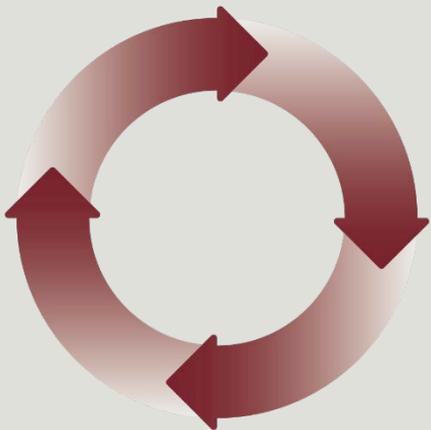


21st Century Strategies for Outcomes Driven Continuous Quality Improvement

Khush Cooper, MSW, PhD

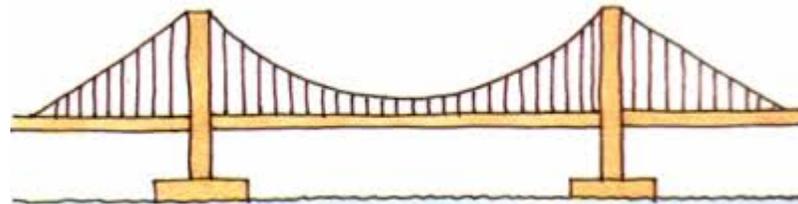
Yolanda Rogers, MSW

**The Network For Social Work Management
Webinar
November 14, 2018**



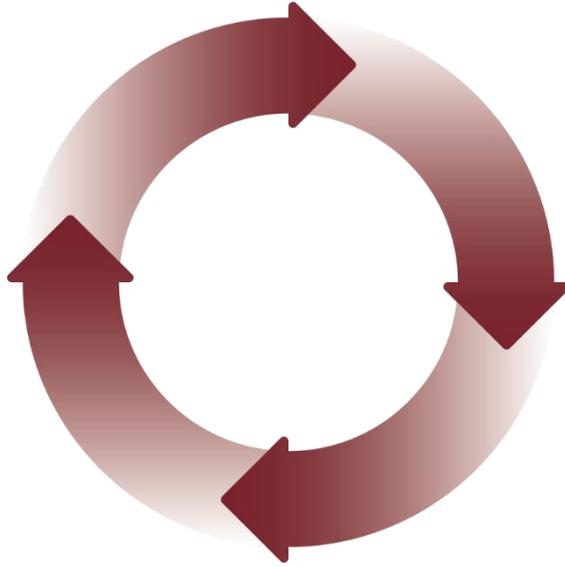
Bridging the Gap Between What We Know and What We Do

Chapin Hall at the University of Chicago is a research and policy center, focused on a mission of improving the well-being of children and youth, families, and their communities.



Chapin Hall provides public and private decision-makers with rigorous data analysis and achievable solutions to support them in improving the lives of society's most vulnerable children, youth and families.

Continuous Quality Improvement



Promote progress monitoring and mid-course improvements towards outcome attainment

We Partner with Organizations to Promote:

- An evidence-driven culture of learning across the entire organization
- Identification and ongoing monitoring of priority outcomes and key performance indicators that measure progress toward benchmarks and targets
- Development of dashboards, scorecards and user-friendly reports to inform decision-making by leadership and staff
- Use of evidence to identify, plan, implement, and monitor improvement strategies/interventions and make course-corrections
- Engagement of the provider community to implement and sustain CQI processes
- Increased use of data and evidence across all levels of the organization to “tell the story” of agency performance and how the organization is achieving strategic direction

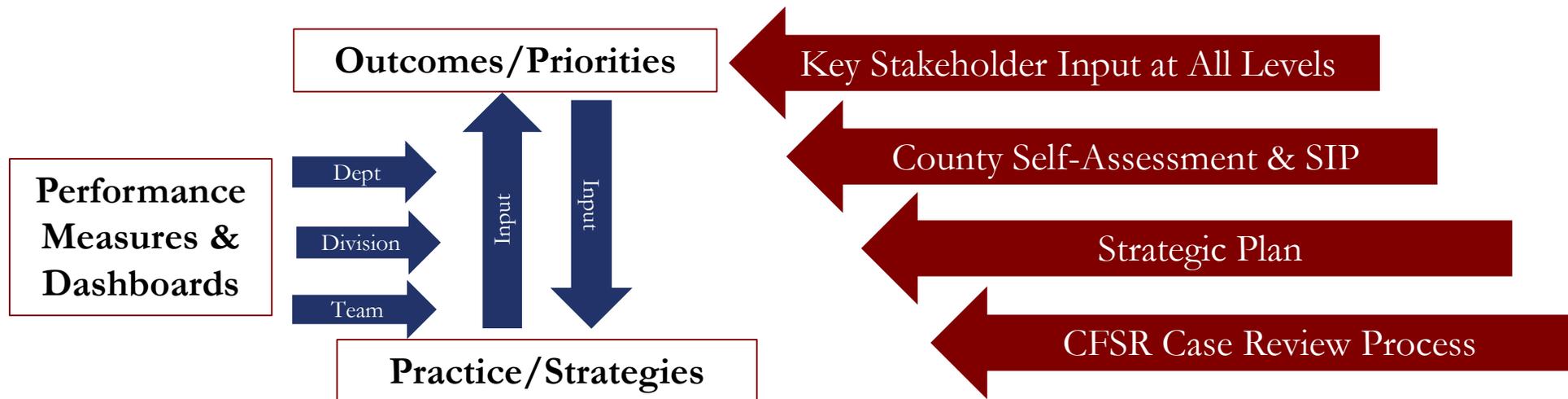
Desired Results

Participants will gain a shared understanding of:

- The essential components of an outcomes oriented continuous quality improvement approach.
- Strategies for aligning agency strategic direction (i.e., agency mission, vision and values) with clear priorities and targeted outcomes.
- Development of a unified governance structure focused on the achievement of priority outcomes, including how to transition an organization from the current structure to one that supports CQI processes.
- Methods for building the CQI capacity of staff at all levels of the agency and the policy to practice linkage.

What CQI Gets You

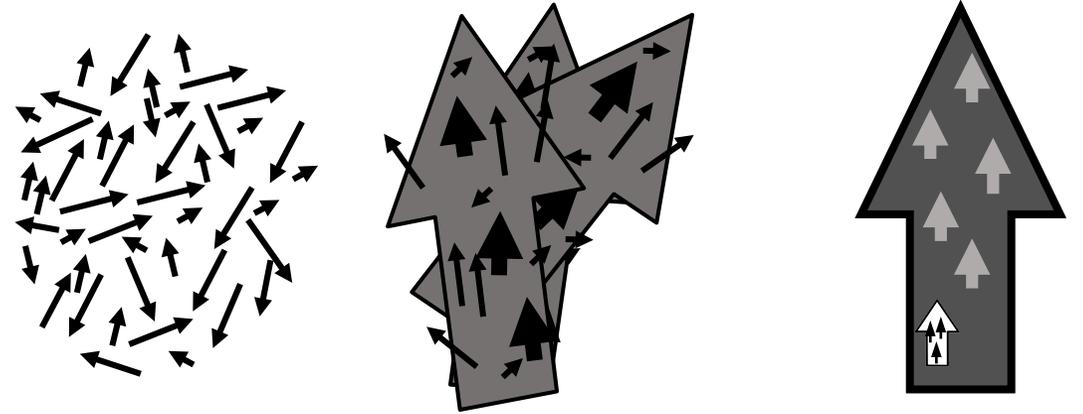
1. Understanding of how processes are performing/trending in service of outcomes
2. Early warning system for deteriorating trends
3. Continually improved performance
4. Drive for excellence
5. A line of sight



Why Outcomes Driven CQI?

- Supports sustained focus on a discrete set of priority outcomes to leverage direction and energy across the whole system.
- Guides decision-making on programs and practices based on robust analysis and evidence.
- Allocates resources based on what matters.
- Promotes direct and frequent reciprocal communication across all levels of the organization on efforts to achieve priority outcomes.
- Empowers staff and stakeholders to participate in making improvements to achieve priority outcomes.

Transformational Process



- Evolve measurement and reporting
 - Evolve what is the focus of conversation and aligned effort
 - Evolve culture
- Measurement and effective reporting of common indicators → organizational alignment
- Aligned organization → achieve goals efficiently
- Establish an “outside looking in view” of performance
- Culture of curiosity grounded in the facts not opinions



The Core Strategies



1. Identify and focus on measurable priority outcomes



2. Establish an organization-wide and transparent governance structure that embodies CQI processes



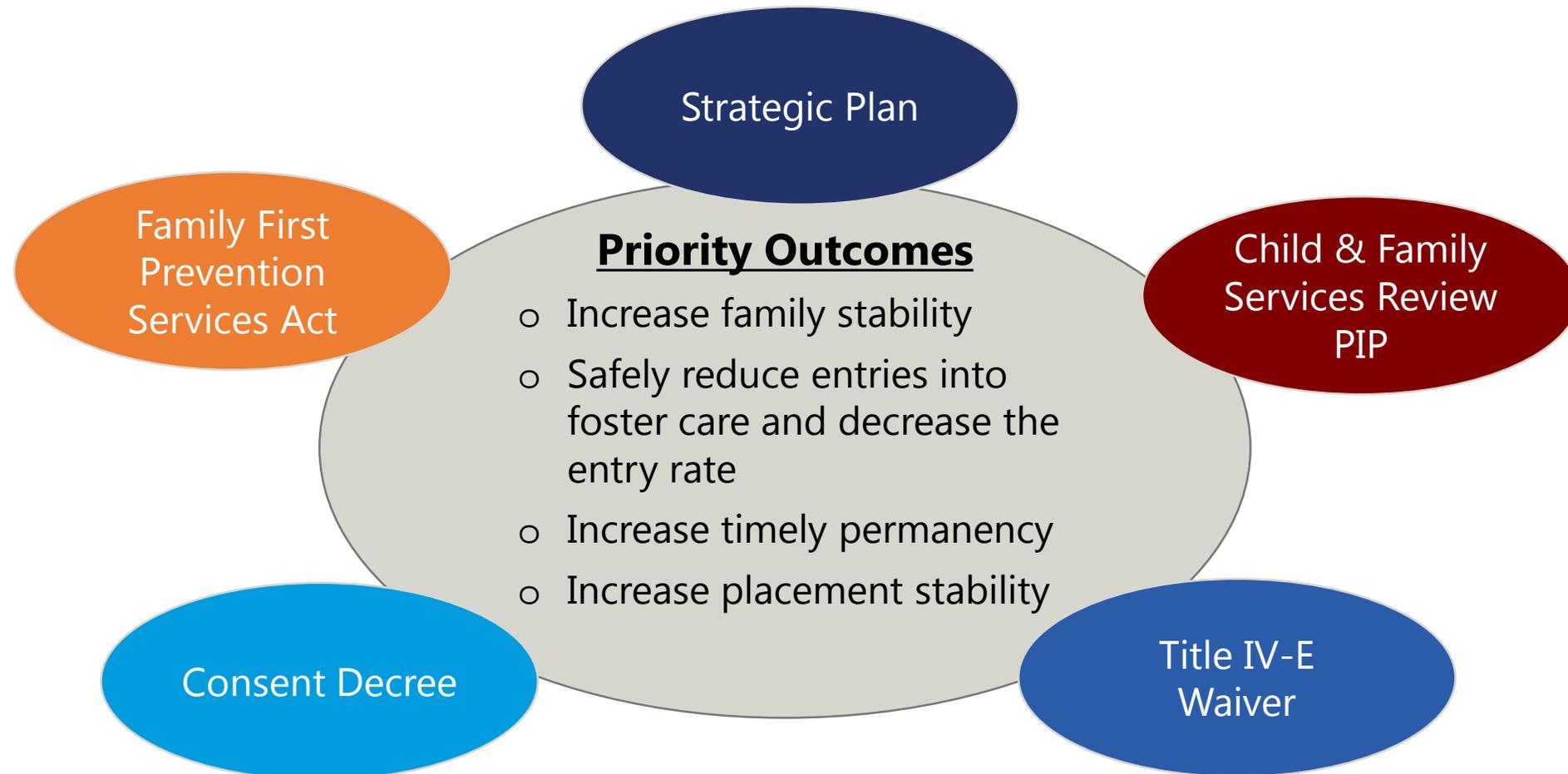
3. Build CQI capacity and skills to ensure CQI processes are operating at all organizational levels



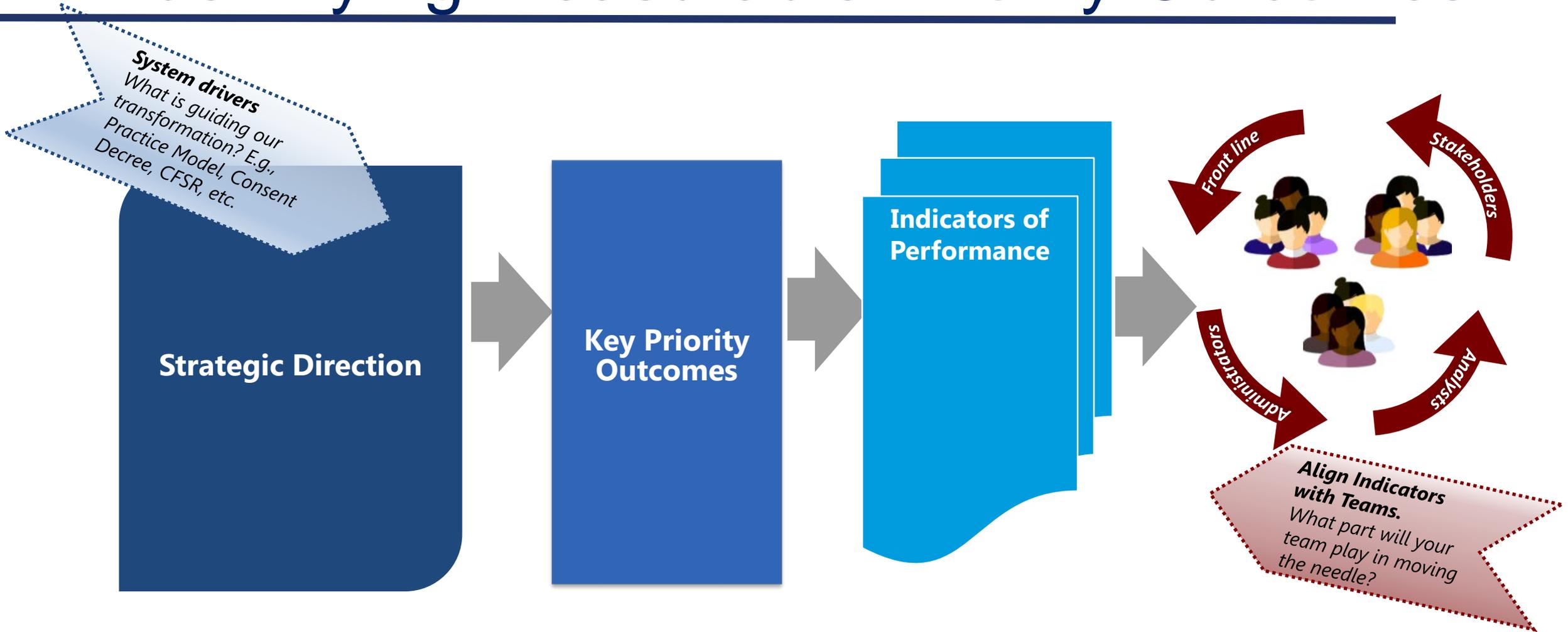
4. Engage in the cycle of improvement

**1. IDENTIFY AND FOCUS ON
MEASURABLE
PRIORITY OUTCOMES**

Strategic Priorities



Identifying Measurable Priority Outcomes



Ex. Aligning indicators with your teams

Develop a performance monitoring plan

Reporting Process: *"How will progress be communicated to key stakeholders?"*

Target Metrics: *"How much change are you aiming for?" Have baselines & interim benchmarks/targets been established?"*

Data Sources: *"What data will you use to monitor progress toward the desired changes?"*

Strategies & Initiatives: *"What activities will you engage in to impact/influence/support the desired changes?"*

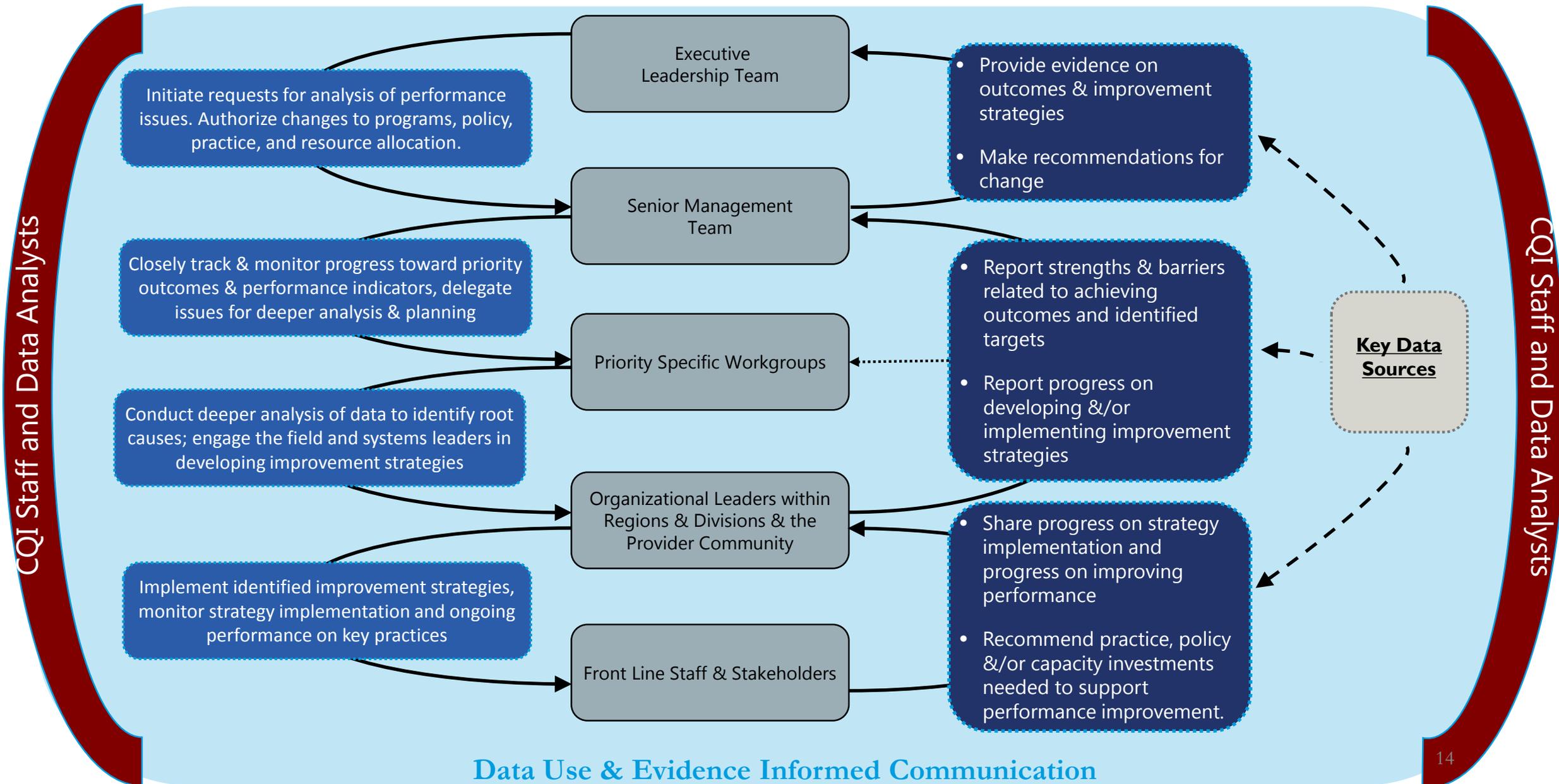
Performance Measures: *"How will you know change is occurring?"*

Priority Outcomes *"What overall changes do you want to make?"*

Strategic Priorities: *"What are the requirements and priorities informing the agency's strategic direction?"*

**2. ESTABLISH AN ORGANIZATION-WIDE AND
TRANSPARENT GOVERNANCE STRUCTURE
THAT EMBODIES CQI PROCESSES**

Flow of Information & Activities within the CQI Process



**3. BUILD CQI CAPACITY AND SKILLS TO
ENSURE CQI PROCESSES ARE OPERATING
AT ALL ORGANIZATIONAL LEVELS**

CQI Coaching and Skill Building Opportunities

- **Foundational skills and knowledge to understand:**
 - What is CQI; how and why CQI is relevant
 - How to interpret data and make meaning in context of strategic direction and outcomes to be achieved
 - Plan, Do, Study, Act
- **Targeted staff role and function relevance**

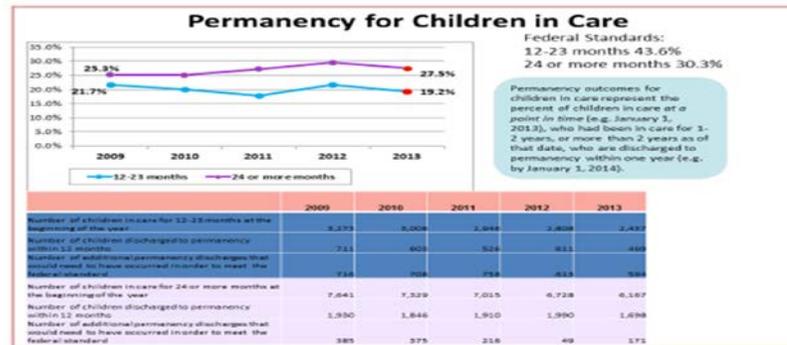
CQI Coaching and Skill Building Opportunities

- Coaching for leaders on reporting performance and CQI processes
 - How to tell the data story
 - How to listen to peers' or subordinates' reports and offer assistance
 - How to create a culture of curiosity over blame
- Fueling the CQI process with evidence to maintain momentum and inform decision-making toward outcome achievement

Embedding CQI



Surveys & focus groups



Dashboards



CQI meeting



Coaching & mentoring



Organizational communication

CQI at ALL Levels of the Organization

Example from a Private Agency

- Leadership and team development
 - Leading for alignment
 - Empowering teams
- Process management
 - Understanding the work as a collection of processes
 - Customer focus
- Line of sight
 - Handful of strategic measures
 - Key performance indicators (KPI)
 - Periodic and consistent reporting

Beyond Admiring the Problem

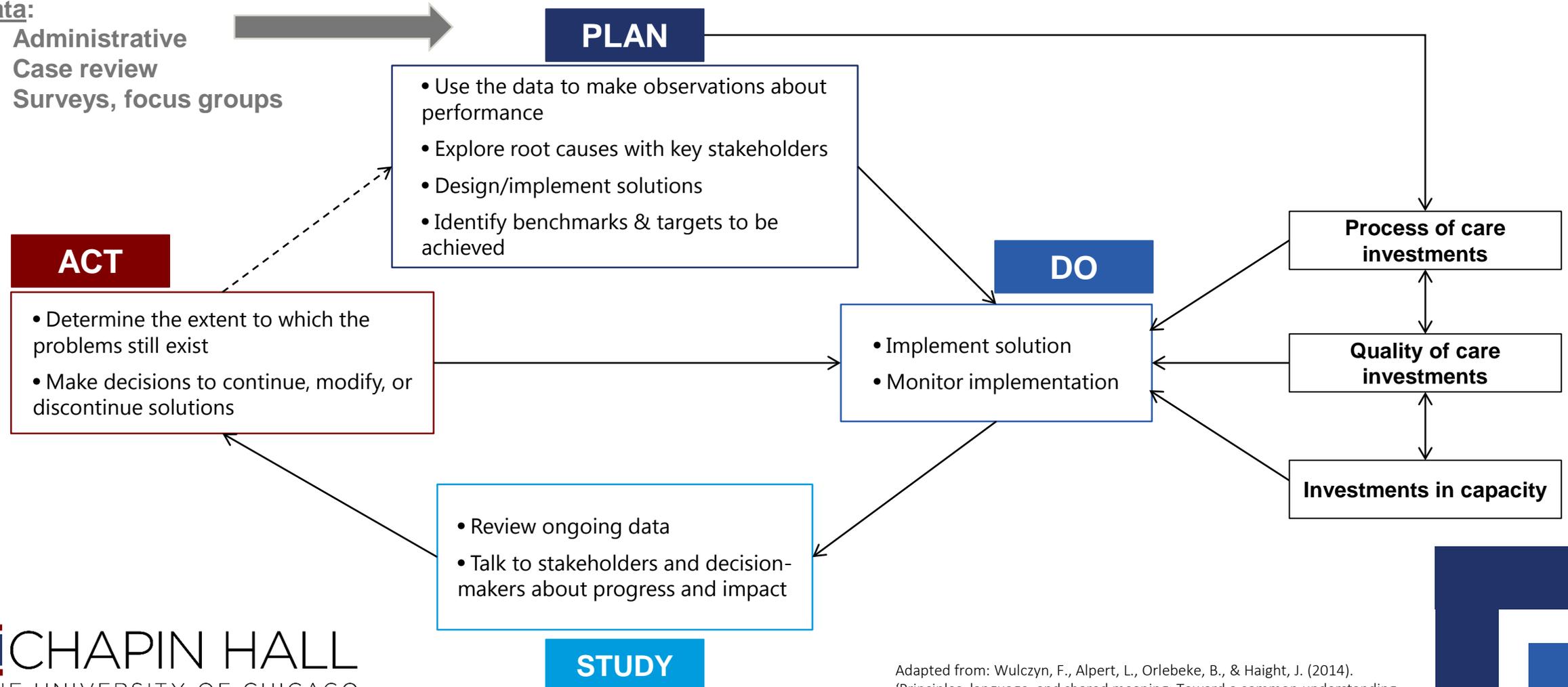
- For the first few dashboard review cycles, it is practice
- The goal is learning, stability, and predictability
- At some point, you have to DO something different based on the data, i.e. make improvements
- Structured and standardized improvement planning is needed

4. ENGAGE IN THE CYCLE OF IMPROVEMENT

Engage in the Cycle of Improvement

Data:

- Administrative
- Case review
- Surveys, focus groups



Improvement Planning and Decision-Making

- Plan for and monitor improvement when trends are not favorable or when progress does not meet benchmarks. Determine what triggers an improvement plan
- Use data/evidence in a CQI Process: Plan – Do – Study - Act
- Act on findings to build capacity, improve programs, and improve lives of children and families
- Emphasize problem sources & plan improvements by source and estimated improvement (metric)
- Determine format and layout of the improvement plan
- Support completion of improvement plan **ahead of time** and submit with data package
- Presentation of plan → **Summary and Highlights**
- **Inform Other Programs** of impact of improvement plan on them (if any)

Improvement Plan

Date Revised:		
Original Date	Department/Services/Process	Director/Process Owner
Improvement Plan Period:		to:
Problem Statement		
Scope:		
What is/are the Problem/Improvement indicator(s)?		
Performance Indicator (Revenue, Census, Cycle Time, Quality, etc.)		Data Source:
1.		
2.		
3.		
What is/are the Root Cause(s)?		
		Data Source:
1.		
2.		
3.		
Improvement Plan <input type="checkbox"/> On Plan <input type="checkbox"/> Late <input type="checkbox"/> Not able to complete		Due Date
1		
2		
3		

For additional data, see attachments:

- 1.
- 2.

Director/Process Owner's Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

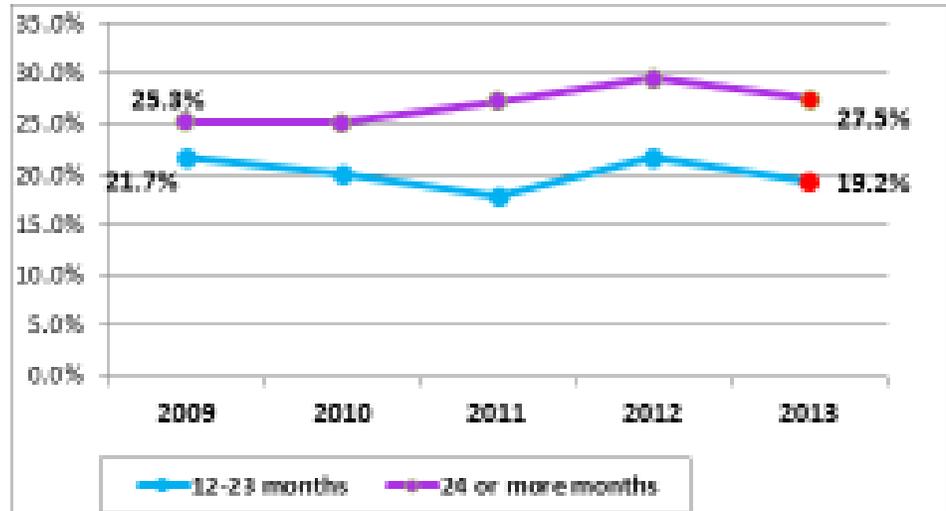
Making CQI Happen

Identifying Measurable Priority Outcomes

Strategic Direction	Key Priority Outcomes (What overall changes do you want to make?)	Performance Indicators (How will you know change is occurring?)	Strategic Initiatives (What activities will you engage in to impact/support the desired changes?)	Measurement Methods (What data will you use to monitor progress toward the desired changes?)	Metrics (How much change are you aiming for? Have baseline and targets been established?)	Reporting Process (How will progress be communicated to key stakeholders?)

Ex. Document your measurement plan

Permanency for Children in Care



Federal Standards:

12-23 months 43.6%

24 or more months 30.3%

Permanency outcomes for children in care represent the percent of children in care at a point in time (e.g. January 1, 2013), who had been in care for 1-2 years, or more than 2 years as of that date, who are discharged to permanency within one year (e.g. by January 1, 2014).

	2009	2010	2011	2012	2013
Number of children in care for 12-23 months at the beginning of the year	3,273	3,008	2,948	2,808	2,457
Number of children discharged to permanency within 12 months	711	608	526	611	469
Number of additional permanency discharges that would need to have occurred in order to meet the federal standard	716	708	738	613	594
Number of children in care for 24 or more months at the beginning of the year	7,841	7,529	7,015	6,738	6,187
Number of children discharged to permanency within 12 months	1,980	1,846	1,910	1,990	1,698
Number of additional permanency discharges that would need to have occurred in order to meet the federal standard	385	375	216	49	171

Telling the Story

Integrating Stop Lights and Trends

Performance Indicator	Description
	Meeting or exceeding performance goals and trend is degrading
	Meeting minimum acceptable performance and trend is unchanged
	Not meeting minimum level of acceptable performance and trend is improving

The CQI Meeting Design

- One management meeting is reserved for CQI
- Requires coaching on norms and expectations for participating and presenting
- Design pre-work, requirements and format for leader presentations
- Determine co-chairs (ideally not the Chief Executive)
- Determine standard agenda and plan for 10-15 min presentations per dashboard
- Formal plan for meeting set-up, presentation review and materials

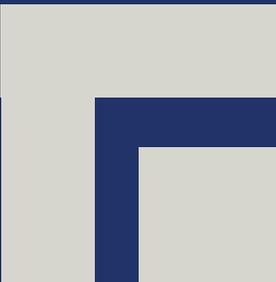
The Reasons We Do This Work!



QUESTIONS?

OR

**NOTE AN IDEA THAT RESONATED
WITH YOU THAT YOU WILL TAKE BACK
TO YOUR AGENCY FOR ADDITIONAL
DISCUSSION AND/OR ACTION.**



Presenter Contact Information



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Resources

- Hietschold, N., Reinhardt, R., and Gurtner, S. Measuring critical success factors of TQM implementation successfully – a systematic literature review. *International Journal of Production Research* (2014), Vol. 52, No. 21, 6254-6272.
- *The Healthcare Quality Book: Vision, Strategy and Tools* (3rd ed). Organizational quality infrastructure: How does an organization staff quality? Chapter 15.
- Boswell, W., Bingham, J., and Colvin, A. *Business Horizons* (2006), 49, 499-509. Aligning Employees through Line of Sight.
- National Implementation Research Network (NIRN): <http://nirn.fpg.unc.edu/learn-implementation> (Improvement cycles and Practice-Policy Communication Loops)
- Wulczyn, F., Alpert, L., Orlebeke, B., and Haight, J. *Principles, Language, and Shared Meaning: Toward a Common Understanding of CQI in Child Welfare*. Chapin Hall (July 2014).