

Improving Timely Health Care for Children and Youth in Foster Care: How to Build a Family of Measures

Measuring progress is essential to successful quality improvement (QI) initiatives. There are three types of measures in quality improvement QI: outcome measures, process measures, and balancing measures. Taken together, these three measure types make up a family of measures. Below are suggestions for how to build a family of measures for a quality improvement project to improve timely access to comprehensive exams for children entering foster care.

- Review the measures in the tables below for outcome, process, and balancing measures that may be used in your QI project. (Note that the time frames used in the example measures are illustrative and do not represent recommended or required timeliness standards.) Adapt the measures as needed for your project. You may also want to use measures you are currently collecting or develop your own measures.
- An ideal family of measures includes no more than seven measures. Consider starting with one measure in each category and adding additional measures over time.
- **Outcome measures**: Outcome measures capture what you are trying to accomplish and how you will know you've achieved improvement. *Recommendation: 1-2 measures.*
- **Process measures**: Process measures capture the incremental changes you are testing that will collectively improve your outcome measure(s). Your process measures should relate to your outcome and be calculated frequently (for example, monthly). *Recommendation: 3-4 measures*.
- **Balancing measures**: Balancing measures capture other consequences, both intended and unintended, that might result as part of your project. *Recommendation: 1 measure*.
- A Note About Claims Lag: Claims lag can be a concern when using data for improvement. It is acceptable to look at your quality measures before all the claims have been submitted; 1-2 months runout may be sufficient. For QI projects, you are looking for signs of progress, not perfection. You may test the impact of shorter claims run out by calculating the measure with 1-month runout, 2 months, 3 months, etc. This will help you better understand the impact of claims lag on your QI project measures. Note that measures for accountability, such as those needed to assess contract performance or for incentive payments, require more analytic rigor and longer claims run out.

Improving Timely Health Care for Children and Youth in Foster Care: Measurement Strategy

Outcome Measure Examples (Recommendation: 1-2 measures)		
Measure Name	Brief Measure Specifications	Data Source
Comprehensive health assessments: Percent of all children entering child welfare custody who receive a comprehensive assessment within 30 days (or other state specific guideline) of entering child welfare custody	Numerator: All children entering child welfare custody who receive a comprehensive assessment within 30 days (or other state guideline) of entering child welfare custody	Administrative data, caregiver report
	Denominator: All children entering child welfare custody	
Oral health assessments: Percent of all children entering child welfare custody who receive an oral health assessment within 90 days (or other state specific guideline) of entering child welfare custody	Numerator: All children entering child welfare custody who receive an oral health assessment within 90 days (or other state guideline) of entering child welfare custody	
	Denominator: All children entering child welfare custody	

Process Measure Examples (Recommendation: 3-4 measures)		
Measure Name	Brief Measure Specifications	Data Source
Information entry in child welfare management system: Percent of all children entering child welfare custody whose information is entered into the child welfare management system within 24 hours (or other state specific guideline) of entering child welfare custody	Numerator: All children entering child welfare custody whose information is entered into the child welfare management system within 24 hours (or other state guideline) of entering child welfare custody	Administrative data
	Denominator: All children entering child welfare custody	
Medicaid enrollment: Percent of all children entering child welfare custody who are enrolled in Medicaid within 3 days of entering child welfare custody (or other state specific guideline).		Administrative data
	Denominator: All children entering child welfare custody	
Medicaid managed care enrollment (for states who enroll foster children in managed care): Percent of all children entering child welfare custody who are enrolled in Medicaid managed care with 7 days of entering child welfare custody (or other state specific guideline).	Numerator: All children entering child welfare custody who are enrolled in Medicaid managed care within 7 days of entering child welfare custody (or other state guideline). Denominator: All children entering child welfare custody	Administrative data
Completed Initial health assessments: Percent of all children entering child welfare custody who receive an initial health screening/assessment within 72 hours (or other state specific guideline) of entering child welfare custody	Numerator: All children entering child welfare custody who receive an initial health screening/assessment within 72 hours (or other state guideline) of entering child welfare custody	Administrative data, caregiver report
	Denominator: All children entering child welfare custody	

Measure Name	Brief Measure Specifications	Data Source
Outreach to caregiver to schedule a comprehensive assessment: Percent of all children entering child welfare custody whose caregiver is contacted within 2 days of entering child welfare custody (or other state specific guideline) to schedule the comprehensive assessment	Numerator: All children entering child welfare custody whose caregiver is contacted within 2 days of entering child welfare custody (or other state guideline) to schedule the comprehensive assessment	Administrative data, caregiver report
	Denominator: All children entering child welfare custody	
Provider notified to schedule comprehensive health assessment: Percent of all children entering child welfare custody whose provider is notified to schedule comprehensive health assessment within 7 days (or other state specific guideline) of child entering child welfare custody	Numerator: All children entering child welfare custody whose provider is notified to schedule the comprehensive health assessment within 7 days (or other state guideline) of entering child welfare custody Denominator: All children entering child welfare custody	Administrative data, provider report
Appointment scheduled for comprehensive health assessments: Average number of days after the child enters child welfare custody until the comprehensive health assessment appointment is scheduled	Numerator: For all children entering child welfare custody, the average number of days between the date the child enters child welfare custody and the date comprehensive health assessment appointment is scheduled with the caregiver	Administrative data, caregiver report
Appointment scheduled for oral health assessments: Percent of all children entering child welfare custody who have an appointment scheduled for the oral health assessment within 30 days (or other state specific guideline) of entering child welfare custody	Numerator: All children entering child welfare custody who have an appointment scheduled for the oral health assessment within 30 days (or other state guideline) of entering child welfare custody Denominator: All children entering child welfare custody	Administrative data, caregiver report
Reminder calls: Percent of all children entering child welfare custody whose caregivers are contacted with a reminder call within 2 days of the child's scheduled assessment	Numerator: All children entering child welfare custody whose caregivers are contacted with a reminder call within 2 days of the child's scheduled assessment Denominator: All children entering child welfare custody	Administrative data, caregiver report
Follow up care scheduled: Percent of all children entering child welfare custody who are referred to follow up care and have a visit scheduled for that follow up care	Numerator: All children entering child welfare custody who are referred to follow up care and have a visit for that follow up care scheduled within 15 days of referral (or other state guideline)	Administrative data, caregiver report
	Denominator: All children entering child welfare custody with a completed comprehensive health assessment and were referred for additional follow-up care	

Process Measure Examples (Recommendation: 3-4 measures)		
Measure Name	Brief Measure Specifications	Data Source
Follow up care completed: Percent of all children entering child welfare custody who are referred to follow up care and complete a visit for that follow up care	 Numerator: All children entering child welfare custody who are referred to follow up care and complete a visit for that follow up care within 30 days of referral (or other state guideline) Denominator: All children entering child welfare custody with a completed comprehensive health assessment and were referred for additional follow-up care 	Administrative data, caregiver report
Unmet needs: Percent of all children entering child welfare custody whose caregivers identify an unmet need for the child within 60 days of placement (or other state guideline)	Numerator: All children entering child welfare custody whose caregivers identify an unmet need for the child within 60 days of placement (or other state guideline) Denominator: All children entering child welfare custody	Caregiver report

Balancing Measure Examples (Recommendation: 1 measure)		
Measure Name	Brief Measure Specifications	Data Source
Follow up care scheduled: Percent of all children entering child welfare custody who are referred to follow up care and have a visit scheduled for that follow up care		Comprehensive visits may identify the need for additional preventive and/or specialty care. Scheduling follow up care begins the process of delivering needed health services.
	Denominator: All children entering child welfare custody with a completed comprehensive health assessment and were referred for additional follow-up care	Administrative data, caregiver report
Follow up care completed: Percent of all children entering child welfare custody who are referred to follow up care and complete a visit for that follow up care	are referred to follow up care and complete a visit for that	Comprehensive visits may identify the need for additional preventive and/or specialty care. Completed visits for follow up care indicate the delivery of needed health services.
	Denominator: All children entering child welfare custody with a completed comprehensive health assessment and were referred for additional follow-up care	Administrative data, caregiver report

Balancing Measure Examples (Recommendation: 1 measure)		
Measure Name	Brief Measure Specifications	Data Source
Unmet needs: Percent of all children entering child welfare custody whose caregivers identify an unmet need for the child within 60 days of placement (or other state guideline)	Numerator: All children entering child welfare custody whose caregivers identify an unmet need for the child within 60 days of placement (or other state guideline) Denominator: All children entering child welfare custody	Identifying unmet needs may indicate that additional health services are needed to fill gaps in care. Caregiver report
Emergency Department (ED) visits: Percent of all children with an ED visit between one week and 60 days after placement (or other time period)	Numerator: All children with an ED visit between one week and 60 days after placement (or other time period) Denominator: All children entering child welfare custody	This measure could be calculated annually or set up to measure ED visits monthly to provide feedback on the use of the ED in leu timely comprehensive visits.
		Administrative data, caregiver report

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