KidsFirst
OF FLORIDA

Annual Performance & Quality Improvement Plan
FY 2021-2022

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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.

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

Child and Family Services Review (CFSR)/Continuous Quality Improvement Reviews (CQI)

The CFSR and CQI 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 review tool focuses on twenty-one items (includes subsections) related to the child outcomes of safety, permanency, and well-being (outlined in table 1.1 below). These file reviews can be file only reviews or "in-depth" (includes case participant interviews).

The sample for OOH CQI's is 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. The In-Home sample is 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.

Currently Kids First of Florida completes five out of home (OOH) CQI case reviews and three in home CQI case reviews each quarter *(sample size can vary)*. The period under review for a CQI review consists of a "rolling" one year period. To catch data entry errors, the QA Manager completes a final review of all cases reviewed and analyzes the data to identify possible trends, effective practices, and areas of concern. The CQI data is analyzed and sent to the Department of Children and Families and is monitored by the contract manager for compliance purposes. The case findings are debriefed with the case manager and supervisor. The debriefing is utilized as a mentoring/coaching discussion in efforts to improve performance.

It should be noted that beginning in the Q1 FY 21-22, Quality Office gave discretion to the Community Based Care Centers to determine if they wanted to continue completing CQI reviews. Kids First of Florida chose to continue these reviews for purposes of performance evaluation and monitoring as it relates to contract monitoring as well continued practice using the CFSR tool. This will continue for the foreseeable future. *It should be noted that these reviews will be in addition to any Quality Office mandated reviews. Due to the Office of Quality being a newly developed entity; the focus is primarily on getting the QO staff trained, and policies and procedures implemented prior to developing a standardized structure as it relates to the collaboration with the Community Based Care Centers. As a result, each quarterly activity for CBC's (including KFF) in FY 21-22 and possibly into FY 22-23 will vary (to include sample sizes of different reviews).*

Table 1.1

Item #	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

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.

CFSR/Florida Performance Improvement Plan & CFSR Round 4 Prep

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 addressed areas needing improvement from the CFSR findings including the systemic factors. The State of Florida successfully completed the PIP in the second quarter of 2020-2021. The state of Florida is on track to begin CFSR Round 4 at some point during FY 2023-2024. Prep work for the upcoming CFSR Round 4 will begin in FY 21-22 beginning with CFSR Practice Reviews being completed side by side with the Quality Office.

Life of Case Review: Ongoing Services

Background: section 402.715 of Florida Senate Bill 1326 establishes a department wide Quality Office to ensure that the Florida Department of Children and Families and its contracted service providers achieve high levels of performance. Under the Quality office, the Department will assess the overall health of the child welfare system, by circuit, using grading criteria established by the department. An element of this will include data from the quality case reviews.

Purpose: to measure the quality of child welfare practice more effectively, the Florida Department of Children and Families uses the Life of the Case Review Instrument. The LOC quality case review helps evaluate child welfare practice throughout the entire time a family is involved with the Department and/or subcontracted agencies. These reviews are completed throughout the life of the case—meaning from the initial stages of an investigation throughout any ongoing services provided to the family. This occurs at regular intervals throughout the case. The sample stratification and the review itself is conducted by a Quality Office reviewer. The CBC is notified once the first review interval is completed.

Once KFF is notified that a case has been selected for a LOC review by the Quality Office, the Quality Assurance coordinator reviews the case and meets with staff regarding the findings. Afterward, the QA coordinator also continues to review the case at intervals, through closure. These occur prior to the Quality Office intervals in efforts to impact safety, permanency, and well-being in real time.

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/Barrier Breaker 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

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 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
g. Percent of Children who don't re-enter care within 12 months of moving to a permanent home
h. CQI Item 5, Did the agency establish appropriate permanency goals for the child in a timely manner

i. 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
j. Relative/Non-Relative Caregiver Support
k. 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 was developed and continues to be monitored by the contract manager.

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.

<u>Immunity</u>

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.

<u>Confidentiality</u>

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.

<u>Employee Practices</u>

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.

Local Practice Trends in response to RSF and Florida CQI data

KFF's quality improvement process appears to work well. After compiling and analyzing the data and results from FY 20-21 improvement activities were implemented (referenced below)

Ongoing coaching/mentoring by the Quality Assurance Department as it relates to:
- Family Engagement to include incarcerated parents
- Strengthening formal and informal risk assessments
- Needs and Services to Parents and children
- Safety Planning coaching/technical assistance
- Child & Family Involvement in the Case Planning
- Supervisor Consultations and Follow up
- Enhanced documentation in FSFN
- Quality Assurance has improved the case consultation process that is held between the case manager and the supervisor in efforts to mentor and provide written and oral feedback to allow for a better understanding of the "big picture" of how day to day practice and policy ultimately impacts the federal outcomes Florida seeks to achieve as a system of care

Continuous Quality Improvement Activities:

Systemic

- KFF is assigned as secondary to the case immediately (at shelter). KFF has enhanced the case transfer packet process to include a joint agreement (DCF/KFF) on the checklist and process, through review of the packets, as well as trained

backup staff for packet review. The case transfer process has been enhanced to include the Child and Family Services Review (CFSR) "checklist" to ensure packets are complete.

-Staff are continuously provided with one-on-one mentoring sessions as well Learning Circles that center around quality case work as well as low performing areas by the supervisors, program directors and the Quality Assurance Department.

- KFF continues to focus on improving the partnership with CLS including communication; court preparation; Conditions for Return; revised forms; implementing CFOPs and legislative changes. CLS court prep occurs on a weekly basis with staff, supervisors, and the judicial program director.

- MindShare is utilized by the Quality Assurance Department as well as staff. Program Directors and supervisors use Mindshare regularly as supervisory tools for multiple purposes (caseloads, visits, medical/dental, human trafficking, etc.). Case managers also utilize the MindShare mobile app to enter notes from the field to employ the most efficient use of time. New MindShare enhancement training is provided to staff as necessary.

-Case Managers send status letters to the court regarding visitation schedules for the parents which will show the efforts made by the agency to ensure that visits between the children and the parents are taking place (specifically regarding relative placement).

-Case Transfer Staffing (CTS) Log/tracker- Once the list of sheltered cases is received from DCF, the Quality Assurance Supervisor or designee will review the cases in FSFN and prepare the Case Transfer Checklist Form.   The Quality Assurance Supervisor or designee will send out an invite to the designated attendees via email and facilitates the staffing virtually via Zoom. Upon completion of the staffing the facilitator documents the CTS in FSFN Meeting tab and uploads the Case Transfer Checklist Form that contains recommended follow-up for the child protective investigator as well as the case manager (if applicable).   The judicial program director, supervisor and case manager will follow-up on recommended tasks that are outstanding to ensure they are completed.

Safety

- Senior Management and supervisors continually monitor the "Children Seen-Not Seen" FSFN report that the KFF Data, Policy and Project Analyst sends out three times a week to ensure that visits take place every 30 days in the child's residence.
- KFF continues to utilize the Integrated Practice Team (IPT). The goal of the IPT meetings is to brainstorm ideas and create immediate and/or innovative solutions to assist the family to prevent a removal.

Permanency

Foster Parents:

- KFF created an internal workgroup consisting of placement, financial, FSC, FSCS, and Senior Leadership Staff. This group will address Quality Foster Parent Pre-Service Training, Effective Communication with Foster Parents (expectations, events, support etc.); Consistent Enhanced Placement Rates; Increased Quality Ongoing Training and Enhancing the current Foster Parent Support Group.

- KFF has increased the social media communication with foster parents as well as developing a group email.

- Foster Parent Association Face Book Page was developed in November 2018 and continues to be utilized by foster parent and for recruitment purposes.

- FAPA (The Clay Chapter of the Foster and Adoptive Parent Association) Foster & Adoptive Parent Association is up and running and being led by a Foster Parent and overseen by KFF's Program Support Coordinator.

-KFF launched a Faith Based Community Initiative in February 2020 in efforts to recruit new foster parents and provide support to existing foster parents and kinship relatives, i.e., babysitting services and informal safety supports *(currently on-hold due to Covid 19 pandemic.)*

- LFC (Licensed Foster Care) Master List- purpose is to identify which foster homes will have an open bed(s) and approximate dates. This captures any child exiting to a relative, non-relative or parent. This is reviewed with supervisors monthly.

- KFF has developed a Resource Guide for caregivers. KFF developed and implemented a Level 1 Licensing Program that provides holistic support services for those relatives & non-relatives that choose to participate. A licensing counselor is assigned to each relative/non-relative participating in the program.

Case Planning:

- KFF continues to utilize the Case Planning (CP) Conference that occurs on the same day as the arraignment. Case managers are discussing what case plans are and tasks with the parents and CLS (separately) ahead of the CP conference.

At the CP conference, KFF, parents, the parent's counsel, GAL attorney, and CLS attorney are all included in the discussions and case plan decisions.

Permanency/Placement:
-KFF holds placement stabilization staffing/s weekly to prevent disruption in placements, ensure additional services and supports are provided to foster parents with children who have emotional instability and behavioral issues due to trauma. Placement stabilization meetings are tracked and measured to monitor the number of placement disruptions/moves the child has, in addition to the types of services and supports provided to meet foster parent needs for stabilization. Also, KFF discusses placement stabilization during monthly permanency staffing/s.

-KFF utilizes the Placement Specialist to continue family finding in efforts to locate relatives as a possible placement.

- KFF hired an additional placement specialist position to prioritize children in foster care and separated siblings and will assist with looking for relatives when a FAST case is failing or if more safety monitors are needed.

-Permanency Staffing/s continue to be held monthly to identify the cases that can move forward with permanency or address any barriers/challenges that may be causing the delays. KFF Staff as well as Children's Legal Services (CLS) attends these meetings and foster parents are also encouraged to attend.

- KFF is conducting separated sibling staffing's where the agency discusses the barriers to place siblings together. In addition, KFF has increased the recruitment and licensing efforts to focus on foster families that can foster sibling groups and the importance of keeping siblings together.

- Meetings with the GAL program to build relationships and acknowledge their important role in achieving permanency for children.

- KFF collaborated with the Quality Office to develop a Permanency Workgroup

Adoption:
-KFF began utilizing contracted providers to complete adoption home studies to ensure they are completed timely.

Well-Being

- KFF revised the tracking process for medical/dental performance measures.   Weekly data reports are sent out by the KFF Data, Policy and Project Analyst and are reviewed and monitored by Senior Leadership as well as supervisors to ensure the performance measures are met.