

Creating a Shared Language and Developing Your PQI Plan

March 31, 2023

10:00 AM-11:00 AM CST



Agenda

1. Introduction to the CQI Community
2. Zoom Polls – Language of CQI
3. PQI Plan and Process Sharing Community Presentations

Lara Raper, The Baby Fold (lraper@thebabyfold.org)

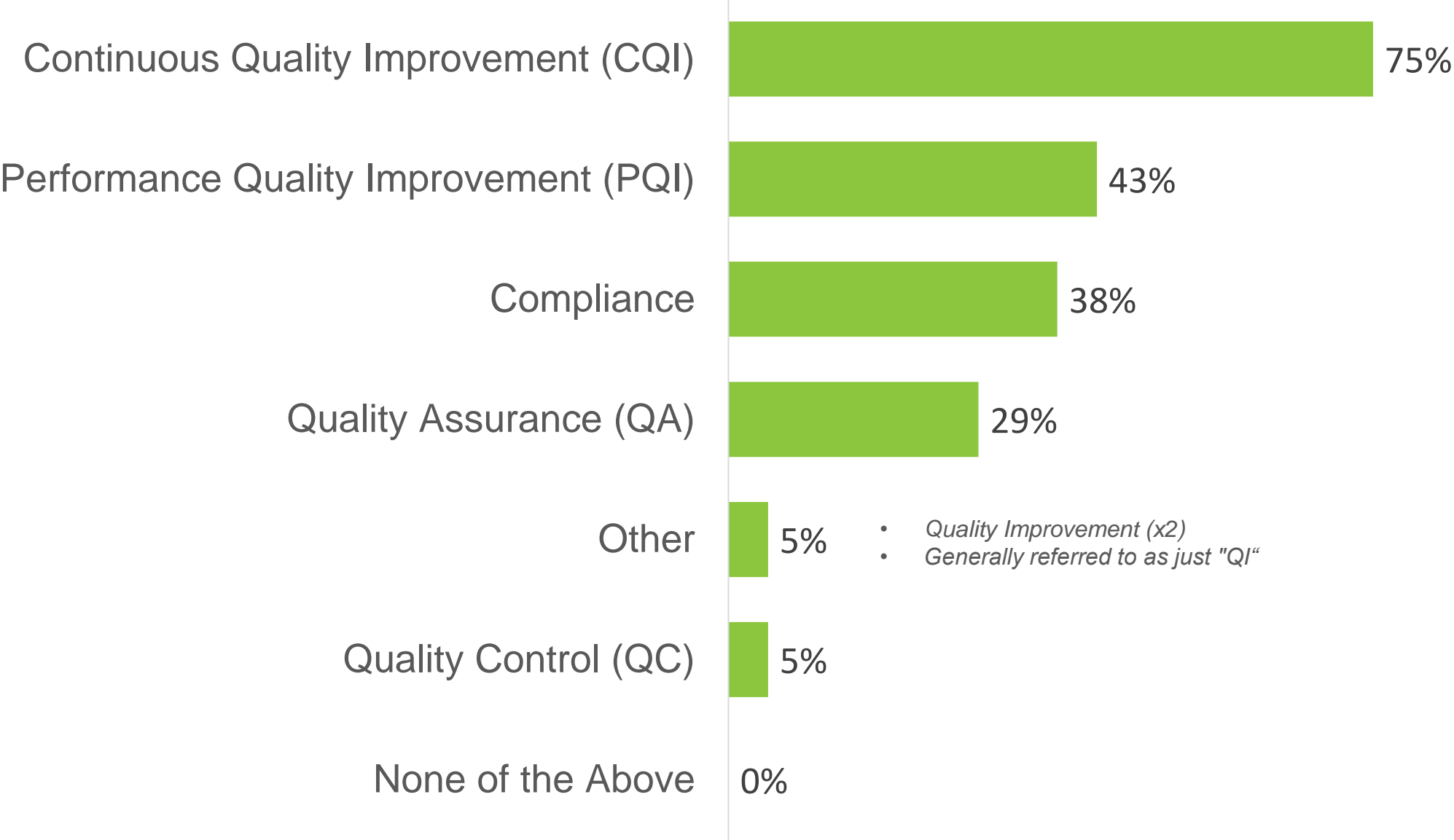
Rena Gotto, Caritas Family Solutions (Rena.Gotto@caritasfamily.org)

Julia Fukuda, Bethany Christian Services (jfukuda@bethany.org)

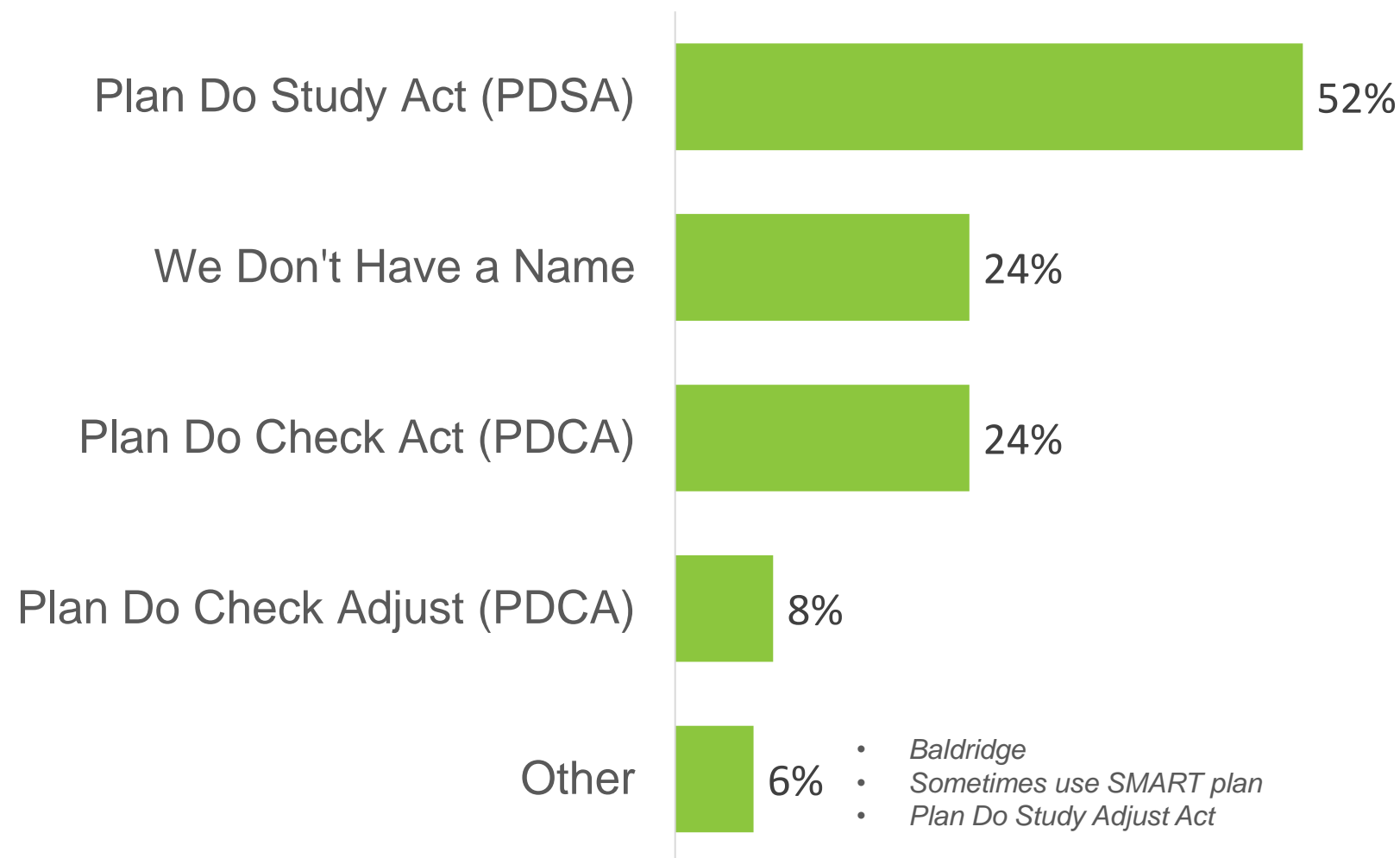
Joie Frankovich, PIE Org (joie@pieorg.org)

4. Q & A

What terms do you use at your organization? (n=65)

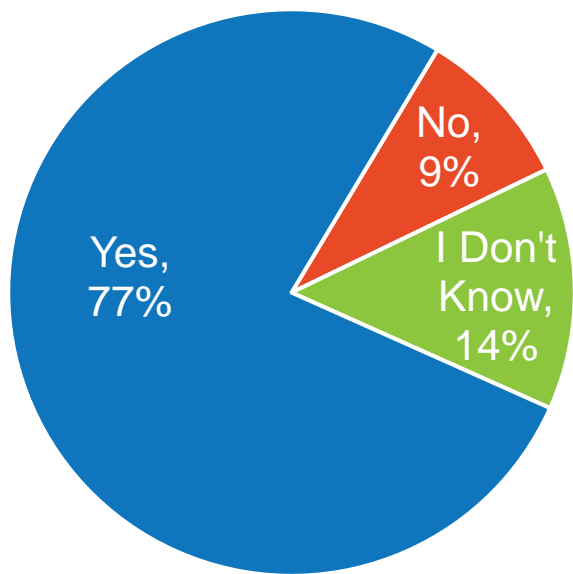


What do you call your improvement cycle or what is your model of change? (n=62)

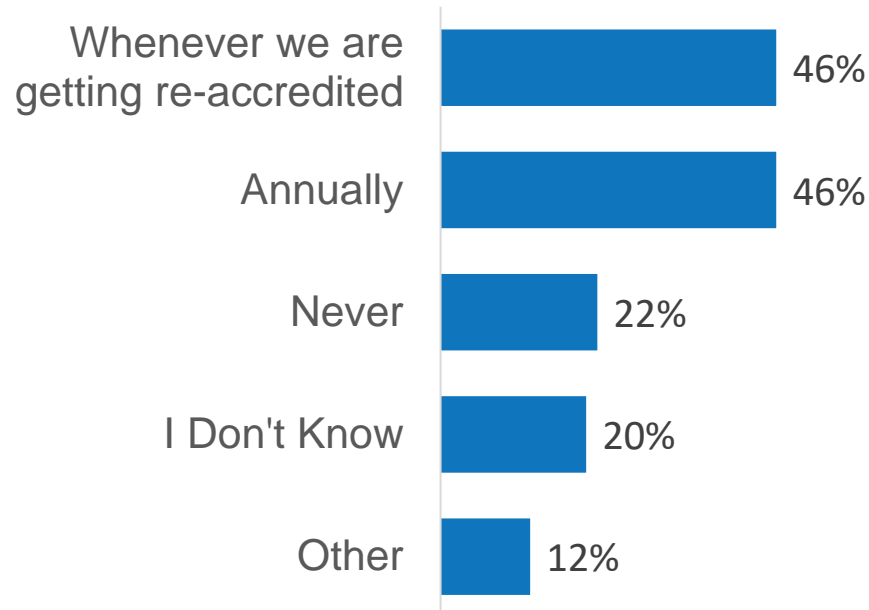


PQI/CQI Plans

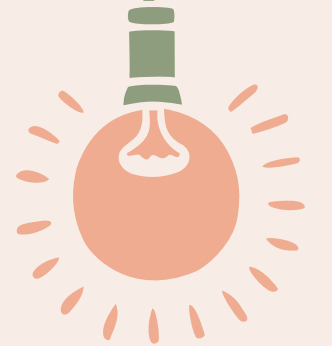
Does your organization have a PQI/CQI Plan? (n=65)



How frequently is your plan reviewed/revised? (n=65)



- Every 2 years (x2)
- Monthly
- We are developing a plan as this is new to the agency
- We revise when a process/procedure outlined has changed or recently when we went through reaccreditation
- We have a vague plan that aligns with a more thorough strategic plan every 2 years



Quality improvement Plans

Fun with QI and COA



Lara Raper, Vice President of QI, The
Baby Fold





SHAREABLES

- I. Who, What, Where, Why of Quality Improvement Plans
 - II. Areas of Focus in Quality Improvement Plans
 - III. How often review plans, procedures
 - IV. Who helps create, review, approve plans and procedures
 - V. Where does COA fit in with Quality Improvement: PQI Standards
- 







OUR Qi REviSIONED

Re-designed our Quality Improvement Department in Fall
2022



- Strengthened our horizontal part of our infrastructure
 - Added stronger tie between quality improvement and risk management
 - Re-structured staffing: VP of QI, Asst. VP of QI for FCS/ASTS Asst. VP of Schools and Data Analyst
- 
- 

WHO IS PART OF QI PLANNING

❖ QI staff, CEO, Program Leadership and Non-program Leadership all worked together to develop our updated QI and Risk management approach.

Kept all staff aware via all agency meetings and presentations, Q & A sessions

Kept Board aware of progress via board meeting presentations and regular updates

❖ Reinforced current QI committees and work groups, as well as added:

- Client Experience Committee
- Employee Experience Committee

Expanded Quality Council to not only include Leadership, but also future leaders of the agency



Qi PLAN AREAS OF FOCUS



QUALITY IMPROVEMENT PROCESS

General Philosophy
Goals of Quality Improvement Process
Roles of Vice Presidents and Department Directors
Quality Improvement Team Structure
Recognition
Project Identification
Report Outs
Quality Improvement Training

PROGRAM EVALUATION

Quality Indicators
Outcome Goals

UTILIZATION AND MEDICAID COMPLIANCE REVIEW

Utilization Review Committee
Method and Activities





PEER RECORD REVIEW

Method and Activities

Sampling Methods

Confidentiality of Records

STAKEHOLDER PARTICIPATION

Satisfaction Surveys

Interviews and Focus Groups

Advisory Groups/Councils

EMPLOYEE SATISFACTION AND INVOLVEMENT

Satisfaction Surveys – Annual, Initial, Exit

Interviews and Focus Groups

Employee Activities Committee

INCIDENT REVIEWS

Types of Incidents

Review of Incidents

Risk Management Reviews of Critical Incidents





DATA COLLECTION AND ANALYSIS

Data Collection Sources and Types

Data Collection Methods and Tools

Data Analysis

RISK MANAGEMENT AND MITIGATION

Risk Mitigation Strategies

Risk Management Process

Risk Management Meetings

Areas of Risk Requiring Monitoring

TREATMENT ADVISORY COMMITTEE

Appointment of Members

Responsibilities of the Committee

STRATEGIC AND ANNUAL PLANNING

Methods and Activities

Review Process





QI PLAN DEVELOP, REVIEW



WHEN



Annual Review, Updates
(sooner if needed)

WHO PART 1

QI Department Staff



WHO PART 2

Leadership Team

WHO PART 3

Program Committee,
Board



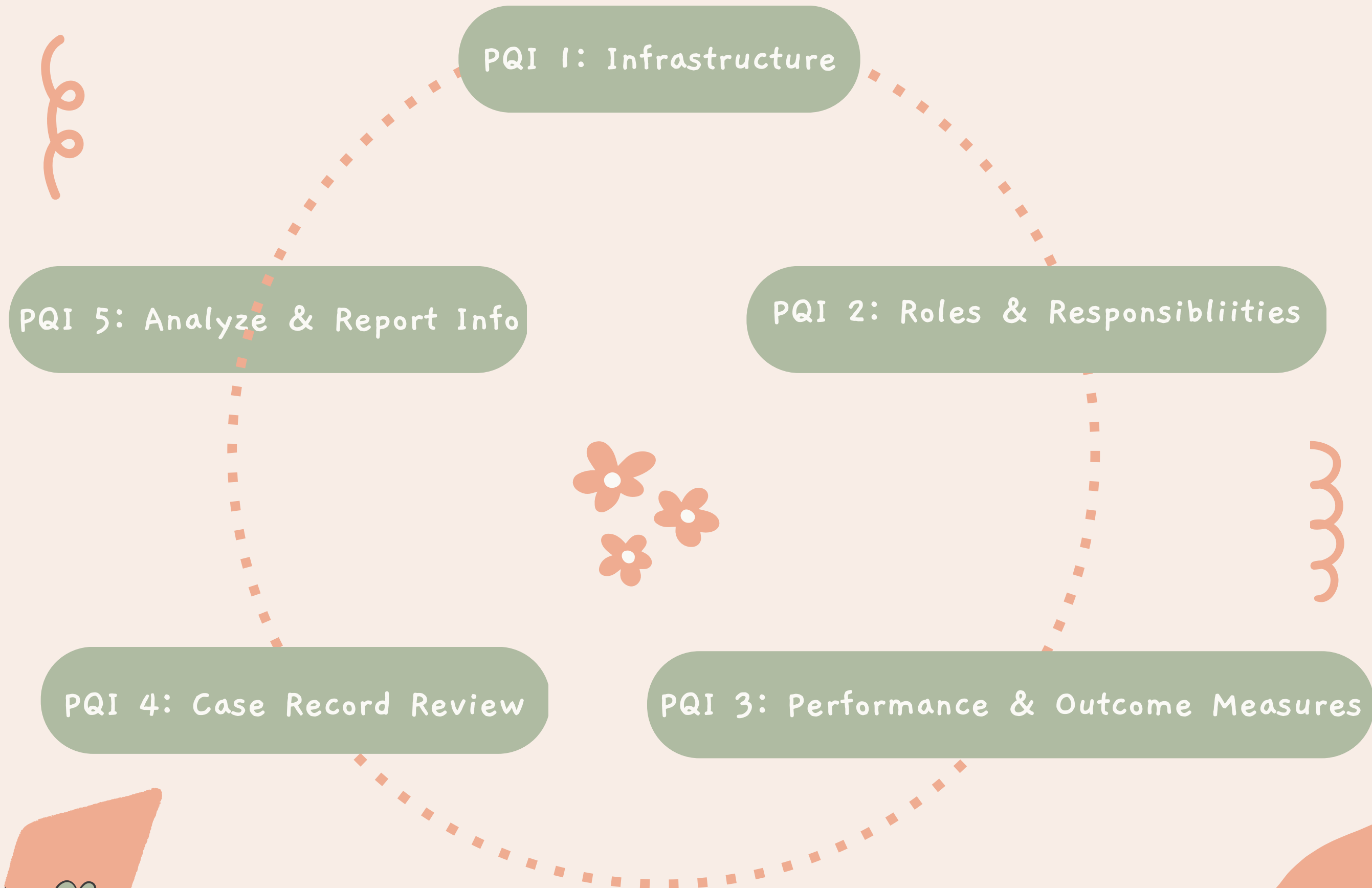


FUN WITH Qi AND COA

PQI Standards 1-5 →



PERFORMANCE QUALITY IMPROVEMENT



PQi 1: INFRASTRUCTURE

PQI Plan focus on all levels, horizontal and vertical; agency-wide, sites, departments and programs

Maps out plan, processes, and procedures

Schedule out meetings a year in advance

Leadership, Directors, Managers, Supervisors ensure QI is a regular agenda item, meaningfully discussed/reviewed/analyzed reports, identify initiatives, improve effectiveness of services

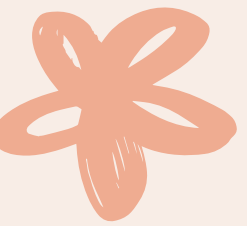
How share out findings, monitor results



PQI 2: ROLES & RESPONSIBILITIES

Staff are qualified to conduct, sustain the organization's PQI system:

1. Quality Practice
2. Know, use internal and external evaluation methods
3. Good data entry and integrity
(Remember garbage in is garbage out)
4. Able to collect, analyze and interpret data
5. Able to share out evidence, findings that actively engages staff





PQi 3: PERFORMANCE & OUTCOME MEASURES

Are services achieving desired impact

Best practice, high quality service delivery

Performance of management, operations

Data Measurement Plan

Annual Client Surveys

identify, mitigate risk

Are we achieving our mission, strategic plan, annual goals

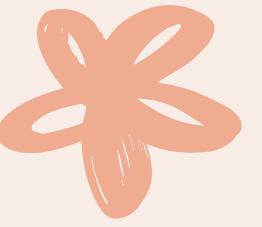
Quality Assurance - Integrating findings, recommendations from external reviews



PQi 4: CASE RECORD REVIEW

Conducting quarterly case record reviews
Random samples of open and recently closed cases
(refer to COA sampling guidelines)
Compliance and Quality focus in reviews
Items in review tool to measure quality of services

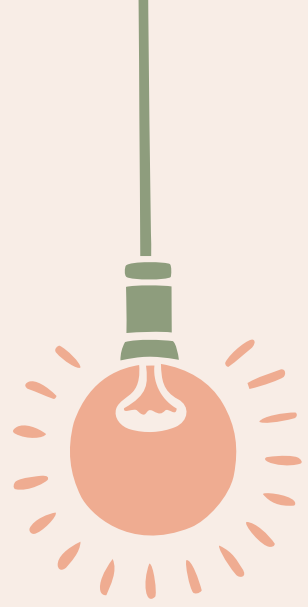




PQI 5: ANALYZE & REPORT INFO

- Systematic collection, aggregation, analyses and maintenance of data
(scrub data to ensure data integrity, quarterly review of data collected/aggregated/disaggregated, develop reports for analysis and interpretation)
- Analyze data - track/monitor measures, look for patterns/trends, compare performance over time
- Sharing out of QI findings regularly and timely to board, staff, stakeholders
- Take action when indicated, monitor effectiveness of interventions





ANY QUESTIONS



Thank you for your time and attention!



Lara Raper, MS

Vice President of Quality Improvement

The Baby Fold

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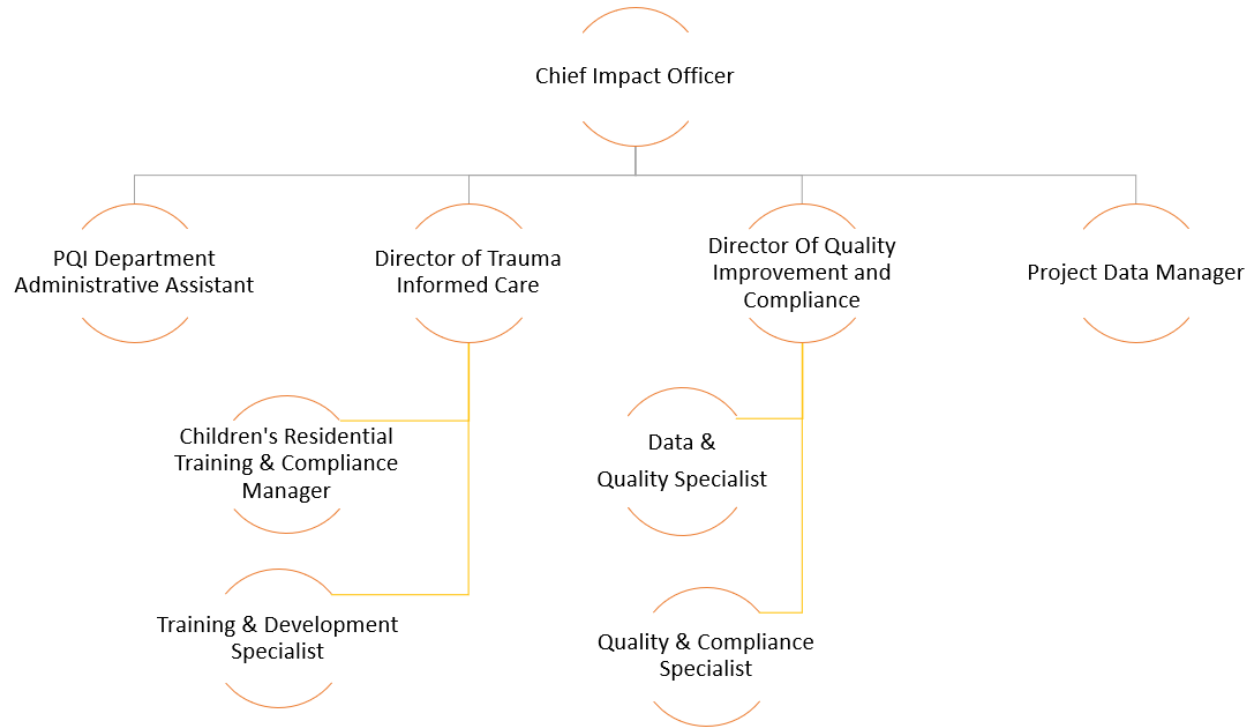
Caritas Family Solutions

PQI Structure and Planning



Date Here

Performance and Quality Improvement Department



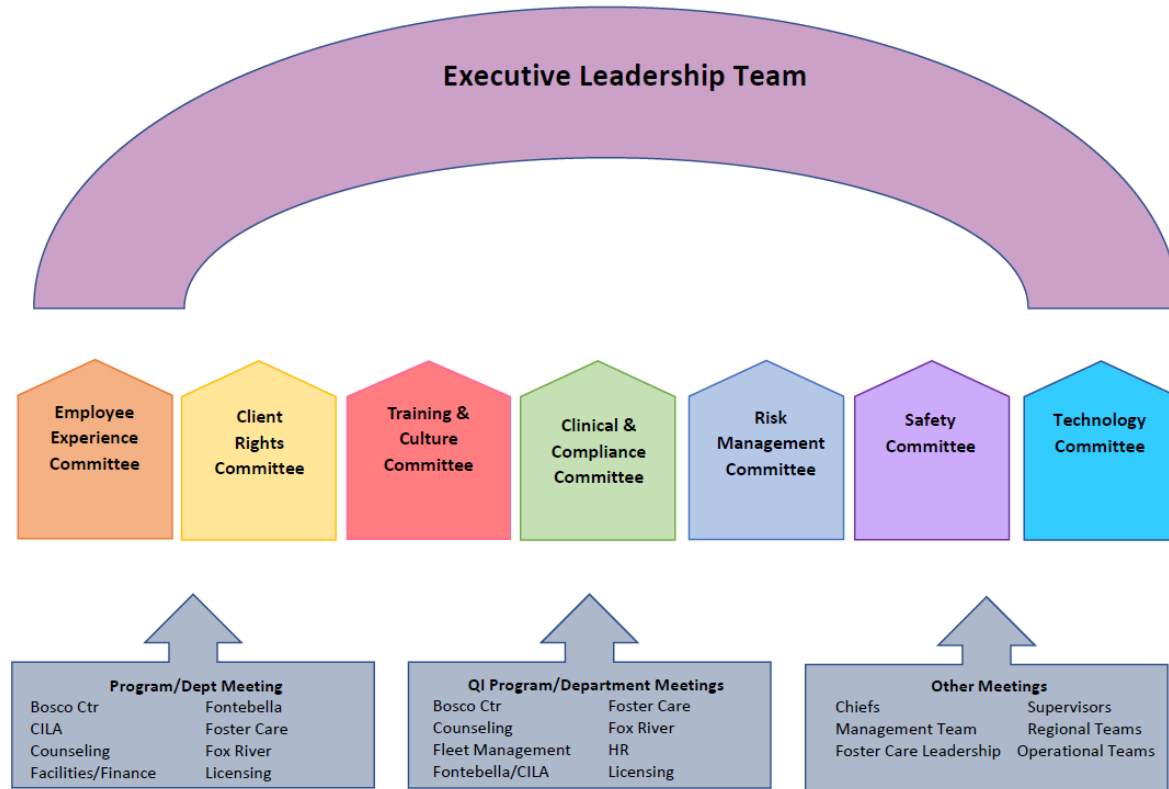
PQI Department Initiatives and Oversight

- Quality Improvement
- Quality Assurance/Compliance
- Data Management/Reporting
- Training and Professional Development
- Trauma Informed Practices
- Risk Management
- Privacy & HIPAA
- Client Grievances or Complaints
- Innovation, New Initiatives and Impact
- Policies and Procedures

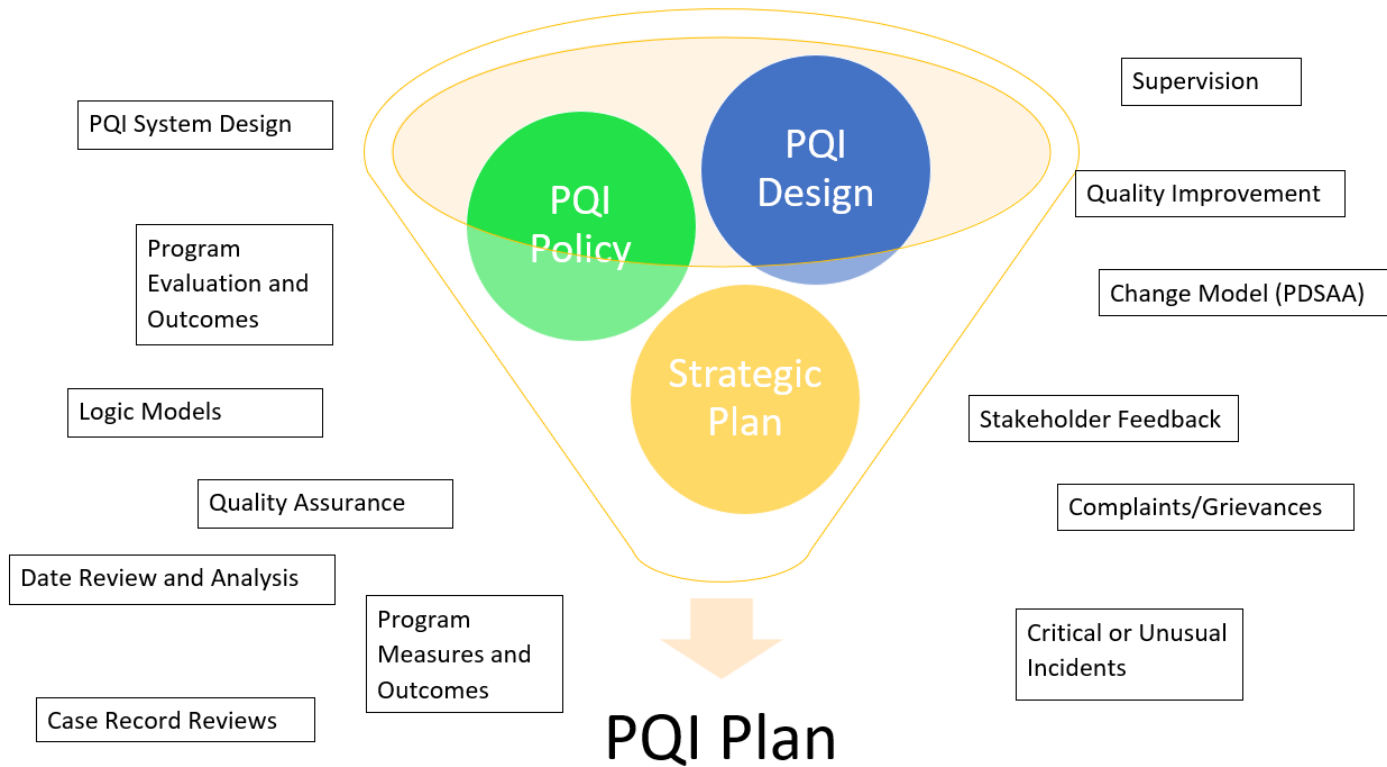
PQI Department Roles

Director of Quality Improvement and Compliance	Data & Quality Specialist	Training and Development Specialist	Children's Residential Training & Compliance Manager	Project Data Manager	Quality & Compliance Specialist	PQI Dept Administrative Assistant	Director of Trauma Informed Care
Lead QI Program Teams <ul style="list-style-type: none"> • Foster Care • Intact • SJBCC • Counseling • Adoption • Fox River • CILA • Fontebella • SCSEP Manage/Oversight of: <ul style="list-style-type: none"> • Agency Reporting • Client Complaints and Grievances • Stakeholder Satisfaction • Performance Indicators • Program Outcomes • Quality Assurance • Accreditation 	<p>Manages all Data Reporting</p> <ul style="list-style-type: none"> • Monthly • Quarterly • Yearly <p>Completes data management and/or entry for:</p> <ul style="list-style-type: none"> • UIR's • Program Outcomes • FC Data • Case/Record Review • Surveys <p>Data Reconciliation of DCFS stats</p> <p>Manage data for Performance Dashboard</p>	<p>Develop/maintain in training strategies for agency staff needs, include design, coordination of training programs, implementation and management of learning systems software.</p> <p>Maintain training competencies, tracking staff accomplishments and monitor effectiveness.</p> <p>Works with depts to identified training gaps or deficiencies and develop solutions to meet needs.</p>	<p>Oversight and management of training and staff development for all children's residential programs</p> <p>Oversight of compliance in SER entries and reporting</p> <p>Oversight of compliance for behavior management techniques within residential</p>	<p>Responsible for coordination of projects and strategic initiatives related to systems, technology or software deployment, including discovery, analysis and recommendations.</p> <p>Oversight of development and build out of agency CRM (salesforce platform)</p>	<p>Responsible for registration, paneling, credentialing and staff enrollment for MCO and insurances.</p> <p>Supports compliance and billing oversight efforts, utilization reviews, monitoring and reporting.</p> <p>Support COA accreditation efforts.</p> <p>Supports Contract application and compliance</p> <p>Leads Stakeholder Feedback Efforts</p>	<p>Department administrative support</p> <p>Assists with data entry and supports process workflow.</p> <p>Supports special projects initiatives and implementation</p> <p>Acts as initial contact for department and liaison with PQI staff and program administration.</p> <p>Oversight of sub-contractors compliance and.</p>	<p>Leads adoption of TIC practices throughout the agency.</p> <p>TBRI practitioner/trainer</p> <p>Oversight of staff training and development for building TIC awareness and practices</p> <p>Oversight of best practices/applications of strategies for improving staff and client environment and interactions</p>

Performance and Quality Improvement Structure



PQI Plan Components



CQI Community Event

Creating a Shared Language and Drafting Your CQI Plan

March 31, 2023

10:00-11:00am

PIE is a Chicago-based, national provider of evaluation, strategic planning, and capacity building services for mission-driven organizations.



**External
Evaluation**



**Strategic
Planning**



**Coaching &
Capacity
Building**

Mission & Vision

Mission

PIE partners with mission-driven organizations to build their capacity to evaluate impact, promote learning, and facilitate equitable change.

Vision

PIE envisions a future where all organizations have the capacity to fulfill their missions, live their values, and serve their communities.

The PIE Process and *Creating a Shared Language*

Prepare

Today, we will focus here.

- Document review
- Listening tour
- Literature review
- Logic model
- Evaluation plan

Develop

- Create/refine data collection tools
- Create/refine data collection processes
- Conduct data collection

Learn

- Data walks
- Dashboarding
- Interim & final reporting
- Dissemination materials

Learn & Build Capacity

Document Review

- Opportunity to review all documents related to both the organization as a whole and the specific program/project being evaluated
 - Mission, vision, guiding principles, staffing charts, prospectus, funding streams
 - Program descriptions, past RFPs, past reports, program budgets, previous data collected (exit surveys, satisfaction, etc.)
- Identify themes and general questions to help build the contextual understanding of the organization's goals and steps it has taken to reach those goals

Document Review - Example

Criteria for Review

Documents reviewed fell into two categories, program/grant type and document type. Overall, 196 documents were reviewed for this analysis – see table below.

	General Info	Program 1	Program 2	Program 3	Program 4	Program 5
Overview info	4	3	3	0	9	0
Guidelines		4	0	3	2	4
Proposals	N/A	16	0	16	14	19
Past Evaluations/ Progress Reports	N/A	0	0	39	14	37
Other Reports	5	4	0	0	0	0

Document Review - Example

Guiding Questions

Given the goals of the overall [REDACTED] project, the following guiding questions were reviewed for each program/document and will be the framework for how all documents are reviewed for the remainder for this analysis.

- What is the purpose of this document?
 - Proposal – what is the purpose of this proposal?
 - Guideline – what is the purpose of these guidelines? Are they connect to any other documents?
 - Evaluation – what is the purpose of this evaluation? What metrics were collected? How was this information disseminated?
 - Other report – what is the purpose of this report?
- What stakeholders does this document refer to or is the intended audience?
- What are the key points this document reveals?
- How does this document/program align to [REDACTED] mission?
 - What is the goal outcome of this document and how does it align to [REDACTED] goals?
 - What, if any, questions does this document/program prompt about [REDACTED] mission?
 - How do changes over time within the program relate to [REDACTED] mission?
- What additional questions or information remain after reviewing the program/grants' documents?

These categories were identified in partnership with the client based on the documents they had to share.

These questions were developed to make connections between program-level documents and the organizational mission/vision.

Listening Tour

- Opportunity to identify all stakeholders to be engaged within CQI process from the very start
 - Identify most equitable/inclusive strategy for this to occur
 - Consider incentives and other impact for participation
- Key stakeholder groups most commonly identified:
 - Organizational leadership, program staff, Board members, program participants (past and current), community members

Listening Tour - Example

Protocol

To start, tell me a bit about your organization's mission and goals and your role within the organization.

- How does your organization define impact?
- How do you know if you're making an impact?

What is your understanding of the ORG's purpose and goals?

- Where did you gather this understanding?

Consider when you first began partnering with ORG. How did they impact your agency organizationally? In other words, did your partnership impact staff capacity or organizational culture shifts?

Consider your organization now. Have there been changes to the type of impact ORG has had on how your organization approaches the issue areas your programming intends to address?

- Can you give specific examples?

First, learn about the interviewee and their org.

Second, gather a sense of how they understand the client and their goals.

Then, get into the "meat" of the discussion that aligns to the overarching evaluation questions.

Next Steps

- Literature review (maybe)
- Revise/create theory of change/logic model
- Update evaluation questions
- **GET TO WORK!**

If you have any questions or wish to discuss this process in more depth, please reach out to:

Let's connect on Twitter:
@JoieLikeJoey

