

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY	
	Chapter 2: Administration of Child Welfare	Effective Date: March 1, 2013
	Section 16: Quality Service Review (QSR)	Version: 3

STATEMENTS OF PURPOSE

The Indiana Department of Child Services (DCS) Quality Service Review (QSR) will use a thorough case review method and practice appraisal process to assess:

1. How children and their families are benefiting from services received; and
2. How well locally coordinated services are working for children and families.

Note: The central purpose of the QSR process is to encourage and support a successful change process for families leading to adequate, sustained daily functioning, safety, permanency, and well-being. The practice should be strength-based, outcome-focused, and results-driven.

The QSR is an evidence-based method to evaluate results in a specific service area at a given point in time, for the:

1. Status of the child;
2. Status of the parent/caregiver; and
3. Status of system performance based on evaluation of key practice indicator skills.

The QSR will measure 22 specific Status Indicators

Child Status indicators	System Performance indicators
<ol style="list-style-type: none"> 1. Safety 2. Behavioral Risk to Self/Others 3. Stability 4. Permanency 5. Appropriate Living Arrangements 6. Physical Health 7. Emotional Status 8. Learning & Development 9. Pathway to Independence 	<ol style="list-style-type: none"> 1. Role & Voice of Family Members² 2. Team Formation & Functioning¹ 3. Cultural Recognition³ 4. Assessing & Understanding³ 5. Long-Term View⁴ 6. Child and Family Planning Process⁴ 7. Planning Transitions & Life Adjustments⁴ 8. Intervention Adequacy⁵ 9. Resource Availability⁵ 10. Maintaining Quality Family Relationships⁵ 11. Tracking & Adjusting⁵
<p style="text-align: center;">Parent/Caregiver Status indicators</p> <ol style="list-style-type: none"> 1. Parenting/Caregiving Capacities 2. Informal Supports 	<p>Note: As related to the Indiana Practice Model "TEAPI" - Teaming¹, Engaging², Assessing³, Planning⁴, and Intervening⁵.</p>

Table (1)

Note: The review of each child and family served is an evaluation of the service system. A random sample of children's cases are reviewed to determine child and parent/caregiver status, recent progress, related system practice, and performance results.

A QSR will be conducted in each region approximately every 18 months (this constitutes a round), and will include the participation of all DCS local offices within the region. All QSRs will be scheduled by the Performance and Quality Improvement (PQI) team of the Services and Outcomes Division.

Field management staff are strongly encouraged to complete the process to become a qualified QSR reviewer within 18 months of hire (as management staff). Field management staff who are qualified reviewers are also strongly encouraged to complete a QSR each round to maintain reviewer skills.

Regional Managers (RMs) will compile a list every six (6) months of management staff who are not qualified QSR reviewers with an explanation as to the reason those individuals are not involved in the process of becoming a qualified QSR reviewer. The list will also include those QSR reviewers who are trained but who have not participated in a QSR review in the last 18 months. RMs will ensure the list is sent to the following:

1. Deputy Director of Field Operations;
2. Executive Managers of Field Operations;
3. Deputy Director of Services and Outcomes; and
4. PQI State Director.

The PQI team will routinely conduct an inter-rater reliability review. A simulated case story will be sent to Qualified QSR reviewers, who will rate the indicators. Those whose ratings are outside the acceptable range will be contacted for further guidance and will be paired with an experienced reviewer for their next review in order to ensure consistency in ratings.

As part of the Agency's Continuing Quality Improvement (CQI) Process, Ad Hoc (Mini) Reviews targeting specific indicators may be utilized. Data from these reviews may assist the Agency with tracking and adjusting strategic plans. An Ad Hoc (Mini) Review may be requested by one of the following:

1. The Agency Director;
2. The Deputy Director of Field Operations;
3. The Deputy Director of Services and Outcomes;
4. The Executive Managers of Field Operations; or
5. A Regional Manager

PROCEDURE

Prior to the QSR

Prior to the Regional QSR the following will occur:

1. Office of Data Management (ODM) will provide the PQI team with a random sample of 20 ongoing cases and four (4) assessments per region. Each random sample will be reflective of the region's universe¹ of cases. The sample selection should be distributed to reflect the population in the following areas:
 - a. Age of child,
 - b. Type of placement (e.g., congregate care, relative care, licensed foster care, etc.),
 - c. Case type (i.e., Informal Adjustment (IA), Child in Need of Services (CHINS), or Collaborative Care (CC) cases), and
 - d. Length of time in care.

¹ The term universe denotes a statistical universe (i.e., a set of entities concerning which statistical inferences are to be drawn, often based on a random sample taken from the universe).

Exception: Region 10 (Marion County) and Region 1 (Lake County) will each have a random sample of 60 cases and 12 assessments, due to the size of the regions. Region 4 will have a random sample of 30 cases and six (6) assessments, due to the size of Allen County within this region.

The PQI staff will ensure the sample pull consists of one (1) case type per worker (Assessment, IA, or CHINS). If insufficient staffing ratios causes more than one (1) case pull from the same worker, a second case type or assessment will be selected.

A separate sample of Collaborative Care cases will be selected to be reviewed at the time of the Regional QSR. The number of cases reviewed in each region will be determined by the number of CC cases open in the region at the time of the case selection. These cases will be reviewed utilizing the evidence-based QSR protocol.

2. The Family Case Manager (FCM) or Collaborative Care Case Manager (3CM) will:
 - a. Complete two (2) duplicate binders containing the following information about the child and family:
 - i. Interview Schedule,
 - ii. Directions to Interview,
 - iii. Release of Information,
 - iv. General Information,
 - v. Brief Case Summary,
 - vi. 310 & 311 (include history)
 - vii. Preliminary Inquiry (PI),
 - viii. Genogram,
 - ix. Safety/Risks/Needs Assessment,
 - x. Case Plan/Child and Family Team Meeting Notes,
 - xi. Contact Logs,
 - xii. Court Reports,
 - xiii. Assessments (e.g., Parent, Medical, IEP, Psychological, etc.),
 - xiv. Confirmation Letters.
 - b. Schedule and confirm interviews for the case, with the FCM or 3CM, focus child and parent(s), along with the most significant people involved in the case (generally six (6) to eight (8) individuals). Reviewers may meet with individuals that include, but are not limited to the following:
 - i. Relatives,
 - ii. Resource parents,
 - iii. Teachers,
 - iv. Mentors,
 - v. Therapist,
 - vi. School Counselor,
 - vii. Court Appointed Special Advocate (CASA) or Guardian Ad Litem (GAL),
 - viii. Child and Family Team (CFT) Members,
 - ix. FCM or 3CM, and
 - x. Service Providers.

3. The PQI Staff will contact each FCM or 3CM to:

- a. Review case preparation progress,
 - b. Address questions, and
 - c. Ensure that the reviewer's schedule is within allowable timeframes. See Related Information for further details.
4. The PQI Staff will assign at least two (2) reviewers to a child's case and this team will consist of:
- a. A reviewer-in-training (i.e., Shadow or Lead), and
 - b. A Mentor Reviewer.

Note: The Mentor Reviewer will negotiate a working agreement with the reviewer-in-training as to who will conduct the interviews while the other reviewer may serve as a scribe (i.e., documents the information obtained through the interviews).

During the QSR week, the following will occur:

During the QSR week the following will occur:

1. The Mentor Reviewer and the reviewer-in-training will review the binder and meet with the assigned FCM or 3CM. The reviewers may request at any time additional interviews be scheduled during the review process;
2. The case will be reviewed during a 2-day period. Each review team will provide feedback (i.e., debrief) to the assigned FCM or 3CM and/or Supervisor on the case they are reviewing. This debrief will occur in the afternoon of the second day of the QSR. After the debriefing, review teams will present their case to other teams and determine common themes among the cases in what is known as the "mini-round";

Note: After conducting all of the interviews, the reviewers are asked to rate each of the Child and Parent/Caregiver Status and System Performance Indicators. Ratings in the QSR protocol for Indiana are made on a scale from one (1) to six (6) with N/A as a possible choice:

One	–	Adverse Performance
Two	–	Poor Performance
Three	–	Marginal Performance
Four	–	Fair Performance
Five	–	Good Performance
Six	–	Optimal Performance
N/A	–	Not Applicable

After the QSR, the following will occur:

After the QSR the following will occur:

- PQI team members will present an analysis of the data collected during the review to the regional management staff. This data will then be presented at the region's next scheduled Regional Services Council. Those in attendance will be encouraged to provide input into how to improve overall system performance.
2. The PQI State Director will issue a finalized regional report of findings, within 30 business days of the review, to the following:
 - a. The Director of DCS,
 - b. The Deputy Director of the Services and Outcomes Division,
 - c. The Deputy Director of Field Operations,
 - d. Executive Managers,
 - e. The Regional Manager, and

- f. The Deputy Director of Permanency and Practice Support

PRACTICE GUIDANCE

N/A

FORMS AND TOOLS

1. [Electronic Copy of Protocol Listing](#) – Available in hard copy
2. [Roll Up Sheet](#) – Available in hard copy
3. [QSR Reviewer Workbook](#) – Available in hard copy
4. [General Information Document](#) – Available in hard copy

RELATED INFORMATION

QSR Results

The QSR examines outcomes for a focus child and his/her parents/caregivers while assessing the service system surrounding the family. Case review findings are used internally in an effort to improve practice skills. Externally, the QSR strives to stimulate and support skills needed to improve services for children and families who are recipients of the local community's service providers. The service areas include, but are not limited to the following:

1. Child Welfare;
2. Health;
3. Mental Health;
4. Education; and
5. Juvenile Justice.

Qualified Reviewer

To become a qualified reviewer, workers will need to:

1. Complete a two (2) day New Reviewer training;
2. Shadow a Mentor Reviewer for one (1) case in a QSR;
3. Participate in two (2) QSRs as a Lead Reviewer in Training;
4. Complete Mentor training; and
5. Complete one (1) QSR as a Mentor Reviewer.

Note: Participants in the QSR process receive training hours for the two (2) day New Reviewer training, the Shadow experience, both Lead experiences, and Mentor training.

Rating Scales

The QSR protocol uses a six (6) point rating scale as a “yard stick” for measuring the situation observed for each indicator. Overall, scores are divided into two (2) major action steps:

1. Refine/Maintain (4-6); and
2. Concerted Action Needed (1-3).