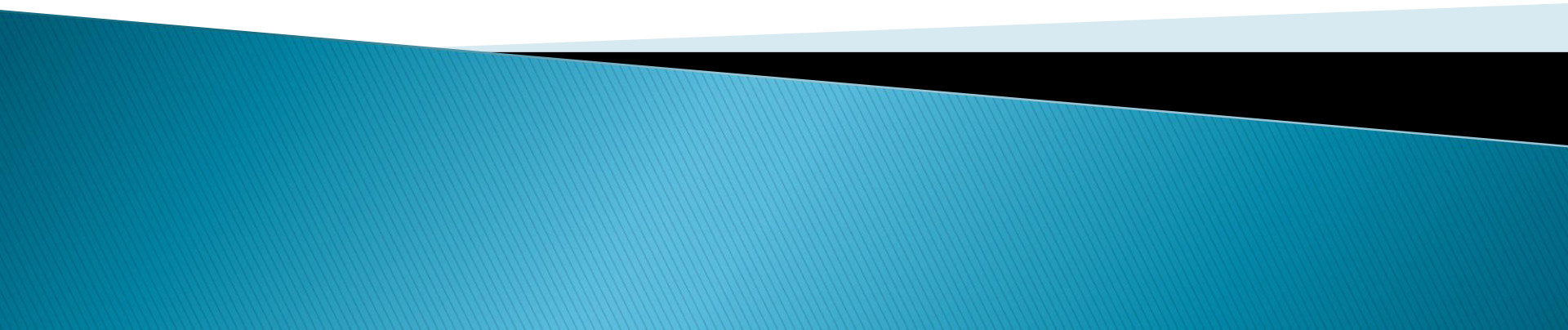
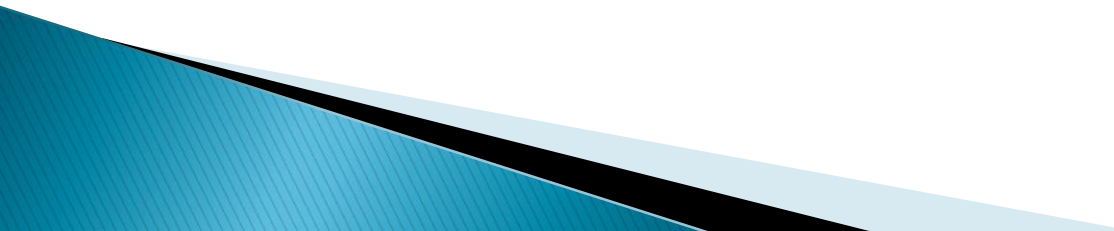


Impact Collaborative Action Planning

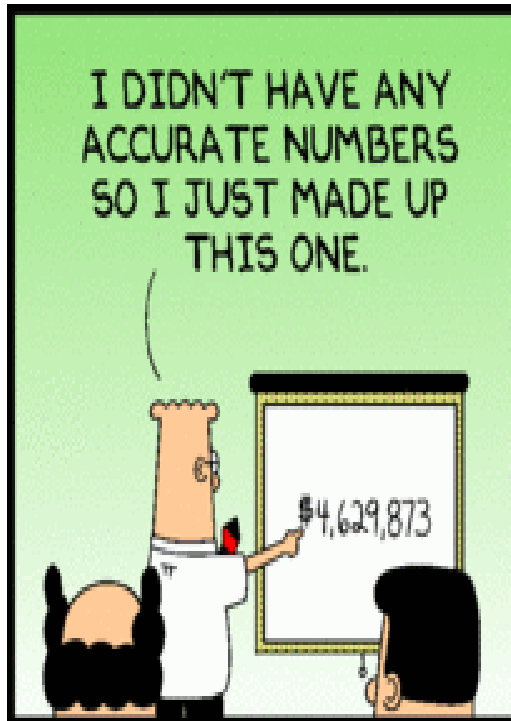
The Evolution



What We Will Cover

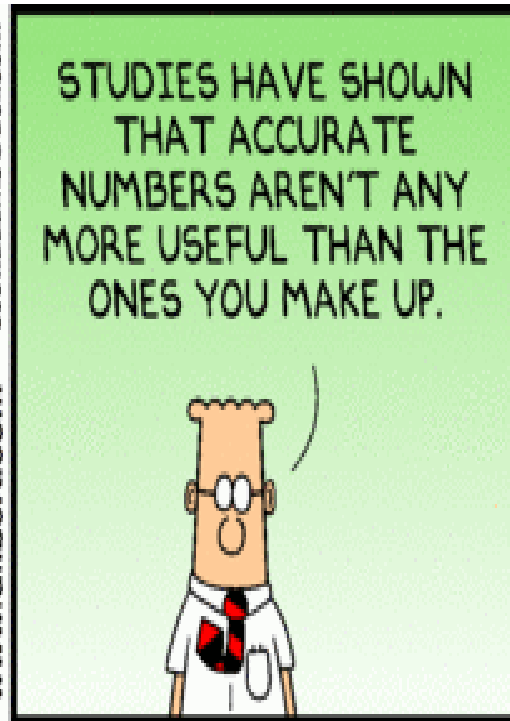
- ▶ The history of working within teams to improve quality of services at OHU
 - ▶ The evolution to a data-driven process
 - ▶ Current status of the Impact Collaborative Action Planning process
 - ▶ What is working well and areas to improve
- 

What Does Dilbert Say?

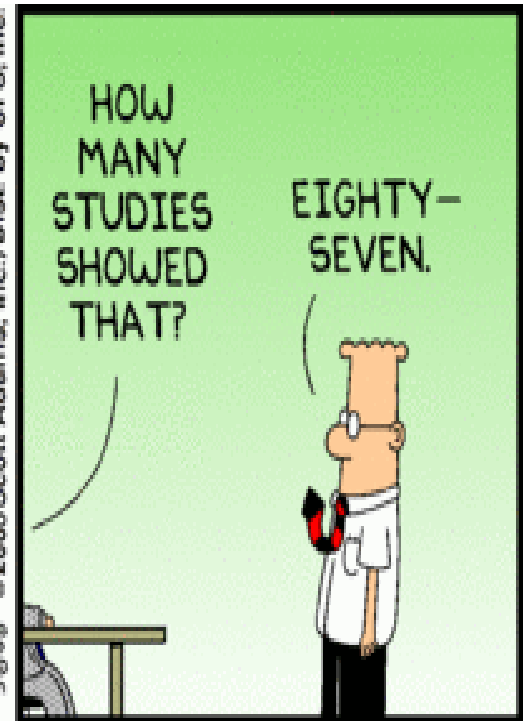


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CQI Team

Chief Operating Officer

Senior Vice President

CQI Directors (3)

CQI Coordinators (3)

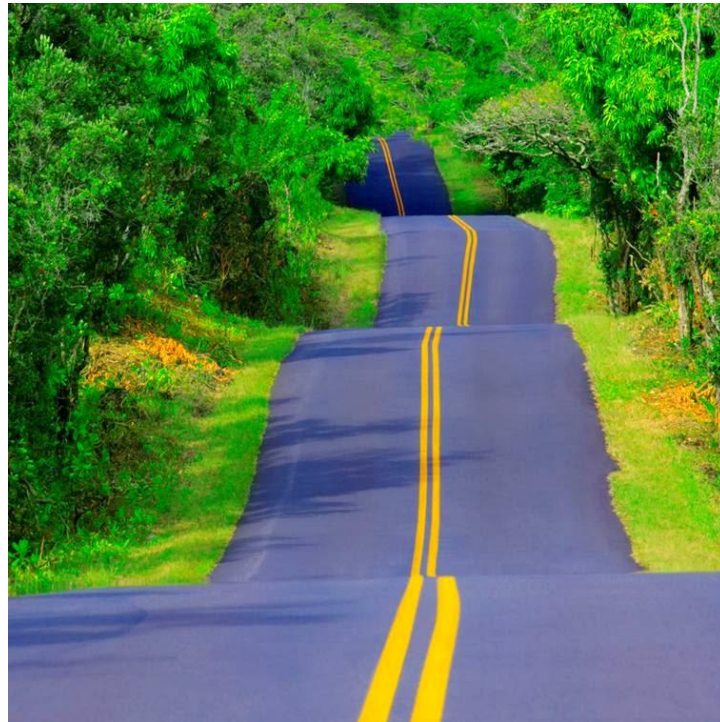
Manager of Outcomes & Performance Mgt.

Data Analyst


Covering Programs in: Florida

Illinois (all regions)

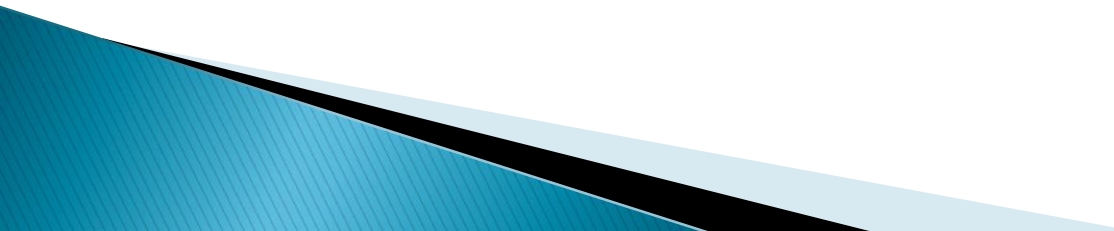
The Journey



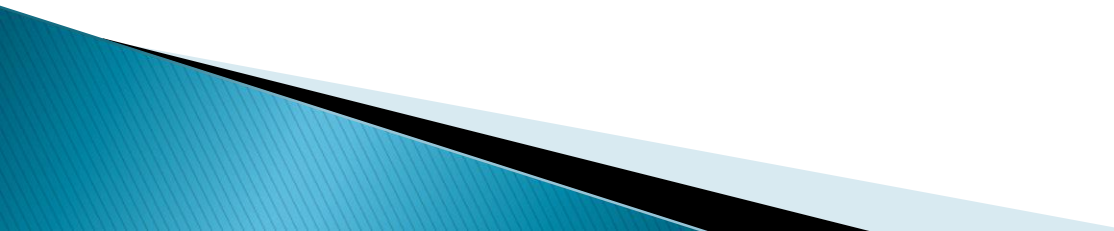
Where We Were

- ▶ 2006 – 2016 Quality Improvement Teams
 - Included all OHU teams: (Programs, HR, Finance, Facilities, etc.)
 - 4 Levels of Meetings: Team, Supervisors, Regions, Executive Leadership
 - Each team met 3 times a year
 - Utilized as an agency-wide communication opportunity
- 

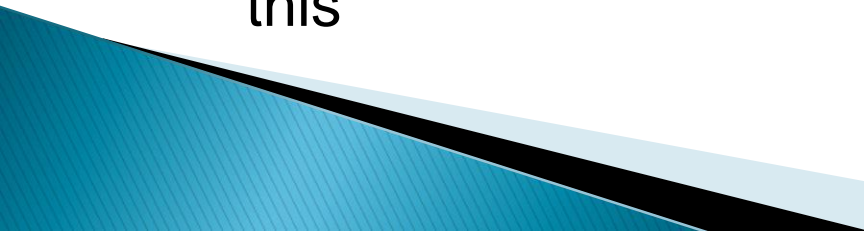
Where We Were

- Teams Identified Issues and Actions
 - Some issues were lifted to the next level QIT
 - Minutes from all meetings were shared
 - Not data driven
 - CQI generally led the meetings
- 

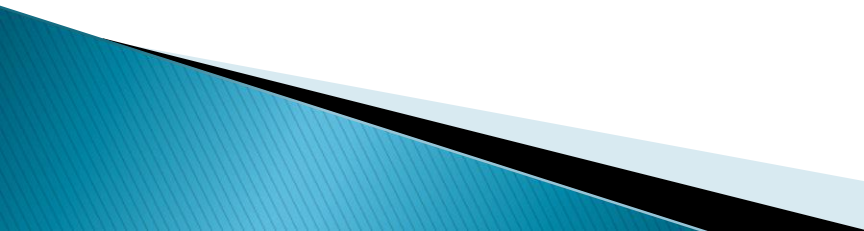
Where We Were

- Some really good actions emerged
 - ✓ Restoring the large ballfield on a Residential campus
 - ✓ Advocacy for policy changes
 - Some teams had difficulty
 - ✓ Focused on smaller things
- 

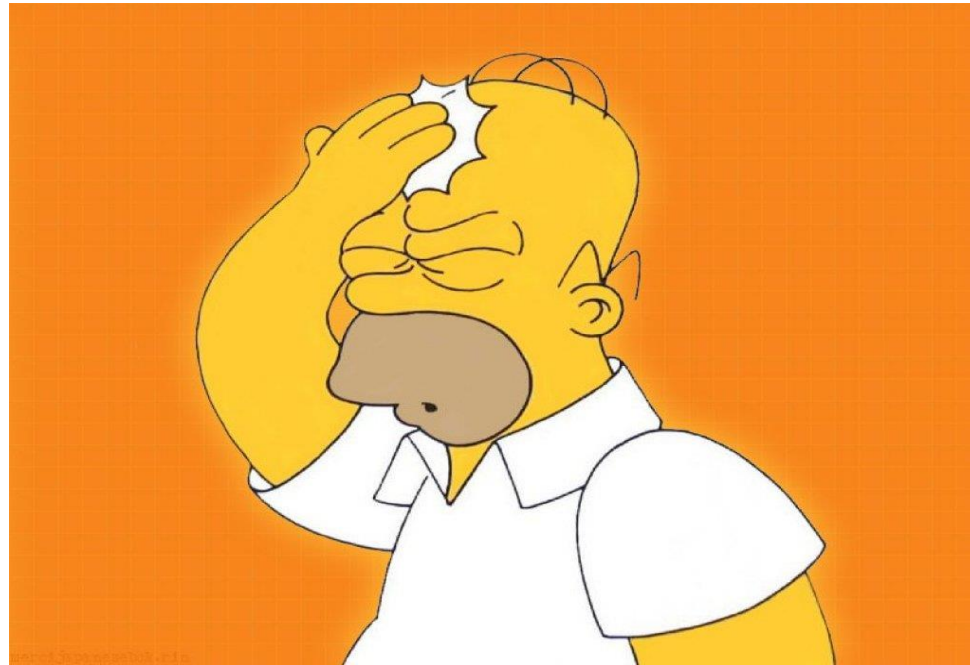
2006 Sample QIT Actions

- ▶ Need to improve relationships with local Police Department
 - Host a police officer/youth basketball game
 - ▶ Need better communication between the homes and the therapists
 - Have a group meeting to discuss ways to improve communication
 - ▶ Need new carpet in the homes
 - Ask Senior Vice President about the status of budget for this
- 

2016 Sample QIT Actions

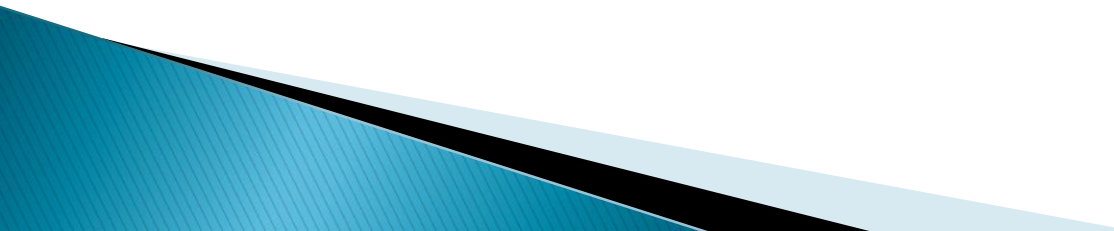
- ▶ New stove is needed
 - Lift up to Leadership and request a new one
 - ▶ Need more treatment coordination and communication from therapists
 - Address this with the therapists and identify better communication strategies
 - ▶ Need more initial training for new staff
 - Continue to look at this topic in Leadership mtgs.
- 

Things That Make You Say...

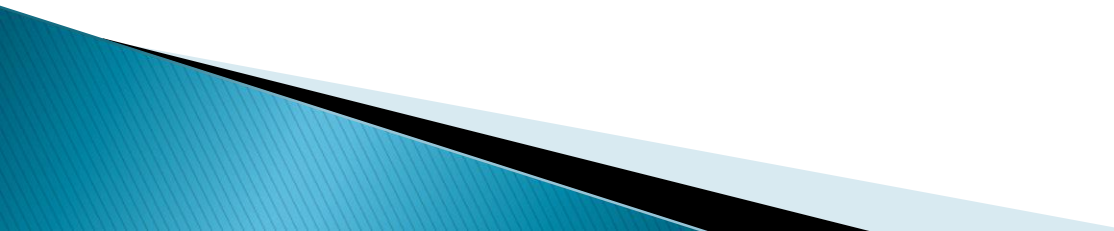


Introduction of Data into QIT's

▶ Risk Management Reports

- Lengthy report that combined data from all sites
 - CQI identified the high risk areas (e.g. outcomes, incident report trends, file review scores, etc.), and teams were asked to add actions to the overall QIT
 - Many teams challenged the data and the identified risks
 - Became a hurried exercise in a crowded agenda
- 

The In-Between Period 2016-2017

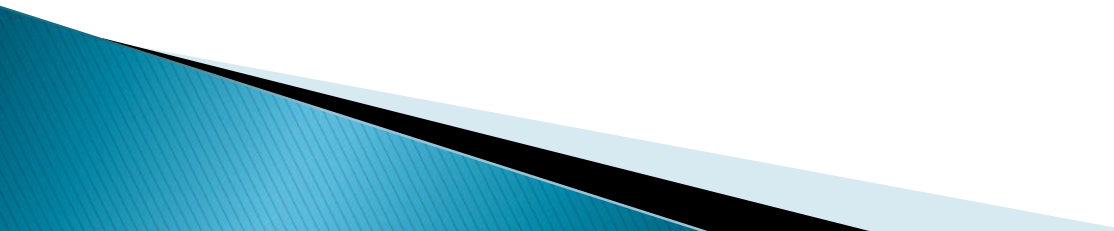
- ▶ QIT's were discontinued
 - ▶ Periodic reports were still sent to program leadership
 - ▶ No defined way to know if teams saw any data or used it to make changes
- 

And Then...

- ▶ Staff began to ask for data!



The Pathway to Change

- ▶ We needed to rebrand
 - Changed the name to be action-oriented (Impact) and
 - Inclusive to demonstrate CQI and Operations partnership (Collaborative)
 - Needed to change staff thinking about it being the former QIT
 - Data-focused only
 - New forms and new instructions
- 

Where We Are Now

- ▶ Impact Collaborative Action Planning Began FY 18
 - Data is sent to supervisors by the end of the month after the quarter ends (e.g. Q1 data July-Sept. is sent by October 31)
 - Teams meet between the 1st and 15th of the following month to develop action plans based on the data (e.g. between 11/1-11/15)
 - Team-driven process; CQI does not attend the team meetings
 - Action plans are due to CQI by the 15th

Quarter 1 Data Example

Program Name: Intact	Target	FY16	FY17	FY18	FY19:Q1	FY19:YTD
Key Outcomes						
1. Families will not have an indicated report of abuse or neglect during the service period.	100%	92.23%	88.79%	95.79%	94.55%	94.55%
2. Families will not have an indicated report of abuse or neglect within 6 months post-discharge.	100%	95.45%	92.54%	93.22%	100.00%	100.00%
3. Families remain together during service period.	90%	97.06%	97.10%	98.33%	95.24%	95.24%
4. Families discharged from the Intact Family Service program will not re-open within 12 months.	85%	96.97%	98.51%	91.53%	100.00%	100.00%

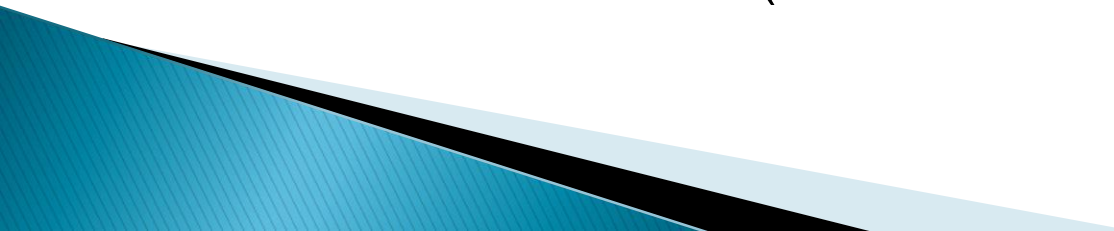
Quarter 1 Data Example

Contract Measures	Target	FY16	FY17	FY18	FY19:Q1	FY19:YTD
5. Weekly child/worker visits first 30 days	90%	97.13%	99.07%	96.88%	99.36%	99.36%
6. Weekly parent/worker visits first 30 days	90%	97.10%	99.65%	98.16%	100.00%	100.00%
7. Monthly child/worker visits on-going	100%	98.18%	99.65%	100.00%	96.41%	96.41%
8. Monthly parent/worker visits on-going	100%	98.70%	99.26%	100.00%	98.73%	98.73%
9. Initial Comp. Assessments completed in 45 day	90%	98.48%	94.03%	96.36%	100.00%	100.00%
10. Initial Service Plan completed in 45 days	90%	98.48%	98.51%	100.00%	100.00%	100.00%

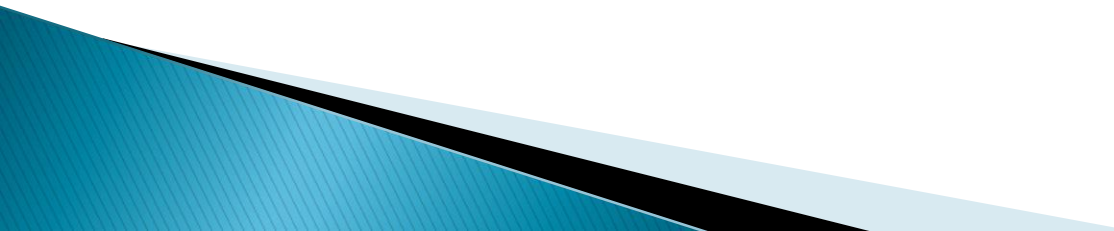
Quarter 1 Data Example

Case Review	Target	FY16	FY17	FY18	FY19:Q1	FY19:YTD
Overall	90%	89%	92%	90%	84%	84%
Significant Event Counts		17	9	2	0	0
Significant Event Types						
Deaths		0	0	0	0	0
Suspected Abuse		12	3	1	0	0
Behavior		3	2	2	0	0
Encounters with Law Enforcement		N/A	N/A	1	0	0
Sexualized Behavior		N/A	N/A	0	0	0
Caregivers		N/A	N/A	0	0	0
Injuries		N/A	N/A	0	0	0
Medical/Psychiatric		8	0	1	0	0
Pregnant/Parenting		N/A	N/A	0	0	0
Other		1	4	0	0	0

Where We Are Now

- ▶ Action plans are organized by Line of Service
 - Early Learning & Child Development
 - IL Placement (Residential, Group Home, Day School, TLP)
 - Foster Care & Intact
 - Community Based Family Services
 - Florida Placement (Foster Care & Intact)
- 

Action Plan Questions

- ▶ What is going well and why?
 - ▶ What is not going well? What is the outcome you are trying to impact?
 - ▶ What is causing or contributing to the problem?
 - ▶ What steps will be take to reach the goal?
- 

Sample Action Plan Responses

- ▶ What is going well and why?
 - Eight of the ten outcomes are meeting the target, three of which are at 100%. The overall case review results were at 90% for FY18.
 - The reasons for success are because these outcomes are the ones in which staff have the most control over and reflect the work they are directly executing themselves. They ensure all visits occur and documentation is completed thoroughly and in a timely manner which is what is being measured by the outcomes listed here.

Sample Action Plan Responses

- ▶ What is not going well? What is the outcome you are trying to impact?
 - Families will not have an indicated report of abuse or neglect during the service period or within 6 months post-discharge


Sample Action Plan Responses

- ▶ What is causing or contributing to the problem?
 - Multiple issues cause parent to engage in abusive or neglectful behavior. Lack of parenting capacity, stress, economic issues, etc.
 - Staff have the least amount of control/influence in this outcome measure


Sample Action Plan Responses

- ▶ What steps will be taken to reach the goal?
 - Caseworkers will increase early identification of risk/safety issues (CERAP, Home Safety Checklist, etc.)
 - Immediate referrals will be made for needed services
 - Families will be seen weekly as long as there is a significant safety concern
 - When appropriate and applicable, cases will be extended as a Tier II case, to help prevent indicated reports of abuse or neglect within 6 months post-discharge.

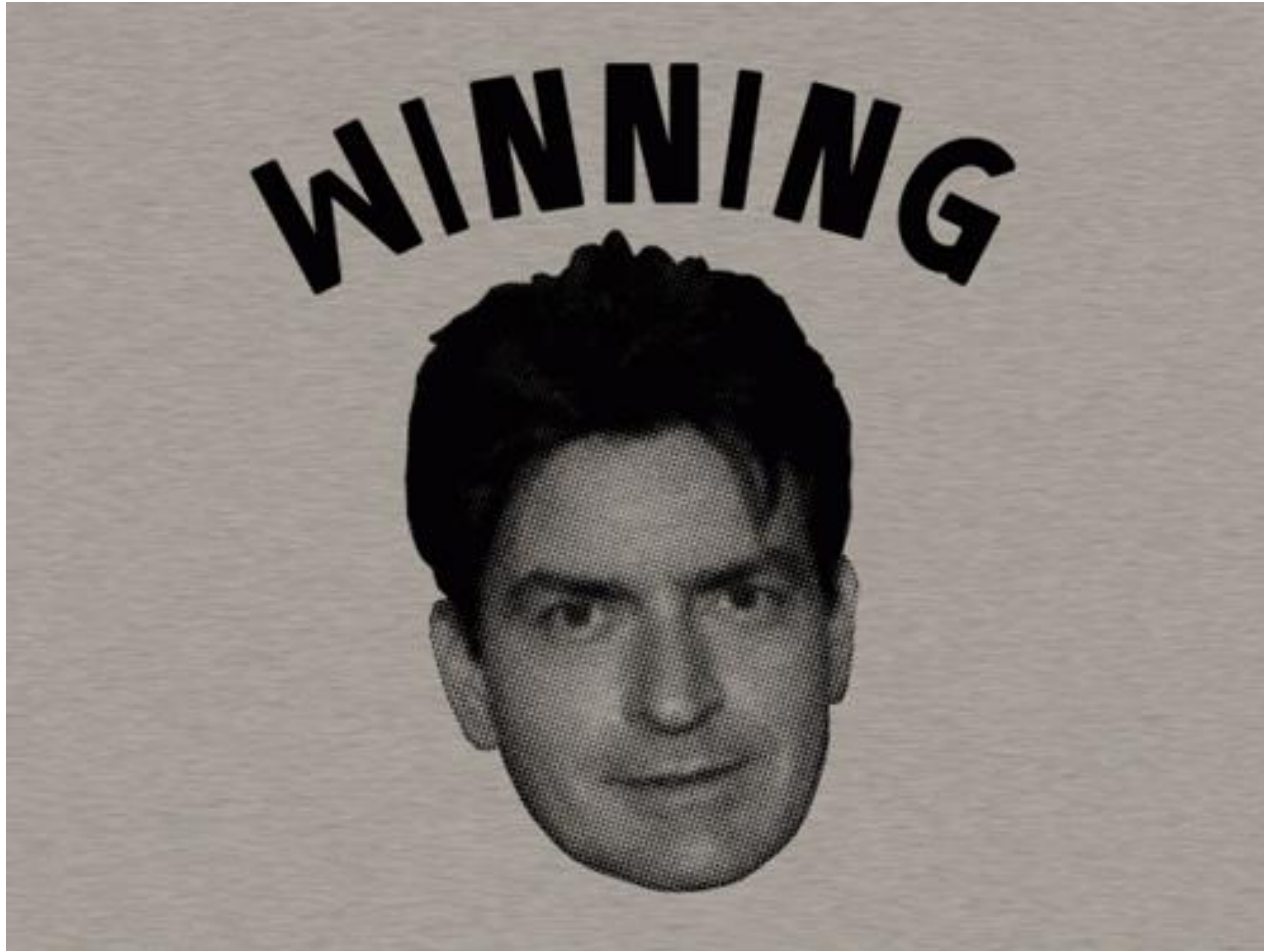
Where We Are Now

- ▶ CQI reviews all of the teams' action plans and identifies common themes
 - ▶ A summary report is prepared and sent to the Leadership Team for each Line of Service containing the common areas of success and the common areas for improvement
 - ▶ A Project Tracker is also updated to reflect the status of actions
- 

Where We Are Now

- ▶ A Leadership level meeting is then scheduled to review the teams' summaries and themes
 - ▶ Leadership develops an action plan which is intended to be in support of the individual teams' issues and actions
 - ▶ New actions are included on the Project Tracker and actions that are accomplished or no longer viable are moved off or tabled
- 

Impact Collaborative Successes

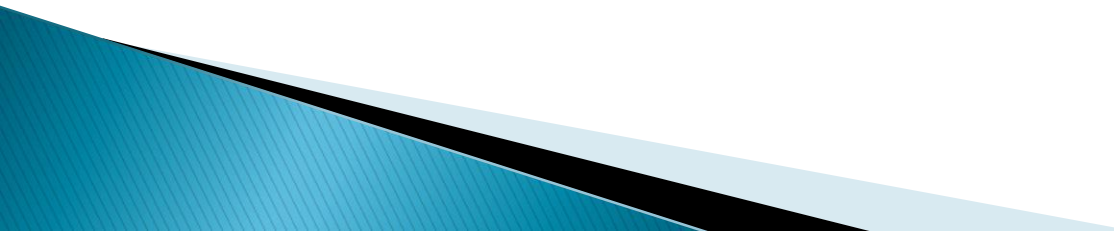


“That’s Gold, Jerry. Gold!”





IC Successes

- ▶ In a COA year – this is gold!
 - ▶ Opportunities for cross-geographical and cross-team discussion at leadership level
 - ▶ CQI modified the action plan template after feedback from staff
 - ▶ Good place to house data projects
 - ▶ Concise way to share progress with Executive Leadership Team
- 

Actions Leading to Improvement

TLP Example

Measure:

Youth will be employed a minimum of 20 hours a week or participate in community service (8 hours a week) while enrolled in the TLP program

Target: 50%

FY 16 Results: **17%**

FY 17 Results: **25%**

Actions from IC

▶ Actions

- Work to obtain State ID, Birth Certificate & SS Card on day 1
- Create weekly employment search days (staff taking youth into the community for job searches)
- Initiate goal-focused therapeutic interventions to combat little/no internal motivation
- FY 18 Results: **57%**

Actions Leading to Improvement

Residential Example

Measure:

Negative Discharge Rate

Target: Below 15%

FY 16 Results: **16.67**

FY 17 Results: **20.45**

Actions From IC

▶ Actions


◦ Structure & Engagement

- Alter home schedules to provide more relationship-building activities to reduce AWOL's
- More clinical consultation provided to home staff for youth identified as self-harming and/or depressed to reduce psychiatric emergencies and SASS calls
- More trauma training for direct care staff
- Obtain sound-reducing panels and make other environmental adjustments to reduce overall noise stimulation in the homes
- FY 18 Results: **11.9**

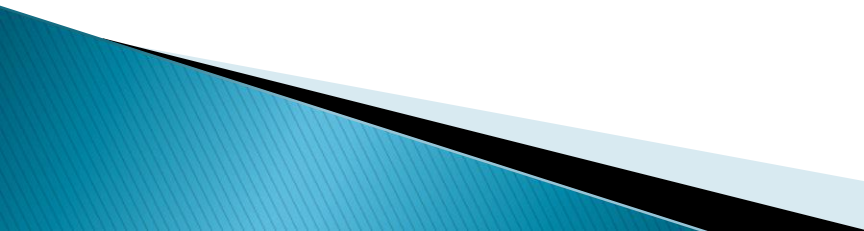
Impact Collaborative Challenges



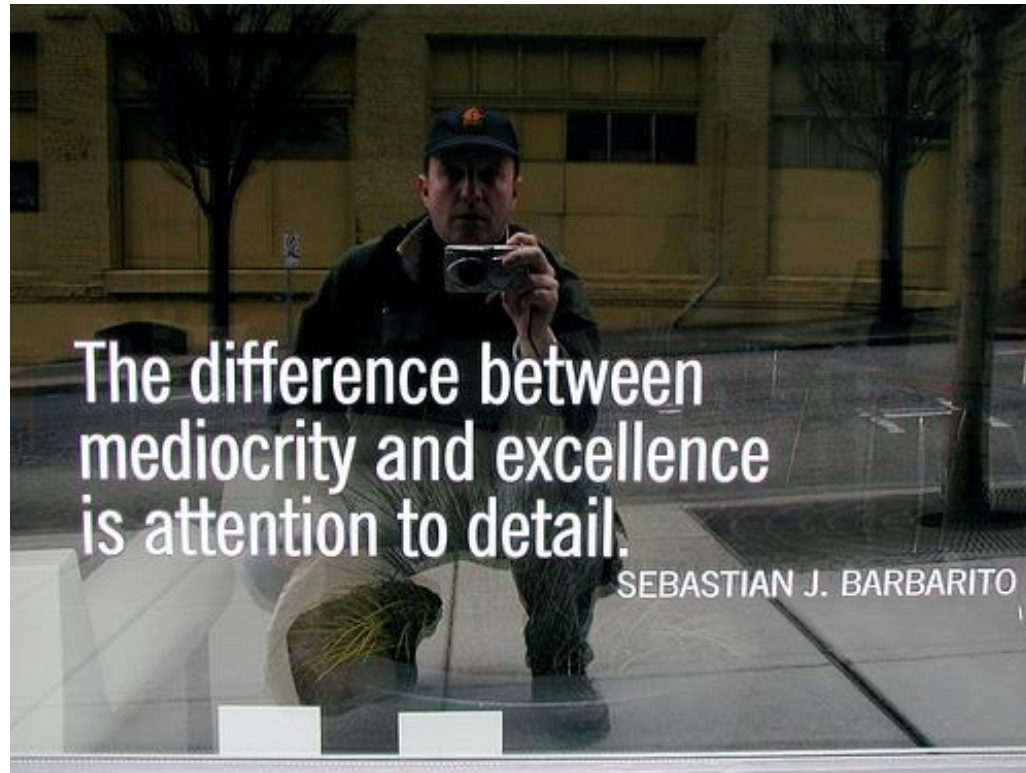
IC Challenges

- ▶ Staff turnover can lead to lack of continuity
 - ▶ Some teams have made it part of the culture, while others struggle
 - ▶ Follow-up on previous actions as new issues emerge
 - ▶ Focusing the actions on the data
 - Especially teams without a supervisor
- 

Lessons Learned

- ▶ Provide more advance notice
 - Give program directors time to prep their supervisors
 - ▶ Connect with supervisors as soon as the data report comes out
 - Reminders to schedule meetings and focus on data
 - Teams without supervisors need extra attention from CQI
 - ▶ In-person leadership meetings if possible
 - Prevent multi-tasking
 - Hard to focus on data while driving
- 

Questions & Comments



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