



Performance and Quality Improvement Plan (PQI)

April 1, 2024 – March 31, 2025

Performance and Quality Improvement 2023/2024 Year in Review

The PQI committee set the following goals for the 2023-2024 fiscal year:

1. Continue to prepare the agency for the upcoming COA site visit
Review: The agency successfully completed the COA site visit in September 2023. Of significance were the overwhelmingly strong scores under the PQI standards, which was a significant improvement from the 2020 accreditation.
2. Following the 2023 site visit, review COA feedback and incorporate it into agency practice
Review: Immediately following the COA site visit there was a Fundamental Practice to address under SVE 7. This was accomplished by the creation of a new policy (BP 2.31). We also had a rating of 4 under SVE 9.03 and the implementation of the documentation needed to satisfy this standard has been completed.
3. Plan 2 PQI focused agency trainings for 2023/24 all staff trainings [one in 2023, one in 2024]
Review: A slide deck presentation on Logic Models was completed at both the February 8, 2023 and March 13, 2024 All Staff Trainings. A slide deck presentation on PQI was also done at the April 12, 2023 All Staff Training.
4. Review and update program feedback surveys by March 2024
Review: The PQI committee reviewed and updated the program feedback surveys and was able to streamline the questionnaire from 13 questions down to 6 at the agency level, with programs adding their own specific questions after that. Programs have implemented the new survey effective April 1, 2024.
5. Review the LCSS PQI Backgrounder document by March 2024
Review: the PQI Backgrounder document has been reviewed and no updates are needed at this time other than the Org Chart. We will review in March 2025.

For the 2024-2025 fiscal year, the PQI team will focus on the following goals:

1. Plan 2 PQI focused agency trainings for 2024/25 All Staff Trainings and engage PQI committee members in the presentations.
2. Explore 2 new creative ways to increase client engagement with feedback surveys and implement one of them.
3. Review the LCSS PQI Backgrounder document by March 2025.
4. Conduct quarterly review of critical incidents in order to provide timely recommendations for improvement. Create more specific categories in the report to ensure accurate trend analysis.
5. Introduce a co-chair of the PQI Committee (manager), and coach at least 1 staff member of the PQI committee to take on co-chair responsibilities by next year. Create Terms of responsibility for roles.

Performance and Quality Improvement Structure

The PQI Team operates with a revolving membership. Current members are:

- Senior Manager, Substance Use Services (chair)
- Manager, Community Counselling & Family Success
- Manager, Intensive Case Management Team
- Manager, Human Resources
- Staff person, CCRR
- Staff person, Family Connections
- Staff person, Family Place
- Staff person, Intensive Case Management Team
- Staff person, Poverty Law
- Staff person, Settlement Services
- Staff person, Substance Use Services
- Administrative Coordinator

File Review Committee

- Senior Manager, Substance Use Services (chair)
- Staff person, Child Care Resource & Referral
- Staff person, Family Connections
- Staff person, Family Success
- Staff person, Intensive Case Management Team
- Staff person, Settlement Services
- Staff person, Substance Use Services

It is the intent that managers, supervisors, and staff will rotate on and off the PQI and File Review Teams as appropriate.