

# BBCBC Annual Continuous Quality Improvement Plan

FY 20-21



#### Introduction

As a network managing agency, BBCBC's primary role is to establish and maintain an integrated network of providers with the goal of ensuring optimal access to and the provision of quality services. The agency's approach is collaborative and inclusive of DCF, subcontracted agencies, formal and informal providers, key stakeholders and the individuals and families served.

#### Mission

BBCBC's Mission is to provide the highest quality child welfare, behavioral health services to children, adults and their families within their communities through a managed network of accredited providers.

#### Vision

Our Vision is to create local ownership and effective integration of the child welfare and substance abuse-mental health systems in each of our eighteen communities. By doing so, we believe that the quality of life for children, adults and families we serve will dramatically improve resulting in personal independence and stronger communities.

Big Bend Community Based Care provides the highest quality child welfare services through partnership with multiple subcontracted agencies. Big Bend subcontracts with Children's Home Society and DISC Village in Circuit 2 for case management services. Big Bend Community Based Care subcontracts with Anchorage Children's Home in Circuit 14. It is important to note that beginning FY 19-20 Big Bend Community Based Care will provide direct case management services in Bay County.

At Big Bend Community Based Care, we serve families in need of both prevention and intervention services. Through our managed network of accredited providers, we are able to offer quality intervention services to those children and families who become involved in the dependency system. Prevention services are also provided through community partners as well contracted providers in order to alleviate safety concerns that may bring a family to the attention of the Department.

# Philosophy of Performance Management

#### Employ an analytic and systemic approach to planning and Performance Management

The primary purpose of this plan is to define how the agency will strengthen practice by improving the quality and provision of network services.

This plan is based on the agency's belief that:

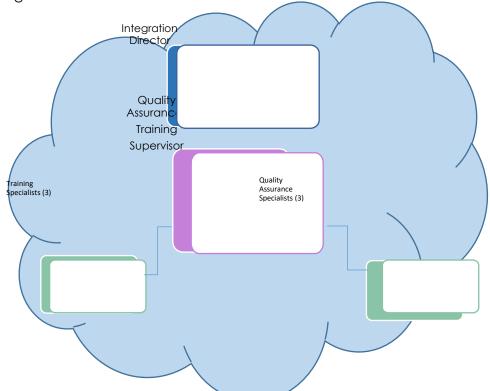
- Improving services is a continuous process
- Training, assessment and quality improvement activities are ongoing processes focused on strategies that encourage best practice, compliance, and accountability for the people we serve
- Providing cost-effective, quality services and promoting positive outcomes for those we serve are the responsibilities of all staff, providers and licensed caregivers
- Reliable and objective data are essential to improving services
- Assuring quality services requires the input and feedback from stakeholders
- Good outcomes are achieved through consistent monitoring, evaluation and the sharing of the best practices
- There is never an excuse for poor quality service
- Mistakes should be used as tools for learning

#### Key Agency Staff Involved in CQI Activities

The Quality Assurance and Training Supervisor oversees 3 Quality Assurance Specialists and 3 Training Specialists. The Quality Assurance and Training Teams are a part of the Integration Team at Big Bend Community Based Care. The 3 Quality Assurance Specialists are responsible for completing Rapid Safety Feedback reviews, Florida CQI reviews and CFSR/PIP review cases. This allows for consistent communication between the QA team, Training Team and the larger Integration team.

The Quality Assurance and Training Supervisor is a Master's Level Professional with experience in the child welfare field. The QATS hold a Green Belt certification and is also a Tier 1 reviewer for Child and Families Services Reviews and a Quality Assurance Reviewer for thee DCF's CQI program.

All Quality Assurance Specialists are Child Welfare Certified through the Florida Certification Board. They are also Quality Assurance Reviewers for DCF's Continuous Quality Improvement Program as well as Reviewers for the Child and Family Services Review Program.



#### Data Collection

BBCBC Data Units are responsible for reporting data and ensuring its integrity. BBCBC has two data integrity specialists who are housed under Operations, one in Circuit 2 and one in Circuit 14. This unit helps to manage data and ensure performance outcomes are consistently met through communication with frontline staff regarding data entry and reporting. Data collection is completing utilizing the reporting region of the Florida Safe Families Network as well as the DCF QA Portal. Data entered in the CFSR portal (PIP/CQI reviews) is also available through the "Reports" region and Qualtrics is utilized for analysis of RSF data.

#### Data Analysis

Data is analyzed on a monthly and quarterly basis. Each quarter and year, trends are identified in the data in order to improve practice outcomes and ultimately the outcomes for children and families. Benchmark comparison is completed with set targets or other standards is completed.

During FY 20-21, partnership will continue between the DCF and BBCBC quality assurance teams to complete data analysis when possible. This allows for collaboration and innovation regarding data analytics and presentation.

#### Continuous Quality Improvement - Deming's Model of CQI

BBCBC's Quality Management System is designed on Deming's Plan-Do-Check-Act model of CQI.

Plan- The process of defining and planning a System of Care

- Its programs, processes evaluation and remediation
- In a manner best suited to meet the needs of the clients served

<u>Do</u>- The process of implementing the planned System of Care throughout the Service Network

<u>Check</u>- The process of systematically monitoring services, collecting data, obtaining feedback, analyzing findings and identifying trends, strengths and opportunities for improvement. (The system-wide review and analysis of service indicators and outcomes)

<u>Act</u>- The process of implementing performance improvement activities to overcome barriers to quality services and remedy deficiencies. This also involves follow up to assess

the effectiveness of the performance improvement activities implemented. If found to be ineffective, or if more improvement is needed or desired, the cycle continues to the plan phase again and the process repeats.

# Schedule of Reviews – FY 20-21

QTR	Review Type	# to be Reviewed	Partner Agency	Review Begin Date	Review End Date
Q1	FL-CQI	10	ALL	7/1/2020	9/30/2020
	PIP-MONITORED CFSR-OHC	1	DISC	8/10/2020	8/14/2020
	RAPID SAFETY FEEDBACK	10	ALL	7/1/2020	9/30/2020
	PIP-MONITORED CFSR-IHS	1	DCF/ANCHORAGE	8/24/2020	8/28/2020
Q2	FL-CQI	10	ALL	10/1/2020	12/31/2020
	PIP-MONITORED CFSR-OHC	1	DISC	11/30/2020	12/4/2020
	FL-CQI IN-DEPTH	1	TBD	TBD	TBD
	RAPID SAFETY FEEDBACK	10	ALL	10/1/2019	12/31/2019
Q3	TBD BY QUALITY OFFICE				
Q4	TBD BY QUALITY OFFICE				

# **BBCBC Monitoring of Systemic Factors**

Systemic Factor	ltem	CFSR Systemic Requirement	BBCBC Monitoring Activities
Statewide Information System	19	Statewide Information System: Ensuring that the agency maintains accurate, up-to-date information (data) regarding the status, demographic characteristics, placement/ location, permanency goals and medical & dental care for every child who is in foster/out-of-home care	BBCBC produces a weekly data management report [Case Status Report] to monitor work processes and data entry/integrity and as a means of assisting front-line staff manage daily activities. Data elements included:  1. Court Documents Due within 30 Days and Past Due 2. BBCBC Missing Children 3. Children Not Seen 25 - 30 Days 4. Physical Exams Due 5. Dental Exams Due 6. Transition Plans Due

Systemic Factor	ltem	CFSR Systemic Requirement	BBCBC Monitoring Activities
			7. Mother F/F Contacts Past Due 8. Father F/F Contacts Past Due 9. Children in OOHC between 9-11 months 10. Children Not Seen 31 Days or More 11. Supervisory Reviews Not Completed 61 Days or More 12. IL Supervisory Reviews Not Completed 91 Days or More 13. Missing Medical/Mental Health Records 14. Missing Yearly Physicals Exams 15. Past due Dental Exams 16. Missing Immunizations 17. Missing Education Records 18. Foster Care AFCARS 19. Adoption AFCARS 20. Placement Errors 21. Identification Records 22. Children in OOHC 12 Months or More
Case Review System	20	Written Case Plan: Ensuring that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions	The data for Items 20-24 is collected for 10 cases per quarter utilizing the FL-CQI version of the Federal CFSR tool and the agency's programmatic Quality Assurance review tools.
	21	Periodic Reviews: Ensuring that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review	Data is aggregated quarterly and shared with service providers in addition to BBCBC's Management Team and Training staff for analysis and incorporation, as appropriate, into:
	22	<b>Permanency Hearings:</b> Ensuring that a permanency hearing occurs no later than 12 months from the date of foster care entry and at least every 12 months	Applicable Annual Strategic Priority Action Plans
	23	<b>Termination of Parental Rights:</b> Ensuring that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions	Pre-Service and In-service training curricula     Partner/subcontractor agency performance improvement plans
	24	Notice of Hearings and Reviews to Caregivers: Ensuring that foster parents, pre-adoptive parents, and relative caregivers are notified of any review or hearing held with respect to the child	
Quality Assurance System	25	Quality Assurance System: Ensuring that the quality assurance system functions optimally throughout the agency service area, including:  1. Maintains standards for evaluating the quality of services in a manner that assures inter-rater reliability  2. Provides relevant, timely reports, and  3. Evaluates implemented program improvement measures	BBCBC's Quality Management System is monitored at least quarterly by the Quality Assurance and Training Supervisor and addressed with Executive Leadership when necessary. For FY 19/20, ensuring optimal quality management functioning includes the following Action Plans:  These action plans are aligned to the following agency Long Term Strategic Goal(s) and Objective(s).  Objective 3.3 Employ an analytic & systemic quality management approach for planning & performance management  ~ Enhance and evaluate CFSR PIP activities related to child safety, permanency and wellbeing outcomes

Systemic Factor	ltem	CFSR Systemic Requirement	BBCBC Monitoring Activities
Staff and Provider Training	26	Initial Staff Training: Ensuring that initial child welfare services training that teaches the knowledge and skills necessary for service excellence is provided to all case management staff	For FY 20-21, ensuring that initial and ongoing training addresses needed knowledge and skills to improve performance on CFSR items included in Florida's PIP is included as BBCBC's Annual Strategic Priority (8); Action Plan entitled <i>Develop the Workforce/BBCBC Training Plan.</i> . This action plan is aligned to the following agency Long Term Strategic Goal(s) and Objective(s).
	27	Ongoing Staff Training: Ensuring that ongoing training is provided for staff that addresses the knowledge and skills necessary for child welfare service excellence	
			Goal 3.0 Assure high-quality service for children, adults & their families
			Goal 4.0 Develop & sustain exceptional professionals to serve in all areas of service
			Objective 4.1.9 Institute high quality, innovative child welfare training and support professional certification for child welfare case managers and supervisors
			Objective 4.2 Support and maintain high standards for training, certification, and support professional certification for child welfare case managers and supervisors
			Objective 4.2.9 Support and maintain high standards for training, certification and licensure for staff in all areas of service provided by BBCBC
			Annual Strategic Priority Action Plans progress is reviewed/ reported on at each agency <i>Monthly Directors' Meeting</i> .
Agency Responsiveness to the Community	32	Coordination of CFSP Services with Other Federal Programs: Ensuring that services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population	Coordination of CFSP Services with Federal and State Substance Abuse and Mental Health Services is addressed by three of BBCBC's Annual Strategic Priorities for FY 18/19 and are aligned to the following agency Long Term Strategic Goal(s) and Objective(s).
			Goal 1.0 Implement & manage a fully integrated System of Care approach to the provision of child welfare & behavioral health services
			Objective 1.2.2 Leverage parallel systems & coordinate local service delivery - Perpetuate Treatment Model for Child Welfare
			Objective 1.2. Leverage parallel systems & coordinate local service delivery - Implement Care Coordination Model
			Annual Strategic Priority Action Plans progress is reviewed/ reported on at each agency <i>Monthly Directors' Meeting</i> .
			Note that Annual Priority Goals/Objectives for FY 19-20 listed above are still pending board approval.

#### Staff and Provider Training

BBCBC combined the Training and Quality Assurance Departments under the Integration Team. This has allowed for greater communication between QA and Training. Data collection and analysis drives the training selected and ultimately provided by the BBCBC Training Team.

Initial training is provided through quality pre-service training delivered. Initial training is offered 4-5 times a year based on need. Due to the current pandemic, initial pre-service training transitioned to the virtual platform. Ongoing training is offered on a monthly basis and is provided based on QA data analysis. Trainings such as cultural competency and human trafficking are offered on a bi-annual basis but more frequently as needed. The training team is also providing in-service virtually on an ongoing basis. BBCBC provides training to subcontracted providers, agency staff as well as community stakeholders. All trainers maintain child welfare certification and have a combined over 50 years of combined child welfare experience. All BBCBC trainers are currently working to obtain the Trauma and Resilience Certification through Florida State University. The Quality Assurance and Training Supervisor continues to ensure all training provided is data driven and includes a means to monitor transfer of learning.

During FY 20-21, the BBCBC Quality Assurance and Training Supervisor will continue to integrate the training team with Quality Assurance. More efforts will be made to include all system partners in in-service training related to case management practice in order to ensure a common language and understanding exists.

#### <u>Service Array & Resource Development</u>

BBCBC is invested in ensuring the service array available to families is quality and diverse. As Big Bend is also the managing entity, the agency is able to leverage ME resources when there is an identified area of need related to service array. This is currently taking place in order to increase the available behavior management services which is to occur during FY 20-21. Efforts to address the identified deficits in the service array will continue.

#### Foster & Adoptive Parent Licensing, Recruitment, & Retention

This past year, in Circuit 2, recruiting has been via Facebook ads and 24/7 response time to inquiries by a foster parent with lived experience. BBCBC started online Quality Parenting Training pre-service classes. Due to an increase in interest, the agency added an additional class that was not previously scheduled. BBCBC continued our goal of licensing one home a month and in the 3<sup>rd</sup> and 4<sup>th</sup> quarter of the year, successfully licensed homes in every county in Circuit 2. As noted in the attached recruitment and retention plan, a foster parent trainer and consultant has been a

valuable addition to the team providing real time to support to foster parents experiencing behavioral challenges. Training opportunities, small groups and a training newsletter were innovations implemented that will continue into fiscal year 20-21. C2 increased the foster parent retention rate to 85% over the last year. BBCBC Foster Family Support Team licensed over 50 new foster homes in 2019, giving the BBCBC team a total of 112 homes. (As of 2/28/20, BBCBC had a total of 119 homes)

Circuit 14 has made multiple recruitment efforts as well. Coffee talks have continued during fiscal year 19-20. Billboard advertisements, radio show broadcasts and social media utilization have all proven successful as recent recruitment efforts. Interagency and community meetings were also attended by the Foster Family Liasion to ensure communication with community and agency partners. Foster Parent training has continued on the virtual platform due to the current pandemic. During fiscal year 19-20, C14 Foster Family Support licensed 16 foster homes.

Due to the success of the BBCBC Foster Family Support Program in C2, BBCBC will take the foster family support program in-house beginning in Quarter 2 of FY 20-21. The same management structure will remain in place as circuit 2.

The recruitment and retention activities remain an area of focus for FY 20-21. The same recruitment strategies will continue as they have proven effective. However, new practices may be implemented throughout the year.

#### Performance Improvement Action Plans

- Supervisor Development Action Plan
- CQI Action Plan/SOC Plan

Actions plans are formulated in response to an identified deficit. A target is set for each action plan and subsequent action steps and target dates are set. Meetings are held at certain intervals throughout the year in order to monitor the status of the action plan and ensure no changes need to be made.

Performance improvement action plans include a consistent debrief process to ensure each review is debriefed with frontline staff. Each case will also be debriefed with the unit as well when possible. This will ensure that findings and best practices are shared amongst the team.

Quarterly, each CMO, will have a presentation/training regarding their CMO's quality assurance findings for the previous quarter. During that meeting, staff will have the opportunity to ask questions regarding the findings/reviews. This will also allow the case management staff to discuss barriers to achieving strengths in items in order to implement change in practice where possible.

During FY 20-21, pre-consultation will continue on all cases as part of the BBCBC CQI action plan. Pre-consultations allow for discussion regarding expectations of the review and documentation. As evidenced by the large discrepancy between CQI and PIP data, documentation will continue to be a focus during this fiscal year. The quality

assurance team will continue to ensure the review process is supportive and informative while driving quality case practice. Tracking of pre-consultations will begin this FY in order to determine specific impact across each quarter. The pre-consult began with RSF cases and then CQI cases. Quality Roundtables were also implemented prior to PIP reviews, an intensive form of the pre-consultation process that was previously occurring.

# <u>Focus of Training Team FY 20-21/Activities to Address Program</u> Improvement and Case Review Items Deemed "ANI"

Due to the discrepancy noted in FY 19-20 PIP versus CQI data, documentation will be a focus during the fiscal year 20-21. As PIP reviews are interview based, PIP items are trending up whereas a significant decline is seen in FY 19-20 CQI data. Documentation training will be provided in order to address this need. With a continued focus on parent engagement/contact, the newly revised home visit tools will be utilized in training to assist in demonstrating quality documentation. This training will be developed and will be mandatory for all new staff as this is a consistent area of need.

Safety Planning Training and Case Application will continue to be a specific focus this fiscal year. Although safety planning training has been provided previously, case application is key to learn concepts needed to effective safety plan. This identified intervention will allow the training team to use data from CQI/RSF to explain the areas needing improvement and focus on concepts during the learning circles to enhance those areas. Areas specific to deficits identified in item 3 will be included.

As identified during FY 19-20, the reunification process includes multiple components that are critical for case management staff and other system partners to understand. Data analysis shows multiple factors to be addressed including sufficient assessment, safety planning, and conditions for return. These will be addressed during the upcoming fiscal year to impact permanency.

Father Engagement Training will be offered to staff as well in order to address the lack of father involvement seen consistently in both CFSR/PIP reviews as well as CQI and RSF reviews. The lack of father engagement has further implication for permanency findings. The value of father engagement and potential barriers will be discussed. This training will occur during Q1 of FY 20-21.

Sufficiency of Information Assessment including ongoing FFA training and learning circles will also be implemented to address gaps related to ongoing assessment. Although information sufficiency training has been offered, an emphasis on ongoing assessment needs to be explored related to findings particularly in item 2 regarding ongoing formal and informal assessments.

Although a focus from the previous fiscal year, the training team continues to emphasize quality contacts with a full revamp to be completed during FY 20-21. The revamp will include a new home visit tool (parent/child) to be utilized across all subcontracted agencies. There will also be supplemental tools provided to case management to assist in parent engagement.

In addition, intensive training will be provided to case management staff regarding parent engagement; "How to Have Difficult Conversations". This has been identified as an ongoing barrier to engagement and quality visits.

During phase 2, the training team completes a comprehensive 6 month review for new trainees to include assessments and safety planning. As ongoing assessment continues to be an area of focus, this allows for real-time feedback to be given and applied; focused on information gathering and proper documentation.

Please note, the trainings and activities listed above are the agency's efforts to improve statewide targeted initiatives.

### Training Activities Provided by CQI Team

In addition to a strengthened debrief process, the BBCBC QA team also implemented pre-consultations to be completed on each RSF and CQI case. The pre-consultation is a method to educate staff regarding the review as well as engage them in the review process. The pre-consultation discusses each item reviewed and how each one is evaluated. This is not done in order to "teach to the tool" but rather to inform frontline staff and ensure transparency throughout the process. Although started during last fiscal year, the pre-consultation will continue in order to address the deficiency in documentation that is evident through identified data trends.

For PIP cases, the Quality Roundtable began and will continue through the end of the PIP period in December 2020. Thus far, the Roundtables have been effective in addressing documentation gaps as well as informing child welfare professionals and other system partners of the review importance and process.

CQI Training Activities also include a consistent debrief process to ensure each review is debriefed with frontline staff. Each case will also be debriefed with the unit as well when possible. This will ensure that findings and best practices are shared amongst the team. Barriers to achieving best practice and problem solving also occurs during the debrief session. Those ideas are then communicated with Operations as well as during the Quarterly CQI-Training meeting.

Quarterly, each CMO will have a presentation/training regarding their CMO's quality assurance findings for the previous quarter. During that meeting, staff will have the opportunity to ask questions regarding the findings/reviews. This will also allow the QA specialist to discuss barriers to achieving strengths in items in order to implement change in practice where possible.

The Quality Assurance and Training Supervisor also began "Bits and Bites" which are mini-trainings aimed to inform frontline staff of the review requirements. This was often an expressed need from staff. The trainings began at the end of fiscal year 19-20 and will continue. Topics addressed include Rapid Safety Feedback and item review for PIP/CQI.

### <u>Stakeholder Involvement</u>

BBCBC gathers input from stakeholders using a variety of methods. Input will be gathered via the following avenues:

- a. BBCBC staff survey implemented by the agency's Human Resources partner agency
- b. Partner agency staff survey/staff retention reports submitted to BBCBC monthly
- c. Annual service needs and strategic planning meeting, activities and proposals
- d. Solicitation of input from community members and organizations, the court system representatives, and DCF partners

Additionally, Stakeholder input is gathered on an ongoing basis via the following methods

- monthly and quarterly management
- programmatic meetings
- Community Alliance Partnership meetings
- community activities and training from staff
- the Court system
- foster parents
- DCF/CPI staff and leadership
- community members
- other provider and service organizations

BBCBC's Board of Directors, Executive Leadership and Management Team are responsible for reviewing and incorporating stakeholder input in the development of short and long term planning, policy, training, service development and contracting.

New initiatives, services and activities are developed in cooperation with these stakeholders to address concerns and update practice within our System of Care. Specific initiatives are assigned to the COO, Operations Managers, Directors and their staffs for implementation and follow-up.

As systemic issues are identified, stakeholders are a vital member of the team approach to ensuring that gaps in the data are addressed effectively. Big Bend Community Based Care values the opinion of all stakeholders.

# <u>Discussion of Turnover</u>

Turnover continues to be an area to address through workforce recruitment and retention activities. During the last fiscal year turnover rates were as follows for our subcontracted agencies.

- CHS East: 77.3%

CHS Adoptions: 85.7%
DISC Village: 87.5%
Anchorage: 21.4%
BBCBC- Bay: 41.7%\*
LMC Adoptions: 11.1%
Twin Oaks: 120%

BBCBC's overall turnover rate for fiscal year 19-20 was 56.4%.

### Partnership between Investigations and Case Management

Efforts are made consistently to ensure communication between case management and investigations. Collaboration meetings are held on topics related to CPI and CM where information is shared including quality management data. Community Alliance meetings are also held at which CM/CBC staff is represented as is CPI leadership. Communication of leadership for CBC/CPI is critical to ensuring partnership of frontline staff.

In Quality Assurance, DCF operations review specialist works closely with QA manager to discuss current data and trends. During FY 19-20, ORS and QA manager will collaboratively work to present Quality Assurance Data in various forums. Partnership is also demonstrated during the co-review process for CFSR/PIP reviews.

Collaboration meetings occur monthly which include DCF/investigations and case management leadership. PIP and CQI data is presented as well as resulting CQI activities. Initiatives are discussed to ensure input is received from both investigations and case management as well as to improve communication.

# Strategies to Improve Practice/Local Improvement Initiatives

Training will continue regarding QA reviews completed in order for frontline staff to understand the items contained in the OSRI. This will include a high level discussion of QA as well as a breakdown of each item reviewed. Quality Assurance will continue to educate staff on the reviews throughout the year on an as needed basis.

The BBCBC supervisor development program will begin during fiscal year 20-21. The Supervisor Development program will include team building, morale, utilizing data to improve practice and coaching/feedback. It will also include a group project, QA review shadowing/learning circle, and ongoing supervisor/mentorship learning circles.

Barrier Breaker Meetings began during last fiscal year and will continue during fiscal year 20-21. During the meetings, leadership from various agencies and other system partners problem solve around areas of need, examine current practices and possible new innovations (Focused on 4 remaining items).

BBCBC also held a "PIP" Rally Kick off in July 2020. Subsequently, PIP Rally Meetings will occur either monthly or bi-weekly to discuss the four remaining PIP items to achieve. During the meetings, there is discussion regarding the various activities each CMO is engaged in to work towards achieving each item, we will begin conducting calls (discussion of 2 items per meeting) with CMO staff/leadership. Our goal is to emphasize the remaining PIP items, why they are important, and how Big Bend can support each agency.

During FY 20-21, BBCBC's training team and other system partners will structure and implement a case management proficiency process. This process will be formed through a workgroup developed to ensure input is received from frontline staff as well as leadership from subcontracted agencies.

Quarterly lunch and learns will continue with each agency to discuss CQI/PIP data including strengths and areas needing improvement. Although often times a small sample, the discussion allows for smaller group dialogue regarding findings, barriers and recommendations for training and other solutions.

New strategies or initiatives will be implemented on an as needed basis. The Quarterly-CQI training meeting is an opportune time to identify new strategies and address the training needs of subcontracted providers.

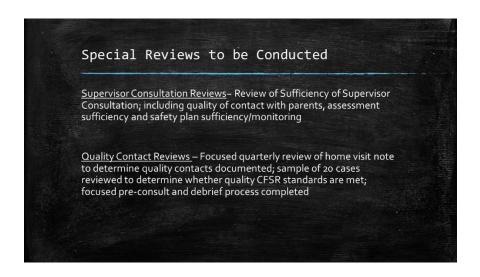
# <u>Special Reviews, Discretionary Reviews, Systemic Reviews</u>

#### a. Special Reviews

Special Reviews are completed as requested by BBCBC's Executive Leadership and/or Management Team. BBCBC special reviews are completed as needs are identified due to practice-related complaints or concerns and in any transition of services from one contracted provider to another. A process will be implemented in FY 19-20 to better determine which cases warrant a special review versus another means to effectively address the identified area of interest.

#### b. Discretionary Reviews

Discretionary Reviews are scheduled based upon Opportunities for Improvement (OFI's) identified by the agency's ongoing CQI activities. Discretionary reviews are subject to change due to new or updated agency priorities.



BBCBC will collaborate with the Department's Northwest Region (NWR) staff to develop, implement and monitor the progress of performance improvement activities designed to address areas identified as needing improvement by the FFY 2016 Florida CFSR. BBCBC's portion of the NWR Plan addresses performance improvement activities targeted to strengthen practice related to:

- a. Safety particularly ongoing safety assessment and appropriate response
- b. Permanency focusing on placement stability, reunification upon families' success upon meeting the conditions for return and timely Termination of Parental Rights and adoption for those unable to be reunified
- c. Well-Being with a targeted focus on needs and services for parents in collaboration with BBCBC's Managing Entity Behavioral Health providers, improving engagement with parents, and ensuring appropriate and timely medical, dental and behavioral health care for children