



Delinquency and Court Services Division
(DCSD) presents the...

Continuous Quality Improvement (CQI)

Informational Session

Presenter: De Shell Parker & Provider Ambassadors

Agenda

- Welcome & DCSD Staff Introductions
- Overview and History
- Impact of Juvenile Justice Reform & Reinvestment Initiative (JJRRI)
 - From a Juvenile Justice Perspective – De Shell, DCSD
 - From a Provider Ambassador Perspective – SCYFS & WCS
 - Provider Investment Measurement Tool – Dawn Barnett, RRCC
 - Change Project Presentation – Southwest Keys
- BREAK (15 Minutes)
- Continuous Quality Improvement (CQI) Plan & SPEP Status
- The NIATX Model – Amy Milvaine, NIATx
- Questions & Answers
- Next steps



3

Overview & History

DCSD has been involved with JJRRI since 2013 with the following milestones identified:

- 2012 – DCSD began planning with JJRRI
- Spring 2013 – JJRRI implementation and kick off in Milwaukee County
- Aug 2013 - Dec 2013 – Profiled All network programs and services
- Aug 2013 - May 2014 – Matching and classification of programs/services
- May 2014 – Completed Pilot Scoring – Biggest issue with risk data
- October - December 2014 – Provider Educational Site Visits
- Spring 2015 – Development of Continuous Quality Improvement Plan
- Fall 2013 – Present: Data Collection & Scoring Efforts

3

Impact Discussion

The impact of involvement with the Juvenile Justice Reform & Reinvestment Initiative...

1. From the perspective of the Juvenile Justice System.
2. From the perspective of the Provider Ambassadors.

4

From the perspective of Juvenile Justice...

Impact on DCSD

- Systematic Philosophy Shift
- YASI Implementation
- Stakeholder Engagement
- Policy & Procedure Revisions
- Established Contact Standards
- Implemented OG Staff Training
- Database Needs
- Central Staffing Changes
- Attention to DOC placements
- Application of the SPEP
- Referrals & Billing
- Insurance (*Payor of last resort*)
- Implementation of the CQI

5

From the perspective of Provider Ambassadors...

Impact on Providers

Development and Implementation of the CQI

- Scott Carpenter – St. Charles Youth & Family Services
- Jamila Burton – Wisconsin Community Services

Provider Investment Measurement

- Dawn Barnett – Running Rebels Community Organization

Change Project Experience

- Elizabeth Zarate – Southwest Key Programs

6

Provider Investment Measurement Tool
Where did this idea come from???

1. What is the tool?
2. What was considered in the development of the tool?
 - Question Posed: What happens when you have a provider that complied with every request but has no measurable change?
3. Why and How will the tool be used?
 - Question Posed: How do you distinguish between providers that are invested and making efforts to continuously improve and providers that are not making efforts.

7

Provider Investment Measurement Tool (con't)

1. Did the agency attend the mandatory DCSD Informational Session? (5 Points)
2. Did the agency have the required levels represented from the agency at the Informational Session (A. Executive, B. Change Leader, C. Change Agent)? (15 Points)
3. A. Did the agency attend the mandatory initial DCSD NIATx Change Academy Training (or B. the optional booster training)?
4. Did the agency submit the action plan within the specified time frame?
5. Did the provider accommodate and participate in the DCSD site visit?

8

Provider Investment Measurement Tool (con't)

6. Did the agency participate in follow-up DCSD technical assistance (TA) calls?
7. Were follow-up efforts from the TA call made by agency?
8. Did the agency participate in follow-up NIATx coaching calls (CC)?
9. Were follow-up efforts from the CC made by the agency?
10. Did the agency make any additional internal efforts to address internal change?

9

Provider Investment Measurement Tool (con't)

Compliance/Investment Measurement Scale Range

- <= 59 - 0 Not Acceptable
- 60 - 69 - 1 Slightly Acceptable
- 70 - 79 - 2 Moderately Acceptable
- 80 - 89 - 3 Acceptable
- 90 - 99 - 4 Very Acceptable
- 100 - 5 Completely Acceptable

The Agency Total Compliance Score (Yes/No) & Investment Score (Scale) combined:
Agency Total Compliance/Investment Score

10

Change Project Presentation

Presented by:

Elizabeth Zarate
of
Southwest Key Programs

11

These Groups are Made For Talkin'



southwest key programs

Elizabeth Zárate-Executive Sponsor
Jaime Behnke-Change Leader
Rachel Galanis-Change Leader

12

AIM



- Increase the number of **group counseling participants by 5 per week**
- Baseline data: an average of 17 participants per week were in attendance at group counseling from September 2014-October 2014 (actual dates noted in chart)
- Group participant goal: 23 participants per week will attend group counseling
- Length of the change project is October-December, 2014, with our goal to be attained by January 1st, 2015

13

CHANGES



Initial change made:

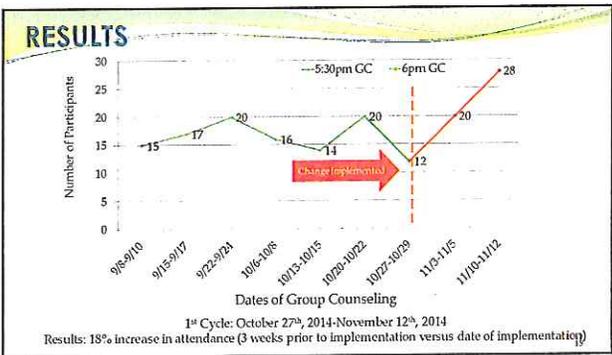
- During the initial walk-through conducted at Southwest Key the results revealed the following barrier:
 - Clients were not fully informed of the Southwest Key Program rules after being referred by Children's Court.
- 1. In an effort to decrease the amount of apprehension requests written for our clients, it was decided by the change team to create a one page informational brochure. This would outline the program rules and client's responsibilities and would be given to the clients at court. Once the brochure was made, we spoke to administration at court, who were very excited about this effort. It was then given to court representatives to await approval. The approval process is still pending.

THEREFORE.....

Second change made:

- During the initial walk-through conducted at Southwest Key the results also revealed this barrier:
 - Low attendance of participants for the weekly group counseling sessions
- 1. In an effort to increase the number of group participants, group counseling start time was changed from 5:30pm to 6:00pm during the school week.

14



What's Next???

- Keep track of data on a monthly basis
 - Meet with change team monthly to review numbers
- After 1st Change Cycle is complete, next change to sustain increased attendance is offering incentives to participants
 - Offer gift cards, prizes, food as a way to get our clients excited to attend
 - Get feedback from clients on incentives that would increase the likelihood of their attending group sessions routinely
- Eventually increase our goal. If we can make this work, why not shoot for an even higher number of participants??



36

Impact

- The first cycle improved group counseling attendance by an average of **18% per week**
- More clients being served



Lessons Learned:

- Through the change process, each change team member was able to have a platform to express their individual thoughts. Having this voice, made staff more compliant with the change process.
- Change is a lifestyle, not an event. Keep change going.

37

BREAK

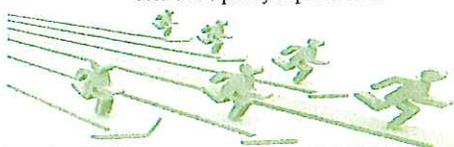
(15 Minutes)



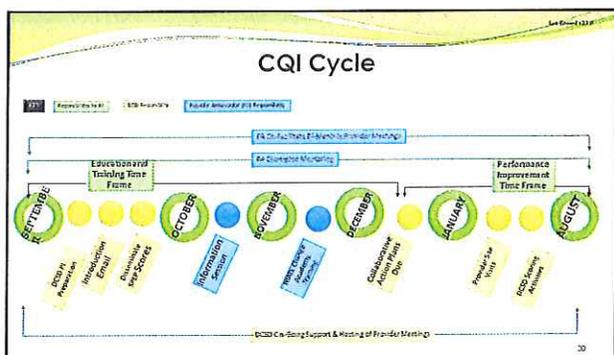
38

CQI Mission

The mission of the continuous quality improvement plan is to identify the appropriate risk level of youth in order to match them with the appropriate service at the appropriate time in order to improve outcomes for juvenile justice youth through the continuous development of a systematic and comprehensive approach to quality assurance/quality improvement.



19



CQI Approaches to Program Improvement

1. Application of the SPEP resulting in a full SPEP score,
2. Application of the SPEP components in the absence of a full SPEP score, or
3. Application of the NIATx Model.

21

CQI
Measures of Success

DCSD Goals: DCSD's completion of YASI assessments and use of YASI risk scores to inform decision-making and meeting overall SPEEP requirements, including action planning to achieve one or more of the following identified objectives:

- 1 Services that meet all SPEEP criteria will be evaluated and scored annually.
- 2 DCSD service providers will develop and implement an annual collaborative action plan.
- 3 YASI assessments will be completed accurately and timely within the policy guidelines for assessment.
- 4 YASI re-assessments will be completed accurately and timely within the policy guidelines for reassessment.
- 5 Youth referred to services will be appropriately matched to services in alignment and accordance with the youth's identified risk level.

22

CQI
Measures of Success (con't)

Agency Goals Agencies will implement program changes and action planning to achieve one or more of the following identified objectives:

1. DCSD service providers will develop and implement an annual collaborative action plan.
2. The percentage of referred youth starting services will increase.
3. Service and/or program completion rates will increase.
4. An increase in the overall SPEEP score [SPEEP Components: A. Quality Measure Component, B. Service Type Supplement, C. Dosage & 4) Risk].
5. An increase in the Quality Measure (QM) indicators of the SPEEP [QM Components: A. Protocol, B. Staff Training C. On-Going Staff Supervision, & D. Organizational Response to Drift].
6. An addition of a supplemental service to the primary service type (if applicable).

23

CQI
Measures of Success (con't)

Agency Goals (con't)

1. Any internal program change designed to meet the specified target dosage amounts for a specific service (i.e. Changes must occur in practice (forms and documentation) and procedure (protocols) and must have supporting implementation documentation).
2. Any internal program change to incorporate YASI risk scores in operations (i.e. Changes must occur in practice (forms and documentation) and procedure (protocols) and must have supporting implementation documentation).

Youth Goals: Youth will achieve the identified objective as a determination of success:

- 1 For youth with a moderate or high YASI risk level, the level will be maintained or reduced.

24

Action Plan Components

All Provider Goals (including DCSD)

- **Goal 1:** The percentage of youth starting services within 60 days of receiving the YASI assessment will increase, i.e. the amount of time between the YASI assessment and the start date of the specific service will decrease.
- **Goal 2:** To be identified via the NIATx Change Leader Academy, i.e. the area of focus that results from use and application of the NIATx process.

25

Delinquency and Court Services Division (DCSD) Continuous Quality Improvement (CQI)			
Program Improvement Action Plan			
For the program or service listed:		Action Plan due within 60 Days of receipt of feedback report	
DCSD/DCJ/NIATx/CaseCounts/WI/you			
Organization/Agency Name:		Phone:	() - () - ()
Address:		Fax:	() - () - ()
Principal/Lead/Sup Contact Person:		Direct Phone:	() - () - ()
Title of Contact Person:		Cell:	() - () - ()
Need/End-User	Plan to Address Current Agency Response	Responsible Party	Time Line
<p>Goal 1: The percentage of youth starting services within 60 days of receiving the YASI assessment will increase, i.e. the amount of time between the YASI assessment and the start date of the specific service will decrease.</p> <p>Goal 2: To be identified via the NIATx Change Leader Academy, i.e. the area of focus that results from use and application of the NIATx process.</p>	<p>Breakdown of program for action and change project to address the issues that has been identified here.</p>	<p>Enter Staff Name (Date) to be measured for completion here.</p>	<p>Project Implementation Date</p> <p>Anticipated Completion Date of Project Implementation</p> <p>If Not Reported Date of Reporting</p> <p>Project Status:</p> <p>Completed Ongoing</p> <p>(Include appropriate dates)</p> <p>Date of Status:</p> <p>(How often report Status is updated)</p>

SPEP – Current State

- **Current State**
 - Dispositional Matrix Live 11.1.2015
 - New Data System effective 10.30.2015
 - 2015 Data integrity efforts will ensue for 2016 scoring
 - Scoring Status – Completed/No Scores at this time
 - Latest Development: 60 Days or less between YASI Assessment & Service Start Date
 - Action Planning to close the gap of time
- **Plans to Follow SPEP & NO Scores**
 - NIATx Pre-Work “Walk-through”
 - NIATx optional Teleconference
 - NIATx Change Leader Academy Training

27

Milwaukee County's CQI Process & NIATx

- Why NIATx?
- How does NIATx fit into Milwaukee's CQI process?
 - NIATx Principles:
 - 1 Empowers staff to change the organization from within,
 - 2 Change takes place from the bottom up,
 - 3 Emphasis placed on teaching Quality Assurance/Quality Improvement techniques to mentor others into becoming change agents – hence sustaining the process.
- Whom are the required participants & why?
- What are the follow-up activities & call schedule required?
- What is a Walk-Through?

23

The NIATx Way

Presented by....

Amy Mcilvaine
NIATx Educational Services Director
University of Wisconsin – Madison

29

What is a Walk-through? Why do it?



30

Steps for Doing a Walk-through

- Select a process to walk-through.
- Select two people from your organization to play the roles of "customer" and "observer/note taker."
- Go through the experience just as a typical customer would.

31

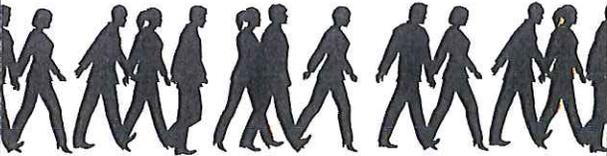
Steps for Doing a Walk-through (cont)

- Try to think and feel as a customer or user would.
- Ask the staff ?'s What would make it better for the customer and make it better for the staff?
- Write down a list of the needs you identified.
- Meet with your director and/or CEO to review the findings of your walk-through and select one key problem.

32

Questions?
Next Steps?

Conduct your own walk-through
Optional teleconference to review
Tuesday, October 13th, 2015 @ 11AM - 12PM (CST)



33

Questions and Answers

24

Remaining Steps in the CQI Process

Now that the Information Session has been completed, the next steps include:

- 1 NIATx Pre-Work "Walk-through" at your agencies
- 2 NIATx Teleconference October 13, 2015 11-12PM 1.877.336.1831 (Code 3084504*) *(optional)*
- 3 NIATx Training & Change Template completion
- 4 Call Schedule set-up and participation
- 5 Action Plan Submission to DCSDQA@mil.wa.gov
- 6 Individual Site Visits (TBA 2016)
- 7 JJRRI National Team Site Visit meeting in April 12th or 13th 2016 *(tentative - Notification will be issued)*
- 8 Bi-Monthly Network Forum Meetings (2016 Dates Pending)
 - Cycle repeats Fall 2016

33

Tremendous THANKS for your time...

We look forward to training with you in November...



Have a great day...

26
