Building Capacity for Organizational Improvement in Early Care and Education: The Breakthrough Series Collaborative Approach

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Agenda

1. Study Context
2. The Breakthrough Series Collaborative Methodology
3. Study Findings: Coaching teams and organization for learning and improvement
Study Context: Breakthrough Series Collaborative on Trauma-Informed ECE

➢ Professional development intervention with six urban ECE programs, led by the city’s public health commission and funded by the US Department of Justice

➢ Dual focus:
  1. Trauma-Informed Care practices
  2. Teach methods for improvement (implementation)
What is the BSC Model for Improvement?

➢ A structured evidence-based quality improvement method for learning and implementing new practices

➢ Purpose:
  ➢ To close the gap between what we know and what we do
  ➢ Promote spread & sustainability of improved/new practices

➢ Extensive evidence supporting this method in health care sector

• Institute for Healthcare Improvement, www.IHI.org
Learning Collaborative Process

• 18 months, multiple teams
• Pre-Work and Launch period
• 4 2-day Learning Sessions: mutual cross-team learning; interactive
• Action Periods: testing change (PDSAs)
  – Affinity groups meeting
  – Technical assistance
  – On-site team/organizational Coaching (added/expanded)
Shift in Professional Development Approach

• Organizational and systems approach to professional development
• Teacher quality is a property of organizations, and the organizational capacity to support and sustain high quality practices.
• Requires new capabilities of our PD systems and providers
Research Questions

1. How was the BSC methodology implemented in the ECE context?
2. How did ECE programs improve trauma-informed practices as a result of the BSC?
3. How might the BSC model be best adapted for the ECE context?
Results: Implementation
Core Components as Facilitators of Change

1. Implementation teams
2. Data and feedback loops: metrics
3. Implementation infrastructure

➢ What did they look like in practice and why did they matter?
Results: Implementation Components as Facilitators of Improvement

1. Teams

➢ Engaged organizational members across roles to collectively lead change
➢ Teachers, in some cases, parents, as active agents of change
➢ Teams drove the change, not an external “expert”
Teacher Team Member

• “[Through my participation in the BSC] I've become a stronger teacher; I’m known more in the community. It's led me spread my wings into the project and made me feel strong and that I deserve the same respect as all involved in the BSC.”
Parent Team Member

• I like our parent meetings because when we first started, we were all a little shy ... but if you go to one of our parent meetings now, you'll think that we all hang out outside of the meeting because of the way that we talk to each other, we interact with each other, the way we throw out ideas at each other, which is what I like so... I don't only have my own opinion. I get to hear somebody else, like, ‘Oh, that would actually be a good idea. Maybe we should try that.’
Results: Implementation Components (Cont.)

2. Data and Feedback Loops
   ➢ Collected monthly metrics and discussed/analyzed together
     ➢ *Ex: # of behavioral disruptions today; # of children about whom two-way communication took place between teaching staff and parents/caregivers*
   ➢ PDSA cycles: learned how to test small changes, to see if they worked, and learn how to make continuous improvement

3. Infrastructure
   ➢ Regular cross-role meetings with “relational space”
     ▪ Built organizational capacity for change and improvement
     ▪ Mutual learning and reflective practice; problem-solving communication
Learning to Improve: Using Data and PDSAs

In the beginning I was trying to communicate with [this parent]. I offered to do her child's progress report over the phone. So I felt like I was taking the steps and she was kinda like brushing it off.

And then I was just like, “Okay, that didn't work.” Through the [BSC] program I learned, “Okay, that didn't work, so what am I gonna do next to try to communicate with that parent?” ... Not just “That didn't work, okay, I'm just gonna back off,” And that's when the PDSA of the e-mail came to mind.

So I think that's definitely a good example of how my parent approach has changed. Now I'm persistent in a way that's respectful.... I just have to keep trying and find another way if something doesn't work. - Teacher
**Program B PDSA Tracker**

*Please use this form to track your PDSAs. Each team should be working on about 2-5 tests at one time. The PDSAs should be a mix of PDSAs that you are building on to move towards sustainable practice and new PDSAs that you are starting. We are looking to see your progress over time. You can add rows to the table if you have more tests than five for your PDSA. This form should be submitted to … the 2nd and 4th Friday of each month.*

<table>
<thead>
<tr>
<th>Title: Five Minute Focus</th>
<th>Last Updated: 3/24/2014</th>
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<tbody>
<tr>
<td>CCF Theme: V. Daily Interactions with Children and Caregivers that Promote Resilience</td>
<td>What makes this PDSA trauma informed? It is a daily interaction that will promote resilience and increase the student’s ability to cope with other challenges throughout the day, reflecting back to the five minutes of positive time.</td>
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**Tracking your PDSAs!**

<table>
<thead>
<tr>
<th>Plan: What are you going to do? What is the <strong>strategy</strong> being tested? Keep it small! Include by who and by when.</th>
<th>How will you study your PDSA? What do you want to see by making this change? How will you know?</th>
<th>DO Your Test!</th>
<th>Study: How did it go? What did you learn from your test? What worked? What didn’t?</th>
<th>Adjust: What will adjust in your next test? What else do you need to learn? What will be your next test? (Fill out the PLAN for the next test!)</th>
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<tbody>
<tr>
<td><strong>Test #1</strong> Intentionally spending five minutes of positive connection time daily with an individual student who has challenging behaviors that we suspect may be linked to their trauma background. Who: Red Room teacher by February Break.</td>
<td>We’ll look at the classroom disturbance chart weekly to see if there is a decline in the individual student disturbances</td>
<td>In class disruptions decreased almost immediately. Out of class disruptions decreased completely and stayed nonexistent. We did not expect such a fast and drastic result and are not sure what we learned. We almost wonder if another coinciding factor helped to decrease the behavior since the change was so immediate and extreme! We need to test it with another student.</td>
<td>What worked for this student was conversation about a topic of interest. We will try this, but are wondering if a younger age group will not benefit as much from conversation. The Focus time may need to be physical…?</td>
<td></td>
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<tr>
<td><strong>Test #2</strong> We are going to expand it to another younger classroom to test if the strategy can be effective with a different student, different teacher, different age group. Who and When: Blue Room Teacher by April Vacation</td>
<td>We’ll look at the classroom disturbance chart weekly to see if there is a decline in the individual student disturbances</td>
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Lessons Learned

1. Demonstrates an integrated and embedded PD approach:
   - Coaching for content AND coaching for improvement
   - Engage leaders, educators, and support staff and parents together as agents of change and improvement
   - Creates supportive organizational context for learning and improvement

2. Need to build organizational and systems infrastructure for improvement
   - Organizational routines: Adult meeting time/space
   - Organizational health and resilience
   - Building PD and QI system capacity to support systems approach to improvement