

# Continuous Improvement Plan

## For Provider Performance Reviews

Provider:

Date:

Based on the self-assessment and other sources of data, what are the agency's strengths in providing quality services and supports?

Based on the self-assessment and other sources of data, what are the agency's challenges in providing quality services and supports?

Based on this information, what are the themes/trends that will be the agency's priority improvement areas?

**Complete This Page For Each Priority Improvement Area**

**Date Initiated:**

**Improvement Area #1**

**Anticipated Outcome:**

**Sources of Assessment:** (Organizational Self Assessment, Customer Satisfaction Surveys, etc.)

**Current Level of Performance:** (Baseline Information)

**Root Cause Analysis:** (What are the possible underlying causes?)

**Improvement Strategies:** (What specific efforts/strategies will the agency use to improve from baseline to desired outcome?)

**Specific Measures and Time Frames:** (How will the agency measure success?)

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<b>Progress Review:</b> (What progress has been made toward achieving the desired improvement outcome?)	
<b>Date of Review:</b>	<b>Activities Toward Goal:</b>
<b>Measurement of Success:</b>	<b>Modifications of Strategies:</b>

<b>Progress Review:</b> (What progress has been made toward achieving the desired improvement outcome?)	
<b>Date of Review:</b>	<b>Activities Toward Goal:</b>
<b>Measurement of Success:</b>	<b>Modifications of Strategies:</b>

<b>Progress Review:</b> (What progress has been made toward achieving the desired improvement outcome?)	
<b>Date of Review:</b>	<b>Activities Toward Goal:</b>
<b>Measurement of Success:</b>	<b>Modifications of Strategies:</b>

<b>Progress Review:</b> (What progress has been made toward achieving the desired improvement outcome?)	
<b>Date of Review:</b>	<b>Activities Toward Goal:</b>
<b>Measurement of Success:</b>	<b>Modifications of Strategies:</b>

**Improvement Area #2**

**Anticipated Outcome:**

**Sources of Assessment:** (Organizational Self Assessment, Customer Satisfaction Surveys, etc.)

**Current Level of Performance:** (Baseline Information)

**Root Cause Analysis:** (What are the possible underlying causes?)

**Improvement Strategies:** (What specific efforts/strategies will the agency use to improve from baseline to desired outcome?)

**Specific Measures and Time Frames:** (How will the agency measure success?)

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

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**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Improvement Area #3**

**Anticipated Outcome:**

**Sources of Assessment:** (Organizational Self Assessment, Customer Satisfaction Surveys, etc.)

**Current Level of Performance:** (Baseline Information)

**Root Cause Analysis:** (What are the possible underlying causes?)

**Improvement Strategies:** (What specific efforts/strategies will the agency use to improve from baseline to desired outcome?)

**Specific Measures and Time Frames:** (How will the agency measure success?)

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Improvement Area #4**

**Anticipated Outcome:**

**Sources of Assessment:** (Organizational Self Assessment, Customer Satisfaction Surveys, etc.)

**Current Level of Performance:** (Baseline Information)

**Root Cause Analysis:** (What are the possible underlying causes?)

**Improvement Strategies:** (What specific efforts/strategies will the agency use to improve from baseline to desired outcome?)

**Specific Measures and Time Frames:** (How will the agency measure success?)

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Improvement Area #5**

**Anticipated Outcome:**

**Sources of Assessment:** (Organizational Self Assessment, Customer Satisfaction Surveys, etc.)

**Current Level of Performance:** (Baseline Information)

**Root Cause Analysis:** (What are the possible underlying causes?)

**Improvement Strategies:** (What specific efforts/strategies will the agency use to improve from baseline to desired outcome?)

**Specific Measures and Time Frames:** (How will the agency measure success?)

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Improvement Area #6**

**Anticipated Outcome:**

**Sources of Assessment:** (Organizational Self Assessment, Customer Satisfaction Surveys, etc.)

**Current Level of Performance:** (Baseline Information)

**Root Cause Analysis:** (What are the possible underlying causes?)

**Improvement Strategies:** (What specific efforts/strategies will the agency use to improve from baseline to desired outcome?)

**Specific Measures and Time Frames:** (How will the agency measure success?)

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:** **Activities Toward Goal:**

**Measurement of Success:** **Modifications of Strategies:**

**Improvement Area #7**

**Anticipated Outcome:**

**Sources of Assessment:** (Organizational Self Assessment, Customer Satisfaction Surveys, etc.)

**Current Level of Performance:** (Baseline Information)

**Root Cause Analysis:** (What are the possible underlying causes?)

**Improvement Strategies:** (What specific efforts/strategies will the agency use to improve from baseline to desired outcome?)

**Specific Measures and Time Frames:** (How will the agency measure success?)

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

**Progress Review:** (What progress has been made toward achieving the desired improvement outcome?)

**Date of Review:**

**Activities Toward Goal:**

**Measurement of Success:**

**Modifications of Strategies:**

