Twin Cedars
YOUTH AND FAMILY SERVICES, INC.

What is being measured?	Why is it being measured	Data source	Who is responsible	How/ Frequency?	How will data be collected	Who will Aggregate data?	How Will Data Be Aggregated and Reports Generated?	In What Format?	Who Will Review and Interpret Results?	When Will Results Be Reviewed And Interpreted?	Who Will Make Recommendations And To Whom?	When Will Recommendations Be Made?	Who Will Implement/ Oversee Recommended Changes?
Quality of Case Records	Maximize effective service provision. Ensure consistency. Maintain ORCC and COA compliance	Client case records	Program Coordinators. PQI Specialist	Quarterly Audits must be completed and turned in to PQI by the 8th following the audit month.	Individual programs are assigned audit partners. Audit Partners audit each other's case records. Case records to be audited each quarter are chosen by PQI division. Internal Quarterly Audit Tools are used to "score" compliance.	PQI division; PQI Specialist	PQI division will analyze all completed IQAs and generate a quarterly report as well as a Year To date report for each program, campus and the agency as a whole.	PQI Specialist Will "score" completed Internal Quarterly Audits on a 100 point scale. Individual categories of required documents (i.e. Admissions documents, medical documents, etc.) will also receive a score.	Program Directors, Deputy Director, PQI Director & PQI Committee	IQA Reports will be sent to Program Directors within 2 weeks of reception by PQI.	PQI Director may make recommendations to Program Directors	Within 2 weeks of IQA Report being generated and submitted.	Program Directors and HSPs/Case Managers
Critical and "Semi-Critical" Incidents and Accidents	Client Safety	Incident Accident Reports are the initial primary document/data source.	Program Coordinators, Program Directors	Incident/Accident Reports are to be submitted as they are generated	All Incidents/Accidents qualifying as "Critical" are entered into a database	PQI Specialist	PQI Specialist will generate YTD Reports each quarter	Total Critical Incidents for each cottage and campus. Incidents will be broken into the different types and analyzed relative to the census of each program.	PQI Director; Critical Incident Review Team (CIRT).	Quarterly	CIRT will make recommendations to Program Directors and/or Program Coordinators based on its review, analysis and findings.	Quarterly or as needed for Critical and/or chronic issues.	Program Directors and Program Coordinators as assigned in CIRT Corrective Action Plan.
Systemic Annual Risk Assessment	Increase Safety for Clients and Staff. Minimize potential risk/ maltreatment of children	CIRT Members Report	CIRT Members	Annually	Aggregate Reports; Resident Grievances; ORS inspection, verbal assessment by CIRT members and	PQI Director PQI Specialist	CIRT identifies risks and trends	Quarterly, Year To Date and Annual Reports. "Chronic" and critical issues require formal plans of action.	PQI Director; Critical Incident Review Team (CIRT).	Annually for Risk Assessment	PQI Director; Critical Incident Review Team (CIRT) will make recommendations to Leadership Team and	Annually	CIRT Members, Program Directors and Program Coordinators.

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					investigation reports;						Program Directors		
Referrals and Admissions	To measure appropriate accessibility. To ensure the most efficient service provision as it related to staff/client ratios	Census Reports	Director of Admissions and PQI Specialist	Quarterly	Referrals, Admissions, Discharges and ongoing census is tracked by Director of Admissions.	Director of Admissions and PQI Specialist	PQI and Admissions will cooperatively generate quarterly and YTD Reports	Reports should indicate total referrals for each program as well as total agency referrals. Report should also indicate the % of those referrals approved and pending admission.	PQI and Admissions.	Quarterly	Admissions Department will make recommendations to individual programs and campuses.	Quarterly	Program Directors; Program Coordinators
Client Satisfaction	Maximize effective service provision & make improvements based on client feedback	Client Satisfaction Surveys	Program Coordinators	Monthly (10% of resident population) Prevention Programs (At case closure)	Clients are requested to complete surveys on a monthly basis. Results are entered by Program Coordinators or designees.	PQI Division (PQI Specialist)	PQI Division will review CSS results quarterly and submit YTD report.	An overall CSS score is rendered for each program. Client satisfaction with particular areas of life is also scored and submitted quarterly.	Program Directors; Program Coordinators.	Quarterly	Recommendations made by PQI Director/PQI Committee to Program Directors and Program Coordinators.	Quarterly	Program Directors and Program Coordinators.
Stakeholder Satisfaction	Maximize effective service provision Maximize interagency cooperation utilization	Stakeholder Satisfaction Surveys	Program Coordinators	Annually (Minimum). If results from the annual SSS indicate "problem" areas, additional surveys may be sent after attempts to remedy "dis-	Stakeholder satisfaction Surveys will be sent to all stakeholders utilizing Survey Monkey.	PQI Division (PQI Specialist)	PQI will review completed surveys and report on problem areas or agencies/organizations.	A satisfaction score for each agency as well as each area or individual survey question will be assigned.	PQI Committee/ PQI; Program Directors; Program Coordinators	Quarterly	Recommendations made by PQI Director to Program Directors and Program Coordinators.	Within 5 weeks of surveys being sent to stakeholders.	Program Directors; Program Coordinators

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					satisfaction".								
Strategic Planning	Maximize long term effective service provision. Ensure provision of most needed services relative to agency's mission and vision.	Annual PQI reports; CIRT Reports; ORCC Reports; Discharge Reports	Leadership Team, Board, and TCYS Staff	Every 4 years	Annual Reports are used to identify trends and areas of need.	PQI Division (PQI Specialist)	All reports are reviewed on-going and trends are objectively identified as are areas of need.	Annual Reports	Program Directors with input from PQI	Annually, but at minimum prior to Strategic Planning	Stakeholders/ Leadership Team/ Board Members/ Stakeholders/ Staff/ Clients all have input to Strategic Plan.	Annually w/ Annual Short Term Plans	Program Directors; Program Coordinators
Annual Short Term Plan	Manage adherence to and make amendments to Strategic Plan	Annual PQI reports; CIRT Reports; ORCC Reports; Discharge Reports	Program Directors; Program Coordinators	Annually	Quarterly Reports are used to identify trends and areas of need.	PQI Division (PQI Specialist)	All reports are reviewed on-going and trends are objectively identified as are areas of need.	Quarterly Reports and prior year's Annual Reports	Program Directors and Program Coordinators with input from PQI	Quarterly and Annually	Leadership Team with input from PQI can make recommendations to Program Directors and Program Coordinators.	Annually, PQI will provide feedback to programs prior to the due date of Annual Short Term Plans.	Program Directors; Program Coordinators for their specific program/dept.
Staff retention	Maximize effective service provision through retaining and maintaining the most capable staff possible.	HR Department/ Staff Roster	Human Resources	Quarterly	HR Director asks for database report on vacancies, and who has left TCYS during prior quarter. HR records	Human Resources	Quarterly Report indicating mean, mode and median length of employment for current staff and staff leaving during that quarter.	Narrative report with accompanying charts.	HR and Leadership Team	Quarterly and Annually	Leadership Team will make recommendations to HR.	Annually, at a minimum	HR and Leadership Team

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Staff satisfaction	Maximize effective service provision through retaining and maintaining the most capable staff possible.	Staff Satisfaction Surveys	Human Resources	Annually	Staff Satisfaction Surveys completed annually.	Human Resources	Annual Report indicating areas of greatest need.	Narrative. Rating for each question on survey. Accompanying graphs	HR and Leadership Team	Annually	Leadership Team will make recommendations to HR & then PQI Committee will form necessary teams or make other improvement recommendations.	Annually	HR and Leadership Team