

2020 Plan-Do-Study-Act (PDSA) Collaborative on Quality Worker Visits Project Report

Background

From September 2020 through July 2021, the Organizational Process Improvement (OPI) unit at the Wisconsin Child Welfare Professional Development System (WCWPDS) facilitated a Plan-Do-Study-Act (PDSA) Collaborative. In a PDSA Collaborative, local child welfare agencies send a team comprised of workers and a supervisor(s) to learn how to implement organizational change using the PDSA model. All agency teams in the Collaborative focus on the same topic but choose and test their own practice changes.



What is the Plan-Do-Study-Act Model?

Based on the steps of the scientific method, Plan Do Study Act (PDSA) is a four-stage problem-solving model used for improving a process or carrying out a change. PDSA focuses change efforts by helping teams to define their goal, systematically plan a change, evaluate outcomes using qualitative and/or quantitative metrics, examine implementation lessons, and advance positive changes in a subsequent cycle.



PDSA Collaborative Topic Selection

A statewide advisory committee, the Continuous Quality Improvement Advisory (CQI) Committee, used multiple data sources and activities including Wisconsin's Child and Family Services Review data, eWiSACWIS reports, a child protective service worker flash survey, systems mapping, and root cause analysis to choose the PDSA Collaborative topic and formulate the PDSA Collaborative's mission and goals.

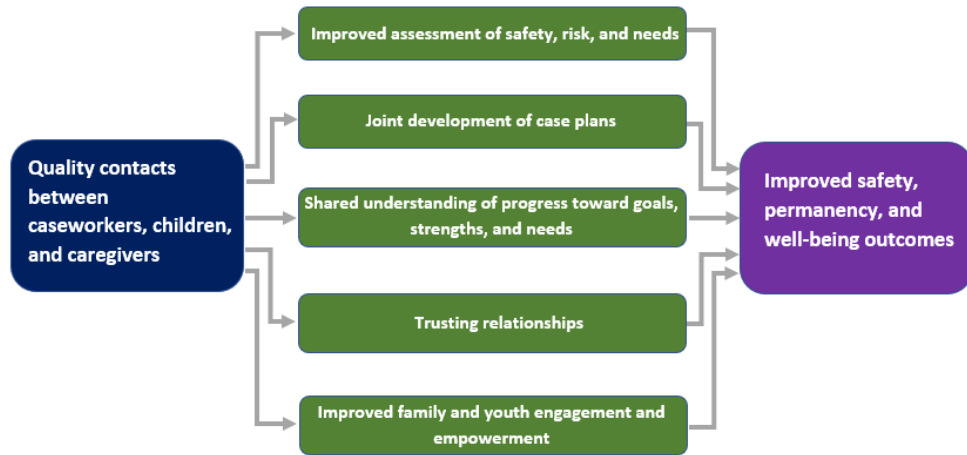
2020 PDSA Collaborative Topic & Mission

The topic of the 2020 PDSA Collaborative was improving the quality of visits with children, families, and out-of-home care providers. ***The mission of the 2020 PDSA Collaborative is for ongoing caseworkers to have intentional, purposeful, and goal-directed visits with children, parents, and out-of-home care providers that are respectful, tailored to the unique needs of the child and family, and reflect critical-thinking about assessment and case planning in order to build trusting relationships.***

To learn more, read the PDSA Collaborative Charter: <https://wcwpds.wisc.edu/organizational-development-unit/organizational-process-improvement/plan-do-study-act-pdsa-collaborative/>

Theory of Change and Components of a Quality Visit

The Capacity Building Center for States' (CBCFS) theory of change shows how quality worker visits impact child and family outcomes. Three of the seven core components of a quality caseworker visit as defined by the CBCFS were chosen by the CQI Advisory Committee as focus areas for the 2020 PDSA Collaborative. The three focus areas represented the committee's assessment of greatest potential growth areas and allowed opportunities for shared learning between teams.



Source: [Capacity Building Center for States \(2017\). Defining Quality Contacts.](#)

The 2020 PDSA Collaborative chosen focus areas and goals were:

1



Preparation and planning ahead of visits tailored to circumstances of child, youth, or family

- Goal 1a: Workers thoroughly understand components of prep and planning for visits
- Goal 1b: Workers proactively schedule prep and planning time
- Goal 1c: Supervisor support and monitor workers in their prep and planning
- Goal 1d: Families experience visits more favorably as a result of improved worker prep and planning

2



Follow-up on tasks or concerns discussed previously (this may include difficult conversations about why certain things did not happen as planned)

- Goal 2a: Workers understand components of effective follow-up and its value for building trusting relationships.
- Goal 2b: Workers develop and implement a system to create and track follow-up tasks.
- Goal 2c: Supervisors regularly elicit and process specific follow up tasks with workers
- Goal 2d: Workers increase their preparedness and confidence in approaching difficult client conversation. Supervisors support workers in having difficult client conversations.

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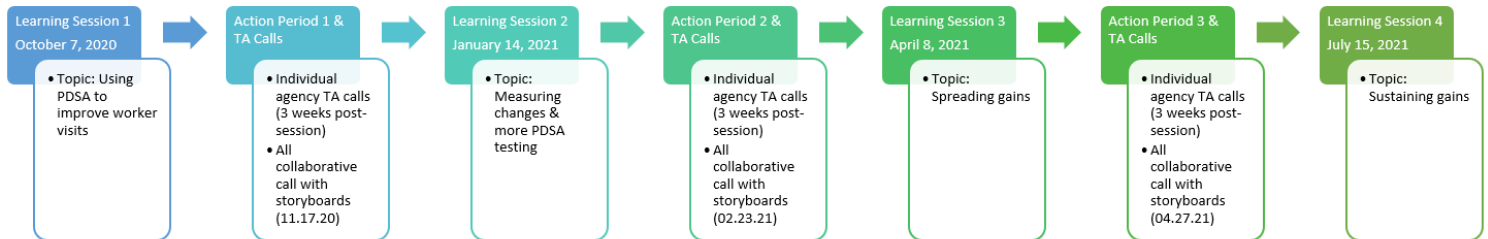
Documentation to support monitoring and follow-up.

- Goal 3a: Case notes accurately and succinctly reflect the quality of a caseworker visit.
- Goal 3b: All documentation is up-to-date and inputted timely.
- Goal 3c: The purpose, intent and outcome are documented for all types of visits.




2020 PDSA Collaborative Format

PDSA Collaboratives emphasize active learning techniques including setting and writing goals, making action plans, bottom-up solution testing, measuring change, and planning for spread and sustainability. Teams share ideas with storyboards. Teams are also provided with best practice ideas in a [change package](#). The format of the collaborative is shown below.

2021 PDSA Collaborative on Quality Caseworker Visits Timeline



2020 PDSA Collaborative Teams & Outcomes

PDSA Team & Focus	PDSA Activities	Outcomes
 <p>Chippewa County Human Services <i>Empowering people to help themselves.</i></p> <p>Focuses: Prep & Planning, Documentation</p>	<ul style="list-style-type: none"> Ongoing workers implemented 3 structured case note templates (in-home, out-of-home with providers, out-of-home with parents) Workers set aside fifteen minutes to prep for meetings Shared structured notes with Comprehensive Community Services (CCS) team to align service goals 	<ul style="list-style-type: none"> Workers reported achieving greater consistency in visit focus by routinely addressing safety and permanency in meetings; workers reported spending less time letting a family's crisis drive meetings by re-directing the focus to next steps for safety & permanency Workers believe families have clearer direction as to next steps and understand expectations Barriers: building in time to prep can be a challenge, but workers reported that overall time spent in prep led to greater case success and earlier case closure
 <p>1851 LC LA CROSSE COUNTY <i>Exceptional services. Extraordinary place.</i></p> <p>Focuses: Documentation & Follow-up after visits</p>	<ul style="list-style-type: none"> Ongoing workers implemented a structured template case note Created a primer that defines content to go in each case note section Added new documentation on action steps/follow-up within monthly notes Implemented a tracking system that creates accountability for completing worker action steps 	<ul style="list-style-type: none"> Workers report more focused case notes with relevant details (cut down on 'noise' in notes) Saved documentation time Workers felt they better remembered what all parties agreed to accomplish and followed up Supervisors and workers reported increased accountability for completing action steps as they were easily identifiable in notes Barriers: additional analytical work by workers to shift from documenting chronologically to structure note by theme
 <p>Vilas COUNTY WISCONSIN SOCIAL SERVICES</p> <p>Focuses: Prep & Planning, Documentation</p>	<ul style="list-style-type: none"> Ongoing workers implemented a comprehensive visit checklist that also includes a structured case note template Used PDSA testing and unit trainings to on-ramp all agency workers to using same checklist and case note template to save time, increase organization, and improve agency practice 	<ul style="list-style-type: none"> Workers report more organized case notes Workers report getting documentation tasks (and ticklers) done more completely and on time Barriers: PDSA team had to plan and implement several strategies to build buy-in among co-workers not on the PDSA team to implement changes More work is being done to improve the use of a <u>digital</u> case note template using technology to save more time and decrease worker stress

PDSA Team & Focus

PDSA Activities

Outcomes



Focus:
Documentation

- Workers implemented a structured case note contact checklist
- Workers included their perception of caregiver's current status in stages of change model in each note
- Family support assistants (FSA's, who perform family interaction and visit supervision) also implemented a contact checklist note

- Workers noted that the structured notes saved time; made it easier to find information especially when preparing court documents and permanency plans
- Workers reported it was easier to follow-up on subsequent visits
- FSA's reported improve ability to identify visit quality & to see changes in caregivers over cycles of visits
- Communication about identifying safety concerns improved between workers & FSA's
- Barriers: initial additional time investment & rolling out changes to other units



Focus:
Follow-up

- Workers developed a practice for facilitating meetings (family team meetings, home visits, and staffings) using an action planning tool with families to improve communication, & improve follow up on goals to achieve permanency faster

- Workers felt more confident in the roles and steps towards meeting case goals
- Workers reported increased rapport with families and better understanding of needs
- Families reported they were heard to a greater extent
- Meetings were more organized, more transparent, and had more accountability



Focuses: Prep & Planning; Documentation

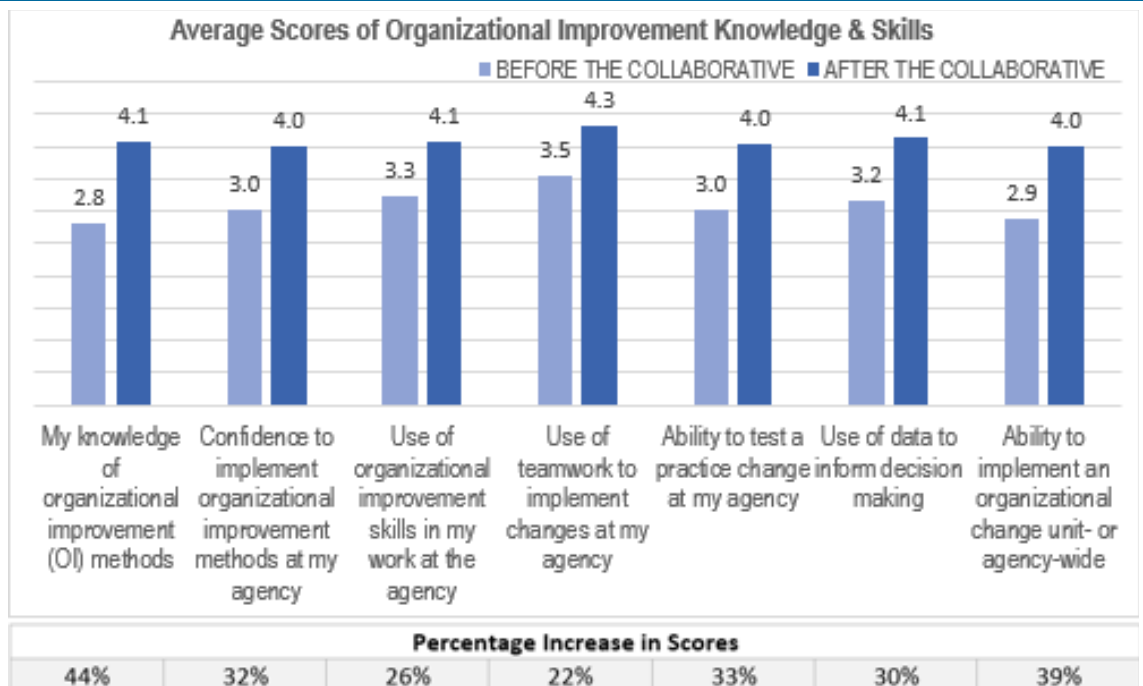
- Workers tested and adopted a visitation preparation and summary sheet that included a structure case note template

- Workers noted that structured notes saved time (5-10 min. per note) and were more thorough
- Comprehensive notes improved worker decision-making; and made it easier for other co-workers such as on-call, access, or ongoing workers covering a case during an absence to find relevant information
- Barriers: abandoned a different tool before final version; some sections on tool don't fit every meeting; roll out to whole unit took time

Agency & PDSA Team Outcomes

Organizational Improvement Knowledge and Practices

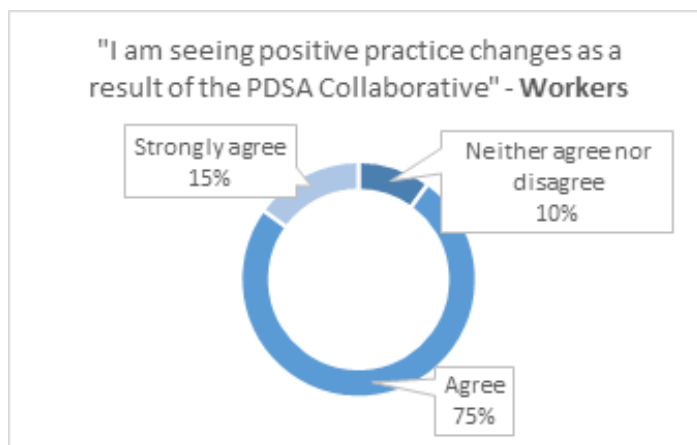
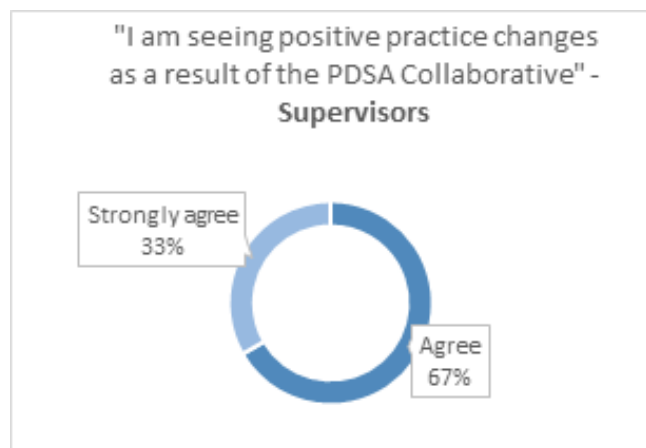
78% of collaborative participants answered questions related to their organizational improvement knowledge before (in September 2020) and at the end of the collaborative (in July 2021). **On every indicator, average scores for self-report ratings increased after collaborative participation** (scale 1- none or very low to 5- very high).



Worker and Supervisor Ratings of Practice Change

At the end of the 2020 PDSA Collaborative (July 2021), workers and supervisors were asked to complete a survey to share their thoughts on if the PDSA Collaborative led to changes in how individuals approached their work as well as overall changes within the agency. A total of 20 workers (63 percent) and six supervisors (67 percent) responded to the survey. The questions were asked in a Likert scale format where 1 = strongly disagree, 3 = neither agree nor disagree, and 5 = strongly agree.

Both worker and supervisor respondents were clear that they are seeing positive practice changes as a result of the PDSA Collaborative. The figures below, display these results.



Next, workers and supervisors were asked to describe how the collaborative impacted their practice. **Overwhelmingly, improvements for both groups were displayed in better organization of their work and improved quality of the practice.** Also, approximately half of both groups cited improved productivity and personal confidence. The figures for both groups are seen in the table below.

"I have seen an impact in the following areas as a result of the PDSA Collaborative"

	Supervisors		Workers	
	Count	Percent	Count	Percent
Increased quality in practice	6	100%	16	80%
Better organization in my work	5	83%	18	90%
Improved productivity	3	50%	9	45%
Increased confidence	3	50%	8	40%
Stronger relationships with clients	3	50%	6	30%
Stronger relationships with co-workers	3	50%	6	30%
More respect from co-workers	1	17%	2	10%
TOTAL	6	100%	20	100%

The surveys also asked workers and supervisors to assess how their agency stands on a range of themes from organizational culture to peer relationships. In these measures, we again saw improvement across both groups. **The largest improvements for workers were seen in the areas that initially needed the greatest work (organizational readiness for change and organizational climate).** Supervisors also saw improvement, with the largest improvements coming in their assessment of learning culture and peer relationships. The averages of all questions may be seen in the table below.

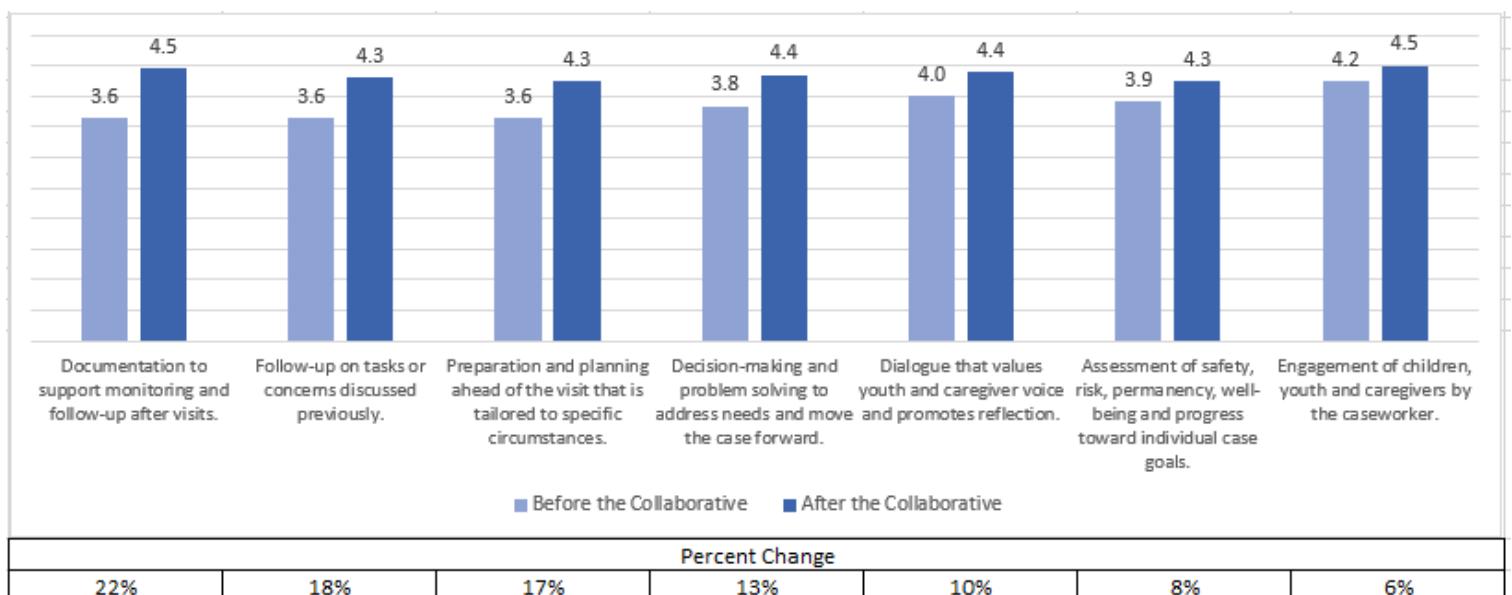
Worker and Supervisor Rankings on their Agency and Relationships, Before and After the Collaborative

Theme	WORKER Average (Before)	WORKER Average (After)	Difference	SUPERVISOR Average (Before)	SUPERVISOR Average (After)	Difference
Organizational Readiness for Change	2.6	3.1	0.5	3.3	3.6	0.3
Organizational Climate	3.5	4.0	0.5	4.2	4.6	0.4
Learning Culture	3.7	3.8	0.1	4.1	4.6	0.5
Psychological Safety	4.2	4.4	0.2	4.3	4.5	0.2
Peer Relationships	4.3	4.3	0	4.1	4.7	0.6

We asked workers to rank their current confidence and current practice level regarding the seven components of ongoing caseworker visit practice. Similarly, supervisors were asked to rank their individual workers skill in these seven components before and after the PDSA Collaborative started. Both groups showed improved scores across each of the seven components.

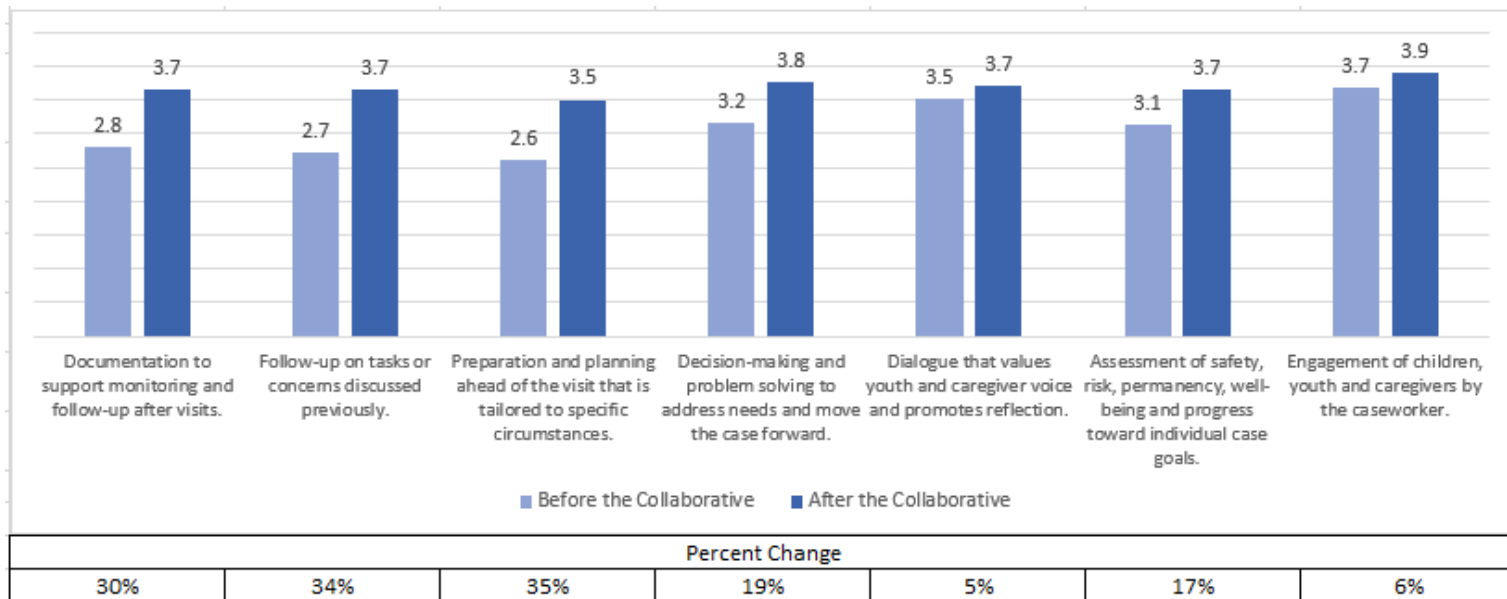
In reviewing worker's responses regarding their current confidence in the seven components of ongoing caseworker visit practice, a five point scale was used where 1 = "Not at all confident" and 5 = "Very confident". **The greatest improvement was seen in the three areas addressed directly in the collaborative.** For example, the topic of "Documentation to support monitoring and follow-up after visits" went from having the lowest average of 3.6 to having the highest average of 4.5. **Interestingly, the four other topics not directly addressed in the collaborative also improved,** with the largest improvement being seen in "Decision-making and problem solving to address needs and move the case forward". This may be due to the fact that through the PDSA process many participants took a more holistic, long-term view of the case and stopped focusing on managing crises. The averages for all seven components are seen in the graph, below.

Worker Averages of their Current Confidence in Performing Each of the Following Components of Ongoing Caseworker Visit Practice with Children, Caregivers, and Out-of-Home Care Providers; Before and After the Collaborative



Mirroring the results described above, when workers were asked to rank their current practice within the seven components of ongoing caseworker visit practice, they also ranked their areas of greatest improvement within the three areas addressed directly in the collaborative. The five point scale used here was 1 = Needs a great deal of improvement and 5 = Exceptional. Again, all seven components showed improvement. These results are seen in Table 4, below.

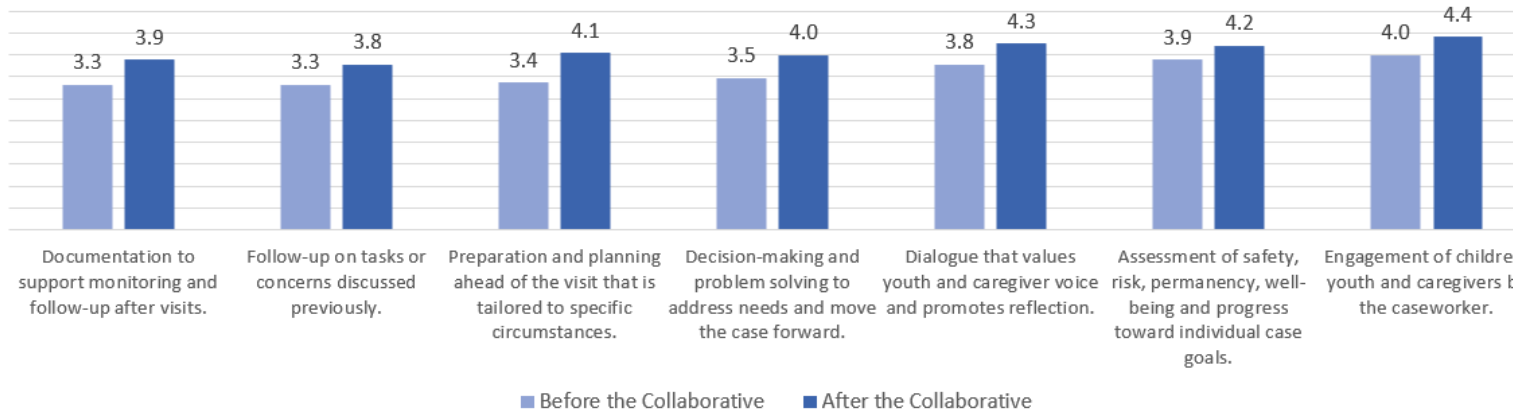
Worker Averages of their **Current Practice Level** in Performing Each of the Following Components of Ongoing Caseworker Visit Practice with Children, Caregivers, and Out-of-Home Care Providers; Before and After the Collaborative



As stated, supervisors were also asked to assess their individual workers for their practice level in each of the seven components of ongoing caseworker visit practice – as they saw it before and after the PDSA Collaborative. A total of five supervisors answered this question and assessed 19 workers. **Ninety percent of these workers were viewed as having improved over this time span. Of the ten percent that were not noted as having improved (two workers), these workers had baseline marks of ‘above average’ and ‘exceptional’, leaving little to no room for improvement.**

The scale with which workers were assessed was based on a five-point Likert scale, with 1 = "Needs a great deal of improvement" and 5 = "Exceptional". Each of the seven components of caseworker visits improved. Supervisors initially viewed the three components of ongoing casework directly assessed in this collaborative as the areas of least strength. These three areas were determined to have the largest change and in July 2021 averaged between 3.8 and 4.1 – indicating above average practice. The rankings may be seen in the table, below.

Average Rankings by Supervisors of their Worker's Strengths in the Seven Components of Ongoing Caseworker Visit Practice with Children, Caregivers, and Out-of-Home Care Providers; Before and After the Collaborative



Percent Change						
30%	34%	35%	19%	5%	17%	6%

Caregiver and Provider Outcomes

Caregiver/Guardian Survey Results on their Worker's Visit Practice

In addition to assessing change through surveying agency workers and supervisors, the Collaborative also sought to gain the perspective of the families involved in these caseworker visits. The PDSA Collaborative requested county participants to provide surveys to caregivers and guardians both at the beginning (October 2020) and at the end of the Collaborative (June 2021). Surveys were anonymous, provided electronically or through paper, and were available in English or Spanish. A total of 14 questions were asked to assess family thoughts on the quality of the visits with their caseworkers.

All survey responses were reviewed, and a focus was given to the three counties that had similar counts of surveys returned at the beginning and end of the collaborative. Of the three counties reviewed, a total of 20 surveys were received in Fall 2020 and 21 surveys were received in Spring 2021. Respectively, these surveys represent **25 percent and 20 percent** of CPS cases held by PDSA Collaborative workers within these three counties. While the responses provide important insight, the small response rate is not representative of these three counties, the Collaborative, or the state.

Also, while the identities of the respondents in these surveys was not tracked, it is likely that different families were surveyed in these two different time periods. Therefore a before and after review is not possible.



While this before and after review of the caregiver survey results is not possible, both surveys do provide important insight into how respondents view the counties and caseworkers they work with. Questions were asked using a five-point Likert scale ranging from 'strongly disagree' to 'strongly agree'.

When reviewing the responses by the percent that fell in the positive 'agree' and 'strongly agree' category, it was found that **across all categories, both before and after the collaborative, respondents were more positive than negative regarding the job done by their caseworker.** Across both time periods, the most-positive responses came from people agreeing or strongly agreeing that their social worker explains the purpose of the meetings, they want to make use of the services CPS is providing, and the social worker makes good use of the time they have together when they meet. The full responses for the 14 items are seen below, followed by direct quotes from the respondents.

Percent of Caregiver / Guardian 'Agree' and 'Strongly Agree' Survey Responses

Caregiver Survey Questions	October 2020	June 2021
My social worker explains the purpose of our meetings when we meet.	75%	90%
I want to make use of the services CPS is providing me.	75%	86%
My social worker makes good use of the time we have together when we meet.	80%	76%
I understand my family's plan.	75%	76%
I think my social worker and I respect each other.	75%	76%
When my social worker and I come across a problem, we can discuss it and move forward.	70%	76%
My social worker returns my phone calls.	80%	76%
My meetings with my social worker are organized.	80%	71%
My social worker asks for my ideas about what would best help my child/children.	70%	67%
I feel confident that my social worker will follow-up on requests that I make.	70%	67%
I was encouraged to give input into my family's goals.	75%	67%
My social worker and I have discussed my strengths as a parent.	65%	62%
My social worker can see my side of things.	65%	62%
My social worker and I have discussed areas I can work on.	75%	52%

"They are **always good and helpful.**"

Our social worker was **astute, professional and organized** at each meeting. Thank You!

"I would **like to know what my progress being made [is]** and how i am successfully completing the duties that I'm doing to get my child home."

[Request for] "more clear communication. It can feel like we ask a question, but don't really get an answer. I do understand that this is partly because so many things really are unknown."

Out-of-Home Care Provider Survey Results on their Worker's Visit Practice

At the same time the Caregiver Surveys were administered, PDSA Collaborative members were encouraged to provide a nearly identical survey to their Out-of-Home Care Providers to solicit their feedback on visits. It was the prerogative of the PDSA teams on whether they administered the provider surveys. In the fall of 2020 a total of nine responses were received, and in the summer of 2021, 12 responses were received. Interestingly, it was found that the counties that received responses in the fall were largely absent from the summer responses, and vice versa. While this again leads to an inability to provide before and after responses, the qualitative feedback provided by the respondents was insightful and is provided below.

Request for, "**more communication about parent visits** and how the children do at the visits."

[Our worker] is **very thorough and always on top of things.**

"Personally, I feel that [my worker] is an **amazing worker and my child loves that she connects with her** and doesn't treat her like another case....She's great and she's made this process very easy for our family!"

"I think the meetings are **well organized and structured.** If I didn't know any better, it seems like they are always prepared for my questions. And they do well with supporting each other during meetings."

"It is **hard to talk about the things the children should not hear when they are present for the visits,** but I know the social worker wants to see the child interact in the home, but I don't feel we can really talk."

Implementation Lessons

Qualitative data from PDSA team storyboards, forms submitted by PDSA teams, and focus group questions were analyzed for implementation and practice themes.

1 - Teamwork makes the dream work

- Teamwork was needed to tweak the process, clarify questions, and keep momentum.

2 - A learning curve is to be expected

- All participants went through an initial learning curve that challenged their time and energy as they implemented a new practice process.

3 - Buy-in needs to be built

- All teams had to use explicit strategies to build buy-in and commitment for changes within and outside their PDSA team to implement successful changes.

4 - Start small, grow over time

- The method of testing small changes in cycles allowed participants to be creative, try new methods/technologies, and brainstorm new ideas. They could also abandon things that didn't work.

5 - Outside processes or tools must be 'owned' by agency

- Multiple agencies 'borrowed' tools/processes from others; but the PDSA team still needed to go through an iterative, cyclical process and group communication to tweak it to fit their county's needs. There was no one-size-fits-all product.

6 - Communicate early and often

- A planful roll-out of changes must include consistent communication using multiple methods. Soliciting and incorporating feedback from users is beneficial.

7 - Clarifying goals & using data to measure change is necessary

- Identifying clear goals that were linked to identified agency issues gave project's focus. Data tracking was needed to see if the change implemented was effective.

"We are saving 5-10 minutes per case note. That adds up over all our notes in a month."

"There is less fluff in our documentation..."

"One parent is more engaged and has taken significant steps forward."

"My notes are done ahead of time instead of a mad scramble at the end of the month."

Practice Lessons

1 - Changes renewed focus on policy standards

- Many teams used policy standards as their guide when they designed a new tool or process.

2 - Created structures for onboarding new staff

- The processes, tool, and resources created by PDSA teams were helpful for training new staff and gave new staff confidence that they knew how to conduct a quality visit.

3 - Structured case notes can lead to improved critical-thinking & analysis

- Changing from chronological case notes to structured notes required workers to analyze information into meaningful and actionable categories as they wrote. This improved assessment skills.

4 - Changes in one area can have downstream impacts

- Improved documentation lead to better organization for future visits and improved follow-up after visits. Improving documentation saved time when filling out court documents.

5 - Improving communication with the family aids case progress

- Workers reported they improved at defining next steps for all parties (including service providers) using their improved processes and tools. This lead to worker's better soliciting family voice and understanding needs, families understanding what is needed to make progress toward goals, and shared accountability for progress.

6 - Trust is built with families through consistent follow-up

- Workers perceived improved trust with families when they improved their consistent follow-up on action steps. Families report appreciating consistent returned calls.

7 - Data collection itself can lead to practice adjustments

- Survey questions that workers developed to solicit family feedback as a part of the PDSA tests ended up improving family/worker communication and worker assessment of case progress.

"Some family teams are less focused on the struggle or disappointments and more focused on moving forward..."

"I strengthened my focus on what was important... it's not about what I want to see happen but what family needs and wants..."

"I am more prepared for every visit. Everything is getting addressed and I don't have to go back after missing an item."

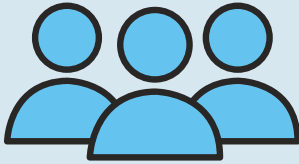
"Accountability is shared. Ownership is often taken from clients if they don't complete their part of the plan..."

"I am more open minded to try new ideas and incorporate practices that fit my client rather than my client having to adapt to my style"

"There were topics on the template I had not thought of discussing in visits before. It helped me get an overall view of family functioning rather than the 'fluff' I was getting before..."

Next Steps

1



2021 PDSA Collaborative

A new cohort of 10 agency teams (9 county agency, 1 tribal agency) will begin in October 2021. They will also work on the quality of worker visits with children, families, and out-of-home care providers.

2



PDSA Online Toolkit

Resources, tools, and examples from 2020 PDSA Collaborative teams will be added to the [PDSA Online toolkit](#) to encourage statewide sharing of practice ideas.

3



Shared Learning Opportunities

The OPI unit will explore opportunities to share this year's and future year's collaborative lessons and findings at:

- Regional supervisor's meetings
- Conferences
- Other training events

Acknowledgements

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- The University of Wisconsin-Madison Sandra Rosenbaum School of Social Work
- The Wisconsin Child Welfare Professional Development system

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