FY 2025 Continuous Quality Improvement Plan

Iowa CQI Plan

Submission Date June 23, 2025

State/Territory/Jurisdiction Awardee: Iowa

Part 1. Updates on Prior CQI Activities since Last Update

Discuss key CQI activities, accomplishments, challenges, and lessons learned from implementing your CQI project since the last update in June 2023. To complete this section of the update, respond to the following questions:

1. **What was your CQI topic(s)?**

   Iowa MIECHV's CQI topic was parent engagement.

2. **What was your SMART aim(s)?**

   Iowa's SMART aim was to increase the home visit completion rate from an average of 1.93 visits per month to 2.5 visits per month by September of 2025.

3. **Did you meet your SMART aim(s)?**

   ☐ Yes ☒ No

   a. **If no, explain why.**

      Iowa has not yet reached the end of the project period, but currently has not met the identified goal for home visit completion rate. Based on recent data, it is not likely that the 2.5 home visits per month will be met. Various factors may be at play for why, but a couple of reasons could be related to data entry timeliness and setting a stretch goal that was not as feasible as initially thought.

4. **What progress can you report from the CQI project? In the call out box to the right are some examples of progress that you might describe.**

   Iowa MIECHV began piloting a new LIA CQI Lead support structure in January of 2025. The impetus for this change was a need to improve LIA CQI Lead engagement in CQI work and to provide more individualized CQI coaching and support. So far, the feedback has been positive from the LIA perspective and from the MIECHV grantee perspective. Iowa MIECHV now hosts Quarterly Peer-to-Peer CQI calls in the first month of the quarter. The structure of these calls includes connection with CQI Leads, training provided by the Iowa CQI Lead that is pertinent to the current CQI project phase, and peer-to-peer collaboration. Additionally, in the subsequent two months of each quarter, CQI Office Hours are held. The Iowa CQI Lead and Co-Lead host these virtual office hours. It is a come and go meeting where LIA CQI Leads receive one-on-one technical assistance and coaching on their CQI project in breakout rooms. Iowa MIECHV has requested that LIA CQI Leads attend the Quarterly Peer-to-Peer call and at least one CQI Office Hours per quarter. This has decreased the meeting burden at the grantee and LIA level and has allowed more individualized support. Attendance compliance with expectations will be monitored at annual site visits.

   Related to the new CQI meeting structure are deliverable expectations for each LIA. Since January 2025, the Iowa MIECHV CQI Lead has required two deliverables for each LIA per quarter. These deliverables are relevant to the current phase of the CQI project. For example, for Quarters 2 and 3, LIA CQI Leads were required to run at least two PDSA cycles and record using a PDSA worksheet. Planned deliverables for Quarter 4 will be the MOCHA worksheet and a storyboard of each LIAs CQI project on Parent Engagement.

   Additional LIA CQI Lead support is planned for early August 2025. The Iowa MIECHV CQI Lead will host a CQI Workshop for LIA staff to attend. Attendees will include LIA CQI Leads, at least one home visitor, and at least one supervisor or program director from each LIA. The goal of the workshop will be to build CQI knowledge across the LIA, not just for LIA CQI Leads. This is because LIA CQI Leads have expressed the need for more support for the work across their agencies and organizations. The content of the workshop will be heavily activity focused. A hands-on case study activity will be the primary activity, with additional supportive activities to bolster learning. Iowa MIECHV is tentatively planning on hosting these workshops every other year as demand requires.

   Another area of progress in the current project has been regular data pulls and reviews. The Iowa CQI Lead pulled home visit completion rates and home visit engagement ratings monthly. These data were provided in graphical form and table form to be reviewed at most CQI meetings. They were also disseminated on a CQI Teams Channel for LIAs to review LIA-specific data.

5. **Did you encounter challenges in the implementation of your CQI project?**
   ☒ Yes ☐ No

   a. **If yes, please explain**.

One of the main challenges in implementation of the CQI project was data collection for parent engagement. The CQI Lead group spent a considerable amount of time planning for and selecting shared

outcome and process measures. A previous lesson learned was that for successful measurement in CQI, data needed to be collected or contained within our statewide data collection system, DAISEY. Otherwise, CQI data collection uptake was not adequate to evaluate outcomes. Taking this into consideration, home visit completion rate was the outcome measure selected, as no additional data collection would be required, and it is contained within DAISEY. Selection of the shared process measure was lengthier. The final measure decided upon was a home visit engagement rating adapted from Wen et al. This rating was collected on a form that was completed for each home visit. This rating was extracted and analyzed monthly by the Iowa CQI Lead. A limitation of Iowa's shared outcome measure was that Home Visit Review forms were not consistently submitted for the entire month before the Iowa CQI Lead would pull data for this measure. The root cause of timely data collection was discussed and best practices for timely data collection were disseminated during CQI Lead calls as well as an All Contractors call to address this data issue.

The second main challenge during this CQI project has been building capacity across the LIA level for CQI work. As discussed in #4 above, Iowa MIECHV is planning an in-depth training opportunity targeted at multiple staff members across an LIA. Iowa MIECHV has provided guidance that LIA CQI Leads should not be the only ones implementing CQI projects. Instead, guidance has been provided that all staff at the LIA level should support and enrich the CQI project through the leadership of the LIA CQI Lead.

6. **What are you doing to sustain the gains from your CQI project (e.g., integrating new processes into staff training, updating agency protocols, ongoing monitoring of data, etc.)?**

   The Iowa MIECHV CQI Lead is actively participating in the CQI Sustaining the Gains Booster Sessions hosted by TARC. Each LIA will be required to complete the MOCHA worksheet on sustainability in the final quarter of the fiscal year. At the state level, home visit completion rate will continue to be monitored on a quarterly basis. If any significant deviations are noted, LIA inquiry will occur.

   Additionally, Iowa is participating in Cohort 2 of the CSE on Family Engagement. As part of this project, LIAs will be required to continue to collect a Home Visit Engagement Rating and report on which engagement strategies are used during home visits. These data points will be used for evaluation purposes and results will be brought back to the CQI group for feedback and shared interpretation.

7. **Please explain the method(s) or strategies that you used to spread successful CQI activities to other LIAs or communities**.

   Iowa's Quarterly Peer-to-Peer calls have been the primary mechanism for spreading successful CQI activities to other LIAs. These calls allow at least 20 minutes for LIA CQI Leads to have small breakout room time to get updates and collaborate with one another. Additionally, we asked in Quarter 3 of the current fiscal year that LIA CQI Leads picked a successful change strategy that another LIA tested to test at their organization.

8. **What successful innovations, tested during the course of your project, could be shared with other awardees?**

   Successful change strategies that were tested by LIAs that could be spread to other awardees include: asking families at the end of each home visit what they would like to focus on our do at the following

home visit and communicating family and home visitor expectations upon enrollment. Asking caregivers what they want to focus on at the following home visits allowed parents the intentional opportunity to customize services to fit their needs. A couple of LIAs created menus of options to generate ideas for the parents. Regarding expectations communication, LIAs created standardized language around what families could expect from their home visitor and the home visiting program and what the program would expect from them. This kind of clear communication upon enrollment was helpful to set the stage at the start of services and allowed home visitors to revisit family expectations to ensure that the program was still relevant to their needs.

9. **Based on what your team has learned from the last two years of CQI plan implementation, what goals do you have for growing your awardee level CQI capacity in the next two years?**

   Iowa MIECHV has two primary goals related to advancing CQI work. These goals are 1) Continue to build and sustain LIA CQI knowledge and capacity across the whole organization, and 2) Integrate parent expertise into CQI projects. Iowa has made much progress on Goal 1, but continued attention to this goal is needed to ensure that knowledge and capacity are retained since the composition of organizations does not remain stagnant. Regarding Goal 2, Iowa has paved the way for this goal through the work of LEX Leaders, however more effort is needed to effectively bridge the work the two groups are doing and ensure that parent expertise is an active part of every CQI project.

Part 2. CQI Plan for September 30, 2025 – September 29, 2027

You should provide information for your planned CQI activities from September 30, 2025, through September 29, 2027. For activities not yet planned, please describe the process you will follow (e.g., how you will identify topics, methods, and change ideas).

Organizational System and Support

Awardee Level

1. **Please provide an updated list of staff members on your awardee CQI team and note any professional development needs they may have. If personnel are not already identified, share your plan for securing personnel to adequately support local CQI work.**

   Click or tap here to enter text.

   You can use the optional table format below or provide a description of personnel.

Staff Roles Assigned to CQI Teams	Experience with CQI (years in role and specific skills)	Professional Development Needed to be Successful in This Role (e.g., training, written resources)	LIAs* Supported (List)
Ex. CQI Lead	*Five years providing CQI training and coaching to local MIECHV teams, trained in IHI framework, LEAN and Six Sigma.*	*Tools and resources for developing and analyzing run charts*	*List team names, if all LIAs supported – please list team names, regions, or number of teams supported*
Claire Carlson, Iowa MIECHV CQI Lead	Three years providing CQI training and coaching to MIECHV LIAs, participated in CQI Practicum	Training on coaching and change management	All LIAs
Brynn Friedrich, Iowa MIECHV CQI Co-Lead	One and a half years providing CQI assistance to MIECHV LIAs	Training on measurement and PDSAs	All LIAs

   * Please note that the term "local implementing agency," or LIA, includes local sites operated by MIECHV awardee staff.

2. **How will you ensure awardee staff and LIA teams are trained in CQI? Describe the methods or strategies you plan to use to support awardee and LIA teams' implementation of CQI. How often will training occur?**

Iowa MIECHV awardee staff will participate in the biennial Iowa CQI Workshop hosted by the Iowa CQI Lead. This workshop will ensure that awardee staff are equipped to support LIA CQI efforts outside of formal CQI meetings during monthly contract monitoring calls. Additionally, the Iowa CQI Lead and Co-Lead will participate in TARC CQI trainings as relevant for training needs.

Support and training offered to LIA staff will include Quarterly Peer-to-Peer calls, twice per quarter CQI Office Hours, and the biennial Iowa CQI Workshop. Quarterly Peer-to-Peer calls will allow LIA CQI Leads to receive training relevant to the current CQI process and project. These calls will also serve as a venue for LIA peer collaboration on the CQI project. Peer learning will remain a cornerstone of these calls based on feedback that this is most engaging and effective to LIA CQI Leads. The first month of the quarter, Iowa MIECHV will host the Peer-to-Peer call. The remaining two months in a quarter, Iowa MIECHV will offer CQI Office Hours. It will be expected that each LIA attend each Quarterly Peer-to-Peer call and at least one Office Hours per quarter. CQI Office Hours will be a come and go virtual space for LIA CQI Leads to receive individualized technical assistance and support on their CQI project. Finally, the biennial CQI Workshop will be a space to bolster CQI capacity throughout each LIA, not just for the LIA CQI Leads. For the 2025 workshop, Iowa MIECHV is requesting at least three LIA staff to attend, with the option for up to five staff members to be in attendance. In 2025, this workshop is being held in-person. The goal of these workshops will be to increase CQI knowledge and engagement throughout each agency to better facilitate LIA CQI work.

3. **How will you engage with technical assistance providers for the purposes of improving CQI practices and methods (e.g., TARC, CQI practicum, HV CoIIN, etc.)?**

   ☒ TARC
   ☐ CQI Practicum
   ☐ HV CoIIN
   ☐ Other Click or tap here to enter text.

   In what CQI areas would you be interested in receiving additional support (e.g., family engagement in CQI, capacity building, etc.)?

   ☒ Family Engagement in CQI
   ☐ CQI Capacity Building
   ☐ Sustaining the Gains from your CQI project
   ☐ Spread and Scale
   ☐ Other Click or tap here to enter text.

4. **Describe the resources and strategies in place to involve home visiting families on awardee and/or LIA CQI teams.**

   To date, Iowa MIECHV has partnered with families through the Lived Experience (LEX) Leaders group. This group has served as a consultant group for MIECHV programming. The LEX Leaders group meets quarterly and is compensated for their time. The LEX Leaders group will continue to be leveraged for parent expertise in CQI work.

   - **To what extent are home visiting families partnering in CQI activities? (e.g., families are involved in ad hoc ways through surveys or focus groups; families are trained in CQI methods; families lead or co-lead CQI activities).**

Currently, families are involved in ad hoc ways through connection with Iowa's Lived Experience (LEX) Leaders group. In the current project, the LEX Leaders were asked to provide input on the measures selected to measure parent engagement.

- **What steps will you take to grow your partnership with home visiting families in CQI activities over the next two years?**

  Iowa is interested in providing CQI training to families involved in LEX Leaders to build their capacity to participate either partly or fully in CQI projects as partners. Additionally, it will be critical to assess the LIA CQI team's Readiness for Parent Involvement and Leadership in CQI. When the LIA CQI team was assessed in July of 2023, there was much hesitancy captured in the assessment. Therefore, it will be important to be transparent and communicate with the LIA CQI team about Iowa's intention to involve parents as partners in CQI initiatives.

CQI Priority(s)

5. **Describe the topic(s) of focus at the awardee level and/or for each LIA. If topics are not known, describe how topics will be identified. Teams may continue to consider their Demonstration of Improvement data when identifying priorities for FY 2025.**

   Use the optional table format or describe the topics below. Be sure to include how topics were identified and how they meet the needs of the communities served by home visiting.

   Iowa MIECHV will continue to select CQI topics based on LIA feedback. We will also use our Demonstration of Improvement data as we make these decisions. This could look like collecting the demonstration of improvement data and analyzing specific performance measures that require improvement with the Iowa CQI Lead group. Based on those data, the Iowa CQI Lead group will identify the top priorities for improvement. After those areas are identified, LIA CQI Leads will complete small-scale root cause analyses related to the topics. The root cause analysis will reveal if there is an underlying or systemic factor that may be playing a role in the identified improvement area that is feasible to improve. Once all information is gathered, the state CQI Lead will call a vote among LIA CQI Leads and the majority vote will be the selected CQI topic. This allows LIA CQI Leads to be a part of the process of identifying an area for improvement and is reflective of how topics have been chosen in the past. Even though this will likely yield one statewide CQI topic, LIAs will be and have been encouraged to explore the individual needs of each LIA and how to cater CQI methods and strategies to their area's needs. In the future, Iowa would like to involve parent voice in this process also, using LEX Leaders group.

Goals and Objectives

6. **Describe SMART aim(s) for the topic(s) listed above. You can use the optional table format or describe the SMART aims for each LIA. Include CQI practicum and HV CoIIN aim(s) for participating LIAs.**

   Iowa does not have an identified SMART aim since no new topic has been selected yet. The Iowa CQI group will plan for a new topic in the first quarter of the upcoming fiscal year. This will allow enough time for LIA CQI Leads to plan for sustainability before the current project concludes.

Changes to Be Tested

7. **Describe your process for identifying changes that teams will test out to achieve the goals and objectives of your CQI projects. If known, please include changes that teams will test.**

Identifying change strategies related to the new topic area will be led by LIA CQI Leads and facilitated by the state CQI Lead. The Iowa CQI Lead will provide helpful resources to LIA CQI Leads, but ultimately, it will be up to LIA CQI Leads to choose which changes make the most sense to test. Additionally, LIAs will be encouraged to choose different strategies depending on the unique needs of their LIA. Change strategies will be tested and retested in multiple iterations using PDSA cycles. If successful, change strategies will be spread to other interested LIAs.

Methods and Tools

8. Identify the CQI tools that will be used by your LIA teams during the implementation period (September 30, 2025 – September 29, 2027) below:

☒ Charter that outlines the scope of the CQI project
☒ Key driver diagram that displays the theory of change underlying the improvement efforts
☒ Fishbone diagrams
☒ Root-cause analysis
☒ Process mapping or flow charts
☒ Data graphs such as frequency plots, run charts, and Pareto charts
☐ Other, please describe: Click or tap here to enter text.

9. Identify the CQI methods that will be used by your LIA teams during the implementation period (September 30, 2025 – September 29, 2027) below:

☒ Plan-Do-Study-Act cycles
☐ Six Sigma
☐ FADE
☐ Model for Improvement
☐ Other, please describe: Click or tap here to enter text.

Measurement and Data Collection

10. **Describe the type of data that will be collected for your CQI project(s), how often, and how data will be reviewed and utilized below or in the optional table format.**

Although Iowa has not yet selected a new CQI topic area for the upcoming project period, it is likely that the data collected for CQI measurement will be collected on a monthly basis using data that is already available in DAISEY or that would be feasible to add to DAISEY for the project period. This data will be quantitative with the option to add additional qualitative data as identified. Although data will be pulled and disseminated monthly, data will be formally reviewed at least quarterly if not more frequently by LIA CQI Leads.

Sustaining the Gains

11. **Describe how you will sustain the progress you make at the awardee and LIA levels after the CQI project ends (e.g., integrating new processes into staff training, updating agency protocols, ongoing monitoring of data, etc.). You may want to set aside time immediately following your CQI project to support LIAs to develop a sustainability plan that determines what measures will be monitored on an ongoing basis, how frequently, by whom, and a plan for action if data regress beyond a certain point.**

    The last quarter of the CQI project will be dedicated to sustainability planning. Each LIA will create their own plan using the MOCHA worksheet addressing areas of measurement, ownership, communication and training, hardwiring the change and build infrastructure, and assessment of workload.

Spread and Scale

12. **Describe the methods and strategies you will use to spread and scale successful interventions and lessons learned to additional LIAs or communities. Consider when these activities will occur given the two-year period.**

    Throughout the project period, LIAs will spread CQI strategies that have been successful at other LIA locations. This process will be LIA-led in order to increase LIA buy-in during the spread of change strategies. Individual LIAs will begin spreading change strategies around January 1, 2027. This will give adequate time for LIAs to complete multiple iterations of PDSA cycles, starting in the fall of 2026, before bringing to additional LIAs. If change strategies are successful when spread to additional LIAs, the LIA CQI Leads will help with decision-making on if and how a certain change should be scaled.

Addressing Community Health Factors in CQI Work

13. **What steps will you take to identify community health factors in your available data within your CQI topic (e.g., disaggregated data by certain variables of interest)?**

    The first step that will be taken to identify community health factors will be asking LIA CQI Leads to review data for their county(ies) service area in the Iowa MIECHV Needs Assessment. These data will help to contextualize CQI priorities across the state in the assessment phase of the CQI project. Identifying these community health factors early on will help the state move toward a unified CQI project that is impactful for all counties served by LIAs.

14. **Describe strategies that you will use to address community health factors in your CQI topic over the next two years. What is the next step you will take?**

    In the planning phase of the CQI project, LIAs will be asked to consider which community health factors may contribute as a root cause or associated with the identified CQI topic area. For example, if breastfeeding were to be chosen, it would be important to consider what outcomes are desirable for families who live with a substance use disorder. Additionally, LIA CQI Leads are encouraged to solicit feedback from local Parent Advisory Councils. LIAs will be encouraged to ask parents directly what community health factors may impact or be related to the CQI topic. Finally, LIAs are always coordinating and collaborating with local service providers. These partnerships will be critical to ensure that community health factors are addressed in CQI work.

References

Wen, X., Korfmacher, J., Hans, S. L. (2016). Change over time in young mothers' engagement with a community-based doula home visiting program. *Children and Youth Services Review. 69 (*pp. 116-126). https://doi.org/10.1016/j.childyouth.2016.07.023.