

### **CQI** Community Conference registration is open!

November 15-16, 2022 at the IHotel in Champaign, IL

### **Nurturing Your CQI Garden**

https://cqi.cfrc.illinois.edu/con\_info.php



## Session Overview

- Introductions
- Summary of Administrative Metrics from Registration
- Sharing Metrics
  - Lara Raper, The Baby Fold
  - Mimi Stern and Ashleigh Rosen, JCFS Chicago
  - Melissa Curtis, Lawrence Hall
  - Jamie Riojas, EmberHope
- Open Share
- Wrap Up and Goodbye



### Introductions

### Rename yourself to:

Name, Organization

### In the Zoom chat, write your...

 What is one strategy that you have found to be the most successful in engaging your Administrative Departments or teams?





\*With a total of 129 respondents from more than 70 organizations, agencies, and universities\*

CQI Community Registration Survey Results



# WHAT TYPES OF METRICS ARE YOU CURRENTLY TRACKING?

### **Human Resources Metrics**



#### Other metrics include:

17

14

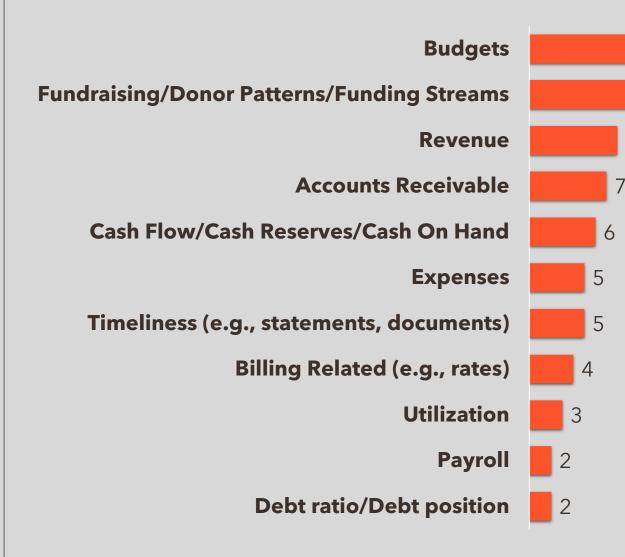
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25

• Employee related incident reporting, staff caseloads, promotions, leadership development, terminations, documentation (e.g., drivers license), onboarding, medical, DEI, employee costs, credentials, salaries, core competencies, grievances, burnout symptoms, new hire satisfaction, onboarding and offboarding.

\*26 organizations noted: Unknown, none, or N/A

### **Finance Metrics**



### Other metrics include:

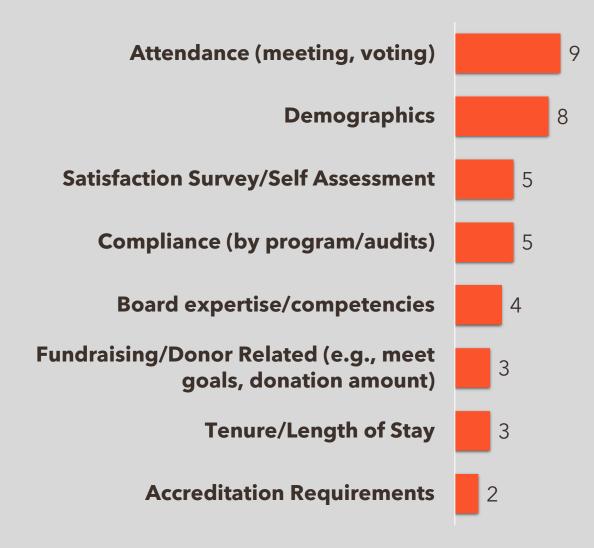
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 Contract insurance, 403B participation, mileage, agency vehicle incidents, credit card/theft compromised, vehicle use, timesheet submissions and errors, external audit data, claims (e.g., sent out/paid), achieve budget within 3%, program efficiency ratio, income assessment, invoice payment processing, labor management, paid time (total, regular, OT, PTO), payments, permanency incentive data, federal funds, Quickbooks, client ratio.

\*25 organizations noted: Unknown, none, or N/A

### Governance/Board Metrics



### Other metrics include:

- Committee involvement, minutes, strategic planning
- 12 organizations noted specific data the board reviews (e.g., program outcomes, client attendance, case review, risk management, agency-wide statistics, revenue/expenses, census)

\*34 organizations noted: Unknown, none, or N/A

### **Technology Metrics**

- Most organizations (40 of 76) responded with unknown, none, or N/A
- Metrics varied with the most common being:
  - Security/Cybersecurity (x10)
  - Help Desk Tickets (e.g., total number, response/resolution times) (x9)
  - Customer experience/satisfaction (x3)
- Other responses include:
  - Increase branding on social media, age of tech equipment, hardware inventory, system updates, server availability, usage rates, storage usage rates, service outages, use of electronic health records



### Risk Management Metrics

### The most common response was:

- Critical or unusual incidents/occurrences/significant events (x30)
  - Analysis by: type, location, frequency, timeliness of reporting and resolution, severity
  - Client incident examples: accidents, restraints, seclusion, medication errors/refusal, injuries, hospitalizations, police involvement, suicidal ideation/attempts, deaths
  - Staff incident examples: injuries, accidents/tickets with agency automobiles

### Other metrics:

 External reviews, audits, complaints, grievances, HIPAA violations, office inspections, environmental compliance, grant processing time, licensing requirements, case record review accuracy, safety drills, COVID cases/exposure, staff training, safe driving, vehicle inspections, policy review, environmental safety, security audits





### CQI Process Metrics

### Responses varied, including:

- Outcomes/Benchmarks/KPI (x12)
- File/Record Review (x12)
- Audits (x4)
- Goal Progress (x4)
- Action Plan Progress (x2)
- Staff Engagement (x2)
- Other metrics:
  - Quality reviews, compliance, proficiency in skills, PDSA, grant funding data, project management tools, fundraising success, annual survey, employee safety, training attendance, peer and community learning satisfaction, incidents



# Sharing Metrics Contact Info

- Lara Raper, The Baby Fold
  - Iraper@thebabyfold.org
- Mimi Stern and Ashleigh Rosen, JCFS Chicago
  - MimiStern@jcfs.org
  - AshleighRosen@jcfs.org
- Melissa Curtis, Lawrence Hall
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- Jamie Riojas, EmberHope
  - jriojas@emberhope.org





# Importance of CQI in Administrative Departments

- All parts of an agency, a business can benefit from Continuous Quality Improvement Activities
- Areas of Focus could include:
  - Improving Business Processes
    - Being more efficient (i.e., timesheet submission, credit card, or billing processes)
    - Providing timely services/activities
    - Improving supportive services to employees, stakeholders, funders
    - Streamlining equipment and supply purchases
  - Improving the Workforce
    - Increasing benefits, evaluating current benefits, researching potential new benefits
    - Assessing work hours, schedules to see how can help increase retention
    - Improving internal, external communication
    - · Analyzing turnover, impact of turnover and developing ways to decrease turnover
    - Improving supervision and supports for employees (higher job satisfaction, lower turnover, longer retention)

## CQI and Administrative Services (cont.)

- Improving Information Technology
  - Security Risk Analysis
  - Training (to use tech tools)
  - Equipment and Supplies
  - Disaster Recovery Processes
  - Supportive Services
- Improve Development Public Relations
  - Internal, External messaging and communication
  - Increase funding streams
  - Endowments, Planned giving processes
  - Ethics and fund raising
  - Donors (increase new donors, increase donor retention, meaningful contacts/results of those contacts)

# FOCUS ON TECHNOLOGY

How to embed CQI in Technology Departments, Teams

# CQI and Technology: Activities

- Quarterly QI meetings to:
  - Review Data, Discuss Quarterly Outcomes
  - Review/Discuss Tech Incidents and Security Audit Results
  - Review /Discuss Help Desk Ticket System (tickets submitted, sort by type/focus, timeliness of response, result)
  - Review, Update, Create Improvement Initiatives based off of discussions

# Information Systems FY22

Department Quality Indicator	Benchmark	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Annual
Timeliness of MIS Work Orders (Number of Help Desk tickets received)	FY18: 92%	746	689	863		2298
(Number of Help Desk tickets completed in accordance with priority)	FY19: 88% FY20: 93.9% FY21: 92.1%	658	641	850		2149
(Percentage of Help Desk tickets completed in accordance with priority)		88.2%	93.0%	98.5%	#VALUE!	93.5%
Disaster Recovery Events (Number of successful planned/unplanned data recovery incidents)	FY18: 1 FY19: 7 FY20: 1 FY21: NA, 0	0	0	1		1
Disaster Recovery Events (Number of Unsuccessful planned/unplanned data recovery incidents)	FY18: 0 FY19: 0 FY20: 0 FY21: 1	0	0	0		0
Technology/Security Incidents (Total # of incidents from Security	FY18: 44 FY19: 18 FY20: 7 FY21: 17					
Audit checklists)		6	2	5		13

# Example of Quarterly Outcomes Chart

- Review the data within a few weeks of quarter's end
- Discuss results, Celebrate successes, Identify/Address barriers
- Build improvement initiatives when needed

Th	e Baby	Fold	d Sec	curity	Aud	it Checklist	
			Yes	No	NA	Total # of incidents	Comments
Personal or unauthorized USB drive computer	found on ag	gency					
Unattended computer left logged on							
Computer passwords visible							
Phone passwords visible							
Door codes visible							
Unauthorized or non-copyrighted C computer							
Exterior doors propped open with r present	no staff						
Employees allowing tailgating							
Keys to locked client files cabinets le in the open	eft out						
File cabinets containing client informunlocked	nation left						
Employee ID missing or not visible Observed visitors in building that ha	ave no visito:	r					
badge on							
Doors to secure areas were left unlocked							
Client files and/or client data left lay unattended	ing in the op	oen					
Client/visitor left unattended							
Petty cash drawer left unlocked and unsupervised							
Closed file storage left unlocked							
Confidential information left on printers/copiers							
Signature cards are being used to si client files	gn out						
Visitor Sign-in logs are being used							
TV's mounted on carts or portable s strapped down	tands are						

# Example of Security Audit Form

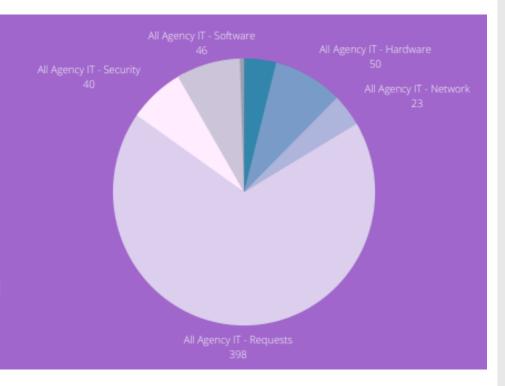
- Have a QI Security Audit
  Team that includes
  employees from each
  department, location
- Throughout the quarter, employees will conduct a random security check, marking results on the audit form
- Security audits are discussed at QI Technology meetings and Quality Council quarterly so can address areas of concern and create QI improvement

initiatives to mitigate

### **Agency IT Requests:**

98.5%

Our TBF Tech Team was able to complete 98.5% of help desk tickets within requested timeframes - Outstanding!



# Track It and Help Desk Tickets Example

Our staff use the "Track It" app/tool

- Input help desk ticket requests
- Able to prioritize request
- Can attach pics, screen shots, files, etc. as part of notes
- Tracks progress of ticket being addressed
- Allows communication between parties in IT and staff

# Ol Improvement Initiatives Example

\\/\lands\\\ \alpha \tau \\\\ \alpha \tau \\\\\ \alpha \tau \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	D. Mila a sa	Time alim a	Due sure se use el e
What Action	By Whom	Timeline	Progress made
<ul> <li>1. Complete Disaster Recovery goals</li> <li>a. Complete business impact analysis</li> <li>b. Determine list of critical documents needed for business continuity and create procedures and protocols to ensure retrieval in the event of a disaster.</li> <li>c. Complete DR testing plan and schedule</li> </ul>	Luis/Kathy/ Team members	FY21-FY22	In process; will be reviewing networks, detailed information on servers, what do we have before move forward - then identify critical systems (already have moved some to the cloud) to move to the cloud, now may look at SDS moving to the cloud for safety  Evaluate usage - determine how long keep former staff data and where store it
			for i.e., 7 years, etc. Evaluate do we have the right equipment for disaster recovery.  Kathy will work on business impact side of
			this project.
			Completed - fire alarm panel was replaced. Had to address switches that went down/replaced them. Did not test the plan this go around.
2. Create new hire operations checklist for supervisors; update supervisor checklist when staff leave to obtain tech assets	Team	FY22 Q3-Q4	In progress - checklist to be emailed out to supervisor in Q4; May see if can work with HR/UltiPro on this item.



FY22 Q3







Patrick McCambridge

Luis Cornejo

During the last 6 weeks of Q3, our IT Tech Team of 3 addressed:

**Help Desk Tickets** 

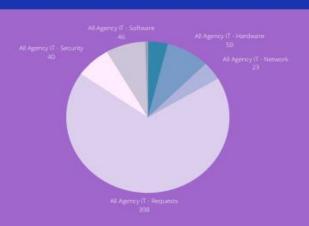
Which led to:

**Hours to Complete Work Requested** 

**Average Hours per Team Member** 

**Agency IT Requests:** 

Our TBF Tech Team was able to complete 98.5% of help desk tickets within requested timeframes - Outstanding!



# QI Collab with

We have found that QI can also be a good messenger, sharing information on IT happenings with our agency program staff, vice versa.

We have created infographs we share at the quarterly QI meetings so everyone is current with agency happenings



#### Tech Incidents for O3

Our tech team saw an increase in higher risk tech incidents during the 3rd quarter. With the help of various tech tools, they have been able to deal with potential hack attempts, prevent users from accessing risky sites and identify other potential risk situations.

Luis, Chrysty and Patrick work hard to protect important and confidential information regarding our clients, our staff and the agency. But they can't do it alone! We all need to do our part by being good digital citizens.



#### **Tech Reminders**

When an employee is leaving the agency, the supervisor is responsible for retrieving all tech devices that were assigned to that staff upon hire. They should check that all items are present, as well as documenting the condition equipment is in when turned in by the exiting staff member. The supervisor then returns those items to the Tech Team at Ft. Jesse campus.

Over the next few months, our Tech Team will be busy coordinating multiple office moves and tech set-ups. Please be patient and send positive thoughts their way for success in these massive project adventures.









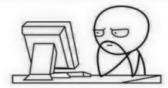
#### **Tech Safety Tips**

- Always remember that if you share a device with other staff, you need to sign in as yourself when you are the one at the computer
- You are held personally responsible for information transmitted via your account.
   No one, including interns, student teachers, and volunteers should be signed in under anyone else's network account. Nor should they have anyone else's passwords.
- Also, you need to lock your device every time you leave the vicinity of your computer/laptop

#### **Tech Responsibliity**

·All devices issued by the agency (Laptops, Chromebooks, iPads, Cell Phones) must be transported in the protective case provided with the device

Never let your computer know that you are in a hurry.



Computers can smell fear.

They slow down if they know that you are running out of time.

www.thebabyfold.org

www.thebabyfold.org



# Please feel free to reach out to us!

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Iraper@thebabyfold.org

Sarah Baker, MSW

Quality Coordinator

<a href="mailto:sthul@thebabyfold.org">sthul@thebabyfold.org</a>

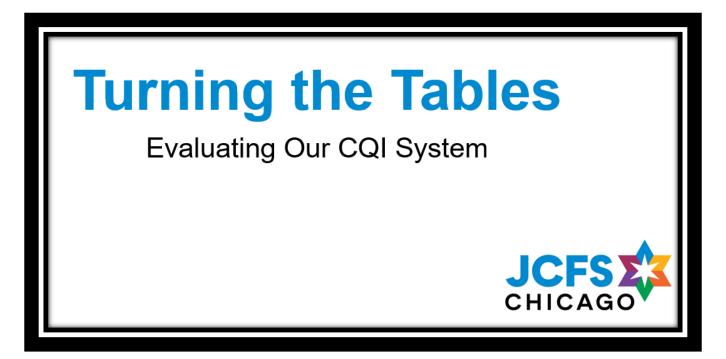
# CQI for CQI

Continuous Evaluation for Our Own CQI System



# Background

### **2021 CQI Conference Presentation**





JCFS Chicago strives to enhance social-emotional well-being for adults, children, teens and families as well as maximize potential for people with intellectual and developmental disabilities.

**Disability Services** 

**Emotional Well-Being** 

**Legacy Programs** 

## Our CQI Structure

**Board of Directors** 

Quarterly Schedule: March June September December

### Pan-Agency Committee

Includes chairs of all Program CQI and Operational Committees, board member representation, the Executive team (CEO, COO, CFO, Director of Development, Chief HR Officer), Director of CQI and Program Evaluation, and CQI Department Members.

Quarterly Schedule: January April July October

### Operational Committees

Includes staff representation from program across the agency Health & Safety: medical issues, medications, safety drills, inspections, accidents, emergency plans Human Resources: employee engagement, manuals, employee evaluations

**Evaluation:** client satisfaction, outcome evaluation and assessment, data collection

Utilization Review: case record reviews, internal

Medicaid audits

Quarterly Schedule: February May August November

### Program CQI Committees

Includes interdisciplinary staff representation for each program

Career Services	Child Welfare	Community Services	Community Counseling Centers	Contracted Employment Services
Duman Opportunity Center	HIAS Chicago	Integrated Pediatric Therapies	Knapp School & Yeshiva	
Residential Supports	Response for Teens	Services for People with Disabilities	Virginia Frank	

# Highlight on Operational Committees

Quarterly
Schedule:
January
April
July
October

# Operational Committees

Includes staff representation from program across the agency



Health & Safety: medical issues, medications, safety drills, inspections, accidents, emergency plans Human Resources: employee engagement, manuals, employee evaluations

**Evaluation:** client satisfaction, outcome evaluation and assessment, data collection

**Utilization Review:** case record reviews, internal Medicaid audits



# Development of our logic model

### If we...

provide the foundation for consistent, continuous processes for improvement; guide staff through the process of defining and measuring the impact of their work; utilize data and information to provide feedback and recommendations; and support compliance and accreditation maintenance...

### Then...

data literacy of staff increases; the understanding of clients, programs, and overall impact increases; the ability to make evidence-informed decisions is strengthened; the ability to articulate the impact of the agency is increased; and the culture of continual improvement is reinforced...

### Which leads to...

(a) improved quality of life, social emotional wellness, increased opportunities, and outcome achievement for clients; (b) increased engagement, reduction of identified problems, and a shared mission and vision for staff; and (c) improved services and advocacy efforts, secure funding, and stronger strategic planning and organizational systems.

# Identifying Outcomes & Evaluating Them

Direct Outcome	Data Source
Increase/maintain understanding of clients and program	CQI Stakeholder Survey (8 items)
Increase/maintain ability to make evidence- based decisions	CQI Stakeholder Survey (8 items)
Increase/maintain commitment to a culture of continual improvement	CQI Stakeholder Survey (8 items)
Increase ability to articulate the impact of services	CQI Stakeholder Survey (3 items)

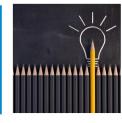
## Our CQI Stakeholder Survey

### 27 items in 4 Domains:



Understanding of clients and program

Ability to make evidence-based decisions





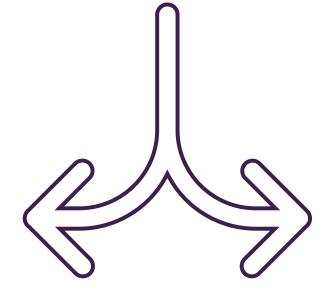
Ability to articulate impact

Commitment to a culture of improvement



# **Analysis Approach**





Quantitative

**Qualitative** 

### **Focal Points**

### **Strengths**

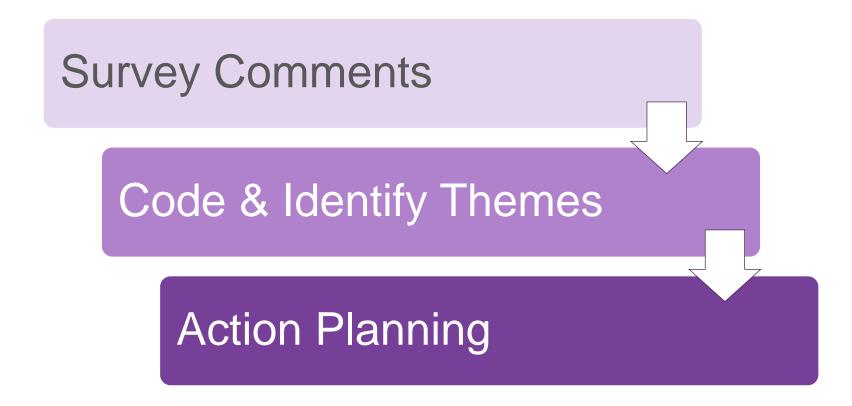
- I have access to the CQI information I need to make decisions regarding my work.
- I think that CQI activities demonstrate which improvements are needed in my program.
- The CQI process provides opportunities to assess how well we are doing and what we can do better.
- CQI information is shared transparently with me.
- Staff encourage colleagues to make use of CQI findings.

### **Areas for Improvement**

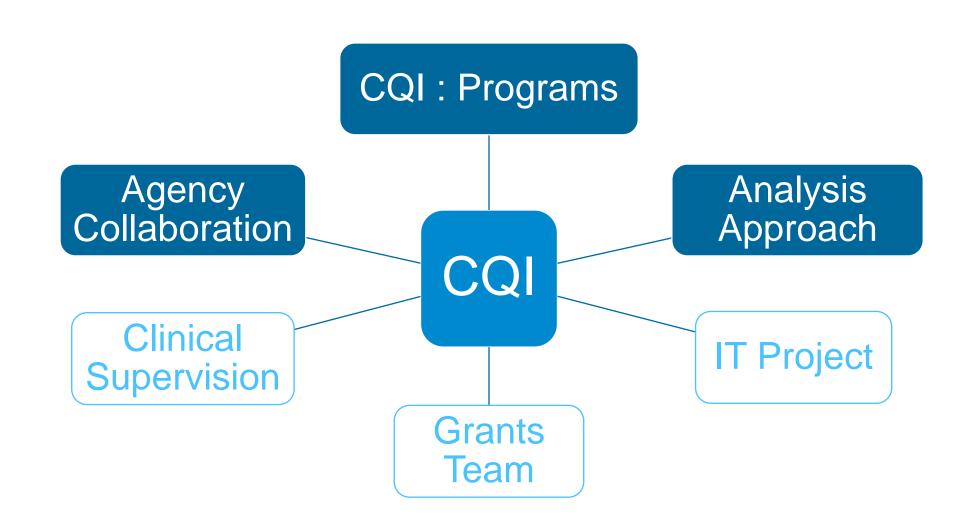
- My program gathers information from diverse stakeholders to gauge how well the program is doing.
- I think that CQI activities will help improve services to people of diverse backgrounds and needs.
- I know where to find the outcome results for my program.
- Extent to which my program uses CQI data to train staff.



# **Qualitative Analysis**



# **Summary & Examples**





### **CQI Stakeholder Survey Guide**

Presented at the CQI Community Conference in 2021 by Emily Shapiro, Mimi Stern, and Ashleigh Rosen. Developed by the CQI Department at JCFS Chicago based on the Evaluation Capacity Assessment Instrument (Taylor-Ritzler, Suarez-Balcazar, Garcia-Iriarte, Henry, D. B, & Balcazar, F. E. (2013)). For questions on this guide, contact CQI@jcfs.org.

### **Quantitative Analysis Instructions**

- 1. Compute a mean score for each domain for each respondent. Ensure the correct items are reverse-coded.
- 2. Average the respondent-level mean scores for an overall domain score for each domain.
- 3. Compare the overall domain scores to the benchmark targets.

#### **Outcomes Key**

Survey items on the following page relate to one of the four outcomes below.

I	Key	Outcome
	Α	Increase/maintain understanding of clients & program
	В	Increase/maintain ability to articulate the impact of services
	С	Increase/maintain ability to make evidence-based decisions
	D	Increase/maintain commitment to a culture of continual improvement



### **Survey Items**

Key for analysis	Please indicate the extent to which your program currently uses CQI data for the following purposes:	Not at All	To Some Extent	To a Considerable Extent	To a Very Great Extent
Α	To improve services or programs.	1	2	3	4
Α	To design ongoing monitoring processes.	1	2	3	4
Α	To assess implementation of a program.	1	2	3	4
Α	To assess quality of a program.	1	2	3	4
С	To make informed decisions.	1	2	3	4
С	To train staff.	1	2	3	4
С	To develop or incorporate best practices.	1	2	3	4

Key for analysis	Please indicate your level of agreement with the following items:	Strongly Disagree	Disagree	Agree	Strongly Agree
D	The CQI process provides opportunities to assess how well we are doing and what we can do better.	1	2	3	4
D	CQI information is shared transparently with me.	1	2	3	4
D	Staff encourage colleagues to make use of CQI findings.	1	2	3	4
D	Staff concerns are overlooked in most decisions regarding quality improvement and evaluation. [REVERSE CODE]	1	2	3	4
А	My program gathers information from diverse stakeholders to gauge how well the program is doing.	1	2	3	4
С	My program has adequate records of past CQI efforts and what happened as a result.	1	2	3	4
D	The CQI process is inclusive of voices at all levels in my program.	1	2	3	4
D	Staff at all levels participate in developing improvement plans for my program.	1	2	3	4
С	I have access to the CQI information I need to make decisions regarding my work.	1	2	3	4
В	I am able to articulate my program's key outcomes.	1	2	3	4
В	I am familiar with my program's theory of change or program philosophy.	1	2	3	4
В	I know where to find the outcome results for my program.	1	2	3	4

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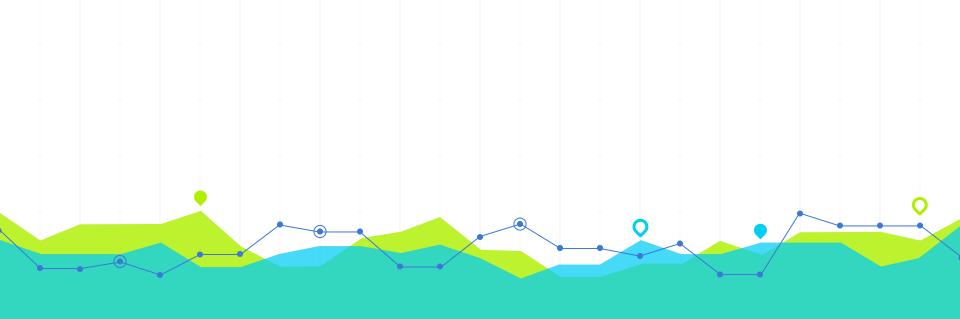
Key for analysis	I think that CQI activities	Strongly Disagree	Disagree	Agree	Strongly Agree
Α	help me understand my program.	1	2	3	4
Α	help me better serve our clients.	1	2	3	4
С	inform the decisions I make about my work.	1	2	3	4
С	demonstrate which improvements are needed in my program.	1	2	3	4
С	inform changes in our documentation systems.	1	2	3	4
Α	will help improve services to people of diverse backgrounds and needs	1	2	3	4
D	are unnecessary because we already know what is best for our clients. [REVERSE CODE]	1	2	3	4
D	are integrated into my regular work.	1	2	3	4

### Demographic Items (adjust based on your survey population)

- Department or Program
- Position
- Do you supervise staff?
- Tenure at the agency
- Tenure on CQI Committee (if applicable)

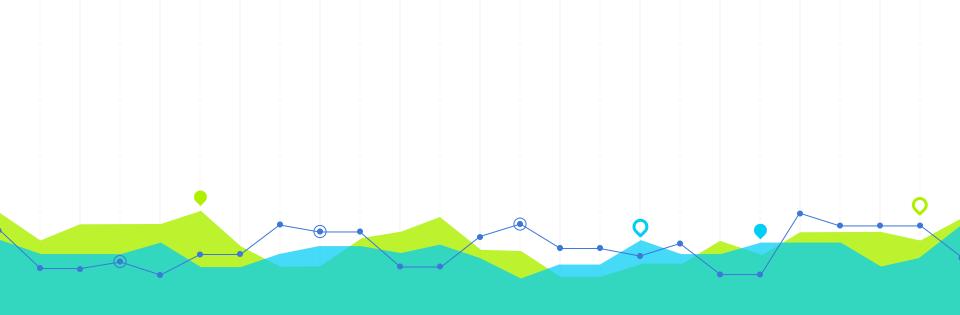
### **Open Items**

- "Any feedback regarding the questions on this page?" provided at the end of each section
- "What is one suggestion to improve CQI at the agency? How could CQI better serve you and the agency?"
- "Anything else you would like to share?"



# **Lawrence Hall Youth Services Melissa Curtis**

**Resource: Risk Management Dashboard** 



## Jamie Riojas EmberHope

Resources: Goals Spreadsheet Template, Work Plan Template