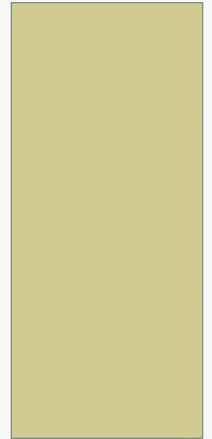# PROGRAM DRIVEN CQI
HOW TO STRUCTURE THE CQI PROCESS SO THAT PROGRAM STAFF ARE IN THE DRIVER'S SEAT

RUANN BARACK, OHU
SABRINA TOWNSEND, JCFS
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PRESENTATION OBJECTIVES

- Learn about two models for structuring the dissemination of quality improvement information
  - One Hope United (OHU)
  - Jewish Child and Family Services (JCFS)
- Gain hands on tools and resources to empower and engage staff in the quality improvement cycle

THE RECIPE

PROGRAM DRIVEN CQI

ASSUMPTIONS

- Leadership buy-in and support

- Reliable data collection and analysis

- Adequate funding and other resources to support the process

INGREDIENTS

- **Preparation** – data analysis, reports (e.g. OHU Performance and Quality Review Report, JCFS CQI Report Overview)
  - CQI Role – work upfront serves as foundation for the entire process, allows CQI person to take a backseat

- **Staff Roles and Responsibilities** – identify appropriate program staff to represent all aspects of the work, clarify roles (e.g. chair/facilitator, coach, scribe), ensure that necessary decision makers are in the room but not necessarily in charge of the process, educate participants about rights and responsibilities (e.g. JCFS Expectations for Program Team Chairs, OHU Facilitator Guide)
  - CQI Role – serve as coach or point person

- **Team Identity** – expand and tailor the agenda to a program , rotate membership, develop a team name and slogan, use ice breakers to engage staff (e.g. guess the Kisses)
  - CQI Role – be a fly on the wall, let program create their own culture for improvement

INGREDIENTS (CONTINUED)

- **Meeting Structure and Information Flow** – establish an information workflow (e.g. committees), create a standard agenda, keep minutes, clarify reporting expectations for accountability
  - CQI Role – take minutes or proof minutes for accuracy

- **Quality Improvement Plan** – develop a task list or Quality Improvement Plan each meeting, allow time for completion of tasks, utilize meeting structure to confirm that improvements were made and to maintain accountability
  - CQI Role – coach participants towards clear articulation of goals, ensure follow up and completion

ONE HOPE UNITED

QUALITY IMPROVEMENT TEAMS

QUALITY IMPROVEMENT TEAMS (QIT)

- **Develop a solid QIT culture:**

  - Includes all Staff at all Levels.
  - Leadership – Model the Way
  - Develop a structure with procedures, forms, etc.
  - Formalize Roles and Rules
  - Build in Fun – We had teams create their own team names and slogans.
  - Train all Staff – Start building the culture.

QIT OBJECTIVES

- Identify strengths and build on them.
- Solving problems at the most local level.
- Interpreting data in context.
- Protecting time on a regular basis to focus on excellence.
- Making employees owners – empowering them.
- Value the creative and analytic input of all staff members.

PURPOSE OF THE QIT

Purposes of Quality Improvement Teams	Non-Purposes of Quality Improvement Teams
Opportunity to bring problems with potential solutions	Gripe session
Creative action planning with colleagues	Social hour
Innovative implementation of staff ideas	Passing the buck for solving problems to someone else
Protected time to focus on high quality service and improving upon it	"I'm too busy or too important to focus on quality – I already do it."
Starting where we are (honestly) and building upon it realistically	Using the time to simply "bash" the current data
Taking full advantage of this opportunity to be creative and achieve the mission	"This is just another passing fad – I'll wait it out and it will go away."

Quality Improvement – Commitment, Compliance, Curiosity and Criticism

10-20%	Fully committed and excited about the process
70-80%	Staff who are curious about the process or compliant because they are required to participate. These staff will either become committed or critical.
0-10%	The resistant and vocally critical

QIT ROLES

Team Leader/Facilitator - This role rotates – generally once a year. It is recommended that this role not be the supervisor, but a member of the team.

Team Scribe - This role rotates. Generally a scribe serves for one year.

Coach - The Coach is the CQI Team Member

Team Members - Team members are permanent roles on the QI Teams. They are the heart and soul of the process.

QIT - TOOLS AND RESOURCES

- QIT Objectives

- QIT Roles and Rules

- QIT –Facilitators Guide

- QIT – Rights and Responsibilities

- How Does the QIT Process Work?

- Performance and Quality Review Report

- QIT Summary Form

HOW DOES THE QIT PROCESS WORK?

Performance and Quality Review
The PQR Report *from* CQI will be sent to programs by the month of scheduled QITs: November, February and May.

Sent to: Program Supervisors, Director of Programs & Senior Vice Presidents
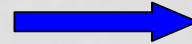
QIT Summary and Action Plan Forms
Completed by: Program Supervisor & team
When: The QIT Summary is completed by each team during or just following the QIT meetings scheduled during the following months: November, February, and May. Use the PQR report to identify trends. Celebrate strengths and action plan when needed.
Send to: One copy to your Senior Vice President and one copy to CQI.

Agency wide Meeting Summary
Completed by: The Executive Leadership team

When: The leadership team will note issues discussed and create action plans to address those concerns. A brief summary of trends and issues brought up in the regions will be shared at this meeting.

Send copies to: The CQI department and the Executive Leadership Team. Minutes from the Regional and Agency QIT meeting is shared with all staff.

Regional Meeting Summary
Completed by: Executive Vice President

When: Note trends at the regional level utilizing the PQR report or other data reports. Celebrate successes and action plan when needed. This summary is brought to the agency wide QIT meeting by the EVP.

Send to: A copy is sent to the regional CQI coordinator. Minutes from the Regional and Agency QIT meeting is shared with all staff.
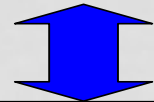
QIT AGENDA

- Team Strengths

- Performance and Quality Review Report – review, discuss and action plan when needed.

- Status of Team Past QIT Action Plan

- Team Ideas of Service Improvement

- Review of the Service Center, Region and Federation QIT Minutes

QUALITY IMPROVEMENT TEAM MINUTES – ACTION PLANNING

Issue/Concern Being Addressed	What Action	By Whom Must be a team member	Timeline Must be a specific date

JCFS

CQI PROCESS

PREPARATION: DATA AS THE FOUNDATION

- Reports Provided Quarterly:
  - Utilization Review (Peer Review)
  - Incident Report Summary
  - Personnel Turnover
  - Medication Monitoring
  - Internal Medicaid Audit
- Reports Provided Twice Yearly:
  - Outcome Evaluation: demographics, service delivery, outcome achievement
- Reports Provided Annually:
  - Client Satisfaction

CQI Report Overview: compiled quarterly to summarize relevant findings and recommendations

See Handout 1

STAFF ROLES AND EXPECTATIONS: CQI

- CQI staff serve as "Point Person"

- Responsibilities include:
  - Compile data reports
  - Summarize key findings into a quarterly Report Overview
  - Send materials to the Program CQI Chair at least one week prior to the meeting
  - Attend the meeting, participate in the conversation without leading or dominating, and encourage the identification of areas for improvement as well as plan of action ("Coach")

STAFF ROLES AND EXPECTATIONS: PROGRAM STAFF

- Program-level CQI teams are comprised of a representative group of staff, including leadership, direct service workers, and all disciplines (e.g. case workers, clinicians, supervisors, nurse, administrative)

- Program staff roles include:
  - *Chair* – manages the CQI process on the program-side, facilitates the meeting, attends the pan-JCFS CQI meeting
  - *Note Taker* – takes notes during the meeting, including all of the follow up tasks (Quality Improvement Plan), sends out minutes within a few weeks of the meeting

See Handout 2

PROGRAM TEAM IDENTITY

- Programs are encouraged to set the agenda, but must include core topics
  - Examples of additional topics include Diversity, Self Care, Fun Committee

- Membership rotates periodically to…
  - Prevent staff from burning out on the process
  - Educate all staff about quality issues
  - Ensure that all perspectives are included

- The Chair is most often not the Director, which allows for more collaborative decision making and a bottom-up approach

STRUCTURE AND INFORMATION FLOW

Agency Operational Issues Committees: Health and Safety, Treatment Issues, Utilization Review, Evaluation, Personnel

→ **Program CQI Committees**

→ **Pan JCFS CQI Committee:** all Chairs

- The structure of the process is primarily what allows the Program staff to function independently
- In addition to the above information workflow, create a standard agenda, keep minutes, and clarify reporting expectations for accountability
- CQI staff may take minutes or proof minutes for accuracy for less experienced teams

See Handouts 3 and 4

QUALITY IMPROVEMENT PLAN: TASK LIST

- Throughout the meeting staff are engaged in the Quality Improvement cycle
- This leads to the development of a task list which is really a Quality Improvement Plan
- Staff are given 3 months to complete tasks or make the recommended improvements
- The meeting structure is used to confirm that improvements are made and to maintain accountability
- CQI role is to coach participants towards clear articulation of goals, ensure follow up and completion

See Handout 5

REVIEW OF RECIPE INGREDIENTS

- Preparation

- Staff Roles and Responsibilities

- Team Identity

- Meeting Structure and Information

- Quality Improvement Plan

SMALL GROUP EXERCISE

1. In what ways are you already following this recipe at your organization?

2. What would you add to your current recipe based on what you heard today?

3. Develop an Action Plan with at least 3 tasks

DISCUSSION

- What do you plan to add at your organization?

- What ingredients are we missing from this recipe?

CONTACT INFORMATION

- Ruann Barack, MA
- Executive Vice President of CQIR
- One Hope United
- 215 N. Milwaukee Ave.
- Lake Villa, IL 60046
- (847) 245-6507 (Direct)
- (847) 513-4769 (Cell)
- rbarack@onehopeunited.org
-
- Sabrina Townsend, MA
- Assistant Director of Quality Improvement and Evaluation
- Jewish Child and Family Services
- 5150 Golf Rd
- Skokie, IL 60077
- (847) 745-5444
- sabrinatownsend@jcfs.org