Tennessee Baptist Children's Homes

PQI Annual Report

2018 2019

Introduction

In June of 2019, TBCH underwent re-accreditation with the Council on Accreditation (COA), an international, independent, nonprofit accreditor of human services organizations. Our program services, administration and management, and service delivery received high marks across the board and praise from the site reviewers. However, the reviewers raised concerns in regard to the Performance and Quality Improvement (PQI) process.

In an effort to consistently pursue TBCH's core value of excellence, the organization has looked at each program and area to develop strategic goals and improvement plans for the future. The following reports show areas of strength as well as areas TBCH will be strengthening during the next three-year re-accreditation cycle with COA. TBCH pursues best practices through organization-wide involvement with PQI.

Council on Accreditation (COA) Standards

Administration and Management Standards

Ethical Practice   Financial Management
Governance   Human Resources Management
Performance & Quality Improvement   Risk Prevention & Management

Service Delivery Administration Standards

Administrative & Service Environment   Behavior Support & Management
Client Rights   Training & Supervision

Service Standards

Adoption Services   Family Foster Care & Kinship Care
Group Living Services

Outputs

Our outputs are simple numeric measurements of performance. The data is generally historical and does not indicate the quality of work being done in any area. Later in the PQI Report quality indicators are discussed and reviewed.
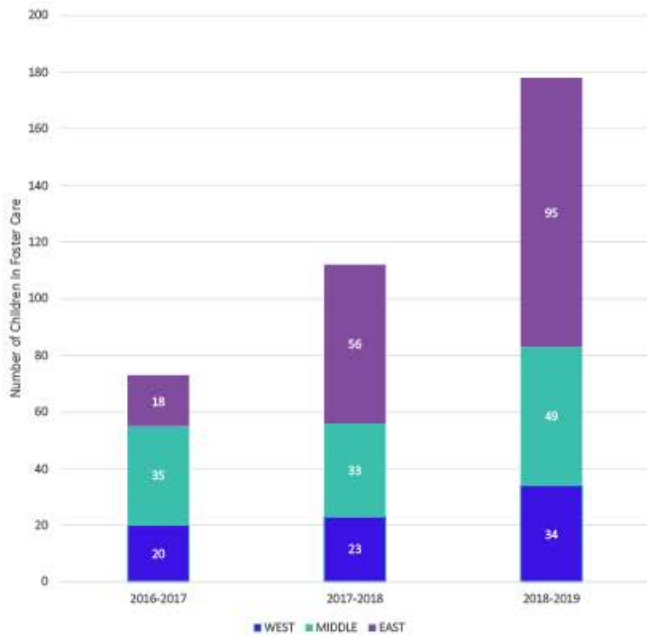
Number of Children in Foster Care 9/1/2016-8/31/2019

Analysis: TBCH has experienced growth in all regions from 2016-2019. This can be attributed to the increase in staff in Middle and East Tennessee. In 2018-2019 the program transitioned the Oakdale campus to foster care and increased case managers in East TN by two, allowing for an increase of 20 clients. Middle TN added a worker in Cookeville, TN and began a partnership with Lighthouse Christian Camp allowing for an increase of 10 clients.

Improvement Plan: Foster Care will add one more case manager per region over the next two years and transition the Kingsport campus in East TN (currently unused) to a foster home. This will allow for the program to grow from approximately 90 clients to 120 clients.
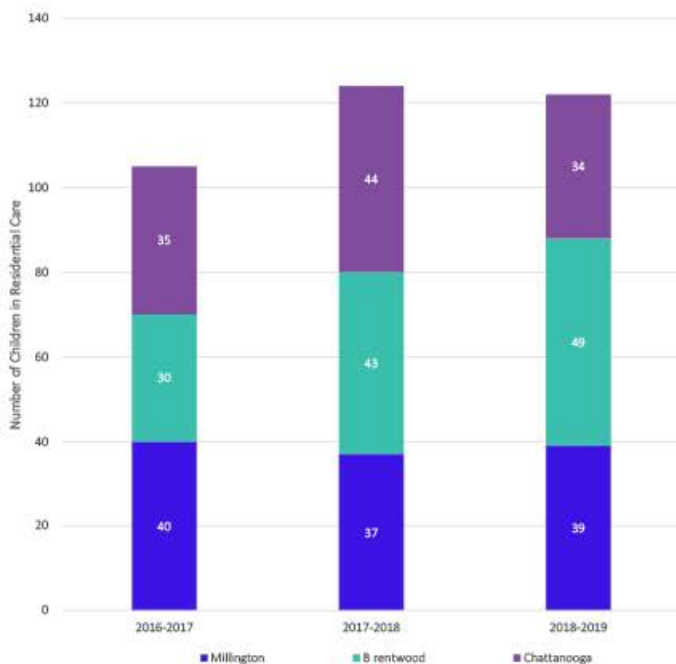

Number of Children in Residential Care 9/1/2016-8/31/2019

Analysis: TBCH uses data from KaleidaCare to track the number of clients monthly, quarterly and annually. The client's average length of stay and staff ratios have a major impact on the numbers of children in residential care. Approximately 22% of clients stay less than six months and over the course of the last three years there has been staff shortage on each campus due to houseparent illnesses and/or openings. The average days in care for all clients 2016-2019 is 406 days.

Improvement Plan: The CGAS results show the greatest gains for clients are seen between 360-540 days. The social work staff will be discussing ways to decrease the number of children who are discharged before 180 days. The team is discussing intake procedures, client orientation periods and early interventions to behavioral issues that have resulted in unplanned discharges. Once the team meets and data is analyzed as a team an improvement plan will be written and tracked quarterly. Currently, there is a meeting planned for October 16, 2019 to discuss these options.

Outputs
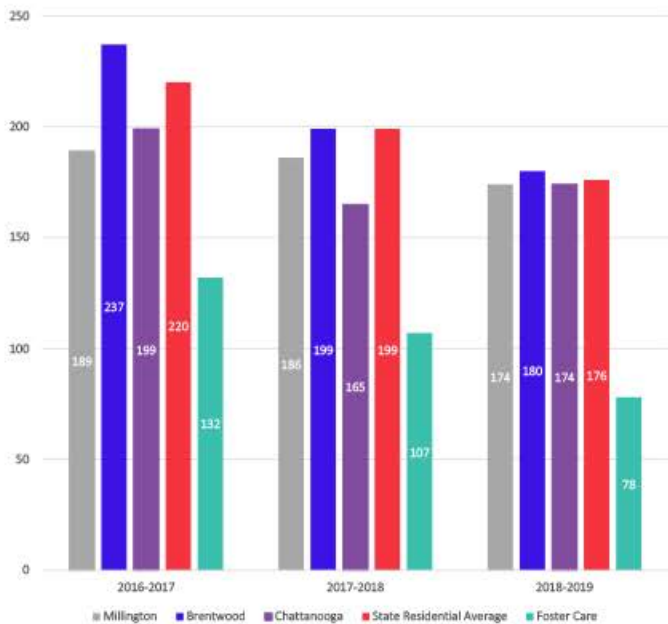
Cost of Care 2016-2019 (11/1 - 8/31 each year)

Analysis: TBCH continues to be fiscally responsible while continuing excellent care for clients. Increases in cost of care for the Chattanooga campus in 2018-2019 are mainly attributed to staffing shortages which limited the number of clients who could reside on campus for a period of time.

Improvement Plan: No plan needed at this time.

First Time Donors FYE 2017 vs. 2018
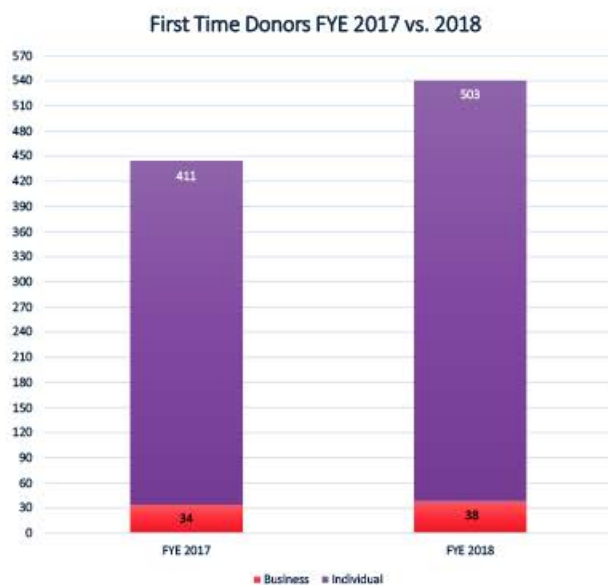
First Time Donors FYE 2017 vs. 2018

Analysis: TBCH continues to attract new individual and business donors each year. This report tracks the first gift given only and not recurring gifts. However, in FYE 2017 6.3% of first-time donors gave recurring monthly, quarterly and biannual gifts and FYE 2018 the number increased to 10%.

	FYE 2017:	FYE 2018:
Total amount of first-time gifts:	$123,376	$1,224,346*
Largest gift:	$10,000	$1,000,000
Average gift:	$227	$415*
Increase in giving:		81%*

*calculations do not include $1,000,000 gift

Improvement Plan: No plan needed at this time.

Outcomes

Outcomes indicate sustainable change that demonstrates our interventions have been successful with clients. Outcomes are measured on a quarterly basis and are more difficult to measure because of the subjective nature of measuring improvement. From 2016-2019, TBCH used the Children's Global Assessment Scale (CGAS) to monitor the progress in client functioning for residential and foster care clients. However, the foster care data was not entered into the database and was inaccessible to reviewers. CGAS provides a global measure of level of functioning in children and adolescents. The measure provides a single global rating only, on a scale of 0-100. In making ratings, evaluators make use of a glossary of details to determine the meaning of the points on the scale.

During the PQI process it was discovered the CGAS tool is more subjective and therefore does not provide reliable data. TBCH will be transitioning to the Children's Functional Assessment Rating Scale (CFARS) in November of 2019. TBCH has also put into place a method to retrieve the CFARS scores for clients in foster care and residential care.

TBCH has also only been measuring the CGAS scores and has not been monitoring the completion of program goals by clients. TBCH has put a system in place to measure the percentage of goals completed by clients in residential and foster care.

Percent Change in CGAS Based on Length of Stay
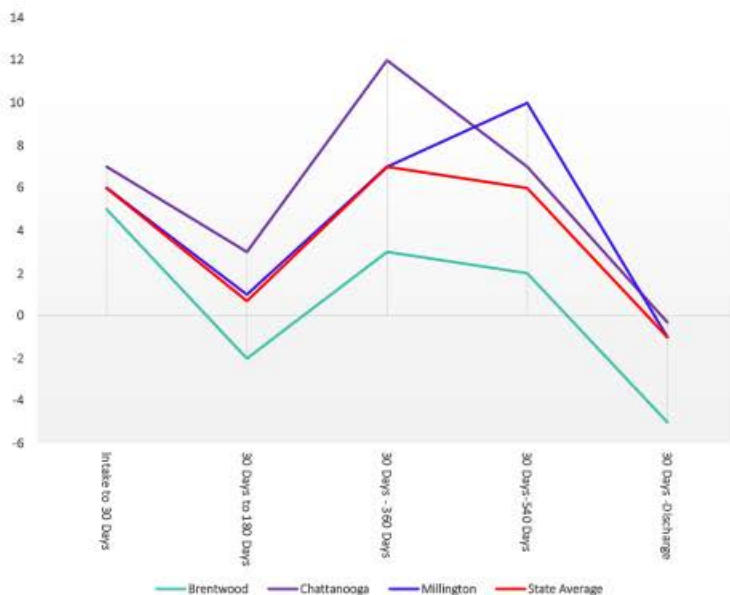
Analysis: TBCH uses the CGAS (Child Global Assessment Scores) to rate the general functioning of youth under the age of 18. Scores range from 1-100, with higher scores indicating better functioning. The scores are taken at intake, 30 days after intake and at 6 month intervals throughout the client's time in care. There is a final CGAS taken at discharge.

The greatest gains for clients are seen between 360-540 days. The decrease in scores at discharge was discussed with the residential social work staff and residential house parents and it was determined to be due to the lack of objectivity in the assessment.

Improvement Plan: The subjective nature of the CGAS has been a recurring discussion and other options for assessing client's functioning has been investigated. The CFARS (Child Functioning Assessment Rating Scales) will be used beginning November 1, 2019. This assessment is used by several agencies and has free online training and certification for all workers. The residential and foster care social work staff will be trained and certified by October 16, 2019. CFARS will be monitored quarterly and reported annually.

Random Record Reviews

TBCH Residential Care has been monitoring client's records for completion since 2016. There has been a system in place for the accessing, analyzing, and compiling data from the residential quarterly records reviews, but only for Residential Care.

Case Record Review for Residential Care 2019- 2nd Quarter Sample

Open Child Files	Region	Score	Averages
H	BW	100	
E	BW	100	
	BW	100	
M	BW	100	
Am	BW	100	
Brentwood Average			100
L	CH	100	
	CH	100	
S	CH	100	
L	CH	100	
N	CH	100	
Chattanooga Average			100
C	MI	100	
M	MI	100	
B	MI	100	
M	MI	100	
S	MI	100	
	MI	100	
Millington Average	MI		100

Closed Child	Region	Score	Averages
K	BW	100	
Brentwood Average			100
C	CH	100	
Chatanooga Average	CH		100
	MI	100	
Millington Average	MI		100

Case Record Review for Foster Care 2019- 3rd Quarter Sample

Open Child Files	Region	Score	Averages
C	West	63.79	
K	West	75.86	
H	West	88.89	
West Average			76.18
G	Middle	81.03	
T	Middle	81.03	
Middle Average			81.03
NO DATA PROVIDED			
East Average	East		0
STATEWIDE AVERAGE			52.40

Closed Child	Region	Score	Averages
S	West	61.11	
West Average			61.11
C	Middle	90.74	
Middle Average			90.74
NO DATA PROVIDED			
East Average			0
STATEWIDE AVERAGE			50.62

Open Family Files	Region	Score	Averages
R	West	86.96	
West Average			86.96
C	Middle	98.26	
H	Middle	95.65	
Middle Average			96.96
NO DATA PROVIDED			
East Average			0
STATEWIDE AVERAGE			61.31

Closed Family Files	Region	Score	Averages
S	Middle	93.04	
Middle Average			93.04
C	West	100	
West Average			100
NO DATA PROVIDED			
East Average			0
STATEWIDE AVERAGE			64.35

TBCH Foster Care has been doing minimal Records Reviews, associated with quarterly regional peer reviews. TBCH has put into place a Quarterly Records Review improvement plan for Foster Care and it is included in this report.

Satisfaction Surveys

The COA re-accreditation process includes Satisfaction Surveys for Community Stakeholders, Foster Parents, Board Members, Personnel, Supervisors and Managers, Youth in Foster Care and Residential Care. Overall, the scores were above average, and the most noteworthy finding was 100% of respondents indicated they feel safe living in their foster homes.

Community Survey Results

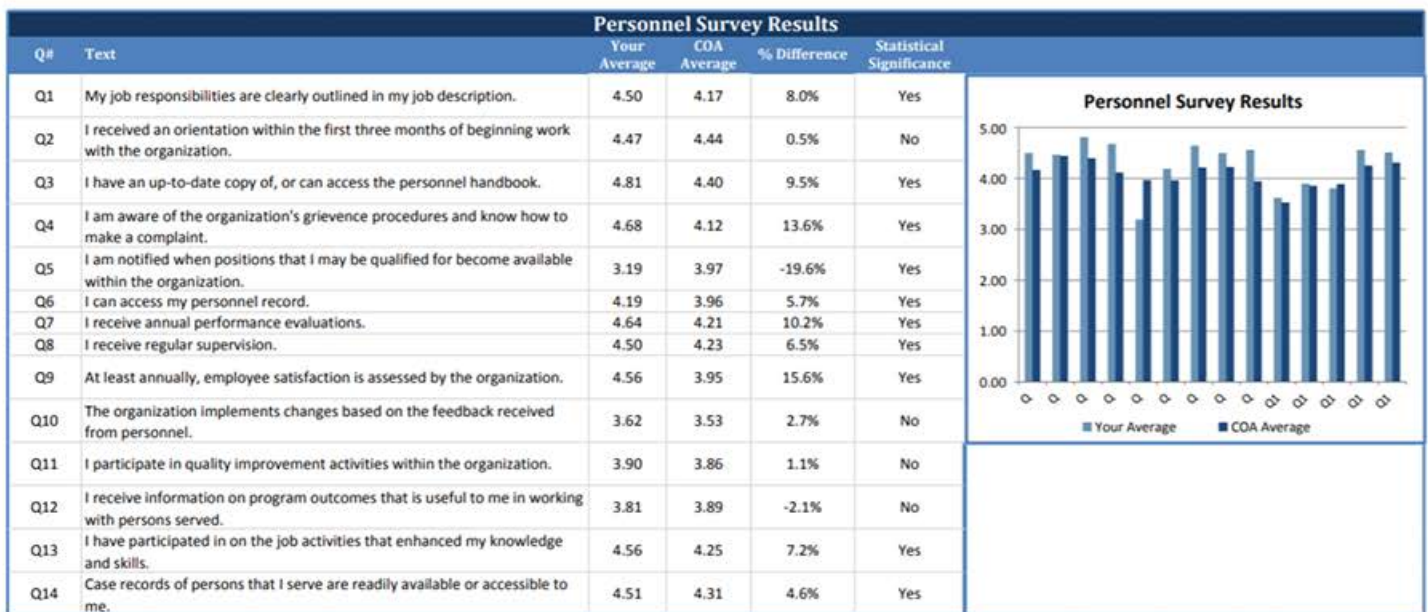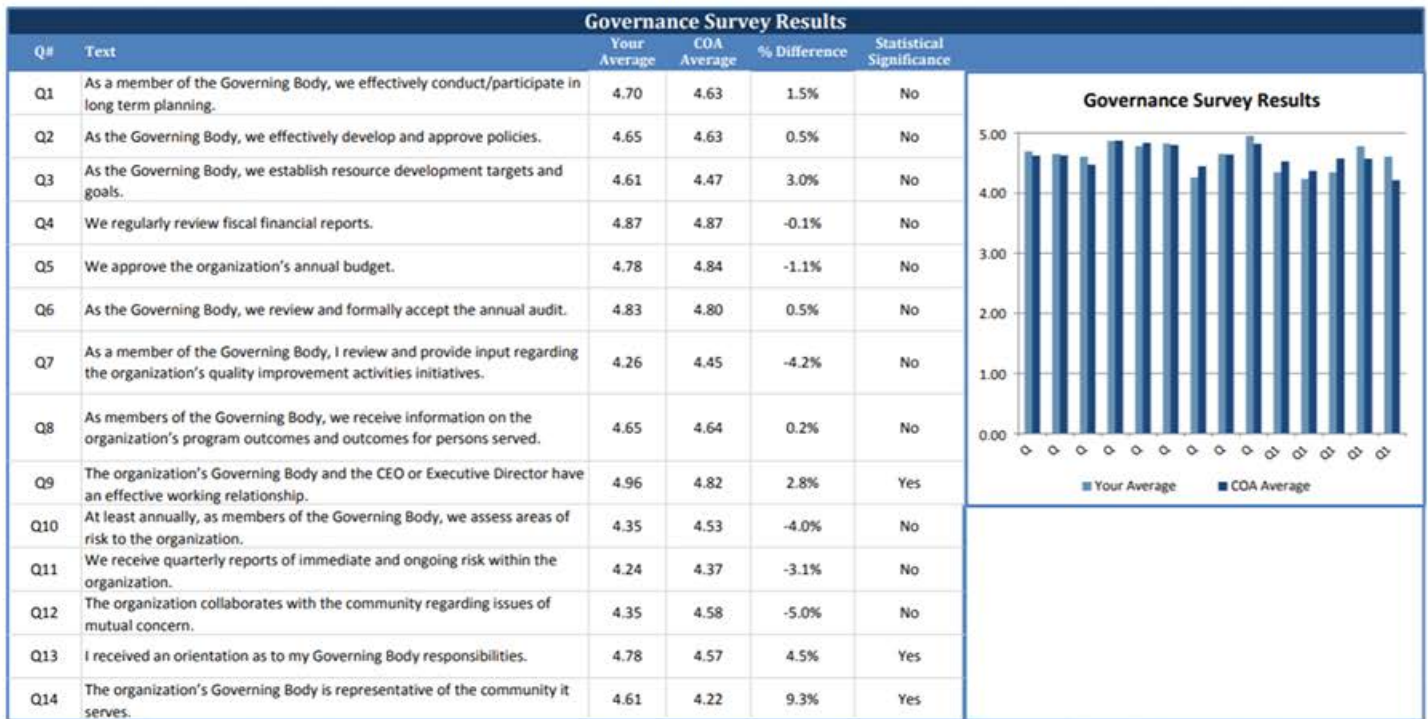| Q#	Text	Your Average	COA Average	% Difference	Statistical Significance
Q1	The organization's facilities are clean and well-maintained.	4.63	4.49	3.0%	No
Q2	The organization's services are accessible to persons with disabilities.	4.64	4.45	4.3%	No
Q3	The organization's services are conveniently located and accessible to public transportation.	4.33	4.28	1.2%	No
Q4	The organization does not discriminate in the provision of its services.	4.79	4.63	3.5%	Yes
Q5	Information about the organization's services and eligibility criteria are made available to the community.	4.60	4.44	3.6%	No
Q6	The organization provides culturally sensitive services.	4.35	4.43	-2.0%	No
Q7	The organization respects the confidentiality of the persons it serves.	4.87	4.64	4.9%	Yes
Q8	The organization is known for its integrity and ethical practices.	4.83	4.47	8.1%	Yes
Q9	The organization conducts a public education program to make its presence known to the community.	4.40	4.20	4.9%	No
Q10	The organization works with other community organizations to advocate on behalf of the people it serves.	4.53	4.50	0.7%	No
Q11	The organization promptly screens applicants and persons referred for its services.	4.64	4.36	6.4%	Yes
Q12	Waiting periods for services are reasonable.	4.41	4.15	6.3%	No
Q13	Fees are reasonable and fair.	4.61	4.27	7.9%	No
Q14	The organization is fiscally responsible.	4.75	4.37	8.6%	Yes
Q15	The organization's reputation within the community is favorable.	4.77	4.43	7.5%	Yes
Q16	Personnel are qualified and competent in the performance of their jobs.	4.57	4.40	3.9%	No
Q17	The organization is in compliance with all applicable laws and regulations.	4.68	4.42	5.9%	Yes

Community Survey Results (bar chart: Your Average, COA Average)

Foster Parent Survey Results

Q#	Text	Your Average	COA Average	% Difference	Statistical Significance
Q1	I participate in service planning for my foster child.	4.59	4.29	6.9%	Yes
Q2	The organization provided me with specific information about the child prior to placement in my home.	4.42	4.02	9.8%	Yes
Q3	The organization responds proactively to challenges and conflicts associated with the placement.	4.60	4.15	10.9%	Yes
Q4	My foster child maintains relationships with family members, friends and their community through visits and/or activities.	4.19	4.27	-2.0%	No
Q5	The organization ensures my foster child receives needed services identified in the service plan, such as counseling, support, and education services.	4.55	4.31	5.7%	Yes
Q6	My foster child has opportunities to participate in ethnic, cultural, and/or religious activities consistent with his/her cultural or native traditions.	4.40	4.29	2.7%	No
Q7	My foster child receives needed medical, dental, developmental, and mental health services.	4.73	4.60	2.7%	No
Q8	I have a private visit with the caseworker at least once a month.	4.65	4.43	5.0%	Yes
Q9	The training I received from the organization has effectively prepared me to be a foster parent.	4.58	4.24	8.0%	Yes
Q10	I have been informed of my rights and responsibilities as a foster parent.	4.52	4.46	1.2%	No
Q11	I have access to services to prevent/reduce stress, such as childcare, respite care, counseling, peer support, or recreational activities.	4.20	4.10	2.5%	No
Q12	The organization provided or helped me develop a plan for responding to emergencies such as accidents, run away behavior, serious illness, fire, and natural disasters.	4.29	4.24	1.1%	No
Q13	The organization assesses the safety of my home.	4.70	4.65	1.1%	No

Foster Parent Survey Results (bar chart: Your Average, COA Average)

Satisfaction Surveys

Governance Survey Results

Q#	Text	Your Average	COA Average	% Difference	Statistical Significance
Q1	As a member of the Governing Body, we effectively conduct/participate in long term planning.	4.70	4.63	1.5%	No
Q2	As the Governing Body, we effectively develop and approve policies.	4.65	4.63	0.5%	No
Q3	As the Governing Body, we establish resource development targets and goals.	4.61	4.47	3.0%	No
Q4	We regularly review fiscal financial reports.	4.87	4.87	-0.1%	No
Q5	We approve the organization's annual budget.	4.78	4.84	-1.1%	No
Q6	As the Governing Body, we review and formally accept the annual audit.	4.83	4.80	0.5%	No
Q7	As a member of the Governing Body, I review and provide input regarding the organization's quality improvement activities initiatives.	4.26	4.45	-4.2%	No
Q8	As members of the Governing Body, we receive information on the organization's program outcomes and outcomes for persons served.	4.65	4.64	0.2%	No
Q9	The organization's Governing Body and the CEO or Executive Director have an effective working relationship.	4.96	4.82	2.8%	Yes
Q10	At least annually, as members of the Governing Body, we assess areas of risk to the organization.	4.35	4.53	-4.0%	No
Q11	We receive quarterly reports of immediate and ongoing risk within the organization.	4.24	4.37	-3.1%	No
Q12	The organization collaborates with the community regarding issues of mutual concern.	4.35	4.58	-5.0%	No
Q13	I received an orientation as to my Governing Body responsibilities.	4.78	4.57	4.5%	Yes
Q14	The organization's Governing Body is representative of the community it serves.	4.61	4.22	9.3%	Yes

Personnel Survey Results

Q#	Text	Your Average	COA Average	% Difference	Statistical Significance
Q1	My job responsibilities are clearly outlined in my job description.	4.50	4.17	8.0%	Yes
Q2	I received an orientation within the first three months of beginning work with the organization.	4.47	4.44	0.5%	No
Q3	I have an up-to-date copy of, or can access the personnel handbook.	4.81	4.40	9.5%	Yes
Q4	I am aware of the organization's grievence procedures and know how to make a complaint.	4.68	4.12	13.6%	Yes
Q5	I am notified when positions that I may be qualified for become available within the organization.	3.19	3.97	-19.6%	Yes
Q6	I can access my personnel record.	4.19	3.96	5.7%	Yes
Q7	I receive annual performance evaluations.	4.64	4.21	10.2%	Yes
Q8	I receive regular supervision.	4.50	4.23	6.5%	Yes
Q9	At least annually, employee satisfaction is assessed by the organization.	4.56	3.95	15.6%	Yes
Q10	The organization implements changes based on the feedback received from personnel.	3.62	3.53	2.7%	No
Q11	I participate in quality improvement activities within the organization.	3.90	3.86	1.1%	No
Q12	I receive information on program outcomes that is useful to me in working with persons served.	3.81	3.89	-2.1%	No
Q13	I have participated in on the job activities that enhanced my knowledge and skills.	4.56	4.25	7.2%	Yes
Q14	Case records of persons that I serve are readily available or accessible to me.	4.51	4.31	4.6%	Yes

The only finding that was below the COA average and statically significant was Q5 on the Personnel Survey, "I am notified when positions that I may be qualified for become available within the organization." This has been discussed with the senior staff and there is a plan to make job postings available to TBCH staff prior to posting publicly.

Satisfaction Surveys

Supervisors and Managers Survey Results

Q#	Text	Your Average	COA Average	% Difference	Statistical Significance
Q1	The organization has an effective quality improvement program.	4.00	4.19	-4.5%	No
Q2	I participate in the organization's quality improvement activities.	4.29	4.25	0.8%	No
Q3	The organization regularly examines its internal access and service delivery processes.	4.07	4.26	-4.3%	No
Q4	The organization conducts quarterly reviews of accidents, incidents, and grievances.	4.71	4.42	6.6%	Yes
Q5	Outcome data is used to improve services for consumers.	3.93	4.28	-8.3%	No
Q6	I am aware of the organization's conflict of interest policy.	4.57	4.38	4.4%	No
Q7	The organization does not discriminate in hiring/promoting.	4.57	4.50	1.5%	No
Q8	I receive an annual performance evaluation.	4.57	4.42	3.4%	No
Q9	The organization is prepared to respond to natural disasters and other emergencies.	4.14	4.26	-2.7%	No
Q10	The finances of the program in which I work are managed by the organization with integrity and according to sound business practices.	4.64	4.40	5.6%	No
Q11	The organization's services are well coordinated.	4.14	4.13	0.2%	No
Q12	The organization facilitates timely and easy access for consumers.	4.14	4.30	-3.6%	No
Q13	Access to emergency and crisis intervention services is available to consumers.	4.14	4.39	-5.6%	No
Q14	I have time to conduct supervision with my staff.	4.21	4.19	0.7%	No
Q15	The organization monitors its relationship with contractors who provide services to consumers.	3.92	4.25	-7.9%	No
Q16	The organization's governing body and the CEO Executive Director have an effective working partnership.	4.36	4.28	1.8%	No
Q17	I am aware of the organization's confidentiality policy and procedures.	4.71	4.68	0.8%	No

Supervisors and Managers Survey Results

Youth and Child - Foster or Kinship Care Survey Results

Q#	Text	Your Average	COA Average	% Difference	Statistical Significance
Q1	I feel comfortable when I am here.	4.47	4.47	-0.1%	No
Q2	I feel comfortable where I am living.	4.80	4.54	5.8%	Yes
Q3	My worker from the agency listens to me.	4.71	4.59	2.7%	No
Q4	My worker at the agency treats me fairly.	4.53	4.69	-3.3%	No
Q5	I know I can ask my worker for help.	4.71	4.63	1.9%	No
Q6	The home where I live respects my privacy.	4.93	4.50	9.7%	Yes
Q7	I get enough to eat and drink where I am living.	4.93	4.81	2.6%	No
Q8	I feel safe in the home where I am living.	5.00	4.74	5.5%	N/A
Q9	I feel included by my worker in the planning of the services that I receive.	4.27	4.49	-4.8%	No
Q10	I receive services that help me.	4.50	4.56	-1.3%	No
Q11	I have a say in the kind of services I receive.	3.92	4.30	-9.0%	No
Q12	My worker from the agency asks my opinion about things.	4.40	4.50	-2.2%	No
Q13	My worker from the agency treats me with respect.	4.67	4.78	-2.4%	No
Q14	My worker from the agency visits me where I am living.	4.67	4.64	0.5%	No
Q15	My worker from the agency helps me see my family.	4.25	4.31	-1.3%	No
Q16	Overall, I like my worker from the agency.	4.60	4.68	-1.7%	No

Youth and Child - Foster or Kinship Care Survey Results
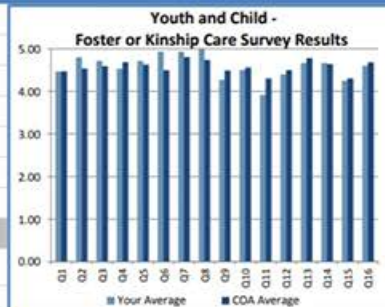
Youth and Child - Residential/Group Homes Survey Results

Q#	Text	Your Average	COA Average	% Difference	Statistical Significance
Q1	I feel comfortable here.	4.46	3.83	16.5%	Yes
Q2	Adults who work here listen to me.	4.33	3.77	14.9%	Yes
Q3	Adults here treat me with respect.	4.67	4.06	15.0%	Yes
Q4	The adults who work here are fair to everyone.	4.49	3.79	18.5%	Yes
Q5	I know who I can ask for help here.	4.62	4.37	5.7%	Yes
Q6	My privacy is respected here.	4.75	4.02	18.1%	Yes
Q7	I get enough to eat and drink.	4.97	4.33	14.8%	Yes
Q8	The rooms and buildings here are clean.	4.64	4.03	15.0%	Yes
Q9	I feel safe while living here.	4.72	4.10	15.0%	Yes
Q10	I am included in the planning of the services that I receive.	4.41	4.17	5.6%	No
Q11	I receive services here that help me.	4.76	4.21	13.2%	Yes
Q12	I have a say in the kind of services I receive here.	4.16	3.88	7.2%	No
Q13	While living here, I am receiving the services I need.	4.82	4.22	14.0%	Yes
Q14	The adults who work here help me see my family.	4.59	4.11	11.6%	Yes
Q15	There is enough for me to do here when I am not in school.	4.31	3.74	15.3%	Yes
Q16	Adults here ask my opinion about things.	4.05	3.62	11.9%	Yes
Q17	There is a good school program here.	4.61	4.04	14.0%	Yes
Q18	Services I receive are helping me make positive changes.	4.65	4.16	11.6%	Yes
Q19	Overall, I like being here.	4.31	3.51	22.9%	Yes

Youth and Child - Residential/Group Homes Survey Results
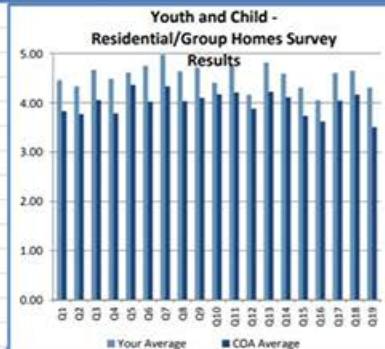
Improvement Plans

After the COA re-accreditation site visit, the PQI Coordinator reviewed all the programs and administrative areas. The PQI Coordinator met with the Vice President of each area and generated Program Goals and Improvement Plans, as needed, for each area.

Foster Care has Improvement Plans for Quarterly Records Review, Completion of Program Goals and Monitoring CFARS Scores. Residential Care has Improvement Plans for Monitoring Completion of Program Goals and Monitoring CFARS Scores.

2019-2020 Administrative Goals & Measures

Finance/Human Resources Outputs--

- Lower the occupancy expense thereby lowering the cost of care for residential and foster care. The cost of care will be monitored monthly and cost of care will be reported quarterly.
- Increase the employee satisfaction scores by addressing areas which have consistently been reported as low by employee satisfaction surveys. A strategy will be developed with the PQI Committee after analyzing the scores for the past three years.

Advancement Outputs--

- Increase the number of first time individual/business donors by 10%. A strategy will be developed after surveying last year's first time individual/business donors to see what prompted them to give and how they heard about TBCH.
- Increase online giving by 10%. A strategy will be developed after analyzing the past year's online giving and determining trends and factors that can be duplicated or capitalized on in the future.

2019-2020 Program Goals & Measures

Residential and Foster Care Program Outcomes—

- Increase the functioning of our residents as indicated by an increase in CGAS/CFARS scores from Intake, 30 days, 180 days and 365 days
- Increase then number of Individual Program Plan goals achieved by residents as indicated by quarterly reviews of Individual Program Plans

Family Care Program Outputs—

- Increase community stakeholder's understanding of how to prevent child sexual abuse by providing Stewards of Children to 300 people by August 1, 2020. Understanding will be measured by completing pre- and post-tests.
- Increase community stakeholder's understanding of how trauma affects children and youth by providing Trauma Informed Approaches and/or Building Stronger Brains at 3 churches by June 1, 2020. Understanding will be measured by completing pre- and post-tests.

Miscellaneous Information

The process of reviewing program services across TBCH also uncovered inconsistencies in the way information is input to the software system. The social work staff in Residential and Foster Care is currently working with the PQI Coordinator to streamline a number of processes including:

> Tracking Referral Sources
> Intake Paperwork and Processes
> Completing Discharges and Exit Interviews
> Tracking Inquiries and Volunteers

Improvement Plans follow as an addendum to this report.

Improvement Plan
Performance and Quality Improvement

COA — COUNCIL ON ACCREDITATION — FOUNDED 1977

Improvement Plan Title: Foster Care Program Goal Completion Improvement Plan

Improvement Plan Date: October 16, 2019

Plan

Briefly describe the opportunity for improvement and what information supports this need.

Currently, TBCH Foster Care Program does not monitor goal completion for clients. The Individualized Program Plan is completed quarterly with goals generated for the following sections: Health/Medical, Educational/Vocational, Social Skills, Emotional/Behavioral and Family. However, goals are not marked as completed and are too broad to be actionable and/or measured. There will be a training for all foster care case managers before implementation on 11/1/19, to cover goal writing and the new IPP form in KaleidaCare.

Describe the success indicators; how will you know that the proposed actions were effective?

The proposed actions will be deemed successful is clients begin to complete goals. Goals will be written in the context of the CFARS and over time the focus on specific, measurable, attainable, relevant and time-based goals should improve the CFARS for clients.

What data supports the need for this change?

The lack of data supports the need for change. There are currently no completed goals for clients in foster care.

Improvement Plan
Performance and Quality Improvement

COA
COUNCIL ON
ACCREDITATION
FOUNDED 1977

Improvement Plan Title: Foster Care CFARS Improvement Plan

Improvement Plan Date: October 16, 2019

Plan

Briefly describe the opportunity for improvement and what information supports this need.

Currently, TBCH Foster Care Program does not monitor client's functional improvement. Clients receive a Child Global Assessment Score 30-days after intake and quarterly until discharge. The case managers have completed the CGAS in a timely manner but the scores are not stored in a database and/or reviewed. During a review of processes for assessing functioning it was determined the CGAS is too subjective to be useful for monitoring client progress. Therefore, the staff is being retrained and certified to use the Child Functional Assessment Rating Scale . This tool's objectivity is supported by research through the state of Florida and other private agencies. The goal of the CFARS training/certification and implementation is to attain relevant data to monitor improvement in client functioning.

Describe the success indicators; how will you know that the proposed actions were effective?

Quarterly CFARS will take place in context of the Individualized Program Plans and will be reported and monitored by the PQI Coordinator. The ideal outcome would be an increase in client functioning indicated by a decrease in presenting problems scores on the CFARS.

What data supports the need for this change?

A review of files showed the case managers have completed regular IPPs with CGA scores for each client; however, the data is inaccessible for use in determining client progress. The CGAS is also too subjective to be used effectively for goal setting for clients and is administered inconsistently throughout the state.

Improvement Plan Title: **Foster Care Quarterly Review Improvement**

Improvement Plan Date: **9/1/2019**

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Briefly describe the opportunity for improvement and what information supports this need.

Quarterly case records reviews are not currently being completed for foster care. There have been a small sampling done in West TN and Middle TN; however, East TN has not completed records reviews in a timely manner. The reviews that have been done have show the following accuracy rate: Middle TN--Open Child Files 100%; Closed Child Files 100% and Open Home Files 86.96%   West TN--Open Child Files 76%; Closed Child Files 61% and Open Family Files 87%. The goal for case record accuracy is 95%.

Describe the success indicators; how will you know that the proposed actions were effective?

Case Record Reviews for each region will be turned in to the shared drive by the following due dates: October 17, January 17, April 17 and July 17 and will have an average accuracy of 95% per region.

What data supports the need for this change?

The case records reviews for the Foster Care Program revealed the following accuracy rate:
Middle TN--Open Child Files 100%; Closed Child Files 100% and Open Home Files 86.96%; turned in on time for the last quarter
West TN--Open Child Files 76%; Closed Child Files 61% and Open Family Files 87%; turned in eight days late for the last quarter
East TN--No Data Reported for the last quarter
The goal for case record accuracy is 95%.

Improvement Plan
Performance and Quality Improvement

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Improvement Plan Title: Residential Care Program Goal Completion Improvement Plan

Improvement Plan Date: October 16, 2019

Plan

Briefly describe the opportunity for improvement and what information supports this need.

Currently, TBCH Residential Care Program does not monitor goal completion for clients. The Individualized Program Plan is completed at 30 days and updated every six months for the duration of the client's stay. Goals are generated for the following sections: Health/Medical, Educational/Vocational, Social Skills, Emotional/Behavioral and Family. However, goals are not marked as completed and are too broad to be actionable and/or measured. There will be a training for all residential social workers before implementation on 11/1/19, to cover goal writing and the new IPP form in KaleidaCare.

Describe the success indicators; how will you know that the proposed actions were effective?

The proposed actions will be deemed successful if clients can complete at least two goals every six months. Goals will be written in the context of the CFARS and over time the focus on specific, measurable, attainable, relevant and time-based goals should improve the CFARS for clients.

What data supports the need for this change?

The lack of data supports the need for change. There are currently no completed goals for clients in residential care.

Improvement Plan
Performance and Quality Improvement

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Improvement Plan Title: Residential Care CFARS Improvement Plan

Improvement Plan Date: October 16, 2019

Plan

Briefly describe the opportunity for improvement and what information supports this need.

Currently, TBCH Residential Care Program does not monitor client's functional improvement. Clients receive a Child Global Assessment Score 30-days after intake and every 180 days until discharge. The social workers have completed the CGAS in a timely manner but the scores are not stored in a database and/or reviewed. During a review of processes for assessing functioning it was determined the CGAS is too subjective to be useful for monitoring client progress. Therefore, the staff is being retrained and certified to use the Child Functional Assessment Rating Scale . This tool's objectivity is supported by research through the state of Florida and other private agencies. The goal of the CFARS training/certification and implementation is to attain relevant data to monitor improvement in client functioning.

Describe the success indicators; how will you know that the proposed actions were effective?

Biannual CFARS will take place in context of the Individualized Program Plans and will be reported and monitored by the PQI Coordinator. The ideal outcome would be an increase in client functioning indicated by a decrease in presenting problems scores on the CFARS.

What data supports the need for this change?

A review of files showed the case managers have completed regular IPPs with CGA scores for each client; however, the data is inaccessible for use in determining client progress. The CGAS is also too subjective to be used effectively for goal setting for clients and is administered inconsistently throughout the state.