Quality Assurance (QA) Guide

This Quality Assurance (QA) Guide is recommended for use by QA staff to ensure that Onsite Review Instrument (OSRI) data are accurate, complete, and consistent. It contains information regarding general and item-specific issues to consider when conducting QA on an OSRI. The guide also describes an approach to conducting QA that encourages discussions with reviewers prior to completion of the OSRI instrument in addition to a final QA review of the instrument once it is completed.

BEGINNING THE QA PROCESS
Ensure reviewers understand the conflict of interest criteria and confirm there are no conflicts of interest for the case.

Determine whether the case should be in the sample and that it meets the case type criteria for which the case is identified.
- In-Home (make sure there were no foster care episodes during the PUR)
- Differential/Alternative Response (make sure the state has this program and that the case is accurately identified as DR/AR)
- Foster Care (check to see if it is a short-term FC case, as such cases have unique rating instructions throughout the OSRI)

Identify main case participants.
Assist reviewers with questions to ask caseworker to obtain an overview of the case.
Review interview schedule and ensure all required case participants are scheduled.

CONTINUING THE QA PROCESS
Once reviewers have conducted their case record review and have completed the Face Sheet of the instrument, QA specialist should meet with reviewers to discuss the case prior to engaging in interviews and before they begin to work on the OSRI item ratings. The purpose of this discussion is to allow QA staff to get a better understanding of what is happening in the case and ensure that: (1) reviewers are taking the right approach to rating the case based on the case circumstances and correctly recording the practice observed in the proper location within the instrument, (2) reviewers understand the key practice concerns that will need to be analyzed within the OSRI, and (3) reviewers have had the opportunity to obtain any needed clarification on the rating process/criteria and applicability of items in the OSRI. There may be instances where reviewers will need assistance on how to reconcile inconsistencies in information gathered from interviews and case documentation and this should be discussed during this initial QA conversation. Obtaining relevant background and contextual information for a case is a critical step in providing QA. Begin the discussion by reviewing the Face Sheet and discussing the following with the reviewers:

Determine Case Status
- Is the case currently open or closed? How long was the case open? From what dates was the case open?
- Why is the agency involved with the family? Ask reviewers to describe the risk
and safety concerns that existed during the PUR.

**Identify Case Participants - Children**
- For IH and FC cases, which children were in the family home during the PUR? Note ages of children. Were there specific children in the home who were the focus of services?
- For FC cases, note the target child's age and ask whether any siblings are in foster care. Note the length of time the child has been in foster care and ask reviewers what the child's current permanency goal(s) is/are.

**Identify Parents or Caregivers**
- Review the case participant table in the Face Sheet and discuss who the parents/caregivers are who will be rated in the case considering that these terms are designed to be inclusive of the various familial and fictive kin circumstances encountered in child welfare cases.
- Biological and legal parents should be included in the table, regardless of their involvement with the child/ren at the time of the review, in order to ensure that a parent is not inappropriately left out of consideration in the review. If biological parents are not listed, reviewers should explain why. Ensure that reviewers have considered all appropriate case participants including same sex parents, paramours, and members of intergenerational households, as applicable.
- Based on case circumstances, paramours who have contact with children should be considered in the provision of safety-related services (Item 2), and assessments of risk and safety (Item 3). Paramours typically should be assessed in the context of their relationship with the primary caregiver(s) who will be caring for the children. For example, if the biological mother is the caregiver that the child(ren) will be reunified with and her boyfriend needs services to ensure he can appropriately care for the child(ren) because he lives in the home, the agency may need to assess and provide services to him but that would be captured under "mother" in Item 12 because it affects the assessment of her protective capacity in caring for her children. If he does not comply with services, that could necessitate a change in assessment and service provision to the mother.
- If the whereabouts of a parent are unknown, discuss whether concerted efforts to locate the parent were made and how their efforts will affect ratings.
- Review the definitions of parents for Items 8 and 11, and for Items 12, 13, and 15 with reviewers to ensure that they will capture the right caregivers in each item based on the case circumstances.

**Get Case Overview**
Once you have a general overview of the case, discuss whether the reviewers have adequate information from the case record and case-related interviews to rate the case or whether additional interviews may be necessary. Discuss any conflicts reviewers may have noticed in the information gathered. Move into a discussion with the reviewers that begins broadly at the outcome level but also allows reviewers to explain strengths and concerns as they relate to particular
items. QA staff should ask appropriate follow-up questions that will help trigger the reviewers to consider whether the case achieved the best practice standards that are presented in the OSRI. The following questions can be used to guide the initial QA discussion:

**Safety Questions - What strong case practice was in place related to safety and what were key concerns?**
- What were the key risk and safety concerns during the PUR? (Make sure reviewers are correctly differentiating between risk and safety issues.)
- Did the agency appropriately assess and address risk and safety concerns?
- Were children maintained in their homes when possible/appropriate?

**Permanency Questions - What strong case practice was in place related to permanency and what were key concerns?**
- Will permanency be achieved timely based on the length of time the child has been in foster care?
- How did the agency work with the courts in moving the case forward toward permanency?
- Did the child have permanency and stability in his or her living situation?
- Were the child's family relationships and connections preserved?

**Well-Being Questions - What strong case practice was in place related to well-being and what were key concerns?**
- Did the agency adequately engage the family, conduct appropriate assessments, and provide needed services so that parents could provide for their child(ren)’s needs?
- For FC cases: Were the child’s educational, physical, and mental health needs adequately assessed and addressed?
- For IH cases: discuss which children will be assessed in Items 12, 13, and 14 and discuss which Items (16-18) may be applicable based on case dynamics. Discuss whether any applicable needs were assessed and addressed.
- How did the agency work with other system partners to ensure the family’s needs were assessed and addressed?

**GENERAL QA ISSUES**
Once you have discussed the case and any unique case dynamics with the reviewers in the initial QA discussion, reviewers should then complete the item ratings in the OSRI. Reviewers should conduct their own review of the completed instrument before submitting it for QA review. Some of the general issues to review for once the case has been submitted for QA include:

- **Identifying Information**: Ensure no proper names are used in the narrative boxes.
- **Period Under Review**: In a foster care case with an older youth target child, the
PUR ends when the youth turns 18-years old.

- **Role Identification:** Ensure that the correct case participants (children and parents) are assessed in appropriate items. It is important that reviewers evaluate the definitions of parents for Items 8 and 11 and for Items 12, 13, and 15.
  - The inclusion-exclusion of incarcerated-absent parents, paramours, and stepparents should also be examined carefully.
  - Many items allow for more than one mother and father to be captured in the ratings depending on the case circumstances. However, there can only be one rating for all individuals identified as the mother or the father.

- **Item Identification:**
  - The assessment and provision of services related to the child's education, physical, and mental health should be captured in Items 16, 17, and 18, NOT Item 12A.
  - In-home cases are only applicable for these items if an educational (Item 16), physical health (Item 17) or mental and behavioral health (Item 18) issue was relevant to the reason for the agency's involvement with the family, AND/OR the agency should be reasonably expected to address the issue(s) given the case circumstances.

- **Adequate documentation:**
  - Ensure that documentation in item questions provides appropriate rationale for no responses. If not, discuss with reviewers to determine whether the rationale can be strengthened or they should reconsider their response to the question.
  - Ensure that any item rated NA has adequate rationale to support that rating (be sure to inspect items that do not have any non-applicability criteria checked yet are rated NA).
  - Ensure information not specific to the item is not provided in the narrative fields and the rating summary. By limiting information to the specific item, it will minimize item drift seen in some of the cases, particularly with Items 5 and 6.

**ITEM-SPECIFIC QA QUESTIONS**

Depending on the level of detail, reviewers were able to provide in the initial QA discussions, QA staff may not need to ask reviewers all of the questions below after submission to QA. These questions are provided as a guide to ensure that reviewers accurately rated the case based on the practice standards outlined in the OSRI.

**Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment**

- Confirm with reviewers that they included all reports received during the PUR, including any reports that came in after the case was closed and any that were made during the course of the onsite review and screened in for investigation (if applicable).
- Review the policies on state-specific priority response timeframes to ensure accuracy.
Item 2: Services to Family to Protect Children in the Home and Prevent Removal or Re-entry into Foster Care

- Carefully review the item applicability criteria that reviewers selected. For foster care cases, ensure that all foster care entries and all reunifications during the period under review were considered when responding to the criteria.
- If Question A is answered yes, ask the reviewers to describe which services were provided to the family to ensure that they were safety-related. Services that were offered to the family that were not safety-related should be captured in Item 12B.
- If Question B is answered yes, ask the reviewers to explain the circumstances that warranted immediate removal.

Item 3: Risk and Safety Assessment and Management

- For foster care cases, if the child entered foster care during the period under review but reviewers selected NA for Item 2, ask the reviewers about the circumstances for removal to determine if any concerns should be noted in Item 3.
- Ensure that reviewers are only considering safety concerns when responding to Questions C-F and are not considering risk issues in those questions.
- If Question B is rated N/A, ask the reviewers to explain their rationale and ensure that it is consistent with the instructions provided.
- Discuss the quality of the risk and safety assessments that the agency conducted. Ensure that the frequency and quality of worker visits with the child(ren) and/or parents (in Items 14 and 15) was adequate to appropriately assess risk and safety throughout the PUR.
- If any of the concerns in A1 are checked yes and reviewers answered A or B yes, ask the reviewers to explain their rationale.
- If a CPS or GPS report needs to be made during the course of the onsite review, document this report in Item 3.
- If Question C is answered yes, ask reviewers to describe the safety plan and how it was monitored.
- If Question C and/or D is rated N/A and the question is applicable for assessment, ask the reviewers how they determined that there were no apparent safety concerns during the PUR.
- Ensure that the rating is based on initial assessments (if applicable) as well as ongoing assessments (if applicable) during the entire PUR.

Item 4: Stability of Foster Care Placement

- Ensure that the reviewers have considered all time periods that the child was in care during the PUR. If you notice that the placement dates do not account for all time periods, ask reviewers if the child was in a placement that is not considered a “placement setting” during those periods.
- Discuss all the “reasons for change in placement” with reviewers to determine whether Question B is answered appropriately. Ensure that any moves up to higher levels of care because of increased mental/behavioral health needs have been evaluated carefully.
• If a child's placement was disrupted during the PUR or is/was not stable, reviewers should assess whether the agency provided any services to the foster parent/caretaker to stabilize or support the placement. This information should be captured in Item 12, Section 12C.

• The instructions for Question 4B should be reviewed carefully for what circumstances are out of the control of the agency. Moves due to foster parents not being able to handle the behaviors of a child are generally under the control of the agency through the selection of an appropriate foster care home that can meet the needs of the child, monitoring and supportive services.

• The instructions for 4C1 provide guidance on circumstances that should be taken into account when determining if a placement is stable for 4C. When assessing whether a placement is stable, reviewers should consider if the foster parents either are willing to be a permanent resource for the child or are willing to care for the child until a permanent resource can be found, and if the foster parents have expressed any concerns with their ability to continue to care for the child.

Item 5: Permanency Goal for Child

• Review the table to determine whether Question B is answered accurately. Ensure that reviewers completed the table by noting dates that goals were established, not achieved.

• Discuss the response to Question C and ensure that reviewers considered the child's age, needs, and the circumstances of the case (length of time in foster care, status of caretakers in resolving safety concerns, etc.). In cases in which the appropriateness of the goal is based on a child or youth’s "age of consent" for adoption, did reviewers assess the agency’s efforts to work with the child around these issues? (e.g., what was the level of work done with the child to determine whether he/she really does not want to be adopted?)

• Ensure that reviewers accurately calculated the child's time in foster care in Question D.

• If Question E is answered yes, ask reviewers which ASFA TPR criteria the child met.

• If any exception in Question G1 is checked, discuss the specifics with reviewers to confirm accuracy.

• Placement information in Item 4 should be reviewed to assess whether the child was placed with relatives at the 15/22-month timeframe. Compelling reasons must be documented in the case file to count as an exception.

Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement

• If concurrent goals were in place, ensure that reviewers responded to Questions B and C appropriately.

• If Question B is answered yes but the child has been in foster care for more than the suggested timeframe (12, 18, or 24-months, depending on the goal) and the goal has not yet been achieved, ask reviewers to describe the circumstances to ensure that a delay is justified (see examples in instructions).

• If Question B is answered yes and the child has not been in foster care for more
than the suggested timeframe but has not yet been discharged from foster care, ask reviewers when the goal is projected to be achieved to ensure that it meets the recommended timeframes in the instructions. Also, ask reviewers to describe the concerted efforts that have been made to ensure timely achievement of the goal.

- If Question C is answered yes but Question C2 is answered “no date”, ask reviewers why they believe the child’s living arrangement can be considered permanent.
- Although there does not have to be a signed agreement with the foster parents, facility, or a court order that specifies the permanency arrangement for APPLA cases in answering Item 6 C2, there should be some evidence of formal steps that were completed to make the arrangement permanent. 6 C2 should not be rated based on the establishment of a goal of APPLA by the court but ONLY on the commitment of a caretaker to provide permanency of a child until discharge form foster care.

**Item 7: Placement with Siblings**

- Ask reviewers to describe the placement arrangements of siblings placed separately. If Question B is answered yes, what were the reasons for separate placement? If a valid reason existed, was the separation re-assessed by the agency over time during the PUR?
- Ensure that only siblings as defined in the instructions are included in the item assessment. Issues related to preserving connections between children who grew up in the same household but are not related biologically or through adoption and/or marriage should be addressed in Item 9.

**Item 8: Visiting with Parents and Siblings in Foster Care**

- Ensure that case participants selected, as mother and father is accurate based on instructions and case circumstances.
- If visitation frequency for A, B, and E are anything less than “more than once per week”, and the question is answered yes, discuss with reviewers how the frequency was sufficient for the child and whether efforts for more frequent visits were made.
- Ask reviewers to describe the visitation arrangement (location, length, supervision, etc.) when discussing their responses to Questions C, D, and F.

**Item 9: Preserving Connections**

- Ensure the item was not rated on connections the child formed while in foster care. The focus is on maintaining connections to his or her neighborhood, community, and faith the child had at the time he or she entered care.
- If prior to removal, the child had contact and a relationship with biological parents who are not the caregivers the child was removed from or is being returned to, ask whether those relationships should be preserved and were addressed in this item.
- A noncustodial parent with whom a child had an existing relationship but was not removed from and will not be returned to would be considered in this item if that
relationship should be preserved.

- Ask the reviewers to describe the child's connections and how they were/were not maintained. If the child was not maintained in the same school setting, ask for the reasons and how that decision was made.
  - Also, QA staff should be asking how reviewers made the determination that there was sufficient inquiry to determine whether the child is a member of a tribe.

**Item 10: Relative Placement**

- If B and/or C are answered yes, ask the reviewers to describe the quality of efforts that were made throughout the entire PUR and at critical points in the case.
- If B and/or C are answered NA, ask about the rationale to ensure it is consistent with the instructions.

**Item 11: Relationship of Child in Care with Parents**

- Ensure that case participants selected, as Mother and Father is accurate based on instructions and case circumstances. The same participants should be selected in Items 8 and 11.
- The ratings of frequency and quality of visits are not to be assessed when rating of Item 11. That information is captured in Item 8. Item 11 really looks at the efforts made to promote, support, and maintain a positive relationship between the child and the parent, not visitation.

**Item 12: Needs and Services of Child, Parents, and Foster Parents**

- Ensure that the ratings are based on initial assessments (if applicable) as well as ongoing assessments (if applicable) during the entire PUR.

**Sub-Item 12A: Needs and Services of Child**

- Ask reviewers to explain what the child(ren)’s needs were during the PUR. Were all of these needs accurately assessed by the agency? Consider the circumstances of the case, age(s) of the child(ren), etc. as you discuss needs. Also, ask about how needs were assessed. Did the worker visit with the child(ren) frequently enough to allow for ongoing assessment? Did the worker ask about the child(ren)’s needs with the child(ren)’s caretakers and/or foster parents? Ensure that reviewers answered question A1 based on the adequacy of the assessment(s).
- Ask the reviewers to describe the services that the child(ren) received during the PUR. Discuss whether the services addressed all of the child(ren)’s needs.
- Ensure that assessment and services related to education, physical health, and mental health were not considered for this item.
- For foster care cases, if the target child is an adolescent, ensure that independent living services were addressed.

**Sub-Item 12B: Needs and Services of Parents**

- Ensure that the right case participants were selected as Mother and Father.
based on instructions and case circumstances. Ensure that the same participants were rated in Items 12B, 13, and 15.

If the whereabouts of a parent were unknown during the PUR and the agency did not make concerted efforts to locate them, the applicable item question for that parent should be answered No, resulting in an Area Needing Improvement rating for subitem 12B as well as Item 12. This parent should not be assessed in Items 13 and 15. Questions for that parent in those items should be answered NA. In Well-Being Outcome 1, concerns about efforts to locate a parent should only be reflected in Item 12.

- Ask reviewers to explain what the mother and father’s needs were during the PUR. Were all of these needs accurately assessed by the agency? Consider the circumstances of the case, reason for the agency’s involvement, length of time case has been open, case plan progress, etc. as you discuss the parents’ needs. Also, ask about how needs were assessed, did the worker visit with the parent frequently enough to allow for ongoing assessment? Ensure that reviewers answered Question B1 based on the adequacy of the assessment(s).
- Ensure that paramours have been appropriately assessed in this item, as applicable. Paramours typically should not be included in the definition of mother or father but instead should be considered through their relationship with the primary caregiver(s) who will be caring for the children. For example, if the biological mother is the caregiver that the child(ren) will be reunified with and her boyfriend needs services to ensure he is safe with the child(ren) because he has a lot of access to them, the agency should assess and work with him but that would be captured under mother in Item 12 because it affects the assessment of her protective capacity. If he does not comply with services, that could necessitate a change in assessment and service provision to the mother.
- For foster care cases, if biological parents did not have an established relationship with the child prior to removal, the agency should assess whether developing a relationship with biological parents would be in the child’s best interests and determine whether anything should be done to support that goal. Services in support of such needs (e.g., providing for visits, phone contact, arranging for therapy) should also be captured in this item.
- Ask the reviewers to describe the services that the mother and the father received during the PUR. Discuss whether and how these services addressed all his or her needs and whether the services enhanced the parents’ ability to provide appropriate care/supervision of their child(ren) and ensure their safety and well-being. Were there any barriers to accessing services? Were services matched to the parent’s needs? Were they culturally appropriate?

Sub-Item 12C: Needs and Services of Foster Parents
- If there are multiple foster parents during the PUR, ensure that reviewers included all of them in the assessment of the item.
- In some cases, foster parents may be a potential permanent placement for the child and if so, their needs related to permanency achievement should be assessed in this item.
• Ask reviewers to describe how the foster parents' needs were assessed. Were there any concerns about their ability to care for the child that were not assessed and addressed? (Refer to Item 4 to assess the child’s stability in the placement)
• Ask reviewers to describe any services that the foster parents received during the PUR. Did services meet the identified needs?

**Item 13: Child and Family Involvement in Case Planning**

- If reviewers answered Yes to A, B, or C; ask them to describe how the agency actively involved each person in case planning.
- The Reviewer Brief contains guidance on what constitutes active involvement in case planning in the instructions for **Item 13**. Attendance at a MDT does not automatically demonstrate that someone was actively involved in case planning.

**Item 14: Caseworker Visits with Child**

- In situations in which secondary worker visits are accepted in addition to primary worker visits, the frequency and quality of BOTH types of visits should be considered in the assessment.
- If visitation frequency is less than once per month, Question A should be answered No unless reviewers have substantial justification for answering Yes. In such cases, the justification must be clearly documented in the rationale to support a strength rating.
- Discuss with reviewers how visitation frequency met the needs of the child in ensuring safety, permanency, and well-being.
- If Question B is answered yes, ask reviewers to describe the quality of the visits (location, length, etc.). Ensure that the child(ren) was/were visited alone for at least part of each visit and that conversations focused on the child(ren)’s needs, services, and case goals.
- For FC cases, if the child is nonverbal, ensure that reviewers visited the child in the foster home, assessed the child's living arrangements, and assessed the child’s interactions with caregivers when determining the quality of visitation.
- A general service provider does not always meet the definition of another responsible party.

**Item 15: Caseworker Visits with Parents**

- In situations in which secondary worker visits are accepted in addition to primary worker visits, the frequency and quality of BOTH types of visits should be considered in the assessment.
- If visit frequency is less than once per month, Questions A1 and B1 should be answered No unless reviewers have substantial justification for answering Yes. In such cases, the justification must be clearly documented in the rationale to support a strength rating.
- Discuss with reviewers how visitation frequency did or did not support achievement of case goals and effectively address the child's safety, permanency, and well-being.
- If Question C and/or D are yes, ask reviewers to describe the quality of the visits (location, length, content, etc.).
Items 16: Educational Needs of the Child
- If there were “services needed but not provided” in the table but Question B is answered Yes, discuss what concerted efforts were made to advocate for services.

Item 17: Physical Health of the Child
- If there were “services needed but not provided” in the table but Question B is answered Yes, discuss the circumstances with reviewers to ensure item instructions were followed.
- If Question B1 is answered Yes or No, discuss with reviewers which medication was prescribed and how it was monitored. Review any state protocols for medication monitoring to ensure reviewers appropriately considered compliance with any protocols in place.

Item 18: Mental/Behavioral Health of the Child
- If there were “services needed but not provided” in the table but Question B is answered Yes, discuss the circumstances with reviewers to ensure item instructions were followed.
- If Question B is answered Yes or No, discuss with reviewers which medication was prescribed and how it was monitored. Review any state protocols for medication monitoring to ensure reviewers appropriately considered compliance with any protocols in place.

CROSS-ITEM CONSISTENCY ISSUES

Items 2 and 3
- If Item 2 indicates there were safety concerns, Item 3C or 3D1 may not be N/A.

Items 2, 3, and 12B
- If a paramour has contact a child and is considered for Items 2 and 3, his or her needs and services must be considered with the appropriate parent in Item 12B.

Items 2 and 12
- Items 2 and 12 can be related in certain cases. Item 2 captures safety-related services; Item 12 is much broader, capturing services offered to the families that were not safety related. If Item 2A is rated as an ANI, then QA staff should check Item 12 for consistency.

Items 3 and 14, 15
- If Items 14 and 15 are ANI, Item 3 is likely to be ANI also.

Items 4 and 10
- Items 4 and 10 can be related in certain cases. If the current placement type is indicated as a relative foster home, then Question 10 A1 should be marked “Yes”. If the current placement type is not indicated as a relative foster home,
then 10 A1 should be marked “No”.

Items 4 and 12

- Items 4 and 12C can be related. If the placement was not stable, 12C should not be N/A.

Items 12, 13, and 15

- In Item 12B, if a parent does not have an existing relationship with the target child in a foster care case, consider whether locating/developing a relationship would be in the best interest of a child. If there were no concerted efforts to locate an absent parent, Item 12B is ANI and Items 13 and 15 N/A.
- The same “parent” is selected for Items 12B, 13, and 15 - but may be different from the “parent” considered for Items 8 and 11.

Items 16, 17, and 18 and Face Sheet

- If the FACE SHEET indicates the case was opened for an issue related to the educational/physical/mental health of the child, the respected Items 16, 17, and 18 must be rated.

Items 8 and 11

- The same “parent” with whom a child has a “meaningful connection” is considered for Items 8 and 11.

Items 12 A2 and 12 B2

- If the assessment process indicates that no services were needed, then the questions for 12 A2 and/or 12 B2 should be rated as N/A.

Items 12, 13, and 15

- If a parent’s whereabouts are unknown during the PUR and agency has not made reasonable efforts to locate him or her, 12 B is an ANI and 13 and 15 are N/A.

Items 13 and 14 and 13 and 15

- Reviewers sometimes rated a case as a strength for Item 13 (involvement in case planning) but then the frequency and/or quality of visits between the caseworker and child (Item 14) and/or caseworker and the parent (Item 15) was rated as an ANI. The reverse was also true. While it is possible for these items to be rated differently, more often than not, these items tend to be rated the same since it is often difficult (although not impossible) to have meaningful involvement in case planning when there is a lack of frequency and/or quality of visits and vice versa.