

## Part 3b. Continuous Quality Improvement

The definition of CQI is: “The systematic use of process and/or outcome evaluation findings to improve the implementation and outcomes of prevention strategies and prevention system capacity activities.”

The purpose of CQI is: “To institutionalize the use of evaluation data for prevention strategy improvement.”

### Four steps of the CQI process (PDCA Cycle):

1. PLAN activities and strategies
2. DO (implement and evaluate)
3. CHECK (review evaluation findings)
4. ACT (make improvements to activities and strategies based on the evaluation findings—*this step is really important!*)

### Issues to consider in CQI planning

- Who are the stakeholders that need to be involved in the CQI process?
  - Ideally, CQI discussions bring together a mix of stakeholders who helped to plan, implement, and evaluate the activities
  - Stakeholders who will be responsible for implementing any needed changes to activities should be closely involved, including administrators and those who directly implement programs
  - Involving participants, such as representatives from a youth advisory committee, can also be a valuable way to develop concrete and relevant ideas for improvement
- How often is the evaluation data reviewed, and what is the timeline for effective CQI review and feedback?
  - Evaluation data should be reviewed as quickly and frequently as is feasible.
  - Many programs prepare annual evaluation reports. Reviewing the results of an annual evaluation report is an excellent time to develop (or re-visit) a CQI plan. However, more frequent CQI discussions (monthly, quarterly, or semi-annually) would produce a more effective CQI process. A strong CQI process typically involves a balance between frequent CQI “check-ins” (discussions among key stakeholders) and semi-annual or annual updates of the CQI plan (more formal and documented).
- What internal processes are needed to do CQI?
  - Step #3 (“Check”) typically involves a review of the logic model and evaluation results, followed by a discussion about how each activity could be improved.
  - Organizations need internal processes that *prompt* them to re-visit the logic model, evaluation results, and previous plans for improvement on a *regular basis* (such as at a quarterly committee meeting, or an annual report to a funder).
  - Ideas for improving activities should be clearly documented and the document should be shared with a wide variety of stakeholders. Although one person may be the “keeper” of the CQI document to ensure that it doesn’t get lost, the CQI process needs to “belong” to several key stakeholders who will take responsibility to following through on improvement strategies.

### Examples of questions CQI can answer

- If outcomes have been met, what factors contributed to those outcomes being met? How can we maintain or expand those factors to ensure that we continue to achieve desired outcomes?
- If outcomes have not been met, what factors contributed to the situation? How can we overcome these barriers to success in the future? What needs to change?

- Did participants receive the intended dosage? If not, why not? What can be done to increase dosage in the future?
- Were the skill-based activities sufficient? If not, what can be done to enhance skill-building?
- Were the staff levels sufficient? Were the staff sufficiently trained? If not, what training is needed?
- Were there any intended or unintended adaptations to an existing model or curriculum? Were the adaptations successful and should they be continued in the future?

Sources: *DELTA and Empower Programmatic Guidance for Continuous Quality Improvement (CQI) & Sustainability* (7/10), *DELTA CQI Webinar* (5/10), and *CDC PIES CQI Step 9: Continuous Quality Improvement* (5/10).