This policy establishes the Division’s case specific Quality Assurance Program pursuant to RSA 126-A: 4, IV.

**Required Practices**

*Any deviations to the following information must be documented with Supervisory Approval.*

I. Quality Assurance (QA) Specific Case Reviews are conducted as part of a Quality Assurance Program, pursuant to RSA 126-A:4, IV(b).

   A. All departmental records of interviews, internal reviews or investigations, reports, statements, minutes, and other departmental documentation are confidential and privileged.

   B. All information including conversations associated to case specific reviews will be protected from indirect or direct discovery, subpoena, or admission into evidence in any judicial or administrative proceeding, except as provided in subparagraphs IV (c) or (d) of RSA 126-A:4.

II. QA Specific Case Reviews are conducted with a safety science approach.

III. Cases are considered for QA-specific review when an incident occurs involving a child who:

   A. Is involved with DCYF through a referral, case, or a legal relationship (custody, guardianship, legal supervision, commitment, detention, or other placement) within the preceding year or at the time of the incident; and

   B. The circumstances of the incident are such that the child:

       1. Sustained serious injury, near fatality, or death as a result of abuse, neglect, or self-harm;

       2. Caused a serious injury, near fatality, or death; or
3. Was abducted.

C. Other incidents may be reviewed at the request of the Director, Chief of Operations, Bureau Chief, Director of Legal Services for DCYF, DHHS Commissioner or Governor of New Hampshire.

IV. Case selection will be based on the information contained in the Critical Case Incident Report (Form 1099) submitted pursuant to policy 1099 Critical Incident Reporting.

V. The QA Specific Case Review prep team will:

A. Review and analyze the available case information (see SOP 2850.1 QA Specific Case Review and Systems Mapping Preparation);

B. Select cases for QA Specific Review based on the findings of available information; and

C. Conduct an initial review on each selected case.

VI. The QA Specific Case Review Team will meet on a monthly basis.

A. QA Specific Case Review meetings are conducted consecutively for 3 months; and

B. A systems mapping meeting is conducted on the 4th month of the rotation.

VII. All QA Specific Case Review meetings will be organized and facilitated in a consistent manner (see SOP 2850.2 QA Specific Case Review Meetings).

A. Attendance of QA Specific Case Review meetings will be closed to any parties who were not expressly invited.

1. The Director may invite a representative of a third-party entity to participate in a meeting if:

   (a) The entity is providing technical assistance or has a contractual obligation to the Division that will be impeded if they are unable to participate; and

   (b) The entity has completed a confidentiality agreement with the Division.

B. The meeting facilitator will document the meeting on the following forms:

1. Quality Assurance Specific Case Review Log (Form 2850); and

C. All documentation in paragraph B above must be maintained in the restricted Quality Assurance Folder (see SOP 2850.3 Use of QA Specific Case Review Data).

   1. No other documentation of the review will be maintained by any participant.

VIII. It shall be a breach of confidentiality for any participant in a QA Specific Case Review meeting to disclose any details of the meeting verbally or in writing after a meeting has closed with the exception of de-identified aggregate information released for:

   A. The DCYF continuous quality improvement system; or

   B. The National Partnership for Child Safety technical assistance program relative to the SSIT.

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**Standard Operating Procedures**

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**Applicable Forms**

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**Glossary and Document Specific Definitions**

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**Document Change Log**

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