

DCYF Standard Operating Procedure

2850.2 QA SPECIFIC CASE REVIEW MEETINGS

Policy Directive: **22-38**

Effective Date: August 2022

Implements Policy: 2850

Approved:

Joseph E. Ribsam, Jr., DCYF Director

This SOP defines the procedures for Quality Assurance Specific Case Review meetings.

Procedure

The following information is to support the implementation of the above referenced policy. This document shall not preclude staff from using their professional judgement based on individual circumstances, consistent with the requirements of the policy.

- I. Case information received in advance of a Quality Assurance (QA) Specific Case Review meeting is reviewed by the identified facilitator to confirm the content includes:
 - A. The case file in full, or excerpts identified as pertinent by the QA Specific Case Review prep team; and
 - B. Copies of any pertinent reference materials, including laws, policies, or Administrative Rules.
- II. Administrative support staff ensure all meeting participants have sufficient access to materials needed, and provide the coversheet identifying the appropriate documents as part of the QA Specific Case Review.
- III. The Supervisor and the CPSW/JPPO, or other DCYF-involved staff prepare to present data obtained during the Division's involvement, including:
 - A. A chronology of important dates;
 - B. Service information; and
 - C. Decision-making points.
- IV. The Clinical Services Specialist (or designee):
 - A. Contacts the District Office (DO) to speak with all meeting attendees in preparation of and follow-up to the meeting;
 - B. Outlines the purpose of the meeting and sets the tone for psychological safety; and

- C. Provides support to staff prior to and following the meeting, as needed and requested.
- V. The meeting facilitator provides an overview of the process and reviews ground rules.
- VI. The QA Specific Case Review team may include:
 - A. The Director(or designee);
 - B. The Bureau Chief of Field Services (or designee);
 - C. The Bureau Chief (or designee) of another directly involved DCYF bureau;
 - D. The Administrator for the Bureau of Professional and Strategic Development (BPSD) or designee;
 - E. The Administrator for the Bureau of Evaluation, Analytics and Reporting (BEAR) or designee;
 - F. The Director of Legal Services for DCYF, DCYF Chief of Legal, Regulatory and Legislative Affairs, DCYF Counsel from the Attorney General's Office, or designee;
 - G. Clinical Services or Safety Culture Specialist, or designee;
 - H. The Field Administrator of the involved DO;
 - I. An Administrator from another directly-involved DCYF bureau;
 - J. The District Office Supervisor for the involved DO;
 - K. The CPS/JJS Supervisor of the involved staff;
 - L. The CPSW/JPPO who has knowledge of the situation;
 - M. Other directly-involved DCYF staff;
 - N. The involved DO staff attorney;
 - O. The involved DCYF Nurse Consultant;
 - P. The DHHS Associate Commissioner of Human Services and Behavioral Health (or Deputy Commissioner);
 - Q. The Office of the Child Advocate (OCA);
 - R. Any Director-approved third party entity with an active confidentiality agreement, whose participation is needed to fulfill technical assistance or another obligation to DCYF; and

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- S. Other DCYF or Department staff, at the request of the DHHS Office of the Commissioner, DCYF Director, or a Bureau Chief who have important information or input.
- VII. During the QA Specific Case Review meeting, participants discuss:
 - A. Family composition;
 - B. Strengths and supports of family members;
 - C. Needs and risk factors for family members;
 - D. Timeline of DCYF involvement;
 - E. Strengths and areas in need of improvement within DCYF's involvement;
 - F. Systems influencers surrounding areas in need of improvement;
 - G. Systems learning outcomes; and
 - H. Other areas as identified by the QA Specific Case Review prep team.
- VIII. During the QA Specific Case Review meeting participants are given the opportunity to:
 - A. Ask clarifying questions;
 - B. Consider the exploratory questions on the Safe Systems Improvement Tool (SSIT), as they pertain to the case;
 - C. Identify key observations including:
 - 1. Strengths of DCYF's involvement and any systemic questions raised by the review; and
 - 2. Systems learning opportunities with the CPSW/JPPO, Supervisors, other DCYF staff, or Administrators; and
 - D. Allow the CPSW/JPPO, other DCYF staff, and the Supervisor an opportunity to discuss the process of the QA Specific Case Review meeting prior to the meeting closure.
- IX. Every fourth month, the QA Specific Case Review team conducts a systems mapping meeting to make systems learning opportunities.

Glossary and Document Specific Definitions

A-B C-D E-F G-I J-L M-N O-O R-S T-V W-Z

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Document Change Log			
PD	Modification Made	Approved	Date

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