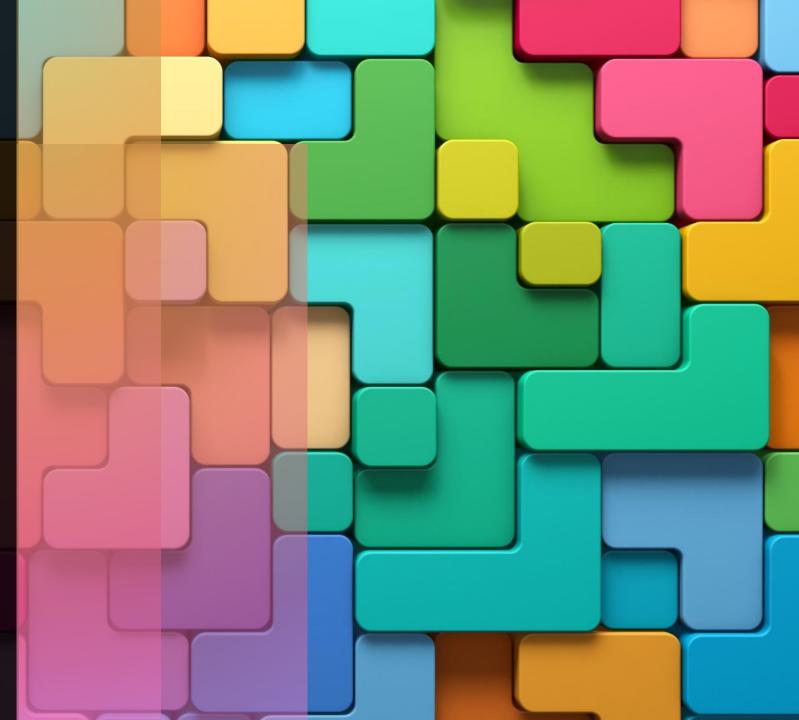
# Don't Stop Believing

Our CQI Journey to Inspire Buy-In Amid Resistant Team Members



#### **Presenters:**



**Nicole Wilson** 



**Jason Meyers** 



Janet Braker

## **Setting the Stage**

- Who is MACF?
  - Contract Overview
    - Specialized
    - FCCM

#### **CQI** Overview





#### Plan/Do/Check/Act

#### **QA/QI** Structure

Quarterly Outcome Management Groups Quarterly CQI Meetings Directors

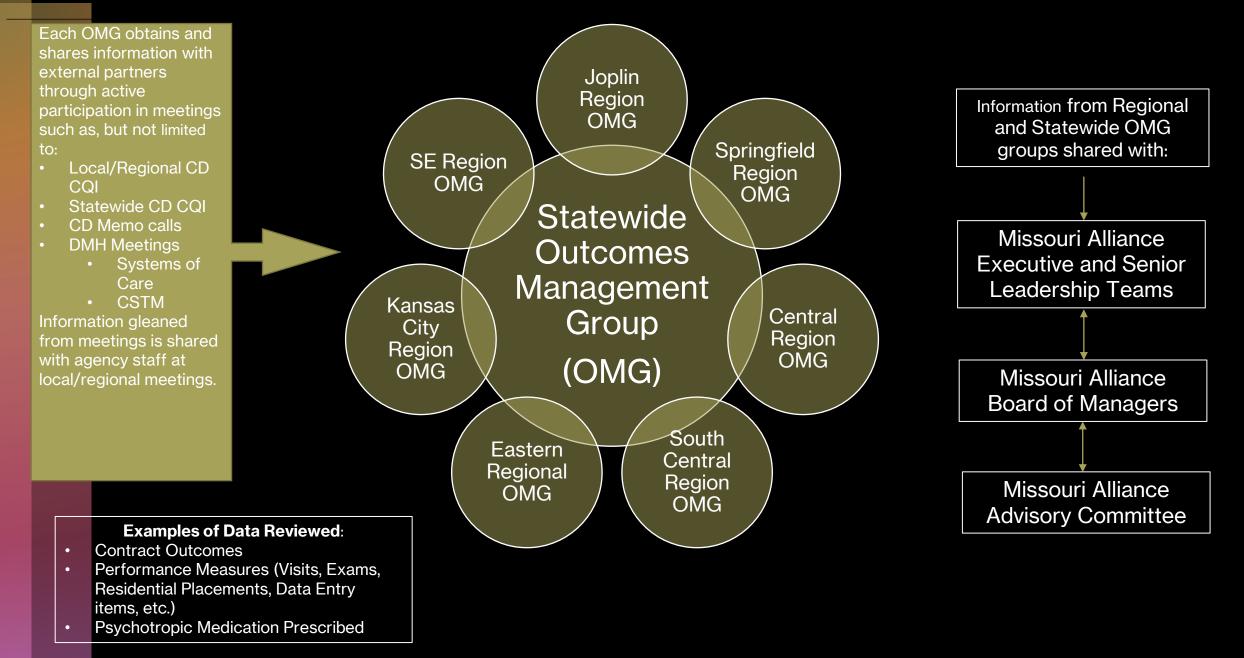
# Plan Do Check · Act

The PDCA Cycle

• A looping process used for continual process improvement.

Check · I observe that [there is a specific problem]. I think it is because [of this reason]. So I plan to [implement some intervention], which I think will result in [the desired outcome].

#### Missouri Alliance FCCM CQI Process



## Our Past CQI Journey



#### What we had been doing?



What was working? What was not working?



Reporting

Information shared

#### **Meeting Structure**



#### FREQUENCY ATTENDEES CONTENT

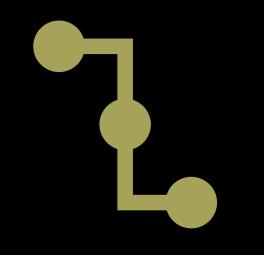
### Past Reports

- Very Role Centered
  - Provided based on the person in the role and their needs
- Uninformative
- Not engaging to use
- Like a Report Card



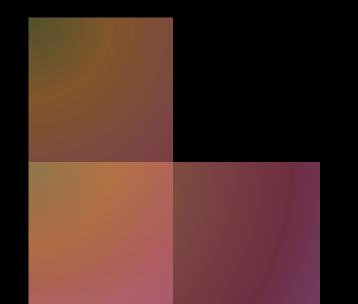
Deep and sustainable change...requires changes in behavior among those who do not welcome the change.

Douglas B. Reeves



# Learning from the Journey

## Where we are now



#### **Meeting Structure**



#### FREQUENCY ATTENDEES CONTENT

# **Reports and Data**



Reports accessible to the user



Monthly and Quarterly Reports



Tip sheets

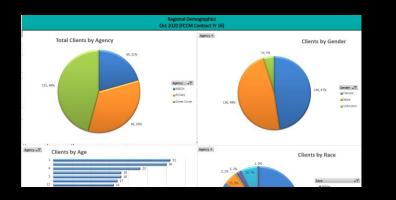


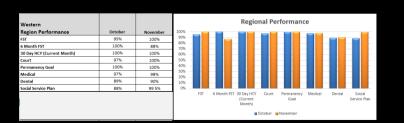
**Report Guides** 

## Outcome Dashboard

- The dashboard tracks all contract outcomes such as:
- The region and agency permanencies and other exits.
- Re-entries
- Substantiated hotlines
- 30-day HCY completion rate







### Performance Measures

#### This report has multiple tabs that show:

- demographics
- placement types
- residential utilization
- caseload sizes
- agency and individual Case Manager performance each month on the identified case activities such as FST meetings, SSP completion, medical/dental exams and court hearings.

	Internal Visit Tracking (See CSWIS Report Parent Visit Report from Family View)								
Worker Visits with Parent (50%-100% 💶 ; 45%-49% 🛄 ; 44% or less 🗳 )									
	Region Overall			МВСН			PCHAS		
	# Required	# Completed	%	# Required	# Completed	%	# Required	#Completed	%
Oct-22									
Nov-22									
Dec-22									
Jan-23									
Feb-23									
Mar-23									
Apr-23									
May-23									
Jun-23									
Jul-23									
Aug-23									
Sep-23									

	Internal Visit Tracking (See CSWIS Report Supervision Visitation Report with Detail)								
	Worker Visits with Child In the Home (95%-100% 🛄 ; 90%-94% 🛄 ; 89% or less 🛃 )								
	Region Overall			МВСН			PCHAS		
	#Required	# Completed	%	# Required	#Completed	%	#Required	# Completed	%
Oct-22									
Nov-22									
Dec-22									
Jan-23									
Feb-23									
Mar-23									
Apr-23									
May-23									
Jun-23									
Jul-23									
Aug-23									
Sep-23									

	Internal Visit Tracking (See CSWIS Report <u>Parent with Child Visit Report from Family View</u> )								
_	Parent/Child Visits (50%-100% 🂶 ; 45%-49% 🛄 ; 44% or less 📕 )								
	Region Overall			MBCH			PCHAS		
	#Required #Completed %		# Required	# Completed	%	#Required	# Completed	%	
Oct-22									
Nov-22									
Dec-22									
Jan-23				1					
Feb-23				1					
Mar-23									
Apr-23									
May-23									
Jun-23									
Jul-23									
Aug-23									
Sep-23									

#### Visits

 Shows trends on the percent of visits completed each month for worker/child, worker/parent, and parent/child visits for each agency and the region overall.

## Inspiring Staff Buy-In to CQI

Does it matter?

# YES

#### **Engaged to Not Engaged**

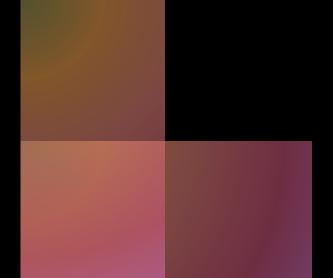
#### Past

- Leadership very engaged
- Owned their data
- Used it in their CQI goal development
- WIG Goals
- High Performing Region

#### Present

- Change in Leadership
  - Change in Director and Supervisors
- Changes caused chaotic agency practice
- No longer using data to inform practice
- No longer using WIG Goals
- Performance at risk for decline

## Not Engaged to Engaged



#### Past

- Leadership Person Driven not Data Driven
- No emphasis put on improving performance measures which then in turn would be better services for clients
- Struggled to resist the chaos of 'reactive' daily work environment
- Struggled to meet Performance Measure goals

#### Present

- Leadership Data Driven but not Person Dirven
- Have reminders on data points posted in the office
- Monthly workdays with staff
- Improved Performance Measures which shows work with clients

20	21	20	22
ΖU	Z T.	-zu	ZZ

Agency 1	October	November	December	
FST	59%	60%	74%	
6 Month FST	NA	40%	50%	
30 Day HCY (Current Month)	100%	100%	0%	
Court	53%	38%	97%	
Permanency Goal	94%	95%	99%	
Medical	72%	66%	86%	
Dental	56%	52%	78%	
Social Service Plan	NA	NA	NA	

#### 2022-2023

Agency 1	October	November	December	
FST	99%	100%	100%	
6 Month FST	100%	80%	100%	
30 Day HCY (Current Month)	100%	100%	100%	
Court	100%	100%	100%	
Permanency Goal	100%	100%	100%	
Medical	99%	99%	99%	
Dental	95%	94%	97%	
Social Service Plan	100%	100%	100%	

#### Impact of CQI Initiatives when staff are Engaged



#### Learning from the Journey – Where We are Going

# **Engage All Levels of** Staff

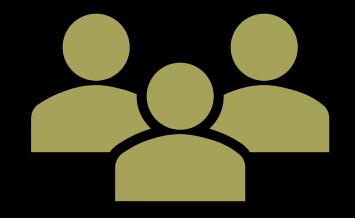
Board Involvement Sr. Leadership Group Regional Directors Team

# **Data Informing Change**

# Support Staff Where they Are



# Accountability



# Enhanced Coaching and Support

## **Questions?**