



*Foster care that keeps siblings together*

*An accredited, evidence-based program*

# Continuous Quality Improvement

## Annual Report

### FY 2022/2023

July 1, 2022-June 30, 2023

# Contents

- PURPOSE OF THE CQI PLAN..... 4
  - FORMAT OF THE PLAN ..... 4
  - THE 2021/2022 ANNUAL CQI REPORT ..... 4
- INTRODUCTION ..... 5
  - Who we are..... 5
  - Our Mission..... 5
  - Our Core Values ..... 5
  - Our Learning Culture..... 5
- PQI 1: INFRASTRUCTURE..... 6
  - NTF’s Approach to Quality Improvement ..... 6
  - Quality Improvement Model ..... 6
  - NTF’s CQI Structure, Function and Activities ..... 7
    - Corporate CQI Committee ..... 7
    - Local CQI Committees..... 9
    - Local Advisory Boards ..... 9
    - NTF Board of Directors..... 10
    - Safety Committee..... 11
    - The Pandemic Committee ..... 12
  - NTF Corporate and CQI Planning ..... 13
    - Agency-Wide CQI Plan ..... 13
    - Long-Term Strategic Plan..... 13
    - The Agency’s Annual Plan ..... 13
    - Program Site Annual CQI Plans..... 14
    - CQI Activity Schedule ..... 16
- PQI 2: ROLES AND RESPONSIBILITIES ..... 20
  - Full-Time CQI Staff Positions..... 20
    - Program Supervisors/Directors ..... 23
    - NTF COA Reaccreditation Team..... 24
- PQI 3: PERFORMANCE AND OUTCOME MEASURES ..... 25
  - Key Outputs and Outcomes ..... 25
  - Data Sources ..... 25

Case Management.....	25
Training.....	26
Risk Management .....	26
Human Resources.....	27
Satisfaction Surveys .....	27
Management and Operational Performance Measures .....	29
Measures to Identify and Mitigate Risk.....	30
Integration of Findings from External Reviews .....	31
PQI 4: CASE RECORD REVIEW .....	32
Procedure.....	32
Assessment of Results .....	33
PQI 5: ANALYZING AND REPORTING INFORMATION.....	34
Collecting, Reviewing and Aggregating Data .....	34
Census Reports.....	35
Monthly Program Services Reports.....	37
Mandatory Training Compliance Reports .....	37
Monthly Safety Reviews.....	38
Suggestion Program Reports .....	39
Quarterly CQI Program Reports .....	40
Quarterly Incident Report Summary.....	42
Quarterly Incident, Accident, and Grievances Risk Reviews.....	44
Performance and Outcomes.....	45
Satisfaction Survey Reports .....	45
Annual Risk Management Reviews.....	49
Analyzing CQI Data.....	50
Corrective Action and Improvement Plans .....	50
Continuous Monitoring of the CQI System .....	51
Annual CQI Report.....	51

## **PURPOSE OF THE CQI PLAN**

Each year, Neighbor To Family (NTF) prepares an annual CQI (PQI) plan that encompasses the key components of our continuous quality improvement program, which has evolved since the agency's inception over 20 years ago. This plan, prepared for FY 2022/2023, outlines the myriad ways in which we engaged as a team to plan, measure, report, analyze and evaluate our work over the course of the year.

## **FORMAT OF THE PLAN**

This plan has been prepared to correspond to the requirements set forth by the Council of Accreditation's (COA) 2023 PQI standards. Each "chapter" aligns with one of the five PQI standards.

There are some instances in which requirements may appear redundant. Those sections are identified so that readers can easily see that all practice standard elements have been addressed within the document.

## **THE 2022/2023 ANNUAL CQI REPORT**

Each year, an annual CQI report is prepared to address the various sections contained in the CQI plan for that fiscal year.

*This document is the annual report that addresses the activities outlined in the 2022/2023 CQI Plan. It describes the operation and performance of NTF from July 1, 2022-June 30, 2023. For ease of review, comments related to the various sections appear in blue italics.*

# INTRODUCTION

## Who we are

NTF is a non-profit child welfare agency that provides the highest quality care to children and families, ensuring the effective delivery of services by all who are associated with the agency to assure program fidelity, child well-being, and family safety.

Our evidence-based Sibling Model has garnered us a national reputation for excellence and continues to set us apart from other child welfare agencies. Headquartered in Daytona Beach, Florida we currently are licensed to provide care in three states: Florida, Georgia and Maryland. As our reputation has grown, so has the types of services we deliver.

First accredited by COA in 2005, NTF maintains COA accreditation for providing the following types of trauma-informed services:

- Foster/kinship care
- Therapeutic foster care
- Family preservation services
- Child and family development and support services

## Our Mission

Revolutionize foster care by keeping siblings together while building healthier families and stronger communities.

## Our Core Values

- Keeping siblings together for child well-being and family continuity
- Engaging and supporting their families
- Developing and maintaining highly trained, committed staff and foster caregivers
- Maintaining stable placements leading to permanent families
- Minimizing potential risk to children in our care
- Maintaining fidelity to evidence based practice and accreditation standards

## Our Learning Culture

NTF's culture is that of a learning organization. It was our founder's belief, and continues to be demonstrated in our daily practice, that you are never too old, too experienced, or too busy to learn something that will improve your skills and enhance what you contribute to your work. NTF's commitment to ongoing training not only helps attract new funders, but also has led other child welfare agencies to approach us with a desire to replicate our renowned learning program. Our focus on trauma-informed care, safety, and risk management is at the heart of our success.

Unique to NTF, and built around learning, is our "tiered" approach to building a foster caregiver career at the agency. Licensed foster caregivers are incentivized to learn critical skills. When they begin providing services to NTF foster children they are considered "trainees." Upon completion of the appropriate training assignments and demonstration of expected performance, they are advanced to become a "professional" foster caregiver, which in addition to a more prestigious title earns them an increased rate of pay.

# PQI 1: INFRASTRUCTURE

## NTF's Approach to Quality Improvement

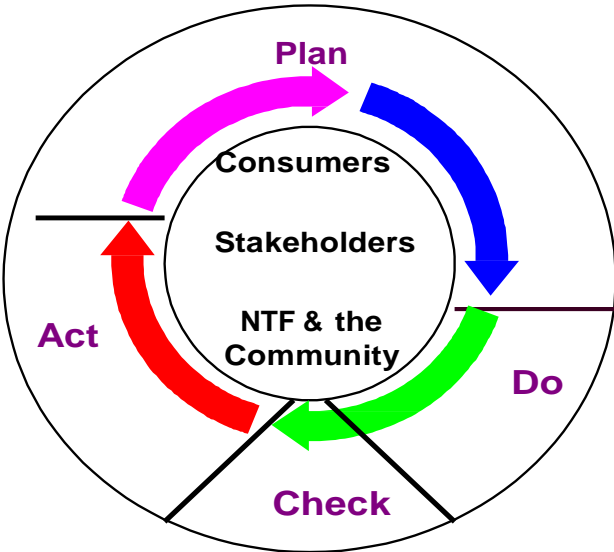
NTF maintains a broad-based, organization-wide program that spans every aspect of program operations. It unites NTF staff, governing body members, persons served, funders, community members and consumers in a continuous upward spiral of quality planning, action, and evaluation. Opportunities are provided for these entities to participate in the functions of NTF through committees, advisory boards, satisfaction surveys, and many other methods of feedback collection.

## Quality Improvement Model

NTF uses the four-step process improvement model espoused by Shewhart to monitor and evaluate the quality of care, as reflected in the following:

*Shewhart Quality Improvement Model (PDCA Cycle)*

- ✓ **P** – PLAN
- ✓ **D** – DO
- ✓ **C** – CHECK
- ✓ **A** – ACT



**PLAN:** Define the problem to be addressed, collect relevant data, and ascertain the problem's root cause.

**DO:** Develop and implement a solution; decide upon a measurement to gauge its effectiveness.

**CHECK:** Confirm the results through before-and-after data comparison.

**ACT:** Document the results, inform others about process changes, and make recommendations for the problem to be addressed in the next PDCA cycle.

## **NTF's CQI Structure, Function and Activities**

NTF has long maintained that continuous quality improvement is the responsibility of all who work for or support the agency in service delivery. While it may not be an explicit task outlined in job descriptions or contracts, the expectation is that we all have the ability and means to identify ways to improve what we do and how we do it. Beginning with agency orientation, all new staff and foster caregivers are provided with the current year's CQI plan to review.

All staff and supervisors are provided with CQI information as it becomes available, to allow them to identify and implement practice improvements. Personnel receive key CQI reports and updates for discussion during staff and supervisory meetings. Often no cost/low cost suggestions are made during such meetings that can be implemented immediately to improve productivity or streamline processes. Such ideas, when appropriate, can be shared across programs to enhance operations agency-wide. Although program or department services may differ, all may benefit from new agency best practices. If proposed recommendations require the creation of a new policy, the originator is required to draft a document and route it through the approval process, ending with review and approval by the NTF Board.

There are other channels through which recommendations for improvements can be made by staff and external stakeholders, beginning with participation in one of our structured committees or workgroups described below. Additional feedback mechanisms for personnel and stakeholders include surveys, suggestion programs, and staff/supervisory meetings as discussed later in this document.

### **Corporate CQI Committee**

The Corporate CQI Committee is the link for all CQI activities: planning, monitoring, reporting and complying with NTF, COA, contractual, and regulatory requirements as outlined in NTF's annual CQI plans. The committee meets on a quarterly basis to review and discuss such topics as safety, audits, satisfaction surveys, performance metrics, improvement efforts, risk management, training, best practices, and much more. The Corporate CQI Committee includes Cabinet members\*, executive directors from all programs, the training manager, QA staff, and the Chair of the safety committee. The quarterly meetings allow all members of the upper management team to stay current on program operation; census; performance issues; opportunities for expansion; and COA compliance and reaccreditation. Meeting minutes and related reports are shared with the board of directors for their discussion during Board meetings.

\*Cabinet members comprise the CEO, Chief of Staff, VP of Information Systems, VP of Human Resources, VP of CQI and Training, CFO, VP of Florida, and VP of Georgia and Maryland programs.

## Corporate CQI Committee Members for FY 2022/2023:

### Corporate Staff

*Tony Everett, President/CEO*  
*James Akins, Chief of Staff*  
*Chris Gurley, VP Information Systems*  
*Tiffany DaSilva, VP Florida*  
*Jamila Hankins, VP Georgia and Maryland*  
*Gaye James, VP CQI and Training*  
*Amy Drolet, VP Human Resources*  
*Darren LaLuzerne, CFO/VP Finance*  
*Kelly Morgan, Assistant to the President*

### Program Directors

*Tanya Craft Executive Director, Georgia East Programs*  
*Keturah Chambliss, Program Director, Treasure Coast, FL*  
*Keita Evans, Executive Director Georgia West Programs*  
*Donna McCarter, Executive Director, Baltimore, MD*  
*Heather Monteath, Executive Director, Bartow, FL*  
*Bridgette Senez, Executive Director, Daytona Beach, FL*

### COI and Training

*Gabrielle Rodney, Quality Assurance Manager*  
*Cynthia Williams, Training Manager*

### Other Staff

*LaToya Samuel, Assistant to VP of Georgia and Maryland and Safety Committee Chair*

*The committee held fewer meetings than usual, to complete all COA reaccreditation tasks. Meetings were held September 15, 2022, February 16, 2023, and May 18, 2023.*

*Recurring topics included a summary of incident reports (including COVID-related cases involving clients and staff), areas of success and improvement, census, audits, local CQI meetings, and fundraising efforts of each program.*



## **Local CQI Committees**

The local CQI committees, which meet at least twice a year, are managed by each local program with representation from diverse staff and stakeholders that may include representatives from funding agencies, community advocates or even foster caregivers. These committees are chaired by the executive director or designee for the program and are responsible for tracking and reporting on the program's performance and outcome measures, oversight of program-specific annual CQI plans, and improvement strategies focused on the program's individual challenges. Minutes of these meetings are forwarded to the VP of CQI and Training along with the program's quarterly CQI reports. These become part of the program's monitored performance outcome metrics.

*Local committee meetings slowly resumed after the pandemic. The Daytona program was able to convene its usual quarterly meetings. The Bartow program met monthly with DCF and Heartland for Children. As a result of staff shortages and management changes in the lead agencies, referral numbers decreased. The Treasure Coast program used meeting time to discuss ways to remain on target with performance measures and develop ideas on how to improve protective capacities through comparisons of pre-and post-test scores. The Baltimore program staff continued to conduct virtual support group meetings with foster caregivers.*

## **Local Advisory Boards**

Local Advisory Boards are designed for participation by community volunteers to advocate for local and/or national NTF programs, helping develop special community events to promote the agency, and provide counsel to local or national programs at the special request of the management team. NTF Board members are encouraged to participate on local committees to further the efforts of engaging community leaders to assist with fundraising and awareness campaigns. Maintaining fully committed members remains a challenge that NTF has discovered is not unique to child welfare. It is NTF's experience that most local fundraising and donations originate from individuals or organizations in support of a specific event or cause that they embrace. As a result, Board members, upper management, and program staff continue to work to maintain existing relationships while fostering new ones through networking with community agencies, churches, and other non-profit organizations to solicit their participation.

*Neighbor To Family is fortunate to have the continued support of many individuals and business donors that help fund special events or donate monies for program use. Funds originate from a wide range of sources-from realty agencies to well-known retail businesses such Target. In Florida, NTF is fortunate to benefit from support from the Jacksonville Jaguars football team and associated foundation. All of these contributions speak highly of NTF's reputation and the work of staff to build and retain strong business relationships.*

*Here are just a few examples of the ways in which NTF benefitted from community partnerships and staff efforts. In September 2022, Hurricane Ian, a Category 4 storm, made landfall on the Florida coast causing widespread damage. The ISB building sustained water and structural damage and was effectively closed. Due to the support of community partners like the Ed Block Foundation which awarded NTF a grant in the amount of \$10K to rebuild, the agency experienced no financial burden. Kares4Kids in Georgia, funded an annual shopping spree. Staff was able to purchase \$2400 worth of gifts to use toward the holidays. In November, Maryland staff purchased, assembled, and delivered Thanksgiving baskets to foster homes. In December, Christmas toy drives were orchestrated. Various organizations across locations as well as staff donated gifts for the children. Staff was diligent in tracking down children's wishes and even clothing sizes so that all would receive specially selected gifts. Then, of course, the gifts were carefully wrapped and labeled by staff in anticipation of Santa's arrival.*

*As part of the NTF 2023 marketing plan, the board of directors, Cabinet, and program staff were tasked with developing creative approaches for bringing in supplemental funds to benefit their clients. Programs reached out to local restaurants, for example, to arrange percentage-based donations to NTF. Additional efforts included online venues for silent auctions, popcorn and even donut sales to benefit individual programs. A variety of leisure organizations were also approached, resulting in new sponsorships from the Palm Coast Yacht Club and Jeep Beach. A very popular fundraising event, Toasting Foster Families wine event, raised over \$12K for NTF clients.*

### **NTF Board of Directors**

The NTF governing board takes an active role in the CQI process and is kept abreast of all CQI activities. During their quarterly meetings, they are provided with all CQI plans, reports, committee meeting minutes, survey results, operation reports, and other CQI and risk management related information. In addition to their review and discussion of this information, they use the opportunity to help the management team evaluate performance and make recommendations for areas of improvement. Should issues arise that members determine require follow-up attention, the topic may be discussed at a specially scheduled session or carried over to the next meeting as an unfinished business agenda item. From strategic planning through operational execution, they are an intrinsic part of the CQI program.

*Board members were as follows:*

*Sheilah Davenport, Board Chair  
Mekeshia Bates  
Barbara McCormick  
Tony Everett  
Augustine Grace  
Benjamin Sharkey  
Ameka Smith*

*The Board's quarterly meetings were held July 8, 2022, October 6, 2022, January 13, 2023, and April 13, 2023.*

### **Safety Committee**

NTF's Safety Committee, led by the Chief of Staff, includes assigned representatives from each program. Daily oversight is provided by the assistant to the VP of Georgia and Maryland programs. It is a proactive team that meets monthly and works diligently to remain abreast of national issues such as product and food recalls; severe weather forecasts and natural disasters; and national health concerns (most recently COVID-19). They are an invaluable part of the CQI team and their communication protocols for keeping staff and foster caregivers up to date are regularly tested. For example there are processes in place for reporting office closures, a hierarchy of agency contacts for such occurrences, and an emergency line for staff and foster caregivers to call with their safety and whereabouts in cases of inclement weather, natural disasters and more. The committee is dedicated to ensuring compliance with the COA safety standard: from routinely conducting fire drills and lock-downs, maintaining up-to-date safety bulletin board postings, and overseeing building maintenance for such tasks as ensuring elevators and fire extinguisher inspections are current. The committee also produces site-specific manuals to help every location prevent, and if necessary, deal with unexpected and sometimes alarming events. It is titled the *Emergency Safety Procedure Manual* (SD-SE-002).

*The committee for FY 21/22 included the following staff:*

*Atlanta, GA*

*LaToya Samuel, Assistant to the VP of GA and MD Programs and Safety Chairman*

*Augusta, GA (GA East)*

*Gaynell Bryant, Administrative Assistant*

*Baltimore, MD*

*Jessica Pearsall/Sharon Smith, Administrative Assistant*

*Bartow, FL*

*Lauren Wolf, Intake Screener*

*Corporate*

*James Akins, Chief of Staff*

*Chris Gurley, VP Information Systems*

Daytona Beach, FL  
JuLee Eads, Receptionist

Treasure Coast, FL  
Abbi Larsen, Administrative Assistant

*The committee continued to meet monthly throughout the year. The team did not cease its normal communications about such topics as holiday safety tips, weather/emergency guidelines, and wellness information. As with the previous year, the members continued to play an active role in keeping staff informed of the latest pandemic news and safety precautions, including availability of masks and COVID home test kits. Safety representatives continued the practice of issuing updated statistics on COVID-19: reported cases, positive tests, and deaths in the area. The committee also added a link to EmpNet to the Emergency Safety Procedure Manual for each site, which contains resources for flu and pandemic information and pandemic/flu checklists and protocols.*

### **The Pandemic Committee**

*The Pandemic Committee continued to meet bi-monthly for most of the fiscal year. With the decline in COVID cases and the World Health Organization's stance that COVID-19 was no longer a health emergency but rather an ongoing health issue, the NTF Pandemic Committee also concluded. The committee held its' final meeting on May 11, 2023.*

*Members included the following:*

*LaToya Samuel, Assistant to the VP of GA and MD Programs and Safety Chairman  
Tony Everett, President/CEO  
Jamie Akins, Chief of Staff  
Chris Gurley, VP Information Systems  
Jamila Hankins, VP GA and MD Programs  
Tiffany DaSilva VP FL Programs  
Gaye James, VP CQI and Training  
Amy Drolet, VP Human Resources  
Darren LaLuzerne, CFO/VP Finance  
Kelly Morgan, Assistant to the President*

*A variety of safeguards and procedures were implemented and remain in place. These included a very detailed COVID-19 Exposure Prevention, Preparedness and Response Plan, an NTF Office Closure-Reopening Flowchart, and updates to such documents as field checklists. Incident reports were required for all COVID exposures and positive tests. Reports were required for clients and staff. When field staff was involved, the report included the last date of contact with clients. With all staff, the report included the date the employee last worked in the office, possibly exposing other staff. Program and corporate management, including the VP of HR, were involved in all decisions regarding these cases and determining testing and office closures. Additionally, the VP of HR maintained all contact tracing records.*

## **NTF Corporate and CQI Planning**

### **Agency-Wide CQI Plan**

An agency-wide CQI Plan is created for each fiscal year. Developed by the VP of CQI and Training, the plan is a collaborative effort that involves management teams, CQI committee representatives, staff throughout the organization, and the governing board. Development of the plan takes into account the previous year's objectives, progress toward outlined goals, areas for improvement, and plans for the upcoming year. This plan for FY 22/23 was approved by the NTF Board in October 2022 and will be in effect until June 30, 2023. (QI050.001)

Three critical operating plans help form and support the CQI plan and continuous quality improvement process. They are the long-term Strategic Plan, the Annual Plan, and the Program Site Annual CQI Plans. Each is described below.

### **Long-Term Strategic Plan**

NTF maintains a standing Strategic Planning Committee (SPC), comprising members of the Cabinet, representatives from various program locations, and others with a sound understanding of the agency's mission and day-to-day operations. It is the primary role of this team to develop long-term, three-year strategic plans. Composition of the group may change as needed in response to hiring of new management team members or incorporation of others that would bring a new and different perspective from his or her area of expertise.

The committee uses a wide range of resources and networks at the local and national levels to thoroughly examine community service needs, child welfare best practices, federal and state regulatory changes, predictions for the economy, and other related activities that may affect NTF's direction and successful operation. Strategic plans include NTF's mission; values, mandates and strategic direction; strengths and weaknesses; measureable goals and objectives that support fulfillment of the mission; responsibility assignments; appropriate strategies for meeting identified goals; and completion timeframes.

The SPC closely monitors the plan on a continuous basis and it is thoroughly reviewed annually by the Board for potential revisions required by changes in the political climate, significant changes in the child welfare field, agency performance, and other considerations that may either inhibit or strengthen NTF's successful operation and reputation. The plan (GV030.001) was revised in 2022 prior to its expiration and the current version is valid until June 30, 2025.

### **The Agency's Annual Plan**

NTF's annual plan (GV03.002) operationalizes the goals and objectives of the strategic plan through a tactical approach that breaks down key activities into very specific tasks, resources, methodologies, milestones, and measurable outcomes. The SPC, as author of the strategic plan, spearheads the development of this yearly plan. The committee begins with a complete review of the previous year's performance. The group considers such elements as compliance with the current strategic plan; accomplishment of prioritized goals and objectives; changing conditions and needs such as resource allocation, funding, and regulatory changes; input from program management; and information gathered from PQI activities.

The result is a comprehensive new plan that incorporates activities included in the previous year's plan, methods for achieving newly identified objectives, responsibility assignments, and performance measures. The plan is submitted to the Board for review and approval. Once approved, it is effective through the end of the fiscal year. The next plan will be valid through June 30, 2024.

### **Program Site Annual CQI Plans**

Directors for each program are responsible for creating a specific annual CQI plan (NTF050.009) for that program. While each plan must ensure compliance with its unique contractual or regulatory service mandates, it must also include agency-wide elements for consistent performance tracking and monitoring.

Each plan reflects key areas of the agency's annual CQI plan and establishes goals that:

- Are consistent with the NTF mission
- Reflect compliance with contractual obligations and strategic requirements
- Are clearly defined, obtainable, and measurable
- Describe the specific steps to be taken to accomplish the goals
- Establish a timeline that will allow for the accomplishment of the goals and objectives
- Establish an evaluation tool that will measure goal and objective attainment

Program site annual CQI plans are created in consultation with the Vice Presidents of Programs, the VP of CQI & Training, and the Chief of Staff. Upon approval by the CEO the plans take effect immediately and are valid through the end of the fiscal year.

These annual plans form the basis for each program's quarterly CQI reports (NTF050.010) that are submitted to the Corporate CQI Committee and subsequently the NTF Board for review.

#### *Potential Barriers*

It is important to recognize that in spite of an agency's goals and performance, there are always potential barriers. These may include such prohibitive factors as contract funding cuts, imposing of restrictions or regulations by states or contracting agencies that conflict with NTF's mission and core values, the inability of NTF to consistently manage geographically diverse programs, or a significant loss of trained staff. NTF program management, Cabinet, and Board of Directors regularly communicate any upcoming changes as soon as they become aware of them in order to address and resolve any such barriers.

NTF is well aware that, particularly in the implementation of new programs or services, inherent risk is involved. A testament to our commitment to continuous quality improvement, is our willingness to engage in new methods and develop innovative programs and services. In those unfortunate situations in which such endeavors are proven not to be successful, NTF conducts an evaluation of the experience to determine if different steps may have led to a better result and to assure that appropriate actions are taken into consideration for future initiatives.

*The new year continued to pose challenging conditions first encountered in FY 20/21. During this time, NTF's financial condition was still impacted by the effects of COVID. The governor of Florida issued the Stabilization of Funds for the Workforce program, giving state workers a \$10K salary increase. This complicated NTF contracts making it difficult to secure positions. NTF was unable to match Florida's salary incentive resulting in the loss of experienced staff. After meeting with each of the funding agencies, NTF successful negotiated increases that were in line with the State's salary range. Although funding was amended, programs still struggled to hire and retain qualified staff; individuals accept job offers only to rescind their acceptance for higher-paying positions with other organizations.*

## CQI Activity Schedule

This table outlines primary CQI activities for the fiscal year 2022/2023. It is not intended to be an exhaustive list. Departmental meetings, reports and other operational tasks that occur throughout the year and not represented in this schedule. Updates to the schedule are made quarterly and reviewed during corporate CQI committee meetings. Any activities marked with asterisks\*\* are new.

DUE	ACTIVITY	RESPONSIBILITY/STATUS
<b>Oct. 2022</b>	Submit 22/23 Annual CQI Plan to Board for approval	CQI <b><i>Approved 10/27/2022</i></b>
<b>Nov. 2022</b>	Distribute 22/23 CQI Plan and post on internal and public websites	CQI <b><i>Completed 10/28/2022</i></b>
<b>Jan. 2023</b>	Conduct Annual Strategic Plan Board Meeting: review existing long-term plan, annual program performance, CEO and department operation reports, agency financials, risk management issues, new/revised policies, Board membership changes, etc.	BD <b><i>Conducted 1/13/2023</i></b>
	Submit Program Foster Caregiver Recruitment Plans	EDs, Recruiters, VPPs <b><i>Completed 1/31/2023</i></b>
	Distribute Community Stakeholder Satisfaction Surveys	CQI, EDs <b><i>Surveys distributed 2/1/2023</i></b>
<b>Feb. 2023</b>	Distribute sibling family surveys	CQI, EDs <b><i>Phone surveys initiated 3/22/2023</i></b>
<b>Mar. 2023</b>	Collect Auxiliary Aids Plans from all programs	CQI, EDs <b><i>2022 versions still valid</i></b>
<b>Apr. 2023</b>	Distribute Child/Youth surveys	CQI, EDs <b><i>Online surveys initiated 5/10/2023</i></b>
<b>Jun. 2023</b>	Distribute FCG surveys	CQI, EDs <b><i>Surveys distributed 6/16/2023</i></b>
	Distribute Employee Survey	HR <b><i>Surveys distributed 7/26/2023</i></b>



	Prepare Program Site CQI Plans for FY 23/24	EDs, VPPs, CQI, CEO <i>Approved by CEO 7/31/2023</i>
<b>Jul. 2023</b>	Submit new Strategic Plan for Board approval	COS, SPC, CEO <i>Approved 7/13/2023</i>
<b>Oct. 2023</b>	Submit FY 23/24 Annual Plan for Board Approval (based on approved Strategic Plan)	COS, CEO <i>Scheduled for 10/19/2023</i>
	Submit FY 23/24 Annual CQI Plan for Board approval	CQI <i>Scheduled for 10/19/2023</i>
<b>Nov. 2023</b>	Submit COA Maintenance of Agreement (MOA) annual report	CQI <i>Scheduled for 11/1/2023</i>
<b>Monthly</b>	Conduct Safety Committee Meetings	SC <i>Ongoing monthly; supplemented by separate Pandemic Committee meetings conducted by Safety Chair with Cabinet members every 2 weeks</i>
<b>Quarterly</b>	Submit quarterly CQI site program reports	EDs <i>All quarters received</i>
	Award/Acknowledge Leading by Example Winner	HR <i>Postponed after Q1 due to COVID and HR restructuring. Program to be resumed.</i>
	Conduct Corporate CQI Committee Meetings	CQI <i>9/15/2022, 2/26/2023, 5/18/2023</i>
	Conduct Incident and Grievance Reviews	CQI <i>ongoing</i>
	Complete Performance & Outcome (P&O) Reports	CQI <i>All quarters produced</i>
	Complete Census Reports	CQI <i>produced weekly</i>
<b>Bi-Annually (minimum)</b>	Conduct Local CQI Committee Meetings, submit minutes to VP-CQI & Training	EDs <i>FL programs met; GA placed on temporary hold; MD substituted FCG virtual support groups</i>

	Conduct Local Advisory Board Meetings for fundraising planning	EDs  <i>Held virtually when possible; fundraising continued through staff initiatives.</i>
<b>Annually</b>	Review/Revise Emergency Safety Procedures Manual	SC  <i>Ongoing throughout the year</i>
<b>Ongoing</b>	Award/Acknowledge Employees (Employee Recognition Program for job tenure)	HR, CEO, VPPs, EDs  <i>Ongoing throughout the year</i>
	Review/Revise NTF Policies & Procedures	VPs  <i>Reviewed on ongoing basis</i>
	Submit COA Self-Reports per COA Policy (as needed)	CQI  <i>6 reports submitted: 1 infant death (unrelated to NTF services and unpreventable) and 5 serious injuries</i>
	Network with community organizations	EDs, Cabinet, BD  <i>Ongoing through community meetings</i>
	Conduct Internal Program Reviews	EDs, QA staff  <i>Ongoing throughout the year</i>
	Conduct External Program Reviews per contracts	VPPs, EDs  <i>Few reviews conducted during this fiscal year. The Daytona program was audited by the lead agency in November 2022.</i>
	Submit external audit reports to CQI as received	EDs, VPPs  <i>ongoing</i>
	Distribute FIRST and Nurturing Parenting satisfaction surveys upon case closure	FIRST and NPP EDs  <i>Ongoing</i>

**LEGEND**

**BD** – Board of Directors

**CEO** -Chief Executive Officer

**COS** -Chief of Staff

**CFO** – Chief Financial Officer

**CQI** -VP of CQI & Training, Corporate CQI Committee Chair

**VPP** -VP of Programs

**HR** -VP of Human Resources

**ED** -Executive Directors

**SC** -Safety Committee

**SPC**-Strategic Planning Committee

## **PQI 2: ROLES AND RESPONSIBILITIES**

### **Full-Time CQI Staff Positions**

Four individuals comprise the CQI department: the VP of CQI and Training, a Quality Assurance Manager, a Quality Assurance Specialist, and a Training Manager.

Staff assigned direct responsibility for implementing and coordinating the organization's CQI system are competent to engage people throughout the organization, collect and analyze data, communicate results and findings to key stakeholders, and implement internal and external evaluation methods. Their job descriptions determine the minimum education and experience levels required for the position. Coaching, supervisory sessions, and on-the-job training are used to support and further the skills required for successful day-to-day oversight of the system. In instances in which other personnel are asked to participate in specific CQI activities outside of their normal job duties, they are provided with group or individual training on relevant procedures and tools.

It may not be typical of child welfare agencies; however, NTF believes that training and quality are not exclusive. They must work in tandem so that the organization can provide the best possible care to the families and communities it serves.

The NTF team is geographically diverse and managed remotely. The VP works from the corporate office in Daytona Beach, Florida and the remaining three members are co-located in Stone Mountain, Georgia.

### ***Staff Responsibilities***

#### ***Vice President-CQI and Training***

The VP is accountable for planning, directing, and coordinating NTF's CQI, risk management and training programs. To ensure that all quality, risk management and training initiatives remain in alignment with NTF's mission; compliance with COA and NTF policies; and industry best practices, the VP serves as the Chair of the Corporate CQI Committee, a member of the NTF Cabinet, a teammate on the Strategic Planning Committee, the primary NTF COA coordinator, and the NTF's policy and procedure "gatekeeper."

***The VP-CQI and Training for FY 22/23 was Gaye James, located in the corporate office in Daytona Beach.***

#### ***QA Manager***

The Quality Assurance Manager serves as CQI advocate, mentor, and compliance monitor. QA Manager responsibilities include such activities as case record reviews; participation in local CQI committee meetings; data aggregation and development of CQI reports; participation in the satisfaction survey process; creation of new policies and procedures; development and delivery of training necessitated by new state, contractual, or accreditation requirements; identification of industry best practices; data entry for risk management reports; case record archiving; expertise in state-mandated case record systems; and case record archival and retrieval.

While the QA Manager supports all programs, much time is dedicated specifically to Georgia needs. Practices and standards of the Office of Provider Management (OPM) differ greatly from other NTF funders and frequently change. The manager fully engages in staying current on these changes and assuring that appropriate steps are taken for compliance, which relate to training, documentation; and development of new policies, forms and action plans.

These manager is also critical to fulfilling COA accreditation obligations. As the result of involvement in many accreditation cycles, the QAM is heavily relied upon by other personnel to help interpret standards; review and revise policies; and lead the agency toward successful achievement of another four years of accreditation.

***QA staff members for FY 22/23:***

***Gabrielle Rodney, QA Manager (GAW)***

***Training Responsibilities***

The Training Manager is responsible for development and monitoring of the agency's training/learning plan. The plan is essentially a process in that it must remain dynamic and responsive to a new or different program, contractual, regulatory, or COA requirements. Training is delivered through online and classroom methods. The manager locates, or, if necessary, develops required training. As the administrator of NTF's learning management system, the Relias platform, the manager also bears sole responsibility for assigning, monitoring and reporting on all training activities.

Additionally, the manager serves as the agency's lead trainer and liaison with NTF training vendors and associations. One of the most challenging aspects of the position, because there are no full-time instructors that form a true training department, is maintaining a cadre of instructors on loan from their departments/programs when training is needed. This means they must be able to perform training assignments in addition to their typical job duties. This will continue to be a challenge in the coming year due to budget constraints.

The training manager is also an integral part of the COA accreditation process, leading efforts to meet all training and supervision standards while supporting those for other departments and functions.

***The training team comprised the following designated/certified agency instructors:***

***Atlanta***

***Cynthia Williams, Training Manager (lead trainer and liaison with vendors and programs)***

***Gabrielle Rodney, Quality Assurance Manager***

***Augusta (GA East)***

***Tanya Craft, Executive Director***

***Tamala Thompson, Coordinator of Training***

*Baltimore*

*Kelsey Reed, Recruiting Assistant*

*Corporate office (Daytona Beach)*

*Shannen Sabino, Office and Contract Specialist*

*Daytona Beach programs*

*Megan Richardson, Family Advocate*

*Live classes continued at all four program sites. Twenty small group CPR/first aid trainings were held in FY 22/23.*

## **Program Supervisors/Directors**

Supervisors of direct service personnel and program directors bear responsibility for ensuring CQI is at the forefront of daily operations. They are held accountable for helping the organization evaluate and report on quality initiatives at the local level. They contribute to the collection and interpretation of data and direct the program team in the use of client outcomes to improve service delivery. At regularly scheduled meetings, “all staff” as well as foster caregiver sessions, CQI is a frequently discussed topic so that personnel are aware of and given an opportunity to discuss the group’s performance and exchange ideas about potentially better ways of conducting operations or delivering services.

*The supervisory/management team included the following staff:*

### **Atlanta, GA**

*Gabrielle Rodney, Quality Assurance Manager*

*LaToya Samuel, Assistant to the VP of GA and MD Programs*

### **Augusta, GA (GA East)**

*Tanya Craft, Executive Director*

### **Baltimore, MD**

*Donna McCarter, Executive Director*

### **Bartow, FL**

*Heather Monteath, Executive Director*

*Krisandra Carranza, FIRST Clinical Director*

*Wanda Phillip, FIRST Supervisor*

*Chelsea Hand, FIRST Supervisor*

### **Corporate**

*Tony Everett, President and CEO*

*James Akins, Chief of Staff*

*Chris Gurley, Director of Information Systems*

*Jamila Hankins, VP GA and MD*

*Tiffany DaSilva, VP of FL*

*Gaye James, VP of CQI and Training*

*Amy Drolet, VP of Human Resources*

*Darren LaLuzerne, CFO/VP of Finance*

*Kelly Morgan, Assistant to the President*

*Daytona Beach, FL*

*Bridgette Senez, Executive Director*

*Paul Dixon/Olivia Quinn, Sibling Foster Care Program Director*

*Sera Martino, Sibling Supervisor*

*Brandi Colon, FIRST Supervisor*

*Melinda Harvey, FIRST Supervisor*

*GA West*

*Keita Evans, Executive Director*

*Dana Frazier, Lead Case Manager*

*Treasure Coast, FL*

*Keturah Chambliss, Program Director*

*Ana Wilson/Angela Yearwood, Lead Family Care Manager*

**NTF COA Reaccreditation Team**

*The internal COA team, first established in FY 19/20 will reconvene in 2024 as the group prepares to begin required tasks for 2025 accreditation.*



## PQI 3: PERFORMANCE AND OUTCOME MEASURES

### Key Outputs and Outcomes

NTF's CQI system includes measures to build capacity, improve services, and meet reporting requirements. Both quantitative and qualitative indicators are used.

It's important to note that in COA's 2023 PQI standards, there is some overlap in the information required in PQI 3 and PQI 5. For purposes of this document, PQI 3 has been designed to focus on what is measured and how. *PQI 5 describes how the data is reported and analyzed.*

### Agency Performance Targets

NTF's overall goals for performance include the impact of services on clients, the quality of service delivery, and management and operations performance.

As applicable to the site's services, the program site plans are required to include goals that measure such elements as:

- Abuse during services
- Prevention of placement into out-of-home care
- Foster home retention
- Permanency outcomes
- Placement with siblings
- Frequency of case manager visits
- Early and Periodic Screening, Diagnosis and Treatment (EPSDT) requirements

The primary Performance and Outcome (P&O) measures that are tracked and reported quarterly for *all* sibling programs include the following:

- Average percentage of siblings placed together
- Average length of stay in NTF care
- Average number of placements while in NTF care
- Number of reunifications (and with whom)
- Number of adoptions

Program specific service delivery targets, measures, outputs, outcomes, and data sources are defined in the Client-Centered Logic Models that appear in each service standard description for which NTF is COA accredited: Foster/Kinship Care, Family Preservation Services, Child and Family Development and Support Services. The targets and related information are reflective of internal and external contractual expectations.

### Data Sources

#### **Case Management**

##### *Internal Case Management Database*

NTF uses a centralized, customized Excel database to store and track common service delivery data across all NTF sibling programs. Some of the inherent problems with data capture when working in multiple states are the differing contract requirements, performance measures, state

regulations, and state-required case management systems. The agency’s database captures the P&O metrics listed above.

In addition, each FIRST program maintains a customized Excel database to store and track clients served and key case output activities. The data is sufficient to also derive some of the outcome measures for these programs.

#### *State Case Management Databases*

All states in which NTF operates require data entry into their proprietary case management systems by qualified NTF personnel. In Florida, all case information must be entered into the FSFN system. In Georgia, the online state database for case management is known as SHINES, and in Maryland the CANS system is used. To gather a broader perspective of performance, a combination of data collected through the centralized database and that available at the program level is required.

## **Training**

### ***Relias Learning Management System***

The Relias learning management system contains a library of hundreds of online courses for all categories of personnel as well as direct care service providers, foster caregivers, and interns. Mandatory assignments include such courses as teambuilding and trust; communication skills; ethics; trauma; health and safety; risk management; quality improvement; and cyber security. As a supplement to assigned mandatory courses, learners also have the ability to select electives to help achieve their minimal number of training hours and continue their personal development.

### ***KnowBe4***

The NTF IT department implemented KnowBe4 as a technology security measure to protect the integrity of the agency’s data. The system provides comprehensive and up-to-date training on various types of scams, detection techniques, and prevention measures. To keep users from becoming complacent in their use of NTF email, the system periodically issues misleading emails in an attempt to “trick” users into taking specific actions or clicking on a fictitious hyperlink. Individuals who do not detect the planned scam and follow the instructions in the email are immediately enrolled in refresher training and their supervisor is notified. Additionally, the system regularly issues tips on new phishing or other scams as they come into use. IT management closely monitors NTF users’ activity and intervenes if needed to mitigate risk.

### ***Storm Winds***

NTF also uses Storm Winds, a training software package geared to the IT field. These comprehensive courses are specifically focused on technology advances and are critical to keeping the NTF IT team current on the ever-changing IT landscape. As with the courses offered through Relias, IT learners earn training credit to apply toward their annual training requirements.

## **Risk Management**

### ***Incident Reporting***

CQI staff maintains an Excel spreadsheet to track, log and report all NTF incident reports that document threats of harm to clients, staff, and other key stakeholders as they occur. The database includes such information as descriptions of the incidents, occurrence dates, client names,

locations, and types of incidents by category. Reports are maintained in print format at all program locations. This information is highly confidential and is kept in secure locations, accessible only by designated personnel. Resulting summary reports, described in PQI 5, are used to track trends and are invaluable for risk management and prevention.

## **Human Resources**

### ***Paychex***

In September 2022, NTF moved its' HRIS and payroll system to Paychex, a Professional Employer Organization. This partnership allows NTF to provide employees with better more affordable benefits and is a valuable resource for completion of the following types of employee-related activities.

- Online performance evaluations
- Employee retention data
- Compensation analysis
- Employee benefit management (insurance plans, PTO, investments, etc.)
- Internal communications
- Compliance messaging/reporting

## **Satisfaction Surveys**

### ***SurveyMonkey***

NTF subscribes to a third-party survey software system known as SurveyMonkey. The application allows the CQI team to develop and report on any number or types of survey. It's used for the traditional CQI satisfaction surveys as outlined in the CQI activity schedule, and can be used in an ad hoc manner to create new customized surveys if the need arises or at the request of the Cabinet or program management. For example, if a survey does not result in the desired level of detail in collected responses, a follow-up survey can be quickly fashioned and distributed to allow evaluators to review data at a more granular level. Reports can be designed for easy aggregation through the use of filters to identify such indicators as program location and responses to particular questions.

NTF employs a range of satisfaction surveys to help assess performance and identify areas for improvement. All surveys are optional and submitted anonymously. In some instances they are completed online, and in other cases in which that method has not proven effective, they are print-based. They are most frequently used by the CQI team, the HR department, and program staff. In all instances, respondents are provided an opportunity to comment on what they believe NTF does well and where the agency can improve.

## **Community Stakeholder Surveys (All Service Types)**

NTF solicits input from referring agencies, schools, funders, law enforcement and other individuals that routinely interact with NTF. Surveys are directed only to those respondents with first-hand experience with the agency's work with children and families. Questions focus on such areas as staff knowledge, effectiveness of services, and staff responsiveness.

### **Child/Youth Surveys (Foster/Kinship Care Services)**

Children and youth aged nine and older in NTF foster homes are given surveys to learn whether they feel safe, the nature of their relationships with staff, and their experience with the foster caregiver.

### **Family Surveys (Foster/Kinship Care Services)**

NTF uses annual surveys to seek input from biological family members, relative caregivers, and non-relative caregivers on such topics as staff knowledge and engagement; accessibility to services; and effectiveness of services.

### **Family Surveys (Family Preservation Surveys)**

Clients participating in NTF family preservation services, such as those in the agency's FIRST programs, are provided with surveys upon case closure. This is due to the shorter duration of service delivery, which prohibits the use of an annual survey.

### **Foster Caregiver Surveys (Foster/Kinship Care Services)**

Foster caregivers are questioned about such topics as staff and management support; the quality of services provided; and interaction with biological parents.

### **Employee Satisfaction and Benefit Survey (All Personnel)**

The HR department issues an annual online survey using SurveyMonkey to gather personnel feedback on topics such as frequency and quality of supervision; working conditions; communication and trust; benefits, training and more.

### **Online Suggestion Program (All Personnel)**

NTF offers a suggestion program that is designed for staff members to submit suggestions directly and confidentially to the human resources vice president through the agency's intranet, EmpNet. In addition to the online submission process, suggestions may also be received from the various satisfaction surveys and during supervisory meetings.

### **Training Evaluations (All Personnel, Foster Caregivers and Other NTF Learners)**

Instructors of live training classes distribute training evaluation forms during class sessions. These provide learners an opportunity to rate the instructor, comment on course content and class materials; make suggestions for improvement; and suggest other training they believe would be helpful for their success on the job. Upon completion of Relias online courses, the system prompts learners to fill out a survey about that specific course. The training manager and VP of CQI and Training regularly review these feedback tools to note areas of strengths and improvement needs.

### **Staff Recognition (All Personnel)**

While NTF's employee recognition program, "Leading by Example," does not fit the strict definition of a satisfaction survey, it is worth noting here as it is an important feedback mechanism. Over the years, many studies have shown that employee recognition is an often overlooked yet key element of job satisfaction. Individuals feel more valued when they are applauded for a job well done. With that in mind, the HR team developed the program as a quarterly initiative that

seeks nominations from *peers, staff and managers* for employees who have gone above and beyond their work requirements. An internal committee reviews nominations and determines the winner(s). Awards include a framed certificate; an announcement and presentation photo on EmpNet, the internal website; and a gift card.

Another component of the program is recognition of employee job longevity. On an annual basis, the HR department compiles a list of employees that have been with the agency in five-year increments: 5 years, 10 years, 15 years, and 20 years. Different awards are presented for each level of service, with a commensurate increase in the value of the gift card. Every recipient is presented with a lapel pin, a plaque (a customized item is presented for display for employees with 20+ years with the agency), a gift card, and an acknowledgement on EmpNet.

### **Management and Operational Performance Measures**

The organization identifies measures for management and operational performance to measure progress toward achieving its mission and strategic and annual goals; evaluate operational functions that influence the capacity to deliver services and meet the needs of persons served; and identify and mitigate risk.

#### ***Measuring Progress toward Mission and Goals***

Progress toward NTF's mission and goals is measured on a regular basis through the following types of operational methods. Content information about these and related reports and analysis is covered in the PQI 5 section of this plan.

- Monthly director's reports
- Quarterly CQI and risk management reports
- Quarterly P&O reports
- Annual reports: agency and program sites

### ***Operational functions that influence capacity of service delivery and clients***

Capacity is often beyond the agency's control, as it is largely dictated by funding. With that in mind, management closely monitors budgets and resources, including qualified staff.

### **Achievement of budgetary objectives**

In order to make the most efficient use of limited child welfare dollars, our budgets are created to effect the greatest impact in our communities. The budget process includes each program directors' input. With the emphasis being on the programs, we strive to limit the funds that are directed to administrative overhead. Financial statements showing actual expenses vs. the budget are reviewed monthly with each program director, and significant variances are addressed.

### **Efficiency in Allocation and Utilization Human Resources**

Much of this information is made apparent in our organization chart. The manner in which the reporting is established allows each supervisor to work with a group of staff to ensure they operate as a cohesive team. Achievement of group objectives is also attained through job analysis and design to ensure that our clients have the most efficient, effective and resourceful individuals providing services appropriate to the clients' needs. Established oversight for each location grouped under one leader ensures consistency across the teams in a state. Our VPs of Programs have ultimate oversight for the programs in their respective states. The support staff, such as HR and recruitment, also have responsibilities for specific locations/states to ensure legal compliance and consistency across the programs.

### **Retention and Satisfaction of Competent and Qualified Staff**

While it is difficult to retain all staff, turnover rate for the 2022 calendar year is 7.58%. The average tenure for our employees is 6.11 years. The longevity of our staff is largely due to their passion to serve our communities, as well as our generous benefits and time off package.

### **Measures to Identify and Mitigate Risk**

#### ***Data Management***

In addition to systematically and reliably collecting, reporting, and analyzing CQI information, NTF has built data integrity into operational elements wherever possible within the agency. The Management Information System resides on a networked computer system. Information contained in the system is protected by the use of passwords, which must be changed on a 45-day basis, limited access security within the system using firewalls, account access privileges, anti-spam filtering of email and anti-virus scanning of all data. Detailed information regarding data/information management is provided in the agency's policies and procedures such as those that cover the security of information, NTF's disaster recovery plan, data security measures, and electronic communication guidelines. This information is also included in the employee handbook to ensure that all personnel are aware of and abide by these critical policies.

Files and email are backed up daily to an off-site location. Client case records are maintained in locked filing cabinets with access limited to appropriate personnel. Personnel records are maintained in locked filing cabinets at the corporate office and access is limited to HR personnel.

In addition to the agency’s mandatory cyber-security training and ongoing monitoring of NTF IT systems, KnowBe4, issues “Scam of the Week” emails to all users. These include information about the latest types of phishing and email-related attacks. They provide clearly explained tips on how to identify these ruses, types of individuals who may be behind them, and ways to avoid falling into the “traps” set by the scammers.

### ***Risk Management Reviews***

In addition to having a multitude of prevention measures in place, NTF also has established policies and timeframes for risk management reviews. These include, but are not limited to the following:

- Reviews of immediate and ongoing risks
- Quarterly reviews of risks related to incidents of illness, injuries or death; facility safety issues; and grievances
- Annual reviews of adequate insurance coverage; contracts with third parties and service agreements; and legal issues
- Technology assessments: systems in use, IT staff capabilities, data security, procedures for managing data interruptions, and regular back-up of electronic data

### **Integration of Findings from External Reviews**

Regular reviews are conducted by the contract/funding agencies and/or community-based care lead agencies, independent financial auditors, health departments, and accreditation agencies as determined by contracts and mandates. The frequency and duration of the audits varies according to contractual stipulations. Depending on the nature or scope of a deficiency cited by an external review, NTF develops a plan to correct that deficiency. Corrective Action Plans, if required, are submitted by the program’s Executive Director and tracked closely by designated staff, program management, the Program VP, the CQI Committee, and the Cabinet.

### ***Current External Review Agencies***

- Department of Children and Families (DCF): State of Florida
- Community Partnership for Children (CPC): Daytona Beach, FL
- Heartland for Children (HFC): Bartow, FL
- Communities Connected for Kids (CCKids): Treasure Coast, FL
- Division of Family and Children Services (DFCS): Georgia programs
- Department of Human Services (DHS): Baltimore, Maryland
- SB & Company – annual agency financial audit
- Council on Accreditation (COA)

## PQI 4: CASE RECORD REVIEW

### Procedure

The organization conducts case record reviews at least quarterly, according to the NTF Record Review Policy (SD-PA-002). The review is a systematic, orderly process performed for each of its services at all NTF program locations. Standardized record review forms are used for the process and include objective, measurable criteria to evaluate documentation of assessments; case or service planning; services provided; outcomes of service; and aftercare planning. Each site maintains a record of all completed reviews either in printed or electronic version. Reviews are completed by staff that do not have direct professional responsibility for the case being audited such as a peer or unit case supervisor. The internal monitoring process is reviewed annually by the CQI committee.

### Sampling Size

Census at time of case record review	Programs (Sibling Foster Care)			High-Risk Programs (FIRST)		
	Total Case Records to Review	Total <b>Open</b> Case Records to Review	Total <b>Closed</b> Case Records to Review	Total Case Records to Review	Total <b>Open</b> Case Records to Review	Total <b>Closed</b> Case Records to Review
<b>25</b>	6	5	1	6	5	1
<b>50</b>	11	9	2	12	10	2
<b>75</b>	16	14	2	18	15	3
<b>100</b>	20	17	3	23	20	3
<b>150</b>	27	23	4	33	28	5
<b>200</b>	33	28	5	42	36	6
<b>250</b>	38	32	6	51	43	8
<b>500</b>	55	47	8	85	72	13
<b>750</b>	64	54	10	111	94	17



The sample for review is based on the census that is closest in size to the number of open cases in each program at the time of the review, as shown in the chart above. The sample for record review is randomly selected from open and recently closed cases by choosing every tenth child from the alphabetized lists of open and closed cases. For review of sibling cases, siblings from the same family cannot be selected during the same review period. Each site maintains a record of which cases have been reviewed to ensure a different sample is used for each review cycle.

### **Assessment of Results**

Results of each record review are analyzed by the site director and supervisor/lead assigned to the case. Based upon the record review findings, methods to improve documentation and service provision are designed and implemented. Any record deficits are assigned a deadline for correction and corrections are verified by the director. Findings from the reviews are included in each site's quarterly CQI report.

Exceptions may be made in the following situations:

- Programs in which cases are open less than 90 days may conduct a file audit of all closed cases instead.
- Another form of case review may replace part of the required sample as long as the evidence of the review is documented in accordance with the Record Review Policy.

## PQI 5: ANALYZING AND REPORTING INFORMATION

### Collecting, Reviewing and Aggregating Data

Data collection sources were discussed under PQI 3, and include:

- Internal case management databases
- State case management systems
- Relias learning management system
- Incident reporting database
- Paychex (HRIS)
- SurveyMonkey

These systems allow staff to aggregate and generate reports based on the resulting data.

Aggregated data reports that NTF routinely uses to analyze performance are prepared on a weekly, monthly, quarterly, and annual basis according to the type of information they contain and who is analyzing the data. Although they are typically prepared according to a predetermined schedule, they can be drafted at any time as needed. They are designed to track and monitor identified measures, identify patterns and trends, compare performance over time, and compare results against benchmarks. Key outcome measures are evaluated at least quarterly and reported in the site CQI reports.

Relevant reports are made available for discussion at staff, departmental, supervisory, and Board meetings. Additionally, they are provided to funding agencies or other auditing entities as required by contract or upon request. Whenever possible, results are depicted graphically as shown in the sample quarterly incident report in the appendix. Key reports such as quarterly performance reports, satisfaction survey results, and annual CQI reports are also made available on NTF's public website.

## Census Reports

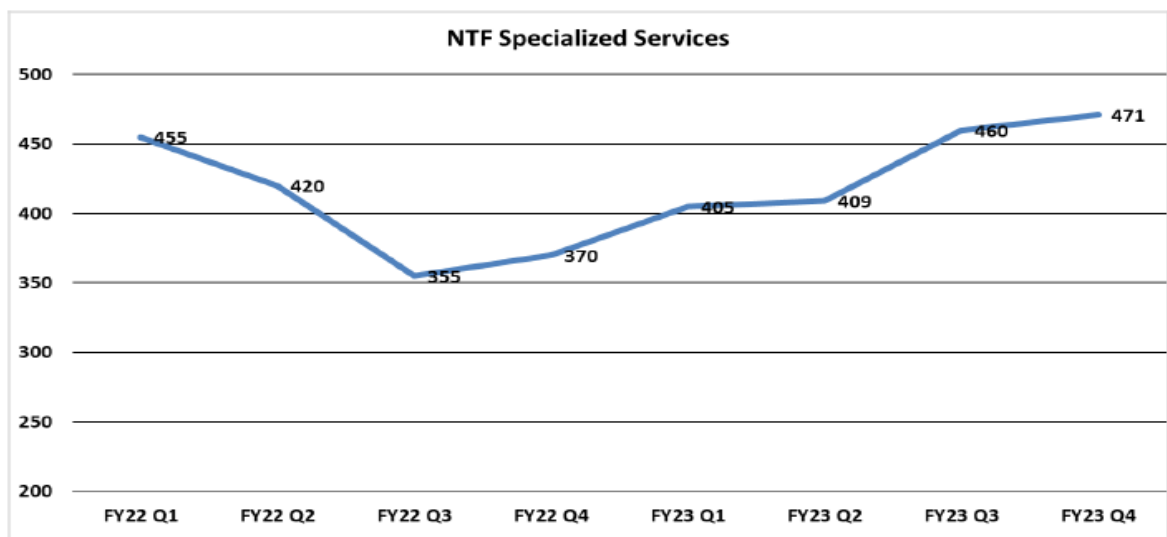
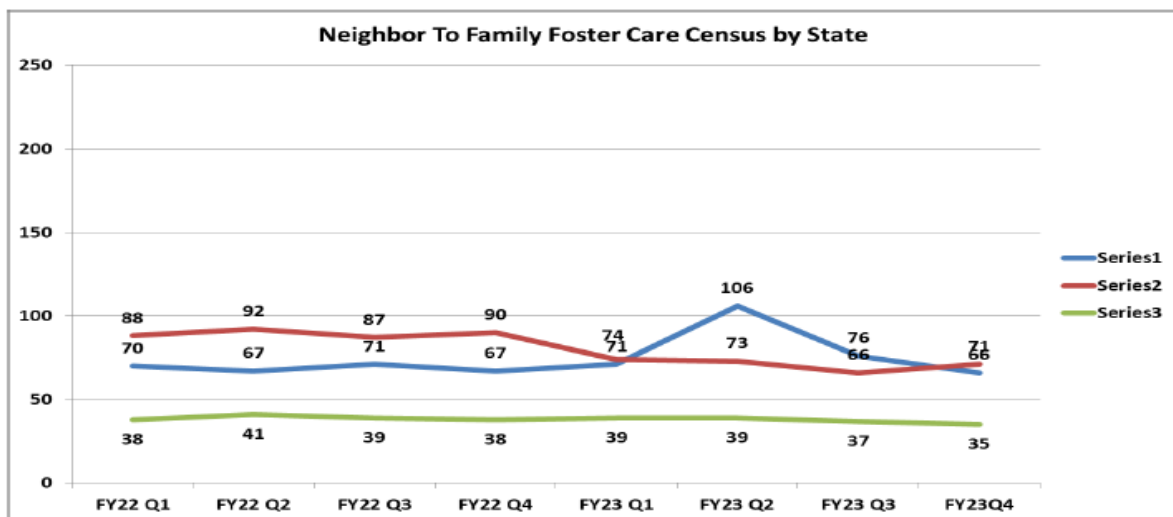
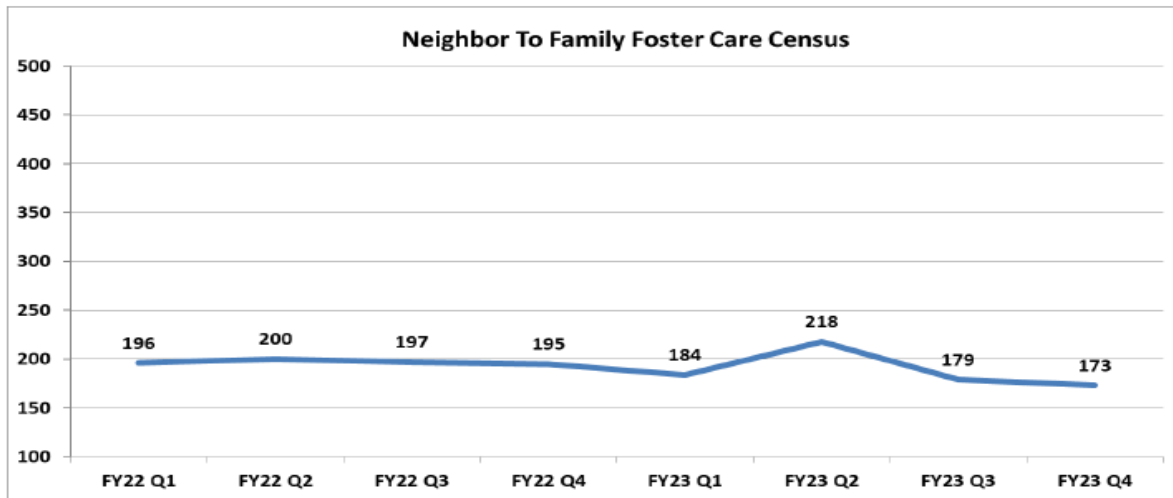
Weekly census reports allow programs and management to track fluctuations in clients served. These reports are also developed for analysis of monthly, quarterly, and/or annual data. Reports on longer time periods provide a broader perspective for comparing performance over time, identifying trends, predicting future funding, and evaluating program effectiveness. Coupled with financial reports and other agency performance data, the Cabinet, Board, and other key stakeholders are able to make informed decisions about the fiscal viability of existing or new programs; potential for program expansion; staffing levels; and any needed improvements for marketing/recruitment strategies.

### *Weekly Census-data from Q1 22/23-Q4 22/23:*

Current Programs		07/04/22	06/12/23	6/28/23
<b>Florida</b>	<b>Foster Care</b>	<b>74</b>	<b>65</b>	<b>67</b>
	<b>Diversion</b>	<b>577</b>	<b>436</b>	<b>471</b>
Bartow	<i>Prevention/Diversion</i>	<b>184</b>	<b>152</b>	<b>184</b>
Daytona Beach	<i>Foster Care</i>	<b>74</b>	<b>65</b>	<b>67</b>
	<i>Prevention/Diversion</i>	<b>343</b>	<b>179</b>	<b>189</b>
Treasure Coast	<i>Safety Management</i>	<b>50</b>	<b>105</b>	<b>98</b>
<b>Georgia</b>	<b>TOTAL Foster Care</b>	<b>93</b>	<b>77</b>	<b>71</b>
<i>Georgia East</i>		<b>28</b>	<b>23</b>	<b>23</b>
<i>Georgia West</i>		<b>65</b>	<b>54</b>	<b>48</b>
<b>Maryland</b>		<b>39</b>	<b>34</b>	<b>35</b>
<b>Total NTF Foster Care</b>		<b>206</b>	<b>176</b>	<b>173</b>
<b>Specialized Services</b>		<b>577</b>	<b>436</b>	<b>471</b>

Annual Census:

NTF Census Q4 FY 22/23



## Monthly Program Services Reports

Program services are addressed during monthly group and individual supervision between the executive directors and vice presidents. Each executive director is required to submit a monthly report. The director's responses to the following serve as the foundation for discussion and actions to address areas of concern or recognition:

- **Budget Monitoring (if applicable)** – variance between projected and actual budget for the month and plan for the coming month to address the issue.
- **Stakeholder Relations** – any difficulties, problems, issues, major meetings with funding or referral sources. Also positive aspects of these relationships and any complaints from families, clients, community, or other customers and the program staff's response.
- **Staff/Peer Issues** – any disciplinary actions, new hires, resignations, open positions, and morale problems, along with a plan to address these concerns. The names of any staff member(s) that have done an outstanding job and why. Grievances, incidents, or accidents involving persons serviced or personnel.
- **Program Issues** - including new programs, changes to existing programs, critical incident reports, and other difficulties that impact the smooth operations of the program's services.
- **Monitoring/ Compliance Issues** - any issues related to current or upcoming program audits from outside sources, results of chart audits and any issues related to compliance. Any corrective action plans if/when appropriate.
- **Quality Improvement Issues** - any newly identified QI issues, progress/update on existing issues, and needs to solicit NTF assistance to help address these issues.

*Each director and his or her vice president met virtually or in person at least monthly. During the scheduled supervision meetings, significant issues, performance improvement efforts, and other noteworthy data was discussed. No problematic issues required escalation to upper management for resolution.*

## Mandatory Training Compliance Reports

Every individual serving NTF is required to complete a number of annual training hours per job description or role served with the agency. These courses, whether live or online, must be completed by an assigned deadline. Compliance for training is monitored closely by the training department, management and the CQI Committee to 1) measure individual and program performance 2) reduce the potential for risks to staff or clients and 3) to increase the knowledge level of all to provide the best possible level of care. Training hours for all personnel and foster caregivers are reviewed as part of annual performance evaluations. Those who are out of compliance may be placed on performance improvement plans.

*As part of the continuous quality improvement process, the training department conducted an internal course evaluation study. The intent was to determine content relevance and ease of use in courses assigned to newly hired and newly promoted supervisors. Respondents indicated that they believed these surveyed courses were relevant for their jobs and that navigating the online system was easy.*

- *Fundamentals of Management: Setting the Stage for Success*
- *Leadership Fundamentals: Leading as a Coach*
- *Motivating for Improved Performance*
- *Better Performance with Coaching*
- *Defining Work Expectations*
- *Assessing, Supporting, and Improving Work Performance*
- *How to Discipline and Promote Positive Work Place Enjoyment*

*Monthly training compliance remained high, in the 95-99% range.*

### **Monthly Safety Reviews**

The Safety Committee meets on a monthly basis. The committee's timely recall information, weather alerts, and key safety tips are provided on an ongoing basis to help ensure a safe work environment. The safety committee promotes health and wellness throughout the year and assists with safety-related training. Additionally, at each program site, team members conduct and document quarterly site inspections, lock-down drills, and fire drills to ensure staff are aware of and prepared to respond to potential safety hazards and emergencies.

*Again this fiscal year, the safety committee dedicated much of its efforts on the health and well-being of staff, clients, and foster caregivers. This included investigating, implementing, and refining best safety practices related to the pandemic. Members assured that each location had supplies such as protective masks and hand sanitizer. The committee chairman worked with program management and staff to coordinate facility closure and special deep-cleaning measures as precautions when exposure in the workplace occurred.*

*In addition to remaining abreast of post-pandemic guidelines, the committee still issued its traditional seasonal, weather, special health recognition (e.g. heart health month) and holiday safety tips.*

## **Suggestion Program Reports**

Suggestions made by staff through the suggestion program, satisfaction surveys, or other means are reported for consideration during CQI committee meetings by the VP of Human Resources. If a determination is made that the suggestion will be implemented by the agency, the individual will receive public recognition if he or she chooses to be acknowledged. Suggestions proposed during supervision sessions that require no expense and are of a local nature are often immediately implemented and locally recognized.

*No suggestions were submitted through the formal program. A suggestion link on EmpNet, directed to the VP of HR, has been in place for a number of years to make confidential submissions an easy process. This provides an opportunity for staff to make suggestions for operational improvement at any time - without waiting until the annual survey is deployed. There were no suggestions submitted during the year.*

## Quarterly CQI Program Reports

Executive directors are required to submit quarterly CQI reports to the VP of CQI and Training that summarize information discussed during monthly supervision and program meetings. The reports include the following types of information, which are reviewed during quarterly CQI committee meetings:

- Local CQI committee meeting dates
- Case record reviews and any related corrective action plans
- Progress against program goals
- Program issues
- Quality improvement initiatives
- External audits and any related corrective action plans
- Contract Compliance

*Quarterly reports were submitted throughout the year as required. The reports are based on the approved annual plan created specifically for the individual program. This allows easier review and tracking of performance measures, which are presented side by side for each quarter. Below is an excerpt as a sample of this approach.*

NIF Quarterly CQI Report for: Daytona  
FY 22/23 (July 1, 2022 – June 30, 2023)

NIF OPERATIONS AND CONTRACTUAL REQUIREMENTS							
Goal	Objective	Progress				Modification/ Follow-Up Action Plan	Person (s) Responsible
(5) Meet or exceed internal NIF expectations for performance.  Measures and outcomes should be related to:  - the impact of services on clients - the quality of service delivery  - management and operations performance (goals and objectives related to the strategic/annual plan and to maintain operational capacity to successfully deliver services)	<i>Notate Program/County name ahead of each set of metrics</i>	Program Performance (%)					
	Sibling:	Q1	Q2	Q3	Q4	Comment as needed related to performance	
	Program maintains 18 licensed homes to have sufficient placement resources as expected by contract and to facilitate placement of siblings together while in care.	15	15	15	14	14 licensed Sibling homes and 4 Emergency Placements foster homes. Two Sibling foster homes moved to a different licensing agency during this quarter.	
	Children shall have stable placements. Placement stability rates of 1.25 (P&O data)	1.468	1.38	1.66	1.73		
	80% of siblings are placed together (P&O data)	71.88%	62.5%	69%	61.5%	Siblings with behavioral challenges have to be placed in separate homes or facilities. Sometimes one child is reunified with a parent but not the others.	
	FIRST:  Children are not removed and placed in out of home care. Annual target 87%	91.3%	96.6%	84.9%	91%	3 Foster Homes closed during Q4. Two FP closed due to dissatisfaction. NIF had ongoing discussions with FCG's and CPC about the lack of engagement by these FCGs and there was no major issues with how NIF handled them. One FP closed out and completed a survey where they had only positive things to say about NIF and were stopping fostering due to burn out.	



***External Audits***

*Few programs were audited this year.*

***Daytona-Department of Children and Families (DCF).***

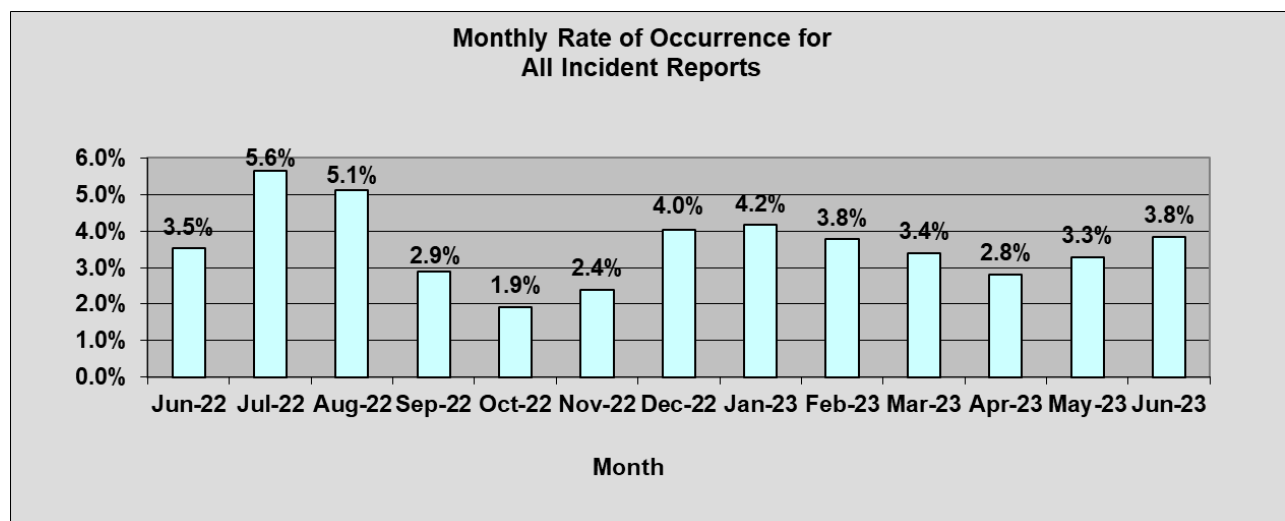
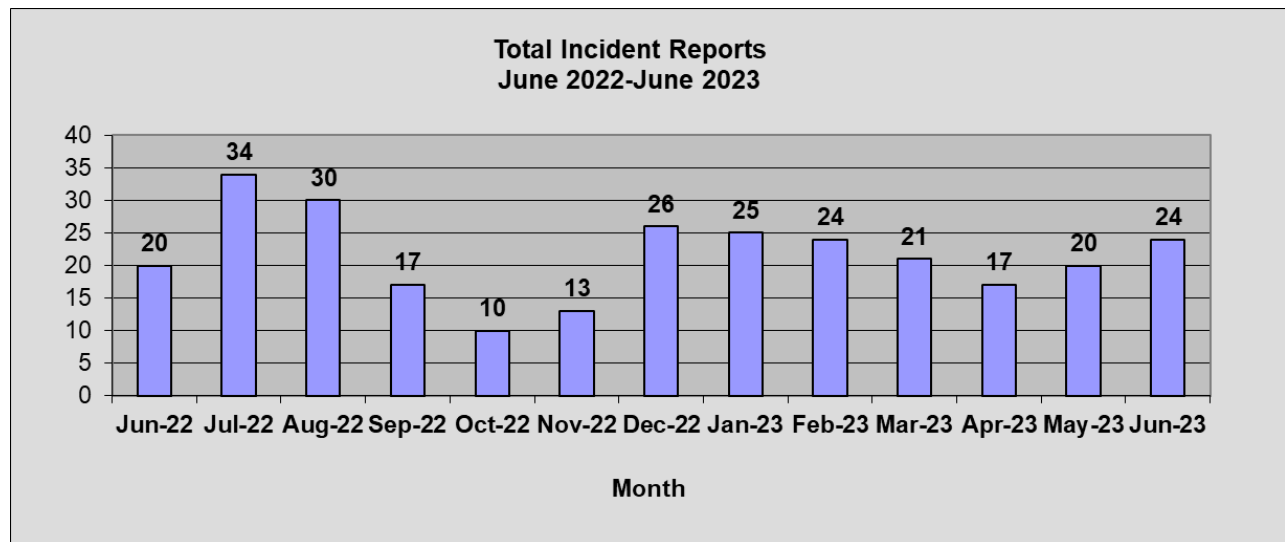
*Audited in the second quarter, a formal Corrective Action Plan was implemented in the Sibling program. Improvement addressed timeliness of licensing packets and background screenings and the completeness of critical documentation. Directors put measures in place to monitor and ensure all packets and checks are in compliance.*

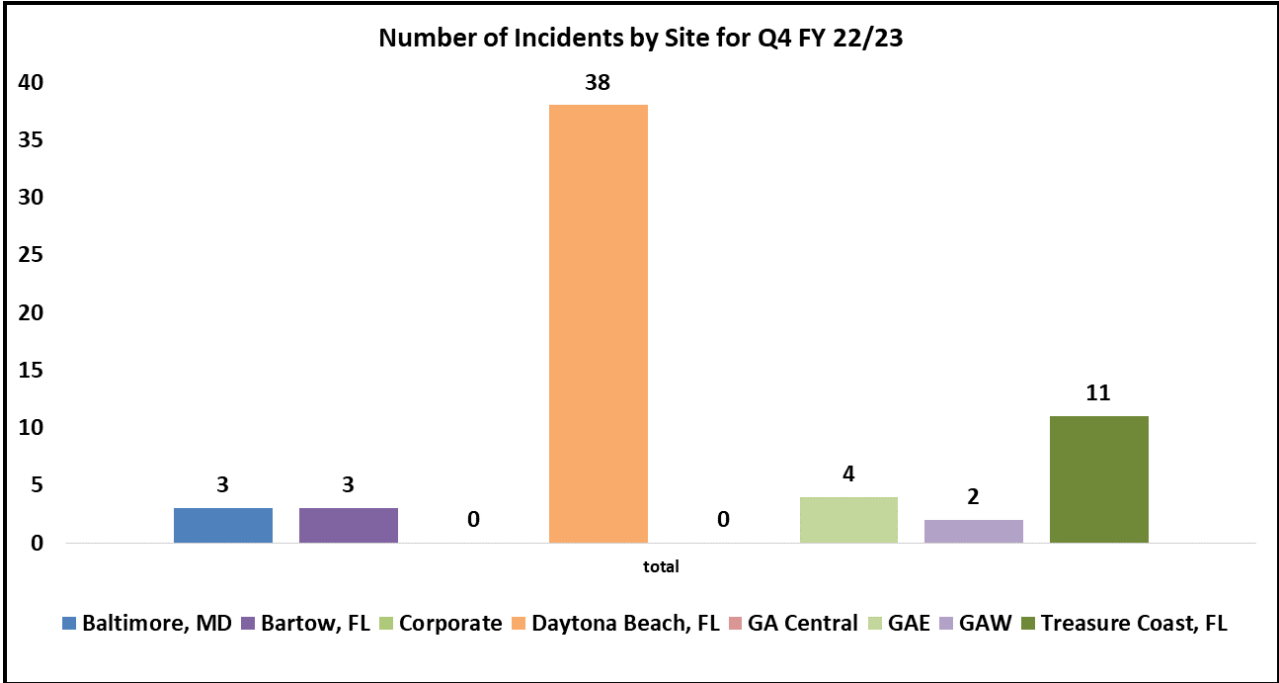
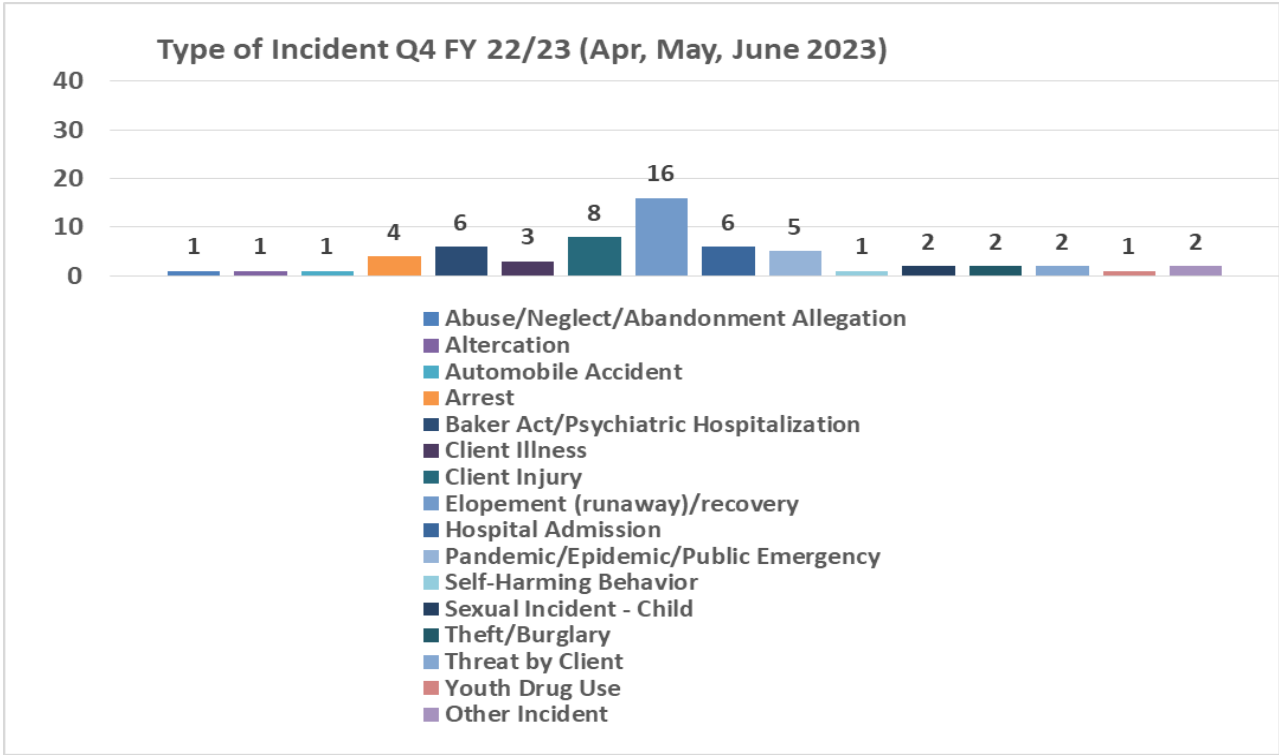
## Quarterly Incident Report Summary

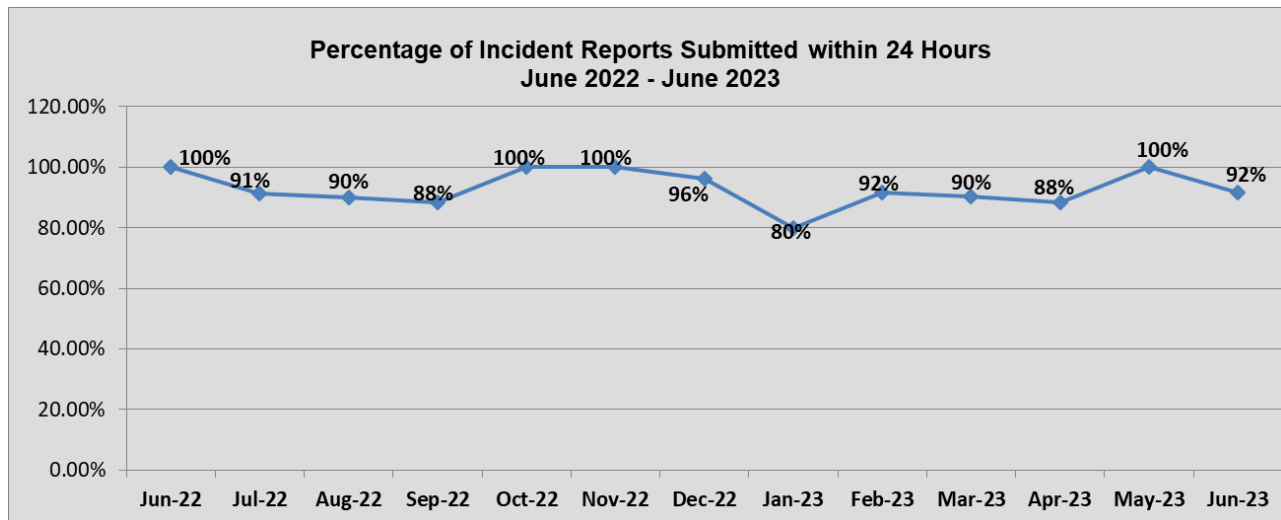
NTF adheres to an incident reporting policy (AM-RM-012) that includes specific protocols for reporting, which includes requirements for investigation and escalation to upper management and/or legal counsel as required. All staff and foster caregivers must complete an online NTF incident reporting course as an initial training requirement.

The Quarterly Incident Report Summary, prepared by the VP of CQI and Training, includes the number of incidents documented during the quarter, the type, the sites, and the percentage of reports received within 24 hours. It is designed to help identify problematic trends and address any areas of concern or implement required procedural changes. Key data from the report is discussed during quarterly CQI committee meetings, quarterly risk management reviews, Cabinet meetings, and Board meetings.

### Quarterly Incident Reports







### Quarterly Incident, Accident, and Grievances Risk Reviews

On a quarterly basis, the CQI committee conducts a risk management review that evaluates the following areas:

- Facility safety issues
- Serious illness, injuries and deaths (as reported through incident reporting process)
- Cases where a person served was determined to be a danger to him or herself or others.
- Service modalities or other organizational practices that involve risk or limit freedom of choice
- All incidents related to medications

*Risk management is reviewed on an ongoing basis. Key topics outlined above were addressed during quarterly CQI Committee meetings and, per NTF policy, serious incidents were escalated to the board of directors and/or NTF legal representatives as appropriate.*

- *The only facility safety issues were instances in which staff or visitors to the site tested positive for COVID and office closure was needed for special cleaning.*
- *There were four client deaths during the fiscal year. All occurred in family preservation programs. They were unrelated to NTF services and were unpreventable.*
- *There were 36 incidents in which a client was considered a danger/threat to self or others. These involved hospitalization for psychiatric evaluation and follow-up therapeutic treatment.*
- *There were no incidents related to medication.*
- *There were a total of 48 COVID-related incident reports.*

## Performance and Outcomes

The VP of CQI and Training develops quarterly P&O Reports on agency-wide metrics using data from the customized database. The reports are presented to management, the Cabinet, the Board, and are made available to other stakeholders. This information is studied to determine the effectiveness of programs in relation to contractual targets and national trends.

Data reported for the sibling programs includes:

- Percentage of Siblings Placed Together
- Average Number of Placements
- Median Length of Stay
- Number of Reunifications
- Number of Adoptions

### *Results for the fiscal year:*

#### Metric

<i>Average number of siblings placed together</i>	<i>97.14%</i>
<i>Average Number of Placements</i>	<i>1.21</i>
<i>Median length of stay – discharged children</i>	<i>8.46</i>
<i>Total number of children reunified</i>	<i>68</i>
<i>Number of adoptions</i>	<i>7</i>

## Satisfaction Survey Reports

Annual surveys are designed to assess NTF’s performance and solicit areas for improvement. Completion of surveys is optional and they are submitted confidentially. With the exception of the employee satisfaction survey, which is conducted by the VP of HR, the VP of CQI and Training is responsible for producing a summary of results to share with management, program staff, CQI committees, Cabinet members, and the Board. Reports are also made available to stakeholders and survey respondents by request or via the agency’s website. Reports are prepared for each of the following surveys as described earlier in PQI 3:

- Community stakeholder survey
- Child/youth survey
- Family survey
- Foster caregiver survey
- Employee satisfaction and benefits survey
- Family preservation survey

### ***Community stakeholder survey***

*Annual surveys were completed by external stakeholders in February 2023. Contacts were identified by program staff in all locations and included individuals with whom NTF interacts on a regular basis, such as representatives from funding agencies, schools, counseling agencies, law enforcement, and similar organizations. All surveys were submitted anonymously.*

*Areas rated most highly included the following:*

- *NTF staff members are courteous and knowledgeable in their interactions with me.*
- *NTF staff engaged the family and demonstrated respect for family members.*
- *NTF staff was open to my ideas.*
- *NTF staff members are easily accessible and respond to my telephone calls, emails, and letters in a timely manner.*
- *I believe that the services that children and families receive from NTF help them address their identified needs.*

### ***Family survey***

*Sibling family surveys were completed by phone in March 2023. Individuals at each program that had no case involvement were provided with the questions and asked to call adult family members to ask survey questions. Direct care staff were asked to let the family members know to expect the calls.*

*The response rate was 40% and three attempts were made for each household.*

*Survey highlights included:*

- *The majority indicated that they believe their children are safe where they are living.*
- *Most indicated that NTF staff treated them with dignity and respect.*
- *The majority said they were pleased with the assigned foster caregiver.*
- *Overall impressions were positive.*
- *Areas for improvement were cited as the need for better communication and assistance such as housing.*

### ***Child/youth survey***

*In May 2023, 48 children in the sibling program, ages nine and older, and in NTF homes for 60 days or more were eligible for the child and youth survey. The survey was presented to the children online using a link to a survey program rather than through a paper copy.*

*The most highly rated comments were as follows:*

- *My foster caregiver listens to my concerns and helps me to get the things I need.*
- *My foster caregiver helps me be safe.*
- *NTF talks to me about where I live and where I want to live.*
- *I feel that NTF cares about my family and me*
- *NTF is helping me with what I say I need.*

### ***Foster caregiver survey***

*The annual foster caregiver survey was distributed in June 2023. It was distributed by email using an online link to a survey program*

*The most highly rated topics were as follows:*

- *I understand the importance of training for my work with children and families.*
- *I believe the training NTF provides helps me be a better foster caregiver.*
- *My NTF case management team shows concern for the children in my care.*
- *If I need to, I can contact my case manager or family advocate's supervisor.*
- *If I call the number I have been given for after-hour emergencies, the staff member that responds knows or knows how to find answers to the problems I called about.*

### ***Employee satisfaction and benefits survey***

*The HR department conducted an annual online survey for all employees.*

*Highlights of responses included:*

- *All respondents indicated they would recommend NTF as a good place to work, citing good communication, training, and environment.*
- *Employees are clear on their job responsibilities and have the tools to be successful in their jobs.*
- *Suggestions included increased compensation and the need to ask for and act on input from staff.*

### **Family preservation survey**

*Surveys for family preservation surveys (FIRST programs) are supplied to all parents upon case closure. These include clients in Daytona, Bartow, and Treasure Coast programs.*

*Each month completed surveys are sent to the funding agency and NTF upper management. Ratings were high for all programs in FY 22/23, which is typical for the programs, and specific staff are often cited for their exemplary work. A common theme commented on across all programs related to professionalism, communication, and respect. Below are just a few specific comments, as excerpted from the surveys.*

#### **Bartow (referring to various staff):**

*“...very respectful and no judgement despite the situation. Staff was patient with my kids during meetings....”*

*“...all my questions were answered quickly...”*

*“...Always answered phone & texts. Helpful with options for services. Always answered my questions no matter how big or small. Enjoyed having [staff name] in our home, she is welcome anytime...”*

*“[staff name] was awesome, friendly and very helpful...”*

*“...I'm glad NTF kept us updated and was very helpful, friendly and concerned. [staff name] Thank you....”*

*“...I'm satisfied with everything...”*

#### **Daytona (referring to various staff):**

*“...[staff name] was very informative & kind. She always kept in contact and made meetings easy. She has been a blessing....”*

*“...I am honestly thankful. NTF helped me become the mom I always knew I was. Thank you...”*

*From a heartfelt note included with the survey:*

*“...When starting this process I felt extremely frustrated. I didn't feel they had any interest in actually helping me - then NTF came into the picture and [staff name] changed my perception of the program. She has been caring, understanding, tough when necessary, and honest. She has advocated for me and gave me a fighting chance at sobriety. My experience hasn't been perfect, mostly because of me struggling, but she has never made me feel ashamed - only empowered. I could write a million things about [staff name], but there probably isn't room. Thank you for assigning her to me....”*



**Treasure Coast (referring to various staff):**

*“...My staff member was impeccable. She was patient, kind, considerate even in the face of my bitterness toward the entire process, she never wavered. She was caring, strong and steadfast. I respect who she is and I would never hesitate to call her "friend". She is a beautiful person and a credit to her profession.....”*

*“...[staff name] was very nice, courteous, helpful and a great support....”*

*“...My care manager did a great job and kept me informed and up to date on everything I needed to know....”*

*“...[staff name] was very polite and professional. He was easy to talk to and get along with. I hope everyone is as pleasant to work with as [staff name] was....”*

*“...[staff name] has been very consistent and helpful in our time of need. I really appreciate all the help she has offered us. This is a great program...”*

**Annual Risk Management Reviews**

In addition to ongoing and quarterly risk reviews, an annual review is conducted at the Board’s annual meeting, updates, if applicable, are considered in the following areas:

- Compliance with legal requirements
- Technology and information management
- Insurance and liability
- Health and safety of administrative and service environments
- Human resources practices
- Contracting practices and compliance
- Client rights and confidentiality issues
- Financial risks
- Public relations, branding and reputation
- Conflicts of interest

*All of these topics were addressed throughout the quarter in a timely manner, and thoroughly reviewed at the annual board meeting.*

## Analyzing CQI Data

Findings generated by the CQI system allow the organization to monitor progress, effectively manage programs, support staff, serve clients using best practices, meet or exceed funder requirements, and promote the agency and its services.

The system is woven throughout the agency to keep quality and improvement clear priorities for NTF's performance at all levels. By using findings and feedback from CQI data throughout the year, the agency is able to use relevant information to develop solutions, replicate effective practices, motivate staff, improve performance and services, and prevent or eliminate identified problems.

## Corrective Action and Improvement Plans

Information collected from CQI activities is used to develop corrective action plans and performance improvement plans when issues have been identified that involve ongoing effort and monitoring. Best practice models are used in improving performance in those areas that are deficient.

When developing Corrective Action Plans (CAPs) and Performance Improvement Plans (PIPs), those involved review and make suggestions for revisions of the following:

- Organization policies and/or procedures
- Personnel assignments
- Personnel training
- Contracts
- Services

CAPs and PIPs include the following information:

- Background information indicating a plan is needed
- Action to be taken
- Person responsible for overseeing action
- Data to be completed
- Date completed

CAPs and PIPs are tracked through quarterly CQI reports. At the end of the determined completion date of a CAP, the VP of Programs and executive directors evaluate if an implemented change was an improvement, and then provide their findings in the quarterly CQI reports.

## **Continuous Monitoring of the CQI System**

The CQI system at NTF is monitored on a regular basis by organization leaders, senior management, and supervisors. This is performed through regularly reviewing and discussing CQI data and reports during staff, management, CQI, and Board meetings. This ongoing attention to the system includes evaluating the relevance and value of collected data, analyzing the components of the CQI system, and identifying the need for improvements to processes and procedures.

*Throughout the year, CQI remained an important agenda item on meetings with staff, CQI committees, the Cabinet and the board of directors.*

## **Annual CQI Report**

The Annual CQI Report, which is completed by the VP of CQI and Training and department staff at the end of the fiscal year, is one of the most significant tools for NTF's CQI process. It completes the current CQI cycle by summarizing key CQI activities that have been completed, are ongoing, have been resolved, or require further work. The CQI Annual Report is distributed to all programs and is made available online through NTF's internal documentation management system. It is also posted on the agency's website for public access and is available by request.

The findings in the CQI Annual Report are used to form the framework for the CQI cycle for the following year. This close linking of the CQI Plan and the CQI Report allows the agency to maintain the continuous quality improvement loop of Plan, Do, Check and Act.

## **FY 2021-2025 COA reaccreditation**

*The final outcome of the COA reaccreditation process was the issuance of an expedited COA reaccreditation. The certification is valid until September 30, 2025. For the first time since its initial accreditation, NTF was awarded the highest possible score for all standards.*

## **FY 23/24 annual goals**

*Goals set for FY 22/23 are still valid for FY 23/24. These include:*

- *Working on increasing census across all programs.*
- *Increasing the number of local CQI and advisory board meetings for the year.*
- *Monitoring and making adjustments as needed to the pandemic safety plan and related protocols.*
- *Monitoring satisfaction surveys to identify trends and make necessary adjustments.*
- *Continuing recruitment efforts for qualified foster caregivers.*
- *Identifying new sites for sibling, kinship care, and family preservation services.*
- *Recruiting and retaining quality employees and remaining competitive with salaries and benefits in accordance with contracts.*
- *Implementing the fundraising and marketing plan to increase donations and community partnerships to support the programs.*
- *Maintaining accreditation with COA.*
- *Employing best-practices for industry standards in technology methods and data safeguards.*