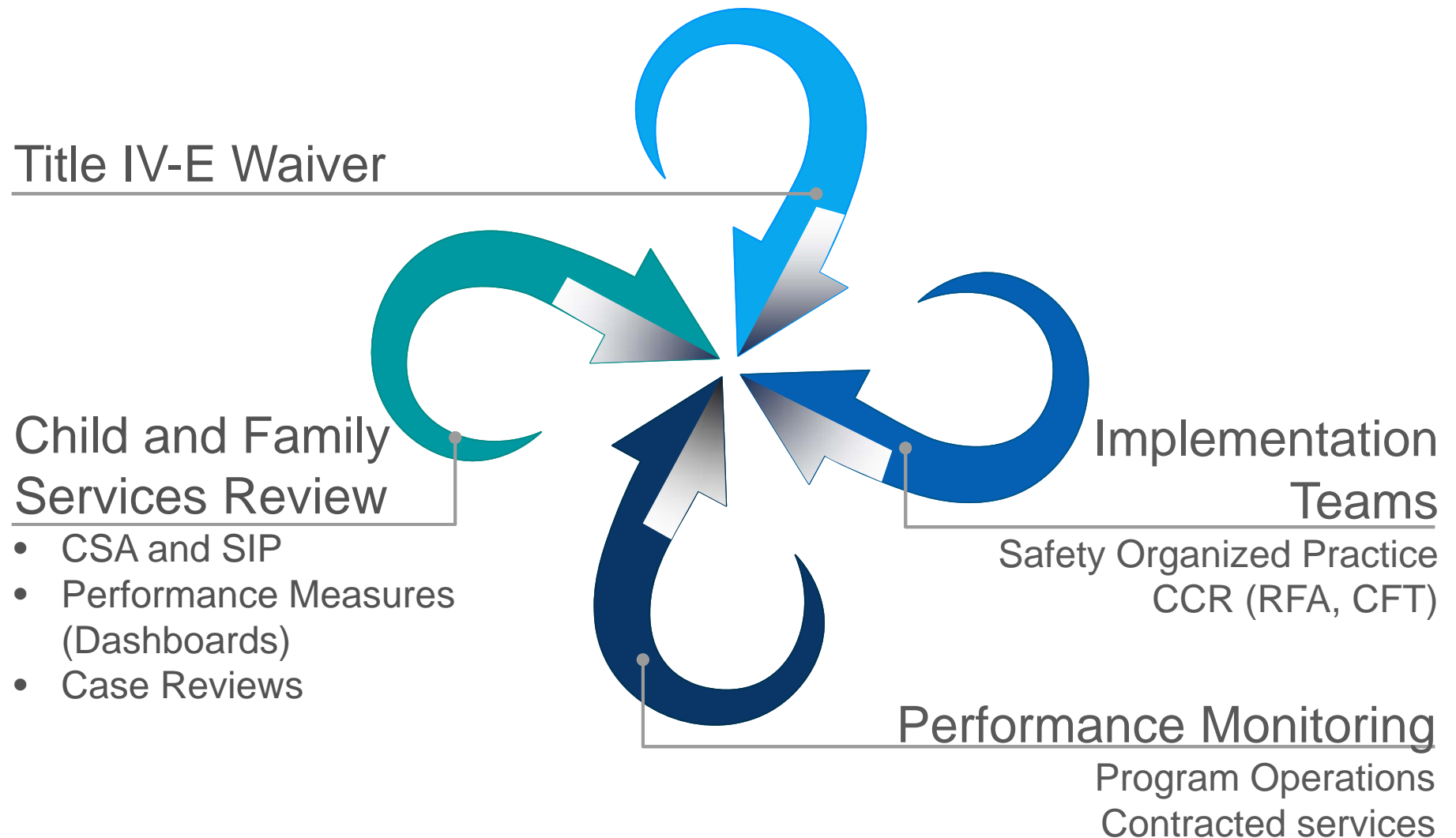


Continuous Quality Improvement in Alameda County

Past, present, and future

CQI Conference
March 28, 2019

At a Glance: Department CQI Efforts

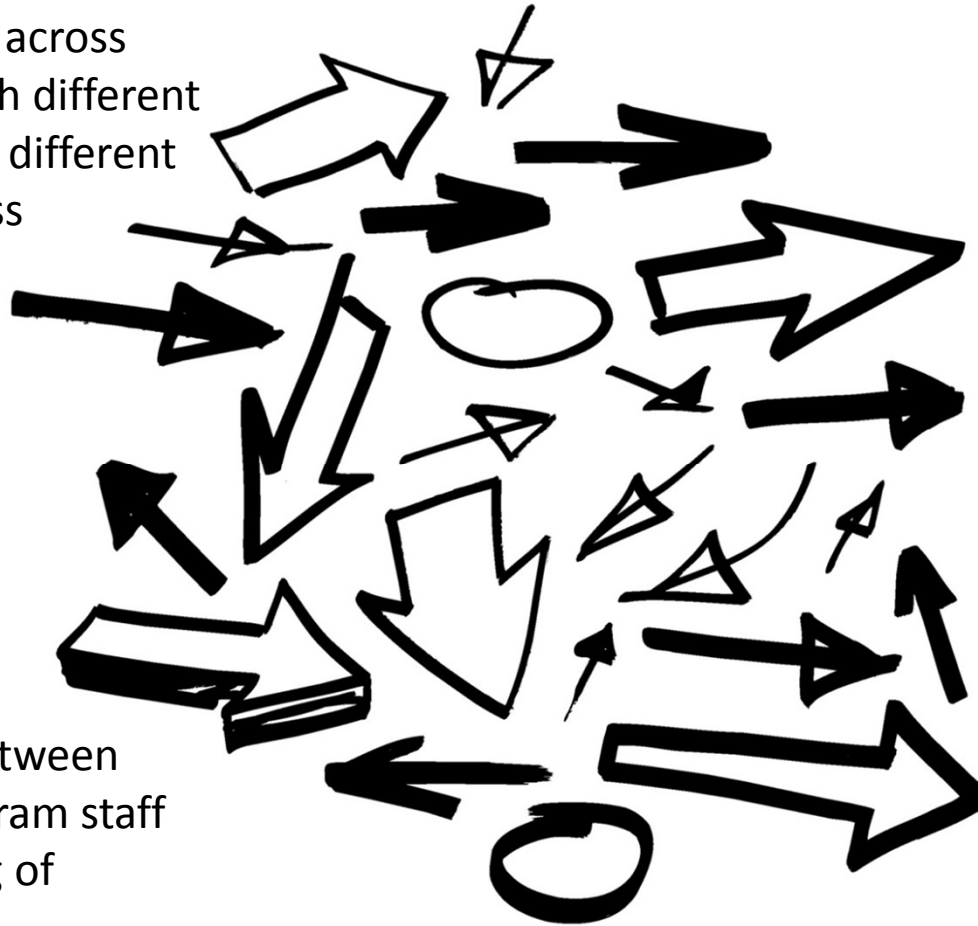


Developing our CQI Model: System Challenges

Multiple efforts across department with different staff involved in different pieces of process

Separate reporting and data requirements and timelines

Disconnect between data and program staff understanding of available data



Developing our CQI Model

Strengths:

- Existing analytic capacity
- Implementation framework
- Strong leadership vision and commitment
- Coaching & support

Worries/Needs:

- Culture shift
- Sustainable
- Aligned with other efforts

How we have addressed needs:

- Emphasized partnership and accountability
- Created structure, but left room for flexibility
- Incremental progress
- Resources & technology



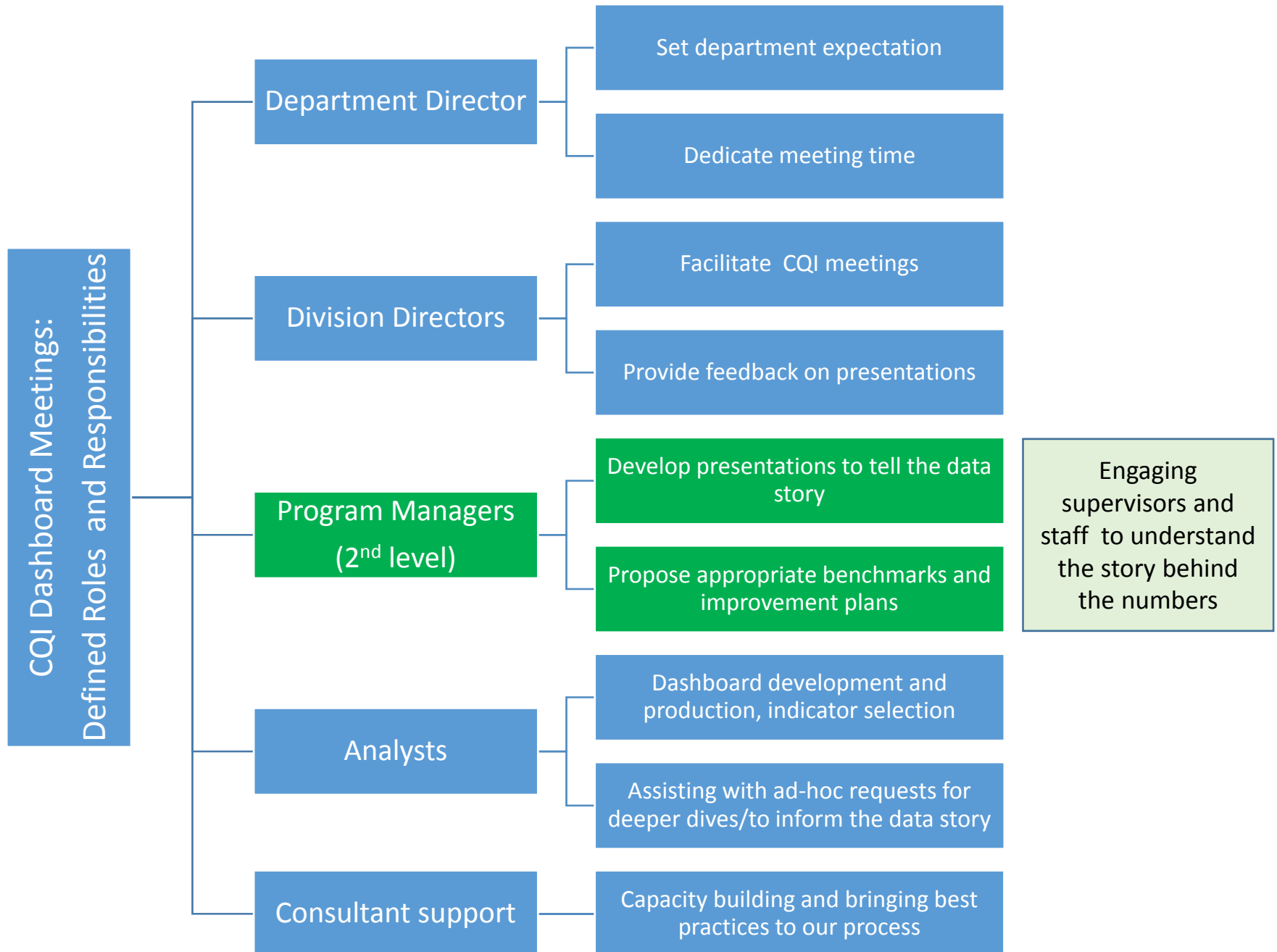


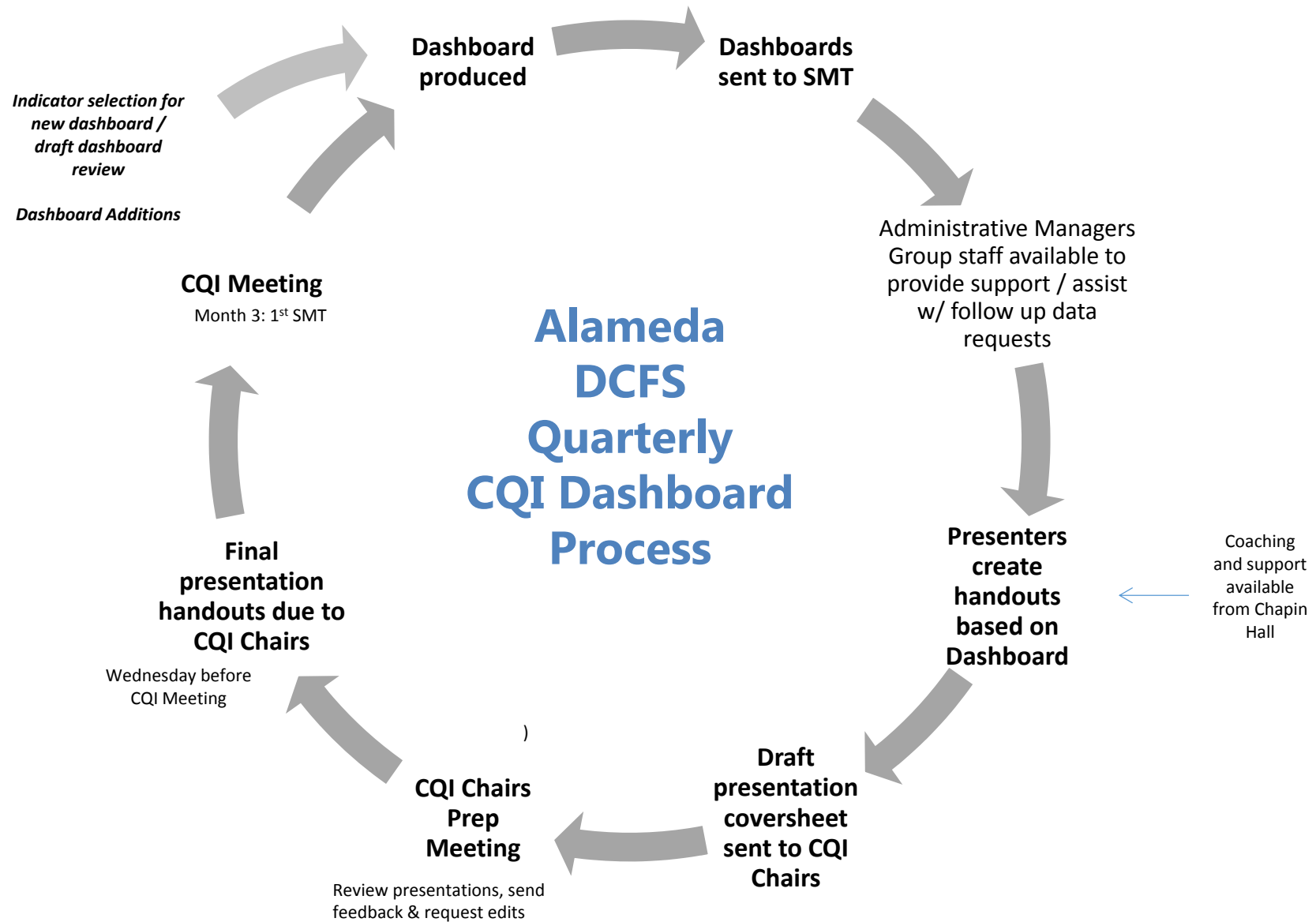
Process that supports a
“culture of curiosity” as
a path to improved
accountability and
planning

We want to create an ***environment of honest, frank, and courteous dialogue*** about our programs. ***Listen as though you have a stake in the presentation***, as your peers are presenting information that is ***critical to the success*** of our department. ***Listen critically*** to see if there is an overlap with your program area. Expect ***transparency and frankness*** and be prepared to ***offer help rather than advice***. Plan to ***participate actively*** in the discussion!

-Michelle Love







Structured approach to developing new dashboards

	Carryover/modify from existing dashboard	Add to New Dashboard	Further data exploration	Indicator for other dashboard
Breakout of performance measure		Considerations: <ul style="list-style-type: none"> • Availability of data and potential data source • SafeMeasures vs. creating new Business Objects report • Complexity of developing query and updating data 		
Process Indicator				
Context Indicator				

	Dashboard indicator:	Defined as:
Breakout of performance measure	<ul style="list-style-type: none"> • Ensures that presenters are included in discussions about how indicators are defined • Allows for inclusion of indicators that program staff feel are important to performance and provide context, but may be outside of program control 	
Process Indicator		
Context Indicator		

Presentation template

Outcome Measure	Name & brief description of what it measures	
Follow-Up from Previous CQI Meeting	Report out on previously identified next steps	
What's Working Well	<u>Strengths:</u> <ul style="list-style-type: none"> ○ Highlight positive indicators ○ Provide on the ground examples (e.g. practice changes, staff coaching and development) of what has worked well since the last report 	
What We Are Worried About	<u>What has Happened?</u> <ul style="list-style-type: none"> ○ What declining trends or indicators are we worried about? ○ If nothing changes, what will be the negative impact to children, youth, and families? 	<u>Complicating Factors</u> <ul style="list-style-type: none"> ○ What factors outside of our control may negatively impact indicators we are worried about?
What Needs to Happen Next	<u>Long-Term Goals</u> <ul style="list-style-type: none"> ○ What is the preferred future/vision? 	<u>Next Steps</u> <ul style="list-style-type: none"> ○ Concrete next steps that will be reported out next quarter.

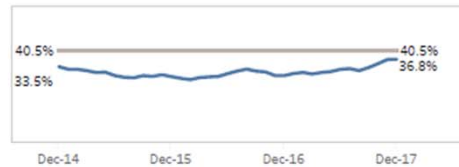
Current dashboard: Permanency within 12 months

Alameda County Department of Children and Family Services

Updated: February 19, 2019

CFSR 3: Permanency Within 12 Months of Entry (Rolling 12-month total)

■ National Standard
■ Alameda



Entries (12-month ending)	Dec-14	Dec-15	Dec-16	Dec-17
	564	597	477	462
% change prev yr		5.9%	-20.1%	-3.1%

Exit status for all children in who entered in 12-month period and time in care for children who exited to reunification (% of entry cohort)

		Dec-14	Dec-15	Dec-16	Dec-17
Reunification	< 6 months	20.2%	20.4%	21.2%	25.5%
	6 - 11 months	11.5%	6.7%	5.7%	9.7%
	12 - 17 months	8.3%	9.2%	7.8%	6.9%
	18 + months	3.0%	6.7%	5.7%	0.4%
Adoption & Guardianship					
	< 12 Mo.	1.8%	2.0%	2.7%	1.5%
Adoption & Guardianship					
		29.4%	29.0%	23.3%	8.4%
Other Exit					
		13.5%	7.0%	4.2%	2.6%
Still in Care					
		14.0%	20.9%	32.3%	46.3%

Number of Children Entering By Age		% of children achieving permanency within 12 months by age (12 mo. total)		% change in the % of children achieving permanency within 12 months by age	
	Dec-17	Dec-16	Dec-17		
0 - 5	200	25.5%	34.5%		35.3%
6 - 12	115	37.1%	40.0%		7.8%
13 - 17	147	28.4%	37.4%		31.9%
All 0 - 17	462	29.6%	36.8%		24.5%

Indicator

Child Visits Made (ER/FR)

Cases w/ Some or All Parent Visits in Month (FR)

Initial Family Strengths & Needs Assessment Completed

Ongoing Family Strengths & Needs Assessment Completed Within 65 days of Case Plan

Reunification Reassessment Completed w/in 65 Days of Case Plan

	Current 3-mo avg	Prior 3-mo avg	Rolling 3-mo avg Dec 2014 - Dec 2018	Performance compared to last cycle	Goal benchmark range
Child Visits Made (ER/FR)	94.2%	96.1%	89.0% → 94.2%	↘	90 - 95%
Cases w/ Some or All Parent Visits in Month (FR)	59.5%	51.9%	37.1% → 59.5%	↗	50 - 60%
Initial Family Strengths & Needs Assessment Completed	46.8%	62.1%	43.1% → 46.8%	↘	60 - 70%
Ongoing Family Strengths & Needs Assessment Completed Within 65 days of Case Plan	68.3%	64.1%	36.8% → 68.3%	↗	60 - 70%
Reunification Reassessment Completed w/in 65 Days of Case Plan	69.6%	64.6%	41.8% → 69.6%	↗	60 - 70%

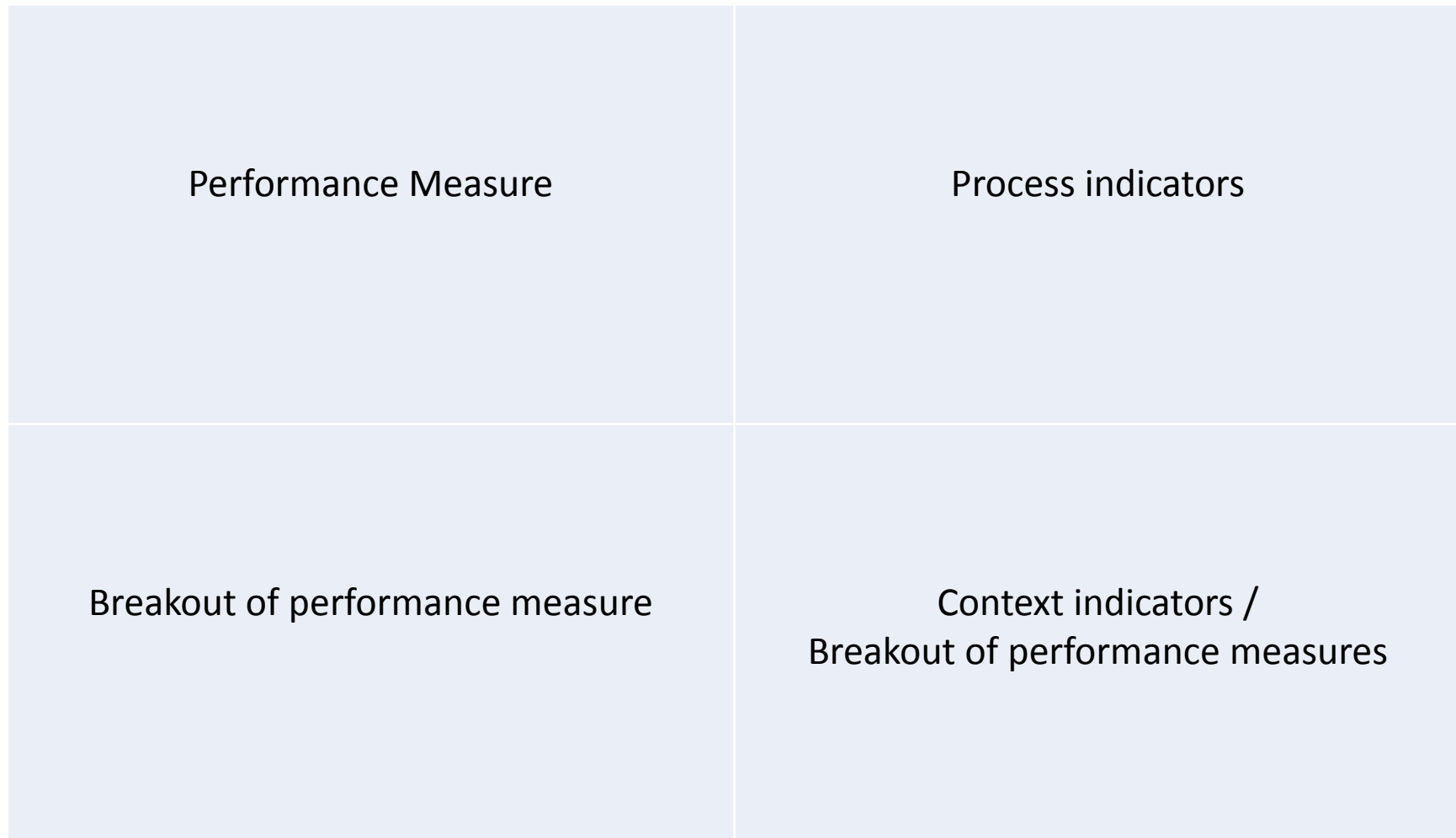
Indicator

12-month total, period ending (*unless otherwise noted)

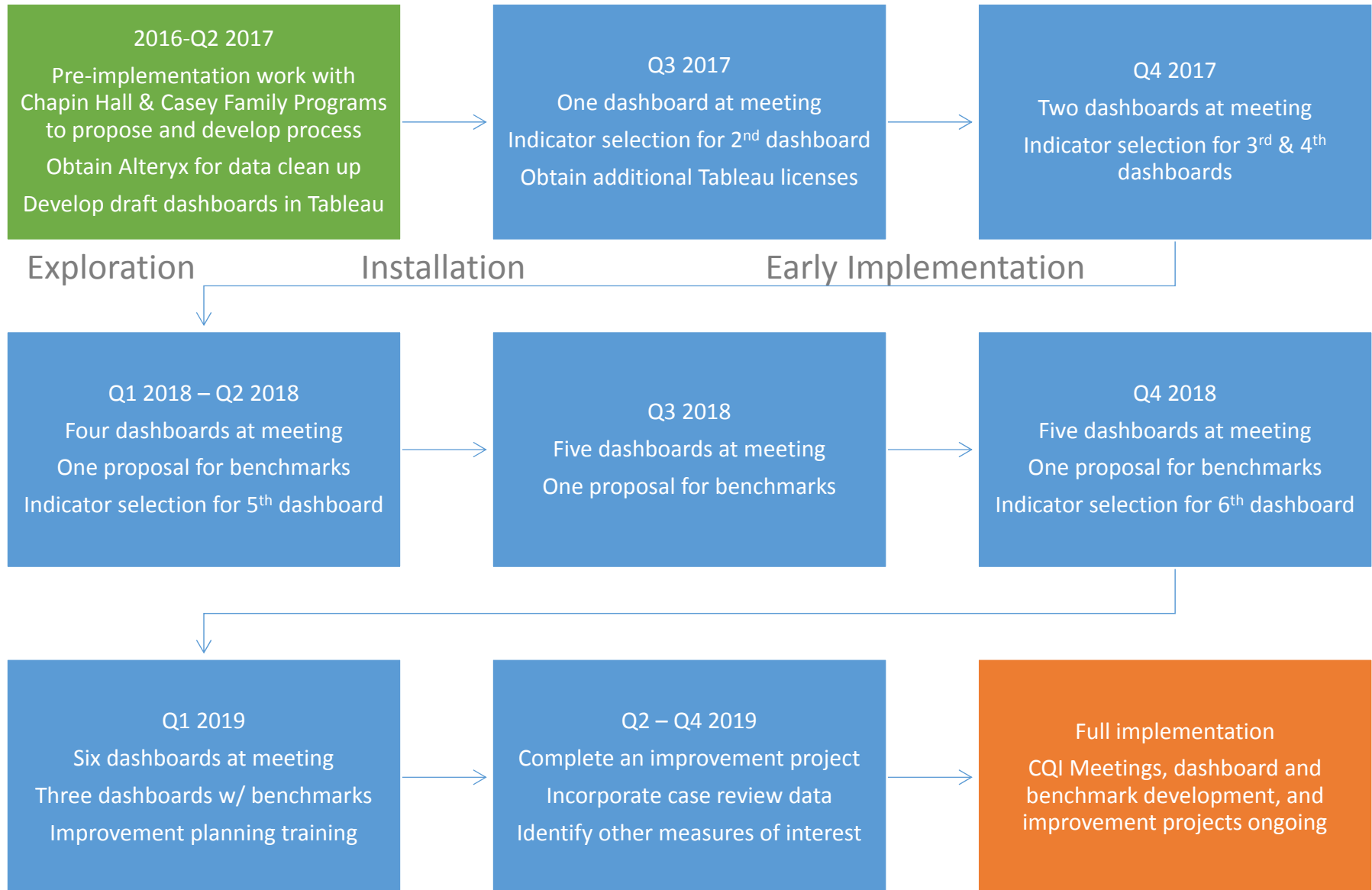
DI Less Than 60 days	48.2%	50.4%	53.7%	45.4%
In Care 60+ Days at FR Start	44.8%	51.9%	53.7%	48.6%
Children with 2 or fewer placements (first 12 months, entry cohort in care 6+ months)	72.0%	68.3%	68.0%	
Katie A Eligible Youth	24.9%	19.8%	18.3%	18.7%
Placed In Alameda County (ER/FR, Point-in-Time)*	38.0%	44.4%	49.3%	43.5%
	December 2015	December 2016	December 2017	December 2018

Within range: ↗ Improving ↘ Declining → No change
 Outside range: ↗ Improving ↘ Declining → No change

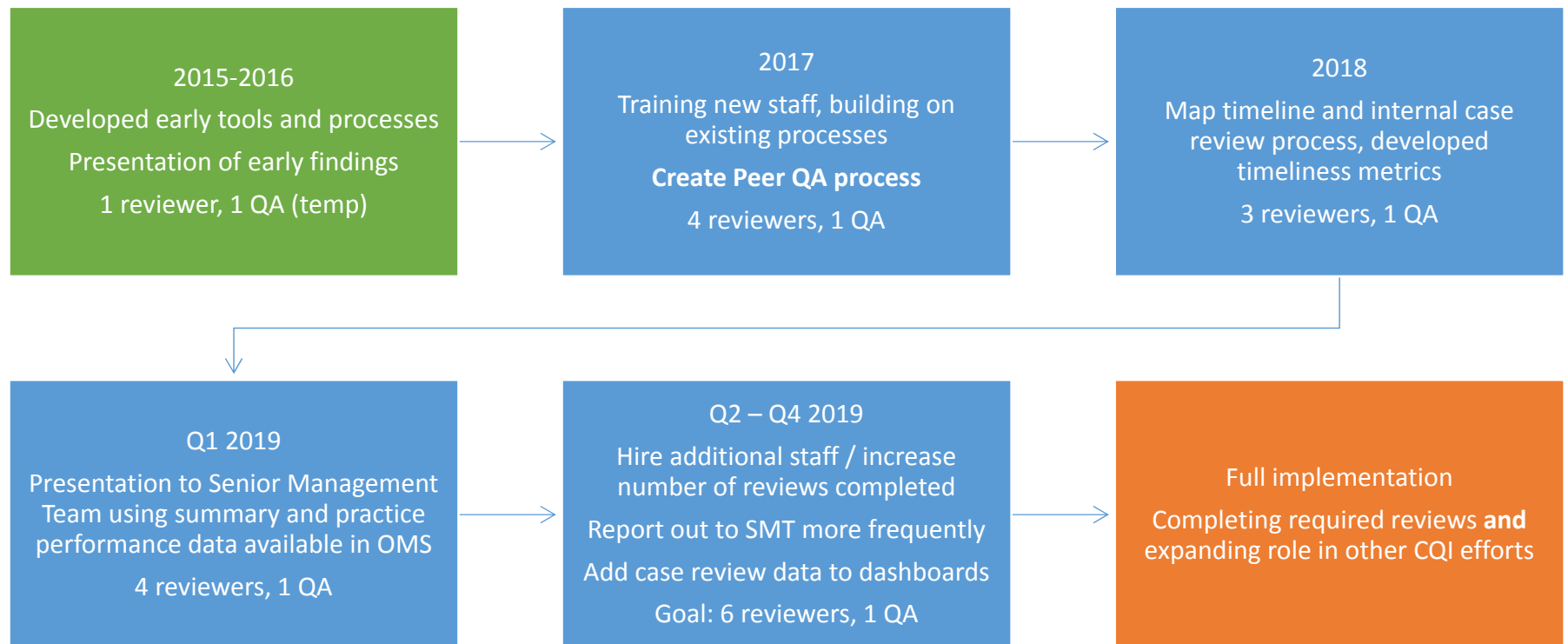
Consistent dashboard organization



Incremental implementation



Refining our case review implementation



What next?



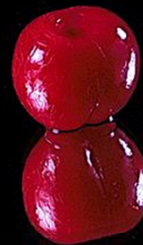
Dashboard
refinements

Integrate case
review data into
dashboard
process



Improvement
Planning

Continued
emphasis on
cross program
partnership

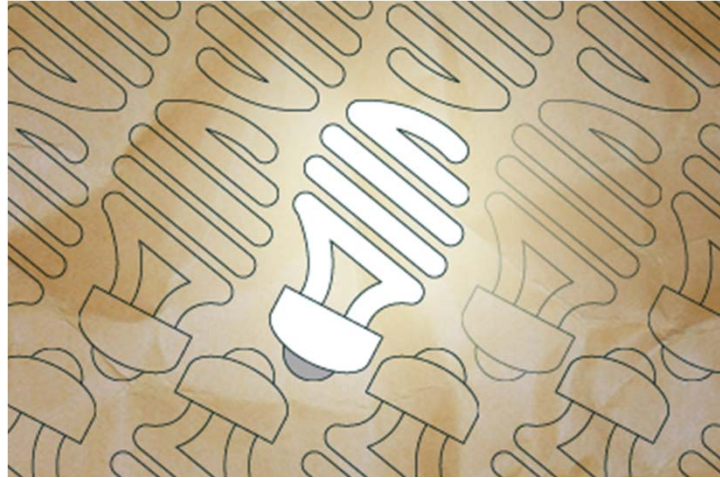


Make data
available to
other levels of
staff



Engage
workers and
supervisors in
CQI
discussions

Questions?



Jennifer Uldricks, uldrij@acgov.org