

Quality Service Review (QSR) and System Improvement Plans (SIP) Division of Family Services - VDSS

Attachments:

- **Template for System Improvement Plan**
- **Critical Outcomes Report & Crosswalk with QSR Indicators**

OVERVIEW

Description of the Child Welfare Quality Review

The quality review approach of the Division of Family Services is based in a philosophy and practice of continuous quality improvement and is accountable to the principles of the Virginia Children's Services Practice Model. These principles include;

- Belief that all children and youth deserve a safe environment
- Belief in family, child and youth-driven practice
- Belief that children do best when raised in families
- Belief that all children and youth need and deserve a permanent family
- Belief in partnering with other to support child and family success in a system that is family-focused, child-centered and community based.
- Belief that how we do our work is as important as the work we do.

All continuous quality improvement initiatives require a cycle with the following elements:

- **Define:** Gather information about the problem or issues that includes policies, processes, procedures, services, measures and outcomes.
- **Measure:** Assessment of measures and outcomes and analysis of how the application of established policies, processes, procedures of the organization contribute to the outcomes.
- **Analyze:** Identification of gaps in performance and then identification of issues to change or improve to address the gaps. Address whether issues are systemic, organization specific, personnel or staffing.
- **Improve:** Develop a clear plan for implementation including strategies, action steps, identification of persons responsible, target dates, overall plan completion date and defined method for how and when performance change will be monitored.
- **Continue:** Track effectiveness over time of these action steps and if improvement is not as expected continue to modify the process.

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.

PROCESS

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.
- 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 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)
- Templates and instruction are attached and 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.

A System Improvement Plan should include: specific solutions, action steps with timeframes and measurements of outputs and outcomes applicable to the Plan. Components of the SIP include:

1. **Opportunity** – After review of the QSR report, Critical Outcomes Report and Safe Measures, identify 1-3 areas or issues for improvement and the possible causes for the identified issues.
2. **Solution** – For each issue identified, select solutions to be implemented. Solutions may be both immediate and long-term. List the action steps needing to occur in order to achieve the identified solutions and identify timeframes for achievement.
3. **Measure** – Determine what is to be measured to indicate completion and success for each issue. Measurement may be put in outputs & outcomes.
4. **Reporting** – Document ongoing activity and status of the Action Plan to determine completion or any necessary adjustments. Progress is to be reported to VDSS on an annual basis.

System Improvement Plan – Action Plan Instructions

After review of the QSR report, Critical Outcomes Report and Safe Measures, identify 1 to 3 areas or issues to address to improve practice. For each issue, develop an Action Plan addressing four sections: Opportunity, Solution, Measures and Reporting. Address the items listed in each section to cover the desired content of the SIP.

❖ **OPPORTUNITY**

Opportunity Identification

- What is the challenge/issue?
- What is behind the issue?
- How often does it occur?
- What agency processes and work units are involved and or impacted by this issue?
- What do existing Safe Measures and Critical Outcomes Reports indicate about this issue?
- Where do Safe Measures and Critical Outcomes Reports data fall in relation to state performance/targets?

Possible Causes

- What are the identified causes of the identified issue?
- What is/is not occurring in practice that is leading to this issue?
- What changes can be considered in the process that could impact the identified opportunity?
- What barriers may exist?

❖ **SOLUTION**

Selected Solutions to Opportunity Statement

- Identify the selected solution(s).
- What will change as a result of implementing this solution?
- How does the solution link to and impact established Safe Measures and Critical Outcomes Reports?

Action Planning (these items should be detailed in provided template)

- List the action steps necessary in a logical order to achieve the identified solution. For example what step should be done first, second, etc.
- Identify who should complete each step or take responsibility to ensure it is completed.
- Determine when each step will be completed. For example, how long will it take in days, weeks, months?
- Determine when the total Action Plan for this identified issue is projected to be completed.

❖ **MEASURE**

Outputs – the results of activities/practices

- Outputs may include the number of activities completed, number of staff participants involved, number of cases with new forms, etc. Outputs are the efforts expended to change practice.
- Consider how these activities and changes in practice will be documented to indicate improved practice?

Outcomes – a level of performance to achieve

- What will be different as a result of this Action Plan?
- What outcome measures will be reported on?
- Look at current performance and set targets to determine the goal for changes in practice.

❖ **PROGRESS REPORTING**

This section of the Action Plan is to be used to document ongoing activity and status of the Action Plan. Ideally this should be used on a quarterly or six month basis to document completed activities and adjust dates for activities still in progress. Use of this Progress column will aid in the reporting on an annual basis to VDSS the status of your Action Plans.

- Detail activity for action item since initial or most recent report.
- What has been accomplished and is the action step complete?
- If the action item is not complete, develop new target dates.
- At this point in reporting on the action plan do steps need to be added, removed, or revised?

Critical Outcomes Report Summary & Crosswalk with Quality Service Review Indicators
Division of Family Services, VDSS - March 2011

LDSS Name
Date of Plan/Date of Progress Report
Agency Contact Person

___ Quarter 1 (due April 15)
___ Quarter 2 (due July 15)
___ Quarter 3 (due October 15)
___ Quarter 4 (due January 15)

Action Plan for Identified Issue

Selected Solution	Steps to be Taken	Person Responsible	Time Frame	Measurements	Progress

Critical Outcomes Report Summary & Crosswalk with Quality Service Review Indicators
Division of Family Services, VDSS - March 2011

COR Category	COR Measure	Quality Service Review Indicators	
		Child & Family Status	Practice Performance
Transformation Outcomes	% of discharges to permanency	4. Permanency	2. Teaming 5. Long Term View 6. Planning Process
	% congregate care placements	3. Living Arrangements	7. Planning for Transitions & Life Adjustments 8. Resource availability
	% family-based placements	2. Stability 3. Living Arrangement 4. Permanency	1. Engagement 2. Teaming 3. Cultural Awareness & Responsiveness 5. Long Term View
	% kinship placements	9. Parent & Caretaker Functioning	6. Planning Process 10. Maintaining Quality connections
	% of foster care worker visits	4. Permanency	4. Assessment and Understanding 9. Intervention Adequacy 11 Tracking and Adjustment
CFSR Outcomes	% of reunifications within 12 months	1. Safety 2. Stability 3. Living Arrangement 4. Permanency 9. Parent & Caretaker Functioning	1. Engagement 2. Teaming 3. Cultural Awareness & Responsiveness 4. Assessment and Understanding 5. Long Term View 6. Planning Process 7. Planning for Transitions & Life Adjustments 8. Resource availability 9. Intervention Adequacy 10. Maintaining Quality connections 11. Tracking and Adjustment
	% re-entered within 12 months of reunification		
	% of adoptions within 24 months ³		
	% of children in care 24+ months discharged to permanency		
	% of children in care < 12 months with 2 or fewer placements		
Safety Outcomes	% of children with founded complaints with no recurrence	1. Safety 9. Parent & Caretaker Functioning	4. Assessment and Understanding 8. Resource availability 9. Intervention Adequacy 11.Tracking and Adjustment
	% of CPS Ongoing contacts made	1. Safety	4. Assessment and Understanding 9. Intervention Adequacy 11.Tracking and Adjustment
	% of attempted/completed contacts made within response priority	1. Safety	