



**Philadelphia Department of Human Services
County Improvement Plan
June 2015**

June 9, 2015

Section I. Sponsor Team Members:

The Executive Cabinet at DHS serves as the county improvement sponsor team. Cabinet members include:

Vanessa Garrett Harley, Commissioner
Gary Williams, Children and Youth Division
Jessica Shapiro, Chief of Staff
Chanel Hanns, Finance
Timene Farlow, Juvenile Justice Services
Kim Ali, Chief Implementation Officer, IOC
Marlene Olshan, Performance Management and Accountability
Khalid Asad, Administration and Management
Tyrone Harvey, Quality Improvement
Paul Bottalla, Policy and Planning
Alicia Taylor, Communication
Jonathan Houlon, Law Department

Section II. Background:

In developing the County Improvement Plan, the sponsor team reviewed the results from the state lead Quality Service Review (QSR) as well as the results from our local QSR reviews. Through this process the team found consistencies in both areas of strength (e.g. physical health, early learning and development, living arrangements and safety) and areas for continued improvement (e.g. engagement, teaming, assessment/planning/pathways to independence).

The team decided to prioritize our outcomes based on the key areas that need improvement as well as on those that would have the greatest positive impact on other indicators. For example, throughout the QSR process we recognize that we engage substitute caregivers more readily than children, mothers and fathers. We also know that better engagement will lead to higher ratings in other indicators (i.e. role & voice, assessment, planning). Better teaming and planning will lead to higher ratings in assessment and understanding leading to timely permanency.

The Philadelphia theory of change states:

Philadelphia's initial theory of change for the transformation of its Improving Outcomes for Children strategy is articulated well in the Child Welfare Demonstration Project. It states: "*If* families are engaged as part of a team, and if children, youth, and families receive comprehensive screening and assessment to identify underlying causes and needs and assessment information is used to develop a service plan, and if that plan identifies roles for extended family members and various supports, including appropriate placement decisions and connects them to evidence-based services to address their specific needs and/or appropriate system changes, *then* children, youth and families are more likely to remain engaged in and benefit from treatment, so that they can remain safely in their homes, experience fewer placement changes, experience less trauma, and experience improved functioning."

Philadelphia County has expanded the theory of change to state:

- *If* engagement and assessment are successful in determining appropriate interventions, and
- *If* the interventions are implemented with fidelity to the original model, and
- *If* the interventions are monitored for efficiency and effectiveness, and
- *If* necessary system changes keep pace with client needs,
 - *Then* children and youth can remain safely in their homes, experience fewer placement changes, experience less trauma, and experience improved functioning, and
 - *Then* we will meet IOC short and long term outcomes.

Section III. Priority Outcomes:

Outcome # 1: Engagement

This overarching outcome supports partnering with families so DHS can maximize a child's natural support system.

Outcome #2: Teaming

This overarching outcome supports the family team's ability to achieve unity of effort and "big picture" understanding of the long term view of the child/youth and family.

Outcome #3 Pathway to Independence

The overarching outcome supports youth over the age of 14 in their quest to live safely and function independently as they age out of the system

Outcome # 4: Planning

This overarching outcome supports a planning process that is fully individualized and relevant to child/youth and family needs.

Section IV. Findings

Findings related to Outcome # 1: Engagement

Findings from the state led QSR in December indicate that 49% of the cases reviewed were found to be in the acceptable range in the Engagement practice performance indicator. This outcome looks to ensure teams work effectively together to share information, plan and provide effective services.

Findings related to Outcome # 2: Teaming

Findings from the state led QSR in December indicate that when Formation and Functioning scores were combined, only 36% of the cases reviewed were found to be in the acceptable range in the Teaming practice performance indicator. This outcome looks to ensure teams work effectively together to share information, plan and provide effective services.

Findings related to Outcome # 3: Pathways to Independence

Findings in the state led QSR in December found that only 14% of the cases reviewed received acceptable ratings in the Pathways to Independence practice performance indicator.

Findings related to Outcome # 4: Planning

Findings in the state led QSR in December found that 33% of the cases reviewed received acceptable ratings in the Planning practice performance indicator. This outcome looks to support the use of ongoing assessment and understanding of the child and family situation to modify planning and intervention strategies in order for the child/youth/ and family to live safely together, achieve timely permanency and improve well-being and functioning.

Connecting the Work Plan with the Identified Outcomes:

Philadelphia's Work Plan

| Outcome #1: Engagement | | | | | | | | |
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| | STRATEGIES | ACTION STEPS | INDICATORS/ BENCHMARKS | MONITORING/EVIDENCE OF COMPLETION | PERSON(S) RESPONSIBLE | TIMEFRAME | RESOURCES NEEDED | STATUS |
| 1.1 | Increased engagement of | *Utilize Fatherhood Initiative | % of fathers engaged improves by | Engagement scores for fathers at 40% | CUA QA Directors/CUA Case Managers | Ongoing through Q4 | Video capability at CUA's | |

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| | fathers | <ul style="list-style-type: none"> *Father only parent cafes *Video usage for incarcerated * Solicit youth for information on fathers whereabouts * Invite all fathers (when identified) to all family team meetings | 14% | | CYD Deputy | | | |
| 1. 2 | Increased engagement of mothers | <ul style="list-style-type: none"> *Parent cafes *Use of parent advocates *Family finding | Improve engagement of mothers by 19% | Engagement scores at 65% | CUA QA Directors/CUA Case Managers CYD Deputy | On-going through Q4 | | |
| 1. 3 | Increase engagement of all kin | <ul style="list-style-type: none"> *Increase use of Family Finding * Increase SWAN trainings *DRO Clinics *Increase use of Practice Coaches and Sr. Learning | Improve engagement of all kin by 11% | Overall engagement scores at 60% | CUA QA Directors/CUA Case Managers CYD Deputy | Q1 2016 | | |

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| | | Specialists | | | | | | |
| 1.4 | Increase use of Parent Advocates | *Ensure Parent advocates are engaged with all CUA's | # of Parent Advocates engaged in total | Existing parent advocates involved more than 50% of time | CUA QA Directors | Ongoing | | |
| Outcome #2: Teaming | | | | | | | | |
| | STRATEGIES | ACTION STEPS | INDICATORS/ BENCHMARKS | MONITORING/EVIDENCE OF COMPLETION | PERSON(S) RESPONSIBLE | TIMEFRAME | RESOURCES NEEDED | STATUS |
| <u>2.1</u> | Clarify roles and responsibilities of all CUA Staff regarding teaming process | *Develop training on roles for teaming process with both CUA and DHS and sub-contractors | # of teamings held | Increase in permanency to 20% | DHS Training/CUA Case Managers | On-going through Q4 | Hiring staff as needed to replace turnover | |
| <u>2.2</u> | Improve communication with stakeholders to clarify roles/responsibilities | *Institutionalize a letter that goes out to all families and subcontractors with clarity of roles/responsibilities *Ensure DHS teaming unit has appropriate | # of teamings held | Increase in permanency to 20% | QI Directors, CA Case Managers | On-going through Q4 | | |

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| | | contact for all family members | | | | | | |
| 2.3 | Increase training capability for all teaming staff | <p>*Booster training for Teaming Staff conducted by Annie E. Casey</p> <p>*On-going training on “becoming trauma informed and self-care”</p> <p>*</p> | Increase in number of teamings | Increase in permanency to 20% | DHS Teaming Staff | On going | | |
| 2.4 | Increase capacity of teaming staff | <ul style="list-style-type: none"> Hire an additional 10-12 teams (20-24) staff to help facilitate teaming process | Increase in number of teamings | Increase in permanency to 20% | DHS Teaming Staff | On going | | |

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| Outcome #3: Pathways to Independence | | | | | | | | |
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| | STRATEGIES | ACTION STEPS | INDICATORS/ BENCHMARKS | MONITORING/EVIDENCE OF COMPLETION | PERSON(S) RESPONSIBLE | TIMEFRAME | RESOURCES NEEDED | STATUS |
| 3.1 | Be more intentional with youth over the age of 14 to prepare for independence | *Refer all youth over age 14 to AIC * Intentionally engage with youth over 14 to ensure attendance at AIC | # of youth exiting with a plan | *20% increase in # of youth aging out to permanency or independent living with appropriate life skills | CUA Case Managers CYD Deputy | On going | | |

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| | | <p>*Use data and create reports specially geared for older youth</p> <p>*Use Independence Outcome Packet checklist on regular basis</p> <p>*Conduct regular credit checks of youth 16 + who are in placement and provide consultation as needed</p> | | *20% increase in youth referrals to AIC | | | | |
| 3.2 | <p>Ensure all board extensions are timely for older youth</p> | <p>*Use data to monitor older youth</p> | # of youth exiting with a plan | 20% increase in # of youth aging out to permanency or independent living with appropriate life skills | CUA Case Managers CYD Deputy | On going | | |
| 3.3 | <p>Ensure use effective use of Single Case Plan</p> | <p>*Utilize Life Skills Coaches</p> <p>* Utilize Casey Life Skills- ensure it is in Single Case Plan</p> <p>*Timely distribution and quarterly review</p> | # of times Casey Life Skills used | 20% increase in # of youth aging out to permanency or independent living with appropriate life skills | CUA Case Managers CYD Deputy | Ongoing | | |

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| | | via Family Team Conference | | | | | | |
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| Outcome # 4: Planning for transitions | | | | | | | | |
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| | STRATEGIES | ACTION STEPS | INDICATORS/ BENCHMARKS | MONITORING/EVIDENCE OF COMPLETION | PERSON(S) RESPONSIBLE | TIMEFRAME | RESOURCES NEEDED | STATUS |
| 4.1 | Increase focus on permanency | *Improve quality of single case plan through trainings *Increase review and analysis of stagnant cases *Implementation of Permanency work group | PREP Case File Reviews | Prep Case File review scores for SCP at 85% | CUA Case Mgrs/Supervisors CYD Deputy | On going | | |
| 4.2 | Increase focus on concurrent case planning | *Improve quality of SCP | PREP Case File Reviews | Prep Case File review scores for SCP at 85% | CUA Case Mgrs/Supervisors CYD Deputy | On going | | |
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