

CQI Self-Assessment

Instrument Rating Guide

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General Instructions for Completing the CQI Self-Assessment

Instrument

The team assembled to participate in the assessment process will determine the best approach for working collaboratively to conduct the assessment, including gathering evidence and information, completing the instrument, and rating the items. The *Continuous Quality Improvement (CQI) Self-Assessment Instrument* is flexible in its design, and jurisdictions can utilize it both independently and with the assistance of a Capacity Building Center for States CQI Consultant.

For jurisdictions seeking the assistance of a Center CQI Consultant, the identified leads for the jurisdiction, with support from the Center CQI Consultant, will share responsibility for ensuring that the assessment process is implemented with integrity using the instructions and guidance provided to ensure accurate ratings (see *Focused CQI Services: Implementation Guide* for additional information regarding participant roles and responsibilities). The Center CQI Consultant will ensure that all information gathered by participants in the assessment process ultimately is integrated into one consolidated and complete assessment instrument that will be used to facilitate discussion among the team to come to a consensus on item ratings and inform action planning.

Participants should be familiar with all instrument instructions, guidance, and definitions to understand what each item is assessing. The instrument is a fillable tool that participants can complete electronically. Participants should use their professional judgment to determine how best to gather all relevant information needed to determine ratings for items. Participants are advised to record throughout the instrument all sources of evidence reviewed via documentation, as well as any data or information obtained through staff and stakeholder surveys, focus groups, and interviews.

Completing the Face Sheet: Participants should complete all areas of the face sheet, including the name of the jurisdiction/agency and the current director. Participants also should list the names, titles, and contact information for all jurisdiction team members and the jurisdiction's identified leads in the process. The jurisdiction/agency should identify one staff member who will serve as the primary contact for the jurisdiction. Participants also should document the start and end dates for the assessment phase of the process in the face sheet.

Participants should keep track of the documents or other evidence reviewed in the "Documents Reviewed" table. Participants should record the document's name along with a brief description and the date(s) of the review. Similarly, participants should record any staff/stakeholder surveys, interviews, or focus groups administered as part of the assessment process in the tables provided in the instrument. Participants also should record basic information regarding the types (i.e., caseworkers, foster parents, et al.) and numbers of staff/stakeholders surveyed or interviewed, the methodology used, and dates conducted.

Completing the Assessment: Participants should use the expandable spaces located throughout the instrument under each of the items, areas, and subdomains to document and summarize critical information and sources of evidence that not only support the assignment of ratings, but also highlight broader practice strengths and opportunities for enhancement.

Items and Subitems: Participants should use the guidance provided to assist in rating each item. The subitems represent the key practices for each item and should be reviewed, along with the rating guidance, when assigning ratings. Underlined subitems represent areas of CQI practice or processes that are considered most critical to rating the item. Item ratings should be considered preliminary until all participants have the opportunity to participate in a discussion regarding the findings and come to a consensus.

- Areas: Following the completion of the item sections, participants should use the Area Summary sections to summarize the information gathered relative to the corresponding items and highlight practices, identify underlying conditions of current performance that have been observed, and note potential opportunities for enhancement.
- Subdomains: Participants should utilize the Subdomain Summary sections in the instrument to provide a synopsis of the corresponding item ratings.
- Summary Reports: Provide a synthesis of all the ratings, following the completion of the assessment, in a simple, numeric report. Summary reports should be utilized, in tandem with the various narrative information recorded in the instrument, to assist in preparing the jurisdiction to enter into the action planning process.

Overview of the Dimensions of Capacity

Consistent with the mission of the Center for States, the *CQI Self-Assessment Instrument* includes preliminary guidance of the capacities that may support improved implementation of best CQI practices. Each of the 28 items has been assigned one <u>primary</u> dimension of capacity to assist in interpreting the results while recognizing that the jurisdiction/agency may need other capacities to improve implementation of any specific item. The designation of the primary dimension of capacity for each item is included in parentheses following the item. The dimensions of capacity are defined as follows:¹

- **Resources (R):** Concrete materials and assets (e.g., staff, funds, information, and equipment)
- Infrastructure (I): Organizational structure and processes (e.g., policies and procedures, lines of authority, functional departments, programs, and service structures)
- Knowledge and Skills (KS): Expertise and competencies of staff (e.g., technical and analytic skills, cultural competency, and leadership)
- Culture and Climate (CC): Organizational norms, beliefs, values, and attitudes (e.g., perceptions
 of agency effectiveness, institutional expectations of behavior, and feelings about one's role and
 value in the workplace)
- Engagement and Partnership (EP): Relationships within and outside of the agency (e.g., internal teaming, community participation, interagency agreements, and shared authority with key stakeholders)

Rating Framework for the CQI Self-Assessment Instrument

Each of the 28 items is rated on a four-point scale to reflect the status of best practice implementation. The detailed rating guide that follows includes specific descriptions for each of the 28 items and corresponding subitems. Underlined subitems reflect those areas of CQI practice or processes that are considered particularly critical to rating the item.

Rating guidance specific to each of the 28 items adheres to the following conceptual framework:

4 - Excellent

¹ Taken from the Child Welfare Capacity Building Collaborative Overview. Available at: <u>https://capacity.childwelfare.gov/about/</u>.

The language included in the "excellent" rating is intended to define best practices associated with each item and create a standard for which the agency should aim. The excellent rating means that these best practices in CQI are internalized within the entire agency and delivered with enough rigor for an adequate time period to begin producing specific results that can be identified at least anecdotally. Because practices rated as excellent have been sustained and are internalized, they are more likely to be sustainable amidst future challenges. This rating is the anchor for comparison for ratings of good, emerging/developing, or minimal/not present.

<u>3 - Good</u>

The "good" rating means that many of the best practices defined in the "excellent" rating are in place, at least most of the time in most of the agency, but have not become the automatic way of conducting business. The practices may be inconsistently practiced depending on circumstances, geographic region, or program, or may be missing entirely in isolated programs or regions. The practices may be in place, but have not been delivered long enough or with enough potency to actually produce different results. There may be some element of having practices in place with some resistance or with ambivalence to the belief that with rigorous implementation, the agency can achieve different results.

2 - Emerging/Developing Capacity

The "emerging/developing capacity" rating refers to the use of some best practices in geographic or program pockets in the agency that have not been implemented statewide. There may be pilots of particular practices to test strategies or specific champions or early adopters that are using the practices without wide dissemination to others. Planning alone is not adequate for achieving an emerging/developing capacity rating; there must be actual implementation of some best practices.

1 - Minimal/Not Present Capacity

The "minimal/not present capacity" rating refers to best practices that generally are absent from the agency or only are in the planning phase. There may be barriers to implementation due to limited resources, infrastructure deficits, lack of knowledge and skills, or culture and climate beliefs or norms. The language included in the minimal/not present capacity rating also includes references to significant adaptive challenges within the agency that may act as barriers to implementing CQI best practices. The agency may need to mitigate these adaptive challenges before it is ready to move toward planning and implementing best practices in CQI.

Subdomain: Leadership Support and Modeling

Overview: In a high-functioning CQI environment, leadership opportunities are fostered throughout the agency. However, agency leadership fosters the culture and climate to support all levels of leadership through clear direction and direct support. For the purposes of this assessment, "leadership" refers to the immediate executive team or management team that forms the nucleus of agency governance. This team is guided, directed, inspired, and managed by the child welfare director.

Area A: Leadership provides a framework and expectations for CQI.

Item 1. Leadership sets clear expectations for the use of evidence throughout the CQI process. (I) Subitems:

- a. There are explicit directives and/or policies for examining data as a part of problem solving.
- b. Standing meetings or standing agenda items are devoted to CQI and data examination.
- c. Quantitative and qualitative data are distributed widely and available on demand.
- d. Data to support decision-making is expected and regularly requested.
- e. Other relevant information (specify):

Rating Description

4: Excellent: The use of evidence pervades the agency. Policies and priorities are anchored in data, and evidence is expected to support decision-making across the agency. This practice is universally evident in all of the agency's significant internal and external communications. The standard way of conducting business is that matters of importance in the agency are presented in light of available evidence, compared to baseline evidence, explained in terms of desired versus actual performance, and used to monitor performance and adjust strategies. Staff and stakeholders recognize that agency outcomes are improving in response to this approach.

3: Good: The need to use evidence is understood throughout the agency, but there are some inconsistencies or opportunities for improvement. For example, differences may exist between regions and the State, or only some decisions and meetings include the use of evidence, or there may be other resource or skill barriers to using evidence. This focus may be too new to have been embedded as the standard or efforts may be briefly sustained without sufficient potency to produce the desired results.

2: Emerging/Developing: Individual managers and leaders, either on their own or in concert with a CQI team, are figuring out how to incorporate evidence into decision-making. There is a desire to use evidence, and leaders have begun efforts to gather data, conduct analysis, and explore using evidence. The emergence or existence of "pockets of excellence" defines this early stage.

1: Minimal/Not Present: The leadership team may not have established clear expectations for the use of outcome data except as required by external monitors. Alternatively, staff and leadership may be limited by a lack of high-quality data, skills in presenting data to staff and stakeholders, or resources to dedicate to these tasks. *Adaptive challenge: Data may be experienced as punitive or potentially detrimental to the agency.*

Subdomain: Leadership Support and Modeling

Area A: Leadership provides a framework and expectations for CQI.

Item 2. The agency is organized and prepared to use data appropriately and effectively. (CC) Subitems:

- a. <u>Leadership has the skills and expert advisors to use quantitative and qualitative data in improving the agency's performance.</u>
- b. <u>Leadership understands</u>, promotes, and practices systems thinking to detect underlying child welfare practice and <u>outcomes</u>.
- c. Leadership understands, promotes, and practices the use of longitudinal data as a critical tool for understanding child welfare systems and for tracking movement toward defined objectives.
- d. Leadership uses data routinely and can explain results to both internal and external stakeholders.
- e. Other relevant information (specify):

Rating Description

4: Excellent: Leadership has the skills to understand quantitative, qualitative, and longitudinal data. Leadership seeks out data analysis at the right level to align with key decision-making processes. Leadership has the skills or advisors to recognize the strengths and limitations of the analysis, technology, and methodology used to support data-driven decisions. Reasons for decisions are explicit and transparent so that conclusions can be examined and questioned. Staff with CQI expertise, including data analytic skills, are part of the leadership team and embed systems thinking and related information supports on an ongoing basis within the agency. Leadership recognizes the importance of this voice and actively includes it in its own deliberations. Staff recognize that agency outcomes are improving in response to this approach.

3: Good: A majority of agency decisions are data-driven and explicit. The leadership team is versed in CQI logic and technique, and at least some CQI expertise resides within the leadership team. CQI consultation is available, and much agency expertise is centered in a CQI team with broad exposure across the agency. However, local depth of CQI knowledge is variable. The agency may use data often, but the consistency or appropriateness of the analyses may leave the agency vulnerable to challenge. There may be a need to strengthen systems thinking on how challenges in one area are affected by other aspects of the system.

2: Emerging/Developing: Agency leadership wants continuous improvement and recognizes that data-driven strategies and appropriate analyses are preferred. There is, however, a lack of consistency in CQI methodologies, and while expertise is maturing, it is not yet available systemwide. Some momentum is building, but learning may be localized, thus delaying integrated learning across the agency.

1: Minimal/Not Present: There is limited support for CQI, or activities in this area are in the planning or early development phase. Leaders recognize the need to have data as a part of solutions. However, barriers may exist, such as limited CQI expertise, inaccessibility of data, or problems with data quality or dissemination. Data may be used without an adequate understanding of methodology. *Adaptive challenge: Agency decisions may be crisis-driven and reactive, driven from the top down, or informed only by anecdotal evidence.*

Subdomain: Leadership Support and Modeling

Area B: Leadership promotes a culture within the agency that supports CQI.

Item 3. Leadership models CQI behavior inside and outside of the agency. (CC)

Subitems:

- a. Leadership is present and active in supporting a learning culture for CQI.
- b. Leadership models the search for systemic solutions and avoidance of blame and addresses systemic and adaptive challenges.
- c. CQI processes are incorporated into executive-level meeting agendas. Regular reviews and discussion of data are used to set priority areas of improvement.
- d. Leadership leads by example by personally using evidence/data to make and explain strategic decisions.
- e. Other relevant information (specify):

Rating Description

4: Excellent: With predictability, leadership looks to learn from experiences and promotes learning throughout the agency. Management and decision-making are transparent, and staff and stakeholders see, participate in, and understand the rationale for agency actions. The agency's agenda focuses on outcomes and is stable despite multiple external and internal pressures and changes. Leadership encourages and expects questioning, and staff feel free to test practice innovations in collaboration with their supervisor. Leadership seeks input inside and outside of the agency, can distinguish technical from adaptive problems, and seeks help in solution-focused work.

3: Good: Leaders know the value of CQI and encourage its use; however, they may rely on others or direct others to implement CQI (e.g., the CQI team) without modeling learning behavior. There may be opportunities to decrease pockets of blaming behavior, defensiveness about CQI actions or performance problems, or resistance to well-conceived CQI action plans. There may be opportunities to strengthen the commitment to learning, or believing that agency outcomes can improve, using CQI processes.

2: Emerging/Developing: CQI may be a well-known concept across the agency, but it may be unevenly developed or an isolated project in the agency. Agency leadership may know that it needs to move toward a results focus, but compliance remains a common focus. Some improvement efforts follow CQI tenets, and a few early adapters are showing how safe and disciplined tests can lead to innovation. Organizational learning is desired, but not yet practiced widely. Agency leadership rarely are comfortable discussing data and/or CQI activities.

1: Minimal/Not Present: While leadership may believe that CQI is valuable, it has invested most of its effort in a CQI team that functions relatively independent of the agency. The CQI team may make slow, incremental advances in spreading the practice, but these are based on personal influence, with little sanctioned authority. No serious plan exists for broader, more comprehensive implementation. Barriers may exist, such as limited resources, untapped or underdeveloped infrastructure for sharing learning, limited skills in discussing data, or a culture that reinforces the notion that answers come from the top. *Adaptive challenge(s): There may be a sense that leadership knows best, with hierarchical, top-down communication. Staff and stakeholders may hear CQI talk as empty rhetoric, believing that leadership actions contradict it.*

Subdomain: Leadership Support and Modeling

Area B: Leadership promotes a culture within the agency that supports CQI.

Item 4. Agency programs and strategies are linked to outcomes by the search for root causes and underlying conditions that explain or hypothesize current performance. (CC)

Subitems:

- a. <u>A rigorous search for multiple, often interrelated, root causes informs agency priority setting.</u>
- b. Agency strategies are affirmatively linked to root causes.
- c. Progress is examined in light of root cause hypotheses and adjusted accordingly.
- d. Programs, initiatives, policy directives, and other interventions are clearly linked to expected outcomes.
- e. Other relevant information (specify):

Rating Description

4: Excellent: Leadership promotes a consistent focus on improving agency performance and results by identifying causal factors of current performance before hypothesizing root causes and related solutions. All management decisions, clinical practice, external relations, and other efforts are linked to expected outcomes with consistent monitoring of the results achieved and modifications made, as needed. Frontline staff recognize how their casework practices directly connect to specific agency outcomes. Staff recognize that agency outcomes have improved because of these efforts.

3: Good: At times, all of the elements described above can be found in the agency but are inconsistently applied or lack potency to achieve desired results. For example, frontline staff may not understand how their work connects to the agency outcomes, or staff have a tendency to jump to solutions rather than fully exploring causes.

2: Emerging/Developing: Elements of best practice as described under the excellent rating may occur in one or more organizational entities or geographic regions, as efforts of early adopters, or as part of a planned rollout. Opportunities for improvement may include a more indepth and authentic search for a root cause before solutions are adopted or imposed, or more widespread and sustained efforts toward performance improvement. The agency may need to focus on skill development to strengthen CQI concepts, ways of thinking, and problem solving among staff at all levels.

1: Minimal/Not Present: CQI may well be invoked, but only superficially or rarely. When the agency makes decisions, there is no clear link to a CQI process—the agency routinely jumps from identifying a problem to implementing a solution. Staff see multiple initiatives as disconnected and may decide to "wait it out." *Adaptive challenge: The focus is on adopting currently popular programs that may not target the desired outcome*.

Subdomain: Leadership Support and Modeling

Area B: Leadership promotes a culture within the agency that supports CQI.

Item 5. Leadership focuses on quality as well as compliance. (CC)

Subitems:

- a. When process measures are used, they are connected to agency outcomes.
- b. When compliance is monitored, it is always as a precondition to a focus on quality.
- c. Case reviews and other qualitative methods (focus groups, interviews, etc.) are regular components of agency monitoring.
- d. Other relevant information (specify):

Rating Description

4: Excellent: The agency emphasizes process measures of caseworker practices as fundamental to outcome achievement. Compliance only is the starting point, with quality casework practices recognized as the natural and expected focus once compliance has been achieved. Compliance measures can be linked as critical precursors to important practices and outcomes. Case reviews and other qualitative measures describe agency operations, are linked to outcomes, and are incorporated into CQI work.

3: Good: Opportunities exist to strengthen the consistency of agency leaders who are balancing process measures and compliance work with outcome achievement. Case reviews occur regularly and are intended to reflect the quality of casework practice, but the agency needs to minimize the focus on compliance or emphasize the connection between high-quality practice and positive outcomes for children and families. The agency may need to strengthen the *use* of case review and other qualitative data in a CQI process.

2: Emerging/Developing: The agency has come to understand that simple compliance is insufficient to achieve its goals, and leadership recognizes that the quality of the work product is as important as the fact of the work, but that message is heard unevenly across the agency. In most parts of the agency, the focus remains on compliance. Among a few early adopters, work is emerging that identifies key casework practices, highlights successes, and explains why these are important and how they connect to performance improvement.

1: Minimal/Not Present: The agency is working hard on compliance, but is making no headway toward an outcome focus. The agency may use case examples, but these often focus on what is missing rather than what was done right and the case outcomes. There may be capacity barriers to a focus on quality practice, such as limited resources for providing positive feedback, lack of coaching and mentoring skills, or a culture based on ineffective beliefs about casework. *Adaptive challenge: Staff may feel threatened or intimidated by the data or resistant to case review processes.*

Subdomain: Staff and Stakeholder Engagement

Overview: In a CQI environment, those closest to the work (staff, children, youth, families, and stakeholders) are acknowledged and treated as the true "experts." CQI depends on the meaningful and active participation of staff and stakeholders at all levels. For the purposes of this assessment, "stakeholders" include caregivers, youth and families, other public entities, community partners, contracted providers, courts, and Tribes; "staff" include program managers, supervisors, and frontline social workers at the State, regional, and/or county level. Each child welfare jurisdiction will need to specifically define "stakeholder" and "staff" to match its unique circumstance.

Area A: Staff engagement is a high priority and a clearly articulated expectation in the agency's CQI system. Item 6. Staff at all levels of the child welfare system have opportunities to actively participate and assume meaningful roles in all phases of the CQI process. (EP)

Subitems:

- a. Staff have clearly defined roles in CQI.
- b. <u>Staff are actively involved in each phase of the CQI process: identifying and understanding the problem,</u> researching solutions, developing a theory of change (ToC), adapting or developing a solution, implementing the solution, and monitoring and assessing the results.
- c. Staff actively participate in CQI advisory capacities throughout the agency.
- d. Staff recommendations inform agency actions and priorities.
- e. Staff are engaged in the development and adoption of outcomes, indicators, and practice standards that connect to the agency's values, principles, mission, and vision.
- f. Staff at all levels of the agency are empowered to advocate for, test, and implement changes in policy, practices, programs, and/or training based on CQI results.
- g. Other relevant information (specify):

Rating Description

4: Excellent: The agency consistently demonstrates, through CQI practices, policies, and procedures, that staff participation in the CQI process is a high priority and essential to achieving improved performance and outcomes. The agency and staff can point to examples of improved performance and outcomes resulting from staff participation in the CQI process. There are clear and consistent expectations (from supervisors, managers, and directors) and ample, ongoing opportunities (such as CQI teams, advisory capacities, and Child and Family Services Reviews (CFSRs)) for staff from across the agency, and at all levels, to participate in some aspect of the CQI process. Staff feel valued and empowered by their participation in the CQI process. Position descriptions and employee development plans establish staff roles in the CQI process.

3: Good: The agency articulates, through CQI policies and procedures, that staff participation in the CQI process is a high priority; however, this is not consistently developed or implemented across the agency. Although the agency acknowledges the essential role of staff participation in the CQI process for improving performance and outcomes, the scope of influence may focus more on improving cases than improving systems. The agency may need to establish consistent opportunities for meaningful participation in the CQI process and expand the scope and substance of staff roles across the agency. Overall, staff believe that participating in the CQI process is beneficial, but consistent position descriptions or employee development plans that include CQI roles could strengthen their participation.

2: Emerging/Developing: CQI policies or procedures do not clearly articulate staff participation and roles. Although staff participation is beginning, it may be narrowly defined within distinct roles, only present in some phases of the CQI process, or limited to agency-designated CQI staff. The agency may need to strengthen the understanding that staff engagement plays an essential role in performance improvement, or it may need to enhance skills in facilitating meetings to encourage staff participation. Staff may feel like their participation is acknowledged, but not encouraged.

1: Minimal/Not Present: Staff are seldom included in the CQI process, or the agency has not yet developed CQI processes. If the agency includes staff, their roles may be time limited or viewed as satisfying a requirement. Roles and employee development for CQI participation are underdeveloped; staff may feel that the agency does not value their participation. There may be resource barriers if the agency is facing overwhelming staff shortages or a culture with ambivalent beliefs concerning the worth of staff input. *Adaptive challenge: Staff are reluctant (and may be fearful) to provide input or suggestions for improving agency practices or performance.*

Subdomain: Staff and Stakeholder Engagement

Area A: Staff engagement is a high priority and a clearly articulated expectation in the agency's CQI system.

Item 7. Staff of all levels of the child welfare system are prepared and supported to participate in all phases of the CQI process. (KS)

Subitems:

- a. Staff receive role-specific training on the skills and abilities needed to participate in the CQI process.
- b. <u>Staff receive training, preparation, and support on the use of data, including how to analyze and interpret data, connect data to practice, and identify trends and key learnings.</u>
- c. Resource allocation and protected time support staff inclusion and participation in the CQI process.
- d. Staff report feeling free to suggest innovation or voice insights about factors affecting agency performance.
- e. Other relevant information (specify):

Rating Description

4: Excellent: The agency makes role-specific, formal, initial, and ongoing CQI training available for all staff across the agency. Training curricula focus on preparing and supporting staff, at all levels of the agency, to actively participate in a data-driven CQI process. Staff are skilled and routinely use data in their work, and are able to make connections between their practices/actions and measurable outcomes. Staff feel well prepared to actively participate and assume meaningful roles in all phases of the CQI process. The agency commits adequate resources, staff, and time to support participation in training and in all phases of the CQI process. The agency has a feedback system so that staff understand what happens to their ideas and what initiatives and other agency actions are in progress.

3: Good: The agency provides formal, initial, and ongoing CQI training, but training may be limited to a few individuals or to a centralized CQI team. Training may not be consistently available or accessible. Staff may feel unprepared to assume some roles in the CQI process. The agency has committed resources to support participation in CQI processes, but there are fiscal and staff limitations.

2: Emerging/Developing: An initial overview or orientation CQI training is available, but it may focus on a timelimited event, such as the CFSR. The agency may need to strengthen training to build the necessary knowledge or skills for staff to use data in their work and to fill a range of specific roles in the CQI process. Staff may feel minimally prepared to assume roles, or may find that the agency lacks the resources to support participation in the CQI process.

1: Minimal/Not Present: There is no formal, agencywide CQI training, although the agency may have a plan in development. The agency may have a limited training infrastructure to support additional or specialized CQI training. Because existing training has not addressed use of data, there is no expectation for staff to have this knowledge or skills nor understand their role in the CQI process. The agency may not have allocated resources specifically to support participation in CQI processes; resources used for this purpose come out of other agency allocations, when available.

Subdomain: Staff and Stakeholder Engagement

Area B: Child, youth, family, and stakeholder engagement is a high priority and a clearly articulated expectation in the agency's practice model and CQI system.

Item 8. The agency provides opportunities for participation and meaningful roles in the CQI process for child, youth, family, and other stakeholder representatives in a manner that is sensitive to their perspectives and vulnerabilities. (EP)

Subitems:

- a. Children, youth, family, and stakeholders are represented throughout the CQI process: identifying and understanding the problem, researching solutions, developing a ToC, adapting or developing a solution, implementing the solution, and monitoring and assessing the results.
- b. <u>Child, youth, family, and stakeholder representatives actively participate in CQI advisory capacities throughout the agency.</u>
- c. Child, youth, family, and stakeholder representatives provide input that informs agency actions and priorities.
- d. Child, youth, family, and stakeholder representatives are engaged in the development and adoption of outcomes, indicators, practice standards, and other initiatives.
- e. Other relevant information (specify):

Rating Description

4: Excellent: The agency consistently demonstrates, through policy, practice, and procedures, that stakeholder participation in CQI processes is essential to achieving improved performance and outcomes. The agency and stakeholders can identify examples of improved performance and outcomes resulting from stakeholder participation. There are clear and consistent expectations and ample ongoing opportunities for a broad representation of stakeholders contributing their unique skills and perspective in CQI processes. Stakeholders feel valued, empowered to contribute, and invested in the agency's efforts.

3: Good: The agency articulates, through CQI policies and procedures, that stakeholder participation in CQI processes is a high priority; however, this is inconsistently implemented across the agency. Although the agency recognizes the essential role of stakeholder participation in CQI processes, the scope of influence is more likely at the case level than system-related. Roles may be limited in scope and substance, or particular stakeholder groups are underrepresented. Stakeholders value their participation in the CQI process but may feel that their input is disconnected from agency improvement efforts or outcomes.

2: Emerging/Developing: Because CQI policies or procedures do not clearly articulate stakeholder participation or roles, participation occurs on more of an extemporaneous versus systemic basis. The agency may need to strengthen the understanding and commitment to stakeholder engagement as essential to improvements of practice or outcomes, or it may need to be more inclusive of certain stakeholder groups or select representatives. The agency may need to strengthen its skills in facilitating stakeholder input or limited resources to support the effort. Stakeholders may feel like their participation has little impact.

1: Minimal/Not Present: Some areas of the agency are considering stakeholder participation. Generally, however, stakeholders are seldom included in the CQI process and their roles are narrowly defined. There are no clear expectations for stakeholder participation, and there is minimal effort to accommodate stakeholder participation in CQI processes; when it does occur, the agency may see it as meeting a requirement. There may be limitations in resources allocated to this effort, a need for skill development among agency staff, or ambivalent beliefs about the worth of stakeholder input. Adaptive challenge: Stakeholders are not encouraged (and, in fact, may fear reprisal) to provide input or suggestions for improving agency practices or performance, or they may express that their roles are merely token.

Subdomain: Staff and Stakeholder Engagement

Area B: Child, youth, family, and stakeholder engagement is a high priority and a clearly articulated expectation in the agency's practice model and CQI system.

Item 9. The agency provides the level of preparation and support necessary to facilitate the roles of child, youth, family, and other stakeholder representatives in the CQI process. (**R**)

Subitems:

- a. Child, youth, family, and stakeholder representatives receive training on the skills and abilities specific to their roles in the CQI process.
- b. Child, youth, family, and stakeholder representatives receive training, preparation, and support on the use of data, including how to analyze and interpret data, connect data to their experience, and identify trends and key learnings.
- c. <u>Resource allocation supports child, youth, family, and stakeholder representative inclusion and participation in</u> the CQI process, including dedicated resources to offset the financial concerns of participation and dedicated staff/full-time employees to ensure ongoing recruitment, preparation, support, and recognition for children, youth, and families.
- d. Children, youth, families, and stakeholders feel free to suggest innovation or voice insights about factors affecting agency performance.
- e. Other relevant information (specify):

Rating Description

4: Excellent: The agency makes a substantial commitment of resources to support stakeholder participation in CQI processes, recognizing the unique needs of various stakeholder constituencies. The agency has dedicated staff who conduct ongoing efforts to recruit, train, support, and recognize stakeholders. Among other topics, training curricula focus on outcome data and on preparing and supporting stakeholders to actively participate in a data-driven CQI process. Stakeholders are able to make connections between their experiences and data and to identify trends. Stakeholders feel well prepared to actively participate and assume meaningful roles in all phases of the CQI process. The agency has a feedback system so that stakeholders understand what happens to their ideas and what initiatives and other agency actions are in progress.

3: Good: The agency commits resources to support stakeholder participation in CQI processes; however, some stakeholder constituencies are underserved or underrepresented. Although the agency supports stakeholders through the reimbursement of expenses related to CQI participation and assigns staff to facilitate stakeholder participation, these efforts may be sporadic rather than ongoing. The agency could customize the training provided to meet the unique needs of all stakeholder constituencies, or it could include more training related to the use or understanding of agency data. Stakeholders may feel prepared to assume some, but not all, of the roles in the CQI process.

2: Emerging/Developing: Stakeholder engagement is beginning, with limited resources committed to supporting stakeholder participation in CQI processes, recruitment of some constituencies and the exclusion of others, or limited training on CQI or data use, which is not tailored to meet stakeholder needs. Stakeholder participation may be limited, with a sense that their engagement is too infrequent, limited, or uninformed to be meaningful.

1: Minimal/Not Present: Because the agency does not have resources dedicated to supporting stakeholder participation in the CQI process, stakeholder recruitment and retention is a challenge. Although stakeholders may fill roles in CQI for limited circumstances, there is no training or preparation for meaningful roles in CQI processes. Other barriers may exist, such as limited skills in agency staff to engage or train stakeholders, few service providers to engage, transportation issues, or ambivalent beliefs about the value of or need for stakeholder training.

Subdomain: Communication

Overview: In a CQI environment, communication is a structured, strategic support function that ensures a highquality, sustainable CQI system that is understood, embraced as the way of conducting business, and occurring at all levels of the child welfare system.

Area A: Communication, as a strategic function, is used to support a high-quality, sustainable CQI system.

Item 10. Communication activities align with and support COI goals. (CC)

Subitems:

- Communication activities create awareness, educate, engage, and generate buy-in for CQI from staff, children, a. youth, families, and stakeholders.
- Multiple communication strategies, channels, and modalities are used to disseminate CQI information to a variety b. of audiences, including staff, children, youth, families, and stakeholders.
- c. Communication from the agency routinely articulates the agency's practices, the direction the agency is heading and why, and the connection between practice and outcomes.
- d. Lessons learned from CQI and best practices for improved outcomes are routinely shared inside and outside of the agency.
- e. Communication about the results of CQI activities is broadly distributed between CQI teams at the local, regional, and State levels; across and outside of the agency; with key partners, such as information technology (IT), legal/judicial, behavioral health, education, and health; and with children, youth, families, and stakeholders.
- f. The agency creates and distributes data analyses, reports, and presentations in usable formats for a variety of audiences, including staff, children, youth, families, and stakeholders.
- g. Communication activities include efforts to solicit and acknowledge input/feedback from staff, children, youth, families, and stakeholders on an ongoing basis.
- h. Other relevant information (specify):

Rating Description

4: Excellent: The agency demonstrates, through its development, implementation, and ongoing update of a COI plan, that communication is a strategic support function of the CQI system. Key messages clearly articulate CQI processes and goals, as well as their connection to the agency's mission, vision, or guiding principles. These messages are shared, understood, and assimilated at all levels of the agency and with stakeholder groups. The agency uses numerous communication strategies and modalities to provide the most significant information in the most effective formats. Communication is bidirectional and lateral, with continuous feedback loops facilitated and coordinated by the agency. 3: Good: The agency has a CQI communication plan, but some essential elements for supporting the CQI system are underdeveloped. For example, key messages may be clear about the CQI process and goals, but shared understanding

with stakeholder groups needs to be strengthened. The agency may have developed communication strategies and modalities as "one size fits all" versus consideration for the most effective ways to disseminate messages to various audiences. Communication may be occurring from leadership to frontlines and back and with stakeholders; however, the strengthening of agency communication coordination may ensure that feedback is communicated in a timely manner.

2: Emerging/Developing: The agency develops and uses a few communication strategies and modalities to disseminate CQI information. Key messages may be clear regarding some of the CQI process and goals, but the messages lose clarity and shared understanding as they are disseminated widely. Feedback loops within the agency and with stakeholders are developing, but without organized mechanisms for using feedback. There may be a lack of resources dedicated to the effort or a need for communication skill and technology development.

1: Minimal/Not Present: COI information may be disseminated within the leadership ranks of the agency, but minimal information is shared across all levels of the agency or with stakeholder groups. Messages may lack clarity or consistency, leading to misunderstanding and confusion about CQI processes, agency outcomes, or agency practices. Staff and stakeholders often have difficulty accessing, interpreting, or utilizing communication strategies and modalities. Adaptive challenge: The agency is highly guarded about releasing information about agency outcomes, practices, or performance improvement efforts. The agency may have fears of misinterpretation of information that spawns negative press, scrutiny, or adversarial relationships with competing goals that impede communication.

Domain: Essential CQI Functional Components Subdomain: Foundational Administrative Structure to Oversee and Implement CQI

Overview: A solid foundational administrative structure is critical to the development and sustainability of a wellfunctioning CQI system. Agency CQI standards, policies, and procedures provide the basis for the development of the agency's CQI plan, which helps guide the implementation of the agency's CQI system. Resources and infrastructure, including a dedicated CQI staff, a teaming structure that promotes the shared use of data and other information, and staff and stakeholder training, provide the foundational supports that promote a CQI system that has the capacity to deliver positive results.

Area A: The agency provides administrative oversight of a comprehensive CQI model that is operationalized in a consistent manner throughout the entire agency.

Item 11. CQI processes and activities are grounded in best practices literature and guided through clearly articulated standards and procedures. (I)

Subitems:

- a. <u>Up-to-date</u>, explicit policies and procedures articulate CQI requirements for staff throughout the agency.
- b. CQI policies and procedures are structured to ensure that all agency jurisdictions (i.e., counties, regions, private provider agencies) are implementing and executing CQI activities as designed and with consistency.
- c. Other relevant information (specify):

Rating Description

4: Excellent: The connection of the agency's CQI operating system to current best practice standards is evident. The agency makes a deliberate effort to identify the latest thinking and ideas in CQI from child welfare and from related fields and other sectors. The agency has written policies and procedures in place that are being executed by staff who can readily articulate CQI agency requirements as they are outlined in the agency's CQI plan. Agency staff and stakeholders understand their respective roles in the CQI process. CQI activities are implemented as designed and with consistency throughout the agency. Localized deviations from established agency CQI policies and procedures are explainable and are continually reassessed to improve the larger agencywide CQI system.

3: Good: The agency has a comprehensive set of CQI policies and procedures in place that addresses core CQI activities; however, the system could be strengthened by expectations for the agency and jurisdictions to systematically update their CQI practices to align with current best practices. For example, CQI policies and procedures might be updated randomly in response to agency staff happening upon or hearing about a new CQI innovation or reactively, in response to formal assessment findings or directives. While there is evidence of a connection between the agency's written standards and CQI plan, a lack of clarity in some areas contributes to the inconsistent implementation of some CQI processes or activities across agency jurisdictions.

2: Emerging/Developing: The agency has a beginning set of operating procedures for its CQI system that focuses primarily on what the agency considers to be its key CQI activities (e.g., case record review) and does not address the broader system in a comprehensive manner. CQI procedures may exist but are not tethered to formal agency policy and procedural requirements that are transparent and accessible to the public. The agency primarily focuses on seeing that a few select CQI activities are being implemented regularly. CQI processes may be limited to certain areas of practice (such as ongoing cases) with no CQI activities tied to systemic areas of functioning (such as staff and provider training or foster parent recruitment and retention).

1: Minimal/Not Present: Any CQI activities that are taking place are operating without the benefit of written procedural guidance. A small subset of agency staff may be directly engaged in implementing or participating in CQI activities and do so on the basis of perceived knowledge or experience but are limited to implementing few practices. The agency may have written policies and procedures, but these have not been implemented.

Area A: The agency provides administrative oversight of a comprehensive CQI model that is operationalized in a consistent manner throughout the entire agency.

Item 12. The agency executes a written CQI plan that is comprehensive and developed with staff and stakeholder involvement. (I)

Subitems:

The agency CQI plan:

- a. <u>Sets forth the purpose and scope of CQI activities and includes an overview of the agency's approach to CQI and any specific model or methodologies the agency employs</u>
- b. Describes the agency's CQI teaming structure and outlines opportunities and roles for staff and stakeholders in the development of the CQI plan and in CQI activities
- c. Defines how data is to be collected, used, shared, and monitored throughout the agency
- d. Details the agency's processes for case record review, including sampling requirements
- e. Establishes a defined improvement cycle and agency feedback loop for communicating results
- f. Outlines methods and timeframes for meetings of CQI teams and reporting of results
- g. <u>Outlines the process for the periodic assessment of the CQI plan and the program's utility, including any barriers to and supports for implementation</u>
- h. Other relevant information (specify):

Rating Description

4: Excellent: The agency implements a written CQI plan that agency staff and stakeholders both know and embrace. Staff and stakeholders understand the purpose and scope of the agency's CQI system, their roles in CQI activities, and can readily speak to their contributions to the plan's development. The plan is comprehensive and provides an overarching framework and set of principles that provide the underpinning to the CQI model, as well as a defined systemic CQI improvement cycle and feedback loop. The plan outlines the importance of using data to inform agency decision-making, and this is practiced throughout the agency. The CQI plan and system is regularly reassessed as a matter of agency practice and adjusted accordingly. The CQI plan addresses all agency systems and activities, including supportive functions.

3: Good: The agency has a written plan in place that provides a solid framework for CQI across the agency; however, there is not clear evidence of consistent implementation across all areas. While the agency has technically provided staff and stakeholders with the opportunity to contribute to the plan's development, the extent of any meaningful involvement is not always evident. The plan describes most key CQI activities, but these lack detail in areas, and the agency appears to be invested in some CQI activities more than others. The plan is reassessed and updated on occasion, but not in accordance with a regularly defined schedule or with the active involvement of staff and stakeholders.

2: Emerging/Developing: The agency has a written CQI plan that is either newly developed and in the early stages of implementation, or a plan that is significantly incomplete and/or lacking in clarity across multiple domains. Select staff may have developed the plan with few opportunities for a broader cross section of agency staff and stakeholders to provide input. There is little awareness across the agency of the existence of a CQI plan and of the basic elements and purpose of the CQI system.

1: Minimal/Not Present: The agency does not have a written CQI plan, or its plan is missing most core elements, or there is no evidence that the agency is implementing the plan or scheduling its implementation in the near future.

Area A: The agency provides administrative oversight of a comprehensive CQI model that is operationalized in a consistent manner throughout the entire agency.

Item 13. A teaming structure that supports the active involvement of staff and stakeholders at all levels of the CQI process is operational throughout the agency. (EP)

Subitems:

- a. <u>Staff at all levels (i.e., caseworkers, supervisors, agency management/leadership, et al.) have the opportunity to participate in established CQI activities, such as membership on CQI teams/committees, involvement in case record reviews, data analysis, and in contributing to action/improvement planning and monitoring activities.</u>
- <u>Stakeholders (i.e., private providers, youth, parents, foster/adoptive parents, community providers, et al.) have the opportunity to participate in established CQI activities, such as membership on CQI teams/committees, involvement in case record reviews, data analysis, and in contributing to action/improvement planning and monitoring activities.</u>
- c. CQI teams meet regularly, using an established agenda that includes data review and focuses on solving problems and improving outcomes.
- d. The CQI teaming structure specifies the flow of information or communication between various levels of CQI teams.
- e. Other relevant information (specify):

Rating Description

4: Excellent: Staff and stakeholders actively participate in the agency's CQI process through a fully operational teaming structure. Established CQI teams that include a broad range of staff and stakeholders operate within all sectors of the agency and across all jurisdictions. There is evidence that the agency continually makes deliberate efforts to bring new voices to the agency CQI table where the routine sharing of quality data and information fosters meaningful communication and dialogue that is then acted upon to improve outcomes. When it comes to CQI, a shared sense of community is evident where "membership" is not limited only to those who actively serve on CQI teams and committees but to all staff at all levels and stakeholders throughout the agency. The agency values transparency and makes the recording and sharing of CQI-related activities, including data analyses and improvement planning efforts, standard practice.

3: Good: CQI teams are operational across the majority of agency jurisdictions and have representation from most key stakeholder groups. Staff and stakeholder recruitment could be improved in some areas, or the agency could make deliberate efforts to provide more meaningful opportunities for active involvement in the array of activities that comprise the agency's CQI system. Teams generally meet on a regular basis, and the agency documents and makes efforts and activities available for those who make the effort to access them.

2: Emerging/Developing: There may be an uneven distribution of CQI teams across the agency, or the agency still is in the early stages of implementing a CQI teaming structure. CQI teams may be operating in a specific office or region as part of a phased plan to expand implementation throughout the agency over a period of time. Staff participation may be limited to local agency management charged with launching the process. A familiar community-based provider or foster parent who frequently is called upon to partner on local initiatives may exclusively represent stakeholder involvement. There is only a beginning structure to the teaming process at this stage—the agency may make efforts to hold meetings regularly, but implementation is sporadic. Meeting minutes are documented not as an ongoing expectation, but as the result of individuals who make an effort to record them.

1: Minimal/Not Present: The agency does not utilize CQI teams as a means toward executing CQI processes and activities, or this area is under development. Adaptive challenge: A fully operationalized teaming structure is in place, but focuses less on solutions to enhance performance and results and more on personal concerns.

Area B: Resources and infrastructure are available and employed to sustain a vigorous, agencywide

CQI process.

Item 14. The agency has an appropriate level of qualified and trained staff who are expressly dedicated to overseeing and providing needed support to all CQI processes and activities. (**R**)

Subitems:

- a. <u>The allocated number of dedicated CQI staff positions is congruent with the agency's size and scope.</u>
- b. CQI staff positions are routinely filled, with no pattern of ongoing vacancies.
- c. The agency has well-defined CQI staff job descriptions that are linked to the agency's CQI policies and CQI plan.
- d. The agency routinely recruits staff with the capacity to successfully carry out prescribed CQI functions.
- e. The agency makes deliberate efforts to recruit qualified data analysts with expertise in converting data to evidence.
- f. Other relevant information (specify):

Rating Description

4: Excellent: Agency commitment to supporting an effective and sustainable CQI system is evidenced by a continual investment in the allocation and filling of staff positions expressly dedicated to providing administrative and technical support to CQI efforts. Leadership takes into consideration the size and scope of the agency's services and deliverables and where the "work" is located in determining the number and types of allocated positions. Position requirements are clearly delineated so that individuals applying for and entering into CQI positions understand the skills required and the key roles they are expected to play. The agency pushes established boundaries and looks for opportunities to expand the number of allocated CQI positions and to recruit, whenever possible, the most qualified professionals, particularly in highly specialized areas such as data analysis.

3: Good: The agency has an established number of allocated CQI positions; however, the number does not fully match the size or complexity of the system the positions are intended to support. A pattern of vacancies may exist in specific offices or in jurisdictions, and targeted recruitment efforts have not made a sustainable impact. The agency may have written CQI job descriptions, but the descriptions are not entirely congruent with the current CQI plan or with expectations from agency State or local leadership. Data analyst positions exist in the agency but may more closely align with IT functions, or staff responsible for data analysis may not have the qualifications or level of experience to adequately support agency efforts.

2: Emerging/Developing: The agency is making some efforts to staff CQI efforts, but these staff may be secondarily dedicated to CQI. For example, the agency may be establishing and filling some positions that are reactively aligned with current issues or efforts rather than proactively aligned to build a system. Or other agency divisions (i.e., training, resource development, operations) are sometimes called upon or leveraged to provide otherwise missing CQI support. The agency may recognize the need for dedicated CQI positions but may lack the ability to secure support or funding for them. CQI job descriptions, if they do exist, focus only on the most basic day-to-day job expectations and do not connect to a broader agency CQI plan or expectations. There may be a need for advanced skill development of current CQI staff or basic CQI training for the entire agency staff.

1: Minimal/Not Present: The agency does not have dedicated CQI positions. Any CQI activity taking place in the agency occurs with little to no administrative or technical support. *Adaptive challenge: CQI staff are regularly assigned to help with casework efforts, such as backlogs, or otherwise are diverted from CQI work.*

Area B: Resources and infrastructure are available and employed to sustain a vigorous, agencywide CQI process.

Item 15. Staff receive formal, introductory, ongoing, and specialized training specific to their roles and responsibilities in the agency's CQI process. (KS)

Subitems:

- a. <u>The agency has a formalized CQI training plan, along with a comprehensive training curriculum, that connects to the agency's CQI policies and CQI plan.</u>
- b. Training content is customized to address the roles and responsibilities of dedicated CQI staff, agency staff at all levels, and stakeholders, including contracted private provider staff.
- c. Training content includes the purpose and goals of the agency's CQI system, agency CQI policies and requirements, staff and stakeholder roles in CQI, data collection and analysis, case record review, root cause analysis, problem identification and resolution, identification of appropriate metrics for a CQI plan or strategy, identification of valid and reliable quantitative and qualitative indicators, and basic concepts of program evaluation.
- d. In addition to the above, CQI staff receive training on how to effectively engage staff and stakeholders, facilitate meetings and activities, communicate evidence and findings, implement evaluation methods, and specialized data-related training.
- e. Staff responsible for data analysis and program evaluation have academic credentials in and/or have received formal training in data analysis, program evaluation, and CQI.
- f. Other relevant information (specify):

Rating Description

4: Excellent: Staff have the knowledge and skills to support their full participation in the agency's CQI process. Agency leadership understands the value of formalized training and makes the necessary investments for its staff. The agency routinely implements a comprehensive CQI training plan that provides all staff, new and existing, with introductory and ongoing training on the agency's CQI plan, policies, and requirements that provide clarity regarding staff and stakeholder roles in the CQI process. CQI staff demonstrate confidence in their ability to successfully facilitate and support other agency staff and stakeholders in the implementation of CQI activities, including the use of data, action planning, and making evidence-informed decisions.

3: Good: The agency executes a training plan that covers most of the key elements of its CQI process, but the curricula could be strengthened to provide the level of depth that truly supports staff in carrying out their responsibilities relative to the CQI process. The agency routinely provides new staff with introductory CQI training; however, curricula may not be consistently updated to reflect current agency CQI requirements or may not be provided to staff on an ongoing basis. The agency may need to provide CQI staff with greater access to specialized training, such as data analysis or meeting facilitation, generally through an external resource.

2: Emerging/Developing: Staff training in CQI is not a demonstrated priority, or the agency is in the early stages of developing a CQI training approach. The agency may acknowledge the potential benefits of CQI training but is more inclined to "make do" by utilizing existing training resources and offering only the barest of a basic, introductory training addressing general CQI concepts to staff.

1: Minimal/Not Present: The agency does not provide staff with formal CQI training and does not have a CQI training plan in action. *Adaptive challenge: The agency believes that if CQI staff were strong child welfare practitioners, additional CQI training would be unnecessary.*

Domain: Essential CQI Functional Components

Subdomain: Foundational Administrative Structure to Oversee and Implement CQI

Area B: Resources and infrastructure are available and employed to sustain a vigorous, agencywide CQI process.

Item 16. Staff are afforded access to up-to-date technology and other resources to assist in the use of data/evidence needed to make informed decisions. (**R**)

Subitems:

- a. <u>The analytic tools, technology, and information management system are sufficient to collect, store, and analyze</u> the quantitative and qualitative data needed to monitor performance and test the effects of interventions.
- b. The agency invests in the upgrading of technology to draw down data from other systems (i.e., education, Medicaid, and other human service programs) and support staff in the analysis of large quantities of currently available administrative data.
- c. A variety of data display options are available to staff, such as performance dashboards and databases with userfriendly report features.
- d. University partnerships and collaboration with experts are utilized to inform and support CQI processes, particularly the use and analysis of data and specialized program evaluation.
- e. Staff have access to evidence-based practice clearinghouses and academic journals to support CQI and related program improvement activities.
- f. Other relevant information (specify):

Rating Description

4: Excellent: The agency's commitment to providing an array of technology resources that support decision-making and service delivery efforts of staff is evident. The agency keeps information systems up to date, and staff at all levels have ready access to data that is reliable and easy to use. Staff, including contracted private agency staff, are supported by a wide range of available data to make evidence-based decisions. The agency values university partnerships and readily leverages them to support key programs and initiatives through the use of data analytics and specialized program evaluation. Having easy access to the kinds of information that support full participation in the CQI process is a given. Staff have access to and are encouraged to utilize intranet- and Internet-based clearinghouses and other sites to support evidence-informed problem resolution and decision-making.

3: Good: Resources, such as user-friendly data and laptops for case reviews, generally are available to staff but may be relatively new and not yet fully internalized throughout the agency or could otherwise be strengthened in some way (e.g., contracted private agency staff have limited access to agency data reports). The agency may have invested in the development or upgrading of its internal data systems but is facing challenges in coordinating data exchanges with external entities. The agency may have partnerships with universities for data-related support, but the focus generally is limited to specialized agency projects or initiatives that do not target or support the agency's broader mission and outcome goals. All staff may have access to the agency's intranet-based resources for academic and other related information but only select staff, such as management, have access to outside, academic-based and other Internet sites.

2: Emerging/Developing: The agency is aware of its technological challenges but does not have a clear path toward addressing the issues. Limitations may include that plans to address challenges are in the early stages of implementation. A limited menu of data reports may be available, but does not provide the depth or quality of information needed to genuinely assist staff. Staff with more knowledge of the agency's data systems may be able to procure ad hoc reports more readily. University partnerships lack a clear agenda/purpose or target a specific project that does not resonate with or impact the majority of agency staff in their day-to-day work.

1: Minimal/Not Present: The agency's technical infrastructure is extremely limited, and the agency does not have a plan in place to address the issue. Data reports are not available to staff, and even requests for ad hoc reports pose a genuine challenge. The agency does not engage in formal partnerships with universities for support in the analysis and use of data. Case reviews and surveys, if used, must be completed with pen and paper, and data are not easily compiled for analysis.

Overview: To support a cohesive, comprehensive, and well-functioning CQI system, quality data is paramount to inform and improve outcomes for the State and to fuel CQI activities. Investment in wide-ranging and inclusive processes and infrastructure are necessary to ensure the agency can collect, analyze, and use quality data to monitor practice and interventions, as well as to manage change.

Area A: Quality data collection

Item 17. Comprehensive data collection methodologies and modalities facilitate the ability to gather high-quality data. (I)

Subitems:

- a. <u>Data elements in the information system and other instruments (case reviews, surveys) are mapped in</u> <u>structured ways and tied to key outcomes and measures of child welfare practice.</u>
- b. A data dictionary exists for data elements in the State information/data system.
- c. Trained staff members are recruited to work with data collection and receive routine, ongoing training to improve the quality of data collection.
- d. <u>Instruments utilized (case reviews, developed data reports, surveys, etc.) to produce case-level data include</u> instructions for utilization rating guides (case reviews, surveys) and/or business rules and specifications (data reports).
- e. Surveys designed by the agency are developed by individuals trained in survey design and supported by established processes and procedures to coordinate trained program staff in item development, pilot testing, and ongoing data quality checks during the data collection phase.
- f. Supervisory oversight exists to monitor and ensure consistent, quality data collection.
- g. Other relevant information (specify):

Rating Description

4: Excellent: High-quality data collection safeguards are in effect across the continuum of agency data collection practices and processes (both quantitative and qualitative). Robust quality controls are in place at the front end of data collection efforts and are overseen by well-trained staff; tested instruments produce useful and relevant data; and trained staff, in both the technology and programmatic units of the agency, exercise the oversight of data. The agency operates under the premise that its data are reliable and valid, and it tests that assumption regularly.

3: Good: The agency places a premium on good, quality data, and it has routine safeguards in place to promote quality data. The factor that distinguishes this rating from an excellent" rating is the lack of rigor across all aspects of data quality. The agency may treat data quality as a technical issue, with resultant responsibility lying in the IT departments, but not in the programmatic departments. Or, perhaps regional differences in how the agency collects data produce less than standardized results. The result is that data quality is perceived as important, but it is not a shared, agencywide priority or consistently implemented.

2: Emerging/Developing: The agency knows that data quality is an important issue, but there are significant lapses across several aspects of data quality. Examples of incomplete or invalid data are evident, with safeguards being insufficient or lacking. Quality control issues routinely emerge from audit findings, and the agency is implementing improvement plans. Program staff users routinely question the validity of data in the system. Program staff members are slow to enter data, and supervisors place little value on this aspect of data collection.

1: Minimal/Not Present: Standards are unclear or absent, and staff are merely technicians in keeping systems operating. There is much more concern about data entry as it relates to compliance, mandates, or sanctions. There may be resource limitations with regard to staff, money for technology, or no internal or external expertise. Outdated information systems may limit the development of these practices. *Adaptive challenge: Staff view data collection as a mandated compliance chore without a connection to managing cases or other program functions and consequently put little effort into accurate data entry.*

Area B: Quality data infrastructure

Item 18. Data systems promote ease of data entry and data sharing. (I)

Subitems:

- a. <u>The data system is user friendly, easy to navigate, and has mechanisms to reduce duplication and data entry</u> errors, and to improve data quality.
- b. Policies and procedures allow staff to dedicate time to enter information into the system.
- c. <u>Sufficient resources exist for staff to have easy access to enter information into the system, both in the office and in the field.</u>
- d. Data-sharing protocols streamline data exchange and minimize duplication of data with other agencies, including mental health and education, as well as private contracted agencies.
- e. Protocols and policies promote timely data entry in the information system.
- f. Supervisors monitor data entry and promote consistency in data entry.
- g. Other relevant information (specify):

Rating Description

4: Excellent: The agency has taken care to make the data entry processes simple and convenient. Systems are intuitive and accessible so that secure entry can be performed as worker time permits. Systems are well designed so that workers can enter data without needless precursor activities. Data available in allied systems are leveraged into State systems, and duplicate data entry is avoided. The agency supports appropriately secure data entry for stakeholders with roles in the case, including service providers.

3: Good: Data entry is reasonably straightforward, and workers can enter data from remote locations as time permits, but there are needs to strengthen the data entry. For example, systems have not been intentionally designed to make data entry easy, so workarounds are common, but workers have adapted to this. Systems share some data with allied systems, but duplicate data entry still is an issue in some places. Service providers may not have access to State systems for data entry or case management, resulting in workload issues for caseworkers or data entry staff.

2: Emerging/Developing: The jurisdiction recognizes that data quality hinges on accurate and timely data entry and that it needs to improve its own performance. The jurisdiction is implementing corrective actions, with a focus on ease of use and/or duplicate data entry. Work is in the early stages of implementation.

1: Minimal/Not Present: The jurisdiction has paid little attention to how data enters the system while workers enter duplicate data in different systems. Whether due to confidentiality or other barriers, data sharing is rare. Untimely data entry may be the norm, with gaps in data prevalent across the system. Federal and mandated reporting frequently is incomplete or needs to be redone. Systems may be in silos that do not share data electronically. *Adaptive challenge: There is a need to blame someone (e.g., staff, supervisors, other agencies) for lags in data entry or poor data quality rather than address the issue of needed technology upgrades.*

Area C: Comprehensive data extraction procedures

Item 19. Comprehensive procedures are in place to promote quality data extraction. (I) Subitems:

- a. <u>A standard and routine process (procedures, timeframes) exists to extract data from sources (quantitative and qualitative) that includes a mechanism to audit data sets and information produced.</u>
- b. Data extracted from sources is of high quality, is valid and reliable, and is routinely monitored by trained staff.
- c. Trained staff can identify and correct data errors and ensure timely and consistent data extraction.
- d. The agency utilizes a comprehensive reporting system with capable staff to perform the extraction either within the agency or with the technical assistance of outside contractors.
- e. The agency has the ability to produce Federal data files as specified in Federal documents (Adoption and Foster Care Analysis and Reporting System/National Child Abuse and Neglect Data System).
- f. Data extraction and production is monitored to adhere to State or agency policy and/or mandates or court action.
- g. Other relevant information (specify):

Rating Description

4: Excellent: The agency established procedures and consistently utilizes them so that data extracted from the agency data repositories are valid and reliable. Processes to extract data are standardized and routinely audited. The agency has procedures in place to support data requests or to produce accurate ad hoc reports with data pulls designed to answer the questions of interest. Timely extraction of data supports internal needs and likewise produces required Federal data extracts and is responsive to State and agency mandates. Data extraction also supports county-administered systems and systems in places where provider agencies are significant stakeholders. Detailed data dictionaries and operational definitions are updated and readily available.

3: Good: Data are routinely extracted from agency data sets, and the agency has mechanisms in place that generally support data requests and ad hoc reporting. There may be opportunities to improve timeliness and responsiveness to requests or to ensure that data pulls match the data request or need. Programmatic staff have some ability to obtain data to support their needs, but issues of timeliness or lack of knowledge regarding data storage or date elements may deter their requests for ad hoc reports that could improve program quality. There may be some confusion about methodology when counts or other indicators vary across similar reports. Operational definitions may be unclear or inconsistent.

2: Emerging/Developing: Policies around data access and safeguards to promote accurate extraction are in the early stages of development, but do not yet allow for consistent, broad-based results. The agency may recognize that access to data is key to its long-term success in improving performance and may be in the process of building a cadre of technical experts, but it is just recognizing the need to inform and support a larger pool of data users, inside and outside of the agency. Ad hoc extraction processes may not be available. The agency may fill data requests using slightly different methodologies, resulting in an inability to review trends and confusion about accuracy.

1: Minimal/Not Present: Data extraction is tightly controlled and practiced almost exclusively in small, technical areas of the agency or directed only to executive and mandated areas. Outside of these priority areas, data extraction is an impediment to program utilization of quality data.

Area D: Quality data analysis

Item 20. The agency possesses or accesses analytical competencies and skills of sufficient sophistication to answer questions about performance and elucidate root causes. (KS)

Subitems:

- a. <u>The agency uses metrics, indicators, and analyses appropriately matched to the desired how/what/when questions</u> being asked or outcome being monitored and considers the strengths and limitations of the sampling and calculation methodology.
- b. The agency has the technical ability to compile and analyze data from a variety of sources (Statewide Automated Child Welfare Information System, case reviews, and others).
- c. Data collected are analyzed to address critical issues of importance for the agency and to demonstrate how the agency is functioning and improving in key outcomes, practices, and systemic factors over time.
- d. <u>Analysis of quantitative data and data from qualitative sources occurs on a regular basis.</u>
- e. The agency has the analytic ability to support CQI needs (identify/define the problem, pose the questions, identify the population (numerator and denominator), gather/organize the data, and answer the specific questions) from raw data (quantitative and qualitative).
- f. The agency has the ability to determine the level of analytic expertise needed to address the performance question and can draw on internal expertise or secure external expertise when needed.
- g. Agency staff have the ability to produce ad hoc reports from data systems, and standard procedures are in place to request these reports that reduce data misinterpretation and data request inefficiency.
- h. Other relevant information (specify):

Rating Description

4: Excellent: The agency has a well-deserved reputation for excellence in its attention to analytic output. Care is always exercised to ensure that findings reported by the agency do not overstate the data-supported facts. Agencies in this category have built an internal capacity to do this work, or have established relationships with qualified entities that can do this work for them. There is clarity regarding what questions the available data can answer and what needs further work. Analytics support a variety of questions, from descriptive to predictive analysis. The agency has created data sets that support analysis for a wide range of evaluation questions designed to improve performance in all essential programs and initiatives.

3: Good: There is an understanding that appropriate data must be applied to the appropriate problem, but not all products meet the desired standard. Analytical rigor sometimes falls victim to expedience or limited knowledge and skills. Some of the agency output remains in question as to its validity or its reliability in answering critical questions. Staffing to support quality analytics in the agency—whether internal or collaborative—is available, but still inadequate to meet the need. The agency may have a very limited number of staff who understand advanced analytics.

2: Emerging/Developing: The agency is not yet able to produce the level of analytics necessary to understand and improve its performance, and it recognizes this deficit. While unable to marshal the resources to take this effort to scale, the agency has the ability to produce quality, albeit simple, analysis and can identify which of its output meets and does not meet the anticipated quality standard. The agency is committed, long term, to growing this capacity both in staff resources and technical ability.

1: Minimal/Not Present: The agency produces reports that contain raw data often in extensive reports without synthesis, consideration of usefulness, and appropriateness of the methodology or the data. The agency has no process for vetting reports, synthesizing lengthy data reports, or ensuring that staff are adequately prepared to advise on these issues. It may be unknown how some regularly produced reports are calculated, or where the information is sourced. *Adaptive challenge: The data are held by an outside entity that may submit Federal data, but the data are not available to the agency or only are available at a high cost or long lag time.*

Area E: Quality data dissemination

Item 21. Quality data are disseminated broadly and utilized by agency staff and stakeholders. **(KS)** Subitems:

- a. Data are presented in an informative way that assists agency staff and stakeholders in understanding the data being presented.
- b. Data presented are structured in a way that clearly shows the intended purpose of the analysis (i.e., evidence that an intervention is or is not working or progress toward the outcome or goal).
- c. Analyzed data are disseminated utilizing multiple methods, including understandable reports, websites, data dashboards, factsheets, or other methods targeted to the needs of a broad and diverse audience.
- d. Analyzed data are regularly and routinely distributed inside and outside of the agency, accompanied by guidance to ensure consistent understanding of the information being presented.
- e. Analyzed data are regularly and routinely used at all levels within the agency (performance management, monitoring, action planning, supervision, etc.).
- f. Staff have the ability to explain data across many audiences (agency staff, stakeholders, courts, community, etc.) and engage other staff and stakeholders in data-driven solutions.
- g. The agency has access to staff with expertise in developing logic models, ToCs, implementation science, or other skills to position the agency to adopt interventions with fidelity to achieve the anticipated outcome.
- h. Other relevant information (specify):

Rating Description

4: Excellent: Data are shared broadly and in ways that support appropriate usage. Findings are appropriately documented and displayed in ways that promote a common understanding of what is being presented. The agency consistently uses graphs, infographics, and other types of data visualization. Data presentations are engaging and connected to agency practice. The agency actively uses data to support its commitment to tracking performance towards a goal and adjusting as the evidence dictates. The agency supports multiple forms of sharing (paper, electronic, etc.) to broaden the audience. Agency staff—from executives to public information officers to managers and workers—are able to appropriately use and accurately explain the data. Data that comes from the agency is widely accepted as definitive.

3: Good: The agency is likely very good at data dissemination, but may lack rigor in using the data in a consistent way or in supporting how the data can be used broadly. The agency has a clear mandate to use data for decision-making and is transparent in sharing its findings. Data across the breadth of program responsibility is shared. The agency may not have taken opportunities to share data in nontraditional ways (web, dashboards, etc.), but it has consistently produced regular reports that have broad internal and external distribution. Data utilization may still need broader support to increase consistency and accuracy of data use.

2: Emerging/Developing: The agency may use reports in select areas to demonstrate its commitment to data dissemination and usage. The quality of reports and the transparency of data may suffer in other areas across the agency, but in the priority areas, data are dependably shared and appropriately used. The agency has invested diligent work in making these priority areas into models for how data can be shared and used to advance agency goals. In all likelihood, the difference between reporting in the priority areas and other program areas provides the agency with an incentive to keep improving and may support stakeholder pressure to up the ante. Reports are user friendly, but may not be understood by all (due to lack of guidance or skill).

1: Minimal/Not Present: Data are packaged and delivered, as required, with little emphasis on interpretation or visualization. Data sets are seen as overwhelming to frontline workers and supervisors. Dissemination and utilization likely is driven more by mandates/external requirements than by a commitment to use data to improve/ sustain practice, or to be used for decision-making. *Adaptive challenge: Reports may contain data that are unclear or inappropriate for the intended purpose. Data disseminated from the agency often is suspect internally and externally.*

Overview: The use of a well-designed and implemented case record review process is a critical component of any agency's CQI system. Data collected from a case record review should help to provide agency staff and stakeholders with a comprehensive picture of agency case practices, service delivery, and achievement for children and families. Agencies that possess strong CQI capacity implement both an ongoing review process that allows staff to compare data over time and have the ability to readily develop and implement case record reviews that target specific issues or questions. The agency also is committed to implementing a case record review process that yields only high-quality data and so invests, as a matter of practice, in well-thought out policies and instructions, quality controls, solid sampling methodologies, and reviewer training.

Area A: The agency implements a vigorous case record review process (ongoing and targeted reviews) to continually assess the impact of practice and service delivery on outcomes for children and families served.

Item 22. Uniform case record review instruments are utilized to continually and consistently evaluate identified program goals and processes across ALL program areas (i.e., foster care, in home, residential/group, etc.) and throughout the entire agency. (I)

Subitems:

- a. <u>Case record review tools (for ongoing as well as targeted reviews) are designed to answer the CQI questions</u> being asked and clearly identify the specific goals of the case review and the information to be collected.
- b. Case record review tools are designed to identify, measure, and clarify daily case practices that guide safety, permanency, and well-being.
- c. Case record review data that are collected support comparative data analysis.
- d. Case record review tools are routinely evaluated and modified to ensure congruity with the agency mission, best practices, and desired outcomes while supporting enough consistency to measure changes over time.
- e. Agency staff are engaged in the case review tool development process.
- f. Other relevant information (specify):

Rating Description

4: Excellent: The agency can select from a broad collection of well-designed case review instruments that it regularly employs to evaluate the quality of services being delivered and the outcomes being achieved. Staff have a clear understanding of the purpose and focus of the case review processes being implemented. For regularly scheduled reviews, all jurisdictions utilize uniform case review tools that assess practice across agency program areas and support comparative data analysis. The agency demonstrates the capacity to design and employ case review tools that address targeted issues, areas of practice, or service delivery. The agency values staff perspectives and expertise in the content and design of case review tools by reaching out to them and providing opportunities for their input. The agency has an ingrained practice of evaluating the utility of its case review processes and updates instruments accordingly.

3: Good: The agency utilizes case review tools that, while comprehensive overall, could be strengthened in some capacity, such as: Many, but not all, program areas are addressed; the purpose of the review lacks clarity; or the design of the tools does not fully support comparative data analysis. The agency may face challenges in its ability to develop tools for targeted case reviews that answer the question being asked. Case review tools generally are updated in response to major policy or procedural changes but are not evaluated regularly as a matter of practice. Staff are allowed, but not actively solicited, to provide input in the development of case review tools.

2: Emerging/Developing: The agency may utilize one or two primary case review tools that do not address all program areas or are not designed to be used across all jurisdictions, and the use of targeted case reviews is challenging. The agency may be in the early phases of implementing the case review process or is using a dated instrument that is no longer congruent with the agency's program goals. Staff involvement in the development of the case review process is limited. There may be a need to develop skills in case review process, design, and interpretation.

1: Minimal/Not Present: The agency does not have a case review process in place or implements a process without the benefit of standardized instruments.

Area A: The agency implements a vigorous case record review process (ongoing and targeted reviews) to continually assess the impact of practice and service delivery on outcomes for children and families served.

Item 23. Case review tools collect case-specific data that can be aggregated and detect both areas of compliance with best casework practices and the quality of services provided under critical areas of case practice. (I)

Subitems:

- a. <u>Case review tools provide the agency with an understanding of day-to-day practice in the field and how practice impacts child and family functioning and outcomes.</u>
- b. Case review tools detect the quality of services for children and families served and how child and family functioning is progressing in relation to the services provided.
- c. Case review tools evaluate the presence, clarity, quality, and completeness of critical case file documentation and data entry.
- d. Case-specific interviews with the child, parent, caregiver, worker or supervisor, and other stakeholders are incorporated into the review process, as appropriate.
- e. Other relevant information (specify):

Rating Description

4: Excellent: Staff and stakeholders are able to readily use data from case record reviews to make connections between case practices and achieved outcomes. The case record review process measures the quality of casework practice and the quality of the delivered services in relation to the achievement of child and family outcomes. Aggregated case-level data facilitates staff's ability to identify areas of strength and those needing improvement at the team, office, county, region, or agency level. The agency considers case-specific interviews a critical source of information and integrates them into reviews whenever possible.

3: Good: Overall, case record review tools focus on quality but could be strengthened in some way. There may be a heavier focus on collecting compliance-related data in some areas, or review questions sometimes lack clarity. Case-specific interviews are not utilized consistently as part of the review process or have a pattern of focusing on only one or two key stakeholder groups, such as the caseworker or foster parent, and do not include the birth parent or child/youth. Review tools are not consistently designed to make clear connections for staff and stakeholders regarding the relationship between practice and outcomes.

2: Emerging/Developing: The agency is in the early stages of implementing a qualitative case record review process or is otherwise implementing a review process that focuses more on compliance than on quality. Little in the design of the tool supports the connection of practice to outcomes. Case-specific interviews currently are not part of the case review process or are used intermittently and without fidelity to a process.

1: Minimal/Not Present: The agency does not implement a case record review process on an ongoing basis or implements a minimal process that focuses exclusively on compliance. There may be a need to develop skills in understanding the process of case reviews or to identify external resources that can assist the agency in initiating a case review process. There also may be a need to adapt the agency structure or to allocate personnel and technology resources to accommodate a case review process.

Area B: Agency CQI infrastructure is in place to ensure integrity in the case record review processes and in the quality of data collected.

Item 24. Written policies, instructions, and quality controls are utilized to effectively guide and support reviewers in the case record review process. (I)

Subitems:

- a. <u>Written policies ensure standardization in the completion of instruments and in the implementation of the case</u> review process.
- b. Training is utilized to ensure inter-rater reliability in the implementation of the review process (including extracting information via case record documentation and conducting stakeholder interviews or observations).
- c. Policies and onsite controls prevent reviewer conflict of interest and promote third-party, unbiased review of cases.
- d. The purpose of the case record review process is clearly communicated and identifies the specific goals of the case review and the information to be collected in accordance with the questions the case review will address.
- e. The review team receives onsite guidance and support as well as oversight throughout the case review process.
- f. There is a defined and regular schedule for case review activities.
- g. Written procedures are in place for identifying when ad hoc/special reviews of targeted populations or domains are needed and how they will be conducted.
- h. Post-review data validation processes are utilized to identify and address concerns regarding data quality as it relates to the case record review process.
- i. Other relevant information (specify):

Rating Description

4: Excellent: The agency places a premium on the quality of data extracted through case record reviews as evidenced by the level of infrastructure it has in place. Staff participating in case reviews understand the purpose of the reviews and are able to complete the instrument with confidence because the agency has clear policies, written instructions, training, and onsite controls in place to guide and support them throughout the process. Advance training gives staff and stakeholders confidence to enter into and engage in the review process while clear, written instructions and onsite support from dedicated CQI staff provide reviewers with a level of guidance that helps ensure inter-rater reliability. The agency employs a data validation process as part of the case record review to further ensure quality data collection. Reviews take place according to a regular schedule that is transparent and known to staff and stakeholders.

3: Good: Although the agency has infrastructure in place to support case record review, it is not utilized effectively throughout all jurisdictions or could otherwise be strengthened in specific areas. The agency may have written instructions in place for ongoing reviews but not for all targeted case record reviews, and staff may not be clear on the specific goals for the review. The agency makes an effort to provide training for new review staff but may not invest in refresher training on an ongoing basis for experienced review staff. Onsite support for reviewers and quality controls exist but may be executed unevenly based on CQI staffing patterns. The agency has post-validation procedures but does not implement these consistently.

2: Emerging/Developing: The agency understands the importance of having infrastructure to support case record review but is challenged in securing needed resources and/or is currently investing resources only in specific jurisdictions. Training and basic instructions are available relative to the agency's primary review process, but these may lack question-level scoring guidance or other supports that help ensure quality data collection. Onsite quality controls and data validation are only in the early stages of development and are not fully implemented. The agency may need additional skill development and coaching support for staff leading or designing the effort.

1: Minimal/Not Present: The agency does not implement a case record review process, or there is minimal evidence of infrastructure in place that supports quality data collection. *Adaptive challenge: There is difficulty in maintaining objectivity in the case review process.*

Area B: Agency CQI infrastructure is in place to ensure integrity in the case record review processes and in the quality of data collected.

Item 25. Written sampling guidelines are utilized in determining the appropriate number and types of cases to be reviewed. (I)

Subitems:

- a. The appropriate percentage or sample size of cases are reviewed with regularity.
- b. <u>The samples are representative of the child and family population serviced by the agency.</u>
- c. The samples are stratified, if needed, to reflect different age groups, permanency goals, geographic areas, open versus closed cases, and other considerations, as appropriate.
- d. The implications of the sampling process are considered for generalizing findings to the "population."
- e. Other relevant information (specify):

Rating Description

4: Excellent: The agency consistently applies written sampling guidelines as part of its case record review process to ensure that it reviews the appropriate percentage or sample size of cases. Sampling guidelines address the full menu of agency reviews currently being conducted (i.e., the CFSR, quarterly peer review, targeted reviews). Sample sizes are large enough to make statistical inferences about the general agency population and stratified to include a percentage of cases that reflect various age groups, goals, communities, and other considerations.

3: Good: The agency has written sampling guidelines in place that it utilizes for specific reviews, such as the CFSR, and most other ongoing reviews, but it does not consistently implement them across all review types, such as targeted reviews. The stratification of review samples is unevenly implemented across jurisdictions or could otherwise be strengthened.

2: Emerging/Developing: The agency currently does not have written sampling guidelines in place for its review processes but makes an effort to apply guidelines obtained from external sources, such as professional websites. The agency seems to recognize the importance of having and utilizing internal sampling guidelines for its record review processes despite limited efforts to ensure this. The agency may need to strengthen its skills in sample selection and understanding the reliability of different sample sizes.

1: Minimal/Not Present: The agency either does not have written sampling guidelines for its case record review processes, or it is not following its written guidelines. *Adaptive challenge: The agency generalizes case review findings to levels not supported by the sample size. This may be a common adaptive challenge found in any agency, including agencies with a good or excellent rating on this item.*

Area B: Agency CQI infrastructure is in place to ensure integrity in the case record review processes and in the quality of data collected.

Item 26. The agency utilizes a well-defined process for selecting and training qualified case record reviewers. (KS)

Subitems:

- a. <u>Procedures ensure that a sufficient pool of qualified staff (CQI as well as programmatic staff) and stakeholders</u> are routinely available to participate in case review activities.
- b. The agency utilizes defined recruitment and selection criteria for reviewers, including: experience/knowledge of the child welfare system and the agency's practice standards and skills in critical thinking, teamwork, writing, and interviewing.
- c. The agency utilizes a structured and uniform training process to provide reviewers with guidance regarding the case review process, completion of the case review tool, and the use of effective interview techniques, as appropriate.
- d. CQI staff or experienced reviewers provide new reviewers with onsite mentoring or shadowing to support skill development and inter-rater reliability.
- e. Refresher training sessions are made available to experienced reviewers to promote continued skill development in the case record review process.
- f. Other relevant information (specify):

Rating Description

4: Excellent: The agency values having qualified and trained reviewers to conduct case record review processes. Written recruitment guidelines ensure the agency consistently and deliberately seeks out staff and stakeholders who possess the qualifications and skill sets consistent with the type and focus of review being conducted. The agency always approaches the training of reviewers, both new and experienced, as a structured and thoughtful process, and not as one randomly assembled at the last minute, to ensure the collection of high-quality data. The agency utilizes onsite mentoring from experienced reviewers during the review process to further support newer reviewers. Occasional random checks confirm that reviewers are conducting the case reviews reliably.

3: Good: The agency generally seeks out skilled reviewers for most case record reviews; however, the agency could make more efforts toward recruiting, training, and retaining new participants in the process. There may be other inconsistencies, such as recruitment of reviewers is uneven across all jurisdictions, or the process is more random and reactive than proactive. Training addresses the majority of elements included in the review process but could use strengthening in some places. Onsite mentoring for new reviewers tends to focus more on the agency's specialized reviews, such as the CFSR, and not on other ongoing or targeted agency reviews.

2: Emerging/Developing: Reviewer recruitment is not a structured, ongoing process and is largely limited to familiar staff who generally are available but do not necessarily have the qualifications or skill set needed for the review. Training is not planned or formalized in any meaningful way but rather pulled together immediately prior to or at the time of the review. Any onsite mentoring that occurs is randomly provided based on whether CQI or other qualified staff happen to be available at the time of the review.

1: Minimal/Not Present: The agency does not have a defined approach in place for recruiting, training, and supporting staff and stakeholders to participate in its case record review processes.

Area C: Findings from case record reviews are shared with staff and stakeholders as a matter of practice to improve outcomes.

Item 27. Case record review data are routinely aggregated and disseminated in a timely manner. (CC) Subitems:

- a. <u>Review findings/data are aggregated to the level appropriate to the sampling design.</u>
- b. A preliminary analysis of the data collected is conducted that highlights strengths and potential areas needing improvement.
- c. Results from case record reviews are routinely shared with staff and stakeholders.
- d. Case-level review findings/data are shared with the assigned caseworker and supervisor for individual skill development and recognition of quality work.
- e. Other relevant information (specify):

Rating Description

4: Excellent: The agency ensures that results from case record reviews are aggregated and disseminated in a timely manner to staff and stakeholders so that data can be used to inform and improve case practice and outcomes. Case review data can be linked to administrative data to explore the relationship of casework practices to outcomes. Data are regularly aggregated at multiple levels (i.e., teams, regions, counties) consistent with the sample design and level of reliability for the particular review. Aggregated data reports and written summary findings and analyses are readily available to staff and stakeholders. Caseworkers and supervisors receive their case-specific findings (i.e., the case review instrument) promptly, following the completion of case review activities. There is evidence that the use of case record review data has resulted in improved casework practices.

3: Good: Case record review results are aggregated, though not consistently at multiple levels. While aggregated review data generally is disseminated within the agency, more effort could be made to ensure that all agency staff (i.e., not only management) and stakeholders have full access to review findings. The agency provides a brief analysis of aggregated review data for some reviews but not consistently across all of its case review processes. Case-level review findings are not returned to casework staff and supervisors in a timely manner, or feedback is unevenly practiced in some parts of the agency. Case review data may not be connected to other statewide quantitative data.

2: Emerging/Developing: The agency only recently started to aggregate case record review data, or it may lack the resources (technological capacity) to aggregate data across all of its case review processes. There may be an attempt to provide a minimal level of data analysis of review findings; however, the agency may lack internal competency in this analysis or does not have access to external expertise, such as from a university partner.

1: Minimal/Not Present: The agency does not aggregate or provide an analysis of data from its case record reviews. The agency does not share review results with staff or stakeholders.

Domain: Essential CQI Functional Components Subdomain: Application of CQI Findings

Overview: Collecting information and analyzing results are important steps in CQI; however, how the agency uses this information is a critical component to driving change within the agency and is key to improving outcomes for children and families.

Area A: The CQI process contributes to system change and improved outcomes.

Item 28. CQI processes are used to drive systemic change and improve outcomes for children and families. (CC)

Subitems:

- a. Agency leadership, management, staff, courts, Tribes, and other key stakeholders use CQI processes to inform State and local strategic planning efforts, such as the Child and Family Services Plan, Program Improvement Plan (PIP), and Court Improvement Program.
- b. CQI processes inform and impact agency decisions around training, policy, practice, community partnerships, service array, IT, and other essential supportive systems.
- c. Staff at all levels understand how the CQI process links to daily casework practices and use it to assess and improve practice and outcomes.
- d. A defined CQI process is consistently utilized to identify agency priorities and areas in need of improvement.
- e. Agency achievements are celebrated, and high performers are recognized.
- f. The CQI process is adjusted, as needed, over time in response to CQI results and staff and stakeholder feedback.
- g. Other relevant information (specify):

Rating Description

4: Excellent: Application of the CQI process is pervasive throughout the agency; staff at all levels understand how to apply this process and how the process applies to their own work. The agency's work and resources are aligned with a data-driven, evidence-based CQI process, as an organizational model and intervention for improvement across programs areas, at all levels of the agency. Stakeholders and key partners plan strategically to accomplish shared goals. The agency has the leadership, relationships, and resources in place to implement the systemic to frontline practice changes necessary to improve outcomes. The agency, stakeholders, and key partners can point to examples of improved outcomes resulting from the successful implementation of change initiatives. The CQI system continually incorporates feedback, and adjusts accordingly to remain effective and sustainable.

3: Good: The agency has a data-driven, evidence-based CQI process; however, there are opportunities to strengthen the alignment of CQI work and resources. For example, the CQI process supports shared priorities and goals across programs within the agency; however, it has a limited impact on the priorities of key stakeholders. Change initiatives to improve outcomes may be internal to the agency and targeted to frontline practice versus systemic change. The agency can point to examples of improved practice at the case or program level, but outcomes have not changed. Application of the CQI process may be inconsistent throughout the agency, with variable understanding amongst staff regarding how to apply this process to their own work. The CQI system seeks feedback on process and procedures, but is slow to respond to making adjustments to existing processes. The process may be strong, but it has not been implemented long enough to realize improved outcomes.

2: Emerging/Developing: The agency is implementing a CQI process; however, the process lacks fidelity or quality data. The CQI process still may be seen as a separate function in the agency that lacks critical alignments with practice, programs, stakeholders, key partners, or resources. Overall, the agency faces challenges with regard to how to translate information and results into actions for improvements, and it may need skill development and coaching as the CQI process is implemented. The CQI system does not have mechanisms for collecting or incorporating feedback; the CQI system's effectiveness and sustainability is compromised as a result.

1: Minimal/Not Present: The agency may have historically implemented a case review process to meet Federal reporting requirements, primarily during cycles of the CFSR/PIP. This work may be confined to CQI-dedicated staff/units, but there are minimal efforts directed toward developing or integrating comprehensive CQI process. There is little understanding within the agency, or by stakeholders, concerning how to prioritize and resource their work to achieve improved outcomes. *Adaptive challenge: The agency continually seeks more data analysis to help understand the problem, but fails to begin action planning or action implementation.*

Appendix A: Potential Sources of Evidence

CQI Self-Assessment				
Potential Sources of Evidence				
Documents				
Capacity Building Center for States: Tailored Services				
 Center for States: Tailored Services Assessment 				
Center for States: State Snapshot				
▶ Other				
Federal/State Planning/Assessment and Program Improvement Planning Documents				
 Current Child and Family Services Plan 				
 Current Annual Progress and Services Report 				
 Current or most recent Child and Family Services Review (CFSR) State Assessment 				
Most recent CFSR Executive Summary/results				
 Most recent CFSR Program Improvement Plan 				
 Current CFSR State Data Collection Plan 				
 Current Children's Bureau Regional Office State Continuous Quality Improvement (CQI) Assessment 				
 Current State Data Profile (with data quality reports for Adoption and Foster Care Analysis and Reporting System (AFCARS)/National Child Abuse and Neglect Data System) 	;			
 Current National Youth in Transition Database data and data quality reports 				
 AFCARS Assessment Findings Report and AFCARS Improvement Plan 				
▶ Other				
State CQI and Other Related Agency Documents				
State/agency mission and vision				
 State/agency strategic planning documents 				
 State/agency departmental organizational chart 				
CQI departmental organizational chart				
 CQI department staffing (including data analysis) and vacancy reports 				
 Information technology (IT) departmental organizational chart 				
 State/agency CQI budgetary information/allocations 				
 State/agency CQI plan 				
CQI policies and procedures				
 CQI department and data analysis job descriptions 				
CQI teaming structure/membership				
 CQI meeting calendar/minutes (State and county/regional/local, as applicable) 				
 Accreditation reports/status (if applicable) and accreditation-related CQI findings (preliminary assessment and final assessment reports) 	[
 Leadership team/management meeting schedules, agenda, and meeting minutes 				
 State/agency communication plan (if applicable); CQI-related information routinely released to staff and stakeholders and frequency 				
 University or other consultant contracts regarding CQI/data support 				

CQI Self-Assessment
Potential Sources of Evidence
 Examples of improvement/action plans
 Risk management plan
▶ Other
State Data Collection/Report/Analysis/Management Documents
 Case record review instruments (routine and ad hoc)
 Case record review policies, procedures, and sampling criteria
 Examples of case record review results (data reports)
 Staff and stakeholder surveys and survey design procedures
Data collection/measurement tools
Examples of routine aggregate data reports and summary documents/reports
 Examples of ad hoc data reports
 Outcome/performance measures/indicators/targets/goals
 IT/data management policy and procedures
 Data entry policy and procedures
Data-sharing protocols
Data dictionary
 Procedures for reviewing and aggregating data
Data extraction policies and procedures
 Data analysis policies and procedures
 Data quality policies and procedures (including data validation and cleansing procedures)
 Description of agency process measures and qualitative measures
 Description of all regularly produced data reports
 Human resources and professional development aggregate reporting
▶ Other
Training Documents
 CQI training plan and training curricula (staff and stakeholders)
 Data training plan and training curricula (staff and stakeholders)
▶ Other
Staff and Stakeholder Surveys/Interviews/Focus Groups
Agency Leadership
► State/agency director
► CQI director
► IT/data director
 Program operations directors (i.e., foster care director)
 Training director
► Other leadership
Agency Staff
► Caseworkers
 Supervisors

CQI Self-Assessment Potential Sources of Evidence
► CQI staff
 Other program managers
Stakeholders
► Birth parents/families
Relative caregivers
► Children/youth
 Foster/adoptive parents
 Other agency partners: courts, private providers, education, health care, law enforcement, juvenile justice, public health, behavioral health agencies, etc.