

Plan-Do-Study-Act (PDSA) Collaborative on Improving Professional Collaboration - Executive Summary

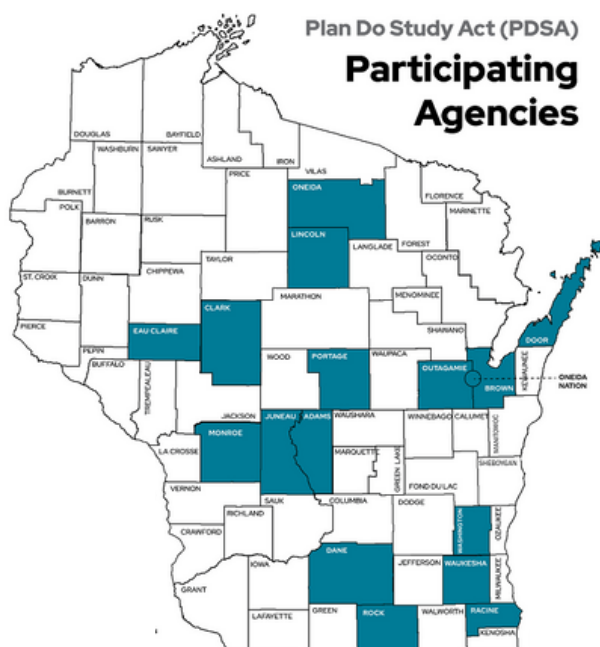


Background

Child welfare professionals often work with families who need behavioral health services or family support services for developmental, physical, or emotional disabilities. The provision of effective services and treatment to improve families' well-being relies on professional collaboration across systems. In 2024-25, two cohorts of participants from 17 Wisconsin agencies sent teams from their child welfare, behavioral health, and/or family support services units to use the Plan-Do-Study-Act (PDSA) model to design and test changes to improve communication and collaboration for families served across multiple service program areas.

The PDSA improvement teams from the 17 participating agencies had professionals / supervisors from:

- Child Protective Services / Indian Child Welfare: 17 teams
- Children's Long-Term Support Services: 16 teams
- Comprehensive Community Services: 15 teams
- Youth Justice: 15 teams
- Behavioral Health / Mental Health / Substance Abuse: 14 teams
- Birth to 3: 10 teams



Mission Statement

The mission of the 2024-25 Plan-Do-Study-Act (PDSA) Collaborative on Improving Professional Collaboration is for child welfare, behavioral health, and family support services to enhance their collaboration resulting in the needs of children and families being better understood and services for children and families that are family-centered, strengths-based, streamlined, supportive and flexible.

Goals and Practice Changes



GOAL 1

Improve understanding of their collaborating partner's mission, philosophy, goals, requirements, roles, and language.



GOAL 2

Create clear and consistent protocols and procedures to coordinate access to information and services between collaborating partners.



GOAL 3

Develop plans in conjunction with system partners that incorporate family voice, have clearly identified objectives, measures of progress, and next steps, and increase family understanding of each partner's role in the process.



GOAL 1

Improve understanding of their collaborating partner's mission, philosophy, goals, requirements, roles, and language.

Solutions implemented:

- Unit presentations and Q&A sessions to learn about program areas and build relationships.
- Desk guides describing program areas, the referral process, timelines, and contact information.
- Flow Charts describing work units and how and when collaboration is to occur.
- Frequently used terms guide to define acronyms and terms used by work units.
- Onboarding to include orientation to other program areas, and often earlier than in the past.

Goals and Practice Changes (continued)



GOAL 2

Create clear and consistent protocols and procedures to coordinate access to information and services between collaborating partners.

Solutions implemented:

- Creation of policies, procedures, and process documentation to formalize and clarify the expectations around how to collaborate across units.
- Relationship building as collaboration best occurs in individuals with established relationships.
- New internal team meeting process with all providers before enrolling the family in services. Providers share information and coordinate schedules, roles, and responsibilities.
- Creative consult meetings on complex cases as an additional means to brainstorm how to work with shared families that have complex or unmet needs.
- Monthly in-person multi-unit meetings where programs are discussed and relationships are built.
- Leadership attends other unit meetings to gain insight, provide feedback, improve communication, and identify shared families.
- Clarify how professionals learn of a family involved with multiple agency programs through database searches, asking the family directly, or multi-unit meetings.
- Tracking families involved in multiple agency units in spreadsheets.
- Teams worked with the agency's legal partner to clarify what information can be shared between program areas with and without a release of information.



GOAL 3

Develop plans in conjunction with system partners that incorporate family voice, have clearly identified objectives, measures of progress, and next steps, and increase family understanding of each partner's role in the process.

Solutions implemented:

- Collected family input before designing solutions through interviewing families on their experience or a simulation experiencing what it is like for a family to navigate services.
- Implemented a family collaboration team meeting attended by all providers and the family to review all team members roles, current services, family's strengths, unmet needs, next steps, roles, and contact information.
- Some units invite other direct-service staff to attend in-person meetings with the family.
- Ask the family how often they want to meet with the interdisciplinary team.
- The family receives a team contact list with their providers' roles and contact information.

System and Local Considerations

Information Clarification

Teams benefited from investing time in creating policies to clarify how to collaborate, what information is to be shared, and expectations. Many also created succinct information guides to provide needed information regarding other work units that can be quickly referenced.

Information Release Clarification

Agencies should work with their legal departments / Corporation Counsel to document what information is acceptable to be shared with and without a Request of Information, to whom, and when. Agencies should consider creating a universal Request of Information that considers confidentiality concerns to share information across all human service units.

Communication Guidance

Professionals value proactive communication. Staff appreciate clear expectations on what changes in the family should be communicated to other work units, through what communication medium, and when.

Increasing Collaboration Motivation and Teamwork Culture

Teams should emphasize how learning others' work functions and professional roles saves staff time and creates better outcomes for families. Teamwork culture and motivation was improved as teams built relationships and worked to assume positive intent, respect different perspectives, and create a shared vision on how to work with families. Many teams sought to build a 'no wrong door' policy where however the family enters the agency, they are referred to all appropriate services in a timely manner.

Provide Spaces for Relationship Building Between Professionals

All agency professionals need ongoing collaborative spaces where they communicate, share knowledge, and build relationships across units. In person opportunities and teaching of each other were important for relationship building, such as organization-wide meetings or county resource fairs.

Provide Spaces for Relationship Building Between Professionals and Families

Strengthen family team meeting principles such as allowing time for all providers to clarify their role and provide updates on current services, ensure family input and understanding, and clarifying next steps. Prioritize family team meetings so all providers can be available consistently.

Determine Families with Multiple Unit Enrollment

Develop a standard practice that is customized to the local agency processes to determine which families / consumers are involved in multiple program areas.

Data System Integration

Program areas use different databases to track their information. PDSA participants voiced the desire for an alert to let them know their client may be enrolled in another unit within the agency, and to potentially share information across databases and alert professionals when information is updated.

Voice of the Customer / Walk Through Provided Invaluable Perspective

Agencies gained the perspective of families who access services by interviewing families receiving services, or by staff simulating being an individual receiving services. These experiences provided insight into where families experience frustration, inefficiency, and confusion, allowing for better solutions.

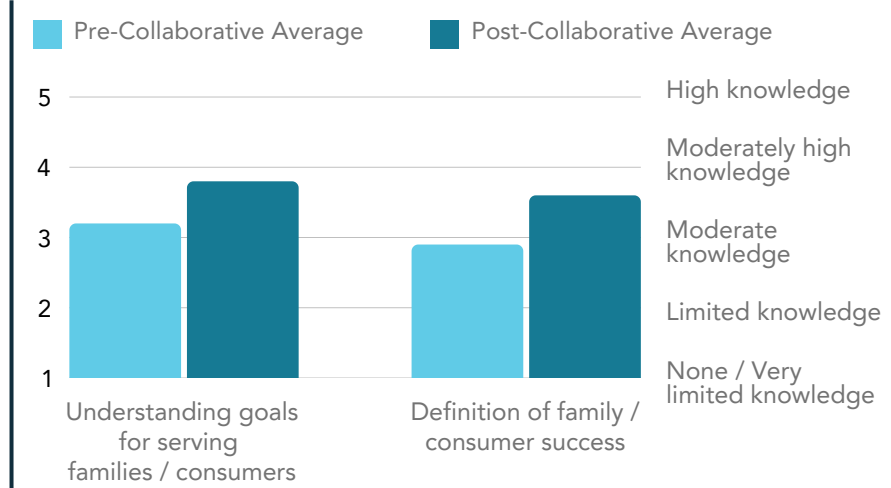
Outcomes

PDSA participants measured the effectiveness of their efforts through before and after surveys and through tracking internal data. Multiple agencies stated that the PDSA Collaborative ended before full implementation of their projects and so a full realization of results will be better seen in 1-3 years' time. The survey reflecting short-term outcomes is summarized here.

Survey Questions Part 1:

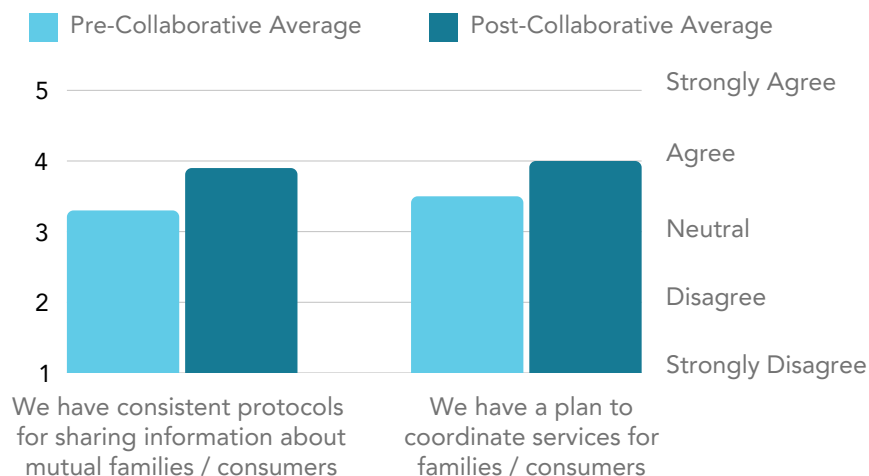
Please indicate your level of knowledge about the work units you professionally collaborate with.

The knowledge of other work units, such as knowledge of their timeframes, roles, and mission, improved by 0.5-0.7 on the five-point scale. At the end of the collaborative, the items surveyed averaged a 3.1-3.8 on the five-point scale indicating moderate to moderately high knowledge of other units. An example of two of the seven questions from Part 1 is shown to the right.



Survey Questions Part 2:

Considering your unit's collaboration with the work units listed, please indicate your level of agreement with the following...

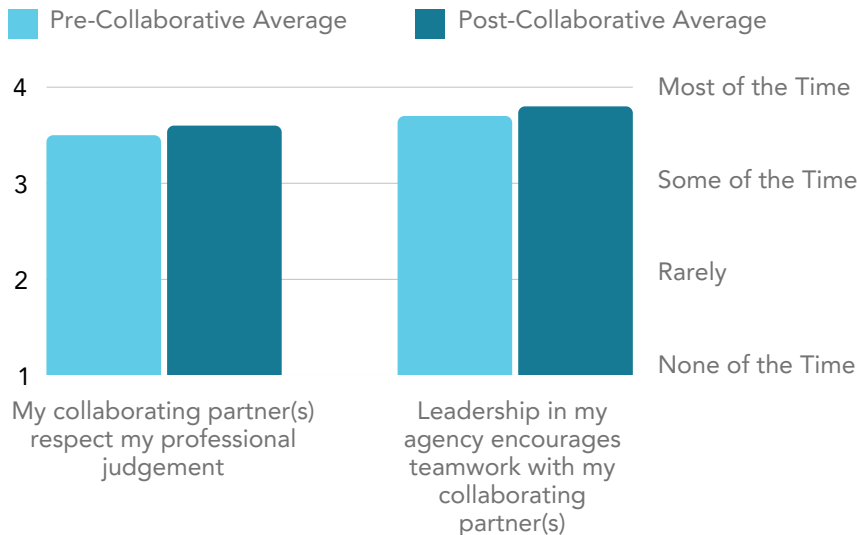


Respondents indicated that their work unit's collaboration with other work units, such as having consistent protocols for sharing information or developing responses to conflicts, all improved by 0.4 to 0.6, and all rank between a 3.9 to 4.0 on the five-point scale. These scores indicate a moderately high level of effective collaborative protocols and processes in place. An example of two of the seven questions from Part 2 is shown to the left.

Outcomes (continued)

Survey question 3:

Considering your unit's collaboration with the work units listed, please indicate how often you experience the following...

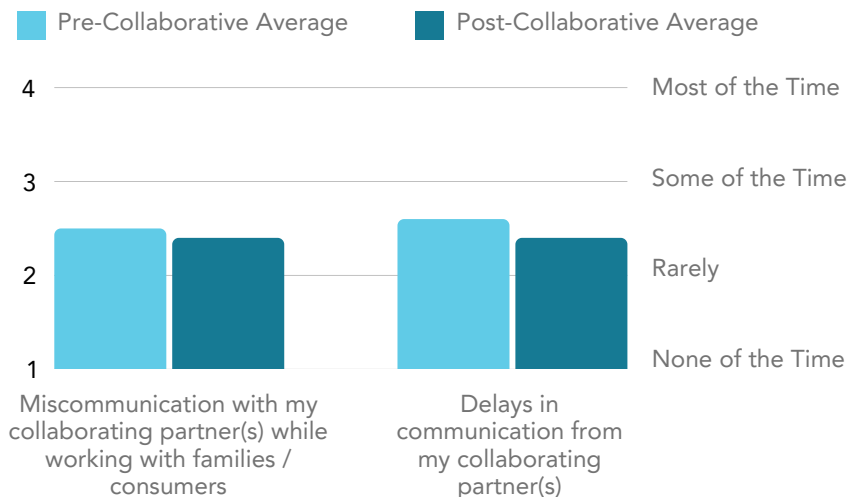


Positive collaboration patterns:

The questions asking how often positive collaboration occurred, such as respect and trust in professional judgement, improved 0.1-0.2 across all items. As these questions rank between 3.6 to 3.8 on a four point scale as of the end of the collaborative, these questions already measured high at the beginning of the collaborative, indicating little room for improvement. Overall these results show positive collaboration patterns occur most of the time. An example of two of the seven questions from Part 3 is shown to the left.

Negative collaboration patterns:

The questions asking how often negative collaboration patterns of miscommunication and delays in communication improved by 0.2 on the four-point scale. This indicates that miscommunication and communication delays occur rarely to some of the time. An example of two of the seven questions from Part 3 is shown to the left.



Improvement

Respondents were asked if they believe their agency is making improvements in professional collaboration. Of the 460 respondents who finished the survey, 316 respondents (67 percent) stated that they somewhat or strongly believe professional collaboration in their agency is improving. When looking at the 92 respondents who were a part of the collaborative, the percentage who believe collaboration is somewhat or strongly improving increased to 90 percent of respondents.

Improvement (continued)

67%

of the 460 survey respondents somewhat or strongly believe professional collaboration is improving

90%

of the 92 survey respondents who were a part of the PDSA Collaborative somewhat or strongly believe professional collaboration is improving

Agencies were asked for specific examples of improvement, and participants shared that gains were made in the following areas:



Communication:

For multiple agencies, the communication between units has taken a more positive tone. Staff are coming to meetings with a better understanding of processes and limitations of other units and are more open to listening to each other and sharing information.



Understanding of Direct Service Professionals' Roles:

Teams stated they have a better understanding of everyone's roles in the agency which has led to less frustration, greater respect and trust, an ability to ask clarifying questions in a safe environment, and comfort asking other units for information.



Working Relationships:

Working relationships have improved due to the increased clarity brought by policies and guides, as well as the improved culture brought by relationship building.



Coordination of Care:

Teams provided specific examples of how by better working together they directly impacted the speed and quality with which families receive services. Through having open communication and learning of dual family enrollment earlier, teams ensured clients received the correct services as soon as possible, often leading to better outcomes.

Questions?

Contact us at the Wisconsin Child Welfare Professional Development System; sjreilly@wisc.edu

Professional Collaboration examples and tools available for use:

<https://wcwpds.wisc.edu/organizational-development/organizational-process-improvement/plan-do-study-act-pdsa-collaborative/improving-professional-collaboration/>

Project Reports:

<https://wcwpds.wisc.edu/organizational-development/organizational-process-improvement/plan-do-study-act-pdsa-collaborative/>