

County Improvement Plan Template (CIP)

County Name: Venango

Date of Plan: August 2011

Initial

Update

Section I. Sponsor Team Members:

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Implementation Team(s)/ Members

Hope Thomas	Intake Supervisor (GPS)
Sharon Wise	Ongoing Supervisor
Ward Witmer	CPS Caseworker II
Jennifer Richards	Training and QA Supervisor*
Carrie Beightol	Kinship Care Coordinator
Amber Kalp	WR OCYF
Jay Poindexter	CPS Caseworker III
Amanda Sheffer	Ongoing Caseworker
Vicki Lenhart	WR OCYF
Terry Tate	Ongoing Caseworker

Section II. Background:

The agency participated in the pilot of the Pennsylvania Quality Service Review tool in May of 2010 and learned about the proposed Continuous Quality Improvement process at that time. The Venango County Sponsor Group met for the first time on October 12, 2010 to review the pilot feedback, discuss commitments of Phase 1 CQI counties and determine next steps for the agency. The group engaged the Child Welfare Training Program in a work plan that included assessment work and ongoing facilitation of a continuous improvement team. In the fall of 2010 focus groups were held with

supervisor, casework, clerical and fiscal staff members. Participants focused on the strengths and challenges of the VCCYS environment including, but not limited to, communication, decision making and trust. They also developed a list of suggested remedies to improve agency climate. Feedback was provided to all agency staff members and was used by the sponsor group to establish agency priorities.

A Continuous Improvement Team was formed with the first meeting held in December 2010. The group formulated recommendations within the general remedies and assisted in establish individual, team and organizational development plans. The QSR was held in March of 2011. Ten cases were reviewed and focus groups and stakeholder interviews were conducted. The results confirmed the initial assessment information gathered when the CQI process started. The CI group worked to develop the Continuous Improvement Plan based on the QSR results in addition to ongoing feedback received as a result of their current efforts.

Section III. Priority Outcomes:

Outcome # 1: Improved teaming to support better assessment, planning and service delivery that encourages families to be active participants in all phases of the case process.

Outcome # 2: Improved information and resource sharing establishing, disseminating and updating resource and referral information throughout the county system.

Outcome # 3: Improved engagement to ensure the family is receiving appropriate assessment and services. This will improve outcomes and family buy-in. The goal is to empower family members to be active team members, decrease recidivism and improve relationships with families and the community.

Section IV. Findings *(Identify the findings that explain why each priority outcome was chosen. List any related findings: e.g., strength and gap trends, data, and connections to CFSSR indicators of Safety, Permanency, and Well-Being and/or QSR Practice Performance indicators:*

Findings related to Outcome # 1: Teaming

As per the QSR final report Teaming was rated as acceptable in only 45 percent of the cases reviewed and was frequently cited in other indicators as a contributing factor for unacceptable ratings. Reviewers felt when teams were formed they were not

functioning well. Most reviewers reported team members to be acting independently of the group and not sharing important information, once to the detriment of the safety of the child who unbeknownst to the majority of the team was self-harming. When team members are working independently they can often unwittingly work against each other's efforts, decreasing the possibility of any long term success in the case.

Unclear roles for team members were also among the contributing factors leading to unsuccessful teaming. Reviewers noted team members being unclear as to their role and responsibilities to the team. Children/youth did not understand the purpose of the team or their place within it. Electing a team leader to direct the group, assigning roles and encouraging information sharing should help resolve these issues.

Findings related to Outcome # 2: Improved Information and Resource Sharing

At one step of the assessment process the Continuous Improvement Team did a resource mapping exercise. During the discussion it was clear that not everyone in the room had or used the same resources when working with families. The team thought if they were having that issue internally that other providers and community members may also not have an understanding of all of the resources in the community. The focus groups during the QSR confirmed that assumption. The team determined that for teaming to be successful everyone must start with the same basic knowledge of service availability and understanding of eligibility requirements..

Findings related to Outcome # 3: Engagement

As per the QSR Final Report: Engagement was rated as unacceptable in nearly half (48%) of the cases reviewed. Engagement is the foundation from which success may be obtained for children/youth and their families. A lack of engagement with the children/youth and the families was found to directly affect other related indicators, such as teaming, role and voice child/youth and family planning process and long term view.

These ratings were supported by other sources including focus groups and feedback from units during the CI sessions. The team believes strongly that engagement must be modeled internally if caseworkers are able to successfully partner with families.

Section V. Strategies and Action Steps for each Outcome

The following should guide the development of specific strategies and action steps for each of the priority outcomes.

- a. Identify existing strengths
- b. Identify existing gaps
- c. Identify the root causes for the gaps
- d. Identify potential remedies for the root causes
- e. Identify which remedies can be quick wins, midterm, and long term

The following components should be included in the plan for each priority outcome:

Strategy: *The overall approach/plan to achieve the outcome. Several strategies may be identified for each, but should all connect to the particular outcome you are trying to achieve.*

Action Steps: *Clear and specific steps to be taken to achieve the strategy. There may be several action steps identified for each particular strategy.*

Indicators/Benchmarks: *These indicate how the strategies and action steps have impacted the outcome as well as indicating how progress is measured and monitored.*

Evidence of Completion: *Evidence that verifies that each individual action step has been completed.*

Persons Responsible: *The individual who is responsible for completing each individual action step.*

Timeframe: *Expected time of completion for each individual action step.*

Resources Needed: *Resources needed to achieve the strategy or action step. May include, but is not limited to, financial resources, partnerships with technical assistance providers, and staff resources.*

Status: *Progress toward completion of each action step upon review of the County Improvement Plan.*

Section V. Strategies and Action Steps for each Outcome

Outcome # 1: Improved Teaming							
STRATEGIES	ACTION STEPS	INDICATORS/ BENCHMARKS	EVIDENCE OF COMPLETION	PERSON(S) RESPONSIBLE	TIME FRAME	RESOURCES NEEDED	STATUS
Develop a county wide protocol which will establish roles and responsibilities for family members and all other team members.	Develop work charter.	Clear idea of purpose and responsibilities of workgroup	Written charter	CI team		Child Welfare Training Program Technical Assistant	Completed
	Invitation to community members to participate in workgroup to develop protocol.	Community members will have a role and voice in the teaming process	Next Steps Meeting with workgroup sign-up sheets	QSR Site Leads	June 14, 2011	None	Completed
	Work group will develop teaming protocol	<p>Better understanding of roles and responsibilities of team members</p> <p>Families will have role and voice in case planning and service provision</p> <p>All providers will have role and voice in case planning and service provision</p> <p>Team members will have a shared view of long term success that carries over as</p>	<p>Work charter products including protocol, system of accountability for all team members, and plan for communication</p> <p>Completion of plan consistent with protocol</p> <p>Family participation in team</p>	Workgroup, CI team, Sponsor team	Sept, 2011	Meeting room, staff time	In progress

		team members change					
	Communication/Dissemination to all key stakeholders – FOOF, Children’s Roundtable, LICC, Superintendants	Key stakeholders will be informed of process	Notes from Committee meetings Attendance/presentation at scheduled community and group meetings	Workgroup, CI team, Sponsor team	Ongoing	Clerical time, Staff time	Planning
	Teaming protocol will be attached to provider contracts as an expectation of providing service in Venango County.	Contracts will reflect emphasis on teaming.	Signed contracts	CYS Administrative Officer, CYS Fiscal Officer	July 2012	Staff time	Planning
Establish an internal Quality Assurance system to monitor work.	Develop a protocol using existing structures and strengths of the agency.	Improved assessment and planning for individual children and	Use of file reviews, interviews, focus groups to gather information about effectiveness of team and impact on Safety, Permanency and well being. Survey of parents, caregivers and youth to determine impact on functioning, outcomes and adequacy of	CYS Quality Assurance Supervisor, CI team, Sponsor team	Ongoing	Staff time	Planning; partially in progress

			services				
	Develop a communication plan and training for staff regarding internal QA structure.	Staff will have an understanding of internal QA process	Staff meeting notes Policies and Procedures QSR Results Documentation in files	CYS QA Supervisor	October 2011	Staff time	Planning

Outcome # 2: Improved information and resource sharing							
STRATEGIES	ACTION STEPS	INDICATORS/ BENCHMARKS	EVIDENCE OF COMPLETION	PERSON(S) RESPONSIBLE	TIMEFRAME	RESOURCES NEEDED	STATUS
Develop a central resource directory and update it regularly.	Develop work charter	Clear idea of purpose and responsibilities of workgroup	Written charter	CI team		Child Welfare Training Program Technical Assistant	Completed
	Invitation to community members to participate in workgroup to develop protocol.	Community members will have a role and voice in the process	Next Steps Meeting with workgroup sign-up sheets	QSR Site Leads	June 14, 2011	None	Completed
	Workgroup will gather existing information in the county	Community members are engaged in the process Community members have a role and voice	Work charter products including an updated vensngoinfonet.org List of community	Workgroup, CI team, Sponsor team	Dec. 2011	Staff time, community directories	In progress

		in the process Identification of all community resources	resources				
	Develop one place/tool to get information and a system to keep it updated	Community resources will utilize the system and update it regularly	Venangoinfonet .or Automatic update requests sent to community resources	Workgroup, CI team, Sponsor team	Dec. 2011	Venangoinfonet.org, staff time, website creator, funds to pay for changes to website	Planning/in progress
	Communication/dissemination plan for stakeholders and community at large	Participation by Community Resources in Networking Resource Fair Families and community resources will know how to access resource information	PR Materials	Workgroup, CI team, Sponsor team	Dec. 2011	Advertising costs, staff time	Planning
Develop an internal method for evaluating resources	Commission an internal workgroup to develop a way to evaluate and share the effectiveness of contracted providers and other resources	Staff will feel more competent and confident in their ability to access appropriate services.	Internal Workgroup products	Internal Workgroup, CI team, Sponsor team	Dec. 2011	Staff time	Planning
	Develop a list of key questions and rating scale regarding services rendered by providers	Staff would have a role and voice in provider selection and use of service	Internal workgroup products	Internal workgroup, CI team, Sponsor team	Dec. 2011	Staff time	Planning

		providers					
	Develop a protocol for using the rating scale to inform new workers and future contracts	Providers will fulfill program descriptions	Internal workgroup products	Internal workgroup, CI team, Sponsor team	Dec. 2011	Staff time	Planning

Outcome # 3: Improved engagement efforts							
STRATEGIES	ACTION STEPS	INDICATORS/ BENCHMARKS	EVIDENCE OF COMPLETION	PERSON(S) RESPONSIBLE	TIMEFR AME	RESOURCES NEEDED	STATUS
Hire staff who have the skills and willingness to engage families.	Implement new hiring process that speaks to organizational fit and the values of Venango County CYS. The merit hiring includes several steps.	Increased pool of applicants	Hiring protocol	Human Resources, QA Supervisor, Administration, Line Supervisors	July 2011 and ongoing	Staff time, training	In progress
		Lower turnover	Annual Retention Report				
		Staff will demonstrate skills necessary for the job	QSR Results				
		Increased morale	Internal QA reports				
		Quality Assessments	Quality Visitation Report				
		Higher quality and frequency of More timely permanence					
	Establish a mentoring program for new employees an interns that outlines goals, policies and procedures for orientation.	Service provision will improve because caseworkers will know how to access resources	Policies and Procedures for new employee and intern orientation.	Administration	Feb. 2011	TA Collaborative Supports, Community Collaborative Supports	Planning
Model best practice in	Roles and responsibilities of managers, supervisors,	Updated job	Updated job descriptions	Human Resources,	Ongoing	New paperwork	In progress

supervision through a strengths based approach.	caseworkers and intern will be clearly defined.	descriptions Organizational chart	signed and in employee files.	Supervisors			
	Supervisors will receive ongoing training and support to develop supervisory skills through work with the TA Collaborative	Supervision will model positive behaviors/attitudes about families Increased retention of staff members	Notes from Facilitated sessions Additional policies and procedures Supervisory conference notes	Administration, Line Supervisors, Training Supervisor	Ongoing	TA Collaborative Supports	Planning
	Benchmarks for quality supervision will be established for	Supervisors will have better understanding of roles Lower turnover Staff will demonstrate skills necessary for the job Increased morale Service provision will improve	QSR Results Internal QA Annual Retention report	Internal workgroup, Administration	Feb. 2011	Staff time	Planning
	Supervisors will train and support caseworks, balancing praise with constructive criticism	Caseworkers will be valued, they will be supported, and supervisors will represent their caseworkers' ideas in a concise way.	Performance evaluations and staff action plans. QSR Results Fewer complaints to	Administration, Supervisors	Ongoing	Human Resources Merit Hiring Workgroup, TA Collaborative Supports, Community Collaborative Supports	Planning

		Supervisors will be able to assess skills and work styles of the unit and adapt supervision accordingly.	Administration and Human Resources				
	Transfer of Learning for supervisors	Supervisors will demonstrate application of knowledge.	Written TOL products Performance Evaluations	Administration	Ongoing	TA Collaborative Supports, Community Collaborative Supports, Staff time	Planning
Establish an agency protocol of family engagement at all stages of involvement with the agency	Develop a CYS Handbook to be given to families as a supplement to engagement	Improved communication regarding procedures, requirements, and roles of agency Use of the handbook as a guide for the caseworker Families will be empowered to look up information without total dependence on caseworker	All families will be provided a handbook during intake Signature of receipt will be added to HIPAA form	Internal Workgroup	July 1, 2012	Other county resources, Staff time, Publication and printing costs	Planning
	Caseworkers and supervisors will understand and apply strength-based interactional skills with families	Quality assessments Appropriate services in place Families meeting the goals of the Family Service	Structured case notes and six domains Improved scores in the Practice Performance Indicators on	Supervisors, caseworkers, administration	Ongoing	Staff time	Planning

		<p>Plan</p> <p>Caseworkers will be competent and effective</p> <p>Increased trust in the caseworker and the agency on the part of the family</p>	<p>the Quality Service Review</p> <p>Study results through Heart to Heart Parent Mentor Program</p> <p>Involvement of the family in the teaming process</p>				
<p>Develop protocol for timely and effective transition of cases opening from intake to ongoing</p>	<p>Determination of case opening through utilization of agency's Clinical Review Team</p>	<p>Quality assessments</p> <p>Appropriate services in place</p> <p>Consistency of information gathered and discussed</p>	<p>All cases to be opened will be reviewed prior to opening</p> <p>Copies of CRT form will be kept in the file and in the Intake CRT binder</p>	<p>Clinical Review Team members, Administration</p>	<p>Ongoing</p>	<p>Staff time</p>	<p>In progress</p>
	<p>Completed forms will be sent to identified ongoing worker via email/hard copy prior to transfer (Safety Assessment, Risk Assessment, Family Service Plan/Child Permanency Plan, Opening Summary, Safety Plan)</p>	<p>Timely first face to face contact by ongoing worker</p> <p>Reduction of duplication of completion of family's identifying information</p> <p>Reduction of possible triangulation</p>	<p>Ongoing worker's first visit conducted according to risk level</p> <p>Timely completion of paperwork</p>	<p>Intake and ongoing caseworkers and supervisors</p>	<p>Ongoing</p>	<p>Staff time</p>	<p>Planning</p>

	Intake caseworker will introduce ongoing caseworker to family in person	Reduction of stress, feelings of mistrust on the part of the family Reduction of stress on part of ongoing worker Improved understanding of roles	Structured case notes and six domains completed thoroughly and in system QSR results Interviews and focus groups				
	Timely assignment of case to ongoing caseworker		Ongoing worker's first visit conducted according to risk level	Intake and ongoing caseworkers and supervisors; clerical staff	Ongoing	Staff time	Planning/ in progress
	Completed file given to ongoing supervisor in a timely manner	More time available to spend with families Quality visits	FSP/ CPP completed within required time frame Cases transferred within 60 days Database up to date				
	Most updated information in system						