Continuous Quality Improvement: A strategic lever for building a learning culture and monitoring organizational impact

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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.
Jurisdictions build new capacity to:

- Use data and evidence in decision-making
- Lead toward a strategic direction and priority outcomes
- Build structures that support strong governance and outcome attainment
- Implement strategies to meet specific needs of children and families
- Align policies and finances to gain traction and momentum
- Monitor progress and continually improve

Impact

- Jurisdictions become learning organizations ready to respond to Family First Prevention Services Act, CCWIS, new evidence and levers, etc.
Continuous Quality Improvement

We Partner with Jurisdictions 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
Participants will:

• Learn about 5 essential components of a data-driven, outcomes focused continuous quality improvement process.

• Learn how strong CQI capacity promotes a learning culture and enhances an organizations ability to measure and articulate the impact of programs and services.

• Gain an understanding of how to assess your agencies’ CQI capacity against the 5 essential CQI components.
What is Continuous Quality Improvement?

“The complete process of identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions.”

Continuous Quality Improvement Defined

The CQI approach identifies, describes, and analyzes strengths and problems and then **tests and revises** solutions.

CQI relies on an **organizational culture** that is proactive, supports continuous learning and is firmly grounded in the overall mission, vision, and values of the agency.

Quality CQI efforts depend upon the **active inclusion and participation** of staff at all levels of the agency, children, youth, families, and stakeholders throughout the process.

A high quality CQI approach incorporates the **rigorous use of evidence**

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"Using Continuous Quality Improvement to Improve Child Welfare Practice – A Framework for Implementation", Casey Family Programs and the National Child Welfare Resource Center for Organizational Improvement, May 2005

Children’s Bureau Information Memorandum – ACYF-IM-12-07, Continuous Quality Improvement in Title IV-B and IV-E Programs

**Wulczyn, F., Alpert, L., Orlebeke, B., & Haight, J. (2014). 'Principles, language, and shared meaning: Toward a common understanding of CQI in child welfare." Chapin Hall at the University of Chicago.**
“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.
Essential Components of a Data-Driven, Outcomes Focused CQI Process
Essential Components of a Data-Driven, Outcomes Focused CQI Process

- CQI Plan
- Data Collection
- Organizational Commitment to CQI
- Data Analysis and Reporting
- Improvement Planning and decision-making
1. Organizational Commitment to CQI

- **Priority Outcomes**
  - Governance Structure
    - Organizational culture that promotes investment in continuous analysis of current practice & program improvement
  - Personnel, time and resources devoted to CQI activities
  - CQI Skill Building

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Priority Outcomes

- Strategic Plan
- Legislation
- Regulations
- Consent Decree
- Accreditation
From Outcomes to Performance Indicators

Strategic Direction

Key Priority Outcomes

Indicators of Performance

System drivers
What is guiding our transformation? E.g.: Practice Model, Consent Decree, CFSP, etc.

Front line

Stakeholders

Support

Align Indicators with Teams.
What part will your team play in moving the needle?
Governance Structure

**Executive Leadership Team**
- Provide evidence on outcomes & improvement strategies
- Make recommendations for change

**Senior Management Team**
- Report strengths & barriers related to achieving outcomes and identified targets
- Report progress on developing &/or implementing improvement strategies

**Priority Specific Workgroups**
- Share progress on strategy implementation and progress on improving performance
- Recommend practice, policy &/or capacity investments needed to support performance improvement

**Key Data Sources**
- Initiate requests for analysis of performance issues. Authorize changes to programs, policy, practice, and resource allocation.
- Closely track & monitor progress toward priority outcomes & performance indicators, delegate issues for deeper analysis & planning.
- Conduct deeper analysis of data to identify root causes; engage the field and systems leaders in developing improvement strategies.
- Implement identified improvement strategies, monitor strategy implementation and ongoing performance on key practices.
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**Data Use & Evidence Informed Communication**
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
2. CQI Plan

Operationalizes the CQI system:

- Articulates the organizations approach to QI
- Describes the CQI systems' structure and activities
- Defines staff roles and assigns responsibility for implementing and coordinating the CQI program
- Identifies performance and outcome measures at every level
- Describes procedures for data collection and aggregation (including case record review processes), and data review and analysis
- Outlines processes for reporting findings and monitoring results
- Describes the performance improvement cycle

Adapted from the Council on Accreditation 8th Edition PQI standards
3. Data Collection

Deciding what to measure & how to measure it

- Mechanisms for collecting and storing both quantitative and qualitative data that is timely, accurate, and complete.

- Includes a case review process that provides the opportunity to take a comprehensive look at the casework practice and services provided to clients that influence observed outcomes.
# Data Collection Plan

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Indicator(s)</th>
<th>Strategy</th>
<th>Data</th>
<th>Metrics</th>
<th>When will data be collected?</th>
<th>Who will collect the data?</th>
<th>How will data be collected?</th>
<th>How will data collection be monitored?</th>
</tr>
</thead>
<tbody>
<tr>
<td>What overall changes do you want to make?</td>
<td>How will you know when you’ve achieved the outcome (lag measure)? What will you measure that tells you if you are likely to achieve the outcome (lead measure)?</td>
<td>What activities will you engage in to impact/influence the desired changes? Describe the strategies that will be implemented.</td>
<td>What data will you use to monitor progress toward the desired changes? List data sources.</td>
<td>What is the desired level of achievement? Identify targets for test of change.</td>
<td>Describe the timing and frequency of data collection.</td>
<td>Identify who will be responsible for collecting the data.</td>
<td>Describe the steps that will be taken to implement the data collection.</td>
<td>Identify processes to monitor the data collection for quality, consistency, and alignment with target(s).</td>
</tr>
</tbody>
</table>
4. Data Analysis and Reporting

- Convert data into evidence
- Understand variation
- Produce meaningful reports
Dashboards

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).

<table>
<thead>
<tr>
<th>Year</th>
<th>12-23 months</th>
<th>24 or more months</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>2,273</td>
<td></td>
</tr>
<tr>
<td>2010</td>
<td>2,909</td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td>3,800</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>2,006</td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>1,457</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of children in care for 12-23 months at the beginning of the year</th>
<th>Number of children discharged to permanency within 12 months</th>
<th>Number of additional permanency discharges that would need to have occurred in order to meet the federal standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>7,641</td>
<td>711</td>
<td>716</td>
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<tr>
<td>2010</td>
<td>7,529</td>
<td>603</td>
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<td>2011</td>
<td>7,015</td>
<td>526</td>
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<td>2012</td>
<td>6,728</td>
<td>611</td>
<td>504</td>
</tr>
<tr>
<td>2013</td>
<td>6,167</td>
<td>469</td>
<td>469</td>
</tr>
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</table>
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
5. Improvement Planning and Decision-Making

- Identify gaps in performance
- Understand underlying conditions
- Identify solutions and plan for implementation
- Implement the solution
- Test the solution and revise the approach
- Use evidence or information (qualitative or quantitative) at each step in the process to support an observation, claim, hypothesis, or decision
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
A structured improvement methodology: PDSA

**Plan**
- Use the data to make observations about performance
- Explore root causes with key stakeholders
- Design/implement solutions
- Identify benchmarks & targets to be achieved

**Do**
- Implement solution
- Monitor implementation

**Study**
- Review ongoing data
- Talk to stakeholders and decision-makers about progress and impact

**Act**
- Determine the extent to which the problems still exist
- Make decisions to continue, modify, or discontinue solutions

**Data:**
- Administrative
- Case review
- Surveys, focus groups

USING CQI TO PROMOTE A LEARNING CULTURE
The Influence of Culture

Organizational culture eats strategy for breakfast, lunch and dinner.

Culture

Strategy

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What makes a Learning Organization?

LEARNING ORGANIZATION

- Transferring knowledge
- Systematic problem solving
- Experimentation
- Learning from others
- Learning from past experience
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

Outcomes/Priorities → Performance Measures & Dashboards

Key Stakeholder Input at All Levels → County Self-Assessment & SIP

Waiver Plan & Evaluation → CFSR Case Review Process
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
Essential Components of CQI – Self-reflection & Pair Share Activity

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<th>Successful</th>
<th>Enhancement Opportunity</th>
<th>Why?</th>
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<tbody>
<tr>
<td>1. Organizational commitment to CQI</td>
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<tr>
<td>2. CQI Plan</td>
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<tr>
<td>3. Data collection</td>
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<tr>
<td>4. Data analysis &amp; reporting</td>
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<tr>
<td>5. Improvement planning &amp; decision-making</td>
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Q&A
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References & Resources


- “Continuous Quality Improvement in Title IV-B and IV-E Programs” Children’s Bureau Information Memorandum – ACYF-IM-12-07

