

MEASUREMENT & DATA USE CONTINUUM

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Stage of Social Inquiry	Describe populations, problems.	Compare to other groups served differently, in other places.	Correlate outcomes with independent variables. Describe importance of context.	Explore why things do and do not work.	Develop and assess power of prediction, theories, causality.
Inquiry Purpose / Type of problem-solving	Exploratory: Familiar with facts, settings, concerns, creating a general mental picture of conditions. Formulate questions. Generate new ideas and potential hypotheses. Determine the feasibility of research and possible techniques of measurement.		Descriptive: Detailed, highly accurate pictures of conditions. Locate new data that can be compared to old data. Ability to create categories or classify types, creating sequences or stages of change. Document potential causal processes and report on context and background.	Explanatory / Predictive: Test a theory’s predictions or principles. Elaborate or enrich a theory’s explanation. Extend a theory to new topics. Support or refute another explanation or prediction. Link issues or topics with a general principle. Determine which of several explanations are best.	
Evidence-Based Practice (EBP) Scale	No evidence, possible concerning practice, no demonstrable effect	Emerging practice. Organic, originating from ground-level work.	Promising practice. Repeated application seems to produce similar change.	Supported by research evidence. White papers, some publication of results.	Well-supported by research evidence. Replication. Peer-reviewed publication.
Organization Capacities	Pre-measurement. Little to no data, small service populations, or “in the moment” processes.	Outputs. Can account for numbers served, describe services received, or analyze costs.	Outcomes. Data to demonstrate short-term outcomes (e.g., overall improvement), emerging ability to understand differential outcomes.	Confidence in long-term outcomes. Practices (EBP) and short-term outcomes align with known research on long-term impacts. Variation can be acted upon for improvement.	Mature service and maintenance of quality. Data consistently monitored to assess adherence to models (EBP) and contributing factors to improvement. Ability to adjust to changing conditions or populations.
Data Competency	Understanding of data limited and/or duty to “know” data confined to specific roles.	Basic elements of data and graphic displays are understood. Some descriptive meaning can be made to ones work, regardless of role.	Curiosity emerges: any staff begin to ask <i>why</i> , <i>how</i> , and <i>what if</i> questions of data and hypothesize changes and improvements. Data begins to be seen as a resource.	All staff understand and commit to their role in producing quality data and using data to inform practice and maintain service integrity. Culture supports learning and data intolerance not tolerated.	
CQI Activities	By-hand data collection, repetitive / duplicative data entry. Reliance on spreadsheets.	Develop or support systematic data collection methods. Align data with regulatory requirements. Help staff adopt systems.	Monitor staff data entry quality. Develop efficiencies and automations to notify of quality gaps. Development and deployment of feedback tools. Advancement of aggregated reporting tools.	Assess change data (assessments) including reliability and validity principles. Analyze problems; investigate causality and the maintenance of solutions. Monitor maintenance of service outcomes. Strengthen data infrastructure. Compliance is stable.	Monitor beyond outcomes (model fidelity), conduct internal evaluations and research. Partner with executive leaders on strategy that includes technology infrastructure, client experience patterns, with early involvement in grants, proposals and new initiatives. Compliance remains stable.
CQI Skills & Capacities	Ability to summarize basic counts, percents, describe populations served. Understand basic components and stages of service delivery. May or may not use a reporting platform. Can understand, create, and translate basic graphs.	Can construct sound survey instruments using accepted practices. Ability to develop interview and focus group questions and ability to facilitate both. Understand and use basic improvement practices such as building workflows, conducting root-cause analyses, and operate using the PDSA cycle. Ability to construct requirements for multi-selection reports that track dimensions of program performance ranging from compliance to performance. Identify opportunities to build data competency with staff.	Understand concepts of reliability and validity as they relate to both quantitative and qualitative analyses. Ability to thematically code and summarize qualitative data. Adept at developing engaging graphical displays. Ability to coach staff in reflection and data use when problem-solving. Meet staff and leaders “where they are at” by understanding common forms of resistance and awareness of math trauma.	Understand and monitor model fidelity. Ability to complete basic research literature reviews and distill information into digestible summaries for staff and leaders. Apply previous research to internal examinations and analyses. Ability to conceptualize and design evaluations that target causal factors.	Ability to partner on external academic research. May involve policymakers to influence regulation or piloting innovation. Organization may have an IRB and/or receive large grants that include a research component. Staff may hold terminal degrees, have published research or pursue publication.

