample is selected from the Florida and Safe Families Network (FSFN) Business Objects report entitled Children Receiving In-Home-Services Daily QA Listing. Each PIP monitored case review will be comprised of a CBC CQI/QA staff person and a Department of Children and Families regional or state level child welfare professional. The CBC CQI/QA staff will lead the review. The CBC QA Manager or designee will provide first level QA of each case review to assure consistency across the review sites, accuracy of ratings and/or changed ratings, and resolution of disputed ratings. The Office of Child Welfare CQI Unit will conduct second level reviews of all PIP monitored cases to assure consistency across the review sites and the accuracy of ratings and/or changed ratings. In addition, the Office of Child Welfare CQI Unit will be responsible for centrally tracking and resolving issues and sharing that information with the state's review team. The period under review for CQI and PIP monitored cases is one year to the date of the review.

The CQI & PIP case reviews focus on the following areas:

Item #	Florida CFSR/CQI Item	Related Outcome
1	Were the agency's responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within time frames established by agency policies or state statutes?	Safety Outcome 1
2	Did the agency make concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after reunification?	Safety Outcome 2
3	Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care?	Safety Outcome 2
4	Is the child in foster care in a stable placement and were any changes in the child's placement in the best interests of the child and consistent with achieving the child's permanency goal(s)?	Permanency Outcome 1
5	Did the agency establish appropriate permanency goals for the child in a timely manner?	Permanency Outcome 1
6	Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement for the child?	Permanency Outcome 1
7	Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?	Permanency Outcome 2
8	Did the agency make concerted efforts to ensure that visitation between a child in foster care and his or her mother, father, and siblings was of sufficient frequency and quality to promote continuity in the child's relationships with these close family members?	Permanency Outcome 2
9	Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends?	Permanency Outcome 2
10	Did the agency make concerted efforts to place the child with relatives when appropriate?	Permanency Outcome 2
11	Did the agency make concerted efforts to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregivers from whom the child had been removed through activities other than just arranging for visitation?	Permanency Outcome 2
12	Did the agency make concerted efforts to assess the needs of and provide services to children, parents, and foster parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?	Well-being Outcome 1

13	Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?	Well-being Outcome 1
14	Were the frequency and quality of visits between caseworkers and child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?	Well-being Outcome 1
15	Were the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?	Well-being Outcome 1
16	Did the agency make concerted efforts to assess children's educational needs, and appropriately address identified needs in case planning and case management activities?	Well-being Outcome 2
17	Did the agency address the physical health needs of children, including dental health needs?	Well-being Outcome 3
18	Did the agency address the mental/behavioral health needs of children?	Well-being Outcome 3

To catch data entry errors, the QA Manager will complete a final review of all cases reviewed. After all cases have been reviewed, the QA Manager will analyze the data collected overall and identify trends, effective practices, and areas of concern, synthesizing the information to demonstrate and discuss KFF practices and performance. This will provide management with timely and valuable information in which to react, especially when areas of concern that have been identified or if there is a downward trend in an area that could be remedied with immediate interventions. Annual reports will be submitted to DCF within 45 days after the end of the FY. The report will address findings and trends in the following areas: safety, permanency, well-being, and systemic factors.

Florida Performance Improvement Plan

In response to the final CFSR report, each CBC developed a local PIP. The local plans were combined regionally and rolled into the statewide PIP. KFF's PIP specifically addresses areas needing improvement from the CFSR findings including the systemic factors. The plan includes some of those key activities such as: engagement; enhancing case manager skills, knowledge, and abilities relating to safety planning, safety service and risk and safety assessments; engagement through on-going training of the Florida Safety Practice Model; continuing to actively recruit foster homes utilizing the QPI standards; and strengthening the process of identifying children's connections to the community and documenting those efforts to preserve those connections. The PIP monitored phase began July 1, 2017. Quarterly, KFF submits an update to regional staff as to those measures and provides evidence of completion of the activities. Those measures are monitored for compliance through the PIP monitored case reviews. These activities as well as others will be the KFF's focus for FY 20-21.

KFF Executive Management and DCF Regional or Circuit Administration Discretionary and/or Targeted Reviews

Region and KFF QA staff may be assigned responsibility for conducting a special QA review that may be based on concerns related to decision-making and/or service provision. The need for a special QA Review may be identified by DCF Region or Circuit Administration or KFF Management. When necessary, KFF and DCF will work cooperatively to complete these reviews.

Client complaints may surface at the local level, both internally at KFF or DCF. Regardless of where the complaint is received, KFF works to resolve the complaint by reviewing the information in the complaint, gathering factual information regarding the circumstances of the case and situation and reviewing the situation to determine if appropriate action was taken to resolve the issues. At times, case summaries are required to provide a "full picture" of the case beginning with the service initiation date through the current date, including the events related to the issues in the complaint. From this summary, a formal written response is provided to the complainant. When possible and appropriate, many complaints are resolved with telephone calls, email correspondence, and letters rather than detailed summaries. This process has led to several teachings and learning experiences focused on improving the quality of casework and services to children and families.

KFF responds to other discretionary/targeted reviews in a manner like that of the complaint review process. When a request for information is received, the Chief Executive Officer (CEO) processes the request to determine who the best respondent would be within KFF. In most instances, the FSC Supervisor reviews the case to gather factual information regarding the circumstances of the case and provides a summary of the information in the format requested. There are times however, when this may not be the most appropriate approach and KFF conducts a QA review of the case or cases and reports on the findings. With either approach, the lessons learned lead to improved case management skills and improved quality of care.

Critical Life, Health, or Safety Threat to a Child

If a critical life, health, or safety threat to a child is identified during any QA or other review activity, it is immediately addressed by KFF. When a QA reviewer determines there is a threat to the child's life, health or safety a Request for Action Form is completed and documents the unresolved concerns and case specific and demographic information. The completed form is routed to the FSC, FSC Supervisor, Program Director, and Chief Operations Officer (COO). The FSC Supervisor and FSC immediately begin working toward resolution of the issue of concern. When the issue is resolved, information is submitted to the QA Manager. If there is a need to react immediately to ensure the child is safe, KFF and/or the QA reviewer completing the form ensures the appropriate immediate action is taken, i.e. calling law enforcement, calling 911, calling the FSC to ensure the situation is addressed immediately, etc. KFF will then either approve the actions taken or re-submit the form to the FSC supervisor and FSC for additional information or follow-up. This process continues until the issue is satisfactorily resolved.

Collaboration with DCF Quality Management

KFF QA staff will participate in quarterly meetings and trainings (contingent on availability of funding) with DCF Quality Management staff to collaborate on federal and state quality assurance initiatives.

Psychotropic Medications

The KFF QA Department is responsible for monitoring and assisting in ensuring that the KFF Psychotropic Medication for Children in Out-of-Care policy and procedure is being followed for all children in out-of-home care.

Florida Safe Families Network

Through FSFN and Mindshare Data Mining and Analytics, KFF's Family Services Counselor supervisors continually assess FSFN data accuracy and completeness of data by regular review of case specific information and reports. Mindshare and reports, including but not limited to, Children Active Receiving In-Home or Out-of-Home Services; AFCARS Foster Care Errors; Fingerprints, Birth Verification, and Photographs; and Removal Placement Exceptions Listings are reviewed by the supervisors regularly. Review and correction (if necessary) of FSFN data, has been incorporated into the supervisory review process.

To ensure accuracy of placement information, the Support Services Program Manager enters all placement changes into FSFN.

Local Schedule/Meetings

DCF Contract Manager Quarterly Monitoring
Purpose: Monitor DCF contract performance
Frequency: Quarterly
Participants: DCF Contract Manager

Subcontract Monitoring
Purpose: Review performance of sub-contractors
Frequency: Based on Risk Assessment
Participants: Subcontract staff and Business Operations Unit Staff

Community Based Care Partnership Meetings
Purpose: Focus on KFF's contractual performance
Frequency: Every other month
Participants: KFF and DCF staff

Clay Action Coalition Meetings
Purpose: Information sharing
Frequency: Monthly
Participants: Partner agencies

Clay Safe Net Meetings
Purpose: To coordinate/discuss community resources
Frequency: Monthly
Participants: KFF and the faith-based community

School Social Workers/CBHC/KFF/CPI Meetings
Purpose: Joint training and agency updates
Frequency: Yearly
Participants: School Social Workers, Clay Behavioral Health Center, KFF, and DCF Child Protection Investigators (CPI)

Dependency Court Improvement Program
Purpose: Discuss ways to improve and strengthen the dependency court process
Frequency: Quarterly meetings
Participants: Judge, Magistrate, attorney's, Children's Legal Services, DCF CPI's, and Guardian Ad Litem

Community Alliance
Purpose: Oversight of CBC agencies and providers, and advocacy on issues relevant to children and families in Northeast Florida.
Frequency: Every two months
Participants: Members of the community, local schools, county government, courts, and law enforcement

KFF Board Meeting
Purpose: Provide governance and oversight of KFF
Frequency: Every two months
Participants: Professional and non-professional volunteers who are representative of Clay County

Supervisor's Meeting
Purpose: Information sharing, team building, system improvement and training
Frequency: Monthly
Participants: KFF Supervisors and Staff

Leadership Meeting
Purpose: Information sharing, team building, system improvement and training
Frequency: Every 2 months
Participants: KFF Managers

CLS Meeting
Purpose: Information sharing, team building, system improvement and training
Frequency: Monthly

Participants: CLS and KFF Case Management Staff

DCF/CBHC
Purpose: Information sharing, team building, system improvement and training
Frequency: Quarterly
Participants: KFF, DCF, CBHC

Barrier Breakers Meetings
Purpose: Sharing of information to brainstorm the removal of any barriers to services for children and families
Frequency: Monthly (Internal) Every 2 months (External Partners)
Participants: KFF, DCF, CLS, Community Providers

Quality Improvement Team Meetings
Purpose: Sharing of RSF, FLCQI & PIP monitored case findings to improve practice
Frequency: Bi-Monthly
Participants: KFF Staff (COO, Program Directors, FSC's, Supervisors, and Quality Assurance Staff)

Quality Parenting Initiative for Foster Parents and Kinship Caregivers
Purpose: To bridge the gap between the caregiver and the parents and provide support to foster parents and kinship caregivers
Frequency: Monthly
Participants: KFF, Foster Parents and Kinship Caregivers

Separated Sibling Staffing's
Purpose: Address any barriers to placing siblings together
Frequency: Monthly
Participants: KFF

CLS & KFF Meetings
Purpose: Staff upcoming court cases for the week
Frequency: Weekly
Participants: CLS & KFF

Placement Stabilization Staffing's
Purpose: Address any barriers/challenges within the placement in efforts to reduce disruptions.
Frequency: Weekly
Participants: KFF/Foster Parents

Permanency Staffing's
Purpose: To identify the cases that can move forward with permanency or address any barriers/challenges that may be causing the delays

Performance and Contract Measures

KFF collects and reviews data on performance indicators and outcome measures on a monthly, quarterly, and annual basis.

The following areas will be monitored utilizing the DCF Contract Measures and Community Based Care Lead Agency Scorecard:

- Rate of abuse per 100,000 days in foster care
- Percent of children who are not neglected or abused during in-home services
- Percent of children who are not neglected or abused after receiving services
- Percent of children under supervision who are seen every 30 days
- Percent of children exiting foster care to a permanent home within 12 months of entering care
- Percent of children achieving permanency in 12 months for children in foster care 12 to 23 months
- Percent of children who do not re-enter foster care within 12 months of moving to a permanent home
- Children's placement moves per 1,000 days in foster care
- Percent of children in out-of-home care who have received medical services in the last 12 months
- Percent of children in out-of-home care who have received dental services in the last 7 months
- Percent of young adults in foster care at age 18 who have completed or are enrolled in secondary education, vocational training, and/or adult education
- Percent of sibling groups where all siblings are placed together

A DCF Contract Oversight Unit Desk Review of KFF was completed in June 2020. The completed report is pending.

The draft report identified the following areas as needing action:
a. Percent of Children not maltreated within six months of termination of Family Support
b. CQI Item 3, Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care
c. Percent of Children exiting to a permanent home within 12 months of entering care
d. CQI Item 6, Did the agency make concerted efforts to achieve permanency
e. Children receiving dental care
f. Adoption delays that are negatively impacting concerted efforts to achieve timely permanency

The draft report also identified the following opportunities for improvement:

a. Percent of Children who don't re-enter care within 12 months of moving to a permanent home
b. CQI Item 5, Did the agency establish appropriate permanency goals for the child in a timely manner
c. CQI Item 12B, Did the agency make concerted efforts to assess the needs of and provide services to parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the families Relative/Non-Relative Caregiver Support

d. Re-evaluation of previously identified opportunities for improvement to ensure performance has increased as projected. If intended results are lacking, new measures to improve should be researched and implemented.

A corrective plan will be developed when the report is completed.

Subcontract Monitoring

Subcontractor compliance, service delivery outcomes, and quality and timeliness of services are continually monitored utilizing reports submitted by the subcontract provider.

The KFF Business Operations Unit monitors each KFF subcontractor. The frequency of monitoring is based on a risk assessment and other agencies monitoring the provider. The review may consist of an on-site visit or desk review. The quality and adequacy of services delivered by each provider is reviewed using one or a combination of three methods: record review, interview, and observation. The monitoring tools utilized assess compliance with federal, state and other requirements associated with the service purchased.

When possible, and to reduce duplication effort, monitoring results may be drawn from other monitoring conducted throughout the year from other sources. KFF transmits the results of the on-site subcontract monitoring, its findings and recommendations, and any other relevant information by preparing and submitting a written report to the provider.

Strategic Planning

KFF and its Board of Directors have adopted the key measures identified in KFF's contract with DCF as their strategic objectives. DCF strategic objectives are reported utilizing the CBC Scorecard. The CBC Scorecard is reviewed by the KFF Senior Management Team and provided to the Board of Directors. In addition, KFF considers it important to obtain diversity in its funding source. This diversification has been added as goal in the agencies strategic planning.

Accreditation

KFF is accredited with the Council for Accreditation (COA) through October 31, 2022. COA accredits child welfare agencies through the evaluation of the entire organization and all the services provided by the agency.

Risk Identification and Management

Risk Identification and management is one of the key components of KFF's CQI process. The system for the identification of risk includes a review of documents and reports during quality improvement reviews and/or meetings. The review may include an examination of the following activities:

- Incident Reporting
- Customer/Client Satisfaction Data
- Grievances
- Other Third-Party Reports
- DCF Data/Reports
- Criteria-Based Outcome Studies and Presentations
- Quality Improvement Reports and Minutes
- Legal Complaints and Suits
- Outside Requests for Client Records
- Exit Interviews
- Placement Stability
- Runaway Trends/Improvement and Follow-Up
- Emergency Preparedness Planning

Annually, in cooperation with the Board of Directors, Management will conduct an internal assessment of overall risk. The assessment will include a review of the following:

- compliance with legal requirements, including licensing and mandatory reporting
- laws, fiscal accountability, and governance
- insurance and liability
- health and safety, including use of facilities
- contracting practices and compliance
- staff training regarding areas of risk
- volunteer roles and oversight
- research involving program participants and other clients' rights issues; security of information, including client confidentiality
- financial risk
- fundraising
- conflict of interest
- employment practices
- interagency collaboration

Risk Managers

The Risk Managers are responsible for the implementation and coordination of risk management activities. To carry out these activities, the Risk Manager will have access to staff and all necessary agency data. The designated Risk Manager for KFF is the COO for risk management activities related to programs, the Chief Financial Officer for risk management activities related to finance and building maintenance, the Human Resources Manager for risk management activities related to human resources, the Information Technology Manager for risk management activities related to Information Technology and the CEO for risk management activities related to administration and building safety. The QA Department will assist the Risk Managers with risk management activities.

Depending on which areas each Risk Manager or designee is responsible for, the following functions are included within the risk management process:

- Review and follow-up of incident reports, if indicated.
- Coordinate quality improvement and risk management activities.
- Communication with the insurance carrier by notifying the carrier of serious incidents, potential claims, and litigated claims. Perform follow-up on incidents and potential claims as requested by the carrier.
- Serve as a resource person to KFF staff on risk management issues/questions.
- Provide reports for the CEO and Board of Directors.
- Coordinate, plan and implement educational programs designed to minimize the risk of harm to clients, staff, and facilities.

The following areas are highlighted as key components of the risk management process.

Client/Customer Satisfaction
Client/customer satisfaction reporting processes has been developed in which clients, community stakeholders, foster parents, courts, service providers, etc., have a formal vehicle in which to express their concerns and complaints. Survey findings are summarized and reported to the Risk Manager responsible for that area of risk.

Incident Reporting
An incident reporting process has been developed in which all significant events that are outside of normal business practices or have caused or could cause harm to other or the facility are reviewed and investigated (if applicable). Incident reports are tracked and trended and reported to the Risk Managers.

Client Outcomes
Client outcomes are reviewed and monitored through the CQI process. Data analysis from FSFN management reports and other data tracked by KFF are shared with the Risk Managers.

Exit Interviews

Results of interviews with children exiting a licensed substitute care family or shelter home after a minimum of 30 days are reviewed by the applicable Risk Manager.

Immunity

No staff member or individual reporting, providing information opinion, or counsel shall be liable in a suit for damages based upon such reporting, provided that the individual acted in good faith and with a reasonable belief that said actions were warranted in connection with, or in furtherance of the functions of the risk management program.

Confidentiality

Documents and records that are a part of the risk management process, and contain client identifying information, shall be maintained in a manner consistent with KFF's Notice of Privacy Practices.

Employee Practices

Comprehensive risk management requires the review of the following human resources practices. They include:

- Job Descriptions
- New Employee Orientation
- Worker's Compensation
- Civil Rights Compliance Requirements
- American's with Disability Act
- Protected Health Information (HIPPA)
- Employee Safety
- Family and Medical Leave Act
- Sexual Harassment
- Equal Employment and Affirmative Action
- Employee Satisfaction
- Employee Theft
- Wrongful Termination
- Disaster Planning

Client Records

Policies and procedures related to the maintenance of client records have been developed. Records will be kept in accordance with state, federal, and Council on Accreditation requirements. Access to records will be limited to authorized staff and external monitors. Release of Information procedures will meet all state and federal requirements and will be monitored through the quality improvement process.

Client Rights

To comply with federal and state law regarding access to services regardless of race religion, gender, ethnicity, age or disability, procedures have been developed to address the following:
- Client Rights and Responsibilities
- Grievance Process
- Client Confidentiality/Privacy Practices

How the Results of CQI Activities Will Be Used

KFF is an agency focused on making changes and doing what is in the best interest of the children and families we serve. KFF's QA and CQI system allows KFF to recognize and react to emerging trends at various levels within the agency and within the system of care. KFF works closely with DCF to review performance and ensure the safety, permanency and wellbeing of children is prioritized. As trends are identified, action plans are put in place. As stated previously, KFF reviews performance at the case level (through performance and case file reviews). By looking at issues at the case level, problems are identified, and action steps implemented to address both case specific and systemic issues. Improvements occur for the individual children and families served, and over time for the system of care. This approach allows for an ongoing analysis of established trends and quality improvement activities and/or provides an opportunity to update existing action plans. In addition, this approach allows for the establishment of new action plans to address emerging trends identified through the various QA activities.

Quality Improvement Activities Completed and Planned

After compiling and analyzing the data and results from FY 2018-19, QI activities/training/coaching related to the following areas were addressed during FY 2018-19:

- Safety Planning and Safety Services Training/Mentoring on-going
- Caregiver Protective Capacity Training/Mentoring on-going
- Quality Home Visit and Documentation Training/Mentoring on-going
- FAST Team Implementation-completed and on-going
- IPT Implementation-completed and ongoing

After compiling and analyzing the data and results from FY 2019-20; KFF will continue to focus on activities/training/coaching related to the following areas in FY 2020-21:

- Family Engagement to include incarcerated parents (completed and on-going)
- Strengthen formal and informal risk assessments (completed and on-going)

- Needs and Services to Parents (completed and on-going)
- Safety Management/Safety Planning coaching/technical assistance (completed-ongoing)
- Tip sheets are being developed for staff regarding policy and performance
- Child & Family Involvement in the Case Planning (completed and on-going)
- Supervisor Consultations and Follow up (completed and on-going)
- Enhance documentation in FSFN (completed and on-going)
- Medical/Dental tracking procedures developed in collaboration with the Data, Analyst and Project Manager, the Nurse Care Coordinator and Senior Leadership to include weekly reports of progress (completed and on-going)
- Permanency Staffing's are being held monthly (completed and on-going)
- Placement Stabilization Staffing's are being conducted to address any barriers/challenges within the placement in efforts to reduce disruptions (completed and on-going)
- KFF has partnered with Casey Family Foundation in efforts to identify areas of strength and areas needing improvement within the agency and to address any systemic barriers. Workgroups are being developed to work strategically with leadership and staff in efforts to improve the system and further enhance quality case work. Specifically, a Rapid Reunification/Permanency Workgroup was created to review cases at 30/60/90 days to see if permanency can be achieved sooner. (on-going)
- Adam Walsh checks are being requested at the beginning of the cases for parents and potential safety monitors in efforts to ensure that home studies are completed timely. (on-going)
- The Quality Assurance Department implemented Quality Roundtables for all case reviews. Staff that was involved with the case during the period under review are required to attend. The staff is given the opportunity to provide information and feedback regarding the case as well as the overall review process as it relates to the review items and any systemic barriers that may exist. The Quality Roundtables are tracked by the Quality Assurance Department.
- The Quality Assurance Department implemented a "shadowing" process of all Performance Improvement Plan (PIP) reviews to enlighten staff on the process of the PIP reviews and gives them the opportunity to provide feedback and lessons learned throughout the process. This includes shadowing the case participant interviews.
- The Quality Assurance Department developed a "Quality Home Visit" tool and tracking system. The Quality Assurance Department utilizes a random sampling of in-home and OOH cases each quarter and contacts caregivers by phone to inquire about home visits and to address any systemic barriers as needed.

In addition to the activities listed above; KFF will continue to monitor improvement in the CFSR systemic factors listed below that were deemed an "area needing improvement" by the Children's Bureau.

- **Item 19**: Statewide Information System: KFF Family Services Counselor Supervisors along with Children's Legal Services, Placement Coordinator, Program Support Supervisor and REVMAX will continue to monitor timely entry of goals, status, placements and demographic characteristics of every child in the statewide information system.
- **Item 20:** Written Case Plan: The FSC will meet with the parents and child(ren) to discuss the case planning process. The parents will be invited to attend the Case Transfer Staffing in person or by phone. Parents will be invited to attend the Case Planning Conference that will occur on the same day as the arraignment and include the parents' counsel, parents, GAL program, GAL attorney, KFF and CLS attorney. The parents are noticed of this date/time at the Shelter Hearing by the court.
  A training will be provided to supervisors with an emphasis on Supervisory Consultations related to the adequacy of initial and ongoing case planning.
- **Item 23:** Termination of Parental Rights: Children's Legal Services and KFF's Judicial Program Director and Adoption Supervisor continues to monitor the timeliness of the TPR petitions, TPR requirements including TPR appeals.
- **Item 24:** Notice of Hearings and Reviews to Caregivers: KFF has worked with Children's Legal Services to develop a Caregiver Notification Letter that provides the caregiver with the name of the CLS attorney that is assigned to the case and notification of court hearings and case staffing.
- **Item 28:** Foster and Adoptive Parent Training: KFF will continue to reassess the PRIDE program, utilize the internal Quality Foster Parent Workgroup and enhance the training provided.
- **Item 29:** Array of Services: KFF's COO will continue to be actively involved in the statewide Service Array Workgroup to address specific service array issues.
- **Item 32:** Coordination of CFSP Services with Other Federal Programs: Will continue to utilize the established process through KFF's REVMAX department and services that are coordinated through DCF. REVMAX will continue to meet monthly to discuss Medicaid within the Child Welfare System.
- **Item 34**: Requirements for Criminal Background Checks: The Program Director for foster care/ adoptions will continue to monitor to ensure that federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children. This is done on all judicial cases which includes the adoption placement home studies.
- **Item 35:** Diligent Recruitment of Foster and Adoptive Homes: KFF will continue to recruit foster homes utilizing the QPI standards in recruitment and utilize the recruiter position as well as the foster parent liaison staff position for recruitment activities.
- **Item 36:** State Use of Cross-Jurisdictional Resources for Permanent Placements: The KFF ICPC-OCS Liaison/KFF Program Support Supervisor continues to monitor the timeless of completing incoming ICPC and OCS home study requests. The KFF ICPC-OCS Liaison/KFF Program Support Supervisor also monitors outgoing ICPC and OCS home study requests to ensure timely follow up with other states and counties as needed.