

# Tennessee Baptist Children's Homes

## **TBCH PQI Plan**

### **PHILOSOPHY**

The mission of TBCH is to minister the love of Jesus Christ to children and families in crisis. One of our core values is excellence: we believe we should give God our very best in every aspect of our lives. Because of these two statements, TBCH has implemented a Performance Quality Improvement (PQI) program. Our PQI program promotes excellence and continuous improvement in all areas of our ministry.

It is the goal of PQI to provide a process designed to identify opportunities to improve client services, outcome measures, community and stakeholder involvement, client satisfaction, personnel satisfaction and retention and environmental safety and security.

The PQI program is broad based and includes all employees, the Board of Trustees, clients, consumers and external stakeholders.

This PQI Plan is designed to be reviewed on an ongoing basis and updated when needed, but no less than annually.

### **PQI STRUCTURE**

The PQI Coordinator is responsible for overseeing the PQI program process and organizing and coordinating all PQI activities. These activities include the review of management outcomes, client outcomes, and program/service delivery effectiveness. The PQI Coordinator also compiles, creates and disseminates the annual PQI Report. The annual report is sent to all internal stakeholders, given out at the PQI Committee Meeting and reported to the Board of Trustees. The annual PQI Report is reported on the TBCH website.

The PQI Committee is comprised of the Senior Staff (President, VP Finance, VP Foster Care, VP Ministry Advancement, VP The Ranch at Millington, VP Brentwood Campus and VP Chattanooga Campus, VP of Family Care and the Executive Office Coordinator) along with the PQI Coordinator. This committee is responsible for assigning, implementing and reviewing activities that guide and improve staff performance from before the time a child comes into our care until the child is discharged from our care.

In addition, the following stakeholders will be invited to participate in each PQI Committee meeting: at least one Trustee, at least one TBCH foster parent, at least one TBCH employee not otherwise on the Committee, a TBCH volunteer, a DCS employee and one of the following: a TBCH advocate, a local school system employee and an employee of the local juvenile court system. The PQI Committee meets quarterly on one of our residential

campuses. This is to ensure that outside stakeholders and other TBCH employees from across the state are included in the meetings and heard from when available.

During the quarterly meeting, the committee reviews data summaries created by the PQI Coordinator, reviews survey data from various surveys and reviews Improvement Plans as needed.

Improvement Cycle- when a change is needed, TBCH uses a Plan, Do, Check and Act model utilizing the following forms: The Plan document, The Do document and the Check and Act document (all attached). The PQI Committee will monitor the improvement plan and/or corrective action plan.

The PQI Flowchart (last page) is a diagram that captures the PQI flow throughout TBCH and the important components of the improvement cycle:

- Flow of information is 2-way and transparent.
- Information is collected from all available sources, both internal and external.
- Service improvements are made based on data collection, evaluation and action.
- Overall evaluation is based on expectations and targets from strategic planning, program reports and service goals.

## **STAKEHOLDERS:**

### **INTRODUCTION TO PQI and REVIEW OF PERFORMANCE DATA**

Board of Trustees – New members to the Board of Trustees receive an introduction to PQI with the PQI Plan at their orientation in December.

Each month the Board of Trustees is emailed the monthly financial statements. Each member also completes a ‘Conflict of Interest’ questionnaire annually. These will be tallied and presented to the Risk Management Team for review at their quarterly meeting. The results are also presented to the Board of Trustees. At least one Board member is invited to participate in the quarterly PQI Committee Meeting.

Employees – Annually, staff are asked to complete a staff satisfaction survey. These results are compiled by the PQI Coordinator and reviewed by the PQI Committee, who will determine areas of strengths/improvement/focus and develop an action plan if needed. The results and/or action plan is sent to all TBCH employees.

Additionally, employees are asked to complete a SWOC (Strengths, Weaknesses, Opportunities, and Concerns) Analysis annually. These results are compiled by the PQI Coordinator and presented to the President. The President takes these results into consideration when developing the Strategic Long-Term Plan. These results are also presented to the PQI Committee to determine areas of strengths/improvement/focus and develop an action plan if necessary. SWOC results are emailed to all staff by the PQI Coordinator. At least one staff member not already on the committee is asked to participate in the quarterly PQI Committee Meeting.

New employees of TBCH are given PQI Training (via PowerPoint presentation) by the PQI Coordinator and given the PQI Plan at their orientation.

Children and families served – At time of discharge, both parent/guardian and child receive an exit interview. These are completed anonymously and placed in a sealed envelope to be delivered to the President and then to the PQI Coordinator. These results are compiled

quarterly and reviewed by the PQI Committee. The PQI Committee will determine strengths/improvements needed and develop an action plan if needed.

Foster parents are also given an annual survey to complete. Results are compiled by the PQI Coordinator and presented to the PQI Committee. At least one foster parent is invited quarterly to participate on the PQI Committee. Foster Parents are given an informational letter about PQI at their last PATH (Parents As Tender Healers) class.

Volunteers and Community Partners – Volunteers and Community Partners are informed via our website of the work we do in our community, upcoming events, financial information and the Annual Report. A Volunteer is invited to participate in the quarterly PQI Committee Meeting. All Community Partners and all stakeholders can also access our PQI Plan and PQI Annual Report on the TBCH website.

## **MEASURES AND OUTCOMES**

The TBCH Executive Staff and the Board of Trustees monitor the financial stability of TBCH very closely. Monthly financial statements including the Balance Sheet, Statement of Support, Revenue and Expenses and Consolidated Budget are sent monthly to all Board members as well as Executive Staff and are reviewed at Executive Committee Meetings as well as the semi-annual Board Meetings.

Incidents and Accidents and Workers Comp Claims are reviewed quarterly at the Risk Management Meeting and annually presented to the Board of Trustees at their May Board of Trustees Meeting. Additionally, each current board member and administrative staff will annually complete and sign the Conflict of Interest Questionnaire whose results are presented to the Board at the same May meeting.

The following are measured for the impact of our services on our clients: CGAS (Children's Global Assessment Scale) for general functioning, Discharge Reasons and Spiritual Decisions. These are reviewed at least one per quarter. Clients Served and Demographics are reviewed at least annually.

Peer Reviews - During annual peer reviews, licensing regulations are checked as well as facility and vehicle inspections for safety and policy adherence. Case record reviews are accomplished quarterly and are monitored by the PQI Committee. Annually, the Peer Review Team completes a case record review of personnel files. 48% (based on a case record load of 100 to 199 case record numbers annually) of all case files are inspected annually. This includes residential, foster care and closed files. Case record reviews are also accomplished through KaleidaCare, our client database. At the conclusion of the Peer Review, the PQI Coordinator writes a report and presents it to the PQI Committee. These results are emailed to all staff.

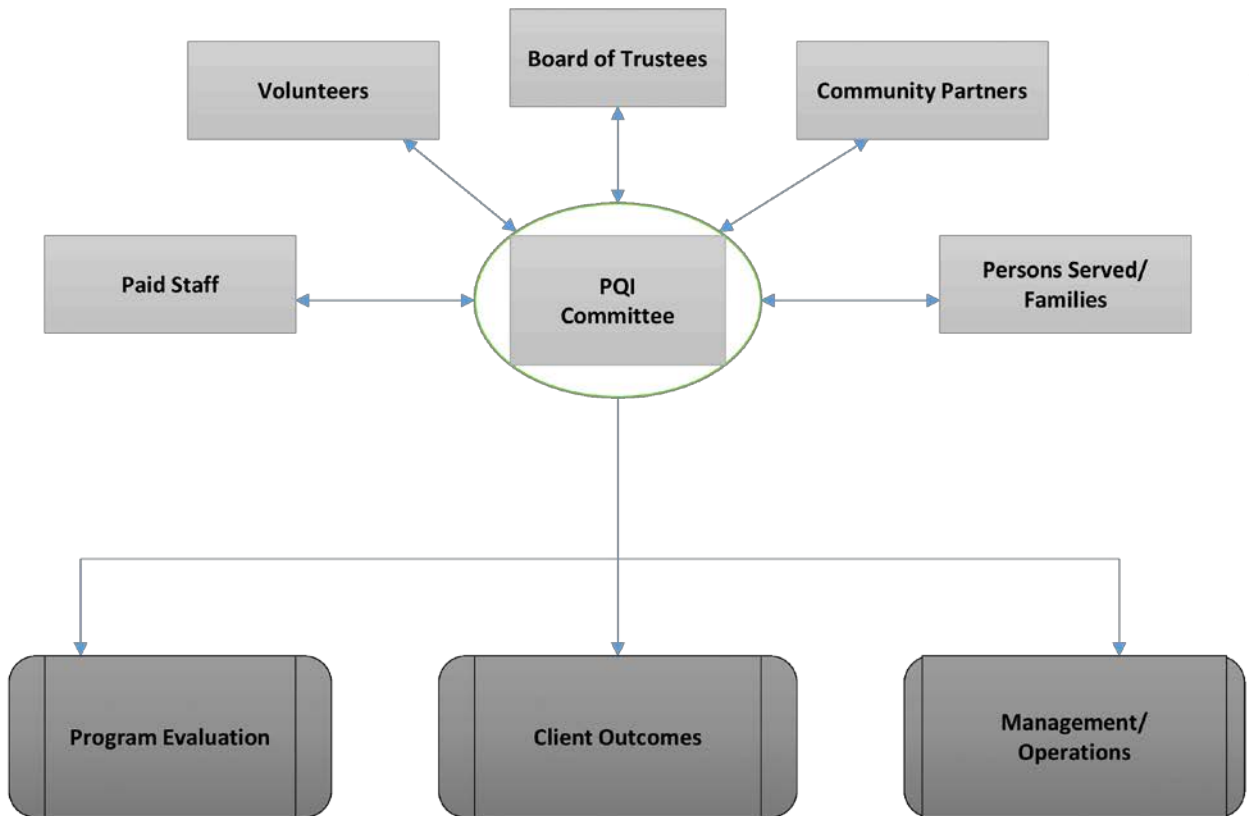
TBCH is also monitored by the State of Tennessee for licensing and contract purposes. There is also a voluntary review conducted every four years by the Council on Accreditation.

Surveys - Satisfaction surveys are given and monitored for employees as well as residents, foster parents and houseparents. This is in addition to the annual SWOC (strengths, weaknesses, opportunities and concerns) Analysis.

Risk Management meetings are held quarterly and incidents, accidents, insurance and liability, legal requirements, health and safety, and financial risks are some of the items that are tracked and reviewed.

Other Reviews- The Policy Review Team will meet at least every three years but may meet more often to review all TBCH Policies. This team will include various TBCH team members such as houseparent, social worker, foster care, state office, etc. The team members will correspond to the departments' policies that they are reviewing. Meetings may be done via Skype or other digital meeting platforms. Any proposals for changes or additions will come before the President and the PQI Committee before going to the Board of Trustees for approval. This team will not meet during the re-accreditation year.

# Tennessee Baptist Children's Homes Performance Quality Flow Chart



# Improvement Plan

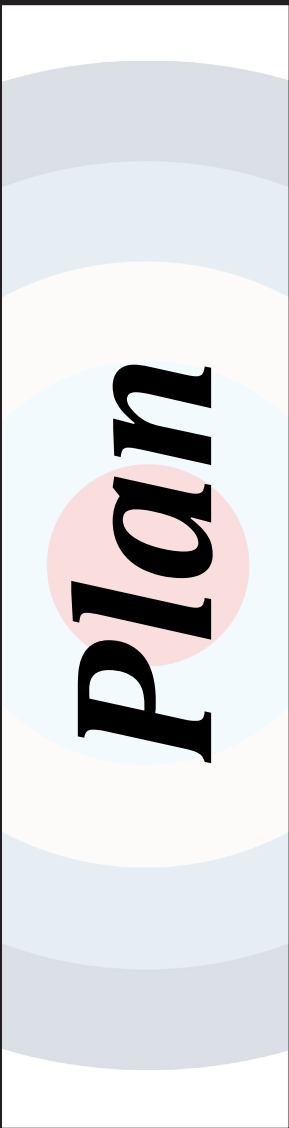
*Performance and Quality Improvement*

Page #



Improvement Plan Title:

Improvement Plan Date:



Briefly describe the opportunity for improvement and what information supports this need.

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Describe the success indicators; how will you know that the proposed actions were effective?

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What data supports the need for this change?

Blank space for providing supporting data.

# Improvement Plan

*Performance and Quality Improvement*

Page #



Improvement Plan Title:

Improvement Plan Date:

The word "DO" is written in a large, bold, black serif font. It is centered within a light blue circle, which is itself centered within a light pink circle. This graphic is set against a background of horizontal wavy bands in shades of blue and white.	Action Item	Responsible Person	Cost/Resources	Target Date	Actual Date	Success Indicators/ Comments

# Improvement Plan

*Performance and Quality Improvement*

Page #



Improvement Plan Title:

Improvement Plan Date:

**Check & Act**

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.