



Section One – Introduction

This report is for all stakeholders, including Service Members, their Families, staff, community members and any individual who is interested in the great work that we do. Performance and Quality Improvement (PQI) is an integral part of our organization. We are always open for new opportunities to change and grow. We hope this report demonstrates our commitment to the Service Members and their Families, our transparency for when things don't go as well as planned, and a desire to receive feedback form others. If you have ideas on how this document can be improve, let us know.

An important feature of this report is that we want to provide information to our stakeholders, both our accomplishments and areas we need to improve on. As an organization, we want to learn from our experience and grow. When we find areas that are not up to our expectations, we create a plan on how to address the challenge and improve.

We will use a simple icon system through the report for out outputs. A red dot signifies an area that does not meet our bench marks (DNM), a yellow dot indicates an area of improvement that we are currently working on or in progress (IP) and a green dot indicates an area where we are meeting our benchmarks (MB).





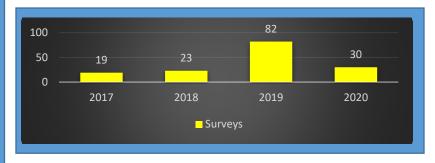


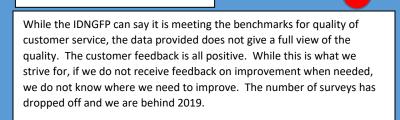
Section Two – Outputs

This section looks at our outputs. Our outputs are simple numeric measurements of productivity.



The PQI Committee continues to use other sources aside from the DoD ICE, to receive customer feedback. There has been a noticeable lack of surveys. The Committee will continue to find ways to receive feedback.





DNM/IP/MB



DNM/IP/MB

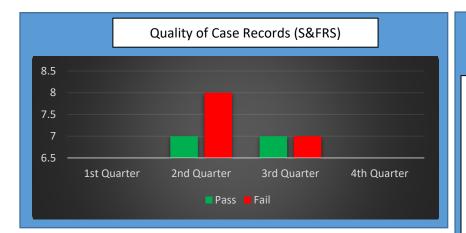
There were no reported customer complaints for the 3rd Quarter. This is a continued improvement.

Plan

There were no formal or informal complaints, and thus no improvement plan was written for this quarter.

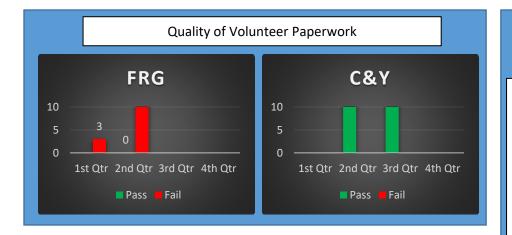


We are still working to improve the quality of the case reviews. We feel we are there and the numbers show that we are being more accurate in the review and thus working to provide improved service.



Plan

The transition from contractors to state employees continues to allow for improvement. While the case review pass rate isn't where we want it, they are striving to be more accurate in the review process. This will cause scores to go down slightly but provide better service.



DNM/IP/MB

The C&Y Program has stayed steady in this area and the S&FRS are eager to find ways to bring their numbers up.

Plan

This is an area for concern. The C&Y program continues to maintain volunteer records at a 100% rate. This is the first time that the FRG paperwork was not reviewed in two years. The Committee will look into it to see if this was due to the transition or other cause.





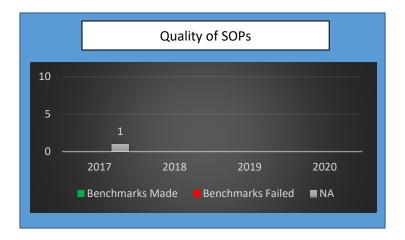
DNM/IP/MB

As a program, we are not meeting the benchmarks set.

Plan

This is the final year of the strategic plan. A new one for the next four years will be written and set for FY21.





Plan

The Family Programs will transition away from a SOP and publish a set of policy memorandums. These will be implemented in October 2020, at the start of FY21, when the new SFPD takes over.

DNM/IP/MB

For ease of updating and also for clarity, policy memorandums will replace the SOP.



Quality of Case Records (ANG) 1.5 1 0.5 0 1st Quarter 2nd Quarter 3rd Quarter 4th Quarter Pass Fail

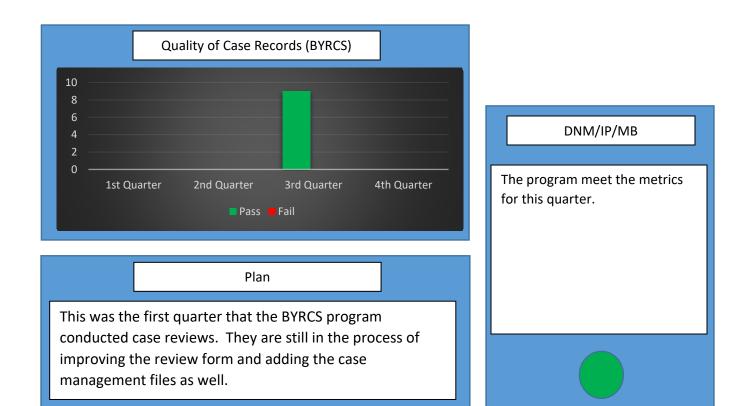
Plan

No improvement plan was provided.

DNM/IP/MB

The program manager did not provide their data for the 3rd quarter.





Section Three – Outcomes

How do we determine Soldier and Family Readiness Outcomes? – The fine print.

All programs continue to use either the Case Review or Volunteer File Review form. After several revisions, both forms appear to be adequate for this process.

How do we determine Family Readiness Outcomes? – The fine print

All programs continue to use either the Case Review or Volunteer File Review form. After several revisions, both forms appear to be adequate for this process.

How do we determine Child and Youth Program Outcomes? – The fine print.

All programs continue to use either the Case Review or Volunteer File Review form. After several revisions, both forms appear to be adequate for this process.

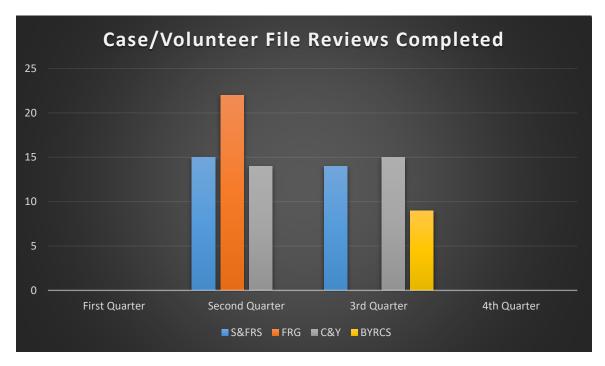
How do we determine Yellow Ribbon Outcomes? – The fine print.

The data comes to the program through AARs and other surveys

How do we determine Beyond the Yellow Ribbon Counseling Service Outcomes? – The fine print.

All programs continue to use either the Case Review or Volunteer File Review form. After several revisions, both forms appear to be adequate for this process.

Section Four – Random File Reviews



Each program is to review a percentage of their case/volunteer files each quarter (see PQI Plan for breakout). This chart will track if they are in compliance with that plan. This chart is only showing the total numbers of the files reviewed.

Section Five – Client Satisfaction

Customer Comments:

None this quarter

AAR Event Customer Comments:

None this quarter

Section Six – Improvement Plans

Improvement plans have been started for all programs with the exception of the R3SP. They will be working on theirs this quarter.

Sections Seven – Recognition

Section Eight – Miscellaneous Information

Section Nine – Future Plans

Contact Us!

If you have any feedback about this report, please contact us via email or phone Stephen.s.self.mil@mail.mil

208-272-8394