



Employee Guide to Continuous Quality Improvement



Forward

This guide was developed to increase our employee's understanding of the Langley Association for Community Living's commitment to continuous quality improvement of our programs and services and business practices.

The Continuous Quality Improvement Committee is comprised of employees representing various roles and responsibilities within the organization.

The CQI committee comprised of:

Nicola Jordan, Community Support Worker

Ram Sabharwal, Employment Consultant

James Long, Supervisor - Quest

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Gillian Sutcliffe, Administration Assistant

Kim Bucholtz, Manager of Quality Assurance

Our purpose is to make recommendations to the Executive Director in regards to the development, revision and implementation of LACL policies and procedures and best practices related to continuous quality improvement.

Table of Contents

	Page
Introduction	4
What is Continuous Quality Improvement	5
Service Delivery and Business Practices	6
Roles and Responsibilities	10
Evaluation	12
Who is CARF?	18
Quality Standards	22
Steps to Accreditation	24
Accreditation Benefits	26
Glossary	28

Introduction

LACL is a progressive organization that promotes an environment of best practice and on-going improvements throughout all levels of the organization. In order to fulfill our mission of providing a high standards of service, we implement continuous quality measures to achieve this.

The process of CQI involves everyone, front line staff, supervisors, management , individuals we support and their families.

CQI is a team approach.

Accreditation is an important part of
Continuous Quality Improvement.

What is Continuous Quality Improvement?



It is a set of activities and actions designed to bring about gradual, but continual improvement through regular review.

Quality is a never ending quest and our organization's continuous quality improvement efforts are aimed at discovering and implementing actions that result in improved organization performance.

To achieve these results;

- LACL develops processes to collect data and information from persons served and their families, employees and other stakeholders such as CLBC and community partners regarding our organization's service delivery and business functions.
- LACL evaluates and analyzes the data and information collected and
- LACL uses the results of this analysis, to develop action plans and to make decisions regarding performance improvement to services and the operations of the organization.

Simply, we want to always be improving our services so that the people we serve are receiving the highest quality of service possible.

Service Delivery

Service Delivery is how we provide services to the persons served in our organization.

Service delivery primarily falls into these main areas;

- Residential Services
- Community Inclusion Services
- Employment Services
- Home Sharing
- Supported Living
- Respite

Every individual who receives service from the Langley Association for Community Living has a person centred plan that identifies personal goals that are specific and measurable.

Business Practices

Business Practices within the Langley Association for Community Living use the CARF's Aspire to Excellence model for quality improvement through:

Assess the Environment by knowing your direction, your mission and purpose. Know the needs of the persons served and other stakeholders. Set ethical standards for operations and assess our performance on a regular basis.

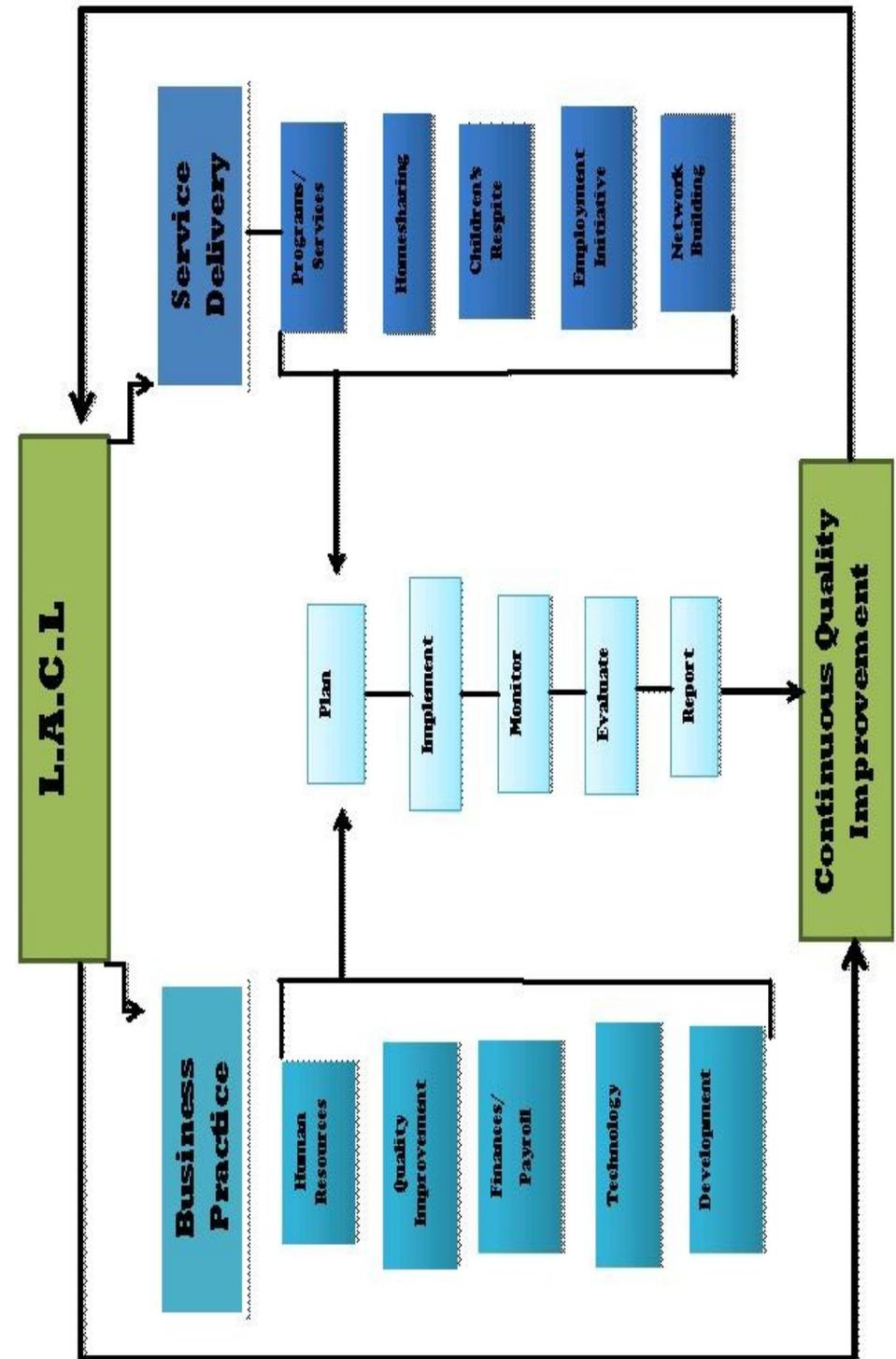
Set Strategy by establishing a foundation for success and taking advantage of our strengths and opportunities while addressing our weaknesses and threats.

Persons served and other stakeholders provide input on an on-going basis in a variety of ways for a shared future that promotes long term organizational excellence.

Implement the Plan by putting our goals into actions and assess risks and plan to rectify.

Review the Results by tracking our performance based on specific measurable goals.

Effect change to initiate quality improvement.



Plans and Reports

The Strategic Plan is the most significant way our association plans for the future.. This plan looks at the strengths, needs for improvement, as well as external opportunities and threats to our organization. The plan is completed every 3 years and twice per year.

The Outcomes Management Plan is done annually and measures the results and outcomes of the programs and services of the organization. Feedback is collected through surveys from persons served, families and other stakeholders, Program files and program plans are also reviewed to measure progress towards the stated outcomes of the program or service.

The Accessibility Plan is a yearly plan that is developed to help further our organization's commitment to improving accessibility and reducing barriers to full inclusion for individuals served by our organization. These barriers include but are not limited to, architectural barriers, environmental barriers, attitudinal barriers, financial barriers, employment barriers and transportation barriers.

The Risk Management Plan identifies all of our organization's practices and policies to reduce risk to persons served, employees and the overall organization. This plan is a key component to ensuring that best practices are maintained.

The Information Technology Plan is a yearly plan that is developed to ensure we are keeping up with the growing technology industry in a cost effective way. This plan also outlines the best practices in regards to how we ensure privacy of information as well as a disaster recovery plan for all of the electronic records that we keep.

The Service Delivery Report shows the progress in assisting all persons served within the association to achieve their personal goals. This report also includes various demographics of people and the services that they receive from our association. The report includes recommendations that can assist the organization in improving service quality to persons served and their families.

The Human Resources and Labour Relations Report addresses the organizations accomplishments and makes recommendations in the areas of employee recruitment, retention, training and labour relations

The Health and Safety Report evaluates the outcomes of the annual site inspections as well as employee injuries. This report also includes recommendations for improved health and safety practices within the organization.

The Compliance Report describes our organizations conformance to external regulations ,and laws. It also describes the actions that the association takes to improve our ability to meet these requirements.

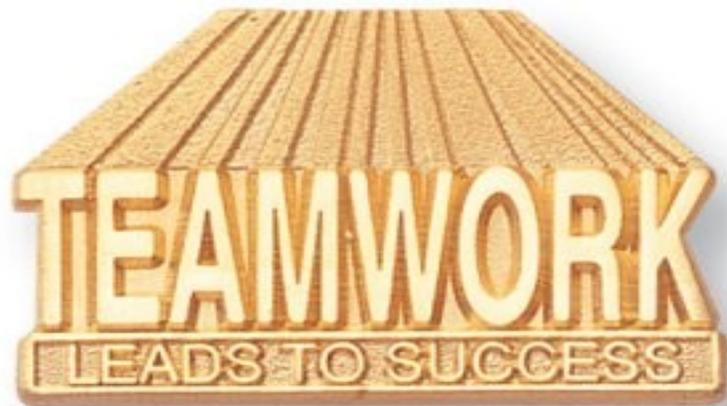


Roles and Responsibilities

All of us play an important role in the delivery of quality services to the people who are served through the Langley Association for Community Living.

Each role has different responsibilities and one cannot succeed without the support of the others. This is our team approach.

These following lists are intended to describe the general roles and responsibilities within the organization.



Responsibilities at the Program Level

- * Providing emotional support and assistance with daily living to persons served
- * Participation and implementation of person-centred plans and other plans as required
- * Supporting individuals to make their own choices and reach their personal goals
- * Facilitating community inclusion by supporting individuals to build relationships and participate in community activities
- * Building and maintaining personal networks for persons served
- * Promote and support of client rights and to assist the person to make informed decisions
- * Assisting individuals to find employment and/or contribute to their community by volunteering
- * Building relationships with families through on-going communication and support
- * On-going communication to supervisor of person's interests and support needs
- * Provide recommendations to supervisor for improvements to service delivery
- * Reporting of daily progress notes and other documentation as required Incident Reporting
- * Maintain homes and program sites to be clean and safe and decorated to individual preferences
- * Vehicle care and maintenance
- * Participation in staff meetings and other training as required
- * Participation in committee work and annual events of LACL
- * Maintain confidentiality
- * Following lines of communication by talking to the appropriate person
- * Maintaining professional working relationships with co-workers and professional supports such as doctors, dentists, nutritionists, psychiatrists, occupational therapists, etc.
- * Assist with program specific orientations to employees in regards to personal care routines, meal guidelines, and other supports in relation to the care of persons served
- * Be knowledgeable of the organization's policy and procedures

Responsibilities at the Supervisory Level

- * Providing direct support to persons served
- * Facilitating, monitoring, revision and implementation of person centred planning for each person in the service or program and other plans as required
- * Quarterly Reporting on the progress of person-centred plans
- * Promote and defend client rights
- * Building personal networks for persons served
- * Development and implementation of the employment initiative for persons served
- * Communication and support to families
- * Maintaining and archiving of client records
- * Maintain program and individual financial records
- * Participation in employee recruitment
- * Orientation, direction, and evaluation of employees
- * Recommendations to management for employee development
- * Scheduling of employees
- * On-call responsibilities
- * Facilitating staff meeting and the provision of on-going staff training
- * Participation in supervisory meetings
- * Ensure program/home are maintained, clean and safe
- * Communication to management of health and safety issues and other program/home needs
- * Information tracking and data collection as required
- * Recommendations for the development and/or revision of policy and procedures
- * Participation in committee work and annual events of LACL
- * Communication and collaboration with CLBC representatives

- * Communication and collaboration with professional supports
- * Communicate complaints of persons served and their families to management
- * Maintain confidentiality
- * Maintain professional working relationships
- * Knowledgeable of the organization's policy and procedures

Responsibilities at the Administration Level

- * Recruitment, orientation, evaluation of specific administrative employees
 - * Employees records are maintained
 - * Employees are paid and benefits administered
 - * Information technology is maintained and employees are trained
 - * Development of the information technology plan
 - * Businesses are paid for work completed
 - * Finances records are in order and meet all regulations
 - * Vehicle maintenance and safety Inspections
 - * Participation in committee work
 - * Insurance and liability coverage is maintained
 - * Website and intranet is maintained
 - * Organization of annual events
 - * Maintenance of policy and procedures manual
 - * Electronic archiving of LACL documents
 - * Maintenance of LACL membership
 - * Administrative support to the Board of Directors, including LACL annual report
 - * Maintaining professional working relationship

Responsibilities at the Management Level

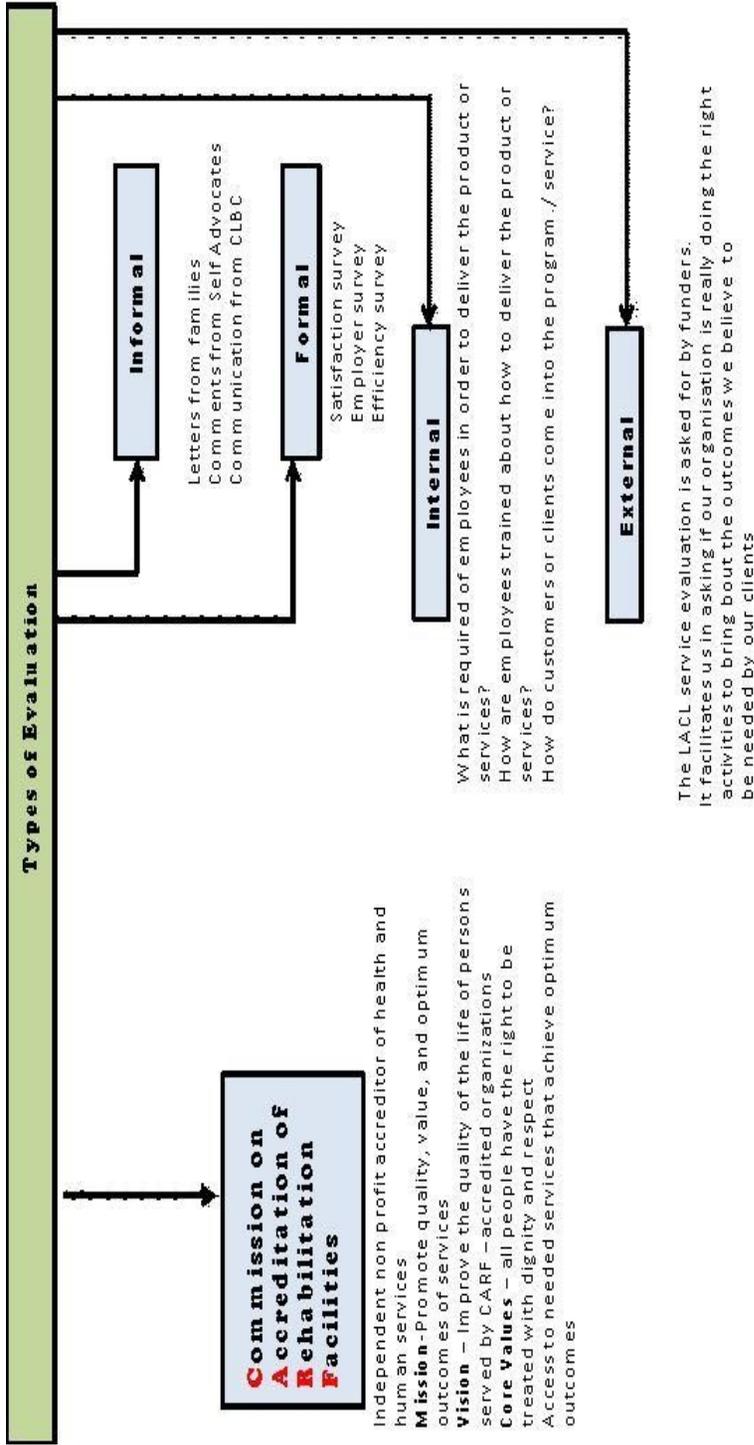
- * Overseeing the day to day operations of the organization
- * Ensure that each person served has a person centred plan and other plans as required
- * Support to families and advocacy support as needed
- * Orientation, direction, training and evaluation of supervisory employees
- * Employee recruitment , retention and promotion
- * Employee discipline
- * Labour relations
- * Development of employee training
- * Development of new services
- * Participation in committee work
- * Purchase of furnishings and equipment
- * Chair committees within the organization
- * Development of organization policy and procedures
- * Community development and project work
- * Community advocacy efforts
- * Communication and reporting to other stakeholders (Community Living BC) .
- * Reporting of the organization activities and plans
- * Recruitment and training of employees
- * Development of best practices
- * Complaint resolution
- * Financial accountability
- * Participation in management meetings
- * Regular job evaluations are scheduled
- * Resource planning
- * Budget preparation and negotiation
- * Risk management
- * Annual reports
- * Outcomes Management Report
- * Accessibility Planning

Responsibilities at the Executive Director Level

- * Supervision and direction of the administrative team
- * Supervision and direction of the management team
- * Recruitment of excluded employees
- * Member of the Executive Director's Network
- * Provincial advocacy on behalf of Persons with Developmental Disabilities
- * Chair of external committees to the organization
- * Development and implementation of innovative and best practices
- * Succession planning
- * Community Development
- * Public Relations
- * Complaint Resolutions and Investigations
- * Responsibility for overall financial management
- * Responsible for meeting on-going business reporting requirements such as;
- * Risk Management Planning
- * Compliance Reporting
- * Strategic Planning
- * Responsible for the development of the strategic plan
- * Reports the business of the organization to the Board of Directors

Responsibilities at the Board of Directors Level

- * Governance of the organization
- * Direction to and evaluation of the Executive Director
- * Participation in the development of the strategic plan for the organization
- * Attendance at Bi-monthly board meetings
- * Succession Planning for the Executive Director



What is CARF?

Founded in 1966 as the Commission on Accreditation of Rehabilitation Facilities, CARF International is an independent, nonprofit accreditor of health and human services. LACL is accredited in Employment and Community Services.



The CARF family of organizations currently accredits more than 47,000 programs and services at more than 20,000 locations on five continents. More than 8.7 million persons of all ages are served annually by more than 6,000 CARF-accredited providers. CARF accreditation extends to 17 countries in North and South America, Europe, Asia, and Africa.

CARF's Mission, Vision, Core Values and Purposes

Mission

The mission of CARF is to promote the quality, value, and optimal outcomes of services through a consultative accreditation process that centers on enhancing the lives of the persons served.

Vision

Through responsiveness to a dynamic and diverse environment, CARF serves as a catalyst for improving the quality of life of the persons served by CARF-accredited organizations and the programs and services they provide.

Core Values

- CARF believes in the following core values:
- All people have the right to be treated with dignity and respect.
- All people should have access to needed services that achieve optimum outcomes.

Purpose

In support of CARF's mission, vision, and core values, CARF's purposes are:

- To develop and maintain current, field-driven standards that improve the value and responsiveness of the programs and services delivered to people in need of rehabilitation and other life enhancement services.
- To recognize organizations that achieve accreditation through a consultative peer-review process and demonstrate their commitment to the continuous improvement of their programs and services with a focus on the needs and outcomes of the persons served.
- To conduct accreditation research emphasizing outcomes measurement and management, and to provide information on common program strengths as well as areas needing improvement.
- To provide consultation, education, training, and publications that support organizations in achieving and maintaining accreditation of their programs and services.
- To provide information and education to persons served and other stakeholders on the value of accreditation.
- To seek input and to be responsive to persons served and other stakeholders.

Quality standards form the cornerstone of CARF accreditation.

CARF quality standards have been recognized as a roadmap for quality practices. With the rapid changes in health and human services, the standards assist our organization to maintain a leading edge.



Conformance to quality standards is a way to identify areas for improvement and growth and help our organization focus on improved service outcomes, satisfaction of the persons served, and quality service delivery.

The unique collection of standards in each standards manual composes a framework that builds upon our existing best practices. Each manual includes quality standards for business practices, service processes, and specific programs and services. Standards provide a means for continuous improvement to positively impact service providers and their consumers.

Each set of standards is developed with the input of service providers, persons served, funders, and other experts from around the world. CARF standards are "field-driven" and "international consensus" standards.

Each year, CARF updates its standards manuals to ensure that its standards are relevant and guide service excellence. Often, the updates provide clarification in response to feedback received from the field.

Other Continuous Quality Efforts

The Langley Association for Community Living also takes other actions aside from accreditation to ensure quality of services and business practices. Some examples of these actions are as follows;

Leadership: The literature on CQI tells us that the key to success of the CQI process is effective leadership. Leadership of our organization is committed to a set of guiding principles which is the foundation of our values and beliefs as an organization. These principles guide the decision making of the organization.

Staff Training: Human Resources is a critical piece of CQI, it's our employees who can make the difference on a day to day basis in regards to the quality of care and support each person receives. To ensure that the people we support have the best people to care for them, the organization invests considerable time and resources to ensure that our employees are knowledgeable, skilled, compassionate and are using best practices in community living.

Use of Committees are another valuable tool in bringing small groups of people together to address on-going development and expertise in the delivery of services and business practices;

We have the following committees:

Self-Advocate Committees	Joint Health and Safety
Risk Management	Person Centred Resource Team
Employee Training	United Way
Building and Assets	Finance
Information Technology	Labour Management
Quality of Life	Medication

Informal benchmarking is another powerful way to evaluate how we are doing, by comparing, our organization to other organizations who deliver similar services. Our organization has developed strong relationships with other community living organizations and we share our expertise and to problem solve common issues.

Steps to Accreditation



1. Review the current CARF standards. Every year the standards are updated and revised.

2. Conduct a self-evaluation. The service provider reviews each standard and compares the standard to service delivery and business practices to determine whether we meet or exceed the standard.

3. Submit the Intent to Survey Form to CARF . The Intent to Survey provides background information about the organization in preparation for the survey such as detailed information about leadership, the programs and services that the service provider is seeking to accredit, and the locations of all services.

4. CARF invoices for the survey fee. The CARF fee is based on the number of surveyors and days needed to complete the survey. The CARF-CCAC fee is fixed, with additional fees if additional programs are added to the survey.

5. CARF selects the survey team. Surveyors are selected by matching their program or administrative expertise and experience with the service provider's unique requirements.

6. The survey team conducts the survey and determines the service provider's conformance to all applicable standards on site by observing services, interviewing persons served and other stakeholders, and reviewing documentation. Surveyors also provide consultation to the provider's personnel. This information is forwarded to CARF Head office.

7. CARF makes the accreditation decision. CARF reviews the information collected by the surveyors and makes a decision about which one of the following accreditation is awarded: **3 - Year Accreditation, 1 -Year Accreditation, Provisional Accreditation, and non- Accreditation.** Approximately six to eight weeks after the survey, CARF notifies the service provider of the accreditation decision and sends the report and Quality Improvement Plan (QIP).

8. Submit a Quality Improvement Plan (QIP). Within 90 days following the decision of the accreditation award, the service provider must submit to CARF a Quality Improvement Plan describing the actions that have been or will be taken to make improvements as identified in the report.

9. Submit an Annual Conformance to Quality Report (ACQR). Each year, the Executive Director submits a conformance report to CARF.

10. CARF maintains contact with the service provider during the accreditation tenure. Providers are also encouraged to contact CARF as needed to help maintain conformance to the standards.

Accreditation Benefits

CARF accreditation helps our organization to meet the challenges it faces in achieving quality outcomes for the persons we serve. Specific benefits that CARF accreditation provides to our organization:



- * **Assurance to persons seeking services** that our organization has met or exceeded international accepted standards of service delivery.
- * **Improved communication** with persons served.
- * **Person-focused standards** that focus on an individualized approach to services and outcomes.
- * **Accountability** to Community Living British Columbia, community partners and the community at large.
- * Management actions that are **efficient, cost-effective,** and based on outcomes and consumer satisfaction.
- * **Evidence** to provincial and local governments of **our commitment** to quality of programs and services.
- * **Access** to conferences, training opportunities, and newsletters.

- * Guidance for **responsible management** and **professional growth** of employees within the organization.
- * **A tool for marketing** programs and services to consumers, referral sources, and third-party funders.
- * **Support from CARF** through consultation, publications, conferences, training opportunities, and newsletters.



Continuous Quality Improvement: It is a set of activities and actions designed to bring about gradual, but continual improvement through regular review.

Accreditation: A certification of competence in a specified subject or areas of expertise, and of the integrity of an organization, awarded by duly recognized and respected, accrediting organization.

Quality Improvement Plan: A plan describes the actions that have been or will be taken to make improvements as identified.

Outcome: Result or end point of care or status achieved by a defined point following delivery of services.

Outcomes Measurement: A systematic procedure for determining the effectiveness and efficiency of results achieved by the persons served during service delivery and the individual's satisfaction with those results.

Outcomes Management System: Measures outcomes by obtaining, aggregating and analyzing information regarding how well the persons served are functioning after leaving a specific service.

CARF: The Commission on Accreditation of Rehabilitation Facilities is an international, independent, non-profit accreditor of health and human services.

