



Cameray
Child & Family Services

**PERFORMANCE AND QUALITY
IMPROVEMENT PLAN 2019**



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1. Cameray's Philosophy of PQI

Cameray Community Fund demonstrates a commitment to continuous performance and quality improvement (PQI). It is Cameray's utmost priority to demonstrate organizational excellence, and this priority is embedded in the organizational culture, through the Board of Directors, the management team, the front line, and the administrative staff. This priority is evidenced by our Long Term Plan, which encompasses broad goals and expectations of continuous improvement. These expectations include excellence in organizational performance (financial and governance), efficiency and efficacy, program/client outcomes, workplace satisfaction, and a stellar reputation in the community.

Cameray's PQI plan encompasses all programs and services, and includes ongoing collection, monitoring, and analysis of data, and creating improvement plans across the spectrum. Examples of data monitored include client outcome measures and evaluations, stakeholder surveys, case record reviews, budget analysis, and personnel questionnaires. The importance of PQI is embedded in all layers of organization functioning, and begins for all staff and Board members at orientation with the Executive Director explaining the process and function of PQI and stressing the importance of quality client service. It then continues for all staff and Board members through regular reviews and analysis of data, and the creation of improvement plans. Improvement plans are conducted in a positive manner, and staff are supported and inspired to continuously improve the quality of services and organizational functioning. Long and short term planning to improve organizational excellence is a process that involves all levels of the organization. For example, every effort is made to have many staff persons represented in the action items of annual short term plans.

2. PQI Structure

The PQI structure is organization wide and includes all programs and services. The plan establishes that all staff and Board members are educated about the PQI process and what it means for the agency. PQI efforts are overseen by a PQI Committee consisting of management, administrative, and front line staff. This committee meets monthly to review and analyze data, identify needs for improvement, and create improvement plans, with input from staff, Board members, clients, volunteers, and community partners. (See Figure 1: Cameray PQI Flow Chart on page 2).

The PQI Structure can best be described as a continuous feedback loop of data collection, analysis, planning for improvement, implementation of improvement plans, communication of results, and evaluation of results through further data collection and analysis. (See Figure 2: Cameray's Steps in the Improvement Cycle on page 3).

FIGURE 1: Cameray PQI Flow Chart

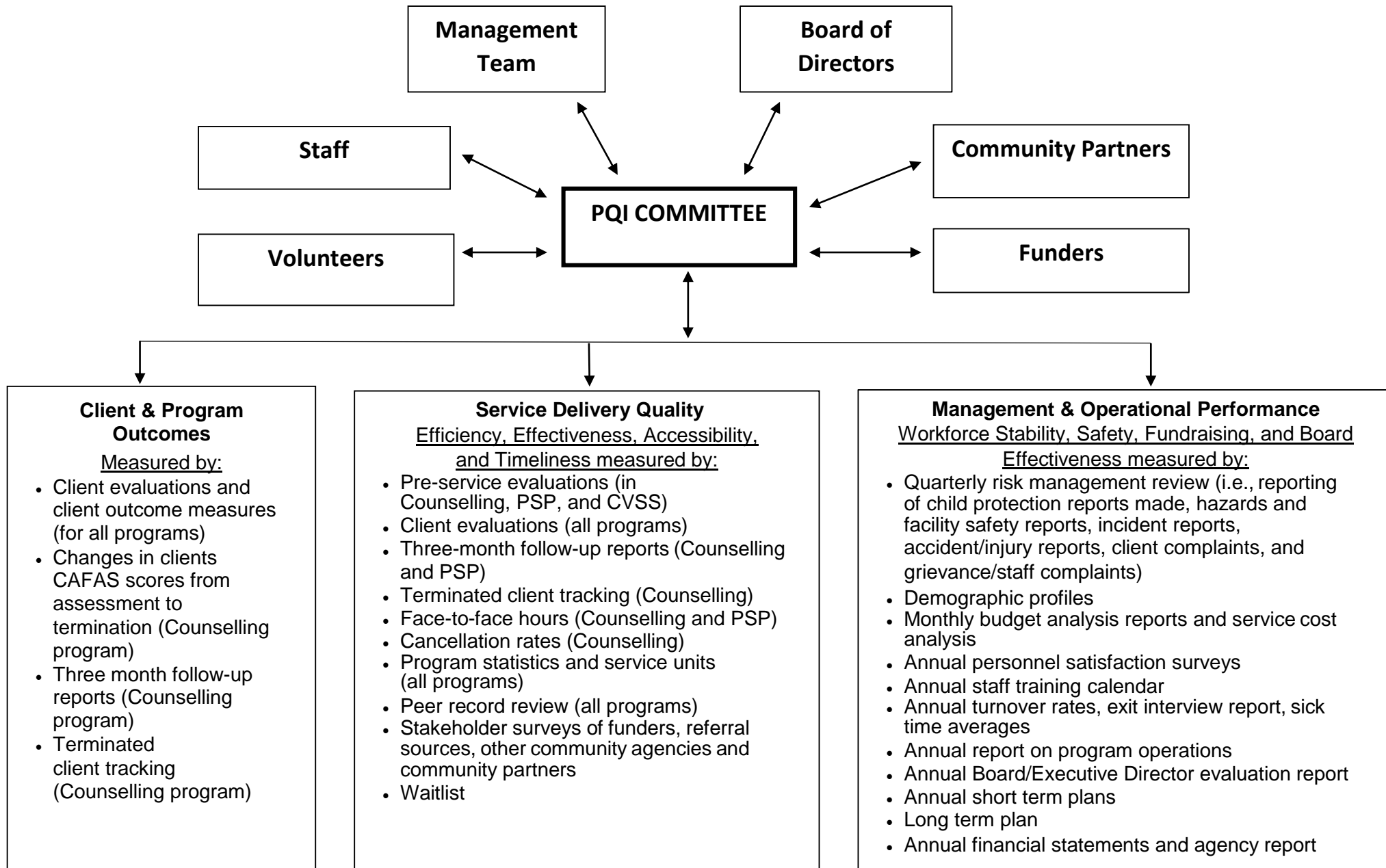
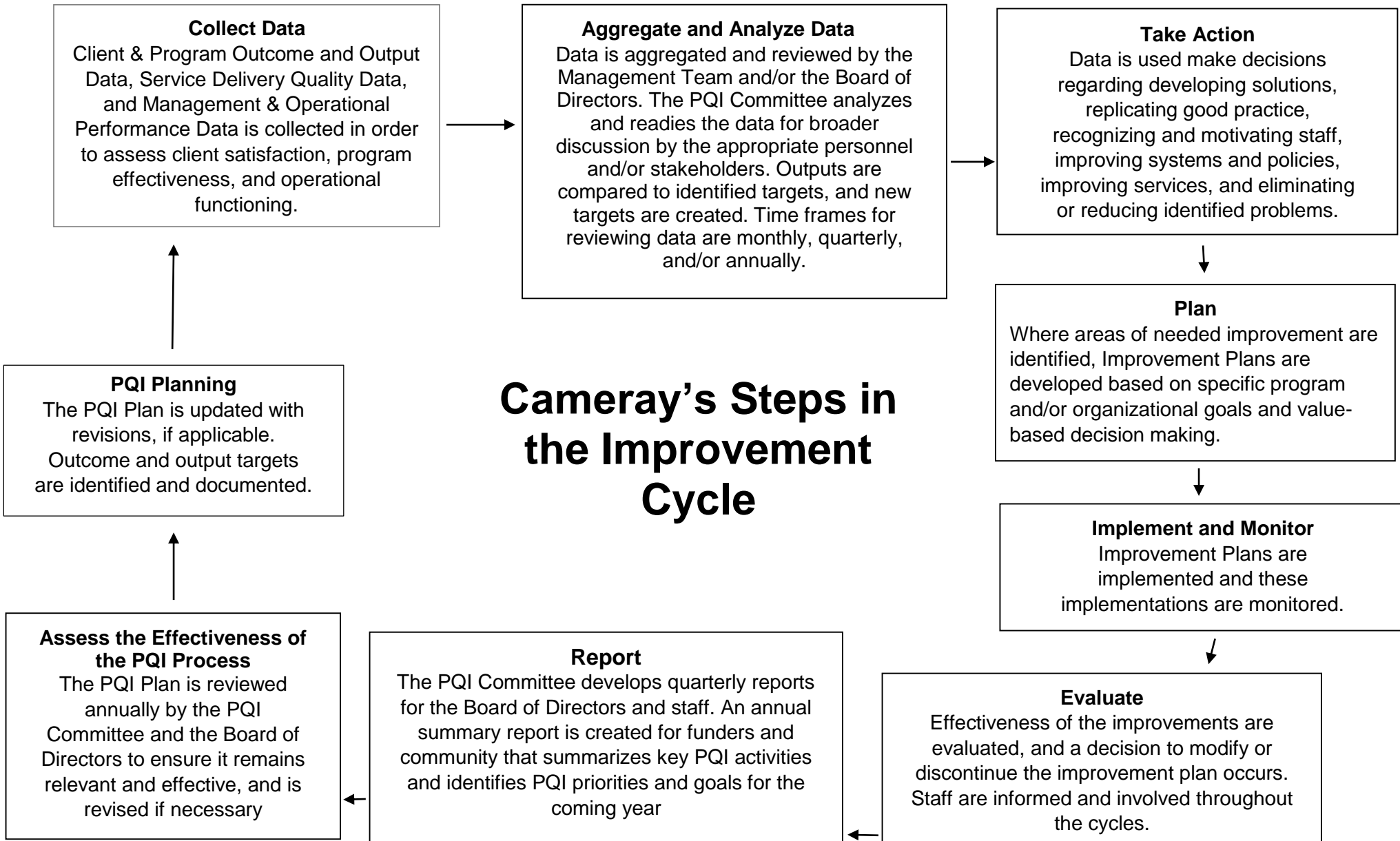


FIGURE 2: Cameray's Steps in the Improvement Cycle



3. Stakeholder Participation

All of Cameray's stakeholders are involved in some way in PQI. Our stakeholders are defined as anybody involved in and/or impacted by the services we provide. This includes Board members, staff, clients, funders, referral sources, collaborating agencies, volunteers, contract staff, and community partners.

The PQI Committee, made up of management, administrative, and front line staff, is trained in PQI procedures and meets monthly to review reports and makes plans for improvement. PQI information is reviewed in weekly management meetings and regular meetings of administrative staff. The Board of Directors reviews all PQI reports, develops the agency's Long Term Plan from this information, and supports any changes made as a result of feedback from the PQI process. Staff at all levels are involved in the creation and implementation of Long and Short Term Plans, in quarterly case record reviews, in reviewing information gathered from various PQI reports in regular team meetings, and in implementing improvement plans.

Clients are a critical source of information for PQI. They are involved in the creation of their own goals for service, and they provide valuable information through evaluations and outcome measurement tools. Indicators of success are both qualitative and quantitative.

Funders participate in the development of outcomes and outputs through a collaborative process of developing monthly statistic reporting processes, and informing our outcome measures through our contractual requirements. They also review program strengths and struggles, outcome measure reports, and success stories through annual contract review meetings.

Finally, external stakeholders such as funders, referrals sources, and community partners are also involved in the process through participating in annual stakeholder surveys, and are provided with our Annual Report with information on PQI activities, planning, and goals.

4. Measures and Outcomes

Cameray's PQI process is reliant on data collection and analysis in order to determine areas of strength and areas in need of improvement. Depending on the type of data, it may be compiled monthly, quarterly, or annually. The data collected covers all aspects of organization and program functioning, including client and program outcomes and outputs, service delivery quality, and management and operational performance. The information compiled at all levels is taken into consideration as the organization moves forward with our strategic plan, the progress toward which is also measured annually.

A. Client and Program Outcomes

The success of Cameray's programs is measured by client outcomes and satisfaction. This is measured in a variety of ways. We provide clients with pre- and post- outcome measures in all our programs. The outcomes that are measured are determined jointly by funders and program management in order to reflect the purposes and mandates of the programs. In addition, clients in the Counselling Program are rated on the CAFAS (Child and Adolescent Functional Assessment Scale) at assessment and closing to determine improvement in levels of functioning across eight subscales over the course of the program. Clients in all programs are provided with evaluation forms at the time of file closing, or annually in the case of longer-term programs, in order to provide feedback on the effectiveness of the service and their experience with Cameray. In addition, clients are given a follow-up telephone call to give them further opportunity to provide feedback, three months after their file is closed. Finally, in the counselling program, all client files are tracked at the time of termination to determine if therapeutic goals were reached.

B. Service Delivery Quality and Program Results

The quality of service delivery is also measured through a variety of means. Clients are given an opportunity to provide feedback on their experience at several points of contact. They are given a pre-service evaluation at their first session, at which point we are able to monitor any barriers to service they may have experienced, and how long they may have been on a waitlist. As described above, clients are also provided with an evaluation form at the close of service, and a three-month follow-up call after termination. From this feedback, we are able to monitor the clients' experience of service delivery quality. Community partners, collaborating agencies, funders, and referral sources are also surveyed annually to provide feedback on their perception of Cameray's service quality.

In addition, to monitor program results, closed client files are tracked for information regarding timeliness of assessment reports, and numbers of clients reaching their goals, completing their service contract, and remaining in the program beyond 30 days.

Reports are compiled annually for each counsellor and aggregated by program. Program statistics and service units are tracked monthly for our funders, and this includes outputs such as numbers of sessions attended, and hours of supervision, case management, and report writing. Face-to-face hours are tracked per worker to ensure contractual requirements are being met, and feedback on face-to-face hours is provided regularly to staff. A summary of face-to-face hours and cancellation rates are provided to staff quarterly and compiled into annual program reports.

In order to monitor quality of record-keeping, case record reviews of client files are conducted quarterly, and the results are discussed in depth at management and staff meetings. The review includes a comparison of current to past performance, with the goal of continuous improvement.

In order to monitor continuous staff development, professional development is tracked through both an annual training calendar for the agency and individual records of professional development and training of each staff member.

C. Management / Operational Performance

In order to measure operational performance, data is compiled and analyzed on a regular basis. For example, monthly budget and service cost analyses are reviewed by the Board at regular meetings. Risk management is monitored quarterly with a report that outlines accidents, incidents, grievances, and facility safety issues. Human resource issues are monitored through annual personnel satisfaction surveys and stay interviews, annual reports of staff turnover, exit interviews, and sick time taken, and a Human Resources review is conducted annually. In addition, any feedback from external review processes, such as accreditation, is integrated into the PQI process.

The feedback is reviewed at management and Board levels, as well as by the PQI Committee, and improvement plans are created, implemented, and evaluated. Finally, improvement in operational functioning is embedded into Cameray's four-year Long Term Plan. For example, our current plan focuses on Board development, financial diversification and fundraising, increasing efficiencies, and broadening Cameray's reach in the community.

D. Long-Term Plan

Once every four years, Cameray conducts a long term planning review that clarifies the mission, values and mandates of the agency. As part of this process, strengths and weaknesses of the organization are identified, and current trends and community dynamics are assessed. This information is derived from the measures and data described above. From this assessment, the priorities, goals, and anticipated outcomes for the agency over a four-year timeframe are developed. The process is a joint endeavour by the Board of Directors, management, and program staff.

Cameray completed its most recent Long Term Plan in 2018 and we are working toward goals for the agency from 2018 to 2022.

In order to achieve the goals set out in the Long Term Plan, the Board of Directors, management team, and program staff each develop short term plans on an annual basis. These plans are derived from the priorities and goals of the Long Term Plan as well as feedback from consumer surveys, annual reports of data collected (described above), and observations of staff and Board members. The short term plans build on the achievement of goals from the previous year. The program staff's plans are divided into tasks which are designated to a person or persons to complete by an established timeline. The progress of these goals are addressed quarterly by the management team and by program staff and reported back to the Board annually, or as needed in order to further the Board's work. The Board's plans are addressed monthly at Board meetings as a standing agenda item.

5. PQI Operational Procedures

Cameray's PQI procedures are based on a continuous feedback loop which begins with data collection and aggregation from a variety of sources, review and analysis of data, widely communicating the results, identifying areas of needed improvement, and basing implementation of improvement strategies on the results. The new results are then collected, aggregated and analyzed, and the cycle continues, with staff remaining informed and involved throughout.

Data is collected from a wide variety of sources, as described above. The data is then reviewed in a variety of forums. All Board meetings, management meetings, and team meetings have PQI as a standing agenda item, and data is reviewed and discussed at the appropriate forum. In addition, a PQI Committee consisting of management, administrative, and front line staff meets monthly to review PQI reports and create and monitor Improvement Plans. The work of the Committee is compiled into a quarterly report that is shared with the Board of Directors and all staff. Finally, an annual summary report of PQI activities, priorities and goals is created and shared with community stakeholders.

When reviewing data and communicating results, the goal is always continuous improvement. The findings from the PQI activities are used to build on the existing strengths of the programs, to recognize and motivate staff, and to reduce identified problems wherever possible. Goals and plans are made for improvement, and these are documented in Improvement Plans, which are compiled and monitored by the PQI Committee. Improvement Plans are followed up regularly by the PQI Committee, and the improvements are evaluated and modified as necessary. Staff, Board, and other stakeholders are informed and involved, as appropriate, throughout the cycle.

Finally, the PQI Plan itself is reviewed annually by the PQI Committee and at the board level to ensure it remains relevant and effective. This assessment includes any barriers to and supports for the implementation of the PQI Plan. The PQI Plan is revised annually if necessary.

For detailed description of the PQI Operational Procedures, please refer to the PQI Procedures Manual.