

## February 2021 PQI Report

The areas of focus this month were (1) File Audits for CLBC, Silverthreads, Housing Outreach Kamloops, and Surge, and (2) Review of the PQI Plan. Additionally, follow-up from last month's review of Client Feedback Surveys led to discussion on how the ASK Wellness Society can help individuals receiving supports feel more liberated and open in providing feedback.

### File Audits

The most common issue found across program files was that due to COVID, many files were missing 2021 Consent Forms. In some cases, the program staff noted on the 2021 forms that verbal consent had been given by the program participants. In other cases, the consent just appeared to be outdated. While the verbal consents prove that staff are doing their part, they do not legally stand up as consent being given. This is to me made a priority as we work our way through the vaccinations and once things start to normalize. For the CLBC program, the Committee requested that there be an indication on client files to clarify which services are being received; community inclusion, cluster living, or both.

### PQI Plan

The Committee reviewed the 2021 PQI plan, as presented by the Committee Leads. The primary focus was specifying Measurement Outcomes in each program, looking at what outcomes could be tracked and measured to help the Society gauge the success of each program.

When looking at Goal Planning as a measurement, the Committee believes that, though challenging to implement consistently, this is an area that could be improved upon. The various programs currently approach goal planning very differently; however, the majority of programs set the goals with the individuals either upon intake or at the beginning of the term, and then review the success of the goals at the end of the term. The committee would like to see more ongoing review of goal planning, with quarterly reviews being suggested, in order to monitor progress throughout the year and adjust for new goals along the way. Burdock has a thorough system that includes a more detailed questionnaire about individual's health and goals. While the program does not have set times to check in with the resident, every Tenant Support Worker takes on 10 client files to follow up on to ensure nobody is falling through the cracks. The Committee Leads will review with Burdock nurse to assess if this system could work for other programs; after reviewing, will bring back findings to the Committee for discussion.

### Client Feedback Follow-Up

As a follow-up from January's review of client feedback surveys, the PQI Committee discussed strategies to allow the residents and program participants to feel comfortable and liberated in speaking up to provide feedback about their program. While the client feedback survey results showed high scores in all areas, the questions primarily reflected how the individuals rated the ASK Wellness Society and how it is doing in areas surrounding the mandate; however, the questions do not necessarily tell us how the individuals themselves are feeling. The other gap identified with the surveys was the fact that they occur once per year. The Committee strategized on ideas for this opportunity to be available on a more continuous basis.

In Penticton, Burdock House residents organized a meeting without staff involvement. The residents arranged an initial internal meeting to discuss their thoughts and concerns, which staff were not invited

to attend. This was followed up by scheduling a meeting with the program coordinator and staff, where one spokesperson led the open dialogue to highlight the frustrations and concerns brought forward by other residents. After the issues were laid out, the coordinator kept individuals up-to-date on changes being made to help address their concerns, which were a direct result from the meeting. Staff tried to help facilitate future meetings to be scheduled on a regular basis, which was met with hesitancy and an abrupt end to the meetings. Feedback from the other supportive housing sites led to the following suggestions to allow residents to feel that they have a voice:

1. Client-Led Committees with Resident Spokesperson
  - a. The committees will meet without a staff member and have their resident spokesperson present to staff. It was suggested that the staff member collaborating with the discuss be a senior staff, rather than the coordinator, to allow for more open dialogue.
  - b. The committees are to make the schedules themselves, as staff involvement appears to be received negatively.
  - c. The PQI committee members believe more participation will occur once the COVID crisis is more under control and as the weather gets nicer.
2. Suggestion Box
  - a. To be placed on each floor and reviewed monthly
3. Adjustments Made to Client Feedback Surveys
  - a. SHOP program noted paperwork deters individuals. When conversations are taking place, or Surveys are being completed, staff could fill out for them.
  - b. Review of questions – the language used in the questionnaire is different from language that program participants use. Needs to be reworded and questions should reflect how the client is feeling and reflect their program needs; could have spokesperson for Client-Led Committee review the questionnaire ahead of time.
  - c. Look at other ways to collect survey feedback along the way; i.e. when someone gets a warning in Supportive Housing

A Supportive Housing Sub-Committee/Working Group has also been created to address exactly what it is we are looking at and hone in further. The Sub-Committee will get together separately and will have its first meeting prior to the next PQI Committee Meeting.