



OREGON YOUTH AUTHORITY

Policy Statement



I-A-7.0 – Quality Improvement

Approved

Effective: October 7, 2005

Supersedes:

Robert S Jester, Director

Interpretation: Program Office

REFERENCE

OYA Forms: YA 1800 Inquiry Form
YA 1810 QA Case Review Checklist

DEFINITIONS

Director's Group: An administrative group that provides oversight to agency operations. Membership includes the Director, Deputy Director, and Assistant Directors, and other persons as requested by the group. This group makes recommendations to the OYA Director.

Quality Assurance (QA): Ongoing monitoring and evaluation of processes and outcomes in areas that are newly implemented, high risk, or problem prone.

QA Specialists: Individuals identified by local management who are trained to answer questions from their peers and provide support to ensure consistent application of new processes, instruments, and services. These individuals serve as liaisons between state and local levels of the QI system.

Quality Improvement (QI): The complete process of identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions. QI relies on an organizational culture that is proactive and supports continuous learning. QI is grounded in the overall mission, vision, and values of the agency. It is also dependent upon the active inclusion of staff at all levels of the agency, offenders and their families, and stakeholders through the process.

Quality Improvement (QI) Plan: A written document that defines a plan for monitoring and improving quality. The plan will include goals, proposed actions and timelines.

Statewide Quality Improvement (QI) Committee: A committee established to identify priority of quality issues occurring at the state and local levels, generate solutions, and review local QI Plans and activities. The members of the Quality Improvement

Committee include the Quality Improvement Coordinator; representatives from Office of Minority Services, community programs, treatment services, facilities, field services, JJIS, research and development, a Quality Assurance Specialist; the Director of the Oregon Juvenile Justice Training Academy; the OYA Clinical Director; the OYA Safety Manager; OYA Assistant Directors.

Solutions Group: A committee established to assist in the development of Quality Improvement (QI) activities for systemic issues based on recommendations from the Statewide QI Committee. This group will provide project management to assist in the facilitation and monitoring of quality improvement.

POLICY

The OYA pledges excellence in all agency activities through quality assurance and quality improvement activities. All work teams serving offenders within the agency are involved collaboratively in activities to improve organizational performance. This collaboration takes place in all areas of the QI cycle – Plan, Do, Check, Act. The OYA strives to assure services are appropriate, available, timely, effective, safe, efficient, and delivered in a respectful and professional manner.

The purpose of quality improvement is to provide a planned, systematic, agency wide approach to designing, measuring, assessing, and improving offender outcomes and safety. The quality improvement program includes the design and assessment of new processes, as well as the monitoring of performance and stability of existing processes.

Quality assurance is the monitoring and evaluation of quality improvement activities.

I. Organization and responsibilities

- A. The quality improvement program is organized to encourage effective participation in performance improvement activities by all staff affiliated with the OYA. Mechanisms are in place to insure input from the community, offenders and their families, all programs and services, administration and agency leadership. QA Specialists at the local level serve to support and reinforce QI activities.
- B. Agency executive and senior management have responsibilities for undertaking performance improvement activities with regards to service and offender outcomes.
- C. Agency leadership is responsible for the following local quality improvement activities:
 - 1. Development of an annual QI plan for area of responsibility.
 - 2. Facilitate multi-departmental performance improvement work groups and activities related to offender safety, reformation, risk management, satisfaction of offenders and staff, and quality control.

3. Implement, maintain, and assign responsibility for performance improvement activities in the quality improvement program within the span of control in accordance with relevant standards and the OYA mission, vision, and QI plan.
 4. Analyze data to identify trends and possible corrections or actions needed. Compare the performance of major functions over time both internally and externally.
 5. Evaluate problems and take action to ameliorate problems related to area of responsibility. Assess the effectiveness of the corrective action and document improvement in care or service.
 6. Use information from up to date sources for performance improvement activities including quality management and statistical tools to measure performance toward the objectives.
 7. Implement strategies to meet evidence-based practices and Performance-based Standards.
 8. Promote agency-wide work teams whose goal is to identify, measure, and improve offender care and organizational functions.
 9. Consider the needs and expectations of both staff and offenders as well as the degree to which these needs are met and measured.
 10. Incorporate findings from Critical Incident reviews in quality improvement activities.
 11. Submit written reports regularly to the Statewide Quality Improvement Committee. The frequency will be determined by the Statewide QI Committee.
 12. Utilize the PDCA model for performance improvement activities:
 - P** Plan the improvement and the data collection
 - D** Do the improvement and the data collection
 - C** Check the results of the implementation
 - A** Act to hold the gain and continue improvement
 13. Evaluate annually the effectiveness of local QI activities.
- D. The Directors Group, with the assistance of the Statewide Quality Improvement Committee and other delegated individuals/committees, implements actions or resolutions relating to performance improvement activities.

II. Statewide Quality Improvement Committee

- A. The Statewide Quality Improvement Committee is responsible for reviewing, designing, measuring, assessing, and improving performance throughout the agency. The Committee attempts to minimize duplication; to enhance communication between statewide and local programs, services, and other committees; and to assimilate information gathered from a variety of sources. It facilitates improvement of organizational performance or the resolution of intersystem problems.
- B. The OYA Statewide Quality Improvement Committee has responsibility for insuring that the key components of the quality improvement program meet stated goals:
1. To promote performance improvement in all offender care and organization functions.
 2. To coordinate an integrated approach to performance improvement involving multi-disciplinary and agency-wide workgroups.
 3. To communicate quality improvement activities and findings to staff.
 4. To maximize offenders and staff safety while minimizing risk of adverse occurrences.
 5. To coordinate efforts to assure that services are evidence based.
 6. It is the responsibility of the Quality Improvement Committee to set priorities for quality improvement, under the direction of the Director, based on criteria including the expected impact on performance, high risk, high volume, or problem prone processes and organizational resources. The Quality Improvement Committee:
 - a. Is advisory to the Director.
 - b. Meets monthly or more frequently at the direction of the chairperson.
 - c. Provides quality improvement performance monitoring of the agency. Develops an agency-wide data set for review on a regular basis.
 - d. Monitors the effect of improvement actions.
 - e. Integrates findings from risk management and safety in to the performance improvement process.

- f. Assesses and evaluates all quality improvement reports, identifies problem areas, identifies trends, provides advice on areas requiring study, and advises appropriate authorities of needed action.
 - g. Communicates quality improvement information to all interested groups through the agency.
 - h. Develops and reviews annually an OYA Quality Improvement Plan.
 - i. Monitors agency progress in key performance measures reported to the Oregon Progress Board.
 - j. Monitors and assures compliance with standards, regulations, statute, rules, and policies set by the Director, Performance-based Standards, evidence-based practices, state and federal governments, and other regulatory or accrediting bodies.
 - k. Recommends agency key performance measures focusing on offender safety, risk management, and offender reformation outcomes.
 - l. Promotes peer review processes to increase consistency of practice across the agency.
 - m. Communicates the need to act with dispatch to correct problems or improve care.
 - n. Reviews work teams annual QI plans including goals, projects, monitoring activities.
 - o. Reports at least quarterly to the Directors Group.
- C. Simple issues identified for improvement of current practice are referred to local work teams. In these cases a written report that documents how the recommendations were completed and solutions implemented will be reported to the Statewide QI Committee. Parole/Probation Supervisors (Field Operations) and Superintendents/Camp Directors (Facilities Operations) ensure that identified improvements are implemented and the quality of services continues.
- D. Specific work flow issues that can be remedied by providing support at the local level are referred to agency wide services or committees including but not limited to:
- 1. The Curriculum Review Committee

2. The Oregon Juvenile Justice Training Academy
 3. Training Design Teams
 4. The Evidence-Based Committee
 5. Operations Group
 6. Safety Committee
 7. OYA JJIS Executive Committee
- E. Written reports documenting solutions and actions will be provided to the statewide QI committee.
- F. Systemic issues and process improvement activities that are broader in scope, beyond one or two local sites and need to be remedied through a system-wide shift or an adjustment in the original agency goals. In some, but not all, cases these issues may be referred to the Solutions Group. The Solutions Group will report to the Statewide Committee at least once each project to report on progress towards completion of recommendations implementation. In addition, a written report is required at the completion of each project that includes, at a minimum, the original quality assurance issue, how the problem was resolved, and additional suggestions to increase system efficiency and prevent future gaps.