

Changing Your Process:

Getting CQI Buy In One Dashboard at a Time



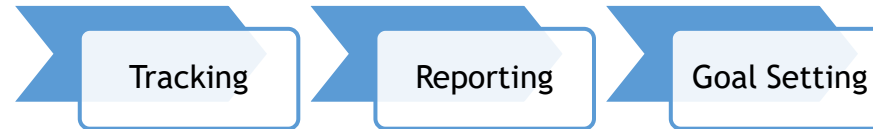
Presented by: Michael Crofford, Micheal Dent, and Brooke Moomaw

Background/History

- ▶ **What we did vs what we wanted to do:**
 - ▶ What are we tracking/reporting
 - ▶ Problems in accuracy (numbers/data)
 - ▶ How did we do it in the past
 - ▶ Problems that caused with staff and supervisors (interpersonal/coaching)
 - ▶ Why we wanted to change
 - ▶ Necessity - COVID and reduced staff
 - ▶ Better practice - MI and motivation with your own goals
 - ▶ The conceptual change leading to the task work change
 - ▶ Balancing the need to change with realism of resources

What Changed: Tracking/Reporting

- ▶ Using new systems and automating the report (STATA)
 - ▶ Identifying and keying in on key performance indicators
- ▶ Using systems already available (Excel) to create better dashboards
 - ▶ Old way was missing key performance indicators
 - ▶ Keeping visuals simple
 - ▶ Telling a story



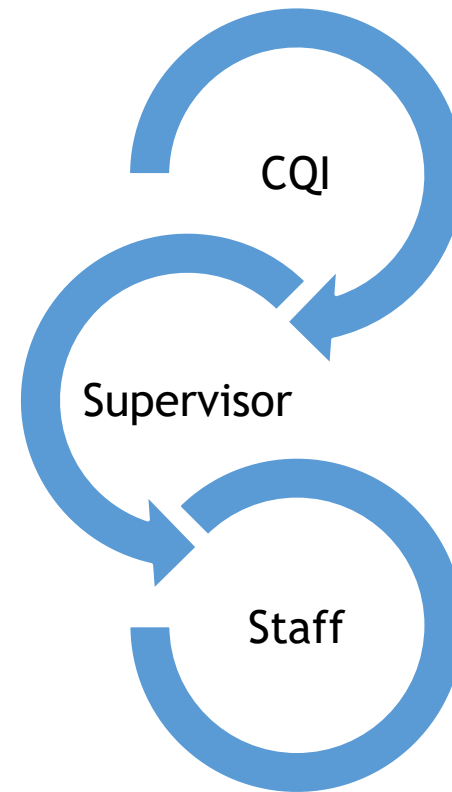
How It Started

- ▶ Missing Key Performance Indicators
 - ▶ Supervisors and Staff focused on the KPI's that were present, rather than those that were missing.
- ▶ Deliver method was lacking
 - ▶ CQI provided and distributed info directly to staff
 - ▶ Included goal areas that may have been overlooked.
- ▶ Lacked ability to combine with previous months or track progress easily

Lawrence, Hakeem	
EPICS II Skills	Count of Skill
Criminal Thinking Scale Worksheet	13
Effective Use of Disapproval	1
Effective Use of Punishment	1
Effective Use of Reinforcement	7
Explaining the Behavioral Analysis	6
Explaining the RACE	3
Problem Solving Skills	13
Processing the Behavioral Analysis	5
Processing the Cognitive Model	2
Role Clarification	4
Social Skills	21
(blank)	
Total EPICS II Skill Logs	76
Total Caseworker Logs	88
% EPICS II	86%

What Changed: Process

- ▶ How the Dashboard is distributed and given to staff and supervisors
- ▶ Piloting and taking feedback (incorporating PDSA concepts into our rollout plan)
 - ▶ Creating and selecting those for a pilot

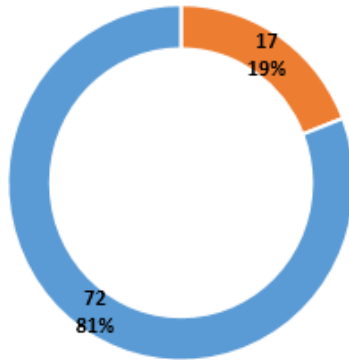


How It's Going

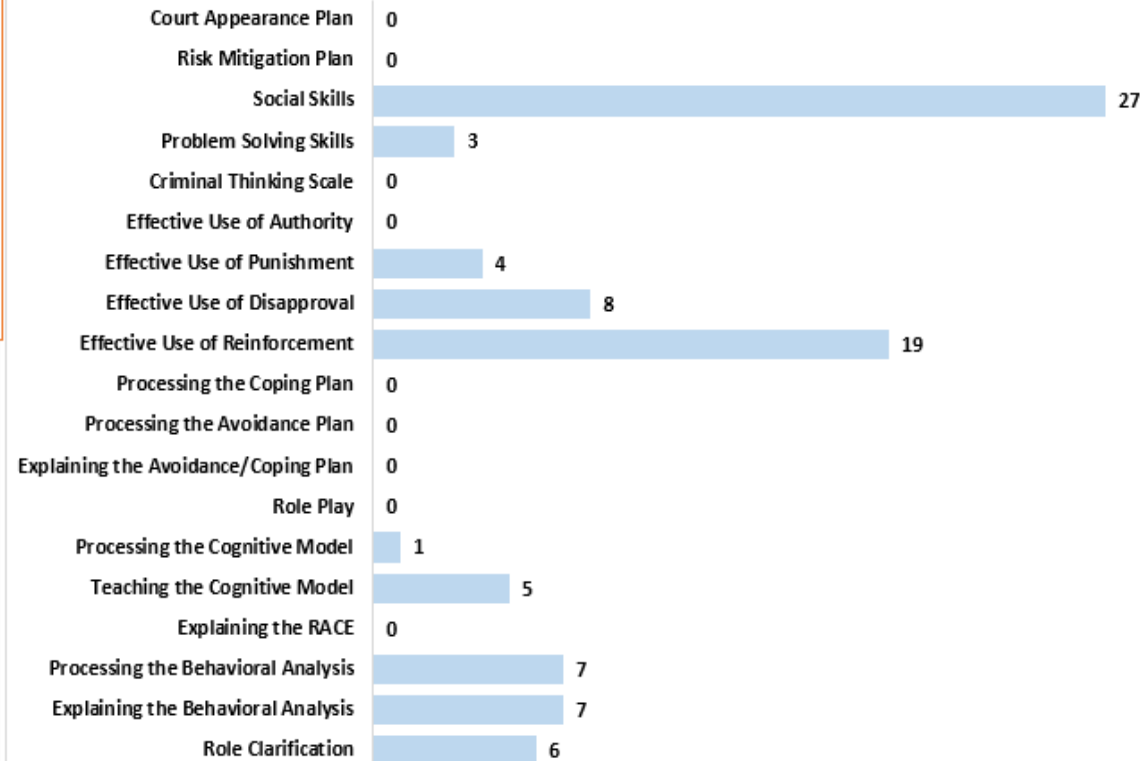
EmployeeName	Month
Lawrence, Hakeem R.	February
Love, Stephen	March
Machesney, Deidre L.	April
McDonald, Kyle G.	May
Montgomery, Melissa S.	June
Pedraza, Keilas	July
Predojev, Steven S.	August
Pruchnicki, Eric D.	

My Utilized Skills Percentage

- No Skill Attached
- Skill Logs



Skill Utilization



WHAT
DO YOU
THINK?

You have a new staff member that has been with the agency for 3 months and is writing their first quarterly goals. Their overall skill utilization rate is 40%. They have utilized 5 of the 17 available skills. They do not yet have an overall proficiency rating (grade) in their reviewed skills but seem to do well in the ones that have been rated thus far. What types of goals would you help them establish?

You have a staff member who has been with the agency for 3 years. They consistently are graded high on all feedback they receive except for one skill. They consistently have a skill utilization rate of 75% or above. They have 3 skills that they have used over 15 times a piece and 4 skills that they have not used at all in the course of the quarter. What types of goals would you help them establish?

At the end of the day who should get the final decision on what staff's goals should be?

What is the most important part of the PDSA cycle in developing a new process?

How would you measure success in implanting a new practice like what has been presented?



What processes do you have that you can apply these principles (PDSA, MI, LEAN, etc.) to?

Planning/Pilot/Evaluation/Rollout

- ▶ Results from pilot
 - ▶ Questionnaire
- ▶ Rolling to agency at large
 - ▶ From the top down
 - ▶ Interdepartmental Teams created
 - ▶ Roles defined

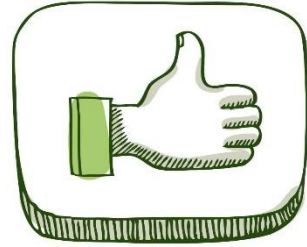


How did it go

- ▶ Pilot Participation
 - ▶ What was the plan
 - ▶ What concerns were there
- ▶ *Investment* of time for staff and supervisors
 - ▶ Time frames
 - ▶ Structure of meetings



How was it received



• Pros

- Promotes staff buy-in
- Staff establish their own goals
- Supervisor more in touch with staff
- Higher accountability
- Opens/increases communication



Cons

- Time constraints
- Front loaded
- Creative goals for experienced staff

Were we successful?

How was it received

“The information is easier to follow.”

“I share with my CWs via email and give them ‘shout outs’ “

“I like that CW now have a chance to establish their own goals with the help of their supervisor and CQI, more realistic for them to achieve”

“It keeps me updated on what my strengths and weaknesses are in terms of skill utilization”

“Recently we came up with a CW monthly goals worksheet which has proved to be helpful”

“Allows them [caseworkers] to have several tools at their finger tips”

“I like being in the know, receiving that monthly snapshot of what skills the CW is using and how much.”

“Yes, I have been able to achieve the goals of increasing the skills I use and maintaining requirements for tier 3.”

Results and Summary

- ▶ Reduction in time spent on tasks by all parties
 - ▶ KPIs collected and reported quicker
 - ▶ Interactive dashboard
- ▶ Increased proactive communication between supervisors and caseworkers
- ▶ Gave ownership to the direct service staff
- ▶ Used available resources
 - ▶ No additional agency resources were needed
- ▶ **It's doable for everyone!!!**



Questions that we did not have time to answer at the conference”

“How do you align the skills being used by your staff with the needs of your clients?”

Utilizing the worksheets that are part of the EPICS II model, case management staff identify individualized target areas to address with each client. The client has the final say on which target area to address. We train our case management staff to utilize different approaches (CBT worksheets, MI skills, social skill building, role play, etc.) to meet the client’s needs. Different programs have different populations that they serve so each program will have nuanced needs and areas of focus. Example: our drug court programs are typically longer placements and therefore we expect the case managers to focus more intentionally on building in depth coping strategies to deal with substance use that are only successful after a client has committed to change. A short term placement may focus more on emotional regulation skills and how to avoid short term risky behavior. Ultimately though it is individualized to match the client’s needs. If these are not aligned with client needs, that would be a topic of discussion during these meetings with the supervisor and CQI staff.

Questions that we did not have time to answer at the conference”

“Is there a treatment plan prescribed for a client?”

Yes. Each client that is engaged in case management will have an Individual Program Plan (IPP) that needs to be updated no less than every 14 days. Clients engaged in substance treatment programming will also have a primary clinician that would be responsible for creating a treatment plan specific to the client’s substance use treatment. Clinicians, cognitive skills group facilitators, employment specialists, etc. are all part of the treatment team that coordinates through the case manager to devise the client’s programming.

Questions that we did not have time to answer at the conference”

“Do you have contractually mandated utilization rates or is the goal setting entirely internal?”

So the answer is yes. We do write in expected utilization rates into grants that we apply for so many of our grant funded programs will have an external requirement. We also have internal requirements depending on the experience and tenure of the case management staff. Usually those are equivalent but for our most seasoned staff the expectation is a little higher internally. The hope being that these are the next leaders in supervisory positions. The other goals that are established beyond earning an overall proficiency rating and meeting a certain utilization rate are all unique to the individual caseworker. We have some suggested goals and guidelines on appropriate goal setting based on experience and performance but this is truly meant to be used as a springboard. Utilization rates and achieving proficiency are only prescribed to the case manager as goals if they are not meeting the basic requirements for internal or external standards.

Contact Information

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