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**PERFORMANCE AND QUALITY
IMPROVEMENT (PQI) PLAN
FOR
CONSUMER CREDIT COUNSELING
SERVICE OF FORSYTH COUNTY, INC.
DBA Financial Pathways of the Piedmont**

Revised May 2009
Updated August 28, 2009
Updated November 2013
Revised November 2016

Consumer Credit Counseling Service of Forsyth County (CCCS-FC) DBA Financial Pathways of the Piedmont

Performance and Quality Improvement Plan

1. Introduction and Philosophy

CCCS-FC is committed to evaluating its organizational systems and program performance and using its findings to improve agency operations, service delivery, and the achievement of personal outcomes for the people we serve. The Performance and Quality Improvement (PQI) Plan has been developed to assure that we have organizational systems that support open communication and continuous learning and improvement throughout everything we do. By continually monitoring and improving these organizational systems, we can enhance our responsiveness to the needs of those we serve.

The Board and management of CCCS-FC promote a culture of shared values and leadership that is inclusive of all of our stakeholders, most importantly, our primary stakeholders- the people who come to us in need as well as our employees; volunteers; funders; donors; accreditation, licensing and monitoring agencies; non-profit, business and government partners; and the communities that we work with. We are strengthened by our partnerships with stakeholders and collaborate with them as we continuously monitor, evaluate, and improve the quality of the services provided.

CCCS-FC defines quality as exceeding the expectations of both the people we serve and of our stakeholders. Our goal is to be the leader of best practices. The PQI Plan includes a comprehensive set of practices that measure quality standards on a regular basis. It is the goal of these measurement tools to assess and improve organizational and program performance relative to its impact on the people served.

2. Stakeholder Involvement

CCCS-FC relies upon stakeholder feedback and involvement for the Performance and Quality Improvement process. The following chart demonstrates how are stakeholders are able to provide feedback and data to the PQI process.

3. PQI Infrastructure

4. Model of Change

5. The Process

6. Measures:

A. Impact of Services on Clients

B. Quality of Service Delivery

C. Management and Operational Performance

D. External Review Processes

Defining and Measuring Quality

Measurement Tools

- ✚ Peer Reviews completed quarterly
- ✚ Case Reviews completed quarterly
- ✚ Supervision of Team Members completed monthly
- ✚ Client Satisfaction of Services completed quarterly
- ✚ Annual Work Plan reviewed quarterly
- ✚ Annual Staff Goals reviewed quarterly
- ✚ PQI Program Summary completed quarterly

Performance and Quality Improvement Team

The PQI Oversight Team shall be comprised of CCCS-FC leadership staff, with the President/CEO serving as Chair of the PQI Oversight Team. Each agency division shall have a PQI Division Team composed of division staff. A Division staff member will serve as Chairperson of their PQI Division Team. Each Division Chairperson shall submit their Division's quarterly reports to the President/CEO of CCCS-FC. The emphasis on the activities of the PQI Division Team is program review. It is meant to be a collegial experience where those familiar with a program and its operations review its goals, objectives, activities and procedures.

There are three agency divisions that have representation on the PQI Oversight Team; Money Management; Financial Education; and Housing.

Purpose of PQI Division Team Meetings

Each Division within CCCS-FC is expected to hold quarterly Division Team Meetings. The purpose of these meetings is to review the results of previously administered measurement tools, identify upcoming deadlines, review staff needs, and consider community concerns, requests, or un-addressed needs. Division Team Meetings are also the time to discuss any concerns or questions that they may have of the PQI Oversight Team or the PQI Oversight Team may have of the program.

Purpose of PQI Oversight Team Meetings

Performance and Quality Improvement (PQI) Oversight Team meetings are designed to give leadership team members an opportunity to reflect on the quality improvement activities that are being done as part of their daily work. The PQI Oversight Team is responsible for monitoring and evaluating organizational and program performance relative to their impact on the people served. The PQI Oversight Team is encouraged to identify examples of positive practice and promote their use throughout the organization as well as recognizing and addressing areas in need of improvement with the security of knowing they will not face repercussions.

The PQI Oversight Team will meet quarterly and will review the PQI Division Summary Tool that is submitted by each Division on a quarterly basis. In reviewing the PQI Division Program Summary Reports PQI Oversight Team members can identify areas for improvement, create action plans to address them, monitor and report their progress, and demonstrate how the change had a positive impact on the people served and what they learned by going through this process. The PQI Oversight Team meetings allow members

the opportunity to reflect on and address the trends, developments, issues and challenges impacting division staff's ability to help the people served to achieve their outcomes.

Team Membership and Roles

All employees and volunteers, where appropriate, are expected to actively participate in their Division's quality improvement activities. Participation by other stakeholders is included through the formal and informal collection of information from team meetings, satisfaction surveys, advocacy groups, advisory councils, community networking, and work groups. The PQI Division and Oversight Teams will have a designated Team Leader/Secretary. The PQI Oversight Team Leader will be responsible for creating a meeting agenda, promoting quality improvement efforts, and ensuring the reporting of findings of the PQI Oversight Team to CCCS-FC internal and external stakeholders. The Team Leader/Secretary will be responsible for recording the minutes of the meetings.

The PQI Division Team Leaders are: Kathy Banks: Money Management; Shenell Thompson: Financial Education; Phyllis Caldwell: Housing. The PQI Oversight Team Leader is Peter Laroche. The above Division Team Leaders, CCCS-FC Finance Specialist and HR Director comprise the overall PQI Oversight Team.

PQI Division Team Meeting Schedule

The PQI Division Teams will meet on a quarterly basis to review the quality improvement activities of each division. The PQI Division Teams may also meet more often should there be a problem or additional areas needing to be addressed.

PQI Division Team Reporting

The PQI Division Leader/Secretary will utilize the PQI Division Summary Form to document the PQI Division Team's activities, discussions, and results of measurement tools. (These results will be summarized and a part of the PQI Division Summary Form.) A copy of the PQI Division Summary Form will be included in the PQI Oversight Team Report.

Collecting, Analyzing and Reporting Information

The PQI Plan is charged with tracking and reporting issues discussed, actions taken, and results achieved so that stakeholders can see the impact of our work with the people we serve and learn from these experiences. It is crucial that CCCS-FC has an effective way to communicate this information with its stakeholders. This includes soliciting and sharing in a way that recognizes and values everyone's contributions to the Performance and Quality Improvement processes. Following the PQI Oversight Team meetings their quarterly reports are distributed to all internal stakeholders (board and staff). PQI Oversight Team Reports are summarized and shared with agency external stakeholders through CCCS-FC Annual Reports/Luncheons, agency funder reports and shared with community stakeholders at collaborative meetings.

Development, Training and Implementation

The Performance and Quality Improvement Plan is implemented by the PQI Oversight Team Leader under the direction of the President/CEO. The PQI Oversight Team is responsible for the development and implementation of CCCS-FC quality improvement activities. The PQI Oversight Team is also responsible for conducting an annual assessment and revision of the PQI and Risk Management Plans. Division Directors are responsible for educating all new hires regarding the overview of the PQI Plan. Annually, the PQI Oversight Team will also recognize a division and/or employee who exemplify the "spirit" of Performance and Quality Improvement.

Quarterly Review of Immediate and Ongoing Risks

At every quarterly PQI Overview Team Meeting a review of immediate and ongoing risks that include review of incidents, critical incidents, accidents, and grievances including the following, as appropriate to the program or service: a. facility safety issues; b. serious illness, injuries, and deaths; c. situations where a person was determined to be a danger to himself/herself or others; d. service modalities or other organizational practices that involve risk or limit freedom of choice; and e. the use of restrictive behavior management interventions, such as seclusion and restraint.

Annual Assessment of Potential Organizational Risks

During the PQI Overview Team Meeting conducted during the 4th Quarter of the agency's fiscal year team members assess areas of potential risk, including: 1) compliance with legal requirements; 2) insurance liability; 3) health and safety; human resources practices; 4) contracting practices and compliance; 5) client rights and confidentiality issues; and 6) financial risks; and conflict of interest.

PERFORMANCE AND QUALITY IMPROVEMENT AGENDA

Can you tell me something that has changed in your service within the last year as a result of your program outcomes, measurement, consumer satisfaction survey, or other PQI process?

- I. Service Reviews
 - a. Quarterly Case Supervision
 - b. Quarterly Peer Reviews
 - c. Monthly Staff Supervision
 - d. Review of Annual Program Work Plan
 - e. Review of Annual Staff Goals
 - f. Client Satisfaction Survey Results
 - g. Review of Outcomes Management Results
 - h. Recommendations based on results
- II. Compliance and Deadlines
 - a. Grants
 - b. Contracts
 - c. State
 - d. Federal
- III. Personnel
 - a. Program Staffing
 - b. Turnover
 - c. Training requirements met
 - d. Training provided
 - e. Training needs that are unmet
- IV. Risk Management
 - a. Incident Reports filed
 - b. Building Safety
- V. Organizational Communication and Learning
 - a. Providing information to stakeholders
 - b. Recommendations
- VI. Consumer/Community Impact
 - a. How are we helping those we work with be better connected to their community?
 - b. Access to services (other than ours?)
 - c. How are we increasing quality of life for those we work with?
 - d. Are our programs visible in the community?
 - e. Recommendations
- VII. Stakeholder Satisfaction
 - a. How do we know our stakeholders are happy?
 - b. If surveys have been administered what are the results?
 - c. Recommendations
- VIII. Strategic Plan
 - a. Are we achieving what we set out to do?
 - b. Changes in demographics?
 - c. Recommendations

PQI DIVISION SUMMARY

Division: _____ **Period Covering:** _____

Team Meeting

Attendees: _____

Summary of Activities:

Quarterly Case

Supervision: _____

Quarterly Peer

Reviews: _____

Monthly Staff

Supervision: _____

Review Program Annual Work

Plan: _____

Review Annual Staff

Goals: _____

Review Client Satisfaction Survey

Results: _____

Review Outcomes

Measurement: _____

Trainings

Attended: _____

Action Plans: (Ideas to improve service quality)

Actions to be Taken	Desired Outcome	Person(s) Responsible	Timeline	Progress Update

Action Request: (If unable to resolve problem or have an idea that needs the attention/approval of the Director or Board of Directors)

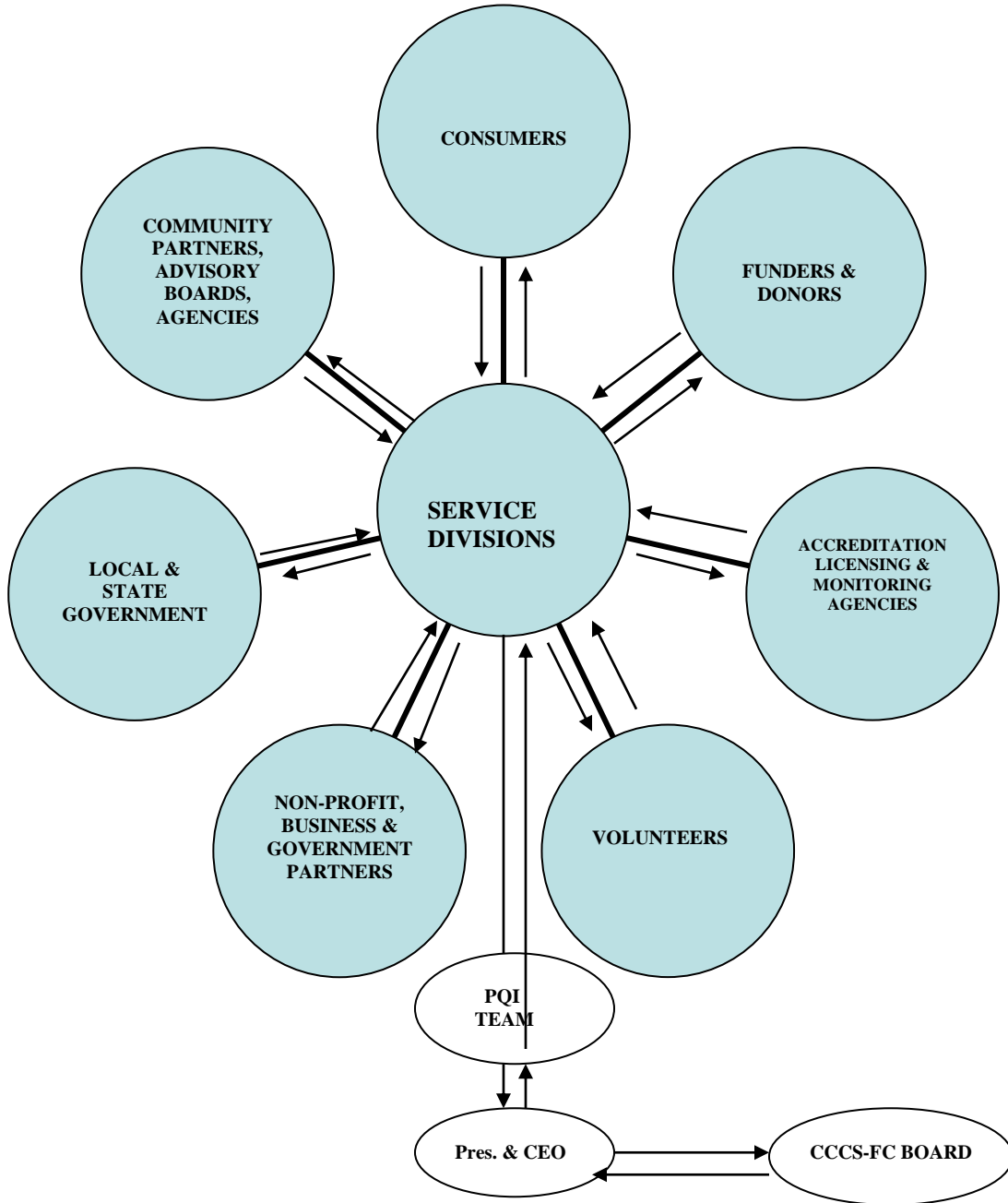
Problem/Idea	Desired Outcome	Attempts at Resolution	Assistance Needed

What we learned/Impact on People Served: (What have we learned from our efforts to improve service quality? What impact have our changes had on the people served? How can we promote examples of positive practice throughout the organization?)

Scribe Signature: _____ Date of Team Meeting: _____

Copy of Minutes to: President/CEO

CCCS-FC STAKEHOLDERS



Survey Results & Case File Review Period	Survey Out	Survey In	Survey Info Compiled	Case File Review	Division Team Meetings	PQI Team/ Mgmt Team	COA-PQI File Folder
Oct/Nov/Dec 2012	3/1/2013	3/21/2013	3/28/2013	3/29/2013	by 4/9/2013	4/16/2013	2nd Qtr 2012-2013
Jan/Feb/Mar 2013	6/1/2013	6/21/2013	6/28/2013	6/28/2013	by 10/15/2013	11/16/2013	3rd Qtr 2012-2013
Apr/May/Jun 2013	9/1/2013	9/21/2013	9/27/2013	9/27/2013	by 10/15/2013	11/16/2013	4th Qtr 2012-2013
July/Aug/Sept 2013	12/1/2013	12/21/2013	12/27/2013	12/27/2013	by 1/14/2014	1/21/2014	1st Qtr 2013-2014
Oct/Nov/Dec 2013	3/1/2014	3/21/2014	3/28/2014	3/28/2014	by 4/1/2014	4/15/2014	2nd Qtr 2013-2014
Jan/Feb/Mar 2014	6/2/2014	6/20/2014	6/30/2014	6/30/2014	by 7/10/2014	7/15/2014	3rd Qtr 2013-2014
Apr/May/Jun 2014	9/2/2014	9/22/2014	9/30/2014	9/30/2014	by 10/7/2014	10/21/2014	4th Qtr 2013-2014
July/Aug/Sept 2014	12/1/2014	12/21/2014	12/27/2014	12/27/2014	by 1/14/2015	1/21/2015	1st Qtr 2014-2015
Oct/Nov/Dec 2014	3/1/2015	3/21/2015	3/28/2015	3/28/2015	by 4/1/2015	4/15/2015	2nd Qtr 2014-2015