FY 2017 Maternal, Infant, and Early Childhood Home Visiting Program Continuous Quality Improvement Plan Update

CQI Resource August 2017



Additional Resources to Guide CQI Plan Updates

<u>DOHVE 2 Creating a CQI Plan</u> FY 2016 Webinar

DOHVE 2 CQI Brief:
Developing FY 2016 CQI Plans

HRSA Quality Improvement Toolbox

FY16 Funding Opportunity
Announcement HRSA-16-172

FY17 Work Plan and Budget Update

Introduction

Maternal, Infant, and Early Childhood Home Visiting (MIECHV) awardees are required to report annually on their quality improvement activities based on the implementation of their continuous quality improvement (CQI) plans per the fiscal year (FY) 2016 Funding Opportunity Announcement (FOA) and the FY 2017 Work Plan and Budget Update (WPBU). This annual update helps awardees assess their CQI efforts, document progress, and use lessons learned from implementation to inform CQI activities moving forward. Health Resources and Services Administration (HRSA) Project Officers (POs) will review and approve CQI plans each year to ensure the plans meet federal expectations.

This resource is a guide to assist awardees in (1) reporting on their CQI activities from FY 2016 and (2) updating their CQI activities for FY 2017 per the FOA requirements. Use of this resource is optional.

For additional technical assistance related to CQI plan reporting and updates, contact your HRSA PO and DOHVE Liaison.

Instructions

You may complete your FY 2017 CQI plan directly in the pages that follow and then send to your HRSA PO for review. However you are not required to use the attached resource to submit your plan. Once approved, the final plan will be uploaded to the Electronic Handbook through a Request for Information sent by your HRSA PO. Part 1 of this resource discusses updates and key lessons learned from implementation of your FY 2016 CQI plan. Part 2 of this resource discusses changes to your CQI plan for implementation in FY 2017. If you have any questions about the resource or the FY 2017 CQI plan, please contact your HRSA PO or DOHVE Liaison.

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State/Territory Awardee:

Part 1. CQI Activities from FY 2016

Awardees should discuss key CQI activities, accomplishments, challenges, and lessons learned from implementing their CQI project in FY 2016. To complete this section of the update, consider the following questions:

- 1. In FY 2016, what was your CQI Topic(s)?
- 2. In FY 2016, what was your SMART Aim(s)?
- 3. Did you meet your SMART Aim(s)? Yes or No
 - a. If no, explain why.
- 4. What progress can you report from the CQI project? Examples of progress that you might describe include:
 - a. Organizational systems and supports for CQI e.g., expanding staff time to support local teams, providing ongoing training and coaching in advanced CQI methods, providing opportunities for peer-to-peer learning, etc.
 - b. Engagement of families in CQI efforts e.g., family focus groups or surveys to capture feedback, families as members of local CQI teams, etc.
 - c. Successful changes or interventions that were tested using CQI methods, such as Plan-Do-Study-Act cycles e.g., a policy to support maternal depression screening, home visitor training modules for infant feeding and lactation, etc.
 - d. *Methods and tools to support CQI work* e.g., process mapping to assist teams with prioritizing areas for improvement, Plan-Do-Study-Act template to help teams formulate efficient and well-planned tests of change, etc.
 - e. *Measurement and data collection processes* e.g., development of short-term measures to assist teams with tracking 90-day goals, tracking forms to capture data on improvement, local data systems to collect variables in an appropriately frequent manner, etc.
 - f. *Monitoring and assessing progress* e.g., regular reviews of data reports to monitor change by local teams, using lessons learned from CQI work to guide decision-making, etc.
- 5. Did you encounter challenges in the implementation of your CQI project (e.g., provision of organizational systems and support, engagement of families in CQI work, testing changes or interventions, using methods and tools, developing and implementing measurement and data collection, monitoring and assessing progress, etc.)?

 Yes or No
 - a. If yes, please explain.

- 6. Did you engage support from technical assistance providers (e.g., specialized coaching, training or sharing of resources) for the purposes of improving practices and methods related to CQI? Yes or No
 - a. If yes, describe the format (e.g., coaching, training, resource document) and successful outcome of TA provided.
 - b. If no, explain why.
- 7. To what extent, if any, did you spread the lessons learned from your CQI project in FY 2016? Please share any resources electronically that were used to disseminate results.
- 8. What lessons learned will you apply to your FY 2017 CQI plans?

Part 2. CQI Plan Updates for FY 2017

Organizational System and Support

Awardee or Recipient Level

- 1. Will modifications to state/territory level personnel assigned to CQI teams be made for FY 2017? Yes or No
 - a. If yes, you can use the optional table format below or provide a discussion of specific changes in personnel. If no move on to question 2.

Staff Roles Assigned to CQI teams	Experience with CQI (years in role and specific skills)	Professional Development Needed to be Successful in This Role (e.g., training, written resources)	LIAs/CQI Supported (List)
Ex. CQI Lead	5 years providing CQI training and coaching to local MIECHV teams, Trained in IHI framework, LEAN and Six Sigma.	Tools and resources for developing and analyzing run charts	List team names

Tip: If personnel are not already identified, share your plan for securing personnel to adequately support local CQI work.

 In FY 2017, will you make modifications to the method and/or frequency of CQI trainings you provide to local teams? This may include training to strengthen CQI competencies or to understand and interpret data collected for CQI projects.

Yes or No

a. If yes, you can use the optional table format below or provide a detailed discussion to describe modifications. If no move on to question 3.

	Method	Frequency	Additional Comments	Indicator(s) of Effectiveness
(1) Describe point person and training methods planned to strengthen CQI competencies for local teams.	Example: Role of point person: Methods: Annual CQI conference Virtual topic calls	Example: Monthly calls 1:1 check-in with each team monthly Group coaching and 1:1 per requests within 72 hours	Add specific information on the type of training that will be done	How will you know that teaching/ coaching is effective? Add examples to explain methods used for collecting

	1:1 team coaching Group coaching			data on efficacy and satisfaction
(2) Describe how you will encourage learning based on data into training and coaching.	Example: Collaborative run charts and individual team run charts with LIA-identified data shared in monthly topic calls	Example: Monthly	Example: Will encourage peer- to-peer sharing of PDSA testing and data results	Add examples to explain methods used for collecting data on efficacy and satisfaction

- Will you make changes in the level of financial support (e.g. allocation of resources and staff time at the state/territory level and allocation of staff time) for CQI in FY 2017?
 Yes or No
 - a. If yes, please describe modifications. If no move on to item 4.
- 4. Describe how you will engage with technical assistance providers for the purposes of improving agency level practices and methods in FY 2017.

Local Level

Consider the items below to address the following FY 2016 FOA and FY 2017 WPBU requirements:

- 5. Describe the extent to which home visiting clients will be involved in CQI teams.
- 6. Describe the extent to which local implementing agency (LIA) management will support direct involvement in CQI activities and allocation of staff time (for those LIAs participating in CQI efforts).
- 7. Have modifications been made to financial support for CQI, including allocation of resources and staff time at the LIA level? Yes or No
 - a. If yes, you can use the optional table format below or provide a detailed discussion to describe modifications. If no, move to question 8.

LIA Name	Staff Role Assigned to Manage CQI Teams and time allocated to CQI (e.g. 10%)

CQI Priority(s)

8. Will topic(s) of focus for each LIA participating in CQI change from your FY16 CQI plan? Yes or No

a. If yes, you can use the optional table format below or provide a discussion to describe the changes. If no, please restate a description of topics for each LIA.

LIA Participating in CQI (List name)	Topics selected for CQI	Why were these topic(s) chosen? (For example, was the need identified from performance data, self-assessments, or other methods? Did consumers provide input on areas for strengthening services?)	How does the topic(s) align with State/Territory priorities?

Goals and Objectives

- 9. Will LIAs modify current SMART Aim(s) for the CQI projects underway for FY 2017? Yes or No
 - a. If yes, you can use the optional table format on page 7 or discuss modifications to SMART Aims for each LIA. If no, move to item 10.

Methods and Tools

- 10. Identify the CQI tools below that will be utilized by LIA teams in FY 2017 in the optional table format on page 7 or in a discussion in the text.
 - Charter that outlines the scope of the CQI project
 - Driver diagram that displays the theory of change underlying the improvement efforts
 - Fishbone diagrams
 - Root-cause analysis
 - Process mapping
 - Key driver diagrams
 - Other, please describe:
- 11. Identify the methods below that will be utilized by LIA teams in FY 2017 in the optional table format on page 7 or in a discussion in the text .
 - Plan-Do-Study-Act
 - Six Sigma
 - FADE
 - Model for Improvement
 - Other, please describe:

Measurement and Data Collection

- 12. Will you make changes in CQI data systems at the local level, including plans for how CQI data will be collected in an appropriately frequent manner (e.g., monthly) in FY 2017?

 Yes or No
 - a. If yes, please describe modifications. If no, move to item 13.
- 13. Will you make changes in the mechanisms available to CQI teams and home visitors at the local level to track progress, determine if change ideas tested result in improvement, identify the need for course corrections, and use data to drive decision making in FY 2017?
 Yes or No
 - a. If yes, please describe modifications. If no, move to item 14.

Modified SMART Aim	Method(s) Tool(s)	Data Collection	Data Review and Interpretation
Example: By December 2016, there will be a 20 percent increase in families asked at every home visit about their child's development, behavior, and learning.	Example: Teams will be supported to develop a key driver diagram delineating their theory of change and a subsequent change package. Teams will use PDSA cycles to test changes.	How will local teams collect, store, and use the data required for each measure? What form will the data take? How will it be cleaned and analyzed?	Examples: LIAs report measures monthly using a formulated Excel template via an online portal. Collaborative data and small multiples are reviewed monthly through collaborative team calls. Strengths, barriers, and need for mid-course correction are discussed. Individual or group coaching is set up with teams that have unreliable or stagnant data or regression in their data.

Tip: Remember to include SMART Aims that indicate "how much, by when, and for whom."

Communication

14. Describe plans to work with LIAs to identify lessons learned and disseminate successful CQI activities beyond the original LIAs.