



## **SITE QUALITY ASSURANCE PLAN GUIDELINES**

**Internal quality assurance is the responsibility of the Program Manager and Supervisors within each home visiting program. Quality assurance is an on-going part of service delivery and should be seen as such by all staff. Specifically, staff need to know that a variety of quality assurance measures are routine and can be expected to occur on a regular basis.**

When setting up and implementing a quality assurance system, it is important that it be done according to a system in which the activities (home visit observations, file reviews, observation of supervision, etc.) occur randomly, not in response to a perceived difficulty.

An effective quality assurance system becomes the basis and the occasion for providing staff with positive as well as corrective feedback. This mix of feedback should be heavily weighted toward the positive whenever possible. This approach will help to keep staff morale high, make future quality assurance efforts easier to carry out, and will reinforce and encourage desirable behaviors that are already occurring.

## OUTREACH and SCREENING

**Goal: to identify and screen all prenatal and new parents in the target area prior to the child's 3<sup>rd</sup> month with 80% screened/assessed within 2 weeks of birth.**

Purpose of QA – TO ENSURE THAT:

- Screening is offered universally in target area
- Program reviews current birth data for the target area
- Agreements are in place with screening/referral sites including non-traditional locations which serve hard to reach families (i.e. Those not receiving prenatal care)
- Screening and referral sites are familiar with the eligibility requirements for Healthy Families and understand the process for completing the screens and making referrals
- Programs are using positive outreach efforts to build trust and engage families including mailings, phone calls and visits for up to three months
- Outreach efforts represent culture and language of community served
- Community organizations are identifying families and referring in a timely manner and Home Visiting Program maintains on-going relationship with screen/referral sites

HOW TO VERIFY:

- Program manager should review most current birth data on an annual basis to ensure that it is current and accurate
- Program Manager should review data on a quarterly basis to determine referral sources, the percentage of births/prenatal families screened as compared to birth data, and the timing of the screen (i.e. Pre vs postnatal, prior to 3 months)
- FAW supervisor should review data system for pre-intake outreach activities
- Program Manager should review outreach materials and community agreements to determine if all appropriate linkages are in place
- Program Manager should ensure that referral site staff receive training on Healthy Families when there is staff turnover
- Program Manager should survey staff and supervisors to determine level of on-going communication with screening and referral sites
- Program manager assures that outreach efforts are culturally sensitive

## DOCUMENTATION OF QA REVIEW (FORMS/CONTENT):

- Credentialing peer review
- Data systems
- OCFS site visits
- Draft Mou's
- Documentation of meetings with referral sites

## **ASSESSMENT**

**Goal: to determine if Home Visiting services are appropriate for the family, to engage those families and to ensure that other families receive appropriate service referrals**

Purpose of QA – TO ENSURE THAT:

- At least 80% of the families with a positive screen in the target area are assessed prenatally or within 2 weeks of birth.
- 100% of positive screens are initially contacted or have documented attempted contacts within 14 days of screen
- Outreach is provided for those families who refuse assessment or who refuse services after a positive assessment
- Families not receiving home visiting services are provided information and referral
- The Family stress checklist is completed providing sufficient information to determine eligibility or service referral needs
- The Family stress checklist information is provided to the FSW prior to the first home visit
- The Family stress checklist is accurately scored

## HOW TO VERIFY:

- Program Manager and Supervisors should review screening and assessment data
- Supervisors shadow each FAW at least 4 times per year for the first year of employment and then annually thereafter to assess how they engage families, how they gather and document information and how they present the program (strength based, responds sensitively, questions tactfully, represents the services accurately)
- Supervisor to review all assessments to ensure they are scored accurately and thoroughly prior to assignment to FSW
- Program manager to review data to ensure cases are assigned within 1 week and follow-up occurred within 2 weeks in order to determine percentage of

positive assessments accepting service, and to assess refusal rates and reasons

- Supervisor to survey families that refused service to assess quality of process
- Program has service referrals in place and training has occurred in order to make appropriate referrals
- Program Manager and Supervisors should develop plan for maintaining ongoing contact with referral sources and to ensure that new staff at those sites are trained in the screening and referral process.

#### DOCUMENTATION OF QUALITY ASSURANCE REVIEW (FORM AND CONTENT):

See Indiana p 123

See Texas p 97

See Arizona

FAW contact log

Data reports

### **SUPERVISION**

**Goal: Family Assessment Workers and Family Support Workers receive sufficient support and guidance so that children and families achieve the goals of the Healthy Families New York program as established by the OCFS and Healthy Families America for credentialed programs.**

#### PURPOSE OF QA – TO ENSURE THAT:

- Supervisors are providing support in a strength based manner
- Supervisors accompany the FSW on a home visit to introduce themselves within the first 6 months of service
- Supervisors ensure that staff understand the goals of the Healthy Families New York program and remain focused on these goals in their work with families
- Supervisors are providing guidance in an organized regularly scheduled manner according to the requirements of HFA and the HFNY program
- Supervisory sessions should include coaching, nurturing, review of work with families related to PCI, child health and development, prenatal care, IFSP and goal setting, other family members, boundary setting, praising, dealing with family issues and crises, cultural issues, retention, personal and professional growth, transference, missed opportunities, identifying barriers to achieving goals, safety (worker/family), review safety of all family members, relationship building and communication skills. FAW supervisory sessions should include efficiency in scheduling Family stress checklist after receiving screen, review of the family situation, scoring and documentation of the Family stress checklist, engagement of participants, efficiency in completing the Family

stress checklist and assigning FSW, clarity of information given to FSW and supervisor.

- Supervisor assigns positive assessment to FSW within 5 business days of assessment
- Supervisors manage FSW caseloads in accordance with HFNY guidelines
- Supervisors ensure that the HFA level change criteria are consistently applied so that families receive appropriate levels of service
- Supervisors provide positive and corrective feedback to FSW's and FAW's in a timely manner

#### HOW TO VERIFY:

- Program Manager should review supervisor notes and schedule to ensure that each FSW/FAW receives 2 hours of protected supervision per week.
- Program Manager or QA committee should review at least 1 binder per worker every 6 months
- Program Manager or peer supervisor should observe supervision of each FSW and FAW over period of 1 year assuring that there is at least 1 observation for each supervisor per quarter. When possible new supervisors should be observed at a higher frequency.
- Supervisors should conduct at least one scheduled home visit observation per worker per quarter with more frequent observations for new hires and have other visits planned with FSW as needed. (ie. For trouble shooting visits, modeling etc.)
- Program Manager should provide supervision of supervisor either individually or as team weekly focusing on supporting FAWs and FSWs in their work with families, performance appraisals, QA and data reports
- Program manager should review all participant satisfaction surveys that are conducted by the supervisor. Surveys should be done on 2 families per worker per quarter. (Personal contact is encouraged)
- Program manager and/or supervisors should conduct exit interview with families within 2 weeks of ending the service.
- Program managers will have in place feedback procedures to address problems identified in the participant satisfaction surveys and exit interviews, or other problems identified by participants during services.

#### DOCUMENTATION OF QA REVIEW (FORMS AND CONTENT)

- Supervisor notes
- Binder review form
- Supervisor and FSW/FAW Observation Form/ written summary of observation
- Participant Satisfaction Surveys
- Compilation of all participant surveys on an annual basis to review trends
- Written summaries of exit interviews signed by Program Manager

## **STAFF DEVELOPMENT**

**Goal: All levels of staff receive orientation, applicable and quality training, and technical assistance in order to provide quality services to families and feel positive professional growth.**

Purpose of QA: TO ENSURE THAT

- All staff attends core training conducted by an HFA certified trainer, within six months of employment in a HFNY program. Supervisors and program managers will attend an additional two day supervisory training,
- All staff receive the required wraparound basic training, planned by each site or by a collaboration of sites on topics listed in the Policy Manual and suggested in the HFA training requirements,
- All new staff attend training on evaluation and data forms,
- All new FSW's and FAW's shadow peers and counterparts during orientation and prior to core training,
- All staff participate in advanced training of at least 35 hours or more annually,
- Training topics are applicable to staff's job responsibilities and reflect areas of interest of the staff,
- Staff incorporates new skills acquired in training into their work.
- All staff are encourage to acquire new knowledge through formal training and education,
- Professional development goals are developed and discussed in performance appraisals,

HOW TO VERIFY:

- Staff members immediate supervisor will be responsible for keeping a basic training record that includes dates attended, topics, and trainers in each staff member's personnel file. This record should be checked every six months to assure staff member continues to receive current and updated training on a regularly scheduled basis,
- Staff are surveyed twice annually by program managers to receive a consensus of staff training needs and wants,

- Supervisors are surveyed twice annually by Program Managers to gain knowledge of specific training needs of individual staff, both FSW/FAW and supervisors,
- Training is evaluated based on staff training form,
- Shadowing of home visits, assessments, and supervisory sessions will evaluate knowledge gained in training and staff training needs,
- Staff is given information on relevant training and college courses available in the locality of the program and this information is documented in the staff member's performance evaluation.

#### DOCUMENTATION OF QUALITY ASSURANCE REVIEW (FORM AND CONTENT):

- Performance evaluations
- Certificates of training

### HOME VISITING

**Goal: To improve family functioning through trust-building, enhancing problem-solving and planning skills, and supporting parents; to enhance positive Parent-Child Interaction, and promote healthy child growth and development.**

#### Purpose of QA – To ensure that:

- Services are offered and provided on a voluntary basis,
- Contact with the family is made or attempted within 1 week of case assignment to the FSW,
- Home visits are organized around program goals,
- Creative outreach is done with families in a sensitive nature to engage or re-engage families,
- Services are culturally responsive,
- Necessary consents are received,
- FSW's use a curriculum to focus each visit,
- Services are strength-based,
- Home visits are scheduled and take place at the convenience of the family,
- Home visits and record is consistent with level of service,
- Weekly visits are conducted in the first 6 months after the birth of the target child,
- Families needs are assessed including family safety issues and they are referred to other services when additional supports are needed,

- ASQ's and PSI's are administered at required intervals,
- Information from ASQ's and PSI's is integrated into content of follow-up visits,
- Home Visitors provide specific compliments related to purpose of intervention, encouragement, and praise statements to parents on every visit,
- Services are family centered,
- Reports to Child Protective Services are made when necessary,
- Home visitors plan with supervisors for appropriate changes in frequency of home visits,
- Home visitors plan content of home visits including IFSP's with families,
- Home Visitors observe healthy professional boundaries with families,
- Individual Family Support Plans (IFSP's) are completed, regularly discussed and reviewed with families, and revised according to HFA and OCFS guidelines
- IFSP's reflect family goals,

### HOW TO VERIFY

- Supervisors regularly review progress notes as a part of overall file reviews which are conducted according to a system,
- Supervisors regularly review home visit logs as part of overall file reviews, which are conducted according to a system,
- Supervisors conduct regular, random home visit observations, using a home visit observation form and follow up with a careful debriefing of the FSW,
- Supervisors conduct regular, random participant satisfaction surveys in person or over the phone,
- Supervisors attempt to conduct participant satisfaction surveys whenever a family completes the program or elects to have the service terminated,
- Program Manager and/or supervisors review data reports on a regular basis,
- Program Managers observes individual and group supervision on a regular basis,
- Program manager reviews supervisor notes,
- Program manager reviews retention rates.

### DOCUMENTATION OF QA REVIEW

- Credentialing peer review
- Home Visit Observation form
- Participant satisfaction survey
- File Review form
- Content of supervision form
- Participant exit interview
- Progress notes
- Observation of supervision
- Supervisor notes
- Data reports

- Home visit logs
- Curriculum checklist

## **CULTURAL COMPETENCE**

**Goal: Services to families are culturally competent. Staff will understand, acknowledge, and respect cultural differences among participants.**

Purpose of QA - TO ENSURE THAT:

- The program is aware and sensitive to the cultural, racial, and linguistic characteristics and sexual orientation of both staff and participants
- The program employs staff that share the same cultural, ethnic, and linguistic background as resides in the target area
- The program promotes culturally competent practice among program staff and encourages all workers to gain cultural competence skills
- The program materials for the target population and the general public are participant centered
- The program provides staff training regularly regarding the unique characteristics of populations being served
- Ethnic, cultural, and linguistic factors are taken into account in assigning workers to participants and in overseeing home visitor/participant interactions
- The program regularly evaluates whether its services accommodates cultural differences and utilizes cultural and family strengths and resources
- The physical workplace is accessible and welcoming to a variety of cultural groups

### HOW TO VERIFY

- The program has a written plan for providing culturally competent services. The plan is reviewed on a regular basis. The plan includes the following:
  - A description of the cultural, racial/ethnic, and linguistic characteristics of all groups within the service population
  - Appropriate staff, volunteers, and community partners to meet the cultural and linguistic needs of all population groups within the target population
  - Program materials are reflective of diversity of population, materials are available in major languages spoken by the target population, and materials reflect literacy level of participants

- Scheduled training on cultural topics represented in the target population for all direct service staff
- A description of how the program ensures it takes into account the ethnic, cultural, and linguistic issues of participants and home visitors during initial assignment and ongoing
- Feedback from participants
- An annual review of the target area to assess demographics
- Programs responds to any changes in the target area demographics
- A review by the program manager that addresses all components of the service delivery system, which includes a criteria for its review
- Specific questions included on interviewing protocol that indicate that the potential FSW would provide service in a cultural sensitive manner
- All QA materials address cultural competence

DOCUMENTATION OF THE QA REVIEW (FORM/CONTENT):

- Review of engagement and retention
- Review of census statistics and other local data sources
- Data management system
- Credentialing peer review
- Agreements with other, appropriate community entities to provide culturally sensitive services and training to staff
- Breakdown of demographics of staff in the program
- Breakdown of demographics of target population
- Copies of program materials for participants, and general public
- Documentation of training offered to staff and attendance logs
- Copy of service review
- Documentation of participant input regarding culturally appropriate services (i.e., advisory board, participant surveys)
- Written minutes of plan review