Nuts and Bolts: Part 1

Asking Questions about Child and Family Outcomes

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Today’s session

• The process of improvement starts with a question.

• The goal of child welfare systems is to improve outcomes for children and families. We do that by way of changing the process, quality, and capacity of care.

• Ask a question about an outcome you can change:
  • Likelihood: What are the odds that a child will ____________?
  • Speed: How long does it typically take for a child to ____________?

• Observe variation to identify opportunities for improvement.
Today’s session

• Today’s materials are taken from *EDGE: Evidence-Driven Growth and Excellence*

• Eight month, cohort-based evidence use training program for child welfare managers.

• Now in its 3\textsuperscript{rd} year with Tennessee Department of Children’s Services

• Coming soon in other areas.
The process of improvement starts with a question.

Becoming systematic in your use of evidence starts with curiosity and taking ownership over the inquiry.

Access to reports is critical, but the process of improvement doesn’t start there. Reports are only helpful if they contain the answer to the right question.

Whether you acquire evidence from some pre-existing place or generate it yourself—your engagement must start with you articulating your own question.

Reactive/Passive
“Let’s see what the data are telling us.”

Active/Empowered
“Let’s answer this question so we get the information we know we need.”
Why spend so much time on developing questions?

A mismatched question can set off an unfortunate domino effect…

What one cares about gets framed as a question, which determines the analysis, which when applied to data results in findings which may be interpreted as evidence to support a claim leading to an action.

The process of improvement starts with a question.

What do you want to know?

- What questions do you have about system performance, either statewide or in your county?

- Example: How long do children in my county typically spend in foster care?

- Write down three questions. (A question ends in a question mark.)
The CQI cycle: Plan-Do-Study-Act

PLAN
- Define problem & outcome
- Develop theory of change
- Design/select intervention

DO
- Implement intervention
- Monitor implementation

STUDY
- Measure outcomes
- Provide feedback

ACT
- Adjust intervention as needed

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Define problem & outcome
Develop theory of change
Design/select intervention

Measure outcomes
Provide feedback

Adjust intervention as needed

Implement intervention
Monitor implementation

Process of care investments
Quality of care investments
Investments in capacity

Outcomes, process, quality, and capacity

...because when we make those changes, we will improve outcomes for children and families

Make changes to how the work is done, how well it’s done, and the resources that support the work…
So, we have questions about…

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<tr>
<th>Outcomes</th>
<th>Processes, Quality, Capacity</th>
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The CQI cycle: Plan-Do-Study-Act

What makes a good plan?

- Plan
  - Define problem & outcome
  - Develop theory of change
  - Design/select intervention

- Study
  - Measure outcomes
  - Provide feedback

- Do
  - Implement intervention
  - Monitor implementation

- Act
  - Adjust intervention as needed

- Investments in process of care
- Investments in quality of care
- Investments in capacity

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Theory of change: Four statements

I observe [some outcome that I want to improve].

I think it’s because [of this reason].

So I plan to [implement this intervention],

which I think will result in [an improved outcome].
I observe that… but is it a problem?

How do you know that the thing you observe is a problem that needs to be solved?

Nothing happens without variation. If everyone achieved the same outcomes, there would be nothing to change. **Variation is the signal that there is room somewhere in the system for improvement.**

Variation exists on four dimensions:

- **Person:** child to child, family to family
- **Place:** county to county, provider to provider, etc.
- **Service:** congregate care vs. foster families vs. kinship care, etc…
- **Time:** cohort to cohort

We want to understand how outcomes vary at the person, place, and service level so that we can do something to improve outcomes over time.
Variation signals the need for improvement.

What percent of children entering out of home care in 2015 entered directly to a kinship foster home?

Proportion of all FY15 admissions entering foster care directly to a kinship placement, by county

<table>
<thead>
<tr>
<th>State</th>
<th>Proportion</th>
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<tbody>
<tr>
<td>A</td>
<td>31%</td>
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<tr>
<td>B</td>
<td>19%</td>
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<tr>
<td>C</td>
<td>17%</td>
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<td>L</td>
<td>7%</td>
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Variation signals the need for improvement.

Take the questions about outcomes you crafted earlier—Can you express the question so that it asks about variation? (Keyword: “than”)

<table>
<thead>
<tr>
<th>No variation</th>
<th>Variation</th>
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<tr>
<td>At what rate do children age out of foster care?</td>
<td>Do more children age out of care in my region than in the rest of the state?</td>
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<td>What percent of children reunify with their parents?</td>
<td>Are older children more likely to reunify than younger children?</td>
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<tr>
<td>What percent of children are placed with kin?</td>
<td>Are we any better at placing children with kin today than we were five years ago?</td>
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Summary: The goal of CQI is to improve outcomes.

- Begin the process of improvement by asking **questions about outcomes**. Ask about how outcomes vary.

- Observe **variation** to determine that you have an **outcome** that needs improvement. ("I observe that…")

- Make changes to **process**, **quality**, or **capacity** that are designed to improve those outcomes ("I think it’s because… so I plan to…")
CQI and the demand for evidence at every stage

Plan-Do-Study-Act: Evidence supports your PLAN.

I observe [some outcome that I want to improve]. How do you know? Evidence.

I think it’s because [of this reason]. How do you know? Evidence.

So I plan to [implement this intervention], How do you know? Evidence.

which I think will result in [an improved outcome]. How do you know? Evidence.
Evidence supports your PLAN:
• points to the outcomes that need improvement (I observe that…)
• supports (or refutes) your hypothesis about what’s driving the outcome (I think it’s because…)
• informs the selection of matched interventions (So I plan to…which I think will result in…)

Later on in the cycle of CQI, evidence:
• gives you information about whether you’re implementing your intervention according to plan (DO)
• tells you whether your intervention was effective (STUDY)
• informs your decisions about what to do in light of those results (ACT).
Recall this…

A mismatched question can set off an unfortunate domino effect…

What one cares about gets framed as a question which determines the analysis which when applied to data results in findings which may be interpreted as evidence to support a claim decision action.
Plan-Do-Study-Act: Evidence supports your PLAN.

I observe [some outcome that I want to improve].

How do you know? Evidence.

The discipline of converting data into evidence:
• Ask a question about something you can change.

• How do you answer a question about likelihood?
  • e.g., What percent of children entering foster care exit to permanency?

• How do you answer a question about speed?
  • e.g., How long do children typically spend in foster care?