**Awardee Team Self-Assessment[[1]](#footnote-2)**

This tool is designed to help you assess aspects of your awardee context that can support the overall success of your local implementing agencies (LIAs). The HV CoIIN team is here to support you in building a strong infrastructure and culture to support CQI. As part of the Awardee Community of Practice, awardee teams will utilize the results of their self-assessment to identify and put in place needed infrastructure and supports, share progress, and learn what is working well in other awardee programs.

**Instructions**: Indicate the extent to which you agree or disagree with each statement. When reflecting on your awardee CQI team, consider all the state- or territory-level staff who will support LIAs.

1. Awardee (open text)
2. Most members of our awardee CQI team have worked on improvement projects before.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
|  |  |  |  |  |  |  |  |

1. Our awardee CQI team is made up of members that represent a variety of different roles (e.g., CQI lead, program manager, data expert, model implementation specialist, someone who has experience with providing or receiving home visiting services)

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. Our awardee CQI team represents and reflects the communities served by our MIECHV program.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. The awardee CQI team leader is someone who is readily available to LIA teams.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. Our awardee CQI team effectively uses improvement methods (e.g., Plan-Do-Study-Act cycles, run charts) to make changes to our own processes and system.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. Existing information systems allow us to easily pull data for LIAs specifically needed for this project.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. Our awardee CQI team has adequate financial support, resources, and time for this project.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. As part of our state- or territory-led CQI work, our awardee team provides LIA staff with education and training in how to identify and act on quality improvement opportunities.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. As part of our state- or territory-led CQI work, our awardee team prioritizes the use of LIA data for learning and not judgment.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. As part of our state- or territory-led CQI work, our awardee team sets expectations that LIAs complete at least one Plan-Do-Study-Act cycle per month.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. As part of our state- or territory-led CQI work, our awardee team has regularly scheduled calls with LIAs to discuss and support their CQI work.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. As part of our state- or territory-led work, our awardee team reviews data with LIAs monthly.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. Quality improvement is highly valued at all levels of our MIECHV program.

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| **Totally Agree**  **7** | **6** | **5** | **Neither Agree nor Disagree**  **4** | **3** | **2** | **Totally Disagree**  **1** | **Don’t Know**  **0** |
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1. Some items in this tool were taken or adapted by P. Finnerty from the Model for Understanding Success in Quality (MUSIQ). Kaplan HC, Froehle CM, Cassedy A, Provost LP, Margolis PA. An exploratory analysis of the model for understanding success in quality, *Health Care Manage Rev*, 2013, 38(4), 325-338. [↑](#footnote-ref-2)