

POVERTY OUTCOMES AND IMPROVEMENT NETWORK TEAM (POINT)

Draft Prospectus

Every day, hundreds of children in Northeast Wisconsin go to bed hungry or do not have a safe place to sleep. Every day, hundreds of local adults want to be employed but face obstacles such as mental illness, the lack of job skills, unreliable transportation, or other barriers to finding and keeping a steady job with a living wage. The poverty rate in the region jumped in 2009 due to the Great Recession. Although the rate has stabilized, it has not returned to levels prior to 2009, despite unemployment rates returning to pre-2009 levels. The rate is now almost twice what it was in the early 2000s.

Over the years, efforts have emerged to address the lack of good information about the causes and impacts of poverty and help stakeholders from across the region make strategic decisions on how to address the root causes of poverty. For example, since 2008, the Basic Needs Giving Partnership (BNGP), a collaboration of funders from across NE Wisconsin, has tried to tackle the root causes of poverty to make a difference for individuals and families not only for today, but for their futures.

Additionally, the L.I.F.E. Study, or Leading Indicators for Excellence, focused on community sectors like self-sufficiency, health, economic development, and education. The L.I.F.E. Study helped lay the foundation for community-driven visioning efforts like the Brown County 20-20 Summit, the Fox Cities Mental Health Summit, and Tackling Wicked Problems in the Oshkosh area.

In this region defined as Northeast Wisconsin*, it is clear that we have services to assist the homeless; programs to support at-risk children; and resources for individuals seeking employment. However, the most significant issues facing our community are too complex and too difficult for single organizations to tackle effectively. Even in light of the progress made by organizations across all sectors of the region, and after millions of dollars invested by communities to help people escape poverty, we have not yet seen the breakthrough improvements on poverty that we want and need to see.

*Northeast Wisconsin may include the counties of Brown, Kewaunee, Oconto, Outagamie, Winnebago, Calumet, Waushara, Green Lake, Waupaca and Shawano counties based on levels of community engagement.

Cross-sectoral stakeholders in the region have come together to embark upon a multi-year journey to achieve breakthrough improvement in poverty reduction. As part of this longitudinal effort, we invite you to join the *Poverty Outcomes and Improvement Network Team (POINT)*, an 18-month improvement initiative beginning in 1st quarter 2016.

For this work, stakeholders in NE Wisconsin will be partnering with the Institute for Healthcare Improvement (IHI), a global not-for-profit organization that seeks **to** partner with organizations and communities to create a healthy community by addressing those issues that have a significant impact on health, such as education, social services, economic development, etc. POINT will draw upon and adapt programmatic activities included in IHI's Breakthrough Series (BTS) Collaborative Model, described in further detail on the following pages. IHI developed the BTS model in 1995, and is a widely accepted model for those seeking breakthrough improvements on complex issues. The

model employs the science of improvement, an applied science that emphasizes innovation, rapid-cycle testing in the field, and spread in order to generate learning about what changes, in which contexts, produce improvements. It is characterized by the combination of expert subject knowledge with improvement methods and tools. It is multidisciplinary — drawing on clinical science, systems theory, psychology, statistics, and other fields. Throughout this process, IHI will be a partner, advisor, teacher and coach to improvement teams throughout the region.

With the overall aim of building the foundation to achieve breakthrough improvement in poverty reduction in NE Wisconsin, POINT is designed to:

1. Guide the structural, service delivery, and process changes as well as capacity development of the participating organizations needed to drive results for the community;
2. Develop a learning system at both the community and the regional level which fosters intentional testing and learning, and feedback loops to understand movement on specified poverty aims and measures;
3. Accelerate results and integrate and align the assets of local leaders and organizations to develop capacity for long lasting collaboration with new and existing partners.

Whether your organization has already established services delivered within the community to specifically address the root causes of poverty, or you are just starting out, our goal is to help you make a positive and sustainable difference for the people you serve and see breakthrough improvement on poverty numbers in our region.

Approach

The Poverty Outcomes and Improvement Network Team will focus on a small set of key drivers of poverty. Below is a draft list of drivers identified at a regional meeting in July 2015. While these drivers might be added to or changed over time due to our learnings, the list must remain small in order to keep an effective focus:

- Adequate education
- Family support and social connectedness
- Job and economic stability
- Affordable health care
- Psychological health and addiction (e.g. mental and behavioral health, AODA, well-being)

Organizations participating in POINT will seek to positively affect one or more of these drivers. Organizations will do this by testing and scaling-up interventions within specifically defined improvement projects. Examples of possible improvement projects:

Driver	Examples of Possible Aims for Improvement Projects
Adequate education	<ul style="list-style-type: none"> • For those individuals in poverty, increase the number of individuals achieving GEDs by 20% by December 2016 • Decrease the time it take to enroll an individual in job training by 25%
Affordable health care	<ul style="list-style-type: none"> • For those individuals in poverty, increase by 15% the number of individuals with health insurance with a monthly premium costing no more than 9.5% of monthly income • Increase the number of single parent families who report that child care meets their needs by 25% by December 2016
Job and economic stability	<ul style="list-style-type: none"> • Place in sustainable employment at least 20 more individuals in 2016 than placed in 2015 through improved methods mental health outreach for the homeless population. • Place in sustainable employment at least 20 more individuals aging out of foster care in 2016 than in 2015. • Place in sustainable employment at least 20 more women in 2016 than in 2015 through improvement in worksite experience. • Place in sustainable employment at least 50 more individuals in 2016 than 2015 by better matching skills training to available jobs
Psychological Health & Addiction	<ul style="list-style-type: none"> • Increase by 25% the number of people who rate the quality of the counseling they received at the clinic as excellent • Increase by 25% the number of people who have the confidence they can meet their treatment goals

Participants in POINT will work collectively to reduce poverty in the region by developing and monitoring certain measures of poverty agreed upon regionally. Each participant organization will contribute to reducing poverty through their specific improvement project(s).

It will be important to track the progress of each project. With the help of IHI, participants will identify appropriate measures for their particular projects including both outcome measures (e.g., number of persons placed in sustainable employment, percent of the homeless population placed in permanent housing) and process/output measures likely to lead to those outcomes (e.g., number of persons enrolled in skills training, number of persons screened for mental health issues). The project measures will link logically to the interventions being tested and will be used within POINT to track progress toward the overall goal of reducing poverty. Data collected over time (e.g., monthly, quarterly) on process and outcome measures will be used to facilitate further improvements.

Below is one example of how process and outcomes measures might be tracked and linked to drivers. This data would be tracked over time. Organizations not involved with specific improvement projects will be able to be part of POINT by reporting key data related to the drivers on a regular basis.

Tentative Indicators of Progress for POINT

Measure	2015 Result	2016 Goal	2016 Result
<i>Access to Affordable Health Care</i>			
# of low-income individuals who receive health insurance			
<i>Adequate Education</i>			
# of low-income individuals who receive workforce training			
# of individuals enrolled through community-based agencies in GED classes			
# of individuals enrolled through community-based agencies who obtain a GED (possible sub-population: # of individuals who were in foster care who obtain a GED)			
# of individuals enrolled through community-based agencies in post-secondary educational institution or program			
<i>Job and Economic Stability</i>			
# of individuals who obtain employment with a salary > \$25k			
# of individuals who maintain employment for > 3 months			
<i>Psychological Health and Addiction</i>			
# of low-income adults meeting their mental health treatment goals			
# of low-income children meeting their mental health treatment goals			

Timeline

POINT will have short-term and long-term measures. Real change is likely long-term, with guideposts of three to five years or longer. Accomplishing this long-term purpose, however, requires a host of improvement projects and investments that can be addressed in a shorter term. The initial 18-month pilot will allow participating organizations to successfully build a robust infrastructure for measurement and improvement, define and advance key projects with short-term project measurement, and may even attain some initial measureable progress on poverty-focused drivers, at least for pilot populations.

Tentative POINT Schedule of Activities

	Dec - 15	Jan - 16	Feb - 16	Mar - 16	Apr - 16	May - 16	Jun - 16	Jul - 16	Aug - 16	Sep - 16	Oct - 16	Dec - 16	Jan - 17	Feb - 17	Mar - 17	Apr - 17	May - 17	Jun - 17
Pre-work/ Informational Calls	●	●																
Learning Sessions			●			●			●			●			●			●
Bootcamp			●															
Progress Reporting				●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
All-Team Coaching Calls				●	●	●	●	●	●	●	●	●	●	●	●	●	●	●

Benefits of Participation: Better Meeting Your Mission

All participants are committed to reducing poverty, and in doing so, better fulfilling their missions. In addition to reducing poverty, the skills, tools, and learnings from participation should increase organizational effectiveness in general.

In order to achieve ambitious, systematic, and sustainable results to reduce poverty described above, POINT participants will be part of a larger learning community supported by local and regional teams, and IHI. The IHI Breakthrough Series (BTS) Collaborative Model is grounded in the science of improvement, a BTS Collaborative is a learning system that brings together a number of teams, either from various organizations or within a single organization, to seek improvement in a focused topic area. Using small-scale testing and a system of measurement and learning to achieve specific goals, teams of people from a variety of levels and roles will be able to share expertise and data with each other, creating an environment of “all teach, all learn.”

Key elements include:

Pre-work/Informational Calls: Those organizations interested in joining POINT can join one of two informational calls. IHI will discuss this approach in more depth and answer questions you may have after participating in the informational meeting in your local area. You will be able to learn more about programmatic activities of POINT, including timeline, events, expectations of participating teams and organizations; and review pre-work for the first Learning Session, including forming an improvement team.

Learning Sessions: Over the course of the 18-month initiative, improvement teams will convene quarterly for up to six in-person learning sessions. These meetings provide an opportunity for learning, networking, and refinement of action plans. Participants will explore the ideal services and specific changes that, when applied locally, will improve poverty outcomes. Teams receive further coaching from a local Improvement Advisor on the Model for Improvement. Participants will organize their learning around a specific project, preferably focused on one or more drivers of poverty, within their organization or coalition. Multiple members of each improvement team will be encouraged to participate in all Learning Sessions. Teams will come to the meetings with a summary of their work to date that will be shared with all of the other participants.

Boot Camp - Workshop on Deeper Improvement Methods and Tools: All participating teams will have the opportunity to designate representatives to attend a unique hands-on 1.5-day workshop taking place immediately following Learning Session One that will provide a deeper grounding in the concepts, tools, and methods needed to effectively drive an organization or coalition's improvement initiatives, such as process mapping or intensive measurement skills. As a supporting activity to the learning in POINT, each team must have an improvement project, new or already underway, in order to participate. Whether participants are new to quality improvement or are seeking to deepen their experience and skills, this workshop will change their perspective on improvement science and deepen their quality improvement knowledge, providing a deeper resource within each participating organization in POINT.

Action Periods: During Action Periods (between Learning Sessions), improvement teams will use rapid-cycle testing of change to advance their individual action plans. Action Periods are devoted to testing new changes and spreading those that have shown success. The intent is for participants to scale up from smaller to larger populations as quickly as possible when the initial data suggests a promising approach. During Action Periods, teams will report their progress over time and participate in the all-team calls, both described below.

Progress Reporting: Teams will report monthly on their indicators of progress, with full reports of improvement project activities and measures at each quarterly Learning Session.

Monthly All-Team Coaching Calls: IHI faculty members will lead one-hour, monthly virtual coaching sessions to help all teams explore the steps involved in designing effective and sustainable improvements. Calls will feature the work of teams and address issues relevant to the challenges the teams are facing.

Throughout the initiative, participants will benefit from IHI expertise and local support:

- Guidance and coaching from faculty on the key content and methodologies necessary to achieve positive results in specific improvement projects.
- Guidance on testing, implementing, and scaling up strategies for addressing the key drivers of poverty.
- Support for developing measurement strategies and collecting, tracking, and analyzing data.
- Coaching to build each team's capability to learn what works in its setting, using the methodologies and knowledge of IHI.

Who Should Participate?

POINT is appropriate for organizations committed to improving services that address the root causes of poverty for area individuals and families. These organizations might include:

- Health care organizations (health systems, primary care, community health centers)
- Government agencies
- Mental and behavioral health services organizations
- Local community-based organizations
- Educational institutions and supportive organizations
- Local businesses
- Financial services organizations
- Faith-based groups
- Human and social services organizations
- Housing organizations
- Job training and workforce development organizations

Expectations of Participation

All participant organizations should be committed to reducing poverty. To succeed, each member of the *Poverty Outcomes and Improvement Network Team* will need to have commitment from all levels of the organization.

Senior Leadership Support: This initiative should be a recognized priority supported by each organization's senior leadership and governing board. These leaders should stay actively connected to improvement team work in which their associates are engaged.

Dedicated Project Resources: Organizations should plan on devoting staff resources to move their improvement projects forward. A project leader will oversee the activities of the improvement team and will need the time, resources, and accountability to succeed. An improvement team typically consists of 2-5 members who may represent a wide range of stakeholders, front-line staff, individuals receiving services, community partners and, if possible, someone trained in quality improvement and measurement.

Improvement Skills: Participants should understand that a tangible benefit of participation is the opportunity to learn how to develop effective and methods to implement changes over time based on data. Participants should be willing to learn these improvement skills.

Partnering and Inclusion: Participating organizations should be interested in reaching beyond their usual boundaries to develop partnerships with many types of organizations such as health care organizations, social service agencies, local governments, public health departments, educational institutions, civic, religious, and other non-profit or voluntary organizations focused on reducing poverty. We encourage participating organizations to include individual, family, and community representatives as active team members.

Next Steps

If your organization is interested in learning more about POINT, plan to participate in an upcoming 75-minute informational WebEx, led by POINT leaders and IHI faculty members. More information on the enrollment process will be detailed in the Pre-Work/Informational Calls.

- **Friday, December 18 - 10:00 – 11:15 AM**

Webinar Access: Go to <http://ihi.webex.com/trainingcenter> (Note: There is no “www” in the address.)

- o Click on the session titled ‘**POINT Informational WebEx**’
- o Enter the required information (name and email address) on the right hand side of the screen
- o A pop-up box will appear with all the call-in information. If the phone number does not appear, go to “Communicate” Menu and select “teleconference” then “Join Teleconference.”
- o US: 1-866-469-3239
- o Session Number: 627 470 809 #
- o There is no password for this session

- **Wednesday, January 6 - 2:00 – 3:15 PM**

Webinar Access: Go to <http://ihi.webex.com/trainingcenter> (Note: There is no “www” in the address.)

- o Click on the session titled ‘**POINT Informational WebEx**’
- o Enter the required information (name and email address) on the right hand side of the screen
- o A pop-up box will appear with all the call-in information. If the phone number does not appear, go to “Communicate” Menu and select “teleconference” then “Join Teleconference.”
- o US: 1-866-469-3239
- o Session Number: 624 809 144 #
- o There is no password for this session

References

The Breakthrough Series: IHI’s Collaborative Model for Achieving Breakthrough Improvement. IHI Innovation Series white paper. Boston: Institute for Healthcare Improvement; 2003.

<http://www.ihi.org/resources/Pages/IHIWhitePapers/TheBreakthroughSeriesIHIsCollaborativeModelforAchievingBreakthroughImprovement.aspx>