

## Child and Family Services Policy Manual: Reference Information

### Continuous Quality Improvement

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#### Introduction

Child and Family Services Division (CFSD) promotes excellence in child welfare practice through commitment to a Continuous Quality Improvement (CQI) program. This program engages all levels of agency employees and stakeholders in identifying and targeting opportunities to improve services, processes and outcomes for the children and families we serve.

The foundation of CQI is the belief that people truly care about the work they do and strive to learn from experiences. CFSD seeks to create, innovate, and improve outcomes for children and families through teamwork in the CQI program.

The purpose and intent of the CQI Program is to target improvements to key operations and outcomes by utilizing data and fidelity reviews to:

- Improve the quality of casework,
- Improve outcomes for children and families,
- Increase local problem-solving, based on the principle that all staff are equipped to effect positive, ongoing and lasting organizational change,
- Improve processes towards efficiency,
- Track and monitor trends through more effective use of practice data and utilize identified trends to drive improvement initiatives and long term planning in the region,
- Track and monitor client, community and provider agency outcomes and partner with them to develop improvements,
- Increase the potential for organizational improvement by utilizing a multi-tiered feedback and input process for all staff within CFSD.

#### Defining CQI

CQI is the complete process of identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions. It relies on an organizational culture that is proactive and supports continuous learning. Most importantly, it is dependent upon the active inclusion and participation of staff at all levels of the agency, children, youth, families and stakeholders throughout the process.

A continuous quality improvement approach will allow us to measure the quality of services provided by determining the

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impact those services have on child and family level outcomes, and to measure the functioning and the effectiveness of processes and systems currently in operation.

#### **CQI Process**

The CQI process begins with a set of core outcomes, which typically define the central mission of our agency; keeping children safe and families strong. These outcomes will address child safety, permanency and well-being, family engagement, and services provided to children and families.

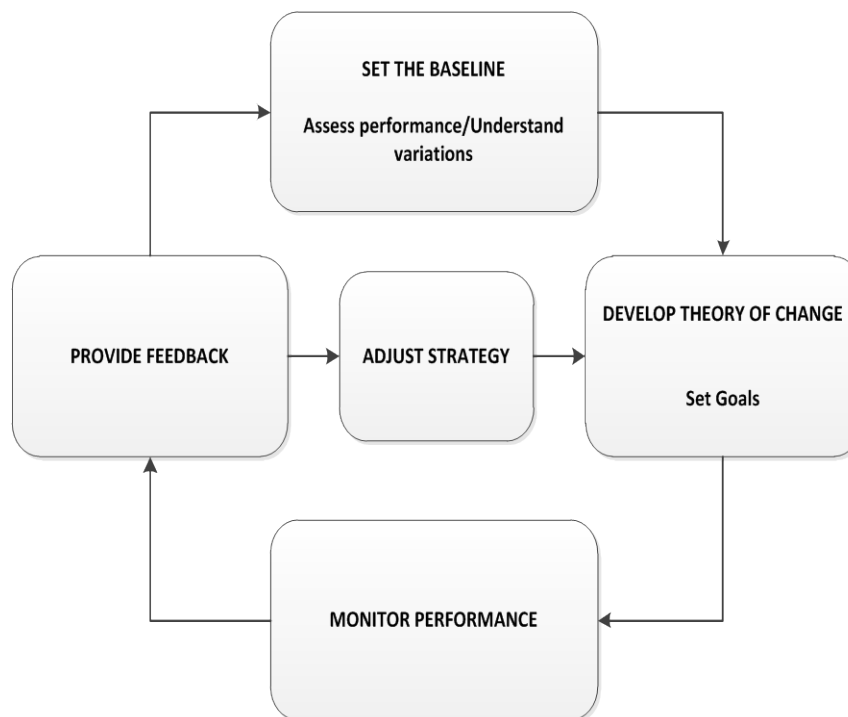
The CQI process involves a statement of performance or a baseline. The baseline refers to systematically gathered data that describes in current and historical terms how well the organization achieves the core outcomes. Baseline data can come from a variety of sources, including administrative data and case records.

Setting goals and deciding on a theory of change is the pivotal part of the CQI process. To the extent that an organization understands how well it accomplishes its goals, the CQI process implies continuous work to improve performance. Goals usually relate to a gap between current performance (baseline) and future performance (where we want to get to). The theory of change describes the steps the organization plans to take in order to close the gap. The steps may be organizational (fiscal, policy, etc) or practice-based (i.e. effective service models).

The last element of the CQI process involves monitoring and feedback. Monitoring provides a way to discern whether the intended changes are taking place whereas feedback refers to the distribution of information back through the system to key actors as part of a systematic effort to keep the stakeholders informed of Progress. Monitoring and feedback provide the information needed to understand whether system changes are working. When all the pieces are working together, the process will look something like this:

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There are Three Levels of CQI: the Field Office or County level, Regional Level, and State Level. This multi-level process allows for solutions to be generated and implemented by all levels of staff within the agency. Problems requiring input from succeeding levels of the agency can be advanced through the system in an orderly way that assures a commitment to problem solving and feedback. Improvements made by individuals, offices and regions will also be advanced up levels to ensure that the whole state can study and adopt those areas that will assist in improving their outcomes as well.

Regions will develop and provide to Management Team how they will integrate CQI and who they will invite to be a part of the CQI process. These regional plans will be incorporated into this plan as appendices.

CQI discussions, findings and recommendations/requests will be compiled at the Office/County level and made available for Regional Leadership Meetings. All discussions, findings and recommendations/requests from the Region will be made available for Quarterly Management Team

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Meetings. This cycle will ensure CQI is a continual, fluid process that is consistently looking at outcomes and implementing improvements at all levels within the agency.

All CFSD employees will participate in the CQI process and will be included to ensure that core issues are correctly identified and any approach chosen to address the issues is understood and achievable at all levels of the division.

### Data Sources

Data used to develop baselines will be compiled and distributed by the Data and Quality Assurance Unit in Central Office. Regions are encouraged to request data that relates to concerns/outcomes that they feel need to be addressed within their office/region. Data sources can include:

- MT ROM/CAPS Reports
- Fidelity Review Findings
- Waiver Data
- AFCARS, NCANDS, and NYTD Data

### Stakeholder Involvement

Stakeholder involvement in the CQI process is a critical component toward achieving targeted agency improvements. The Department is constantly seeking new and innovative ways to enhance collaboration with external stakeholders.

Stakeholders include:

- Advisory Board
- Resource Parents
- Children and Families served by CFSD
- Private Providers
- Contract Providers
- Community
- Courts
- Law Enforcement
- Child Advocacy Centers
- Community Advisory Boards
- Mental Health Centers
- Hospitals, Health Departments, and Medical Community