

Getting started with continuous quality improvement

Webinar for Project Leaders, Data Managers, and Evaluators

February 23, 2021

OFFICE OF FAMILY ASSISTANCE

An Office of the Administration for Children & Families



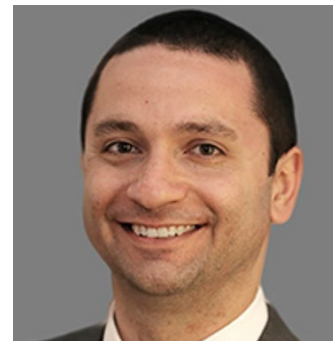
Today's speakers



Allon Kalisher
Mathematica



Annie Buonaspina
Mathematica



Scott Richman
Mathematica



Learning objectives for today's webinar

- / What continuous quality improvement (CQI) is and why it is important**
- / How to build a strong CQI foundation**
- / The CQI plan template**
- / What other supports are available to Healthy Marriage and Responsible Fatherhood (HMRF) grantees to carry out CQI**

Poll: Tell us about your team

/ Poll 1: What is your experience level with HMRF grants?

1. I am a new HMRF grant recipient
2. I am a returning HMRF grantee

Poll: Tell us about your team

/ Poll 2: How would you rate your CQI experience?

1. New to CQI
2. Some experience
3. Very experienced

A primer on CQI

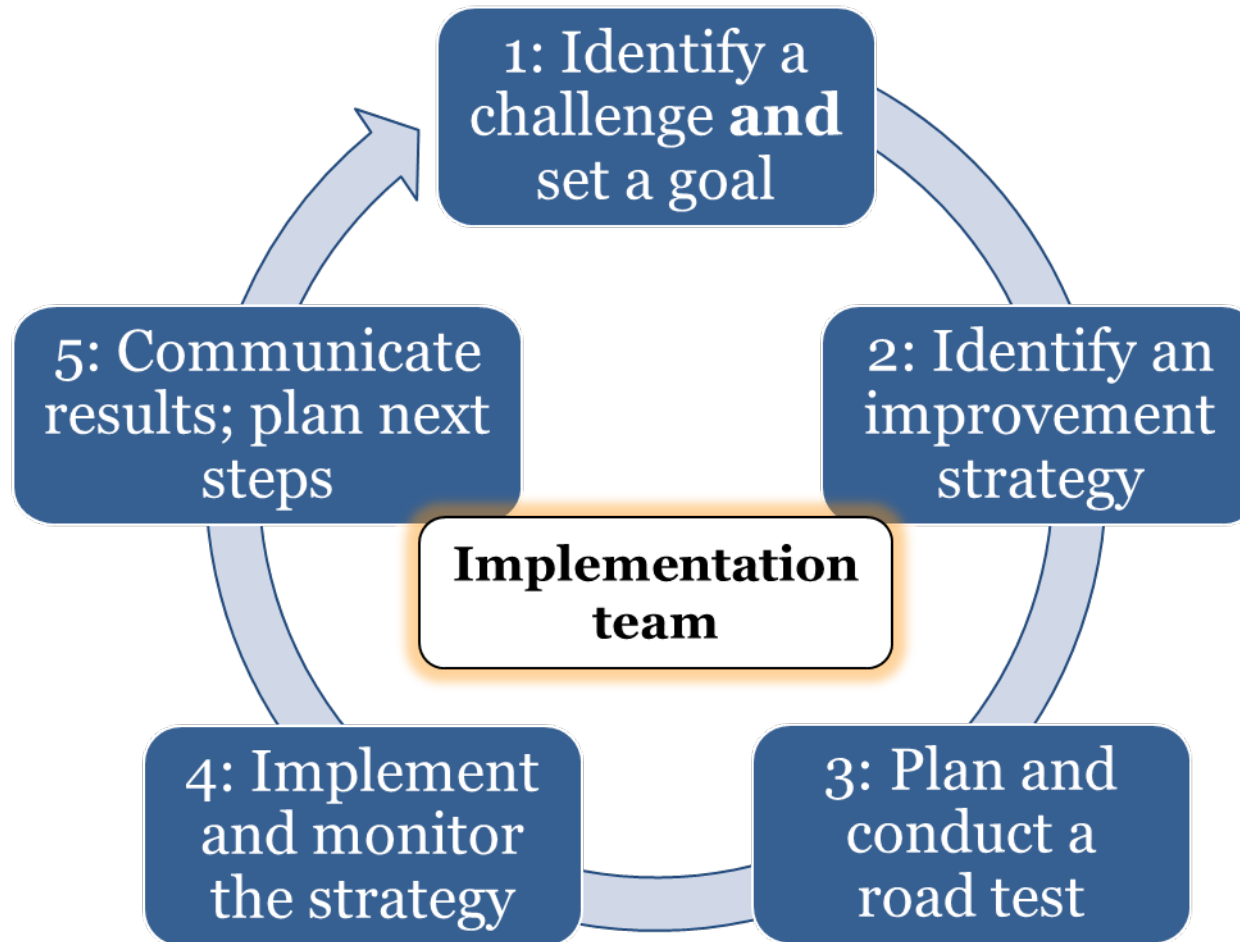
What is CQI?

/ CQI is identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions

/ Characteristics of CQI

- It is continuous
- Its goal is improvement
- It helps assess whether strategies are promising AND whether strategies were well implemented

Steps in the CQI cycle



Some of these steps are familiar!

- / **Many programs routinely modify their processes to make improvements**
- / **What's different about using a CQI approach?**
 - Systematic process for collecting and using information to learn about the implementation and promise of strategies and inform decision making
 - Emphasis on starting small before scaling up
- / **ACF is providing an HMRF CQI template and other resources to guide your efforts**

How is CQI different from program monitoring?

- / **Program monitoring documents what is happening and helps your team flag areas for improvement**
- / **CQI is a process for improving those areas once you identify them**



Data-driven

- Requires high quality data



Ongoing

- Involves regular meetings



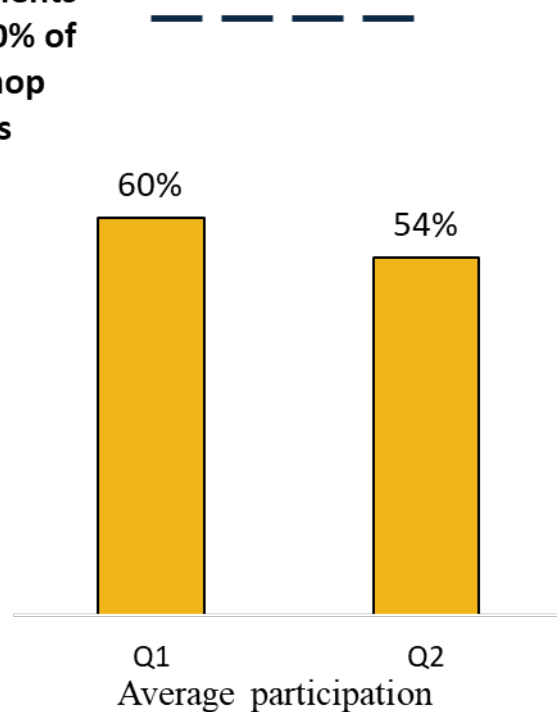
Iterative

- Uses what is learned to improve

A systematic process to address challenges

Program monitoring: *Identify the challenge*

Target: Clients
attend 90% of
workshop
hours



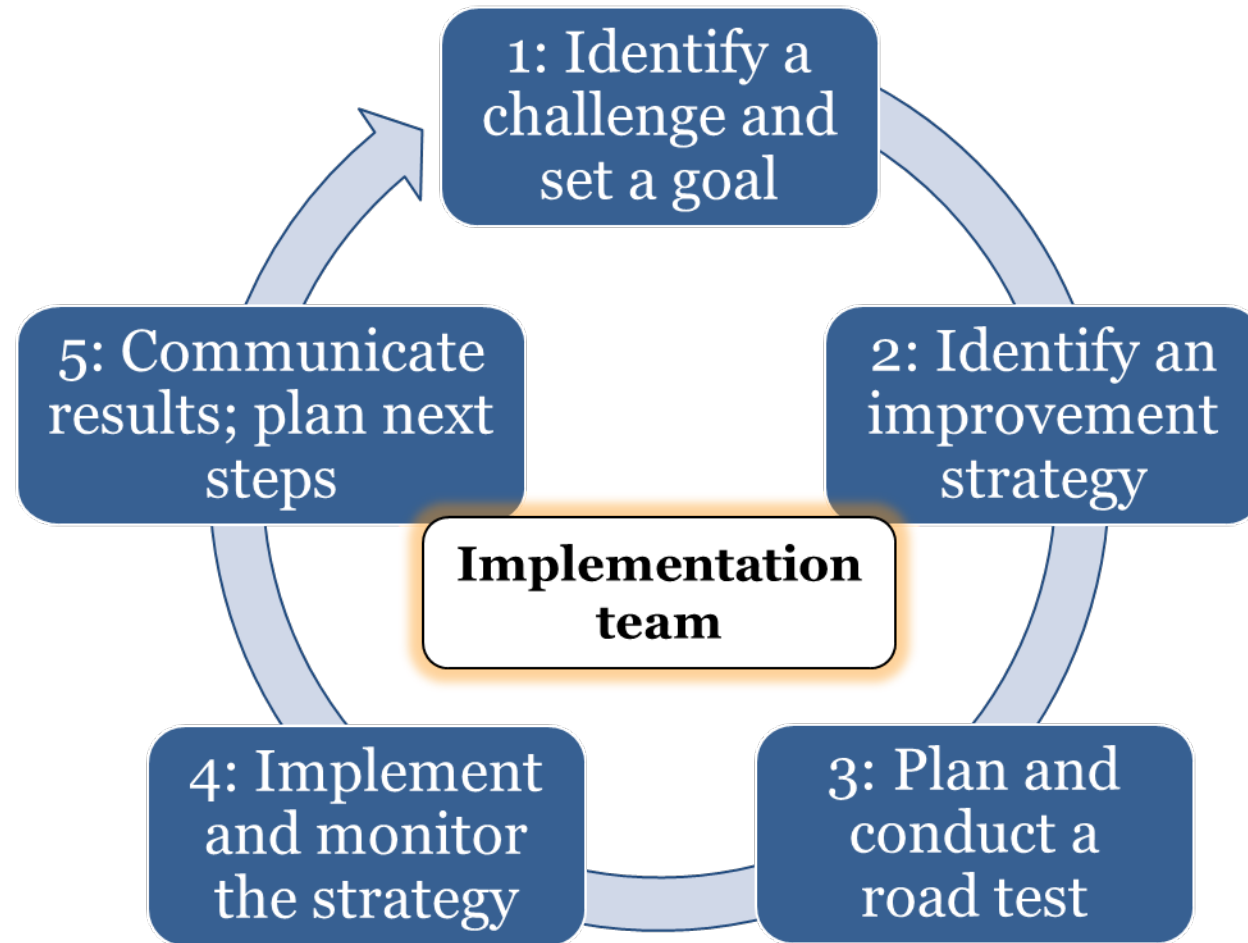
*How do we
improve?*



CQI: *Develop and test the solution*

- **Identified challenge: Low and declining workshop participation**
- **What strategy can we try to increase workshop participation?**
- **What data should we collect to determine whether our strategy is working?**
- **How well did the strategy work? What are our next steps?**

Steps in the CQI cycle



Step 1: Identify a challenge and set a goal

- / **Your CQI team should address one challenge at a time to maintain focus**
- / **An improvement goal should be your response to the question, what are we trying to accomplish?**
 - It should be specific, measurable, achievable, relevant and time-bound (SMART)



Poll: Find the SMART goal

/ Poll 3: Which goal below is SMART?

1. Our program will increase enrollment from 30 new enrollees per quarter to 40 new enrollees per quarter.
2. Our program will improve participant retention.
3. Our program will increase average participant attendance from 60% during fall cohort groups to 70% in spring cohort groups.
4. Our program will increase enrollment from 30 new enrollees per quarter to 200 new enrollees per quarter by the end of Q2.

SMART: Specific, measurable, achievable, relevant, time-bound

Poll: Find the SMART goal

/ Poll 3: Which goal below is SMART?

1. Our program will increase enrollment from 30 new enrollees per quarter to 40 new enrollees per quarter.

The goal is specific, but it doesn't state by when. By which quarter will the goal be achieved?

SMART

2. Our program will improve participant retention.

Doesn't specify how much or by when. **sMART**

3. Our program will increase average participant attendance from 60% during fall cohort groups to 70% in spring cohort groups.

SMART!

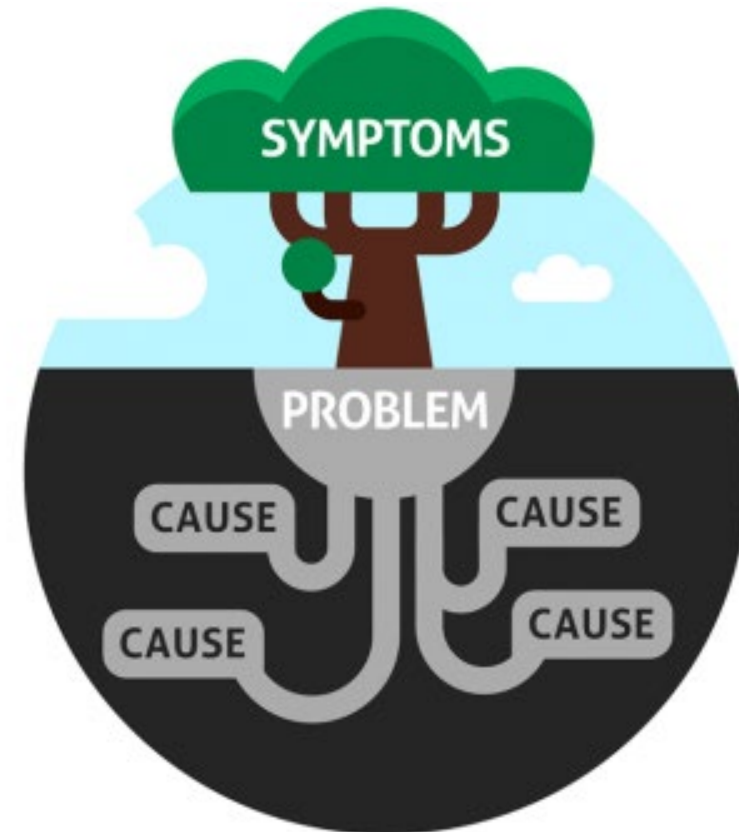
4. Our program will increase enrollment from 30 new enrollees per quarter to 200 new enrollees per quarter by the end of Q2.

Unless the program is undergoing a major change, this goal seems unrealistic. **SMaRT**

Step 1: Identify a challenge and set a goal

/ Consider how well you understand a challenge before developing solutions

- Talk to staff, participants and/or partners to develop a comprehensive understanding
- Break the challenge down into root causes



Chat: Understanding the challenge

- / Chat: When you identify a challenge, what is your process for learning more about it? How do you develop strategies to address the challenge?**

Techniques for learning about challenges



Step 2: Identify an improvement strategy

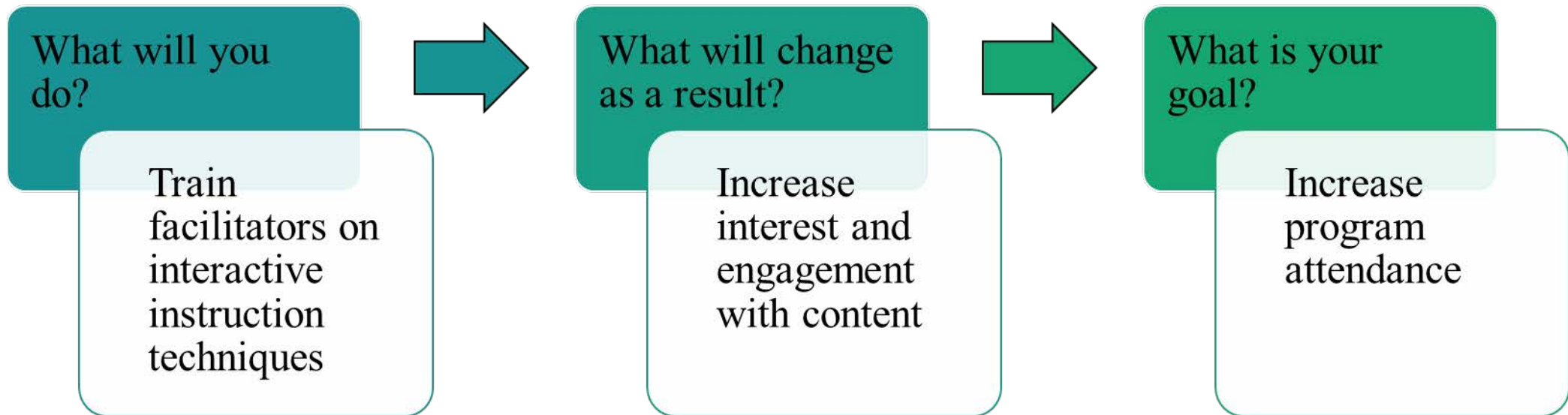
/ Where to look for strategy ideas?

- Your staff and program participants
- Your FPS
- HMRF technical assistance providers
- Other HMRF grantees
- Online resources with research-based strategies



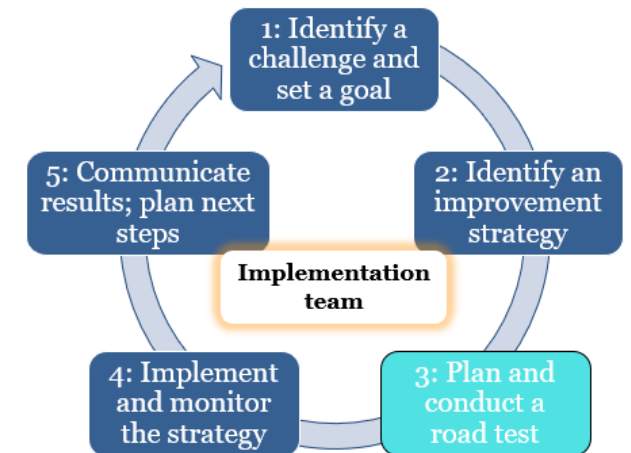
Step 2: Identify an improvement strategy

/ **Be clear on your rationale for why you believe the strategy will lead to improvement**



Step 3: Plan and conduct a road test

- / A road test is a process for prototyping a new strategy on a small scale, in a contained setting, with a goal to gather feedback to improve the design and implementation of the strategy
- / Typically involves a small number of staff and participants over a short period of time
- / An opportunity to “fail fast,” learn and improve



Step 3: Plan and conduct a road test

/ **Develop learning questions focused on implementation, early outcomes and broader context**

- Ask: How much time was needed to implement the strategy?
- Ask: Was the strategy implemented consistently?
- Ask: How did clients respond to the strategy?
- Don't ask: Was the strategy effective in improving retention? (*road tests don't produce causal evidence*)

Step 3: Plan and conduct a road test

/ Determine what data you need to respond to your learning questions and how you will collect it

- When will you collect the data?
- Who is responsible?
- How will you analyze the data?

/ CHAT: What data would you collect to answer the learning question, “How did clients respond to the strategy?”

Step 3: Plan and conduct a road test

/ At the end of each test, examine the data collected and reflect on:

- What worked consistently well or not well?
- What, if anything, was surprising?
- How might your team address aspects that didn't work well?

/ Road tests may involve multiple feedback periods

- You may identify the need for refinements and then test your revised strategy
- You may also collect early outcome data (e.g., is your strategy changing attitudes, behaviors, or knowledge in the way that you predicted)

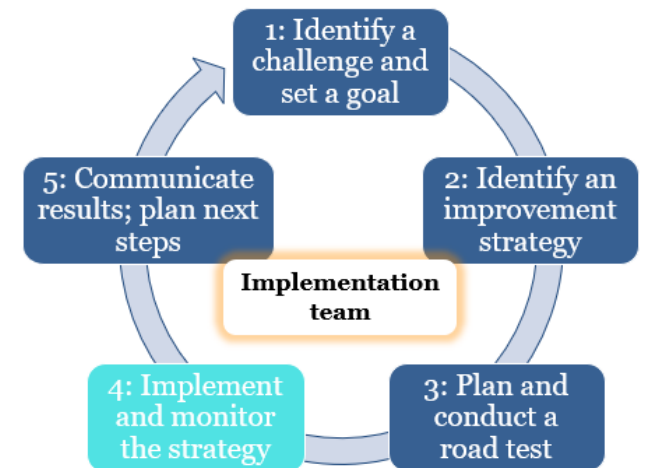
Poll: Road testing

/ Poll 4: Do you road test or pilot strategies before committing to them?

1. No, we've never conducted a pilot
2. Yes, if we're not sure about a strategy, we'll pilot it first
3. Yes, we always pilot new strategies on a small scale first
4. Something else (*tell us in the chat!*)

Step 4: Implement and monitor the strategy

- / To understand the promise of your strategy, monitor data related to your improvement goal on a small scale
- / Positive trends related to your improvement goal demonstrate promise, not causation

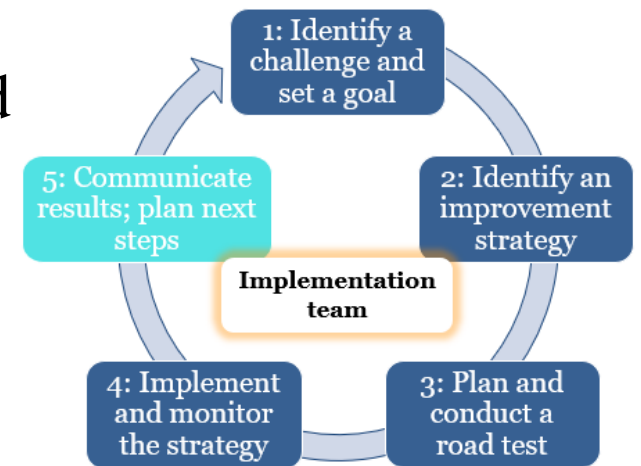


Step 5: Communicate results; plan next steps

/ Develop a plan for rolling out the new practice to staff

- Who can help build buy-in for a new process?
- What resources are needed to scale the strategy program-wide?
- How can you help staff avoid slipping back into the old way of doing things?

/ Continue to monitor your SMART improvement goal



Building a strong foundation

Why start now?

/ The first grant year is an opportunity to build a strong foundation for CQI

/ Early steps include:

- Begin to foster a CQI culture
- Plan how to assess program implementation and meet performance targets
- Form your CQI implementation team
- Develop your CQI plan

Early steps: Foster a CQI culture

/ **An organizational culture for CQI includes:**

- Curiosity and desire for continuous learning and improvement
- Using data to drive decision-making
- Collaboration

/ **A CQI culture can take time to develop**

- Early attention and progress can create momentum
- Easier to incorporate CQI in the early stages of your program than later on

Early steps: Foster a CQI culture

/ Ideas for building a strong learning culture include:

- Secure buy-in from organizational leadership
- Build data expectations into job descriptions
- Make learning and improvement a focus of your onboarding processes
- Ensure facilitators and other frontline staff know that their insights contribute to strong CQI
- Use examples of how data can be used for learning, not just compliance

Early steps: Prepare to assess program implementation and targets

- / **Grantees are currently planning program activities and setting targets for how activities are expected to unfold**
- / **Helps identify areas in need of improvement and where to focus CQI efforts**
- / **Consider how to assess whether expectations are met**
 - Familiarize yourself with nFORM data elements and reporting features
 - Determine whether additional information will be needed
 - Develop procedures and protocols for data collection, entry, and reporting

Early steps: Form your CQI team

- / A CQI implementation team guides the work, including identifying key challenges, developing and testing solutions, and communicating results**
- / Be intentional about team expectations from the start**
 - Participation needs, such as time commitments and meeting frequency
 - Communication/decision making processes
 - Designate roles

Assemble your team

/ **Who could you include on your CQI implementation team?**

- Leadership
- Data manager
- Evaluation staff
- Frontline staff
- Partners
- Participants
- Other community stakeholders

/ **Consider the perspective each person will bring to the team**

What types of community stakeholders could you include on your CQI implementation team?

 Mentimeter



Go to www.menti.com and use the code 46 23 87 9

What types of community stakeholders could you include on your CQI implementation team?



Early steps: Consider your CQI plan

- / The Office of Family Assistance (OFA) requires grantees to develop, implement, and regularly update a CQI plan**
- / Assess your capacity to carry out CQI and identify resources to support your team**
 - Staffing
 - Processes and routines
 - Logistics
- / An HMRF CQI planning template to help grantees develop CQI plans is forthcoming**

A strong plan will help grantees:

- / Communicate CQI team roles and responsibilities**
- / Identify key outcomes and set benchmarks for monitoring**
- / Describe your CQI approach**
- / Describe your data collection plan**
- / Describe your communication strategy**

HMRF CQI Template

/ Your CQI template can help you plan and stay on track...



CONTINUOUS QUALITY IMPROVEMENT PLAN TEMPLATE



Instructions

Please use this template to describe your continuous quality improvement (CQI) plan for OFA. You can either (1) add your text within each section and submit this document as your written plan for CQI (note that each table is fillable), or (2) use these headers and describe your CQI plan in another document. This document is meant to be updated and changed over time as you work on CQI.

A. Grantee and CQI plan information

Grantee name	
Type of grant (HM, RF-New Pathways, RF-ReFORM)	
Date of CQI plan	
Changes to this version of the CQI plan	

B. Summary of CQI work to date (if any)

Please summarize past CQI issues that your team has worked on and the current status of those issues in Table B1. If you have not engaged in any CQI, leave this blank. Strategies for improvement should be monitored over time to check if they are still working as intended or need to be revisited.

HMRF CQI Template

/ Guidance for developing your implementation team



C. Your implementation team

C1. Who is on your implementation team?

Although all staff might be involved in CQI efforts, the implementation team oversees and manages the process. Complete the table below listing implementation team members and their CQI responsibilities. The table includes suggested roles and responsibilities, but please change as needed to reflect your implementation team. Add rows as needed. Once you have filled out the table, this is a great opportunity to reflect on who is on your team, whether you are missing important perspectives, whether responsibilities are well distributed amongst team members, and other factors.

What is an implementation team?

Implementation teams are responsible for actively supporting implementation of the grantee's HMRF program. An implementation team should include a core group of staff—at least three-to-five people—who have adequate time dedicated to this role. Team members should have detailed knowledge of the program. An implementation team is not an advisory group, but rather a team that is actively and regularly involved in program implementation.

What are its functions?

The team is comprised of “doers” and “barrier busters” to program implementation challenges. Typically, they:

- Meet regularly (and frequently) to discuss staff and organizational needs of HMRF programs;
- Identify challenges to program implementation using data;
- Develop strategies to address the identified barriers/challenges to program implementation;
- Put into practice a system for CQI;
- Engage the community or communities in support of program implementation.

Table C1. Members of your implementation team¹

Staff name and title	Organization	CQI responsibilities
		Team leader: Organizes and oversees the CQI process
		CQI plan lead: Documents and updates CQI plan (this template) with input from implementation team and others
		Key program staff: Identifies targets, develops improvement strategies, and monitors their implementation and testing

HMRF CQI Template

/ The template presents a series of questions to help you plan your road test

- Examples of questions include:
 - What is the strategy being tested?
 - What are your learning questions for the road test?
 - When and how will you analyze the results?
 - When will you implement adjustments to the strategy?

D3. Conducting a road test: Assessing how well a strategy fits with the program

A road test allows you to examine how well a strategy fits in your program. In a road test, small numbers of staff and clients participate over a short period (about four-to-six weeks) and provide feedback about their experiences using the new approach or strategy. Afterward, the team analyzes the data and feedback to develop concrete recommendations for refining or revising the strategy. Road tests often include two or more of these feedback periods.²

² The road test is based on the Learn, Innovate, and Improve (LI²) approach. For more information on LI², see www.mathematica-mpr.com/our-publications-and-findings/publications/learn-innovate-improve-li2-enhancing-programs-and-improving-lives.

Why take the extra steps for a road test?

Change can be difficult and some changes have unintended results. For these reasons, it is important to test the proposed strategy on a small scale and gather feedback on it. This gives the team practical information, such as how staff and clients responded to the change, and whether and how you could improve the strategy.

HMRF CQI Template

- / Implement strategy
- / Monitor and analyze improvement over time
- / Interpret data and communicate results
- / Plan next steps

D5. Monitoring improvement over time

In addition to understanding whether a strategy is feasible, you must assess whether it seems to be improving the underlying issue and helping your program achieve its goals.

After road testing shows the strategy goals with a small number of staff

Please note that this does not all improvement. Other factors might be useful for determining whether the strategy is working.

For your SMART goal (Section D1) monitoring progress toward the goal

HMRF CONTINUOUS QUALITY IMPROVEMENT PLAN

D6. Analyzing improvement over time: Did we make progress toward our SMART goal?

After you have collected data as planned, the next step is analyzing the data. Answer the questions below.

a. What data source did your team use to assess improvement survey (either from nEORM or developed by the program), please list the questions used in the analysis. Generally, the data source was the source listed in Table 3 above, but if a change was needed, describe the change.

b. When did your team collect data? For example, you might have collected data for enrollment for three months: January 2019 to March 2019.

Table D5. Monitoring progress toward SMART goals

SMART goal (from Section D1)	Strategy for improvement (from Table D2)	Data source(s) to assess progress toward goal	Frequency of monitoring	Staff responsibilities
Example: Increase attendance	Call each family the day before the	nEORM service data	Monthly for three months before testing	- Facilitators enter workshop participation data in nEORM - Site administrator will

D7. Interpreting Data

Discuss your data with your Implementation Team, and, as a team, decide on key summary findings. Begin each statement with the phrase: *We learned that...*

We learned that _____
 We learned that _____
 We learned that _____



D8. Communication

Please describe how you will communicate the CQI efforts to staff. Such efforts include the general use of CQI, soliciting feedback on issues to address, informing staff of changes being tested, and results.



D9. Action(s)

With your Implementation Team, decide on next steps based on what you learned. If the strategy is a good fit and has shown intended improvements, you may decide to extend this strategy to other parts of your program, or to the whole program: this is sometimes called "scale-up." But programs should still continue assessing improvement after scale-up to determine if the strategy is working as intended.

Once a road test leads you to decide to implement the strategy, either with a

What CQI supports are available?

What CQI TTA supports are available?

/ **Universal CQI TTA**

- Office hours
- Webinars
- Tip sheets and other resources

/ **Individual CQI TTA**

- Email support
- In-depth, intensive TTA

Universal TTA

/ **HMRF CQI plan template**

- Guide to CQI planning

/ **Monthly office hours**

- 1-hour interactive sessions on specific CQI topics

/ **Webinars**

- 60- to 90-minute webinars on the components of CQI

/ **Tip sheets and resources**

- A range of informational resources to support each step in the CQI process; access on the [HMRF resource site](#)

CQI TTA approach

- / Office hours, webinars, and tip sheet topics will be driven by grantee needs**
- / The goal is to support individual teams to build CQI capacity but also foster a learning community**
- / Resources and sessions will cover the following:**
 - Foundational topics (e.g., forming your implementation team)
 - Technical skills (e.g., conducting root cause analysis; planning a road test)
 - Skills to support CQI processes (e.g., meeting facilitation; decision-making models)

Upcoming office hours

/ **April & May – Building a strong foundation for CQI**

- Forming implementation teams
- Developing SMART goals
- Walk through early parts of the CQI template

Upcoming office hours

/ **June 2021 – December 2021:**

- Learning about and breaking down challenges
- Identifying improvement strategies
- Conducting a road test and analyzing the results
- Implementing strategies and monitoring impact
- Using nFORM to support CQI
- Interpreting data and planning next steps
- Grantee drop-in to ask any questions related to their current CQI plans/efforts

HMRF Grant Resources

/ Looking for resources to get started?

- [HMRF Grant Resources](#) contains tips sheets and informational resources related to CQI

/ Submit questions to hmrfcqi@mathematica-mpr.com

Questions?