

# PQI Tool Kit

*A brief overview of COA's Performance and Quality Improvement Tool Kit  
A free resource to assist organizations in establishing a PQI system.*



# General Information About the Tool Kit

- Developed in the summer of 2016 and made available in September.
- Revised with additional tools in November.
- The document is free, however registration is required.
- Once registered, the web link will always have the most up-to-date version of the PQI Tool Kit.

# PQI Tool Kit Basics

The intent of the PQI Tool Kit

- Assist organizations with the most difficult COA Standard Section.
- Support organizations in creating a *closed*\* PQI system.
- Provide a foundation for organization to develop/refine PQI for their unique culture.

# PQI Tool Kit Basics

The PQI Tool Kit is NOT:

- ~~An extension of the PQI Standards.~~
- ~~Required for accreditation.~~
- ~~Inclusive of every PQI standard.~~

# Main Features – Part One

- Accessible through a single link.
- Includes a single PDF that allows organizations to have every document in a single file for printing.
- Has a table of contents that is **hyperlinked** for easy navigation and for downloading the documents.

# Main Features – Part Two

- Fillable PDF templates that are versatile for all types of organizations.
- Includes completed examples for every tool.
- Has a sample PQI Plan and Report.
- Includes 4 graphics that organizations can download and use for their PQI programs.
- All example documents have consistency in the content used. Examples cover 3 different program types and administrative functions.

# Accessing the Tool Kit

The screenshot shows the COA website header with the logo and navigation menu. A search bar is highlighted with a magnifying glass, and the search results are displayed below. The search results show one item: 'PQI Tool Kit'.

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FOUNDED 1977  
A nonprofit accreditor of human services since 1977

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Glossary  
Solutions to FAQs

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**FILTERS**

PQI Tool Kit

**Program**

- Canadian (1)
- Military Family Readiness (1)
- Network (1)

**RESULTS**

**PQI Tool Kit**  
The PQI Tool Kit provides comprehensive guidance and tools for organizations implementing a PQI System at their organization.

Show item 1 to 1 of 1

- <http://bit.ly/pqitoolkit>
- A more streamlined/simpler registration method will be available this month.



# Overview of the Tool Kit

- Introduction
- Survey
- Contact information
- Cover Page



## The Performance and Quality Improvement Tool Kit



A comprehensive guide to developing a performance and quality improvement program

Version 1.0  
Created on September 13, 2016



### Read Me First

#### Quality Improvement Tool Kit

Version 1.02 of COA's PCI Tool Kit. We hope that you find this information useful for your organization. In order to make appropriate updates, we need your feedback. What doesn't work and how we can improve it. We ask that you complete a brief survey about the usefulness of the Tool Kit. It should take no more than 5 minutes to complete. Your feedback will guide the future development and revision of the PCI Tool Kit.

In addition, we are also seeking new ideas for tools that can be part of this kit. We are looking for relatively simple tools to help organizations get off to a great start that some organizations may benefit from more advanced PCI tools. We are currently in the process of reviewing your feedback, and with some feedback from our stakeholders, we hope to release a new version of the kit in the near future.

A great way to provide feedback on the PCI Tool Kit is to complete the survey at <http://survey.coa.net>. All feedback is welcome, whether it is technical or otherwise.

Please click the link or go to the website by typing in:  
[survey.coa.net](http://survey.coa.net)

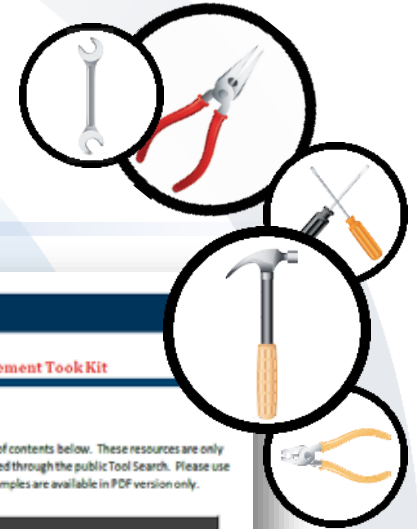
September 21, 2016  
November 23, 2016

COA is a member of the "Association of Accreditation Bodies" which supports organizations who need to implement a quality management system to COA.





# Overview of the Tool Kit



## Table of Contents

- Most important part of the Tool Kit.
- Access everything on the 2-page TOB.
- Tools are not searchable.

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### Table of Contents

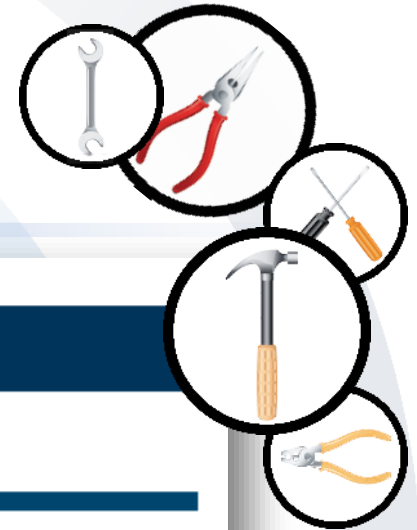
**Performance and Quality Improvement Tool Kit**

**Using the Table of Contents**

All of the tools and example documents are accessible through the table of contents below. These resources are only available through the PQI Tool Kit table of contents and cannot be obtained through the public Tool Search. Please use the direct links below to access the full list of resources. All tools and examples are available in PDF version only.

#	Title	Related Tool	Example Tool
1	<a href="#">Introduction</a>	None	None
2	<a href="#">Culture of Improvement</a>	None	None
3	<a href="#">Stakeholder Involvement</a>	<a href="#">Stakeholder Chart</a>	<a href="#">Completed Stakeholder Chart</a>
4	<a href="#">PQI Infrastructure</a>	None	<a href="#">PQI Infrastructure Graphic</a>
5	<a href="#">Model of Change</a>	None	<a href="#">Model of Change Graphic</a>
6	<a href="#">Improvement Plans</a>	<a href="#">Improvement Plan Plan (page 1)</a> <a href="#">Check and Act (page 2)</a> <a href="#">Do (page 3)</a>	<a href="#">Completed Improvement Plan Example</a>
7	<a href="#">Program Indicators</a>	<a href="#">Program Indicators Worksheet</a>	<a href="#">Completed Program Indicators Worksheet</a>
8	<a href="#">Logic Models</a>	<a href="#">Logic Model Goal</a> <a href="#">Logic Model Actual</a>	<a href="#">Completed Logic Model example #1 for Programs</a> <a href="#">Completed Logic Model example #2 for Administration</a>
9	<a href="#">PQI Plan</a>	None	See below
10	<a href="#">Sample PQI Plan</a>		<a href="#">Sample PQI Plan</a>
11	<a href="#">PQI Report</a>	None	See below
12	<a href="#">Using the Logic</a>	None	<a href="#">Sample PQI Report</a>
13	<a href="#">Conclusion &amp; Next Steps</a>	None	None

# Overview of the Tool Kit



## Table of Contents

### Performance and Quality Improvement Tool Kit

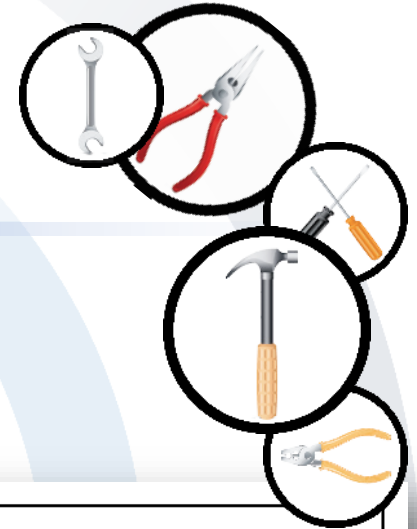
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4	<a href="#">PQI Infrastructure</a>	None	<a href="#">PQI Infrastructure Graphic</a>



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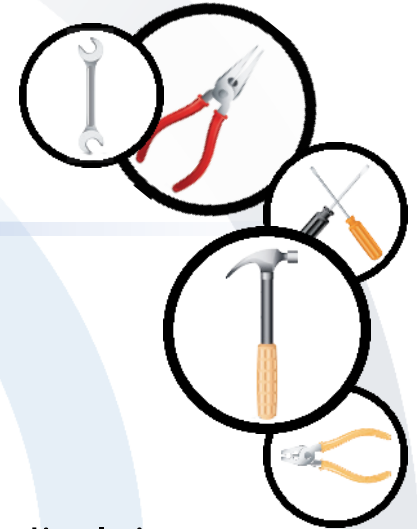


## Print Version Download

14	<a href="#">Bibliography</a>	None	None
15	<a href="#">Print Version Download</a>	This PDF document includes all the resources listed above in the table of contents. The resources are organized into section within the PDF document. This allows users to print all resources at once instead of accessing the individual links above. (total of 115 pages; 8.9 MB)	

Print Version has been stripped of all hyperlinks and form fields.

# Overview of the Tool Kit



## 1. Introduction

### Performance and Quality Improvement Tool Kit

#### Welcome!

This tool kit has been developed to assist organizations with implementing a comprehensive Performance and Quality Improvement (PQI) program. The tools that are included in this document are only intended to be guides. The Council on Accreditation does not expect organizations to use them in order to successfully achieve accreditation. However, the tools - when used appropriately and thoughtfully - will lead an organization, agency or program to a successful PQI system. The tools can be used exactly as they are stated, or they can be recreated to capture elements of your organization's culture and climate. A strong Performance and Quality Improvement Program is intended to improve services to clients. COA's PQI Standards expect that organizations will always be finding ways to improve their client care, regardless of how successful they currently are.

#### A few notes about this guide:

- The recommendations or guidance should not be interpreted as extensions of COA's Performance and Quality Improvement Standards. For direct guidance on what is expected for successful accreditation in the area of PQI, please see the PQI Standards section for your relative Standard Edition.
- The terms "organization," "program," and "agency" are typically used interchangeably unless otherwise noted.
- The terms "PQI program" and "PQI system" are used interchangeably throughout this guide. The terms are used to represent the activities, infrastructure, practices, procedures and other elements that relate to performance and quality improvement.
- Use of these tools and resources are not a guarantee of success. These resources simply assist



#### TIP:

If you are new to developing a PQI system, start with the tools as-is. As you begin implementing the program, you will develop ways that work better for your organization. Those ideas hopefully take the form of new tools that you will create specifically for your organization.

## Introduction

- Notice some the "disclaimers."
- Tips: present throughout the guide.



# Overview of the Tool Kit



## Culture of Improvement

- No associated tool for this section.
- However, reflection questions are included.

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## 2. Culture of Improvement

### Performance and Quality Improvement Tools

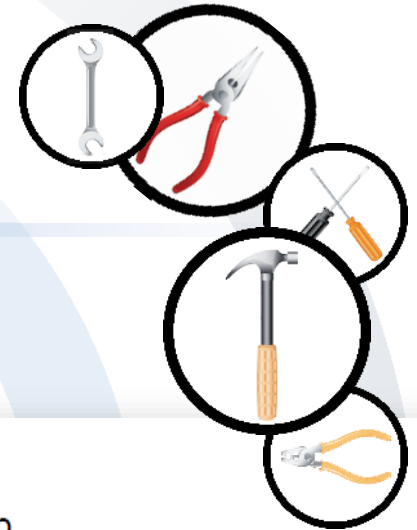
#### Defining Culture of Improvement

Defining culture—regardless of context—can be a challenging feat. So how does COA define a culture of improvement? Culture is a complex concept that encompasses a wide range of factors, including technology, arts, values, ideology and science. Some of the questions listed below, relating to the definition of culture, may be helpful in assessing if your organization has a culture of improvement.

1. What regular activities or practices provide an opportunity for improvement? (habits and customs)
2. What talents do your staff members possess that contribute to improving practices? (skills)
  - Do you have staff who are skilled in development and morale building?
  - Are there team members who enjoy problem-solving and planning?
3. What systems do you use to foster improvement? (technology)
  - What programs or software contribute to the organization's ability to measure, track, and aggregate data?
4. How do you use and encourage creativity to improve the services that your clients receive? (arts)
  - Are there creative means to recognize and encourage contributions to your organization?

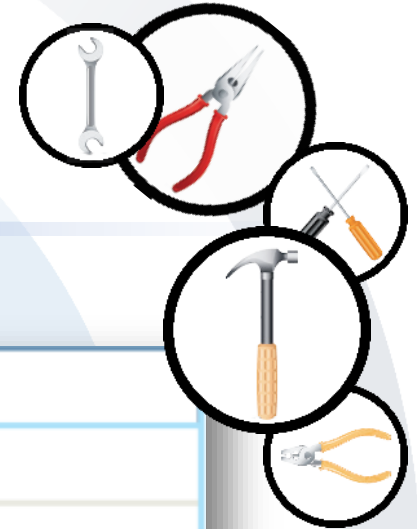
© 2005, The social work dictionary (8th ed.). Washington, DC: American Social Work Association.

# Overview of the Tool Kit



5. *As an organization, how do your values relate to improvement?* (values)
  - Does your mission statement or vision statement relate to improvement?
  - Is your organization willing to invest in people or ideas that may not have a direct monetary return?
6. *How would you describe your organization's model of change?* (ideology)
  - Does your organization follow a Plan-Do-Check-Act cycle, Six Sigma, or other model of change?
7. *What evidence do you use to demonstrate and support improvement?* (science)
  - Are changes based upon evidence or gut feelings?
  - Are interventions provided because they are proven effective or because the "feel good"?

# Overview of the Tool Kit

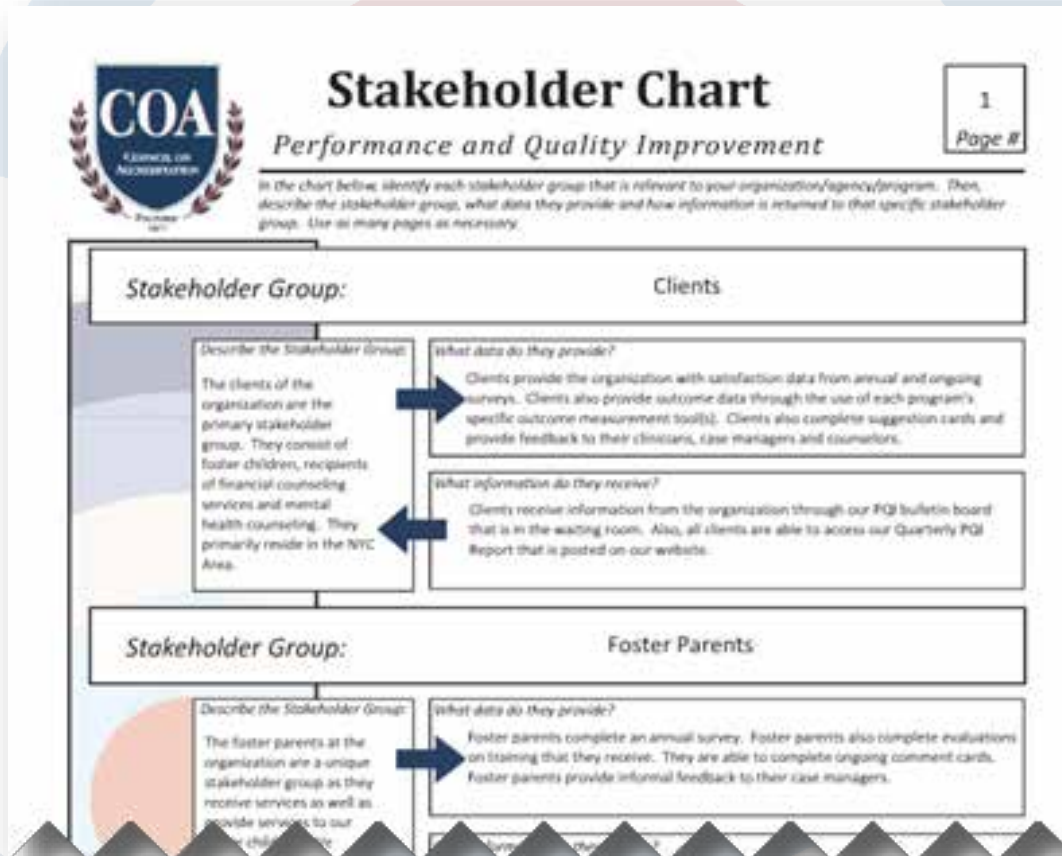
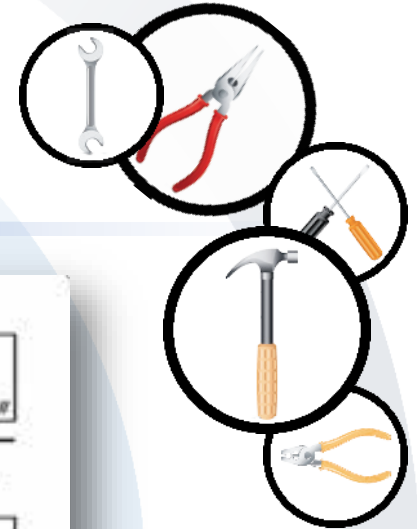


## Stakeholder Involvement

- Our first tool.
- Emphasizes closing the loop and the exchange of data.

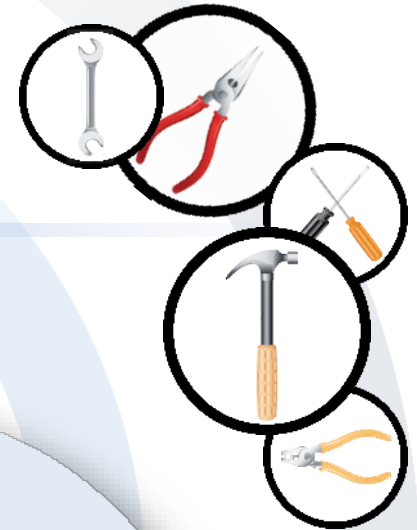


# Overview of the Tool Kit



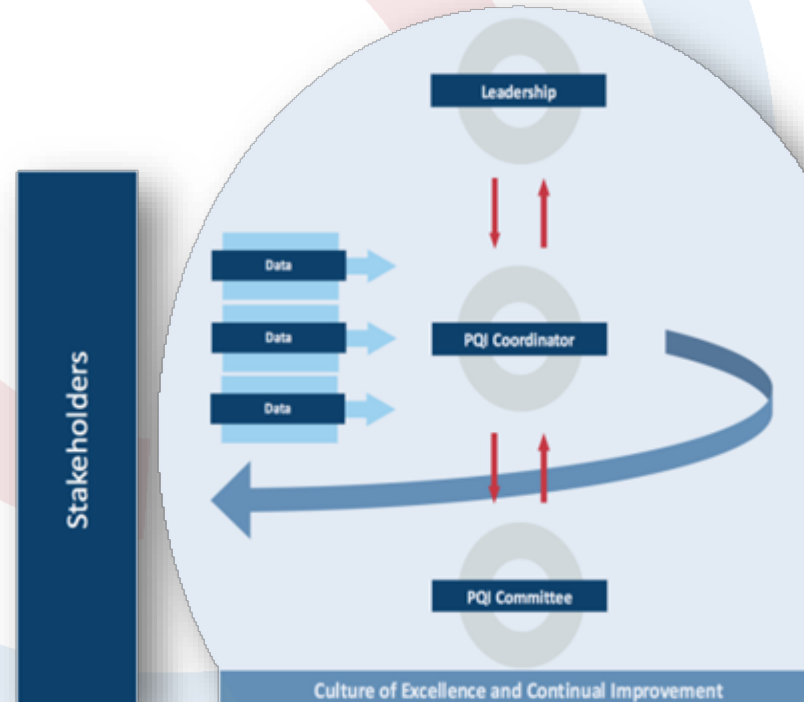


# Overview of the Tool Kit



## PQI Infrastructure

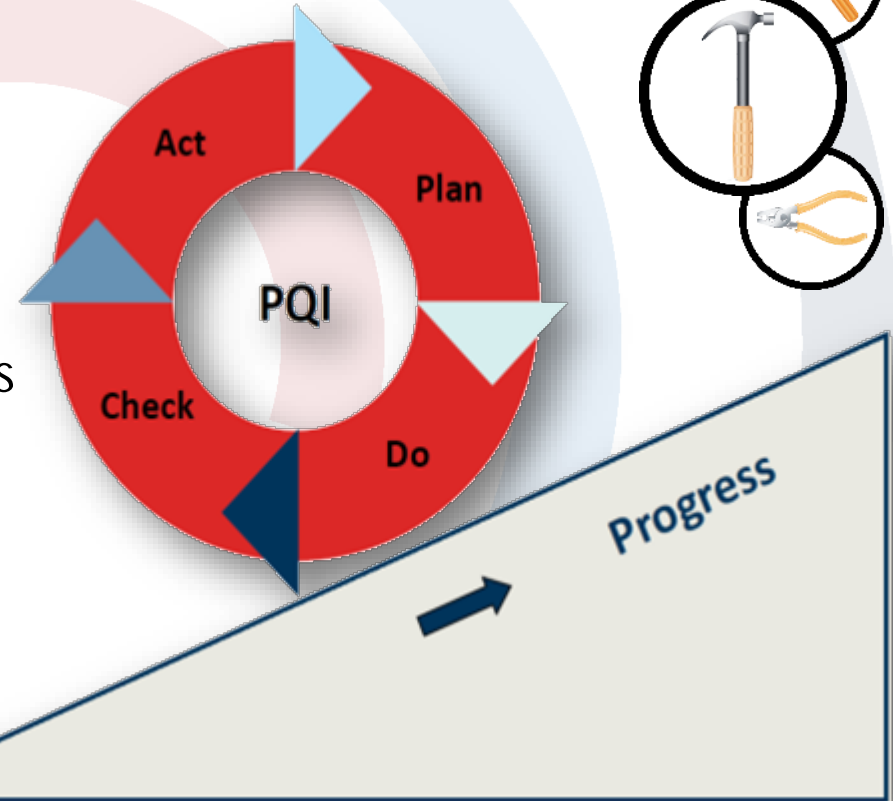
- Provides simple steps.
- Includes a downloadable graphic.
- A specific tool is not included.



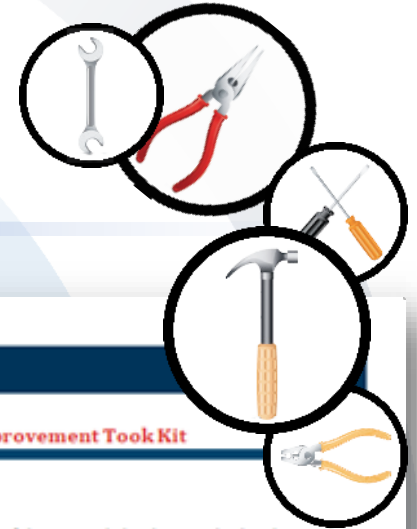
# Overview of the Tool Kit

## Model of Change

- Provides simple steps.
- Includes a downloadable graphic.
- Offers other options and resources for models of change.



# Overview of the Tool Kit



## Improvement Plans

- A significant component of the Tool Kit
- Includes 3 separate tools/forms.

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## 6. Improvement Plans

### Performance and Quality Improvement Tool Kit

**When change is needed**

As discussed in the previous section, some information is indicative of change. With the Plan, Do, Check and Act cycle as the framework, this section will go through using improvement plans to implement the change.

The links below are tools designed to guide organizations through improvement initiatives using the PDCA cycle and documenting it appropriately. By maintaining good records of improvement initiatives that were carried out, whether successful or not, provides ideal demonstration that change happens and lessons are learned. These worksheets are designed to guide organizations in using improvement plans, consistent with COA's PQI Standards, specifically PQI 7.01 (Private & Canadian Editions).

[Page One of the Improvement Plan: Plan](#)

[Page Two of the Improvement Plan: Do](#)

[Page Three of the Improvement Plan: Check & Act](#)


**Step 1: Identify the need to implement an Improvement Plan**

Improvement plans can be used for a variety of reasons.

1. When data collected through an organization's PQI program indicates that there is an area of concern.
2. Administrative functions that are in need of increased efficiencies.
3. To correct under-performing programs or sites.
4. Provide guidance to staff members who consistently perform below the minimum expectations.

# Overview of the Tool Kit



<b>Improvement Plan</b> <i>Performance and Quality Improvement</i>		Page #	
<b>Plan</b>	Improvement Plan Title:		
	Improvement Plan Date:		
	Briefly describe the opportunity for improvement and what information supports this need.		
	Describe the success indicators; how will you know that the proposed actions were effective?		
	What data supports the need for this change?		



# Overview of the Tool Kit




**Improvement Plan**  
*Performance and Quality Improvement*

Page #

Improvement Plan Title: \_\_\_\_\_

Improvement Plan Date: \_\_\_\_\_




	Action Item	Responsible Person	Cost/Resources	Target Date	Actual Date	Success Indicators/Comments
Do						



# Overview of the Tool Kit



<b>Improvement Plan</b> <i>Performance and Quality Improvement</i>		Page #	
Improvement Plan Title:			
Improvement Plan Date:			
<b>Check &amp; Act</b>	Describe the results and observations of the Improvement Plan.		
	What challenges were encountered during implementation of the Improvement Plan?		
	Describe how the completed Improvement Plan will be integrated into regular practice.		

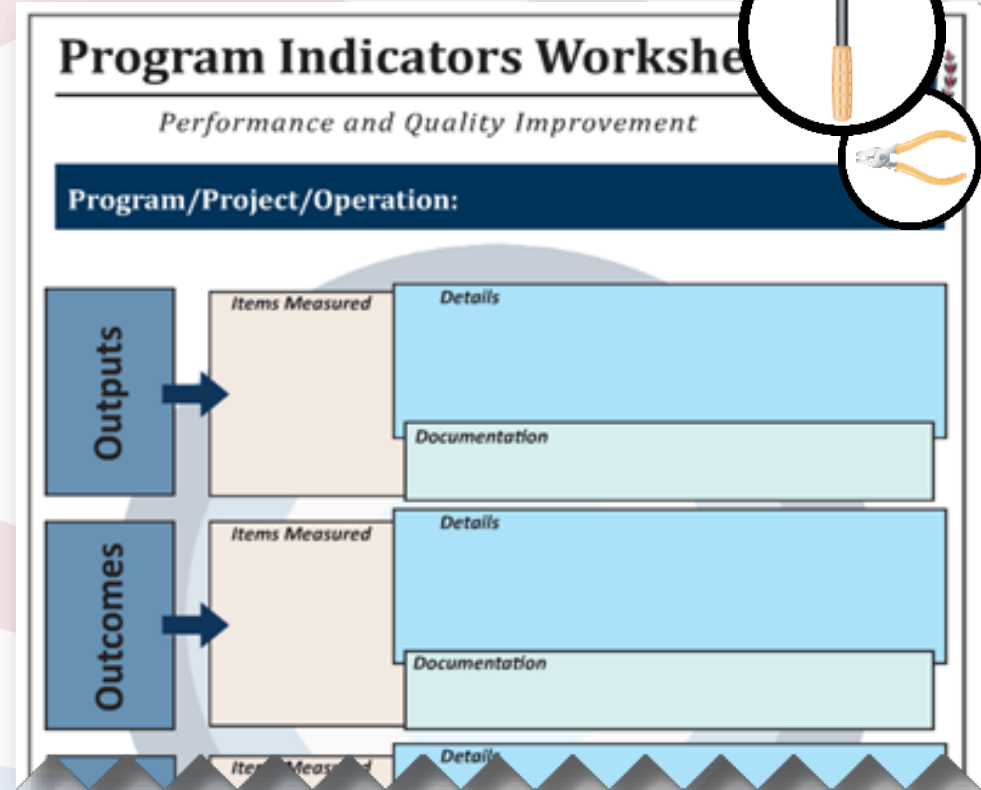


# Overview of the Tool Kit

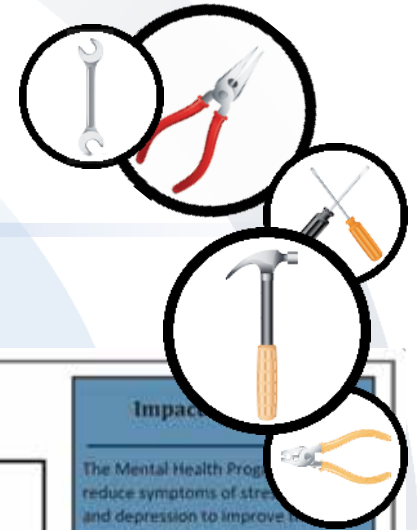


## Program Indicators

- A potentially challenging section for organizations.
- Includes a tool that can be used separately for each program/department.

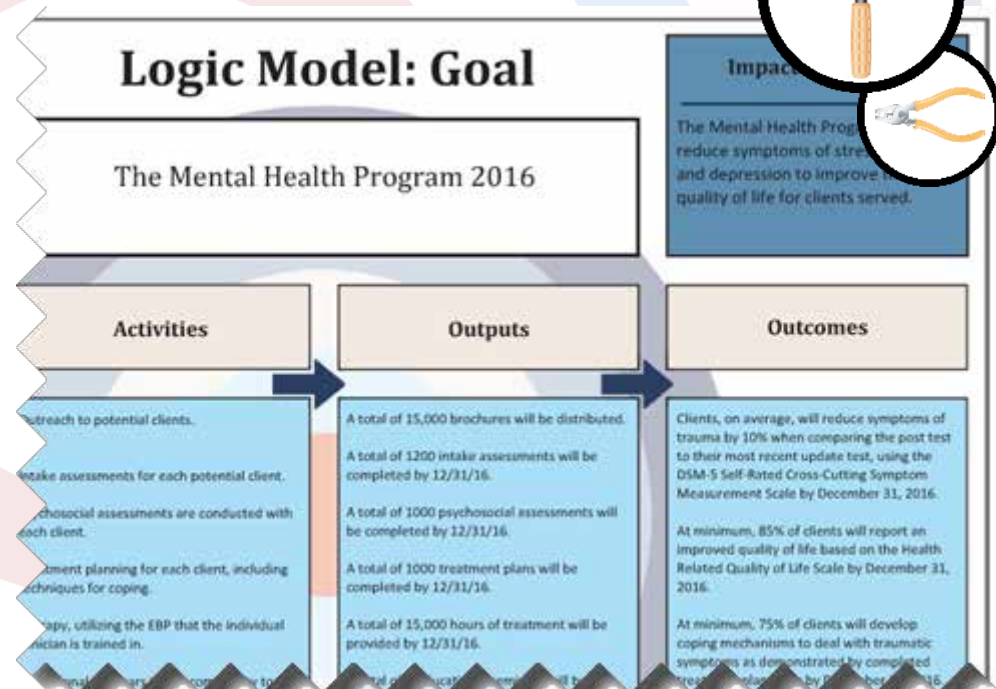


# Overview of the Tool Kit



## Logic Models

- An extensive section.
- Includes templates for logic models and how to use them to record progress.

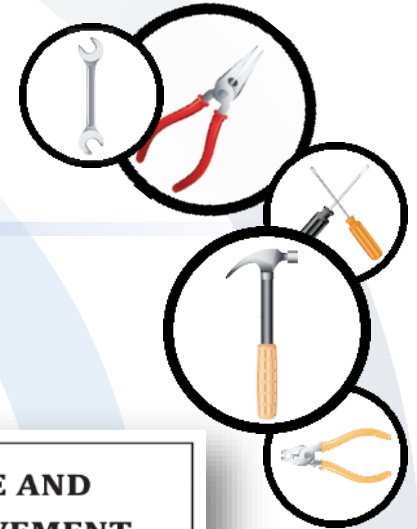




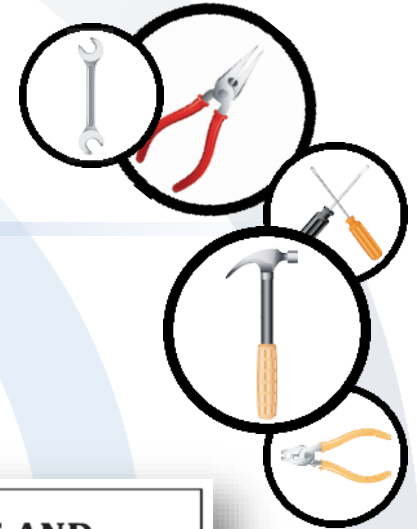
# Overview of the Tool Kit

## PQI Plan and Sample Plan

- Includes step-by-step instructions.
- Provides guidance for how to use the sample plan.
- The link is in the table of contents.



# Overview of the Tool Kit

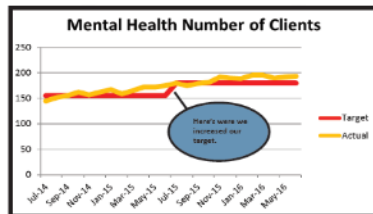
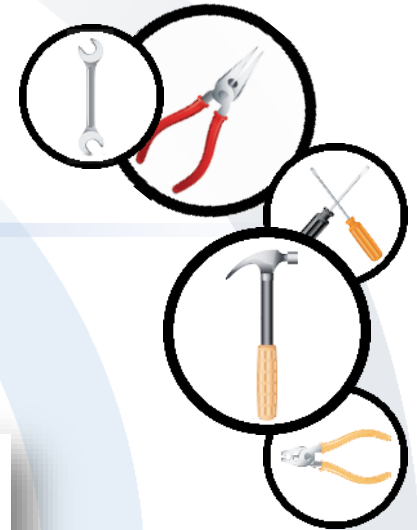


## Sample PQI Report

- Provide instruction for developing a report.
- Focuses on quarterly reports, although Standards do not require quarterly.



# Overview of the Tool Kit



**On Target**  
The number of clients receiving service in the Mental Health Program is currently on target. The target was raised for July 1, 2015 and although there were some initial challenges, the goal is on target.

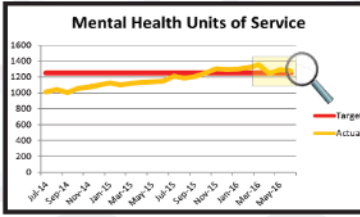


**Plan**

Continue to support the staff in their great work. They help a large number of individuals and families in need of mental health service, and the numbers continue to grow.

**On Target**

The units of service for the Mental Health Program are currently on target. There is a slight decline in the number of units provided, however, it is still exceeding our goals.



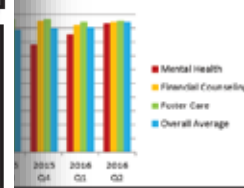
**Plan**

We will keep an eye on our units of service to ensure that we do not slip below the target number. There was some staff turnover which did result in the slight decline.

**Chart Review**

takes place on a quarterly basis and is conducted by a variety of staff at different levels of the organization. The intent of the file review is to ensure that all the required information is provided to service. It's an opportunity to review service delivery and ensure that confidential information remains confidential.

**Item Chart Review**



The target for our organization is 80% compliance for all programs. Programs that perform lower than 80% will be required to complete an Improvement Plan. See the Improvement Plans Section for more information on programs that do not meet target.

**Client Satisfaction**

is very important to us achieving our mission. Our goal is to get 80% of our clients to participate in our client satisfaction survey, and each statement to score a minimum of 4.0. In the current fiscal year, we currently have an 85% participation rate. This is due to the patience and willingness of our clients as well as the hard work of our direct care workers, clinicians, and staff.




feedback is important." It is under that 4.25 benchmark, so we are developing an improvement plan in response. Also, this is directly related to our PQI system, so we definitely want to further investigate and make necessary changes.

# Overview of the Tool Kit



## Closing the Loop

- Provides guidance for organizations to always follow up and follow through.
- Includes a sample scenario.



### 12. Closing the Loop

Performance and Quality Improvement Tool Kit

**Always following up and following through**

A common way for organizations to refer to PQI systems is by comparing it to a loop. Why a loop? The PQI process is circular, continuous and repeating. You may have heard of the feedback loop or the term "closing the loop." When the loop is not complete, the light bulb does not illuminate. These are great analogies for viewing PQI. A strong PQI system always closes the loop, meaning that there is follow up and some form of closure in order for the PQI system to operate effectively. Think about your PQI system as a simple electrical circuit. Without a closed loop, it does not work effectively (or at all!). Consider your organization and what are some of the reasons that the loop is not closed? Perhaps there are specific habits, people, positions, procedures or policies that consistently keep the loop open and prevent the circuit from completing.

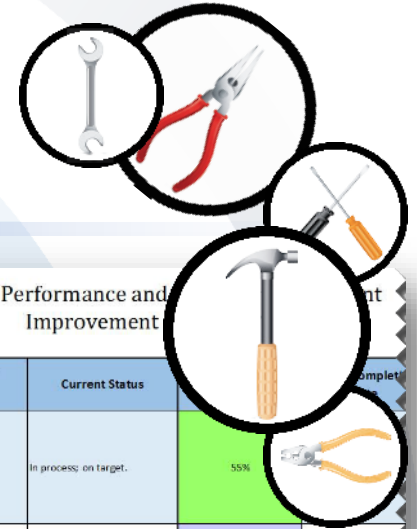


Why is closing the loop so important? It sends the message that your organization takes data seriously and it makes decisions on knowledge-based facts. That develops buy-in from stakeholders who may demonstrate hesitancy in supporting the PQI-related initiatives. So often, it is heard at organizations: "Nothing is ever done with the information we provide."

Closing the loop does not mean that all ideas will be implemented, that improvement plans will always be successful and that everything is reported back to stakeholders. Closing the loop is sometimes acknowledging that your great idea actually wasn't that great or you don't have the capacity to implement the results of a dynamic brainstorming session. However, there are still ways to close the loop in these situations that offer closure:

- Acknowledge failure and report on lessons learned.
- Retain ideas by putting them on a wish list with a specific date for when the item will be revisited.
- Ask for help and inform those involved that help is being sought after.
- Facilitate transparency by communicating limitations.

# Overview of the Tool Kit



Additional Tools, added  
November 2016

- Evidence Worksheet
- Indicators Tracking Sheet
- Improvement Plan Tracking Sheet

Performance and Quality Improvement

Improvement Plan Title	Date Created	Improvement Plan Owner/Lead	Current Status	Completion Date
Employee Morale	4/1/2016	Human Resources Director	In process; on target.	55%
New Measurement Tool	1/1/2016	Mental Health Director	Complete	100% 6/30/2016
				7% 9/30/2016

Performance and Quality Improvement  
Evidence Worksheet

**Date:** 06/15/2016 **Completed by:** PQI Coordinator

**Name of program or department:** Financial Counseling

**Type of indicator:** Outcome

If the indicator is an outcome, what type of outcome?: Achievement of individual service goals

If selected "other," describe the outcome:

**Tool utilized to gather the data:** Completed Action Plans

**Type of tool:** Created by the organization

**Tool completed by:** Action plans are completed in collaboration with the consumer and the counselor.

**Frequency:** Semi-annually Goals are developed at Intake and then revised every 6 months.



# Overview of the Tool Kit



## Last Sections

- Conclusion and next steps.
- Bibliography.



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**Version 1.0**  
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# Thank you.

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