

Operational QI Plan Name			Plan Owner			Report Deadline	Plan Start Date				
HANDS: Referral Screen Assessment			Beth Willett			Aug. 31, 2013	Dec. 1, 2012				
Scorecard Measures or Initiatives Affected	Data Frequency	Track Scorecard Measures here if more frequent than quarterly								Desired Performance Direction	
Scorecard Measure or Initiative: % of referral screens assessed with a parent assessment	Monthly	Date	12-Dec	13-Jan	13-Feb	13-Mar	13-Apr	13-May	13-Jun	13-Jul	↑
		Target									
		Actual	0%	11%	16%	22%	24%	56%	54%	52%	
Scorecard Measure or Initiative: % of eligible referral screens receiving no-contact from HANDS employee	Quarterly	Date	Dec 2012-March 2013				13-Apr	May-July 2013			↓
		Target									
		Actual	8%				0%	0%			
Additional Operational QI Data to Collect	Data Frequency	Track all operational QI measures here, regardless of frequency									
Op QI Indicator: Incidence of babies aging-out (>12 weeks) noted as reason for not completing parent assessment	Quarterly	Date	Nov-March	April-June							
		Target	0%	0%							
		Actual	15%	0%							
Op QI Indicator:		Date									
		Target									
		Actual									
Op QI Indicator:		Date									
		Target									
		Actual									
Action Plan											
What (Major Action Step)	By Whom (Lead)	Target Date	Revised Date	Actual Date	Comments	Evidence					
Essemble QI Team	Beth Willett	12/12/13	01/13/13	02/11/13	Holidays delayed start of team; Director and HANDS Director had to pick appropriate team members	<b>Source of Evidence for Plan</b> HANDS services have measureable outcomes related to developmental progress and incidence of abuse. Purple-crying stage affects parents in first weeks after baby's birth, therefore it is best to contact and engage families prior to this stage. After this point, families are likely to have developed their own support systems and not accept HANDS services.					
Develop team on purpose, charter, QI tools	Beth Willett	01/13/13	02/13/13	02/11/13							
Gather initial data on current process	Beth Willett, Krystal Walling	01/13/13		04/13/13	Data collection was changed throughout Plan stage due to suggestions from QI coach; process mapping and cause-and-effect diagramming occurred in team meetings throughout Feb. and March						
Process map current Parent Visit processes occurring in WIC and Family Planning clinic	HANDS QI team	01/13/13		02/25/13							
Cause-and-effect diagram to identify root causes of why eligible referral screens are not	HANDS QI team	02/13/13		03/11/13							
Identify potential solutions	HANDS QI team	03/13/13		04/01/13		<b>Evidence We Will Generate</b> If lead parent visitor management style is appropriate for a high-functioning HANDS program.					
Implement improvement theory process changes	Krystal Walling	03/13/13		05/01/13	Process changes: reinstate gift card incentives for families to complete PV; change in organization of referral book; different lead PV assigned without caseload or managerial responsibilities; same forms being used in WIC and FP clinic						
Study data to determine if process changes are improvements	Beth Willett, Krystal Walling	07/13/13		08/01/13							
Adopt, Act, or Return to Plan stage	HANDS QI team	07/13/13		08/12/13	Final QI team meeting; this project has lead to the start of another HANDS QI project concerning the average						
Submit final grant report and invoice	Beth Willett	08/27/13		08/27/13							
Develop PHQIX submission	Beth Willett	08/30/13									