

8000 Continuous Performance Improvement

The Department for Children and Families Prevention and Protection Services has leadership and ownership of a Continuous Performance Improvement (CPI) process which is applied consistently across the State. The process shall be utilized by state and provider staff at all levels as a systemic problem solving process and cycle of learning and improvement. The CPI cycle includes identifying and understanding the root cause of problems, researching and developing theories of change, developing or adapting solutions, implementation of solutions and monitoring and assessing solutions.

The functional components of CPI include data collection, data analysis and interpretation, communication and collaboration and support for sustainable CPI.

PPS shall maintain a CPI Procedure Handbook providing a comprehensive picture of CPI in Kansas Child Welfare. The handbook shall address CPI functions, activities and steps, annual training activities as well as the outcomes and standards reviewed on a regular basis.

Prevention and Protection Services (PPS) Continuous Performance Improvement staff shall be responsible for providing support and accountability for the structure, methodologies and administration of quality assurance and continuous performance improvement activities for the DCF Regions and Providers. Outcomes are reviewed at least quarterly by state and provider staff.

DCF Regions shall participate in Quality Assurance and Continuous Performance Improvement activities.

DCF Regions shall coordinate Continuous Performance Improvement activities with their Child Welfare Case Management Providers.

Standard case reads are conducted by the DCF Regional Offices on an ongoing basis and focus on the timeliness and accuracy of service delivery. Additional targeted case reads are conducted as required for policy compliance or continuous performance improvement projects.

Stakeholder meetings are organized at the case specific, community and statewide levels to involve customers and stakeholders in discussions about the delivery of Child Welfare services.

Residential/Group Home monitoring is conducted initially by the DCF Regional Offices and then annually by the Child Welfare Case Management Providers. Administrative Reviews are conducted annually by DCF/PPS.

A. Information systems, data collection and reporting:

The primary systems used for continuous performance improvement include FACTS, KIDS, KIPS, SCRIPTS and the Case Read Application.

PPS has processes in place to identify and address data quality issues which include the use of Federal Validation Utility program, a PPS Error and Reporting Correction process, and case record reviews for AFCARS elements in addition to other tools used by field offices to correct potential data entry errors.

PPS monitors federal requirements and guidelines related to AFCARS, NCANDS, CFSR data profiles, and NYTD through a review of information and utilization of quality tools for AFCARS and NCANDS.

PPS utilizes (not limited to) statewide stakeholder interviews, case specific stakeholder interviews, surveys, provider reports, statewide Management Information Systems (MIS) reports and standard and targeted case reviews to collect quantitative and qualitative data to assess performance and identify opportunities for improvement regarding systemic factors.

Outcomes data collection and reporting is standardized to provide consistency and enable comparison throughout the Agency on a statewide basis, by DCF Regions and Providers.

B. Method for establishing case read samples:

The case read sample for each program is derived from the respective case population that has been active during the last three months in a twelve month period under review. A “Stratified Random Sample” strategy is utilized to establish the sample size. The statewide population is broken out by DCF Region. The number of cases in the sample for each Region is proportionate to the number of cases in the total population for each Region. Cases are assigned a random ID number and randomly selected until the correct percentage for each Region is achieved.

The number of cases in the sample is set at a level sufficient to maintain statewide statistical validity. This level is established by consulting a table of recommended sample sizes from the DCF Office of Strategic Performance Management.

C. Analysis of outcomes:

Data are analyzed to determine the performance of processes, and to identify opportunities for improvement.

Opportunities for improvement will range from those that are systemic or statewide to those that are specific to DCF Regions, Child Welfare Case Management Providers or individual staff.

Standard CPI reports include (not limited to) national and state outcomes and indicators reported from the state MIS and case read system. In addition, providers draw upon their internal QA and performance improvement activities and information to enhance the PPS CPI process.

D. Training:

Training shall be provided to state and provider staff on an annual basis and will include (not limited to) the understanding of: the PPS CPI Cycle and structure, utilization of MIS outcomes reports, case read reporting application basics, data analysis, performance improvement project tools and techniques, spread sheet basics and orientation to individual case read instruments.

Training shall be offered to community stakeholders on the PPS CPI Cycle and structure and the availability and utilization of CPI reports.

E. Monitoring Contractor Performance:

To assess performance of the Contractor, the state will review and monitor accountability for child welfare programs through direct oversight, case read processes and administrative site visits. Case read and oversight activities are used to assess and improve the delivery of services to families. Results of case read and oversight activities may be published by DCF on the internet or in other public information material.

1. Poor performance on case read questions, nonconformities identified during an audit, not meeting the requirements of an administrative site review, or other sources identifying a significant or repeated problem impairing performance or compliance may lead to the implementation of a corrective action plan (CAP). If a problem is identified by DCF, the contractor shall develop a Corrective Action Plan (CAP) approved by DCF, to address the root cause of the issue and action steps to be taken to obtain improvements and prevent recurrence of the problem. Failure to meet CAP provisions shall require the Contractor to reimburse DCF for costs incurred in resolving the problem. The concepts of a CAP are:
 - a. Using clearly identified sources of data which identify problems that will be investigated.
 - b. Completing a root cause analysis to identify the cause of a discrepancy or deviation and suggest corrective actions to potentially prevent recurrence of a similar problem, or preventive action to ensure that discrepancies do not occur.
 - c. Implementing corrections to rectify the problem which is identified.

2. Monitoring Contract Outcomes: Contractor performance is also measured, in part, through contract outcomes. Contract outcomes include the national data standards for safety, permanency, and well-being. Performance based outcomes shall not be rewarded with monetary or other bonuses/awards for staff.

The contract performance year is the state fiscal year (SFY) July 1- June 30. Reports published may reflect both federal and state fiscal year periods.

If contract outcomes are not met at the completion of the first SFY of the contract, the contractor shall develop a Program Improvement Plan (PIP) approved by DCF to address unmet outcomes. The PIP shall include action steps to be taken to create improvements and demonstrate continued improvement for each unmet outcome. Failure of the Contractor to meet PIP requirements may result in liquidated damages.

The PIP will be developed for a period of 2 years, and individual outcome(s) will be deemed completed as successful when the outcome performance meets the negotiated improvement goals by the end of the SFY.

Failure of the contractor to meet the negotiated improvement goal(s) by the end of the SFY using year- end performance data may result in the termination of the contract. If negotiated improvement goals are not met a liquidated damage may be assessed for each outcome not met. DCF may withhold any damage amount from the July base payment in the year following the completion of the PIP. DCF may also impose liquidated damages if Outcomes/Standards are not met during the following year(s) of the contract.

8010 Conflict of Interest

DCF, CPI Case Review Staff shall have no direct contact, supervision, oversight or consultation for the cases they review. Case Review Staff shall not review or conduct third-party quality assurance on any case in which they participated or consulted in any way.

8020 Safety Concerns

Safety concerns identified by case review staff during the case review process shall be immediately communicated to the appropriate PPS Regional Administrator.

8200 Child Welfare Case Management Provider's Responsibility for Continuous Performance Improvement

Child Welfare Case Management Providers are responsible for working with the Prevention and Protection Services (PPS) Continuous Performance Improvement staff on Performance Improvement activities. The Child Welfare Case Management Providers shall:

- A. Participate in continuous performance improvement activities.
- B. Assure quality enhancement programs are comprehensive and on-going.
- C. Submit quarterly management reports.
- D. Participate in the Prevention and Protection Services Case Review program and in case reads.
- E. Provide access to case files as requested by the Regions for ongoing and targeted case reads.
- F. Participate in discussions about the results of regional case reads at the time of their completion. Child Welfare Case Management Providers shall review each case identified in the sample and reconcile findings with the DCF Region.
- G. Develop a Corrective Action Plan for approval by DCF if warranted by performance.
- H. Develop and submit for approval by DCF, a Program Improvement Plan if warranted by performance.

8300 Case Read Decisions

During the case read process, if there is disagreement on the scoring of a specific case read question that cannot be resolved, the Prevention and Protection Services (PPS) Regional PI staff will send a brief description of the disagreement to PPS Administration program staff with a copy to the Child Welfare Case Management Provider.

8400 Residential/Group Home Monitoring

All Residential/Group Home placement providers shall be licensed through DCF Foster Care and Residential Facility Licensing Division and meet the DCF/PPS Placement Standards and requirements in the Child Welfare Handbook of Client Purchases in order to obtain a provider agreement with DCF.

Implementing a new facility or modifying a provider agreement for an existing facility requires an onsite review conducted by DCF regional staff. Providers may initiate the process by contacting their DCF regional office.

A. Implementing a New Facility or Renewing/Changing a Provider Agreement:

1. DCF regional staff shall assess the need for the type of service requested for a new facility and/or a change in services listed in an existing provider agreement.
2. DCF regional staff shall provide information to the provider including a copy of the DCF Placement Standards, Child Welfare Handbook of Client Purchases and contact information for DCF Foster Care and Residential Facility Licensing Division.
3. DCF regional staff shall provide technical assistance relative to the DCF Placement Standards and Child Welfare Handbook of Client Purchases.
4. DCF regional staff shall collaborate with KDOC-JS if the facility wants to serve juvenile offenders and child in need of care youth.
5. DCF regional staff shall conduct an on-site review of the facility to ensure compliance with the Placement Standards and the Child Welfare Handbook of Client Purchases. The on-site review shall include a tour of the facility, review of policy and procedures, human resource files and staffing patterns using the site review instrument listed below. Ninety days after a new facility opens, or a change in services listed in an existing provider agreement is implemented, DCF regional staff shall return on site to review case records.
6. Each type of facility has a unique site visit review instrument. The types of facilities covered in this section include:
 1. Community Integration Program (CIP) (PPS 8400A)
 2. Emergency Shelter (PPS 8400B)
 3. Residential Maternity (PPS 8400C)
 4. Secure Care (PPS 8400D)
 5. Transitional Living Program (TLP) (PPS 8400E)
 6. Youth Residential II (YRC II) (PPS 8400G)
7. DCF regional staff shall provide technical assistance for compliance issues related to the Placement Standards and the Child Welfare Handbook of Client Purchases and provide a written site visit report of findings to the Provider.
8. The placement provider and DCF regional staff shall address any concerns prior to establishing a provider agreement. Program improvement activities for securing compliance shall be completed within 30 days.
9. The site visit report shall be maintained by DCF Regional Office who maintains the provider agreement and forwarded to the Provider.

B. On-going Monitoring:

The Child Welfare contractors for Family Preservation and Foster Care shall complete reviews annually. The purpose of the reviews is to maintain compliance with the DCF Placement Standards and Child Welfare Handbook of Client Purchases. The contractors shall provide reports containing the results of their on-site reviews to DCF on an annual basis.

8500 Administrative Reviews of Child Placing Agencies

The DCF Audit Division is responsible for assuring the Administrative Requirements outlined in the Reintegration/Foster Care/Adoption and Family Preservation contracts are monitored. Through annual on-site Administrative Site Visits, DCF Audit staff examine documentation provided by the Child Placing Agencies who provide contract services, and assess whether the Child Welfare Case Management Providers are meeting expectations. If expectations are not met, Corrective Action Plans are developed and tracked for completion.