





Quality Improvement Team Maturity Index

Date of assessment	
Name of WIT Team	
Name/designation of QI	
Coach	
Name/designation of QI	
Coach	

Purpose:

To monitor progress in WIT maturity to be able to systematically monitor, assess and improve quality of community health services on a routine basis

Process:

- I. To be scored on a quarterly basis
- 2. All criteria for each score must be achieved in order to advance to the next score
- 3. WITs to self assess their QI maturity score prior to QI coaching visit
- 4. At the end of the coaching visit, QI coach will compare and discuss WIT self-assessed score with their own score and jointly agree the team maturity score
- 5. I copy of completed tool kept in WIT file, I copy presented at quarterly QI coaches meeting

Expectation:

The WIT will progress to an advanced level of QI maturity in which the team works independently, with minimal need for QI coaching and has embedded QI into community health services

Score	Description	✓	Criteria
1.0	Forming		WIT had been formed and a Terms of Reference has been signed by all members
			First WIT meeting has taken place (with minutes of meeting)
1.5	Beginning to routinely monitor quality and performance of CHS		WIT is actively meeting on a monthly basis (minutes of meetings)
			CHS programme data is reviewed at WIT meetings (MoH 100, MoH 514, MoH 515)
			Data Quality Analysis (DQA) tool administered on quarterly basis, community follow-up tool administered/summarised on six-monthly basis
2.0	Planning for improvement has begun		Analysis of CHS programme data using District Health Information System/data dashboard and monitoring changes in performance over time (run graphs)

Score	Description	✓	Criteria
			Analysis of Community follow-up data (bar graphs) Analysis of DQA data (scores calculated)
			Quality Improvement Change Plan developed using existing data with target set and SMART indicator/s defined for measuring change
2.5	Implementing Quality Improvement Change Plan, but no improvement in team maturity		Testing changes in Quality Improvement Change Plan with some engagement of WIT members, efforts mainly driven by WIT leader
			Data on key measures is being collected, analysed and reported using visual display of data
			Team lacks confidence in how to respond to the data. Team have not reviewed and /or updated change plan based on data
Improveme some impro	Implementing Quality Improvement Change Plan and some improvement in team maturity		Testing changes in Quality Improvement Change Plan, with increasing engagement of WIT members, efforts still mainly driven by WIT leader
			Data on key measures is being collected, analysed and reported using visual display of data
			Some improvement in team's ability to respond to the data. WIT has reviewed/modified Quality Improvement Change Plan based on data
			Some WIT members able to describe what changes are being made and the impact of these changes (both positive and negative)
3.5	Implementing Quality Improvement Change Plan and modest improvement in team maturity		Change ideas reviewed and implemented with good engagement of some but not all WIT members
			Data on key measures is being collected, analysed and reported using visual display of data
			Evidence of moderate quality improvement with two to three months of data showing change from baseline
			WIT members able to describe what changes are being made and the impact of these changes (both positive and negative)
4.0	Significant improvement in team maturity		All WIT members actively engaged in quality improvement
			Team identifies and analyses additional quality problems and develops new Quality Improvement Change Plans
			Data on key measures is being collected, analysed and reported using visual display of data
			Sharing of improvement work and results in county, sub-county or link facility meetings
4.5	Sustained improvement in team maturity		All WIT members actively engaged in quality improvement with evidence that they see quality

Score	Description	~	Criteria
			improvement as integral to their work (time allocated to quality improvement work)
			Team identifies and analyses additional quality problems and develop new change plans with minimal support from QI coach
			Data on key measures is being collected, analysed and reported using visual display of data
			WIT supports other Community Health Units (CHUs)/sub-county WITs in implementing similar changes
5.0	Outstanding sustainable results		Strong commitment from WIT to sustain their work, evidenced by annual Quality Improvement Change Plan and systems/processes to embed WIT structure WIT is involved in spreading their work to new sub- counties / CHUs
			Consistent improvement and changes implemented for at least 18 months
			WIT is recognised at county/national level as example of good practice (through learning and exchange events).
			WIT members participate in National/County level meetings for advising/developing CHS guidelines, standards and training

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