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Philosophy of the Performance and Continuous Quality Improvement Program

Introduction
The Department of Children's Services (DCS) promotes excellence in child welfare practice through commitment to a Performance and Quality Improvement (PQI) program. This program engages all levels of agency employees and stakeholders in identifying and targeting opportunities to improve services, processes, and outcomes for at risk children and families in Tennessee.

The foundation of PQI is the belief that people truly care about the work they do and strive to learn from experiences. DCS seeks to empower staff to create, innovate, and improve outcomes for children and families through teamwork in the PQI program.

The purpose and intent of the PQI Program is to target improvements to key operations and outcomes by utilizing the strategic plan as a guide to:

• Improve the quality of casework;
• Improve outcomes for children and families;
• Increase local problem solving, based on the principle that all staff are equipped to effect positive, ongoing and lasting organizational change;
• Improve processes towards efficiency;
• Track and monitor trends through more effective use of practice data and utilize identified trends to drive improvement initiatives and long term planning in the region;
• Track and monitor client, community, and provider agency outcomes and partner with them to develop improvements;
• Improve employee morale and satisfaction within their work environment by providing staff with a voice and ability to impact organizational improvement.

PQI and COA
Council on Accreditation (COA) is made up of an array of standards under which a service organization may be reviewed:

➢ Administration & Management standards describe best practices in how the agency should be run by its leadership.
➢ Service Delivery standards describe best practices in how the agency should interact with its employees and consumers.
➢ Service Standards describe best practices in the specific areas in which the agency conducts business or provides services.

An essential set of Administration & Management standards is Performance and Quality Improvement (PQI).

(FOC) PA-PQI 1: Culture of Learning and Improvement
The agency actively promotes and demonstrates a culture of learning and continual improvement.

(FOC) PA-PQI 2: PQI Infrastructure
The PQI system has an infrastructure that gives the agency capacity to: a. ensure the integrity of measurement practices, including data collection and analysis; b. identify agency-wide, as well as region- and program-specific areas of strength and areas for improvement; and c. identify, implement, and monitor improvement strategies.

**PQI**

The Department of Children’s Services operates a *Performance and Quality Improvement (PQI)* program. Dedicated staff persons serve each region and provide support and guidance to the agency regarding the assessment of current performance and the planning and implementation of improvement efforts.

The work done by the PQI Coordinators and through the PQI program is the crucial element necessary for DCS to meet the COA PQI standards.

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<td>Staff who are skilled and trained to provide guidance to the PQI process</td>
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<td>Communication with stakeholders</td>
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<td>Involvement of key persons in the assessment and improvement process</td>
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**Strategic Tools**

The Tennessee Department of Children's Services Division of Performance and Quality Improvement uses quality improvement business strategies and various tools to achieve better outcomes. Using evidence-based practices in quality improvement has proven beneficial in non-profit and government agencies. The Performance and Continuous Quality Improvement program will utilize tools from Six Sigma, Lean, Driver Diagrams, PDSA and theory of change, and imbed them into the Practice Wheel process of Engagement, Teaming, Assessment, Planning, Implementation and Tracking.
**Practice Wheel**

The DCS Practice Wheel is the foundation of the Department's work with families. Principles from the Practice Wheel are applied across the agency as the foundation for the work of DCS.

**Engagement**

DCS staff will be engaged at every level of the agency to participate in PQI. At the first level, all staff will participate in local/unit problem solving in unit staff meetings. Units can opt to deploy PQI workgroups to problem solve specific issues at the local level and seek guidance, collaboration, and additional problems from higher levels of the agency as needed.

Regionally, DCS staff can opt to participate in regionally based PQI workgroup teams designed to address specific areas or issues that impact the entire region. These workgroup teams will be guided by a Regional Leadership PQI Team that will oversee the overall activities of the PQI teams across the region.

Blended groups of regional and Central Office staff will also be identified to collaborate on strategic issues that impact the agency statewide. In addition, there will be Central Office based teams to work on and address issues at the highest level of the agency.

**Teaming**

DCS staff will come together in PQI Workgroups to address key issues identified and as outlined by the agency’s Strategic Plan. Staff will be encouraged to problem solve issues using quality improvement tools available to them. Collaboration among and between teams will be supported through the PQI Coordinators.
**Assessment**

PQI Workgroups will be encouraged to specifically define problems and seek available agency and intra-agency data to clarify measures where improvements are sought. Once the problem and related measures (data) are clearly identified, the team will analyze factors contributing to undesirable conditions and outcomes. Teams can accomplish this through open discussion or use tools like a Driver Diagram, etc. Research of strategies and evidenced based practices used in other agencies is strongly encouraged.

**Planning**

Once the PQI Workgroup has fully assessed the problem, finalized analysis and considered the various factors contributing to poor outcomes, the team will then plan for change. The team will use the SMART (Specific, Measurable, Achievable, Relevant, Time Sensitive) formula for writing an action plan.

**Implementation**

PQI Workgroup team members will implement strategies as outlined in the action plan developed.

**Tracking & Adjusting**

Following implementation, PQI Workgroups will consider pre and post measures, data, and outcomes and discuss the success and opportunities of the improvement interventions implemented. This is where workgroups focus efforts on examining the work that has been done to see if the intervention worked. The PQI team will then renew the Practice Wheel cycle by:

- Engaging new team members as needed,
- Re-assessing actions taken,
- Planning adjustments to the current steps, and
- Continuing with implementation until desired outcomes are achieved.
Quality improvement using Plan-Do-Study-Act

PDSA provides a straightforward, iterative approach to quality improvement in your practice. The framework is easy to adopt regardless of practice size or resources. As ongoing quality improvement becomes part of TN DCS practice’s culture, we will continue to find opportunities to make existing and “improved” processes better. The focus will be in what are we trying to accomplish? How will we know a change is an improvement? What changes can we make that will result in an improvement?

A focus of Plan-Do-Study-Act of the work will be in three main areas:

Process of Care
- Improving the flow of work in processes is an important way to improve the quality of services provided.
- To benefit from improvements in quality of services, the customer must recognize and appreciate the improvements.

Quality of Care
- Although many organizations focus on ways to improve processes, it is also important to address improvement of quality services/practices.
- Reducing variation improves the predictability of outcomes and helps reduce the frequency of poor results.
- Organizations can reduce errors by redesigning the system to make it less likely for people in the system to make errors.

Capacity Issues
- Look for ways of eliminating any activity or resource in DCS that does not add value to our customer.

Lean

Lean is a philosophy and a set of tools which help us focus on our daily processes to maximize customer value while minimizing roadblocks. Lean is actually not an acronym, but a description of a framework for process improvement. Lean organizations have figured out the simplest and most direct way to deliver services. When utilized, Lean can accomplish the following:
- Dramatically reduce backlogs
- Reduce lead times
- Decrease the complexity of processes
- Improve the quality and consistency of work
- Free up more staff time for "mission critical" work
- Improve staff morale

The majority of the PQI Coordinators are trained in Lean Principles and Lean Facilitation and can assist various levels of the organization re-align resources in this ever-evolving organization.
Stakeholder Involvement

Stakeholder involvement in the PQI process is a critical component toward achieving targeted agency improvements. The Department is constantly seeking new and innovative ways to enhance collaboration with external stakeholders.

Stakeholders include:

- DCS Employees, Foster Parents and Volunteers;
- Children and Families served by DCS;
- Performance Based Contract Providers;
- Contract Providers;
- Tennessee Commission on Children and Youth;
- Community
  - Courts,
  - Law Enforcement,
  - Child Advocacy Centers,
  - Community Advisory Boards,
  - Mental Health Centers,
  - Hospitals, Health Departments, and Medical Community,
  - CASA,
  - TFACA and Foster Parent Advocate,
  - Children's Bureau.

Measures and Outcomes

DCS intends to create a stronger link between the agency strategic plan through activities within the PQI Program. The agency's goals, funding, and objectives are, to a degree, driven by Tennessee Code Annotated, and Federal Title IV-E and IV-B requirements. The Performance and Continuous Quality Improvement Program will seek to further these goals by being sensitive to these driving entities. DCS seeks to maintain and refine its accreditation through the Council on Accreditation (COA). DCS will set clear measures towards achieving long-term strategic goals and desired outcomes that will be laid out in the Strategic Plan.

Statewide Targets/Use of Data

Client and program (system-level) key performance indicators and outcomes will be distributed via “scorecards” to each Performance Based Contract Providers. In addition, heavy emphasis will be on Child and Family Service Review (CFSR) and Case Process Review (CPR) outcomes annually. All levels of PQI teams will be charged with the responsibility of using provided data to monitor, and make improvements through strategic planning and activity. The CFSR Program Improvement Plan will be integrated into existing PQI activities.

Data Quality

TFACTS is a tool that supports our caseworkers and other staff in their work with children and families. It is important that the data in TFACTS is as accurate and up-to-date as possible. DCS staff and leadership use TFACTS to support decision making that has significant consequences for children and families, and it is crucial that they are able to rely on the accuracy of the data contained in and reported from the system.
Achieving high data quality results in:
1. Accurate, reliable and trusted data
2. Reduced confusion
3. Improved decision making
4. Accurate management reporting such as Key Performance Indicators (KPI)

TN DCS Performance and Quality Improvement (PQI) team assist OIT, STS, and CO in Data quality. Data quality is achieved by applying consistent procedures and processes; monitoring compliance to established procedures and processes; and taking action to correct data quality issues. It is a continuous activity or set of activities—not a one-time event.

DCS’s quality plan consists of three tiers or components:
1. Data Validation
2. Monitoring Data Quality
3. Data Improvements

Some of the activities related to the Data Quality Plan include:

**Agency Monitoring through CQI - Monthly.** The agency has an established workgroup through the Office of Continuous Quality Improvement (OCQI) as a mechanism for monitoring and addressing data deficiencies and troubleshooting solutions. Agency staff utilize CQI processes to enact needed adjustments to data quality deficiencies and inconsistencies from the monthly and quarterly reporting and case reviews. The CQI process can make recommendations for improvements to other program divisions.

**Report Tracking – Monthly** - Agency program staff evaluate reports generated from TFACTS or SafeMeasures for consistency, accuracy, and note deficiencies or errors to ensure quality.

**Case Reviews – Monthly and Quarterly** – Case Process Review data is monitored on a quarterly basis to determine if missing, duplicate, or incorrect information exists in TFACTS case documentation. CQI monitors case process review entries to ensure such issues are addressed at the regional team level. The expectation is that 100% of the missing, duplicate, or incorrect information is rectified in TFACTS within 2 weeks of the Case Process Review due date.

**Monitoring and Evaluation of Clean Up Activities – Monthly** - The monitoring of inconsistencies and deficiencies begins with existing clean-up reporting to evaluate trends and data indicators that need to be addressed using CQI processes, program improvement, and accountability measures. Percentages vary by region with continued expectation that clean-up activities will reduce in number monthly per indicator, that new issues and reporting concerns will be identified, and that case practice will ensure timely and accurate entry of information by regional program staff.

**ChildStat – Monthly** - ChildStat is an agency wide initiative focused on moving children to permanency as quickly and safely as possible. This was initiated in October 2019 due to a sharp rise in custodial numbers and data indicating that while admissions increased, the length of time children/youth are staying in custody
increased. Leaders identified specific data indicators for targeted improvement. By focusing on these indicators, regional leadership can develop and implement strategies to improve outcomes and track progress in real time. Key indicators include: Exits under 60 days; percentage of children on Trial Home Visits (THV); number of children in Pre-Adoptive Homes; Termination of Parental Rights (TPR) completions and pending; Entry/Exit Ratio; number of children in custody 15 months or longer; number of children in kinship homes; number of children exiting by subsidized guardianship, adoption and reunification; placement rate; number of face-to-face visits completed, etc. A tracker was compiled and is distributed monthly to help regions track progress over time and identify areas which need additional work. The work of ChildStat is closely linked to performance on the annual Child and Family Service Review and Targeted Case Management.

Teams composed of regional leadership from the three program areas: Safety and Prevention, Foster Care and Permanency and Juvenile Justice as well as legal and PQI are teamed with Central Office staff called Consultants/Advisors to address each data indicator and develop strategies to meet statewide goals. These teams meet regularly to review data, develop or adjust strategies and problem solve around new issues which arise. The teams report quarterly to the Commissioner.

ChildStat is led by Debbie Miller and Pierce Beckham who meet regularly with each region to review progress and share information across regions. Regions located in the same geographic area of the state may share common issues – such as the closure of a manufacturing plant that causes high unemployment and housing issues, or very rural counties/regions where treatment and placement resources are scarce. Sr. Leadership can connect regions to better resolve issues or develop cross regional strategies to address a crisis such as a tornado or the most recent pandemic. These crises directly affect time to permanency through court closures, housing shortages, homelessness and lack of jobs. The PQI coordinators are part of the regional ChildStat groups to assist with any problem solving around areas of focus for the region. They assist with regional data analysis as needed. The Data Quality Team produces the monthly reports and tracker that are utilized for the regional meetings and focus.

**PQI Practices**

**Roles**

The PQI Coordinator will:

- Coordinate and provide technical assistance to the PQI Program for the area they serve (i.e., Region, or Central Office);
- Attend and provide technical assistance to Leadership Workgroups monthly and sub-workgroups routinely (at least quarterly);
- Provide specialized facilitation of various quality improvement tools including Lean, Driver Diagrams, etc. for PQI teams upon request;
- Ensure that referred items are received by the appropriate team and addressed timely, and feedback is provided to workgroups timely;
- Post minutes and related materials to the Statewide PQI Drive in advance of the next scheduled meeting;
- Maintain a PQI team folder on the Statewide PQI Drive that includes all minutes and related materials. A hardcopy notebook can also be maintained as optional by the team as desired.
The **Facilitator** will:
- Develop the meeting agenda and send it to team members in advance of the meeting;
- Keep the agenda manageable and keep overflow of issues in a “parking lot” where they can be added to the agenda as the process allows;
- Start on time and end on time;
- Facilitate the meeting;
- Ensure that discussion is meaningful and that everyone has the opportunity to have their voice heard and respected;
- Serve as the point of contact for that workgroup;
- Prepare and submit referrals for any issues that need to be sent to another PQI Workgroup.

The **Scribe** will:
- Schedule the date and time of meetings;
- Schedule meeting space and/or polycom line as needed;
- Send reminder and/or agenda to all participants about meeting;
- Document on the Meeting Minutes (CS-0987) form;
- Make certain that all action steps have initiation and completion dates documented and responsible parties assigned;
- Send minutes out to all workgroup members and PQI Coordinator within 10 working days from the date of the meeting;
- Arrange for flip charts, projectors, any supplies, etc. needed for meetings.

A **Team Member** is an individual who makes a commitment to attend PQI workgroup meetings. Team Members actively participate in discussion and decision making. Facilitators and Scribes are considered Team Members.

A **Team Member Liaison** is any Team Member on a PQI Workgroup that sits on a Leadership PQI Workgroup or PQI Workgroup in another level. Liaisons are expected to serve as experts on the PQI efforts of the teams they participate on and are recognized as strong collaborators.

All DCS employees are **Participants** in the PQI process and can interact with PQI Workgroups on an informal basis by discussing issues of concern with Team Members and referring issues for teams to consider for improvement. Participants are not actively involved with a PQI workgroup, but understand that they can access information and provide information to the PQI process as desired. They are also welcome to join PQI Workgroups at any time.

**PQI Workgroup Meeting Process**

**Introductions**
- Ensure all members are familiar with one another.

**Review of Previous Minutes**
- Address any clarification in past minutes,
- Accept minutes as final.

**Review of Current Agenda Items**
- Discussion amongst team members of each agenda item,
- Ensure that each item receives adequate time during the meeting,
- Ensure associated data, policy, people, etc. are consulted accordingly for the discussion,
- Take Action:
  - Make final decisions,
• Identify action steps,
• Identify responsible person/people for action steps,
• Determine completion dates for actions steps,
• Make referrals to other levels of PQI.

Meeting Closure
• Brief overview of action steps from all agenda items,
• Announcement of next meeting date and time.

Agenda Development
As the team develops an agenda or seeks to add a new agenda item, they will consider what data, policies, people, or other key drivers may need to be considered or consulted. The PQI Coordinator can be consulted for assistance with obtaining needed resources or collaboration efforts. Other PQI Workgroup's minutes should be reviewed to seek and consider other agency successes for use or adaptation.

Minutes
Meeting minutes for all PQI Workgroups will be kept on the DCS Meeting Minutes (CS-0987) form. Minutes will be maintained on the Statewide PQI Drive. The Statewide PQI Drive will be divided into subfolders according to PQI program structure as outlined in Figure 1 and Appendices A-M so documentation can be easily located.

Follow Up
Issues can be addressed in the following ways:
• First, issues can be addressed by the local team by developing action steps to be taken at the local level. These are “quick wins” that the local team can take on without assistance from higher levels within the agency. For example a region that identifies that timely EPSD&T's have fallen below the target goal can identify barriers and develop actions steps to improve outcomes in coming months.
• Next are issues that require assistance from a higher level within the agency. A referral can be made to obtain assistance once the team works through the issue and demonstrates that the issue cannot be resolved without additional assistance. An example of this is a team that identifies a problem with a policy that impacts daily work. The team has clarified details as to what could be amended in order for the policy to be more effective but needs to partner with the executive level to make the needed changes.
• If issues require substantial assistance and resources or might take an extended period of time for development, they can be referred to a higher level of PQI. However, these referrals must be accepted. These issues are often budgetary or require reallocation of resources. These issues may need to be placed in a queue for consideration at a later time when agency resources permit.

PQI Coordinator Technical Assistance (TA) Requests
PQI Teams can seek skilled facilitation, including use of various quality improvement tool from PQI Coordinators by sending an email request which should include a description of:
1. The current issue being addressed by the team,
2. What the team hopes to accomplish,
3. What the team has already attempted to resolve the issue.

Guest Collaboration
When PQI teams identify an issue that members of the current PQI team cannot resolve, the team can seek assistance from others by inviting key stakeholders to the meeting to participate in problem solving before sending an issue by referral to another PQI team. When inviting key stakeholders to participate in PQI teaming,
the team should prepare a detailed explanation of the issue the PQI team is working on and identify what the team hopes to accomplish through the collaboration.

Referrals
When a PQI Workgroup decides to send a referral to another PQI Workgroup or Level, they will follow these steps:
1. Consult with the PQI Coordinator on strategies attempted and to receive guidance/assistance with next steps needed to make a referral;
2. As needed, complete a descriptive analysis (i.e., Driver Diagram) of the issue and possible strategies to be addressed;
3. Complete a PQI Referral (CS-0945) and clearly identify steps taken by the requesting team to resolve the issue and actions for consideration by the receiving PQI Workgroup;
4. The Facilitator will complete and submit the referral with attached analyses to the PQI Coordinator;
5. The PQI Coordinator will send the referral to the PQI Program Director 1 and Central Office PQI Program Coordinator.
6. The referral will be logged on the Regional/YDC/Central Office PQI Spreadsheet
7. The Facilitator for the receiving team will set the referral on the next agenda and will have a minimum of monthly communication with the associated PQI Coordinator(s) and facilitator as to steps being taken towards resolution.
8. The Foundational and Regional level PQI referrals must go through the Regional Leadership PQI Team for consideration before being sent to a higher level PQI team. Once the Regional Leadership PQI Team determines that a referral should be sent for work, the referral can go to the best fit workgroup within the Blended or Executive Level.
9. The PQI Coordinator will determine the type of referral according to the PQI Referral Protocol and follow the additional actions steps to route the referral to the correct parties.
10. PQI referrals for the Blended and Executive level will be sent to the Central Office PQI Coordinator for assignment. If there is a question as to where the PQI referral would be best addressed, the Director of Performance and Continuous Quality Improvement will be consulted for final direction of the referral.

Tracking
The PQI team monitors the tracking and continued work of all referrals on a monthly basis. All improvements made in each PQI workgroup will be tracked on the PQI Spreadsheet managed by the PQI Coordinator. Both Statewide targets and team projects will be logged on the spreadsheet to provide an easy way for anyone in the agency to see a quick overview of all improvements being addressed in the Region, YDC or Central Office. Metrics will be monitored for improvement as projects progress.
Figure 1 - PQI Program Framework

Helpful Links:

Case Process Reviews

PQI referral form

Meeting Minute Storage