

### **Quality Improvement Principles:**

These principles flow through all modern methods of quality improvement. The facilitator's guide only includes 4 but the 5<sup>th</sup> has become more and more prominent lately and is critical for the learning needed in OVC programs.

1. Quality improvement focuses on **the client** – children/youth, families, communities – how we can make a difference for them.

*We are here as programming people because there are needs out there that we are supposed to be meeting. We are here because of them. We need to orient our work to what will really make a difference for them. Desired outcomes as the focus of our service standards; measuring outcomes to see if we are meeting our goals...*

2. Quality improvement focuses on examining and investigating **systems and processes of care** – not just what we have to do it with but *how* we do it and how we can do it better.

*We must understand work as processes and systems if we are to make improvements. We need to focus on identifying strengths, weaknesses/bottlenecks/barriers, and opportunities for improvement. We need to understand who is involved in the process, how are we organized, what types of inputs, resources, time are needed; What are the resources in our community?*

3. Quality improvement focuses on using **data for decision-making** – what do we know and what do we need to know.

*We need to base our work on what we know works. Remember, all improvement comes from change but no all change is an improvement. Data does not necessarily mean surveys. There are many ways to collect evidence, including discussions with clients and providers. Much data can (and should be) collected by those who are going to use it for decision-making "are we meeting the standards?" "is our change an improvement?" "are we making a measurable difference for our children?"*

4. Quality improvement focuses on engaging those working in the process (**teams**) to improve care by analyzing their performance in light of service standards, developing ideas, and testing and assessing changes

*Key to quality improvement is empowerment of those who work in the process to make improvements. Quality improvement is not about someone up above deciding how things will be done operationally. Standards and policy come from above, but the operationalization of those need to be worked out by those who have intimate knowledge of the process. Those in the process can also include community members, local government and others who play a role or help make decisions.*

5. Quality improvement focuses on **shared structured learning** within groups and across organizations.

*This principle was not one of the original 4 but is critical to effective and efficient improvement, where teams and organizations can learn from one another. There are many forms this might take, but we don't want everyone "reinventing the wheel"*