

Continuous Quality Improvement (CQI)

For Maryland Maternal, Infant, and Early Child Home Visiting Programs

Webinar One:
Recap, Tools, and First Assignment



Welcome!



Mary LaCasse, Chief of Home Visiting

Jennifer Bistrack, Health Policy Analyst

Erin Wagner, Program Coordinator

Matt Snead, Data/Fiscal Coordinator

Maggie Porter, Graduate Research
Assistant

Housekeeping

- Please feel free to ask questions
- Participate via speaker or chatbox
- Webinar is being recorded
- Powerpoint will be available after webinar

Meet Our Mascot



**Maryland MIECHV
“Koala-T”**

**Continuous Quality
Improvement Project**

Objectives for Today's Webinar:

- ✓ Review MIECHV CQI Requirement
- ✓ Answer questions
- ✓ Learn about the Plan stage of PDSA
- ✓ Learn how to create a process map and fishbone diagram

So...what's CQI again?

- A continuous and ongoing effort to achieve measureable improvements in quality
 - To improve efficiency, effectiveness, performance, accountability, outcomes
 - Using a model supported by strategies, methods and tools
- A repeatable set of steps that work best if they become a routine part of your business operations
- CQI is doable!

Maryland MIECHV Definitions

Site CQI Team: Specific to each site, ideally 5-7 members, may include Program Manager, Home Visitors, Data entry, etc. Will meet monthly

State CQI Team: Composed of DHMH staff, JHU evaluation rep, UMBC Certificate Program rep, and Family league data team

Statewide Learning Collaborative: State CQI Team + All Site CQI Teams, will participate in quarterly webinars to learn and discuss CQI

How does this apply to MIECHV sites?

- The Federal MIECHV program requires all grantees to develop and implement formal CQI plans
- Beginning July 1, 2016, sites will be required to engage in **one statewide CQI project per fiscal year**
- Site CQI teams must meet **once per month**
- Site CQI teams are required to attend **quarterly** statewide learning collaborative webinars and complete **one PDSA cycle per quarter**
- PDSA** forms will be submitted with quarterly reports

Review of Progress to Date

In preparation for this Webinar, all MIECHV sites were asked to:

- View modules one, two, and three of the Ohio State CQI training
- Review the CQI PowerPoint presentation from the November 4 stakeholder meeting
- Form CQI teams at your sites and begin a Team Charter

Questions?

Comments?

Aim Statement

- Improvement requires setting aims.
- The aim should be SMART:
 - **Specific**
 - **Measurable**
 - **Achievable**
 - **Realistic**
 - **Time-bound**
- It should also define the specific population of clients or other system that will be affected.

Example Aim Statement: **Getting To Work on Time**



As-Is Statement: I usually arrive to work around 8:45 am when I am scheduled at 8:30

Desired Statement: I would like to arrive to work by 8:25 am every day

Aim Statement: My goal is to improve my arrival time by 20 minutes, arriving 10 minutes early to work at least 3 out of 5 days by 3/1/16.

Aim Statement Example

To improve the enrollment process by decreasing the amount of time between when a family is referred and when they enroll

How can we
make this
SMART?

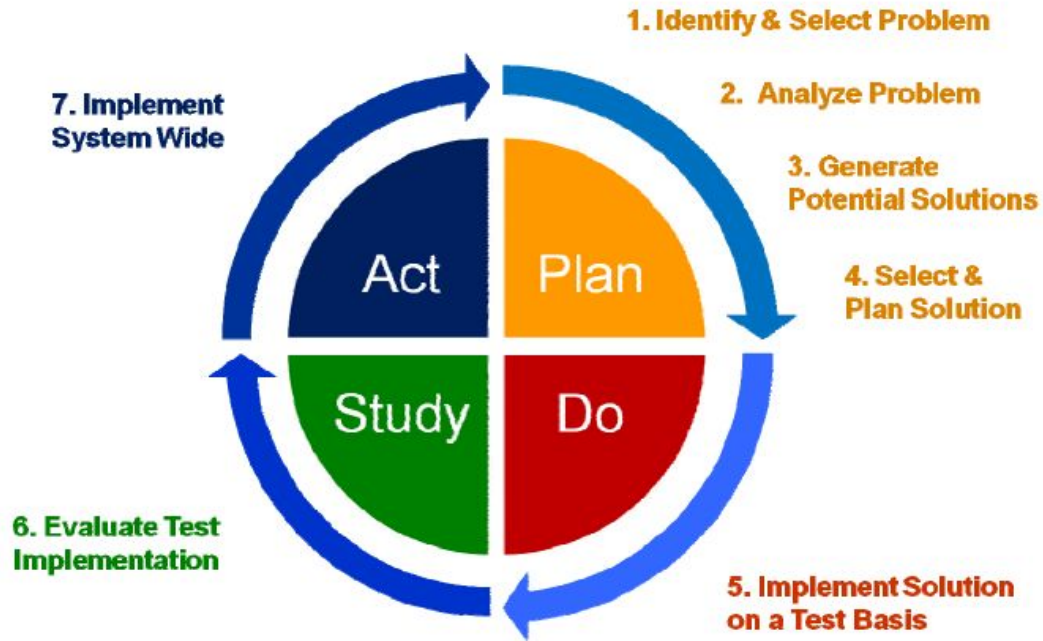
Aim Statement Example

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S M A R T

What is P-D-S-A?

Plan – Do – Study – Act Cycle



The PLAN Stage

1. Select & Identify Problem
2. Analyze Problem
3. Generate potential solutions
4. Select & Plan Solution

What changes can we make that will result in improvement?

Selecting Changes

Ideas for change may come from...

- Your Root Cause analysis (Process Map, Fishbone Diagram)
- A Driver Diagram
- Literature / evidence of effectiveness
- Ideas from peers, experts in the field
- Creative thinking techniques
- Input from your team

Assignment One:

Process Mapping Referrals to Enrollments

- The first assignment will be the same for each site: a process map of how you get from referrals to enrollments.
- Subsequent processes will be determined by each site.

How does Process Mapping Help?

Process mapping enables us to:

- build a step-by-step picture of the process for analysis or communication;
- define, standardize or find areas for improvement; and
- concentrate more intently on each individual step, without feeling overwhelmed by the bigger picture.

Process Map Overview

So...what is a process map again?

- A visual representation of steps in a process that describes the way things currently get done.
 - Key word: **currently**. The process map is for you to understand how you do things NOW, so that you can make the changes necessary to get the results you want.



It is not enough to do your best; you must know what to do, and then do your best.

(W. Edwards Deming)

Video: Creating a Process Map (Flow Chart)

<http://www.ihl.org/education/IHIOpenSchool/resources/Pages/AudioandVideo/Whiteboard11.aspx>

Incoming Referral by Phone



Office Assistant takes down information to pass to supervisor



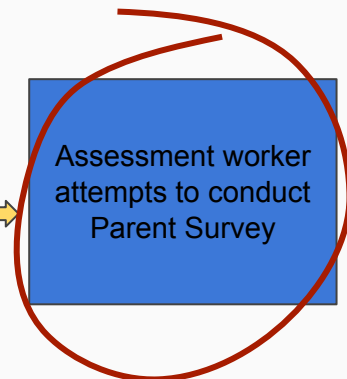
Supervisor calls Mother to explain program and schedule first home visit



Assessment worker attempts to conduct Parent Survey



Mother is eligible and decides to Enroll



Symbols Used to Process Map



An **arrow** shows the direction or flow of a process.

Start and End

An **oval** is used to show the materials, information, or action (inputs) to start the process, or to show results at the end (output of the process).

Activity

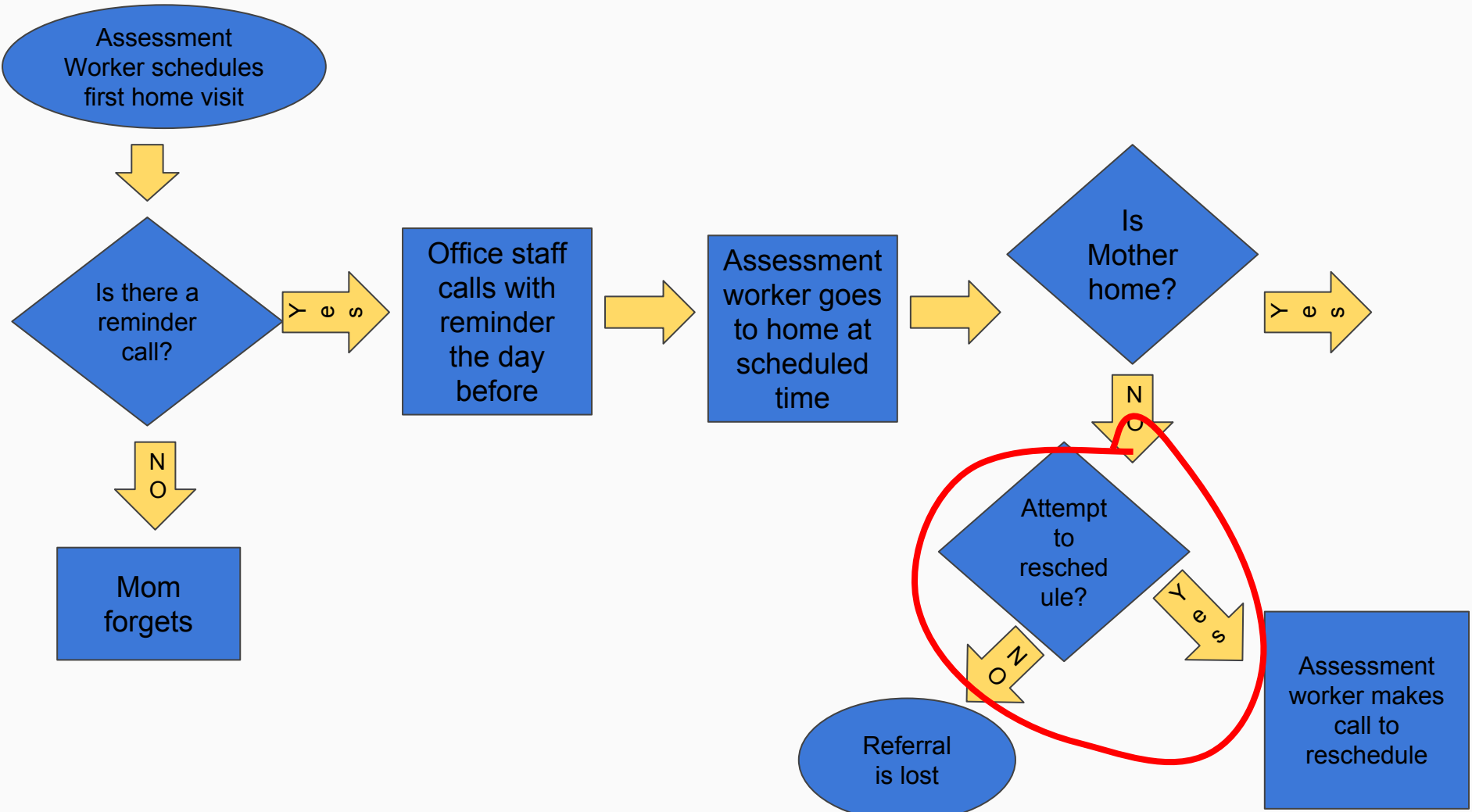
A **box** or rectangle is used to show a task or activity performed in the process.

Decision

A **diamond** shows those points in the process where a yes/no decision is required. Usually two arrows come out of the diamond to illustrate what happens next based on the decision.

Break

A **circle** with either a letter or a number identifies a break in the Process Map that is continued elsewhere on the same page or another page.



Step 1: Brainstorm steps in the process, and list them in the order they occur.

Agree on beginning and ending points.

Agree on level of detail to be displayed.

Ask questions such as

"What really happens next in the process?"

"Does a decision need to be made before the next step?"

"What approvals are required before moving on to the next task?"

Identify other people who should be involved in the process map creation, or asked for input, or to review drafts as they are prepared.

Step 2: Put it in a flow chart.

Go with pen and paper first.

Sticky notes are great for creating the outline.

Work through your whole process

Show actions and decisions appropriately in the order they occur using symbols

Include:

- Time intervals

- Whether you have data and metrics

Step 3: Challenge your flow chart.

Work from step to step asking if you have correctly represented the sequence of actions and decisions involved in the process.

Consider involving:

- All staff who have a role in the process
- Clients
- Other key stakeholders in this process (for example-referral sources)

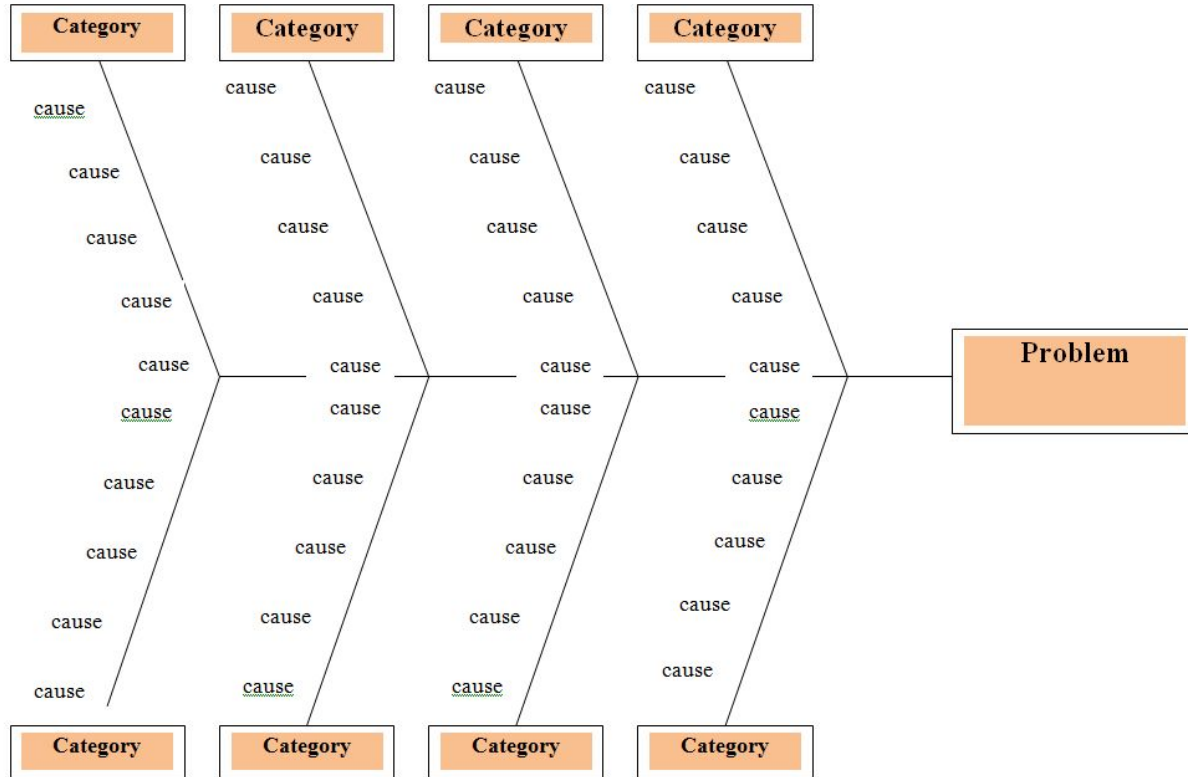
Step 4: Use your process map to inform your CQI project and review your aim statement

Questions you could ask to identify areas of process improvement:

- Are there any unnecessary or over-complicated steps?
- Should other steps be involved?
- Are the right people doing the right jobs?
- Are there overlaps, where several people or teams perform the same task or activity?
- Are there activities that add no value?
- Do metrics tell you where a system failure is occurring?
- Are you missing key metrics?

Assignment Two: Fishbone Diagram

Fishbone Diagram



1. Define the problem. (Fish Head)
2. Work out the major factors involved. (Big Bones)
3. List all the possible causes. (Small Bones)
4. Put it in the diagram and analyze it.

Policy

Existing outreach policy is outdated/insufficient

Policy not followed in handoff from screener to assessment worker

Policy not followed in handoff from assessment worker to home visitor

People

Often difficult to locate families

Not enough staff to process all incoming referrals

Problem:

getting clients from referral to enrollment

Families often confused about program based on information from centralized intake or referral source

Referrals often sent with incomplete information

No referral tracking system in place

FSW schedules the home visit too far in future

FSW schedules parent survey too far in future

Systems

Procedures

Identify Potential Solutions

Brainstorming

What is Brainstorming?

Brainstorming can creatively and effectively generate a high volume of ideas on a given topic, in a non-judgmental way, by:

- Encouraging open thinking
- Involving all team members
- Preventing a few team members from dominating the conversation
- Allowing team members to build on each other's ideas while staying focused on a common goal

Structured Brainstorming



In structured brainstorming, each team member offers ideas in turn.

1. State the agreed-upon brainstorming question in writing.
2. Each team member gives an idea in turn. No idea is criticized.
3. Write each idea in large, visible letters on a flip chart or other writing surface.
4. Continue generating ideas until all are exhausted.
5. Review the list and clarify ideas if necessary. Discard duplicate ideas.

Unstructured Brainstorming

In unstructured brainstorming, team members offer ideas as they come to mind. There are a variety of ways to conduct unstructured brainstorming. One example:

5-3-5 Brainstorming:

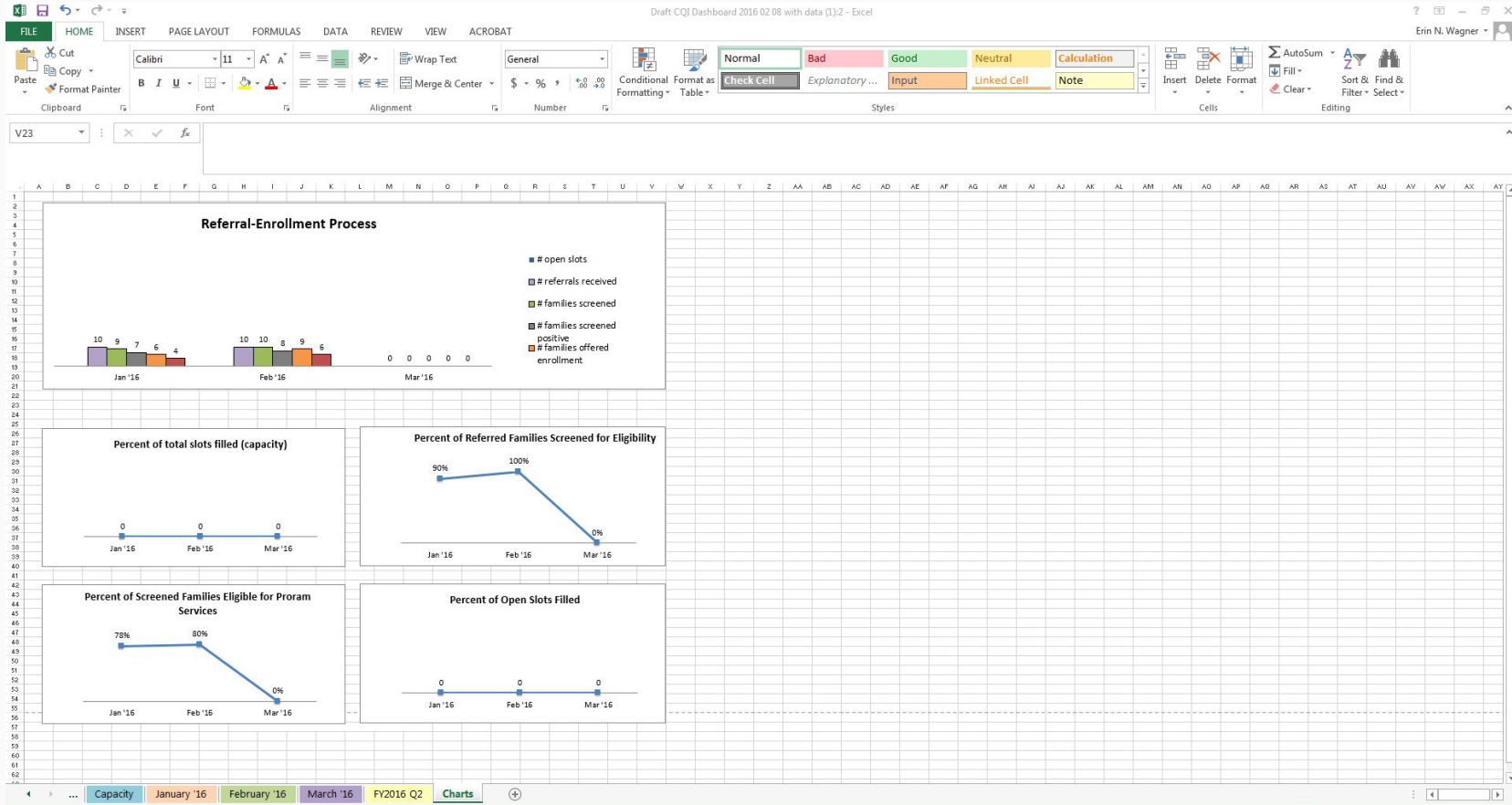
1. Each person has five minutes to write down three ideas.
2. Each person passes his/her sheet of paper to the next person, who has five minutes to add three more ideas.
3. Repeat as many times as there are team members.

Select a solution
to test

Six Questions to Help Use Data for Improvement:

1. What data or measures do you need?
2. What data **do you have** available and how frequently can you access it?
3. What data **do you not have** available that you need, and how will you get it?
4. How frequently are you going to examine data?
5. Who is going to do what, with regards to collecting data and tracking improvements?
6. How can your data be made transparent?

Sneak Peek: We are developing a tool to help you track your CQI data!



Develop and Improvement Theory

What do we think will happen based on the selected improvement measure?

Review of Assignments:

1. Process Map
2. Fishbone Diagram

Next Webinar:
May 2016