

MIECHV Continuous Quality Improvement Learning Collaborative

July 30, 2024

Agenda

Welcome!

CQI Learning Collaborative

- What have teams been up to?
 - CQI Topics
 - Basecamp Tour
 - Helpful Tips
 - Team Spotlights

MIECHV Benchmarks, EHS/HFA FY24 Midyear Performance Updates on Screening & Referral Measures


CQI Resources





Commitment
to racial
equity and
trauma-
informed
spaces

Maternal and Child Health (MCH) works to co-create courageous spaces to collaborate and share ideas respectfully. We acknowledge that a variety of backgrounds, skills, communication styles, and beliefs are present. While we acknowledge that there are power differentials among us, **all attendees bring equally valuable opinions.** Each participant is encouraged to provide leadership.





Welcome!

Share one **bright spot** (personal or professional) for the month of July!

Zoom Reminders:

*Hold questions until we get to the designated slides or place in the chat

*This meeting is 1-hour with no scheduled breaks; please do what you need to take care of you.



Cindy Lee
Fiscal Analyst



Alyssa McClean
Workforce
Development
Coordinator



Adejoke Babatunde
CQI
Coordinator



Cynthia Ikata
NFP Nurse
Consultant

Oregon MIECHV System Team



Caren Marre
Administrative
Support



Pamela Ferguson
Home Visiting
Systems
Manager



Drew Strayer
Home Visiting
Systems Coordinator/
MIECHV Project
Director



Julie Plagenhoef
NFP/Babies First
State Nurse
Consultant

Oregon MIECHV Data Team



Jin Song
Research
Analyst



Laura Zukowski
THEO Application
Support & Training
Coordinator



Spencer Davis
MIECHV & THEO
Data Quality
Coordinator

Newest Data Team Member



Jake Báez
THEO Coordinator- Informatics
(and Improvement Process) Project Manager

CQI Plan 2024 Overview

Our statewide aim is to increase the percent of children enrolled in MIECHV home visiting programs with timely completion of ASQ-3 developmental screening from 55.7% in FY23 to 60-65% for FY24

- a. Maternal depression screening & referrals (PM 3 & 17)
- b. Tobacco cessation referrals (PM 6)
- c. Intimate partner violence screening & referrals (PM 14 & 19)
- d. **Developmental screening** & referrals (PM 12 & 18)



CQI Learning Collaborative: What You Have Been Up To...

- CQI Chosen Topics
- Basecamp Tour
- Helpful tips
- Spotighting Teams/Share-out/Q&A
- Performance Measure Updates

Chosen Topics

➤ EHS

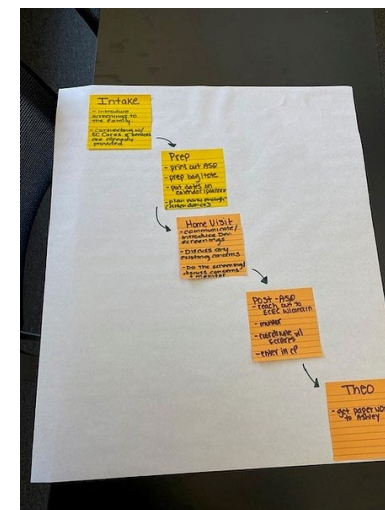
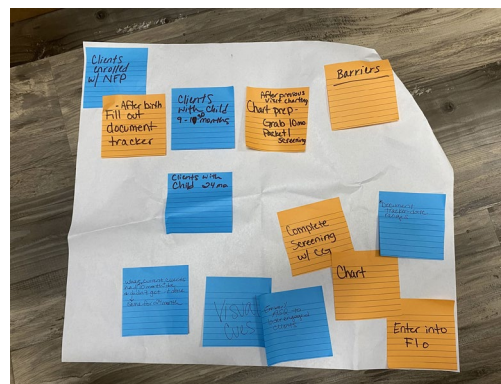
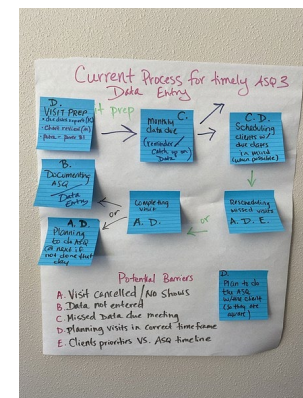
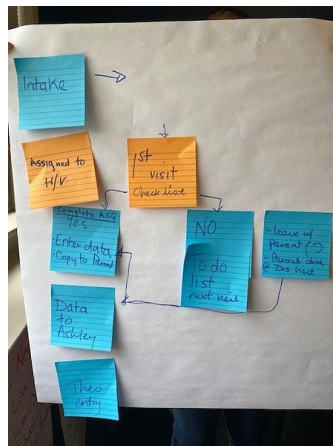
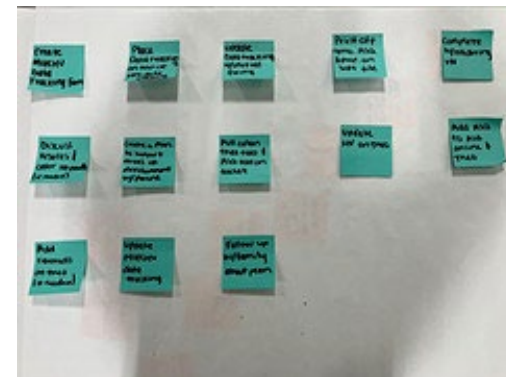
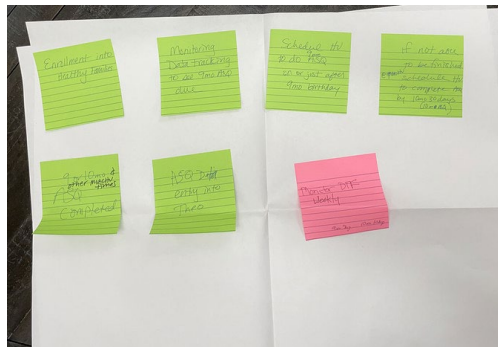
- ASQ-3 Screenings - #7
- Family Goal Setting - #1

➤ HFA

- ASQ-3 Screenings - # 10

➤ PDSAs

- Pending = 10
- Completed = 15
- Types:
 - Cross referencing local data to THEO
 - Family knowledge/understanding of goal setting
 - Combined data tracker-increase knowledge/understanding
 - Education on importance of ASQs
 - Adding MIECHV to team meetings
 - Data entries with 24 hours
 - Discussing data tracker usage and comfortability



Let's Tour Basecamp

2024-2025 MIECHV CQI Learning Collaborative

Set up people AB AM AL AW AM AL AR AR AZ AM AH BB BP BP CA CA CN CC CC CC CM CG

<p>Message Board</p> <p>AB Welcome to the 2024-2025 MIECHV CQI Learning Collaborative Site!</p>	<p>Docs & Files</p> <p>Change Package</p> <p>Webinars</p> <p>Statewide Performance: MIECHV Screening & Referral</p>	<p>Schedule</p> <p>FRI, JUL 12 Current Scheduling Tool Survey Due by date</p> <p>TUE, JUL 30 July 2024: Virtual MIECHV CQI Learning Collaborative Meeting 9:30am - 10:30am</p> <p>WED, JUL 31</p>
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Nurse-Family Partnership CQI Learning Collaborative Teams

This is a place where model specific LIAs can share ideas, experiences and all things related to the completion of charter expectations; including ideas/interests of future CQI topics.

Set up people AB AL BB BP CC EN JP JG KC KC KB KR KK MK NB PA SH

Early Head Start CQI Learning Collaborative Teams

This is a place where model specific LIAs can share ideas, experiences and all things related to the completion of charter expectations; including ideas/interests of future CQI topics.

Set up people AB AW AL AR AR AZ AM CA CN FA IE JB RS SN Y

High Desert ESD HF Team (2024-2025)

Set up people AB CA

Message Board	Docs & Files	Schedule
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Healthy Families Oregon CQI Learning Collaborative Teams

This is a place where model specific LIAs can share ideas, experiences and all things related to the completion of charter expectations; including ideas/interests of future CQI topics.

Set up people AB AM AH BP CA CC CC CM CG DJ DDO EN EW IN JD KD MW MM

Message Board	Docs & Files	Chat
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Helpful Tips:



Test

- trying a change on a small scale to see if the change results in improvement

Tests of change:

- Answer a specific question
- Require a theory and a prediction
- Are done on a small scale, collecting data over time
- Build knowledge sequentially over multiple cycles
- Are completed in a wide range of conditions

Plan-Do-Study-Act (PDSA) Form

Change:		
Agency:	Month/Year:	Cycle #:
Objective		<input type="checkbox"/> Develop a change (invent a change – what to do) <input checked="" type="checkbox"/> Test a change (learn how a change works in your system and if it results in improvement) <input type="checkbox"/> Implement a change (make the change a permanent part of your system)
PLAN	Questions What are we trying to learn? If we.....will it result in.....? Questions → Predictions → Data Collection → Results → Conclusions	
	Predictions What do we think will happen? Try to make it numerical.	
	Tasks Who What Where When Tools Needed Data Collection	
Do Carry out the plan. Document what happened – observations, challenges. Report the data results.		
Study Complete analysis. Compare results to predictions. Summarize conclusions, surprises, lessons learned.		
Act Do changes need to be made? What happens next?		<input type="checkbox"/> Adapt (modify and try again, move to next test) <input type="checkbox"/> Adopt (no modifications needed, move to broad implementation) <input type="checkbox"/> Abandon (stop exploring this change) Describe next steps.

August Virtual CQI Office Hour

Topic: PDSAs + Tasks vs. Tests

PLAN	Questions What are we trying to learn? If we.....will it result in.....? Questions → Predictions → Data Collection → Results → Conclusions
	Predictions What do we think will happen? Try to make it numerical.
	Tasks Who What Where When Tools Needed Data Collection

Plan-Do-Study-Act (PDSA) Form

Change:	
Agency:	Month/Year: Cycle #:
Objective	<input type="checkbox"/> Develop a change (invent a change – what to do) <input checked="" type="checkbox"/> Test a change (learn how a change works in your system and if it results in improvement) <input type="checkbox"/> Implement a change (make the change a permanent part of your system)
PLAN	Questions What are we trying to learn? If we.....will it result in.....? Questions → Predictions → Data Collection → Results → Conclusions
	Predictions What do we think will happen? Try to make it numerical.
	Tasks Who What Where When Tools Needed Data Collection
Do	Carry out the plan. Document what happened – observations, challenges. Report the data results.
Study	Complete analysis. Compare results to predictions. Summarize conclusions, surprises, lessons learned.
Act	<input type="checkbox"/> Adapt (modify and try again, move to next test) <input type="checkbox"/> Adopt (no modifications needed, move to broad implementation) <input type="checkbox"/> Abandon (stop exploring this change) Describe next steps.

Tip: Task vs. Test

Task

- an activity, something

CAUTION: You will likely need to complete some tasks to complete a PDSA cycle, but a task is NOT a test.

Test

- scale to see if
- collecting data
- knowledge
- over
- completed in a wide range of
- conditions

Team Spotlights:

FBB Marion-Polk HF & HSLane EHS




**Family
Building
Blocks**



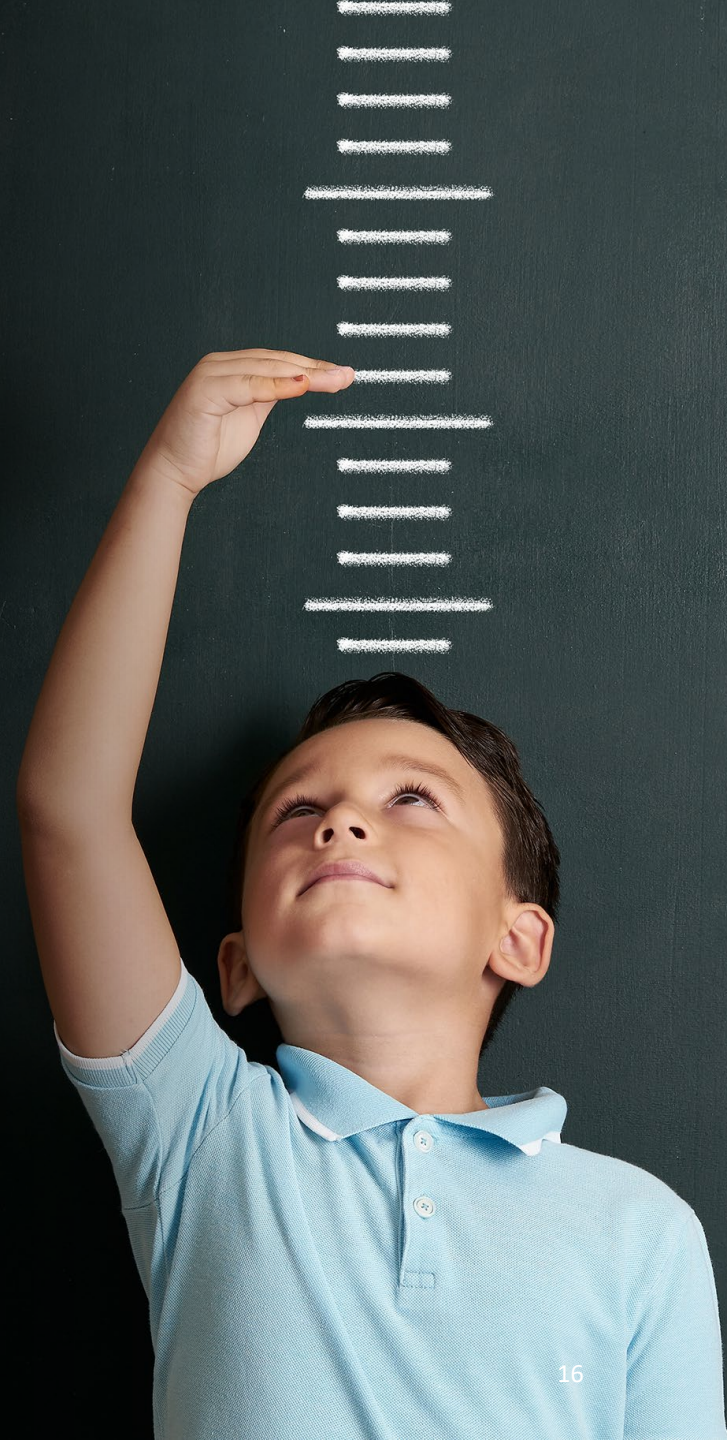
HEAD START
OF LANE COUNTY



Questions



MIECHV Benchmarks and EHS & HFA FY24 Midyear Performance Update on Screening & Referral Measures



**MIECHV
Benchmarks**

BENCHMARKS



Improved maternal
and newborn health



Improved school readiness
and achievement



Improved family economic
self-sufficiency



Reduced child injuries,
abuse, and neglect



Reduced crime or
domestic violence



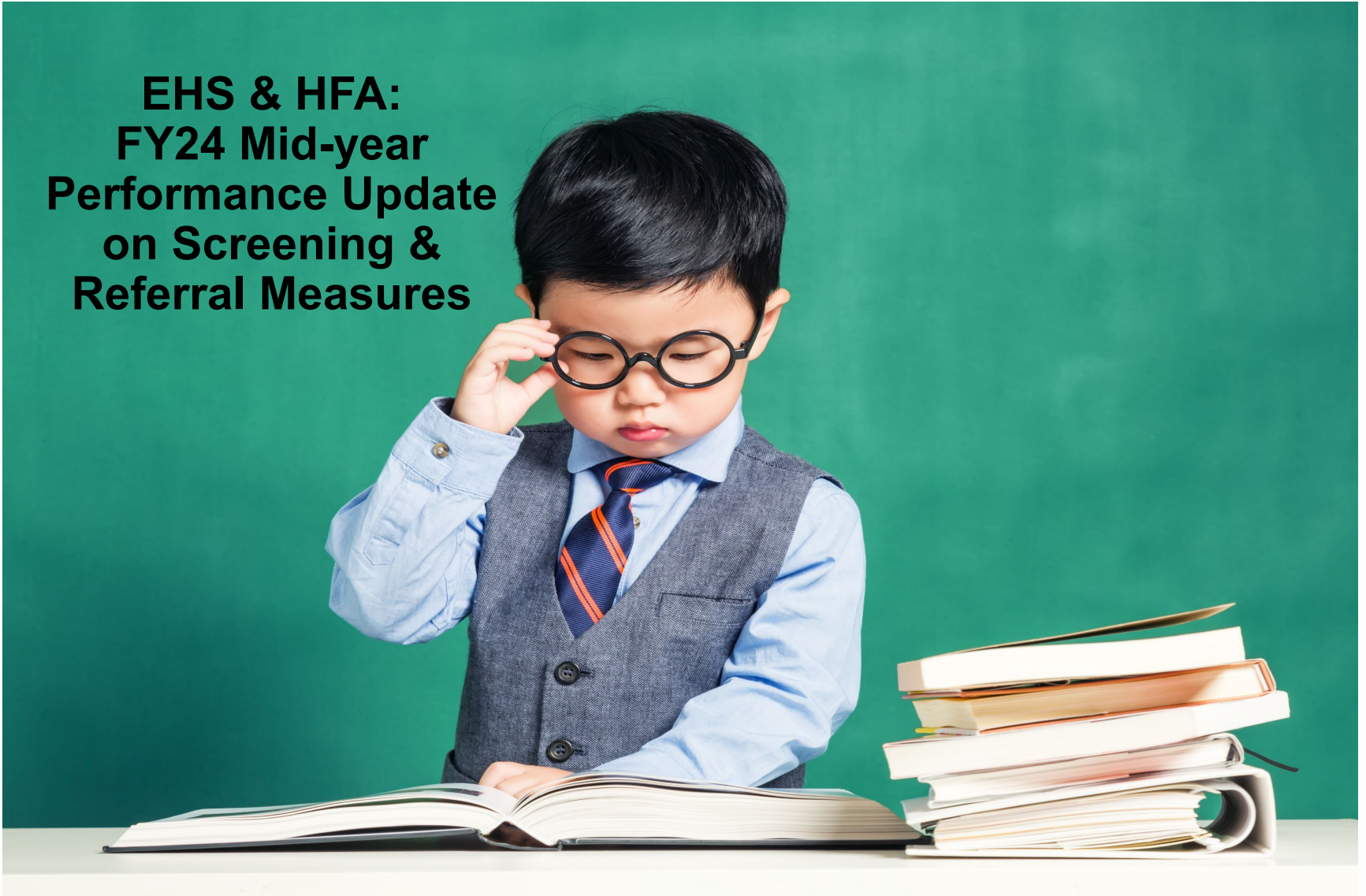
Improved coordination
and referrals for
community resources

BENCHMARK TABLE

19 Performance Measures across 6 Benchmarks

Benchmark	Maternal and Newborn Health
Measures	<ol style="list-style-type: none"> 1. Percent of infants (among mothers enrolled in home visiting prenatally before 37 weeks) who are born preterm following program enrollment. 2. Percent of infants (among mothers who enrolled in home visiting prenatally) who were breastfed any amount at six months of age. 3. Percent of primary caregivers enrolled in home visiting who are screened for depression using a validated tool within three months of enrollment (for those not enrolled prenatally) or within three months of delivery (for those enrolled prenatally). 4. Percent of children enrolled in home visiting who received the last recommended visit based on the American Academy of Pediatrics (AAP) schedule. 5. Percent of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within eight weeks (56 days) of delivery. 6. Percent of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and who were referred to tobacco cessation counseling services within three months of enrollment.
Benchmark	Child Injuries, Abuse, Neglect and Maltreatment and Emergency Department Visits
Measures	<ol style="list-style-type: none"> 7. Percent of infants enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing or soft bedding. 8. Rate of injury-related visits to the Emergency Department (ED) since enrollment among children enrolled in home visiting. 9. Percent of children enrolled in home visiting with at least one investigated case of maltreatment following enrollment within the reporting period.
Benchmark	School Readiness and Achievement
Measures	<ol style="list-style-type: none"> 10. Percent of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool. 11. Percent of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories and/or sang songs with their child daily, every day. 12. Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool. 13. Percent of home visits where the primary caregivers enrolled in home visiting were asked if they have any concerns regarding their child's development, behavior or learning.
Benchmark	Crime or Domestic Violence
Measure	<ol style="list-style-type: none"> 14. Percent of primary caregivers enrolled in home visiting who are screened for interpersonal violence (IPV) within six months of enrollment using a validated tool.
Benchmark	Family Economic Self-Sufficiency
Measures	<ol style="list-style-type: none"> 15. Percent of primary caregivers who enrolled in home visiting without a high school degree or equivalent who subsequently enrolled in, maintained continuous enrollment in, or completed high school or equivalent during their participation in home visiting. 16. Percent of primary caregivers enrolled in home visiting who had continuous health insurance coverage for at least six consecutive months.
Benchmark	Coordination and Referral for other Community Services
Measures	<ol style="list-style-type: none"> 17. Percent of primary caregivers referred to services for a positive screen for depression who receive one or more service contacts. 18. Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner. 19. Percent of primary caregivers enrolled in home visiting with a positive screen for IPV (measured using a validated tool) who receive referral information to IPV resources.

EHS & HFA: FY24 Mid-year Performance Update on Screening & Referral Measures



**Performance Measure 12:
Developmental Screening, EHS & HFA**

FY23	
Midyear	Annual
56.5%	58.4%

Measure Definition	FY24 Midyear
Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool	66.0% (155/235)

**Performance Measure 18:
Completed Developmental Referrals,
EHS & HFA**

FY23	
Midyear	Annual
37.5%	47.4%

Measure Definition	FY24 Midyear
Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner	28.0% (7/25)

ASQ REFERRAL TRACKING & FOLLOW-UP – INDEX CHILD

For Children who Screened at Risk for Developmental Delay

	FOLLOW-UP	INFORMATION
Type of Service	Date Provided	About Individualized Developmental Support
1) <i>Individualized Developmental Support</i>	/ / 20	Individualized Developmental Support can be done at any time by a home visitor and counts as a completed referral regardless of whether the client is also referred to Early Intervention or another community service. Examples of this include activities by model curriculum, ASQ activities, and CDC materials to target the developmental skill or domain for which there was a concern or positive screen.

	INITIAL REFERRAL CONTACT	FOLLOW-UP	INFORMATION
Type of Service	Date Service Referral Contacted	Date Service Started/Received	About Another Community Service
2) <i>Another Community Service:</i> <i>Type:</i> _____	/ / 20	/ / 20	A community services must be started or received within 30 days of initial contact to count towards the measure. Examples may include referrals to health or mental health services, speech, occupational or physical therapy services, parent-child groups, parent classes or early literacy supports.

	INITIAL REFERRAL CONTACT	FOLLOW-UP	INFORMATION
Type of Service	Date EI Referral Contacted	Date of EI Evaluation	About Early Intervention Services
3) <i>Early Intervention Services</i>	/ / 20	/ / 20	An EI evaluation must occur within 45 days of initial contact to count towards the measure.

**Performance Measure 3:
Depression Screening, EHS & HFA**

FY23	
Midyear	Annual
65.9%	67.4%

Measure Definition	FY24 Midyear
<p>Percent of caregivers who received a timely screen* for depression using a validated tool <i>*(a) within 3 months of enrollment for those not enrolled prenatally;</i> <i>(b) within 3 months of delivery for those enrolled prenatally</i></p>	<p>60.6% (63/104)</p>

**Performance Measure 17:
Completed Depression Referrals,
EHS & HFA**

FY23	
Midyear	Annual
0.0%	6.3%

Measure Definition	FY24 Midyear
Percent of caregivers referred to services for a positive screen for depression who receive one or more service contacts	15.8% (3/19)

**Performance Measure 14:
Intimate Partner Violence Screening,
EHS & HFA**

FY23	
Midyear	Annual
56.4%	60.0%

Measure Definition	FY24 Midyear
Percent of primary caregivers enrolled in home visiting who are screened for interpersonal violence (IPV) within six months of enrollment using a validated tool.	56.6% (47/83)

**Performance Measure 19:
Intimate Partner Violence Referrals,
EHS & HFA**

FY23	
Midyear	Annual
33.4%	71.4%

Measure Definition	FY24 Midyear
Percent of caregivers enrolled in home visiting with positive screens for intimate partner violence (IPV) who receive referral information to IPV resources	50.0% (N <= 10)

**Performance Measure 6:
Tobacco Cessation Referrals, EHS & HFA**

FY23	
Midyear	Annual
25.0%	16.7%

Measure Definition	FY24 Midyear
Percent of caregivers enrolled in home visiting who <u>reported using tobacco or cigarettes at enrollment</u> and who were referred to tobacco cessation counseling services within three months of enrollment.	<p>40.0% (N <= 10)</p> <p><i>Data missing:</i> 33.3%</p>

M1 - THEO MIECHV ENROLLMENT Index Parent



10. Does Index Parent currently use tobacco products? (Tobacco includes combustibles [cigarettes, cigars, pipes, hookahs, and bidis], non-combustibles [chew, dip, snuff, snus, and dissolvables], and ENDS)

Yes → Go to Question 10a. No → Go to Question 11. Unknown → Go to Question 11.

10a. If yes, is parent currently receiving tobacco cessation services?

Yes

No

Unknown

To meet Tobacco Cessation Referral Measure: Record Date Referred to Tobacco Cessation Services within 3 months of Enrollment on M2B-MIECHV Referrals Tracking & Follow-up form.

EHS & HFA: FY24 Midyear Measure Performance Summary

➤ Screening Measures

- PM 12 – Developmental Screening: Improved steadily/greatly to 66% from 57% in FY23 midyear
- PM 3 – Depression Screening: Declined to 61% from 66%
- PM 14 – IPV Screening: Stayed the same at 56% but declined from 60% in FY23 annual period

➤ Referral Measures (PMs 18, 17, 19, and 6)

- Performance fluctuation due to small denominator N's
- Focus on providing follow-up services
- Utilize the lists of individual clients distributed by the state Data team

Available on Basecamp: 2024-2025 MIECHV CQI Learning Collaborative

- **Tables: Statewide FY24 Midyear Performance for MIECHV Screening and Referral Measures, EHS & HFA**
- **Analysis Methods: MIECHV Performance Measures**



Reflections & Questions

CQI Resources, Materials & Tools

CQI Trainings

- OR MIECHV website (updates to come)
- Virtual Office Hour and/or 1:1

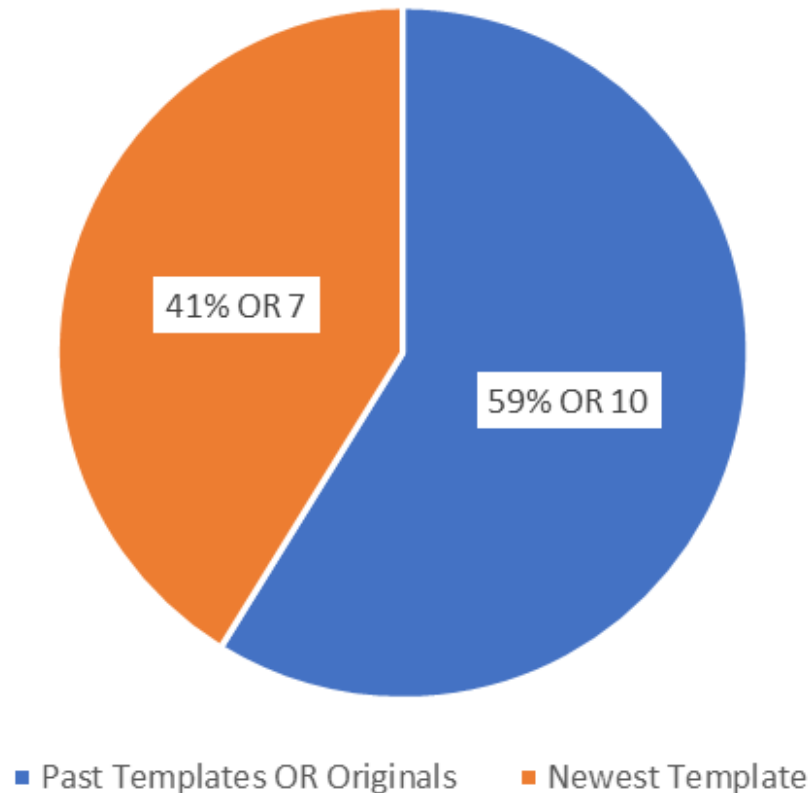
Basecamp

- Docs & Files Resources
 - S&R PM FY23-24
 - EHS/HFA Measure Definition & Analysis
- Model specific sites

Data Collection Schedule Tool

MIECHV Annual Report

MIECHV EHS/HFA Data Collection Schedule Tool Survey Findings



MIECHV Data Collection Schedule Tool

- Confirm your tool has accurate up-to-date date ranges
- The latest tool with up-to-date date ranges will be housed here: [THEO User Resources: MIECHV EHS HFA](#)

MIECHV Data Collection Schedule Tool

THEO User Resources: MIECHV EHS and HFA

- Home Visiting in Oregon
- Family Connects Oregon
- Tracking Home Visiting Effectiveness in Oregon (THEO)
- Maternal, Infant and Early Childhood Home Visiting
- MCH Public Health Nurse Home Visiting Programs
- Home Visiting System
- Home Visiting Training Resources
- THEO Data System
- Contact Us
- MIECHV Contacts

THEO Login Request Form

To request a new THEO login, a supervisor or super user fills out and signs page 1 of the [THEO User Request Form](#) , and the new user sign the final page. Then the form is submitted to [THEO App Support](#).

Upon receipt of the THEO User Request form, the THEO Support team will work with the new user to schedule a 1:1 or small group training on how to use THEO.

Data Collection Schedule

Updated 1/17/2024

[EHS/HFA Data Collection Schedule](#)

Data Collection Schedule is available to support home visitors in completing client data forms on-time.

The data collection schedule tells you when each data form is due for a client. It is also a tool to track which forms have been completed and which have not. Be sure to create an individual data collection schedule for each parent or family you enroll.

Please note: The schedules look best when printed as a PDF rather than an Excel document.

Release Notes

- May 16, 2022

THEO Links

- [THEO Home](#)
- [THEO Login Page](#)
- [MIECHV EHS/HFA: THEO User Resources](#)
- [MIECHV THEO Surveys](#)
- [Babies First! and CaCoon: THEO User Resources](#)
- [Babies First! and CaCoon THEO Surveys](#)
- [Frequently Asked Questions](#)
- [Contact Us](#)

Application Support

Monday - Friday, 8 a.m. to 5 p.m.

theo.support@odhsoha.oregon.gov

*If you need to email client

Spencer.K.Davis@oha.oregon.gov

MIECHV Annual Report Important Upcoming Dates

- **August 5th** – Reminder emails will be sent out to you to enter all forms and visits into THEO.
- **August 23rd** – An email with a list of data corrections will be sent out to you.
- **September 13th** – **Deadline to complete all corrections and enter all forms and visits into THEO.**



Thank you!

Please contact us with questions!

Adejoke.babatunde2@oha.oregon.gov

Spencer.k.davis@oha.oregon.gov

Jin.t.song@oha.oregon.gov

Laura.a.zukowski@oha.oregon.gov