



*Foster care that keeps siblings together*

*An accredited, evidence-based program*

## Continuous Quality Improvement Plan

FY 17/18

# Contents

- Introduction.....4
- PQI 1 Culture of Improvement .....4
  - Continuous Quality Improvement Plan: Goal.....4
  - Core Values.....4
  - Neighbor To Family’s Mission.....4
  - Neighbor To Family’s Vision .....4
  - Three-Year Strategic Plan .....5
  - Contract Compliance .....5
  - Potential Barriers.....5
- PQI 2 Infrastructure .....6
  - Quality Improvement Model.....6
  - Annual CQI Plans .....7
    - Agency-Wide CQI Plan .....7
    - Program Site Annual CQI Plans.....7
    - CQI Team Structure .....7
  - CQI Activity Schedule FY 17/18 ..... 10
- PQI 3 Roles and Responsibilities..... 12
  - CQI/QA Staff ..... 12
  - Training Staff ..... 12
  - Program Supervisors/Directors ..... 12
  - The Safety Committee ..... 13
- PQI 4 Performance and Outcome Measures..... 14
  - Data Sources and Measures ..... 14
    - Customized Performance & Outcome (P&O) Database..... 14
    - Relias Learning Management System (RLMS) ..... 14
    - Incident Reporting Database ..... 14

Online Satisfaction Surveys ..... 15

Online Suggestion Program ..... 15

Recognition of Staff Performance ..... 15

PQI 5 Case Record Review ..... 16

    Quarterly Site Case Records Review..... 16

    External Audits ..... 17

PQI 6 Analyzing and Reporting Information..... 18

    Data Management..... 18

    Operational Reports ..... 18

PQI 7 Using Data ..... 22

    CQI as a Holistic System..... 22

        Corrective Action and Improvement Plans ..... 22

        Continuous Monitoring of the CQI System..... 23

        Annual CQI Report ..... 23

## Introduction

Organizations use a variety of terms to refer to the improvement systems they employ to advance efficient, effective service delivery; apply industry best practices; achieve strategic and program goals; and seek methods to improve performance. Continuous Quality Improvement (CQI) and Performance Quality Improvement (PQI) are the two most common. Although NTF has long referred to its system as a CQI program, for purposes of our accreditation with the Council of Accreditation (COA), this document is organized according to the PQI standards against which our agency is audited.

## PQI 1 Culture of Improvement

### Continuous Quality Improvement Plan: Goal

The goal of Neighbor To Family's (NTF) Continuous Quality Improvement (CQI) program is to promote quality in all aspects of the agency by continuously seeking input from stakeholders, carefully planning the path toward accomplishing the agency mission and contractual obligations, monitoring quality at all levels, evaluating program effectiveness, and using feedback to make improvements. "Continuous" is key to the concept of quality improvement at NTF. The agency was founded on the belief that there is always room for improvement and as a result we strive for continuing our growth and demonstrating our national recognition for excellence.

### Core Values

- Keeping siblings together for child well-being and family continuity
- Engaging and supporting their families
- Developing and maintaining highly trained, committed staff and foster caregivers
- Maintaining stable placements leading to permanent families
- Minimizing potential risk to children in our care
- Maintaining fidelity to evidence based practice and accreditation standards

Of utmost concern is the effective delivery of services by all who are associated with NTF to assure program fidelity, child well-being, and family safety.

### Neighbor To Family's Mission

Revolutionize foster care by keeping siblings together while building healthier families and stronger communities.

### Neighbor To Family's Vision

Building an award-winning national program recognized by our communities (and peers) as a family-oriented organization. Our professional teams will support and implement a comprehensive array of services to keep siblings together through programs with proven results and successful outcomes relating to children's safety, permanency, stability, and well-being.

### Three-Year Strategic Plan

The NTF Board of Directors and CEO, in collaboration with personnel and community representatives from agency locations develop a Strategic Plan for a three-year period. The Plan is annually reviewed and revised when necessary at the annual meeting of the Board in January. The current Plan is valid until December 31, 2019.

### Contract Compliance

All NTF services are funded through contracts with public and private providers. These contracts document the expected methods and outcomes for services to be provided by NTF. In the event that a contract fails to provide outcome expectations, NTF utilizes mission and best practice-driven methodologies to set and monitor programmatic benchmarks for success.

### Potential Barriers

It is important to recognize that in spite of an agency's goals and performance, there are always potential barriers. These may include such prohibitive factors as contract funding cuts, imposing of restrictions or regulations by states or contracting agencies that conflict with NTF's mission and core values, the inability of NTF to consistently manage geographically diverse programs, or a significant loss of trained staff. NTF program management, Cabinet, and Board of Directors regularly communicate any upcoming changes as soon as they become aware of them in order to address and resolve any such barriers.

NTF recognizes that, particularly in the implementation of new programs or services, inherent risk is involved. NTF is committed to trying new methods and developing innovative programs and services. Therefore, in situations where such endeavors are not successful, NTF thoroughly reviews and evaluates the experience in order to assure that appropriate actions are taken in the future.

## PQI 2 Infrastructure

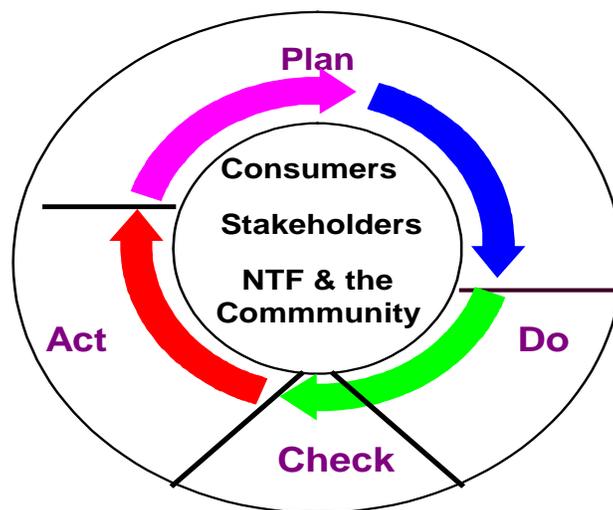
### Quality Improvement Model

NTF maintains a broad-based, organization-wide program that spans every aspect of program operations. It unites NTF staff, governing body members, persons served, funders, community members and consumers in a continuous upward spiral of quality planning, action, and evaluation. Opportunities are provided for these entities to participate in the function of NTF through committees, advisory boards, satisfaction surveys, and many other methods of feedback collection.

NTF uses the four-step process improvement model espoused by Shewhart to monitor and evaluate the quality of care, as reflected in following:

#### *Shewhart Quality Improvement Model (PDCA Cycle)*

- **P** – PLAN
- **D** – DO
- **C** – CHECK
- **A** – ACT



**PLAN:** Define the problem to be addressed, collect relevant data, and ascertain the problem's root cause.

**DO:** Develop and implement a solution; decide upon a measurement to gauge its effectiveness.

**CHECK:** Confirm the results through before-and-after data comparison.

**ACT:** Document the results, inform others about process changes, and make recommendations for the problem to be addressed in the next PDCA cycle.

## Annual CQI Plans

### Agency-Wide CQI Plan

An agency-wide CQI Plan is created for each fiscal year. This is a collaborative effort that involves management teams, CQI committee representatives, staff throughout the organization, and the governing board. Development of the Plan takes into account the previous year's objectives, progress toward outlined goals, areas for improvement, and plans for the upcoming year.

Following the approval of the fiscal year contract (in the event of multi-year contracts, in twelve month intervals), each Executive Director develops a site-specific Annual CQI Plan that is framed by strategic issues, contract compliance, and other relevant data.

### Program Site Annual CQI Plans

The Program Site Annual CQI Plans are created in consultation with the VP of CQI & Training and the Program VP. Each plan reflects key areas of the Annual CQI Plan and establishes goals that:

- Are consistent with the NTF mission
- Reflect compliance with contractual obligations and strategic requirements
- Are clearly defined, obtainable, and measurable
- Describe the specific steps to be taken to accomplish the goals
- Establish a timeline that will allow for the accomplishment of the goals and objectives
- Establish an evaluation tool that will measure goal and objective attainment

For the corporate office staff, the Chief of Staff prepares an Annual Plan which is based on the Strategic Plan, budget and audit issues.

### CQI Team Structure

NTF obtains input from internal and external stakeholders as an active part of their involvement in the CQI process.

### Cabinet

NTF's President/CEO's Cabinet consists of the organization's senior leadership team, including the President/CEO; Chief of Staff; Chief Financial Officer; Vice Presidents for Programs, Human Resources, and CQI and Training; the MIS Director; the Development Director, and Assistant to the President. The Cabinet meets bi-weekly to discuss operational and CQI activities.

### Board of Directors

NTF's governing board is comprised of professionals who offer a breadth of knowledge and experience in corporate and non-profit settings. They are authorities in such fields as health/human services; media relations; legislation; and federal and state law. The Board meets on a quarterly basis. CQI-related reports are reviewed and discussed during these meetings. Also included on agendas for discussion are newly developed or modified

policies designed to enhance agency performance, meet requirements of new programs, or to implement changes in accordance to regulations or contracts.

### Corporate CQI Committee

The Corporate CQI Committee is the link for all CQI activities: planning, monitoring, reporting and complying with NTF, COA, contractual, and regulatory requirements as outlined in NTF's Annual CQI Plans. The committee meets on a quarterly basis to review and discuss such topics as safety, audits, surveys, improvement efforts, and more.

### Time for Change

Since the inception of the CQI system at NTF, the Corporate CQI Committee operated with the same member representation and, with the exception of special projects, used recurring agenda topics. It was comprised of managers from NTF programs, each of whom summarized his or her program's performance and any CQI issues for the quarter. While this method served its purpose over the years, the process was not as dynamic and responsive to agency needs as it could have been. While all information was shared with upper management, committee representatives served in an advisory rather than decision-making capacity. This approach and the need for more involvement by those able to make agency-wide decisions was made evident during NTF's preparation for its 2017 COA reaccreditation audit.

Late in FY 16/17 the decision was made to transition the composition of the Committee to strengthen its capabilities and effectiveness. It was determined by upper management that all members of the Cabinet would take over these responsibilities by serving as the Corporate CQI Committee. This change was made to 1) promote a more proactive, time sensitive approach 2) dedicate time for more in-depth analyses and discussion of data 3) promote a greater use of CQI information for making informed, timely decisions and 4) identify and recommend potential strategic plan enhancement to the governing board as appropriate.

Success of the new approach and the Committee's work will be evaluated throughout FY 17/18 and improvements will be identified and implemented as part of NTF's continuous quality improvement system.

### Local CQI Committees

The local CQI committees, which meet at least twice a year, are managed by each local program with representation from diverse staff and stakeholders. These committees are chaired by the Executive Director or designee for the program and are responsible for tracking and reporting on the program's performance and outcome measures, oversight of program-specific Annual CQI Plans, and improvement strategies focused on their individual challenges. Minutes of these meetings are forwarded to the VP of CQI and Training along with the program's quarterly CQI reports. These become part of the program's monitored performance outcome metrics.

### Local Advisory Boards

Local Advisory Boards are designed for participation by community volunteers for advocating for local and/or national NTF programs, helping develop special community events to promote the agency, and providing counsel to local or national programs by special request from the management team. NTF Board members are encouraged to participate on local committees to further the efforts of engaging community leaders to assist with fundraising and awareness campaigns. Maintaining fully committed members remains a challenge that NTF has discovered is not unique to child welfare. It is NTF's experience that local fundraising and donations originate from individuals or organizations in support of a specific event that they embrace. Board members,

upper management, and program staff will continue efforts to form new relationships by networking with appropriate community stakeholders to solicit their participation.

#### Stakeholders

Stakeholders, including personnel, persons served, volunteers, interns, foster caregivers, funders, and other community members with a vested interest in NTF are encouraged to take part in the CQI process through a variety of means. These include, as appropriate, membership on the Local CQI Committee or Local Advisory Board, participation in surveys, and review of appropriate CQI reports to provide input and recommendations.

### CQI Activity Schedule FY 17/18

Timeframes for completion of key CQI activities are included in each year’s CQI Plan. This table outlines primary activities for FY 17/18 and the team(s) responsible for their completion. The schedule is not intended to be exhaustive. Departmental meetings, reports, and other operational activities that occur throughout the year are not represented in this schedule. The status for each outlined activity is updated and reviewed during quarterly Corporate CQI Committee meetings.

<b>Due</b>	<b>Activity</b>	<b>Responsibility</b>
Oct. 2017	Present 17/18 Plan to Board for approval	CQI
Nov. 2017	Distribute CQI Plan and post to website	CQI
Dec. 2017	Prepare and distribute 16/17 Annual CQI Report	CQI
Jan. 2018	Present Agency Risk Review to Board	CEO, CSO, VPs
	Conduct Board Retreat	CEO, COS, VPPs
	Distribute Community Stakeholder Satisfaction Survey	CQI
	Prepare Semi-Annual Suggestion Report	HR
Feb. 2018	Distribute Family Satisfaction Surveys	CQI, EDs
Mar. 2018	Collect Auxiliary Aids Plans from all programs	CQI, EDs
April 2018	Distribute Child Satisfaction Survey	CQI, EDs
May 2018	Distribute Foster Caregiver Survey	CQI, EDs
Jun. 2018	Submit FY 18/19 Program Site Plans to VPPs/CEO	EDs
	Distribute Employee Satisfaction and Benefit Survey	HR
	Prepare Semi-Annual Suggestion Report	HR
Jul. 2018	Prepare FY 17/18 Annual Report on Length of Stay (LOS) for Discharged Children	CQI
	Award/acknowledge employees (Employee Recognition Program)	HR, CEO, VPPs, EDs
Monthly	Conduct Safety Committee Meetings	SC
	Award/Acknowledge Leading by Example winner (Recognition Program)	HR, CEO, VPPs, EDs

Quarterly	Submit Quarterly CQI Site Program Reports	EDs
	Conduct Corporate CQI Committee meetings	CQI
	Conduct quarterly incident and grievances reviews	CQI
	Complete Performance & Outcome (P&O) Reports	CQI
	Complete Census Reports	CFO, CQI
Biannually	Conduct Local CQI Committee/Local Advisory Board meetings (minimum 2x year)	EDs
Annually	Review/revise Emergency Safety Procedures Manuals	SC
	Review/revise NTF policies & procedures	VPs, agency staff
Every 3 years	Develop Long-Term Strategic Plan – current expires 12/31/2019	CEO, CSO, VPPs, Board
	Prepare for COA reaccreditation – most recent expires 9/30/2021	Internal agency-wide team
Ongoing	Submit COA Self-Reports per COA policy	CQI
	Conduct internal program reviews	EDs, QA staff
	Conduct external program reviews per contracts	VPPs, EDs

#### LEGEND

**CEO** -Chief Executive Officer

**COS** -Chief of Staff

**CFO** – Chief Financial Officer

**CQI** -VP of CQI & Training, Corporate CQI Committee

**HR** -VP of Human Resources

**VPP** -VP of Programs

**ED** -Executive Directors

**SC** -Safety Committee

## PQI 3 Roles and Responsibilities

Continuous quality improvement is the responsibility of all who serve the agency. All new staff and foster caregivers are provided with training on the current year's CQI Plan during orientation. Additionally, the CQI Plan and related reports are reviewed with staff regularly at staff meetings. The Annual CQI Plan is also posted at the NTF website for public viewing.

Staff assigned direct responsibility for implementing and coordinating the organization's CQI system are competent to engage people throughout the organization, collect and analyze data, communicate results and findings to key stakeholders, and implement internal and external evaluation methods. Their job descriptions determine the minimum education and experience levels required for the position. Coaching, supervisory sessions, and on-the-job training are used to support and further the skills required for successful day-to-day oversight of the system. In instances in which other personnel are asked to participate in specific CQI activities outside of their normal job duties, they are provided with group or individual training on relevant procedures and tools.

### CQI/QA Staff

The CQI team is led by the VP of Training and CQI. The CQI/QA staff serves as CQI advocates, mentors, and compliance monitors. Their work includes such activities as case record reviews, participation in local CQI committee meetings; facilitation of stakeholder focus groups; data aggregation, development of CQI reports; participation in satisfaction survey process; creation of new policies and procedures; and facilitation of training as necessitated by new state or contractual requirements.

### Training Staff

NTF's CQI team is unique in that it includes training staff. Training is one of the agency's core values: "developing and maintaining highly trained, committed staff and foster caregivers." Training is also a component that sets NTF apart from other child welfare agencies as a result of the number of annual mandatory training hours required by all staff, foster caregivers, interns, and regularly scheduled volunteers. Particular emphasis is placed on trauma-informed care, safety and risk management.

### Program Supervisors/Directors

Supervisors of direct service personnel and program directors also bear responsibility for ensuring CQI is at the forefront of daily operations. They are responsible for helping ensure the organization meets quality improvement, evaluation and reporting requirements. They help contribute to the collection and interpretation of data, and direct the program team in the use of client outcomes to improve service delivery.

## The Safety Committee

NTF's Safety Committee, led by the Chief of Staff, includes representatives from each program. It is a proactive team that provides timely information to prevent and manage potential risk management issues. The Safety Committee also oversees compliance with COA safety standards. As part of this work, the Committee provides every NTF site with emergency policies, detailed procedures, prevention measures, and guidelines for writing a site-specific emergency plan known as the Emergency Safety Procedure Manual.

## PQI 4 Performance and Outcome Measures

NTF's CQI system includes measures to build capacity, improve services, and meet reporting requirements. Both quantitative and qualitative indicators are used and performance targets are determined by staff and stakeholders to meet the various agency and contractual requirements.

*Note: Detailed descriptions and use of sample CQI reports produced from the following data sources and measures appear in section PQI 6 of this document.*

### Data Sources and Measures

#### Customized Performance & Outcome (P&O) Database

NTF uses a customized, staff-built Microsoft Excel database that allows the organization to store and track common service delivery data for all programs. Some of the inherent problems with data capture when working in multiple states are the differing contract requirements, performance measures, state regulations, and state-required case management systems. NTF programs use required systems where needed, while the NTF database allows the agency to maintain the ability to compare similar outcomes agency-wide.

The primary reports generated through the use of this database are Quarterly Performance and Outcomes Reports and Census Reports.

#### Relias Learning Management System (RLMS)

NTF employs a learning management system that provides online training and the capability to report on training in a multitude of ways.

RLMS reports generated by the training staff include training hours completed by specific individuals; compliance by departments, sites, and states; and agency-wide identification of overdue training by name, job title, and site location.

#### Incident Reporting Database

CQI staff maintains an Excel spreadsheet to track, log and report all NTF incident reports that document threats of harm to clients, staff, and other key stakeholders as they occur.

Incident Summary Reports can be generated at any time; however, they are routinely produced by the VP of CQI and Training on a quarterly basis.

### Online Satisfaction Surveys

Confidential satisfaction surveys are distributed on an annual basis to a wide range of NTF stakeholders: community stakeholders, clients (children and families), foster caregivers, and employees. All responses are entered online using a third-party survey software program to ensure anonymity.

### Online Suggestion Program

NTF offers a suggestion program that is designed for staff members to submit suggestions directly and confidentially to the human resources department through the agency's intranet. In addition to the online submission process, suggestions may also be received from the various satisfaction surveys and during supervisory meetings.

### Recognition of Staff Performance

During FY 16/17 an employee recognition program was implemented. "Leading by Example" is a quarterly initiative that solicits nominations from staff and managers for employees who have gone above and beyond their work requirements. An internal, cross-agency committee reviews nominations and determines the winner(s). Awards for winners include a framed certificate; an announcement and presentation photo on EmpNet, the internal website; and a gift card. Another component of the program is recognition of employee job longevity. On an annual basis, the HR department compiles a list of employees that have been with the agency in five-year increments: 5 years, 10 years, 15 years, and 20 years. Different awards are presented for each level of service, with a commensurate increase in the value of the gift card. Every recipient is presented with a lapel pin, a plaque (a customized item is presented for display for employees with 20+ years with the agency), a gift card, and an acknowledgement on EmpNet.

## PQI 5 Case Record Review

Client case records are maintained in locked filing cabinets at each program site in compliance with NTF and governmental policies. Access is limited to appropriate personnel. Additionally, it is important to note that all staff working with NTF, regardless of their work function, is required to complete annual training on HIPAA and confidentiality.

### Quarterly Site Case Records Review

Each quarter, unless required more frequently by contract, 20% of open cases and 4% of closed cases are reviewed by a team of NTF employees designated by the appropriate Program VP. The reviews are conducted to monitor accurate and complete documentation, appropriateness, and quality of services provided to clients. Case record review tools vary across the agency to comply with contractual or regulatory requirements. Regardless of the location, elements reviewed in the case records include the following at minimum:

- assessments
- contact and emergency information on persons served
- service plans
- appropriate consents
- progress or case notes or summaries
- evidences of quarterly case supervision
- relevant signatures
- service outcomes
- aftercare plans

*Example: A program site has 90 open records and 55 closed records. The program site reviews 80% of the open records (n = 72 records annually, 18 per quarter) and 16% of closed records (n = 8 records annually, 2 per quarter). A random sample of both open and closed cases is reviewed.*

Specific criteria for assessing quality issues may include:

- Services needed and provided or obtained
- Length of service
- Changes in status or level of service
- Need for continued service

- Compliance with mandated review indicators
- Timeframes

If deficiencies are found with record keeping, remedial training, corrective action plans or performance improvement plans as appropriate are developed by the appropriate Vice President of Programs and/or Executive Director and monitored for completion.

## External Audits

Regular reviews are conducted by the contract/funding agencies and/or community-based care lead agencies, independent financial auditors, health departments, and accreditation agencies as determined by contracts and mandates. The frequency and duration of the audits varies according to contractual stipulations. Depending on the nature and/or scope of a deficiency cited by an external review, NTF is required to develop a plan to correct that deficiency. Corrective Action Plans, if required, are submitted by the program's Executive Director and tracked closely by designated staff, program management, the Program VP, the CQI Committee, and the Cabinet.

Key findings of external reviews are included as a topic on the quarterly CQI reports submitted by each program to the VP of CQI and Training and discussed during the quarterly CQI Committee meetings.

## PQI 6 Analyzing and Reporting Information

### Data Management

In addition to systematically and reliably collecting, reporting, and analyzing CQI information, NTF has built data integrity into operational elements wherever possible within the agency. The Management Information System resides on a networked computer system. Information contained in the system is protected by the use of passwords, which must be changed on a 45-day basis, limited access security within the system using firewalls, account access privileges, anti-spam filtering of email and anti-virus scanning of all data. Files and email are backed up daily to an off-site location. Client case records are maintained in locked filing cabinets with access limited to appropriate personnel. Personnel records are maintained in locked filing cabinets at the corporate office and access is limited to HR personnel. Detailed information regarding data/information management is provided in the agency's Technology and Information Management Plan required per COA RPM 5.

### Operational Reports

Aggregated data reports that NTF routinely uses to analyze performance are prepared at minimum on a weekly, monthly, quarterly, and annual basis. They are designed to track and monitor identified measures, identify patterns and trends, compare performance over time, and compare results against benchmarks.

### Performance and Outcomes

The VP of CQI and Training develops quarterly P&O Reports on agency-wide metrics using data from the customized database. The reports are presented to management, the Cabinet, the Board, and are made available to other stakeholders. This information is studied to determine the effectiveness of programs in relation to contractual targets and national trends.

Data reported for the sibling programs includes:

- Percentage of Siblings Placed Together
- Average Length of Stay
- Average Number of Placements
- Number of Reunifications and with Whom
- Number of Adoptions

### Census Reports

Weekly census reports allow programs and management to track fluctuations in clients served. These reports are also developed for analysis of monthly, quarterly, and/or annual data. Reports on longer time periods provide a broader perspective for comparing performance over time, identifying trends, predicting future funding, and evaluating program effectiveness. Coupled with financial reports and other agency performance data, the Cabinet, Board, and other key stakeholders are able to make informed decisions about the fiscal viability of existing or new programs; potential for program expansion; staffing levels; and any needed improvements for marketing/recruitment strategies.

### Monthly Program Services Reports

Program services are addressed during monthly group and individual supervision between the Executive Directors and Vice Presidents. Each Executive Director is required to submit a monthly report. The Director's responses to the following topics serve as the foundation for discussion and actions to address areas of concern or recognition:

- **Budget Monitoring (if applicable)** – variance between projected and actual budget for the month and plan for the coming month to address the issue.
- **Stakeholder Relations** – any difficulties, problems, issues, major meetings with funding or referral sources. Also positive aspects of these relationships and any complaints from families, clients, community, or other customers and your response.
- **Staff/Peer Issues** – any disciplinary actions, new hires, resignations, open positions, and morale problems, along with a plan to address these concerns. The names of any staff member(s) that have done an outstanding job and why. Grievances, incidents, or accidents involving persons serviced or personnel.
- **Program Issues** - including new programs, changes to existing programs, critical incident reports, and other difficulties that impact the smooth operations to your program's services.
- **Monitoring/ Compliance Issues** - any issues related to current or upcoming program audits from outside sources, results of chart audits and any issues related to compliance. Any corrective action plans if/when appropriate.
- **Quality Improvement Issues** - any newly identified QI issues, progress/update on existing issues, and needs you may have from NTF in addressing these issues.

### Mandatory Training Compliance Reports

Every individual serving Neighbor To Family is required to complete a number of annual training hours per job description or role served with the agency. These courses, whether live or online, must be completed by an assigned deadline. Compliance for training is monitored closely by the training department, management and the CQI Committee to 1) measure individual and program performance 2) reduce the potential for risks to staff or clients and 3) to increase the knowledge level of all to provide the best possible level of care. Training hours for all personnel and foster caregivers are reviewed as part of annual performance evaluations. Those who are out of compliance may be placed on corrective action plans.

### Satisfaction Survey Reports

Annual surveys are designed to assess NTF's performance and solicit areas for improvement. Completion of surveys is optional and they are submitted confidentially. The VP of CQI and Training is responsible for providing a summary of results, which is shared with management, program staff, CQI committees, Cabinet members, and the Board. Reports are also made available to stakeholders and survey respondents by request or via the agency's website.

**The community stakeholder survey** solicits input from referring agencies, schools, funders, law enforcement and other individuals that are involved with NTF. Requested feedback focuses on such areas as staff knowledge, effectiveness of services, and accessibility.

**The employee survey** gathers information about personnel's perception of topics such as frequency and quality of supervision, working conditions, benefits, and training.

**The child/youth survey** gathers feedback from children age nine and older. It bears questions regarding feeling safe, relationships with staff, and experience with the foster caregiver.

**The family survey** seeks input from biological family members, relative caregivers, and non-relative caregivers on such topics as staff knowledge and engagement; accessibility to services; and effectiveness of services.

**The foster caregiver survey** requests input regarding topics such as staff support, the quality of services provided, and interaction with biological parents.

**The family preservation survey** is provided to diversion program clients upon case closure. Results are shared with program staff, the funding agency, and senior management.

### [Suggestion Program Reports](#)

Suggestions made by staff through the suggestion program, satisfaction surveys, or other means are reported for consideration during CQI Committee meetings by the VP of Human Resources. If a determination is made that the suggestion will be implemented by the agency, the individual will receive public recognition if he or she chooses to be acknowledged. Suggestions proposed during supervision sessions that require no expense and are of a local nature are often immediately implemented and locally recognized.

### [Quarterly CQI Program Reports](#)

Executive Directors are required to submit quarterly CQI reports to the VP of CQI and Training that summarize information discussed during monthly supervision and program meetings. The reports include the following types of information, which are reviewed during quarterly CQI committee meetings:

- Local CQI committee meeting dates
- Case record reviews and any related corrective action plans
- Progress against program goals
- Program issues
- Quality improvement initiatives
- External audits and any related corrective action plans
- Contract Compliance

### [Quarterly Incident Report Summary](#)

The Quarterly Incident Report Summary, prepared by the VP of CQI and Training, includes the number of incidents documented during the quarter, the type, the sites, and the percentage of reports received within 24 hours. It is designed to help identify problematic trends and address any areas of concern or implement required procedural changes. Key data from the report is discussed during quarterly CQI Committee meetings, quarterly risk management reviews, Cabinet meetings, and Board meetings.

NTF adheres to an incident reporting policy that includes specific protocols for reporting, which includes requirements for investigation and escalation to upper management and/or legal counsel as required. All staff and foster caregivers must complete an online NTF incident reporting course as an initial training requirement.

#### Quarterly Incident, Accident, and Grievances Risk Reviews

On a quarterly basis, the CQI Committee conducts a risk management review that evaluates the following areas:

- Facility safety issues
- Serious illness, injuries and deaths (as reported through incident reporting process)
- Cases where a person served was determined to be a danger to him or herself or others.
- Service modalities or other organizational practices that involve risk or limit freedom of choice
- All incidents related to administering, dispensing, or prescribing medications

#### Monthly and Quarterly Safety Reviews

The Safety Committee meets on a monthly basis. The Committee's timely recall information, weather alerts, and key safety tips are provided on an ongoing basis to help ensure a safe work environment. The Safety Committee promotes health and wellness throughout the year and assists with safety-related training. Additionally, at each program site, team members conduct and document quarterly site inspections, lock-down drills, and fire drills to ensure staff are aware of and prepared to respond to potential safety hazards and emergencies.

#### Annual Risk Management Reviews

In addition to quarterly reports, the VPs or Directors of each department prepare an annual report for review and action during the Board's annual strategic planning meeting. Reports include updates, as appropriate, in the following areas:

- Compliance with legal requirements
- Technology and information management
- Insurance and liability
- Health and safety of administrative and service environments
- Human resources practices
- Contracting practices and compliance
- Client rights and confidentiality issues
- Financial risks
- Public relations, branding and reputation
- Conflicts of interest

## PQI 7 Using Data

### CQI as a Holistic System

Findings generated by the CQI system allow the organization to monitor progress, effectively manage programs, support staff, serve clients using best practices, meet or exceed funder requirements, and promote the agency and its services.

The system is woven throughout the agency to keep quality and improvement clear priorities for NTF's performance at all levels. By using findings and feedback from CQI data throughout the year, the agency is able to use relevant information to develop solutions, replicate effective practices, motivate staff, improve performance and services, and prevent or eliminate identified problems.

### Corrective Action and Improvement Plans

Information collected from CQI activities is used to develop corrective action plans and performance improvement plans when issues have been identified that involve ongoing effort and monitoring. Best practice models are used in improving performance in those areas that are deficient.

When developing Corrective Action Plans and Performance Improvement Plans, those involved review and make suggestions for revisions of the following:

- Organization policies and/or procedures
- Personnel assignments
- Personnel training
- Contracts
- Services

Corrective Actions Plans and Performance Improvement Plans include the following information:

- Background information indicating a plan is needed
- Action to be taken
- Person responsible for overseeing action
- Data to be completed
- Date completed

Corrective Actions and Performance Improvement Plans are tracked through Quarterly CQI Reports. At the end of the determined completion date of a Corrective Action Plan, the VP of Programs and Executive Directors evaluate if an implemented change was an improvement, and then provide their findings in the Quarterly CQI Reports.

### Continuous Monitoring of the CQI System

The CQI system at NTF is monitored on a regular basis by organization leaders, senior management, and supervisors. This is performed through regularly reviewing and discussing CQI data and reports during staff, management, CQI, and Board meetings. This ongoing attention to the system includes evaluating the relevance and value of collected data, analyzing the components of the CQI system, and identifying the need for improvements to processes and procedures.

### Annual CQI Report

The Annual CQI Report, which is completed by the VP of CQI and Training at the end of the fiscal year, is one of the most significant tools for NTF's CQI process. It completes the current CQI cycle by summarizing key CQI activities that have been completed, are ongoing, have been resolved, or require further work. The CQI Annual Report is distributed to all programs and is made available online through NTF's internal documentation management system. It is also posted on the agency's website for public access and is available by request.

The findings in the Annual Report are used to form the framework for the CQI cycle for the following year. This close linking of the CQI Plan and the CQI Report allows the agency to maintain the continuous quality improvement loop of Plan, Do, Check and Act