

# **APPLYING CQI to CQI:** **Establishing, Activating, and Managing** **Improvement Efforts through Reflection and Action** **Planning**

**2016 Illinois CQI Conference**  
**In Pursuit of Quality: Achieving Impact**  
**Urbana, Illinois**  
**October 17, 2016**

**ChapinHall** at the University of Chicago  
Policy research that benefits children, families, and their communities

# Workshop Objectives

## Participants will gain an understanding of:

1. The CQI system features that support a well-functioning CQI process.
2. The fundamentals of establishing, activating, and managing a CQI process.
3. A “draft” Provider Agency CQI Capacity Self-Assessment Tool and Guide to help identify strengths and gaps in the CQI program.



**KEEP  
CALM**

**and**

**LET'S GET TO  
KNOW EACH OTHER**

# Continuous Quality Improvement

CQI is the **complete process** of identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions.

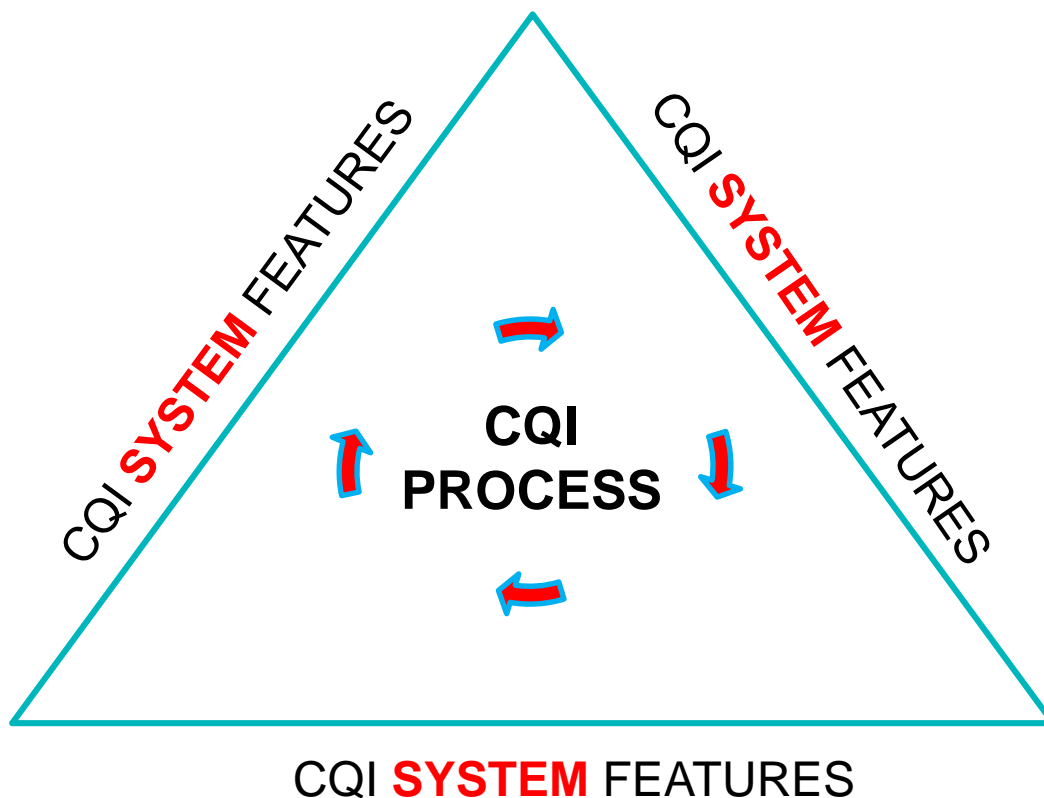
CQI relies on an **organizational culture** that is proactive, supports continuous learning and is firmly grounded in the overall mission, vision, and values of the agency.

Quality CQI efforts are dependent upon the **active inclusion and participation** of staff at all levels of the agency, children, youth, families, and stakeholders throughout the process.

# A sound CQI **system** supports the CQI **process**

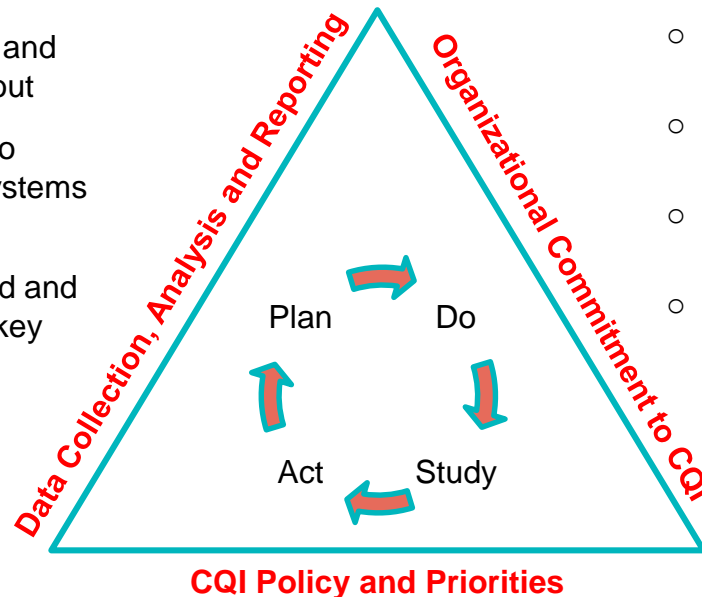
*“A CQI system is a coherent set of structures, functions, policies and procedures that facilitate the CQI process....[It] is the supportive context inside which the CQI process runs.”*

Wulczyn, F., Alpert, L., Orlebeke, B., & Haight, J. (2014). ‘Principles, language, and shared meaning: Toward a common understanding of CQI in child welfare.’ Chapin Hall at the University of Chicago.



# Key CQI System Features

- Data are collected on the goals and outcomes the agency cares about
- Data are routinely converted into evidence to tell a story at the systems and case levels
- Meaningful reports are produced and shared with all levels of staff & key stakeholders



- Leadership promotes the use of evidence to make decisions
- Agency culture promotes continuous analysis and program improvement
- Adequate personnel, time and resources are devoted to CQI activities
- CQI training and skill-building opportunities are available for all levels of staff

- The goals and outcomes the agency cares about are closely aligned with and drive CQI processes
- Specific methods for collecting and generating the data needed to support decision-making are clearly outlined
- Improvement planning processes are clearly outlined & consistently followed



**KEEP  
CALM  
and  
LET'S THINK  
ABOUT IT...**

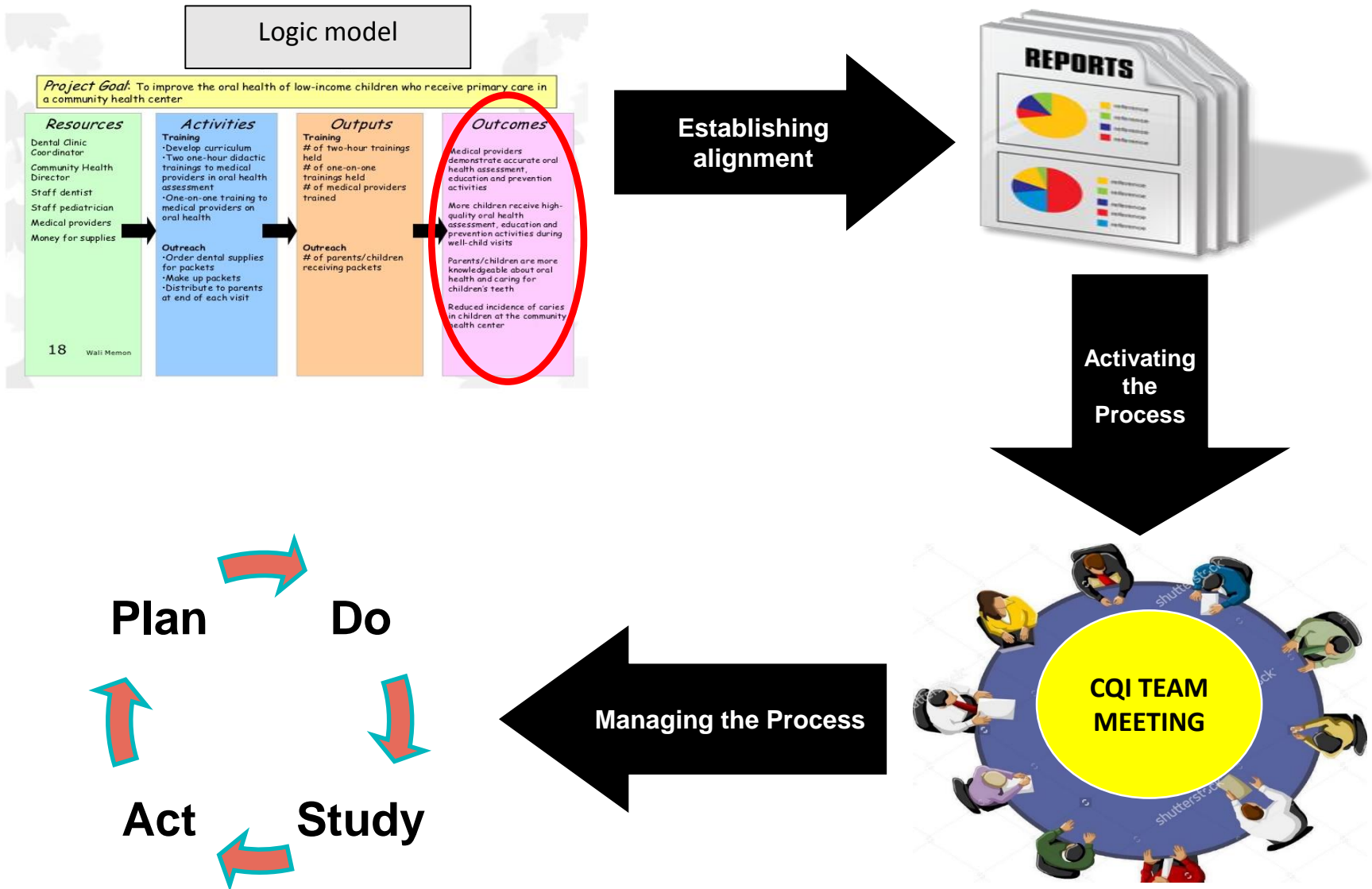
# CQI System Features

## Reflection Exercise and Discussion

CQI SYSTEM FEATURES	STRENGTH	CHALLENGE	COMMENTS
<b>1. Organizational Commitment to CQI</b>			
<ul style="list-style-type: none"> <li>• Leadership promotes the use of evidence to make decisions</li> </ul>			
<ul style="list-style-type: none"> <li>• Agency culture promotes continuous analysis and program improvement</li> </ul>			
<ul style="list-style-type: none"> <li>• Adequate personnel, time and resources are devoted to CQI activities</li> </ul>			
<ul style="list-style-type: none"> <li>• CQI training and skill-building opportunities are available for all levels of staff</li> </ul>			
<b>2. CQI Policy and Priorities</b>			
<ul style="list-style-type: none"> <li>• The goals and outcomes the agency cares about are closely aligned with and drive CQI processes</li> </ul>			
<ul style="list-style-type: none"> <li>• Specific methods for collecting and generating the data needed to support decision-making are clearly outlined</li> </ul>			
<ul style="list-style-type: none"> <li>• Improvement planning processes are clearly outlined &amp; consistently followed</li> </ul>			
<b>3. Data Collection, Analysis and Reporting</b>			
<ul style="list-style-type: none"> <li>• Data are collected on the goals and outcomes the agency cares about</li> </ul>			
<ul style="list-style-type: none"> <li>• Data are routinely converted into evidence to tell a story at the systems and case levels</li> </ul>			
<ul style="list-style-type: none"> <li>• Meaningful reports are produced and shared with all levels of staff and key stakeholders</li> </ul>			



# The CQI Process: Making it Happen

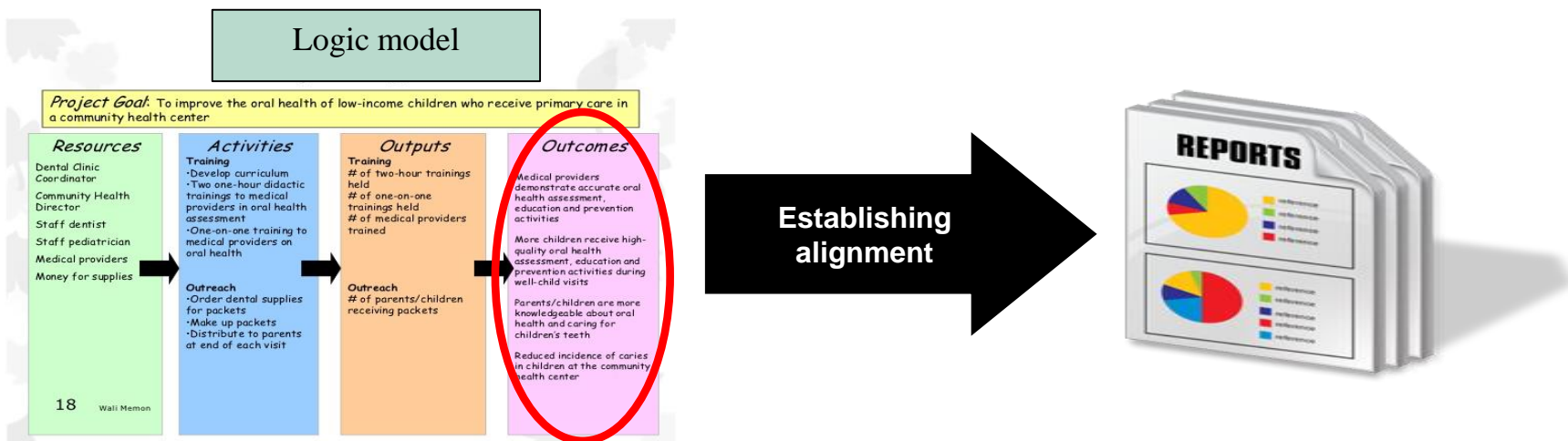


# Facilitating the CQI Process involves:

- **Establishing alignment** between the strategic goals and outcomes of interest to the agency and what is targeted for measuring and monitoring.
- **Fueling & activating the process** with quality data and supporting stakeholders **to turn analyzed data into evidence** that will support decision-making and performance improvement planning.
- **Managing** the process **by continuously making observations and planning for improvement** based on evidence and tracking and adjusting action plans.

# Establishing Alignment

- Ensure the initiatives, strategies, and outcomes highlighted in the strategic plan or logic model are the focus of the CQI process.
- Align the desired goals and outcomes articulated in the strategic plan or logic model with what is articulated in data reports.



**What challenges can you identify that might impact your ability to align data reports with your strategic plan or the outcomes the agency is most concerned about?**



# Fueling the Process

- **Determine the source of quality data for each fidelity and outcome measure:**
  - Client management system
  - Case review data
  - External performance reports
  - Internal &/or external Dashboards
- **Clarify:**
  - Data definitions
  - Data collection processes and tools
  - Producer(s)
  - Reporting structure and frequency
- **Set baselines and performance targets to be monitored**

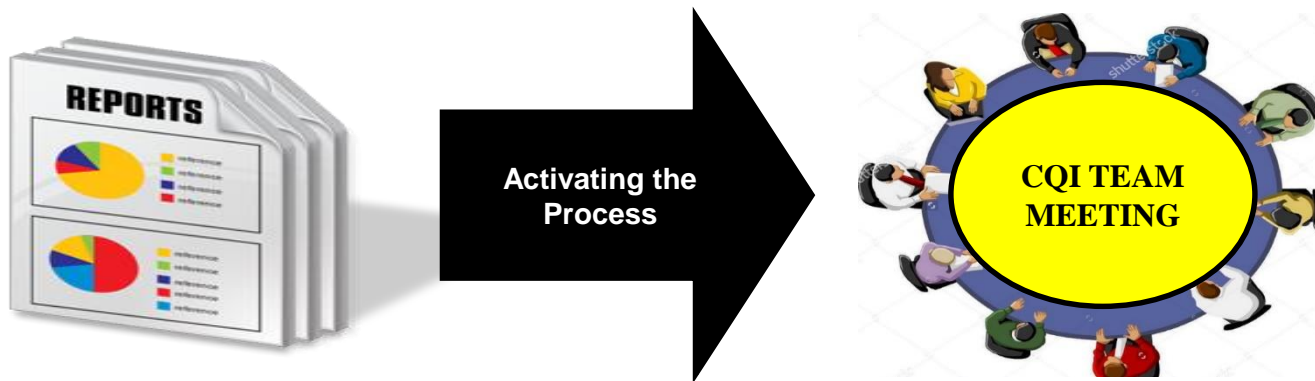
**Do you have access to the data you need to monitor the outcomes you are concerned about?**

**What's the benefit of establishing baselines and targets for the outcomes and indicators you are measuring?**



# Activating the Process

- Display data reflecting progress toward established fidelity and outcome measure targets in a user friendly format for each monitoring category in data reports.
- Publish data reports at pre-established intervals.
- Use data reports as the strategic lever for driving CQI discussions at all levels of the agency. The focus should be on using the data to understand performance and to identify, implement and monitor solutions/interventions toward improved performance at the child/family and systems levels.



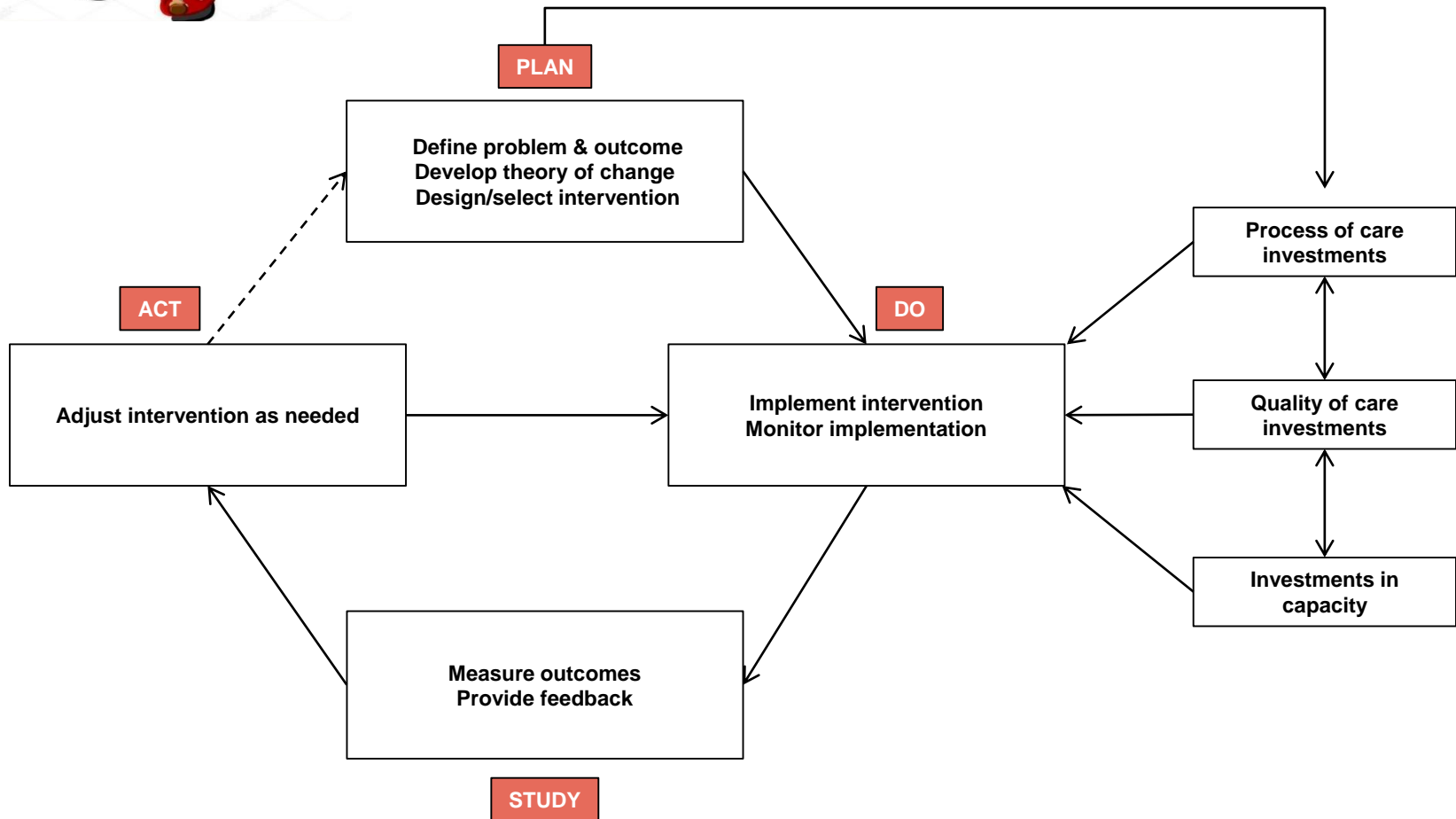
**What can you do in your role to make sure data/evidence are part of the performance conversation at every level of your agency?**







# Managing the Process: Plan-Do-Study-Act (PDSA)



**What kind of performance improvement process do you use at your agency (PDSA, DMAIC, Six Sigma, LEAN, etc.)?**



# The Provider Agency CQI Capacity Self-Assessment: An opportunity for Self-Reflection and Action Planning

*“Having a robust continuous quality improvement system is important to consistently improve services and supports for children and families, and to ensure that you are making the most effective use of your resources...your continuous quality improvement program can make sure that delivered services are relevant and contributing to positive results.”*

Continuous Quality Improvement. (n.d.). Retrieved October 10, 2016, from <https://www.childwelfare.gov/topics/management/reform/soc/communicate/initiative/ntaec/soctoolkits/continuous-quality-improvement/#phase=pre-planning>



# **“APPLYING CQI to CQI” WHY CONDUCT A SELF-ASSESSMENT?**

**The Provider Agency CQI Capacity Self-Assessment Tool and process will provide agencies with an opportunity to:**

- Assess how key components of the CQI system are functioning
- Uncover gaps in capacity and support the identification of solutions

# The Self-Assessment Tool

## Comprised of:

1. A brief **overview** of the purpose of the self-assessment process
2. Options for **administering** the tool
3. **Reflective Statements** related to key CQI system features
  1. Organizational Commitment to CQI
  2. CQI Policies and Priorities
  3. Data Collection
  4. Data Analysis and Reporting
  5. Improvement Planning and Decision-Making
4. **Response choices:** “YES”, “Partially”, “NO”
5. **Rating Summary** narrative
6. A list of **key terms** with operational definitions

REFLECTIVE STATEMENTS	YES	PARTIALLY	NO
<b>1. Organizational Commitment to CQI</b>			
a. There is a current agency-wide strategic plan in place.			
b. The strategic plan is widely shared, generally accepted and supported throughout the agency.			
c. The strategic plan contains measurable goals and objectives for improving key outcomes.			
d. Progress toward the goals and objectives outlined in the strategic plan are routinely tracked, monitored and reported.			
e. There is a process for revising the strategic plan.			
f. There are adequate channels for top-down, bottom-up and lateral flows of information sharing within the agency.			
g. There is a current program plan in place for each agency program.			
h. Program plans contain measurable goals and objectives for improving key client outcomes.			
i. Progress toward the goals and objectives outlined in program plans are routinely tracked, monitored and reported.			
j. There are designated staff charged with implementing and overseeing CQI processes.			
k. Designated staff participate in training to build CQI skills and competency.			
l. Staff at all levels are encouraged to participate in CQI activities and discussions.			
m. Training is available for all staff to understand the agency's CQI process, why it's relevant to their work, and ways in which they can be active participants in program monitoring and improvement.			
n. There is a CQI Team/Committee (or equivalent structure) that meets regularly at the:			
i. Team level			
ii. Program level			
iii. Executive level			
<b>Rating Summary:</b>			

**DRAFT**

<b>2. CQI Policies and Priorities</b>			
a. There is a current Continuous Quality Improvement (CQI) plan in place that outlines the organization's approach to identifying and analyzing program strengths and challenges and implementing and revising solutions.			
b. The CQI Plan outlines the process and outcome measures that address:			
i. Client outcomes for each program and service			
ii. Practice expectations and requirements (e.g. timeliness of assessments, visits with children and parents)			
iii. Compliance with regulatory requirements			
iv. System factors critical to achieving positive outcomes (e.g. initial and ongoing training, staff recruitment and retention)			
c. The CQI plan describes procedures for data collection (including case record review procedures), data aggregation, review, analysis and reporting.			
d. The CQI plan describes the performance improvement cycle and feedback loops utilized by the organization to solve problems.			
<b>Rating Summary:</b>			

REFLECTIVE STATEMENTS	YES	PARTIALLY	NO
<b>3. Data Collection</b>			
a. There is a case record review process in place.			
b. Case record reviews occur on a regular schedule.			
c. There is a sampling strategy in place for selecting cases to be reviewed.			
d. There is a case record review instrument in place that aligns with program goals and objectives.			
e. There is a case record review instrument in place that collects information on compliance with program practices and procedures.			
f. There is a case record review instrument in place that collects information on client outcomes.			
g. Staff who are involved in the case record review process receive training and written guidance to ensure inter-rater reliability.			
h. There are mechanisms in place (i.e., quality control processes) to ensure the accuracy of the data collected in the case record review process.			
i. Data from case record reviews are aggregated and integrated into the CQI process.			
j. Data from other types of internal reviews and tracking activities (e.g., supervisory reviews, risk management reviews) that monitor and support caseworker practice are collected and integrated into the CQI process.			
k. Qualitative data from interviews, focus groups, client surveys, or other mechanisms for external stakeholder feedback are collected and integrated into the CQI process.			
l. External data and/or monitoring reports (e.g., dashboard information, data reports from funders or other entities) are integrated into the CQI process.			
m. The agency possesses or has access to an electronic database for its administrative data (e.g., client demographic information, allegation type(s), reasons for removal, placement types, service referrals and receipt).			
n. There is an electronic database to store data from performance review activities (e.g. case review data, client surveys).			
<b>Rating Summary:</b>			



## DRAFT

<b>4. Data Analysis and Reporting</b>			
a. Data analysis tools and techniques are used to make meaning of data so that it can be used to inform decision-making (Excel, <u>pareto</u> charts, SPSS, etc.).			
b. Data are routinely analyzed for patterns and trends in child welfare outcomes relevant to the agency's strategic plan.			
c. All levels of staff are involved in analyzing and understanding data and in providing feedback on analysis and conclusions (CQI teams/committees).			
d. Data reports are produced that are used by Executive leadership to understand overall <b>system/agency performance</b> and effectiveness of programs and services.			
e. Data reports outline actual performance on key processes and outcomes in relation to established goals and benchmarks on a routine basis.			
f. Data reports are produced that are used by program administrators to understand <b>unit performance</b> .			
g. Data reports are produced that are used by supervisors to understand <b>team performance</b> .			
h. Data reports are produced that are used by caseworkers to understand their <b>individual case performance</b> .			
<b>Rating Summary:</b>			

**DRAFT**

REFLECTIVE STATEMENTS	YES	PARTIALLY	NO
<b>5. Improvement Planning and Decision-Making</b>			
a. Program managers use CQI findings to assess and inform broader agency functioning (e.g. training, policy, community partnerships, services offered).			
b. Supervisors and casework staff use CQI findings to assess and improve team practice.			
c. There is a process in place to identify and prioritize areas of performance found to be in need of improvement.			
d. Action plans/interventions/solutions are developed and implemented to address areas needing improvement.			
e. Action plans and interventions are monitored and adjustments made as needed based on what is learned through the monitoring process.			
f. Results of action plans and interventions are shared and evaluated to inform ongoing planning and performance measurement.			
<b>Rating Summary:</b>			

# Administering the Self-Assessment

1. Group format
2. Leadership and/or staff complete individually
3. Part of an annual review process

# Responding to the Self-Assessment

## ACTION PLANNING

<b>CQI System Feature:</b>				
<b>Self-Assessment Rating Summary:</b>				
<b>Specific Area(s) of focus</b> <i>(Based on responses to reflective statements in the self-assessment tool)</i>	<b>Action Step Description</b>	<b>Responsible Party(s)</b>	<b>Date to Begin</b>	<b>Date Due</b>
<b>Desired Outcome(s):</b>				

# THANK YOU!

Please direct your questions and/or feedback to:

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