



Understanding Metrics that Guide our Practice

*Developed by the NC Division of Social Services
in partnership with the Family and Children's
Resource Program, Jordan Institute for Families,
UNC-CH School of Social Work*

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Welcome

- Introductions
- Your materials



Today's Agenda



I. DJ's story

II. CQI Overview

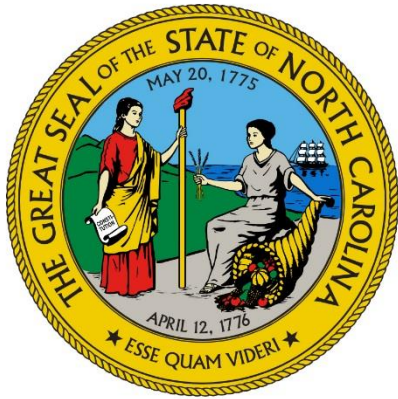
III. Safety, Permanency, Well-being

IV. Review County Excellent Data

V. County involvement in Child Welfare CQI moving forward

DJ's Story



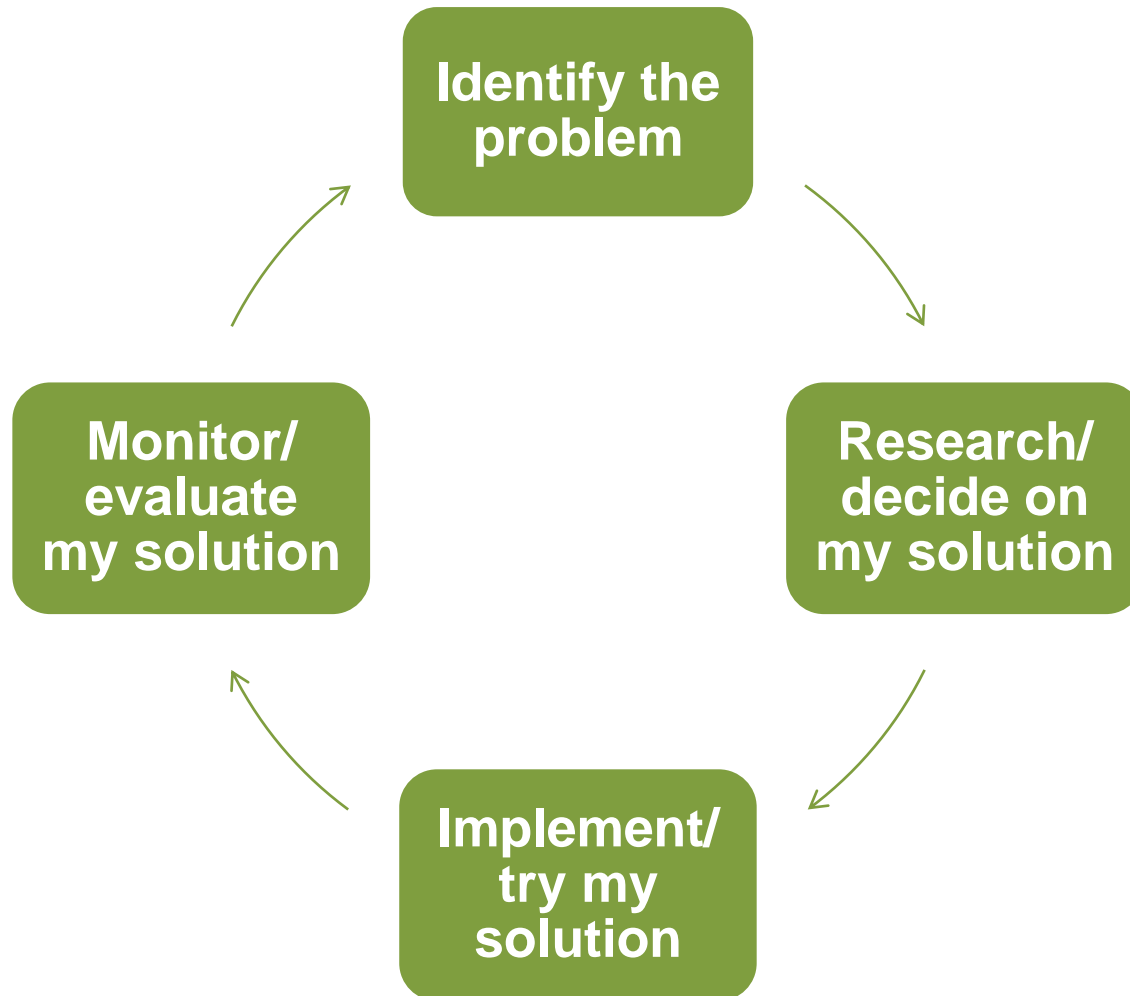


CQI Overview

Continuous Quality Improvement Defined

- Using information to understand, evaluate, and improve programs
- Information can be quantitative (numbers and charts) or qualitative (case reviews, focus groups, surveys)
- A standard process with clear steps that can be followed and repeated as needed
- Many different models and examples of this process

The Continuous Quality Improvement Cycle



How Foundations Support CQI

Without successful teaming, it may be difficult to hold each other accountable when assessing the effectiveness of change.

Identify the problem

Without accurate data/information, how do we know what is working and what needs improvement?

**Monitor/
Evaluate my solution**

**Research/
Decide on my solution**

Without managing change effectively, staff may be resistant to trying something new.

**Implement/
Try my solution**

Without effective communication, you might not hear from key team members on possible solutions.

Quality Assurance (QA) Defined

- Often confused with CQI
- Using a set of standards to assess current performance
- QA informs agencies how they are doing compared to how they should be doing (based on standards)
- QA identifies needed change;
CQI is how to design and implement change

Tools for Quality Assurance

STATEWIDE

- ✓ Child and Family Services Review
- ✓ State CQI Record Review
- ✓ Aggregate Statewide Data

COUNTY LEVEL

- ✓ County Case Reviews using
 - ✓ OSRI
 - ✓ State Record Review Tool
 - ✓ County Case Review Tool

COUNTY-LEVEL QA TOOL

On-Site Review Instrument (OSRI)

- From the Children's Bureau CFSR
- Designed to assess in-home and foster care cases
- Guides the case review process
- Includes questions definitions and instructions

STATEWIDE AND COUNTY-LEVEL QA TOOL

State CQI Record Review

Purpose	Ensure conformity with federal and state law, rule, and policy.
Goal	Improved compliance with law, rule, and policy will likely lead to better OSRI results and better outcomes for children and families.
State Record Review Tools	Standardized record review tools based on law, rule, and policy for daily work in child welfare CPS Intake, CPS Assessments, CPS In-Home, and Permanency Planning. The tools are updated every 6 months as policy/law change. The number of records reviewed in each county is based on statistical significance.

COUNTY-LEVEL QA TOOL

County Case Reviews

Purpose	Ensure conformity with federal and state law, rule, and policy or key focus areas identified by the county.
Goal	Improvement in services provided will likely lead to better compliance with law, rule, and policy, better OSRI results, and better outcomes for children and families.
County Case Review Tools	<p>Varies by county. Examples include:</p> <ul style="list-style-type: none">• OSRI Review Tool• State Record Review Tools• Modified Program Monitoring Review Tools• County Created

STATEWIDE AND COUNTY-LEVEL QA TOOL

Quantitative Data

Purpose	Aggregate data at county and statewide levels allows for broader evaluation of agency practice.
Goal	Identify strengths, concerns, and trends in the data that lends to learning the story behind the data to improve outcomes for children and families.
Data Sources	<ul style="list-style-type: none">• NC FAST Dashboards• Client Services Data Warehouse (CSDW)• XPTR• Management Assistance Website• State Mandated Data

Quantitative Data Come from 3 Places

Legacy	<p>Pulls data based on information documented in Sessions/CICS. Examples:</p> <ul style="list-style-type: none">• DSS-5027, 5104, 5094, 5095
NC FAST	<p>Pulls data based on information documented in NC FAST. Examples:</p> <ul style="list-style-type: none">• Intake, Assessment, In-Home, Permanency Planning, Adoption, ICPC
County Documents	<p>County manually tracks data and submits to NCDSS. Examples:</p> <ul style="list-style-type: none">• Child Welfare Staffing Survey, Child Welfare Data Workbook, Substance Affected Infants

Example of Assessment Data

All Maltreatment Dispositions by Social Worker

Assessment SW	Services Needed		Services Not Recommended		Services Provided		Services Recommended		Substantiated		Unable to Locate		Unsubstantiated	
	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage
SW 1	17	29.31%	27	46.55%	6	10.34%			1	1.72%			2	3.45%
SW 2	38	33.04%	19	16.52%	19	16.52%	8	6.96%	18	15.65%			10	8.70%
SW 3	21	34.43%	11	18.03%	2	3.28%	4	6.56%	14	22.95%			6	9.84%
SW 4	30	23.26%	64	49.61%			1	0.78%	6	4.65%	1	0.78%	24	18.60%
SW 5	18	29.03%	24	38.71%					4	6.45%			15	24.19%
SW 6	37	23.27%	62	38.99%					25	15.72%			33	20.75%
SW 7	12	10.43%	54	46.96%	3	2.61%	5	4.35%	22	19.13%			14	12.17%
SW 8	14	14.00%	48	48.00%					18	18.00%			15	15.00%
Countywide Sum:	204	22.27%	339	37.01%	37	4.04%	21	2.29%	119	12.99%	1	0.11%	157	17.14%

Example of Assessment Data

County: Excellent

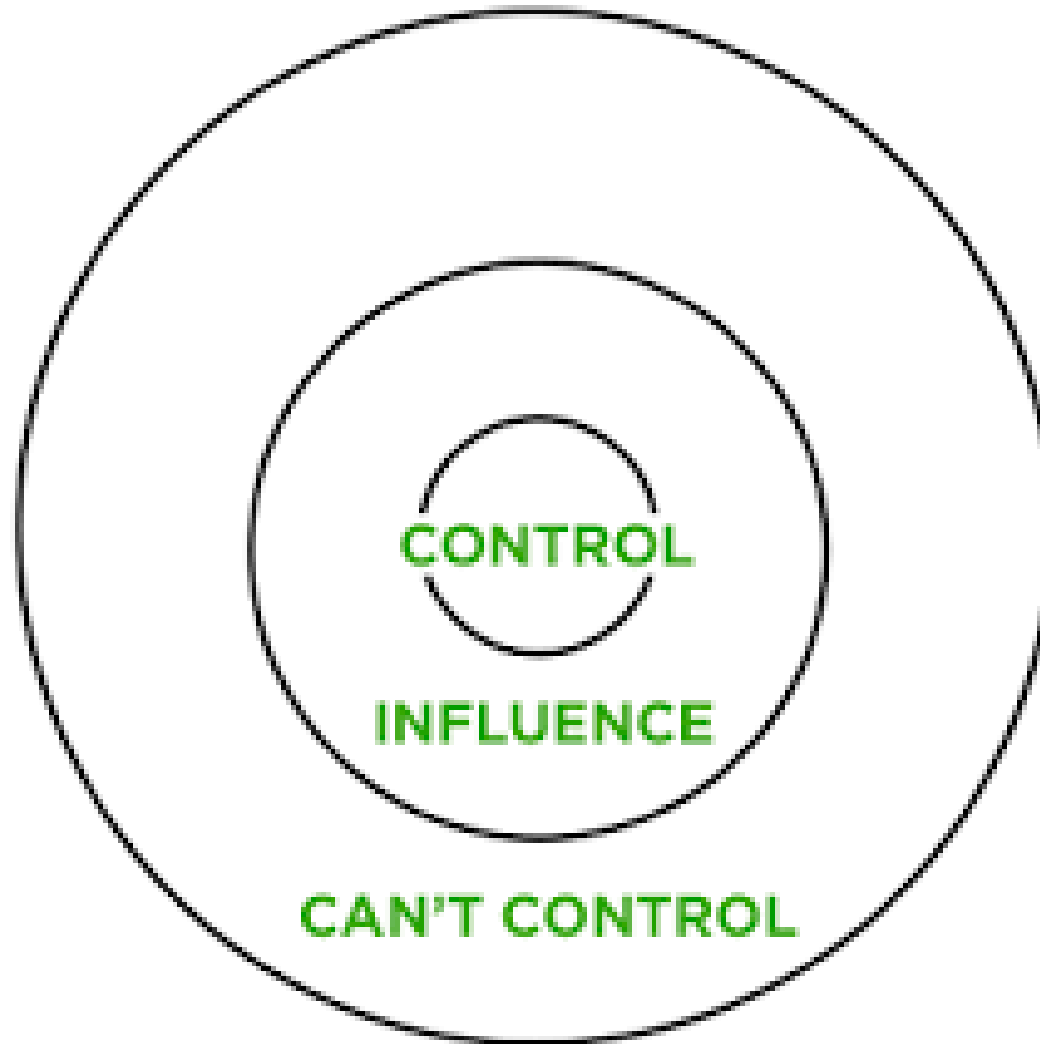
Closed Cases: Avg & Median Days Open

Assessment SW	Days Open		Applicable Cases
	Average	Median	
SW 1	61.37	67.00	20
SW 2	49.29	44.00	31
SW 3	59.29	57.00	24
SW 4	39.33	34.00	39
SW 5	66.39	60.00	21
SW 6	37.04	27.00	36
SW 7	46.52	45.00	33
SW 8	72.45	63.00	23
Unweighted Average:	51.5859		

Open Cases: Avg & Median Days Open

Assessment SW	Days Open		Applicable Cases
	Average	Median	
SW 1	65.36	59.50	15
SW 2	50.00	26.00	5
SW 3	53.31	56.50	13
SW 4	23.00	23.00	1
SW 5	121.00	93.00	2
SW 6	58.20	29.00	5
SW 7	51.63	49.00	8
SW 8	65.67	55.00	13
Unweighted Average:	61.01956		

CQI Circle of Control



Technical Assistance Defined

- **Technical assistance (TA):** The process of providing targeted support to an organization to ensure consistent implementation of policies and practices leading to positive child welfare outcomes.
- **Indirect:** Points to media or tools for use such as a manual, web-based resource, or a staff member of another organization.
- **Direct:** Provide coaching or consulting services, personally applying expertise to a problem or area of need.

The Role of Training in TA

- Develop a knowledge base
- Develop and enhance a skill set
- Provides continuous learning
- Emphasizes an agency's values, norms, and expectations

How QA, CQI, AND TA WORK TOGETHER

State Child Welfare Staff

QA

- OSRI record reviews conducted by OSRI staff
- Case record reviews conducted with CQI consultants and Children’s Program Representatives

Root Cause Analysis

- Available informally with CPRs
- Structured discussion with CQI consultants and CPRs in components of CQI process

How QA, CQI, AND TA WORK TOGETHER **State Child Welfare Staff** *(continued)*

Research and decide on a solution

- County conducts on their own
- Available informally with CPRs
- Structured discussion with CQI Consultants and CPRs in components of CQI process

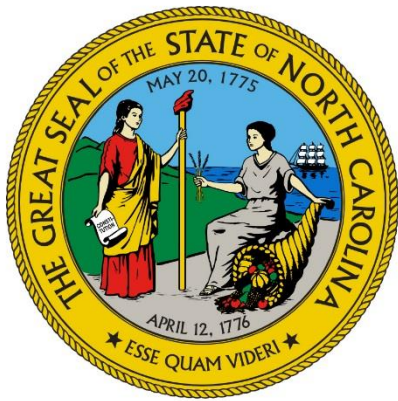
Use TA to implement the solution

- NCDSS offered trainings/webinars/publications
- County completed trainings
- Onsite CPR support

How QA, CQI, AND TA WORK TOGETHER **State Child Welfare Staff** *(continued)*

Monitor and Evaluate (often through QA)

- Driven by the CQI process
- Conducted at the county level by county QA team, supervisors, social workers
- Conducted by CPRs and CQI consultants during on site visits



Safety, Permanency and Well-being

Safety, Permanency, and Well-Being Indicators

Child welfare focuses on three areas:

Safety

Permanency

Well-Being

Safety Outcomes

- 1. Children are first and foremost protected from abuse and neglect.
- 2. Children are safely maintained in their homes whenever possible and appropriate.

Targets	1. By 2022, the North Carolina child welfare workforce will be able to assess current risk and the potential of future harm to ensure child safety more accurately and objectively.
	2. By 2024, North Carolina will implement its chosen practice model to support consistent practice in all 100 counties.
	3. By 2024, North Carolina will create a comprehensive framework for to strengthen families and prevent child maltreatment. ⁹
	4. By 2024, North Carolina will develop a process to identify where and how racial and other disproportionality and disparities are occurring in its child welfare system and implement strategies to reduce these inequities.

Safety Measures

- **Timely Initiation**
 - **CYA 004**
 - **NC FAST Timely/Untimely Report**
 - **Record Reviews**
- **Risk and Safety Assessment**
 - **Record Reviews**
- **Repeat Maltreatment**
 - **UNC Management Assistance Website**
 - **CSDW**
- **Reduce Rates of Substantiated Maltreatment**
 - **Record Reviews**
 - **CYA 006**

Permanency Outcomes

1. Children have permanency and stability in their living situations.
2. The continuity of relationships and connections is preserved for children.

Targets

1. By 2024, North Carolina will decrease the number of days it takes a child to exit foster care and increase the rate of permanent exits (reunification, adoption, guardianship, custody).
2. By 2024, to increase placement stability, North Carolina will recruit and maintain a sufficient pool of ethnically and racially diverse families who have the skills needed to provide ongoing safety and meet the needs of children served by the foster care program.
3. By 2024, North Carolina will maximize the use of the Foster Care 18 to 21 Program for eligible youth.

Permanency Measures

- **Achieving Permanency Plans Timely**
 - UNC Management Assistance Website
 - CSDW
 - Record Reviews
- **Timely Court Hearings**
 - JWISE data
 - Record Reviews
 - Community partners
- **Placement Stability**
 - UNC Management Assistance Website
 - CSDW
 - Record Reviews

Well-Being Outcomes

1. Families have enhanced capacity to provide for their children's needs.
2. Children receive appropriate services to meet their educational needs.
3. Children receive adequate services to meet their physical and mental health need.

1. By 2022, North Carolina will strengthen its health and well-being programming in CPS In-Home Services.

2. By 2024, North Carolina will ensure all children and youth in foster care will receive an initial health screening by a medical professional to identify health needs and be referred to medical, dental, and behavioral health services as needed.

3. By July 2024, North Carolina will ensure the Medicaid Tailored and Specialty Plans are informed by and reflective of the needs of child welfare-involved children and youth.

4. By 2024, North Carolina will ensure its practice model and workforce development program are trauma-informed.

Targets

Well-being Measures

- **Health Screenings**
 - Record Reviews
 - Community Care of NC Virtual Health database
- **Trauma Screenings**
 - Record Reviews
 - Project Broadcast data

Workforce Development

- 1. Stable Child Welfare Workforce that is well-qualified, trained, supervised, and supported to promote positive outcomes for children, youth and families.**

Targets	1. By September 2021, North Carolina will complete a caseload and workload study for each area of child welfare services to identify appropriate caseloads and workloads for administrators.
	2. By August 2022, North Carolina will re-institute a stipend support program for both MSW and BSW students into its Child Welfare Education Collaborative.
	3. By 2024, North Carolina will implement a workforce development program, to include training, coaching, leadership development, and skills assessments, that addresses racial equity and inclusion and builds the capabilities of the child welfare workforce at state, regional, and county levels to improve outcomes to children and families.

Workforce Development Measures

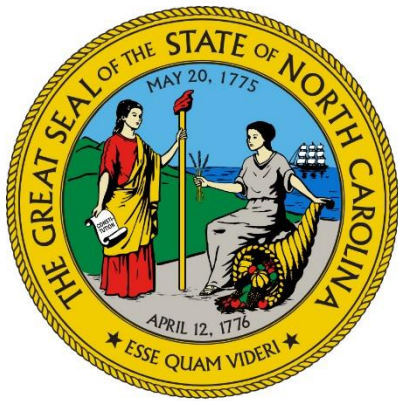
- **Supervision**
 - Record Reviews
 - 360 Evaluations
- **Training Attendance History**
 - ncswLearn.org
 - CQI record reviews

Child Welfare State Outcome Goals

- The County will initiate 95% of all screened-in reports within required time frames.
- For all children who were victims of maltreatment during a 12-month period, no more than 9% received a subsequent finding of maltreatment.
- The County will ensure that 95% of all foster youth have face-to-face visits by the social worker each month.

Child Welfare State Outcome Goals (2)

- The County will provide leadership for ensuring that 41% of children who enter foster care in a 12-month period are discharged to permanency within 12 months of entering foster care.
- The County will provide leadership for ensuring that of children who enter foster care in a 12-month period who were discharged within 12 months to reunification, kinship care, guardianship, or adoption, no more than 8.3% re-enter foster care within 12 months of their discharge.
- The County will provide leadership for ensuring that of all children who enter foster care in a 12-month period in the county, the rate of placement moves per 1,000 days of foster care will not exceed 4.1%.



County Excellent Activity

Activity: Review County Excellent Data

- Review “CFSR Round 3 Measures”
- Discuss at your table
 - What is County Excellent doing well?
 - Is being better than state standards and similar counties good enough?
 - What areas are you concerned about?
 - What would you want to focus on learning more about (highest priority)?

Digging Deeper

Consider all possible factors that could be contributing to the problem:

- Client factors
- Service factors
- Organizational factors
- Community factors

KEY QUESTION

How do children who do well on this outcome differ from those who do poorly?

Follow the Threads to a Hypothesis

We want to use the information we have about the problem to make an educated guess about the *root cause*.

We do this by:

- Identifying *patterns* in the data
- Engaging others in a *dialogue* about patterns
- Brainstorming and developing a *hypothesis*



Activity: Digging Deeper

Review the additional data for County Excellent.

- What stands out to you?
- What factors might be contributing to placement stability in County Excellent?
- What is your hypothesis as to the root cause (or causes) of the problem?
- Where might you want to make improvements?

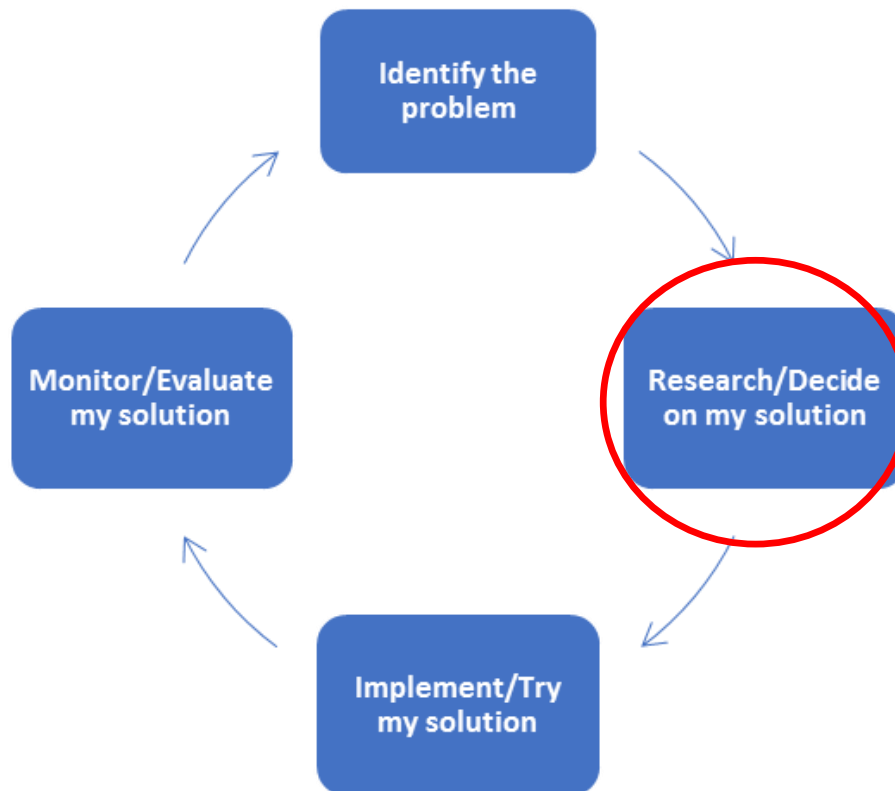
SUMMARY OF STEP 1

Identifying the Problem

- Look at data around the problem.
- Ask questions to understand the *story* behind the data.
- Dig deeper to uncover the root cause of the problem.

CQI STEP 2

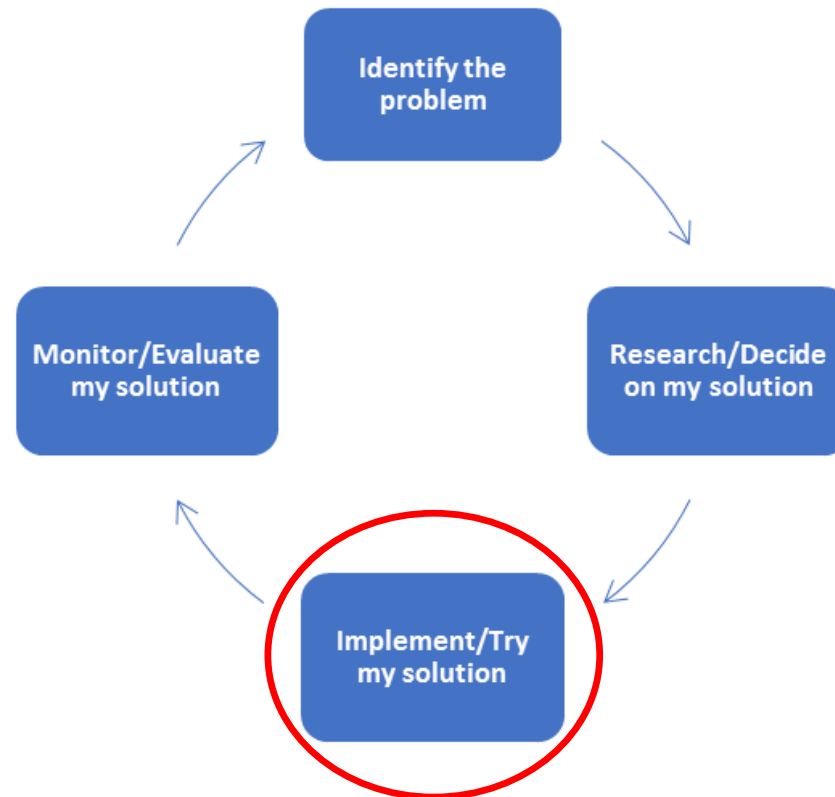
Research the Solution



Key Questions

- 1) Have we tried to address this problem before? If so, what did we do?
- 2) What did we learn from these past attempts? What worked? What didn't?
- 3) Are there interventions out there that target our desired outcome/population?
- 4) Have these interventions been evaluated?
- 5) Does my team have the *capacity* to implement this solution?

CQI STEP 3 Implementation



It's All About Implementation!

- Why have we seen little change in outcomes despite applying evidenced-based practices to our work?
- **HOW** we do something is as important as **WHAT** we do!
- Successful child welfare practices are useless without an effective and sustainable way to deliver them—implementation.
- Change will not happen overnight.

• **Fixsen & Paine, 2009**

Implementation Drivers

The key components shown to support effective implementation.

Staff Selection

Training

Coaching

Evaluation

Facilitative Administration

Systems Intervention

3 Phases of Implementation

Getting Ready

What does it take to be ready to implement new practices or improve existing ones?

Doing

What does it look like when we are putting new practices into place or improving existing ones?

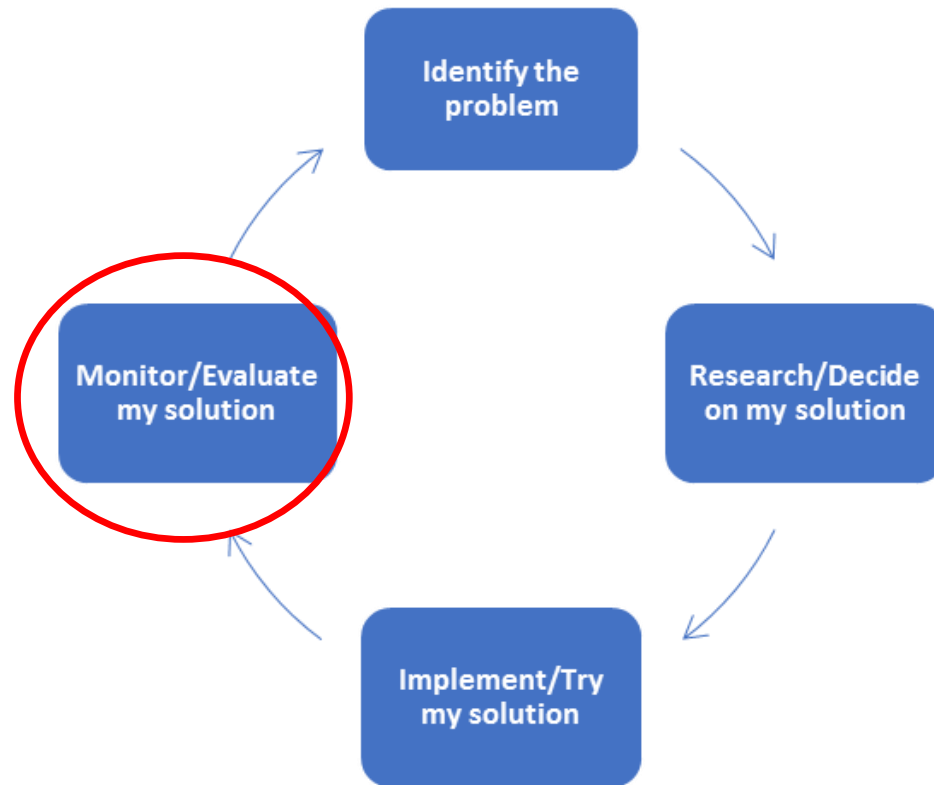
Sustaining

How do we ensure new practices become the way we do business?

• **Fixsen & Paine, 2009**

CQI STEP 4

Monitoring & Assessment of Solutions



Evaluating the Solution

KEY QUESTIONS

- Have we been implementing the new practice with *fidelity*?
 - compliance AND competence
- What is the *impact* of the new practice?
- Are children and families *better off*?



Determining Next Steps

- Poor fidelity & poor outcomes?
stop and adjust
- Good fidelity & good outcomes?
continue and/or expand
- Good fidelity & poor outcomes?
modify intervention



County Involvement in Child Welfare CQI Moving Forward

CQI training

- Using Data to Improve Practice and Performance
- Three day classroom course for supervisors program managers, QA/CQI staff and directors
- Register on ncswlearn.org

