

OPRE report #2022-190

Building a strong foundation for program improvement through CQI implementation teams

The Continuous Quality Improvement (CQI) implementation team oversees improvement efforts within your program. The team is responsible for monitoring program data to identify and prioritize challenges, identifying strategies to address challenges, and testing strategies to learn how to improve as a program.

Why have a CQI implementation team?

While quality improvement is a responsibility for everyone involved with your program, it is important to have an implementation team to manage your program's CQI efforts to ensure improvement tasks are prioritized among other responsibilities. Conducting CQI as a team promotes a diversity of perspectives and a shared sense of responsibility for program improvement.

How many people should be on the team and what are their roles?

Teams typically have 3 to 5 core people who meet regularly but more members may join on a less frequent or as needed basis. The aim is to ensure that you designate people to fill key roles, which include a team lead, CQl plan lead, improvement advisor(s), data manager, and training/TA supervisor(s). While one person could fill several of these roles, you should be careful not to overburden anyone and strive to include diverse perspectives. For example, if you plan to include the project director, internal evaluator, and a supervisor on your team, fill the improvement advisor role with frontline staff, partners, or program participants in order to include an on-the-ground perspective.

CQI team roles

Team lead: Oversees the CQI process

CQI plan lead: Documents and updates the CQI plan

Improvement advisors: Contribute insights about challenges and promising strategies

Data manager: Oversees data collection and presents findings

Training/TA supervisors: Support implementation of new strategies

How often should the CQI team meet?

A CQI team should meet frequently enough to ensure timely planning and follow-up. For example, during startup or when conducting road tests, the team may meet weekly. A monthly cadence may be enough at other times. Also factor in how your team will communicate between meetings and ensure that assigned tasks are completed. Your team might decide, for example, to use team "huddles" (brief 5-10-minute check-ins) to keep everyone informed between meetings and to maintain focus and accountability for completing tasks on schedule. Regardless of how frequently your team meets, be sure to schedule regularly occurring meetings that are exclusively focused on your CQI work (rather than scheduling ad hoc meetings or including CQI only as an agenda item for other meetings).



*Grantee tip: One grantee shared that their program discusses CQI in weekly team meetings and also has a larger quarterly CQI committee meeting that includes community members and program partners. This is one strategy for bringing in multiple perspectives, while honoring the time of external partners.

How does the CQI team operate?

An early step in the formation of your team is to consider the scope of the team's responsibilities. For example, upon identifying a promising strategy for improvement, is it the responsibility of the CQI team or project leadership to decide whether to scale the practice program-wide? Also, if your project is conducting a local evaluation, consider the role external evaluators should play on the CQI team and how the two teams can support each other. The team agreement worksheet (featured below) can help you think through these key considerations. It will also be useful to develop a communication plan to ensure the team and outside partners are effectively supporting each other. To support communication planning, please see the communication protocol worksheet on the HMRF Resources site.

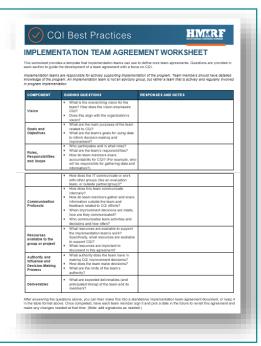
Featured tool: The team agreement worksheet

Key considerations include:

- Guiding purpose (vision, goals, and objectives)
- Roles, responsibilities, and scope
- Communication and decision-making processes
- Resources to support the team
- Deliverables

A CQI team agreement serves several purposes, including:

- Promoting a common understanding of goals and key processes
- Providing an opportunity to co-create expectations to foster buy-in
- Serving as an accountability tool as the team moves forward



What are strong practices for facilitating a CQI meeting?

A great practice is to use a structured agenda. For meetings that require the team to synthesize and interpret data (for example, if you are identifying challenges or reviewing a road test), consider the "What? So What? Now What?" agenda structure, which is designed to support collective sensemaking. Please see the <u>W3</u> meeting agenda template on the <u>HMRF Resources site</u> for more information. You will also want to consider how the team will make decisions. See the <u>decision-making models</u> tip sheet to support your thinking.

We have included external people on our CQI team. Should we compensate them for their time?

Grantees should discuss any consideration of new costs related to CQI, or changes that will affect the project budget, with their FPS to confirm what is allowable under the grant.

Other questions?

Contact the HMRF CQI TTA team at hmrfcqi@mathematica-mpr.com. Visit HMRF Resources for resources related to your CQI plan, CQI implementation teams, and tools and processes to support CQI.

This resource was written by Annie Buonaspina, Allon Kalisher, and Scott Richman of Mathematica in collaboration with the Administration for Children and Families' Office of Family Assistance (OFA) and Office of Planning, Research, and Evaluation (OPRE) (contract #HHSP233201500035I/75P00120F37054). OPRE Project Officers: Katie Pahigiannis and Pooja Gupta Curtin. Mathematica Project Director: Grace Roemer.

Suggested citation: Buonaspina, A., A. Kalisher, and S. Richman (2021). Building a strong foundation for program improvement through CQI implementation teams (OPRE Report 2022-190). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.