

FaDSS Continuous Learning and Improvement Plan (CLIP)

Advancing learning, accountability, and impact across Iowa's FaDSS network

Purpose of the CLIP

The Continuous Learning and Improvement Plan (CLIP) is a practical and adaptable guide designed to help FaDSS program leaders strengthen the quality, effectiveness, and consistency of their local programs. It outlines a step-by-step approach for using data and evidence to inform decision-making, improve service delivery, and support better outcomes for families.

The CLIP helps programs answer key questions:

- *What's working?*
- *Where are we falling short?*
- *How do we improve over time?*

When implemented effectively, the CLIP fosters a culture of curiosity, accountability, and continuous growth. It is both a learning tool and a mechanism for shared accountability across the FaDSS network. Box 1 highlights key elements of this approach.

What is the CLIP?

The CLIP is a structured, statewide process that local FaDSS programs use to reflect on performance, identify strengths and gaps, and guide strategic improvements. Programs can use the CLIP to focus on specific components (e.g., service quality, staff development, family outcomes) or conduct a comprehensive review of overall program quality and effectiveness.

Box 1. What's new?

This approach builds on the strong foundation of FaDSS and introduces key shifts to strengthen learning, accountability, and performance:

- **More intentional use of data** to guide decision-making at all levels of the organization.
- **Refreshed tools**—such as the updated Stepping Stones framework and file review checklist—to support consistent and meaningful reflection.
- **Expanded peer-to-peer learning** opportunities that allow programs to share strategies, troubleshoot challenges, and learn from one another.
- **Stronger support systems** to help programs meet or exceed performance benchmarks through targeted guidance and capacity building.
- **Clear accountability structures**, incorporating supportive and corrective measures to address underperformance and drive continuous improvement.

By using a common set of tools and approaches, the CLIP promotes consistency, transparency, and fairness in how programs across Iowa assess and improve their work. It enables comparison across programs, supports peer learning, and provides a shared language for evaluating impact.

Core questions that drive the CLIP

At the heart of the CLIP are four guiding questions. These anchor continuous improvement efforts and help programs align their strategies, data collection, and action planning:

- 1. Are families better off as a result of the FaDSS program?**
Do we have evidence that families are making progress toward greater stability, economic mobility, and well-being? Are they getting jobs and advancing in them? Are they decreasing their reliance on public assistance programs?
- 2. Are Specialists providing high-quality services that support family goals?**
Are Specialists building strong relationships, using effective practices, and tailoring support to each family's needs? Are they visiting families in their homes? Are they serving families holistically, including youth and children?
- 3. Are agencies supporting staff to be successful in their roles?**
Do Coordinators and Specialists receive the training, supervision, and tools they need to engage families and implement the model with fidelity? Are they consistently using the tools for professional development and growth?
- 4. Is the local FaDSS program operating as a strong, high-functioning organization?**
Are leadership, systems, and partnerships in place to support sustainable, high-quality service delivery? Are organizations well-functioning? Do they regularly use data to drive decision-making and continuously improve?

Key components of the CLIP

The CLIP is more than a compliance tool—it's a mindset. At its best, the CLIP helps FaDSS programs move beyond checking boxes to become growth-oriented organizations that continually evolve to meet the needs of families. It honors the complexity of human services work while offering structure and support for continuous improvement. Below are the key components of the CLIP.

- 1. Data collection and use.** Use reliable, relevant, and timely data to answer the four core questions. Include both quantitative indicators (e.g., outcome tracking, fidelity data) and qualitative insights (e.g., family voice, staff reflection).

2. **Structured program reflection.** Conduct regular reflection sessions—ideally quarterly—to interpret data, identify bright spots, and surface areas for growth. Use the core questions as a discussion guide.
3. **Action planning.** Translate insights into concrete action steps. Assign responsibilities, timelines, and metrics for tracking progress. Prioritize actions that are feasible, equity-focused, and likely to improve family outcomes.
4. **Follow-up and learning loops.** Revisit action plans regularly to assess progress, adapt as needed, and share what's working across teams. Celebrate small wins and use challenges as learning opportunities.
5. **Capacity building.** Support ongoing staff learning through coaching, training, peer sharing, and leadership development. Continuous improvement requires skilled, reflective practitioners at every level.
6. **Accountability and support.** Use CLIP findings to guide conversations with state leaders, funders, and partners. Document progress and challenges transparently. The goal is to learn and grow together.

The CLIP process

The CLIP includes three structured, time-bound components that promote continuous learning, support, and accountability:

- **Quarterly performance monitoring.** Ongoing tracking of key performance indicators to promote data-driven decision-making and collective accountability.
- **Annual program self-assessment and state consultation.** A structured internal review of program quality and impact, followed by planning and consultation with State Staff.
- **Tri-annual Model Fidelity Review.** A comprehensive, independent review conducted by the state every three years.



Quarterly performance monitoring

Purpose: To ensure local FaDSS programs are making progress toward key outcomes for families and meeting statewide performance expectations.

What it is: Each quarter, local programs collect and report data on a core set of performance measures. These data are shared with the state and discussed across the FaDSS network to foster shared learning and support continuous improvement.

How it works:

1. **Submit quarterly data.** Local programs collect data on required measures and submit results to the State on a quarterly basis. Programs are expected to meet the below identified performance benchmarks for key indicators.
2. **Meet with State FaDSS team.** Program Coordinator meets with State Staff quarterly to discuss their performance and potential training and technical support needs.
3. **Participate in quarterly performance review and peer-to-peer meetings with network.** Program Coordinators participate in quarterly network-wide meetings to review the data, reflect on trends, share insights, and identify areas for improvement. These sessions encourage peer learning and mutual accountability and will be incorporated into the regularly scheduled Coordinator Meetings.
4. **FaDSS Coaching Model.** During quarterly meetings, FaDSS Coordinators will reflect on their Coordinator Competencies with State Staff to set professional goals for the next quarter. State Staff will also review the implementation of the coaching model and supervision practice throughout their program.

Accountability process for underperformance: To maintain the quality and integrity of the FaDSS network, programs that do not meet all essential benchmarks in a given quarter will be identified as underperforming. The State will initiate a tiered performance improvement process to offer support while holding programs accountable for progress (see Table 1).

At any point in the process, the FaDSS State team may conduct a focused review, or assign an outside party to conduct a review, to assess the situation and recommend additional supports or interventions.

The goal of this process is to help local programs succeed—not penalize them. Repeated failure to meet core expectations could result in a Compliance Plan and/or a reduction or loss of funding to ensure families across Iowa receive high-quality services.

Table 1. How FaDSS State team will handle consistent underperformance

Consecutive quarter(s) of underperformance	People involved	Steps FaDSS state team will take with local program
1	Program Coordinator	Review the data, identify contributing factors, and determine immediate steps for improvement
2	Program Coordinator, Coordinator's Supervisor	Assess the situation more deeply and begin developing a formal improvement plan
3	Program Coordinator, Coordinator's Supervisor, Executive Director	Review progress on the improvement plan and adjust strategies as needed
4	Program Coordinator, Coordinator's Supervisor, Executive Director, HHS leadership	Explore whether continued underperformance warrants contract termination or other corrective actions



Annual program self-assessment and CLIP

Purpose: To support local FaDSS programs to reflect on the quality of the services they provide, the impact on families, and to help guide strategic planning for the upcoming program year.

What it is: Each year, programs complete a self-assessment that includes structured reflection, data analysis, and goal-setting. This process culminates in a consultation with State Staff to review findings and strengthen plans for continuous improvement.

How it works:

1. **Complete an internal quality review.** At the beginning of the fiscal year, Programs complete a comprehensive internal review to assess program fidelity and quality that includes:
 - a. Organizational Self-Assessment Tool
 - b. Analyze and compile previous fiscal year outcome data to assess impact on families (i.e. annual report, previous year's goals, reports from Iowa FaDSS)
 - c. Specialist self-assessments using the Stepping Stones to Specialist Success and corresponding appendix completed jointly with Coordinators
 - d. Synthesis of insights using the provided tools on the Contractor Resources webpage, including:
 - i. Family record reviews using the **Compiled File Review Tool** by Specialist
 - ii. **Specialist Performance Summary** of data outcomes from Iowa FaDSS Reports and overall summary of strengths and opportunities for growth
 - iii. **Home visit Observations** from previous fiscal year
 - iv. Feedback from at least two external community partners outside of the agency (e.g., PROMISE JOBS, WIC, Parents as Teachers) using the **FaDSS Stakeholder Survey**
2. **Hold internal planning session to create CLIP.** During the first quarter, Program Coordinators share findings with their teams to make meaning of the data, identify strengths and gaps, and set priorities for the coming year. From this meeting, the team will generate an Annual CLIP for State Staff to review.
3. **Meet with State Staff to discuss CLIP.** At the beginning of the second quarter, Program Coordinators meet with State Staff to present their findings, discuss improvement goals, and receive feedback or guidance on their Annual CLIP.

Accountability process: To ensure alignment between internal reflection and external evaluation, State Staff will compare each program's self-assessment results with the findings from the most recent performance data. Gaps or disconnects between the two may indicate the need for:

- Targeted training and technical assistance
- Support to improve internal reflection practices

- Deeper follow-up during the next review cycle

This comparison helps ensure self-assessments are rigorous and meaningful—not just compliance exercises. State Staff may require a Compliance Plan at any time for areas of significant concern.



Tri-annual Model Fidelity Review

Purpose: To provide a comprehensive assessment of local FaDSS programs to ensure fidelity to the FaDSS program model and promote continuous improvement, identify strengths and challenges, and ensure consistency across the state.

What it is: Every three years, the State conducts a formal review of each local FaDSS program using a standardized set of quality measures.

How it works

1. **State Staff, an independent consultant, and a peer reviewer conduct virtual and onsite assessment of program.** The State team evaluates program quality using multiple sources including:
 - a. Organizational Assessment
 - b. Family record reviews
 - c. Home visit observations
 - d. Interviews with families
 - e. Stakeholder feedback (community partners)
 - f. Staff and leadership interviews
2. **Meet with assessment team to review results.** The State Staff present key findings to the local program, highlighting strengths and identifying areas for growth.
3. **Update existing or create new CLIP.** Program leaders share the findings with staff to support internal learning, guide strategic planning, and drive performance improvement.
4. **Meet with State Staff to discuss CLIP.** Program Coordinators meet with State Staff to present their findings, discuss improvement goals, and receive feedback or guidance on their CLIP.

Accountability process: If concerns about program quality are identified during the review, the State Staff may require the local program to develop and implement a Compliance Plan. The plan will include concrete steps, timelines, and benchmarks for resolving the identified issues. The program is responsible for complying with all

program policies and procedures and will be required to show significant improvement in the areas identified as deficient in order to continue providing FaDSS services.

FaDSS performance measures and benchmarks

Service engagement and targeted outcomes	Benchmarks
Specialists complete monthly home visits	- Completed 75% of visits in the home (Families Served) - Engage members of the family during the visit 30% of the time (Families Served)
Family members meet their and their families' basic needs	60% of employed families with childcare needs have addressed those needs (Exited Families) 50% of families who set a transportation goal show improvement in that domain (Exited Families) 40% of families who set a housing goal show improvement in the housing domain (exited families)
Family members are connected to specialized supports	90% of adult family members with substantiated mental health concerns access treatment (exited families) 90% of adult family members with substantiated substance use disorder concerns access treatment (exited families) 90% of adult family members with substantiated chronic and acute physical illness access treatment (exited families) 90% of adult family members with substantiated instances of domestic violence access treatment (exited families)
Family members build skills necessary for work and life	30% of visits where families are engaged in skill-building activities (life skills, financial literacy, parenting etc.) (families served) 50% of families have made progress in at least one self-sufficiency domain area (Compare entry SSM with most recent SSM)
Family members engage in activities to support healthy child development	60% of families with children 0-5 are enrolled in early childhood programs (Exited Families)
Family members build peer connections and professional networks (social capital)	60% of families with a goal have increased their support networks at exit (Exited Families)
Family members reach Employment outcomes	50% of those who exit have increased household income (Exited Families) 30% of those who exit have improved their employment (Exited Families)
Family members make progress toward educational goals	25% of families with a goal increased their education level at exit (Exited Families)

