

Core Implementation Capacities: Quality and Outcome Monitoring Systems

Background



What is it?

Quality and outcome monitoring systems (QOMS) includes a assortment of **data and information** about implementation and delivery are **collected, analyzed, reported, and used for decision-making** to support continuous local quality improvement. Data and reports are widely shared and reach the right people at the right time in order to address timely needs and optimize programming over time. A strong QOMS includes 3 types of data: 1) program outcomes; 2) fidelity data; and 3) Implementation outcomes. Best practices for QOMS draws from two areas for measuring implementation capacities: 1) decision support data systems and 2) fidelity assessment.

What does it look like when QOMS is working well?


When QOMS is going well, there is system in place that collects, analyzes, and reports data that are then used for decision making. There are people clearly identified across multiple levels (backbone organization, community coalition, service delivery agency) that are responsible for ensuring data are collected, analyzed, reported, and utilized. The data being collected are reliable, valid, and socially important to a community. When decisions are made, data are utilized to inform decisions. The team responsible for QOMS completes regular and systematic PDSA cycles to improve and optimize implementation processes.





Why is QOMS important?

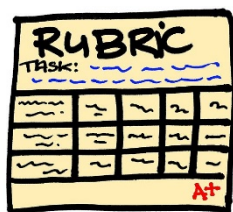
If a program “works,” we want to replicate those results? If a program “does not work,” what it ever in place as intended to begin with? In both cases, QOMS is critical to help us figure out next steps. QOMS provides information for stakeholders to make informed, real-time decisions about an initiative and engage in continuous quality improvement. QOMS promotes sustainability by maintaining continuous and detailed attention to key aspects of implementation, fidelity, and programmatic outcomes. Additionally, it fosters leadership and stakeholder knowledge in how things are going and confidence in decision making about how to continue supporting the initiative.

QOMS Best Practices



 Accountability- there is a clearly identified who that is responsible for ensuring components of the data system are collected, analyzed, reported, and utilized, including particular attention to assessing fidelity. They have the necessary skills and abilities to do so and are continuously well supported by leadership and the implementation team.

-  Data collection/assessment procedures are not burdensome, are practical, efficient, and integrated into already existing data procedures.
-  Data for each component is systematically collected, analyzed and utilized.
-  Practitioners and/or agencies are recognized and rewarded for their participation in data submission or assessment procedures that are part of the QOMS system.
-  Appropriate data are shared with stakeholders on a regular and systematic basis.



- ➔ Written plan of expectation for fidelity assessment process across the community; systematically completed
- ➔ Fidelity assessment includes observational assessments of practitioner’s key skills and abilities
- ➔ Multiple sources of information used to assess practitioner’s delivery of the innovation (e.g., quality, engagement, dosage, adherence)
- ➔ All practitioners are oriented to fidelity assessment procedures



- ◆ Data is systematically collected about recruitment, selection, training, coaching, practitioner fidelity, service provision, short-term and long-term programmatic outcomes.
- ◆ Data are used for decision making to improve implementation and delivery of the program.

Important Knowledge & Skills

- ✦ Understand and be able to teach about the data use continuum (e.g., the differences among CQI, evaluation, research, and compliance)
- ✦ Facilitation of process that leads to site developing their own questions they would like answered with the data they collect.
- ✦ Rationale behind why data for decision making is critical for any implementation effort and ability to articulate and reinforce importance with site.
- ✦ Understanding and ability to teach core data pieces that should be included in a QOMS system (fidelity, implementation, and programmatic).
- ✦ Understanding on how to make data meaningful, usable for sites
- ✦ Understand use of PDSAs, process mapping, and ability to utilize these methods with teams
- ✦ Ability to apply CQI methods to plan for improvement
- ✦ Explain continuous quality improvement and its connection to evaluation
- ✦ Interface, linkages with other implementation capacity domains, how they support QOMS
- ✦ Knowledge of connection between QOMS best practices, measurement of them in the Implementation Drivers Assessment (IDA) and Community Capacity Assessment (CCA), articulate connection of QOMS across IDA (service agency) and CCA (backbone organization)

Resources and Tools

- Implementation Capacity for Triple (ICTP) Simulation Lab, <https://ictp.fpg.unc.edu/ictp-simulation-lab> . Click on Local Implementation Capacity and Scale-up on the visual, scroll down to Quality and Outcome Monitoring (Learning Module 6 on DSDS)
- Implementation Data Handout
- Decision Support Data System Template (TTAP)

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What does building capacity for QOMS look like? What might progress look like?

The QOMS aspects described above take place across stages of implementation. Below, we use three functional stages of implementation to outline some questions that can guide the work of building quality outcome monitoring systems capacity. *Please know* - each stage of implementation does not discreetly end as another begins. As we engage in the work of a certain stage [and learn], we might find the need to go back to address an issue that we missed previously or delve deeper into another issue that needs more attention.

Assessment, Exploration & Readiness <i>“From where are we starting? What are our strengths and areas of development?”</i>	Installation <i>How can we develop, acquire, repurpose, and strengthen resources for what it takes to effectively support this program?</i>	Initial Implementation <i>How are we doing, now that the program is being delivered? What are we seeing, what are we learning?</i>
<ul style="list-style-type: none"> ▪ What are the needs of the target population? ▪ Does this initiative fit with the local context, philosophies, and values? ▪ Does the existing evidence support that this initiative will meet the needs of the community? ▪ What are current fidelity assessment and decision support data system capacity? Is there a system in place? What are the strengths and needs of this system? 	<ul style="list-style-type: none"> ▪ How does the community needs assessment inform workforce development and coalition building plans? ▪ What will show you that this program is working for your community? What data can you tell this? How will get the data? ▪ What data on recruitment, selection, training, and coaching of practitioners and agencies will help you understand how the process is going and indicate how to make it better? How will get the data? ▪ Develop initial data system that will guide future decisions made 	<ul style="list-style-type: none"> ▪ What could be the focus of your first PDSA cycle? ▪ How can you use your training and early delivery data to refine your recruitment and selection practices for practitioners and service delivery agencies? ▪ What does the data tell you about the functioning of your coalition? How can you strengthen it? ▪ Are your existing implementation processes being utilized as intended? Why or why not?