

MEMORANDUM

To: Brandi Stocksdale, BCDSS Director  
From: Rhonda Lipkin and Lisa Mathias  
Date: October 1, 2025  
Re: Current QSR Findings and Recommendations

Summary of Findings and Recommendations

1. The “BRDs” proposed by BCDSS should not be used to substitute for QSR to measure compliance with L.J. Measures because they are not sufficient for measurement purposes and create additional unnecessary workload requirements.
2. BCDSS should continue to use QSR to measure compliance with Measures 7, 8, **15, 16, 25/29b, 33, 40, 41, 42, 44, 71/72b, 85/88b, 87, 102/105 and 103/106, 109/111**.<sup>1</sup>
3. BCDSS should discontinue use of QSR to measure compliance with Measures 14, 86, 97, **101/104, 107/110, and 108.**
4. Changes should be made to the QSR protocol that would make application of the protocol more efficient without affecting the integrity of the model. More details are in section on pp. 7-8, below.
5. Eliminate Tables 2, 4, and 5 from the OHP QSR case review instrument.
6. Expand the ratings acceptable for determining compliance with the relevant L.J. measures from 5 (good) and 6 (optimal) to include “4” (fair/acceptable).

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<sup>1</sup> Throughout this memo L.J. Exit Standards are set out in bold type. Internal Success Measures are not in bold type.

### Background

In 2014, BCDSS hired and trained selected BCDSS caseworkers and supervisors in the QSR methodology and began to use QSR with randomly selected out-of-home (OHP) cases. In 2015-2016, the agency finalized its OHP QSR protocol and case review tool. The protocol is the handbook which guides QSR reviewers on rating (scale of 1 - 6) a particular child's case on individual QSR status and practice indicators. BCDSS decided, with the agreement of the IVA and Plaintiffs' counsel, on those L.J. measures that would utilize QSR to measure compliance. The measures chosen were those that have qualitative components that cannot be measured through quantitative means<sup>2</sup> or for which it might otherwise have been difficult to find data.<sup>3</sup> By the request of the BCDSS director at the time, it was agreed that a rating of either 5 (good) or 6 (optimal) on the applicable indicators would be necessary for a particular case to be considered compliant.

In 2021, as part of a comprehensive revision to the "measure instructions" for each L.J. measure, adjustments were made which resulted in the current application of indicators to LJ measures for compliance purposes:

<b>L.J. Measure (s)</b>	<b>QSR indicators and case review tool tables</b>
7	Table 1
<b>16, 8, 41</b>	Practice Indicators 6 and 7
14	Table 2
<b>15, 40</b>	Practice Indicator 5

<sup>2</sup> For example, Measure 16, whether a family received services listed in the child's case plan

<sup>3</sup> For example, Measure 107/108, whether or not a caseworker or caregiver attended a child's special education IEP.

<b>L.J. Measure (s)</b>	<b>QSR indicators and case review tool tables</b>
25/29b	Table 3, Status Indicator 11
33	Status Indicators 3A, 4
42/44	Practice Indicators 6, 7, 12C
71/72b	Practice Indicator 8
85/88b	Practice Indicator 9A
87	Practice Indicator 9B
97	Table 4
101/104, 102/105 and 103/106	Practice Indicator 10A, B, and C
107/109, 110/111, 86	Practice Indicator 10D
108	Table 5

In 2023, BCDSS requested the IVA's agreement to expand the ratings which would be considered "compliant" for L.J. measurement purposes from 5 (good) and 6 (optimal) to include 4 (fair). The IVA notified BCDSS that it intended to do an in-depth review of the current QSR practice due to concerns about deviation from the QSR model and timeline rendering the process unreliable.

In February 2024, the IVA notified the parties that due to these deviations and other concerns, none of the QSR-related L.J. measures could be certified as accurate, valid and reliable.<sup>4</sup> The IVA also raised concerns about the application of the QSR Education Indicator to

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<sup>4</sup> Attachment 1 to this Memo.

the current BCDSS educational planning process. In April, a new QSR program manager was hired and is working with a QSR expert, Florence Racine, to restructure the QSR program, re-train QSR staff, and make necessary changes to the QSR protocol and case review tool.

In July 2024, at an L.J. hearing in federal court, Defendants stated that they were considering discontinuing the use of QSR for L.J. measurement purposes. This was the first time that the IVA learned this information. At that same hearing, the court ordered the parties to attempt to negotiate a new pared-down consent decree.

Subsequently, BCDSS advised the IVA that it intended to draft new Measure Instructions to substitute for the use of QSR. (Any such change would be subject to the agreement of Plaintiffs and the IVA.) At the October 2024 L.J. Forum, it was agreed that, “The QSR process as currently designed would continue to be used for LJ compliance purposes even while negotiations about a possible modified consent decree were underway.”

At the end of October 2024, BCDSS provided the IVA with a single “BRD” describing a new process to measure one of the L.J. education measures - Exit Standard **104**, the requirement of an education plan. The IVA responded that the BRD as written was unacceptable because the proposed method of measurement - reviewing the education section of the case plan in CJAMS and interviewing the caseworker - could not be sufficient as the case plan does not address all of the areas required by the MCD, in particular what services would be provided to meet any needs and who would provide those services.<sup>5</sup> BCDSS did not respond.

In May 2025, BCDSS sent the IVA a full set of BRDs it proposed to substitute for all of the current QSR measures. Because the parties were entering court-ordered mediation of a new Modified Consent Decree, the IVA advised BCDSS that a discussion of the substance of the

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<sup>5</sup> Additional details regarding this decision can be found in the email to Steve Cohen on December 10, 2025.

BRDs was not the best use of time that would be better spent retraining staff and working on any necessary revisions to the protocol. At the August 19, 2025, L.J. communications meeting, Director Stocksdale stated that she expected the new protocol to be finalized by January 2026, and that her goal was to have the new protocol in effect for L.J. reporting purposes by January 2026.<sup>6</sup>

#### IVA Response to BCDSS Proposed “BRDs”

The BRDs provided by BCDSS for use instead of the L.J. QSR measure instructions are insufficient to meet the requirements of the MCD for the relevant measures for the following reasons:

1. In almost every case, the BRDs rely solely on file reviews and caseworker/supervisor interviews to get the information to determine compliance. Use of file reviews, caseworker and supervisor interviews fails to take into account the input of the child, family, caregiver and others. That input is critical to determination of compliance with requirements of the measures, e.g., do case plans address family needs, were families included in case planning, did families get the services they needed. As an example, QSR expert Florence Racine says of Measure 33, “QSR is the appropriate methodology here, as it incorporates the voices of children, caregivers, and workers, and assesses both appropriateness and restrictiveness.”
2. As proposed by DSS, the BRDs would require Defendants to draw multiple samples while current use of QSR requires only one sample.
3. Some of the BRDs require a sample of children that under current circumstances it is unlikely they could identify from CJAMS. For example, Measure 14 requires “a sample

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<sup>6</sup> L.J. Communications Meeting minutes, August 19, 2025, provided to parties on September 18, 2025.

of the files of children in the custody of BCDSS during the reporting period for which the file contains an indication that a new placement was necessary during the reporting period.” However, there is no identified way to indicate in CJAMS that a child is in need of a new placement. The only way to pull this sample would be to look for children who had been re-placed but that would not capture children who needed to be re-placed but weren’t.

4. As proposed by DSS, each of the BRDs would require a separate “tool” including detailed instructions as to what is to be located in a file review.
5. As proposed by DSS, there is no process for determining the validity and reliability of the results found by individual reviewers. QSR has an “Inter-rater reliability” component for each review that is built into the QSR process prior to finalization. CFSR requires at least a second level review.

#### IVA Recommendations

Any changes to how QSR is used for L.J. compliance must have the agreement of both parties to the case. The following are the IVA’s recommendations:

1. The current QSR process should continue to be used to measure compliance with OHP measures 7, 8, **15, 16, 25/29b, 33**, 40, 41, 42/**44**, 71/**72b**, and 85/**88b**, with minimal changes needed to either the relevant protocol indicators or the case review tool.
2. QSR should continue to be used to measure compliance with L.J. measures 87 (health monitoring) and 103/**106** (education monitoring). However, instead of measuring them as part of Health and Education Practice Indicators 9B and 10C, respectively, they should be included as part of the Caseworker Visits Practice Indicator 8. Health and Education monitoring is required at each monthly caseworker visit. (BCDSS Visitation for Children

in Out of Home Placement SOP, p. 3). Therefore, an acceptable rating for the Caseworker Visitation Practice Indicator would be an acceptable rating for the L.J. Health and Education monitoring requirements.

3. QSR could continue to be used to measure compliance with L.J. Education measures 102/**105** and 109/**111** if the QSR Education Practice Indicator was revised to focus on the agency's appropriate role in acting in the "parental" role in ensuring children who are not at appropriate grade level in school receive necessary supportive services, including, if necessary, special education.
4. QSR should not be used to measure compliance with L.J. measures 14, 86, 97, 101/**104**, 107/**110**, and 108 for the reasons stated below:
  - Measure 14 requires that BCDSS search for relatives; it is incorporated into QSR as Table 2 in the case review tool. Experience with QSR over the past 9 years has shown that it is too difficult to ensure that the sample of children at the time of the review are in circumstances in which it would be appropriate to look for relatives. We also believe that the utility of the measure at this time should be reassessed given the agencies' emphasis on kinship care as the first priority for all children needing placement.
  - Measures 97 (requiring continuing special education on school change) and 108 (requiring attendance at IEPs by either caseworkers or caregivers), currently measured by Tables 4 and 5, respectively, look for events that occur only for a subset of children and only at very specific times that may not occur during the short period of time considered by QSR. Therefore, the sample for both measures has often been too small for the results to be considered reliable. In addition, for

Measure 108, attendance at an IEP is a fact that should be able to be determined solely by a CJAMS review.

- The other education-related measures (101/104, and 86/107/110) have proven unwieldy to measure using QSR. The L.J. written education plan requirement of 101/104 requires the inclusion of information that is not required in the education portion of the case plan, and there is no agency requirement for a separate education plan. Measures 86/107/110 require Defendants to make “prompt referral for special education or early intervention services when there was an indication of developmental delay or disability.” There is no way to pull a sample of children for whom, during the QSR review period, “there was an indication of developmental delay or disability.”

5. In order to simplify and clarify the QSR protocol and practice, the following changes should be made to the OHP QSR protocol:

- Eliminate current Status Indicator 2 (Safety: Behavioral Risk).
- Eliminate current subcategories for Practice Indicators 5 (Case Planning) and 6 (Plan Implementation).
- Revise Practice Indicator 8 (Caseworker Visits) to reference BCDSS caseworker visitation SOP requirements.
- Eliminate current subcategories for Practice Indicator 9 (Provision of Physical and Mental Health Care Services) and remove language focusing on monitoring of health.

- Eliminate current subcategories for Practice Indicator 10 (Provision of Educational Supports) and revise the indicator to focus solely on agency assessment of educational needs and provision of supports to meet those needs.
  - Eliminate current subcategories for Practice Indicator 11 (Family and Community Connections).
6. Eliminate QSR review tool Tables 2 (relative search), 4 (special education transitional services), and 5 (attendance at IEPs).
  7. The IVA agrees with BCDSS that the ratings acceptable for determining compliance with the relevant L.J. measures should be expanded from 5 (good) and 6 (optimal) to include “4” (fair/acceptable). This could be accomplished with limited changes to the relevant protocol indicators to ensure that the “4” rating includes all of the minimum requirements of the relevant MCD measures.

#### QSR Status

From speaking with Florence Racine, it is our understanding that the QSR practice timeline is now in line with the original QSR practice model and that QSR staff have responded well to training, including demonstrating a better understanding of how the QSR protocol should be applied to the facts in each case in order to determine the ratings. It also is our understanding that Ms. Racine continues to work with the QSR program manager on revisions to the OHP protocol.

If there is agreement to these recommendations, we are willing, time permitting, to assist in the necessary revisions of the relevant QSR Protocol Indicators.