Using Continuous Quality Improvement in Your Juvenile Drug Treatment Court

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Objectives

In this presentation, we want participants to:

1. Learn the basic elements of CQI
2. Understand how CQI relates to and can build on what all JDTCs already do
3. Learn about the seven steps for applying CQI to a range of juvenile drug treatment court processes, decisions and outcomes
4. Get ideas for specific JDTC practices to use CQI with when you return to your home JDTC program
What is Continuous Quality Improvement (CQI)?

A systematic approach to improving decisions, practices, and outcomes

- Process-based
- Data-driven
- Driving assumption is there is always room for improving operations and activities to better meet your program’s goals and better serve JDTC participants
CQI is not a one-time event.

CQI is a mindset and a commitment to collecting meaningful data and using it to improve practices and to move an organization toward achieving its goals.
Continuous Quality Improvement: The Basics

- **Collect**: Gather data that are accurate, reliable, and directly related to a defined goal.

- **Analyze**: Review data to determine if benchmarks are met. If expectations are not met, identify possible reasons why.

- **React**: Learn from the data. Make an action plan to address shortcomings. Implement and monitor the plan (monitor = repeat the steps of collect, analyze, and react).
Use the “collect, analyze and react” process to examine and improve all key JDTC practices.

For any specific operation or practice of your JDTC, to achieve the changes in process or outcomes that you have targeted for improvement, it may take several cycles of “collect, analyze and react.”
Benefits of Using CQI?

- A fidelity check tool - helps teams know if you are actually practicing what you intend
- Accessible tool for identifying and addressing specific “problem spots” within a larger process or operation.
- Any size program and team can use CQI to help set and achieve goals
- Provides a process that strengthens the team and promotes a team culture of ongoing learning, problem solving and accomplishment.
- Adds to the skills of a JDTC team to use “data” to make decisions.
- Promotes transparency for team members and external funders (and potential funders) to understand program operations, processes, and outcomes
- Helps your JDTC achieve program goals
- Helps your program be more effective in serving youth and families
CQI will help you know if you are effectively implementing the *Juvenile Drug Treatment Court Guidelines*.

Objective 7 specifically calls for collecting data and using it for CQI.
Objective 7: Monitor and Track Program Completion and Termination

Guideline 7.1
Court and treatment practices should facilitate equivalent outcomes (e.g., retention, duration of involvement, treatment progress, positive court outcomes) for all program participants regardless of gender, race, ethnicity, or sexual orientation.

Guideline 7.3
Each JDTC should routinely collect data for CQI, rather than as an effort to satisfy compliance. Collect data on:

- General recidivism during the program and after completion
- Drug use during the program
- Use of alcohol and other drugs after the program
- Program completion and termination
- Educational enrollment
- Sustained employment
- Involvement in pro-social activities and youth-peer associations
Implementing CQI – Build on what you already do

The good news is that every JDTC already practices some of the skills and processes required for CQI.
What are examples of the “CQI” process (collect, analyze, react) that JDTC teams engage in?
Drug testing

Case management
Drug Testing Example

Steps for using drug test results in JDTC as a type of CQI:

- A team/program goal is for youth to achieve sobriety (abstinence) or reduced substance use (harm reduction)
- The team uses drug test results as data to track goal achievement and uses negative/positive test results as a performance measure
- As part of case management, the team develops sobriety/harm reduction-related goals for each youth and benchmarks for progress
Drug Testing Example cont’d

Steps for using drug test results in JDTC as a type of CQI:

- At case staffing, the team reviews updates on youth progress; when it learns a particular youth’s tests are positive, the team develops and implements a response/revised case plan to help the youth achieve the abstinence/reduced use goal.

- Over X period of time, the team obtains more data – results from additional drug tests. Did the response lead to the desired drug testing results for this specific youth?

- If yes, the team continues the response plan; if no the team returns to the process of discussing, exploring options and then agreeing on a different response and implements the response.... And collects additional data (drug test results)....
Case Management Example

Steps for case management as a type of CQI:

- Probation administers a manualized risk/needs assessment instrument and obtains results (scores) for a youth in specific domains that include substance use.

- With youth and family input, the team develops a case plan/goals to address youth needs and spells out the services, activities, time frame, supports, and benchmarks to implement the plan.

- At case staffing, team members review youth progress (use performance data like # of treatment sessions attended, # of days attended school; # of life skill classes completed; # and % of drug tests that are negative); the team learns that the youth has attended fewer than 50% of treatment sessions and parents are relying on youth for help with child care of younger siblings which conflicts with treatment session appointments; the team brainstorms alternatives for increasing youth attendance at treatment sessions.
Case Management Example cont’d

Steps for case management as a type of CQI:

- In court the judge speaks with family members about the alternatives and includes the family in selecting a new strategy (e.g., different appointment times; sessions held at grandparent’s home)

- Team, youth and family implement the new treatment schedule/delivery plan

- The team monitors treatment attendance for two weeks; youth treatment session attendance increases to 80%
Case Management Steps
Team uses R/N assessment and substance use assessment to identify youth needs

With youth and family input, develop goals (including JDTC program requirements) and plan for addressing needs and achieving goals

Identify benchmarks (% of treatment sessions completed; % of drug tests that are negative; % of restitution repaid; % of community services hours completed; % of life skills completed; % of school credit hours earned, # of program points earned etc.) to track youth progress/performance

Collect “data” on benchmarks/points earned to determine if youth is making progress

If data show progress is stalled or less than expected, the team revises the plan, develops strategies to remove barriers and to address difficulties

Implement the revised plan

Monitor youth progress/collect and report “data” on benchmarks in revised plan at case staffing

CQI Steps
• Identify program area needing improvement
• Define the problem
• Determine desired outcomes and requirements
• Select specific steps to focus on
• Collect and analyze data on steps - compare with desired outcomes
• Take corrective action
• Monitor results
Like Case Management, CQI Is a Tool

CQI is to monitoring JDTC program effectiveness (program focus) as case management is to guiding youth goal achievement and monitoring youth success (youth focus)

- Except with case management, the team collects and analyzes “data” for one youth at a time
- Whereas with CQI, the team collects and analyzes data about decisions, practices, processes, and outcomes for several youths
Like Case Management, CQI Is a Tool cont’d

Both CQI and Case Management focus on the team’s process, decisions, activities, and steps to support and supervise youth.

Both look at what the team can change about its process, responses, services, resources, etc. in order to impact participants and reach program goals relating to youth behavior.
Implementing CQI
7 Steps

1. Identify area for improvement
2. Define problem, outline process
3. Establish desired outcomes and requirements
4. Select specific steps to study
5. Collect and analyze data
6. Take corrective action
7. Monitor results
Relating CQI Steps to Team Practices and Skills
CQI Step 3: Establish Desired Outcomes and Requirements

Good news – JDTC teams already have outcomes and requirements. These are set forth in your mission statements, program goals, and program structure!

The research-based *JDTC Guidelines* establish goals in various practice areas (e.g. 4:1 ratio of incentives to sanctions; individualize case plans based on assessment of youth/family needs; use a continuum of e-b substance use treatment resources – from in-patient residential to outpatient services)
CQI  Step 2: Define Problem, Step 4: Select Steps, Step 6: Take Corrective Action, Step 7: Monitor Results

*More good news*: through the mechanism of case staffing, teams have experience with a process and critical thinking skill set (setting goals, problem-solving/ trouble shooting, and responding dynamically to new or persistent challenges that occur when working with individual youth participants) needed for carrying out these CQI steps.

Many teams also already have a process and meeting schedule (e.g. monthly meetings) for planning and implementing program improvements.
CQI Step 5: Collect & Analyze Data

*Best news* of all (and relief) – JDTC teams already collect data!
Sample Data Variables that JDTCs Already Collect

• Enrollment date
• Beginning and ending date for each phase/level
• Demographic data (age @ enrollment, gender, race/ethnicity, language)
• Criminogenic Risk/Need Level
• Felony/Misdemeanor Referrals and Adjudications
• Drug Screen results (+/-, type of drugs, randomization)
• # of home visits
• # of group/individual treatment sessions or # of hours/minutes (scheduled-vs-missed)
• School attendance days
Sample Data Variables cont’d

- Completion rates
- Placement rates
- Detention days
- In-program recidivism (new adjudications/convictions, re-arrests, probation violations, etc.)
- Post-JDTC graduation/termination recidivism (new adjudications/convictions, re-arrests, probation violations, etc...)
- # of drug-free days
- # of court hearings scheduled/% attended (youth/caregivers)
- Incentives and sanctions data
- # of community services hours
Using CQI with JDTC Program Practices
Peer Sharing

With 1 or 2 other individuals

• share something your team is already doing
• to review and improve a JDTC program practice and
• that uses some of the steps in the CQI process
Examples of JDTC Practices that the “CQI” Process Helps You Assess and Improve

• JDTC Enrollment - Do the youth you accept into your JDTC meet the JDTC Guidelines criteria (JDTC Guideline 2.1-2.3) for best fit and maximum benefit?
• Program length - Do youth complete the program in the “expected” time?
• Completion rate – Is your completion/graduation rate as high as you would like it to be?
• Use of detention – Are you using detention as a sanction sparingly, as a last resort, and based on the criteria set forth in the JDTC Guidelines (JDTC Guideline 5.3) ?
• Family engagement – Are family members attending and participating in court hearings? (JDTC Guideline 1.5, 3.1)
Example: JDTC Program Length
Example: JDTC Program Length

CQI Step 1
Identify program area needing improvement

JDTC
Program area: Effective, efficient, and equitable use of JDTC program resources (treatment, case management, supervision, incentives)
CQI Step 2
Define the problem

JDTC
Youth are in the program longer than the program design, and complete at the rate of 50%
CQI Step 3

Determine desired outcomes and requirements

JDTC

Most youth (70%) complete in 9 months
CQI Step 4
Select specific steps to focus on

JDTC
Youth phase advancement decision-making criteria, positive reinforcement, service provider “fit”
CQI Step 5

Collect and analyze data on steps- compare with desired outcomes

JDTC

Data - Enrollment dates; start and end dates in each phase; graduation/termination dates; demographic information; treatment attendance; incentives

Results show: Average length is 13 months; girls complete in 7 months; youth of color terminate after 10 months; youth are in Phase I Orientation for 2 months and in Engagement Phase for 8 months
CQI Step 6

Take corrective action

JDTC

Corrective Actions:

Team reviews its decision-making criteria

- Develops objective measures and tools for tracking and assessing youth progress (goal-based benchmarks/checklists or points to individualize advancement)

Team reviews its use of incentives

- Creates individualized incentives (based on youth and family input)

Team reviews service providers in terms of cultural connections and fit with youth and families in the program

- The team works with providers to create better matches between youth of color and service providers who understand their culture/family
<table>
<thead>
<tr>
<th>CQI Step 7</th>
<th>JDTC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitor results</td>
<td>Data - Enrollment dates; start and end dates in each phase; graduation/termination dates; demographic information; treatment attendance; incentives; use of checklists/points earned</td>
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Results show: Average length is 10 months; girls complete in 7 months; youth of color complete in 10 months; 80% of youth receive incentives at ratio of 4:1
Barriers to Implementing CQI

• Life gets in the way!
  • We are too busy dealing with day-to-day emergencies to review and analyze the data.

• Data is a four letter word.
  • We don’t know what data we have or where to find it.
  • We have data but we don’t know what to do with it.
  • We don’t know what data we need.
Barriers to Implementing CQI cont’d

• The train has left the station!
  • We have already been operating too long to implement CQI

• I am not a researcher.
  • The process of CQI seems too “researchy” and complicated…3 basics, 7 steps, data...!
Overcoming Barriers to CQI Implementation

• Think of CQI as case management for your overall program
• The team already collects and uses information/data on each youth. Take the data to the next level (combine it on all youth; look for patterns across youth) to use as feedback on program practices, on achievement of program goals, and on the implementation of recommended practice (the JDTC Guidelines).
Overcoming Barriers to CQI Implementation cont’d

• Enlist the assistance of county or probation data management staff for tools, processes, or people who can help the team aggregate data/generate data “reports”

• Be creative, persistent, and methodical

• Question assumptions about “have to have” practices that are not research-based

• Ask for technical assistance: Apply for OJJDP Enhancement Grant
Expanding Current Practices to Include CQI

Getting started....

➢ Share CQI steps and benefits with your team for team buy-in to try CQI

➢ If the team does not already have a regular meeting set up, create a regular schedule of team time for program review and improvement planning (monthly? quarterly?)
Expanding Current Practices to Include CQI cont’d

Getting started....

➢ When you meet, discuss JDTC program areas/specific practices to apply the CQI process to:
  ▪ Pressing Concern Focus – use CQI with a program area that seems to be the team’s most pressing concern, e.g.
    • enrollment numbers
    • retention rates
    • youth engagement in treatment
  
  ▪ Systematic Application Focus – start with the mission and goals of your program
    • for each goal (reduced substance use, reduced delinquency, increased healthy development and pro-social activities and outcomes), identify specific operations, activities, decisions, services the team uses to achieve the goal
    • For each set of operations/steps related to a goal, define “problem” operations or steps to study, collect data on, and improve
Expanding Current Practices to Include CQI cont’d

Getting started....

- Discuss the data that are available that relate to these areas/practices

- Create a plan and time frame for collecting and reviewing the data on the practice

- Depending on what the data show, develop a plan and benchmarks for changes to make
Peer Sharing

With one other individual

- share 1 step or activity you plan to do with your team
- to start or expand using the CQI process
Good luck!

Technical assistance opportunity
Apply for OJJDP Enhancement Grant
Thank you!

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