

Maximizing the Quality of Planning Processes



**Diane Altman Dautoff and Marni Mason
MCPH Healthcare Consulting**

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Tools for Quality Planning



- **Sector Mapping to identify Key Stakeholders and their needs**
- **Affinity Diagram to organize ideas or issues into categories**
- **Force Field Analysis to identify driving forces and restraining forces**
- **Meeting Effectiveness Tool to improve the participation and contribution of community partners**

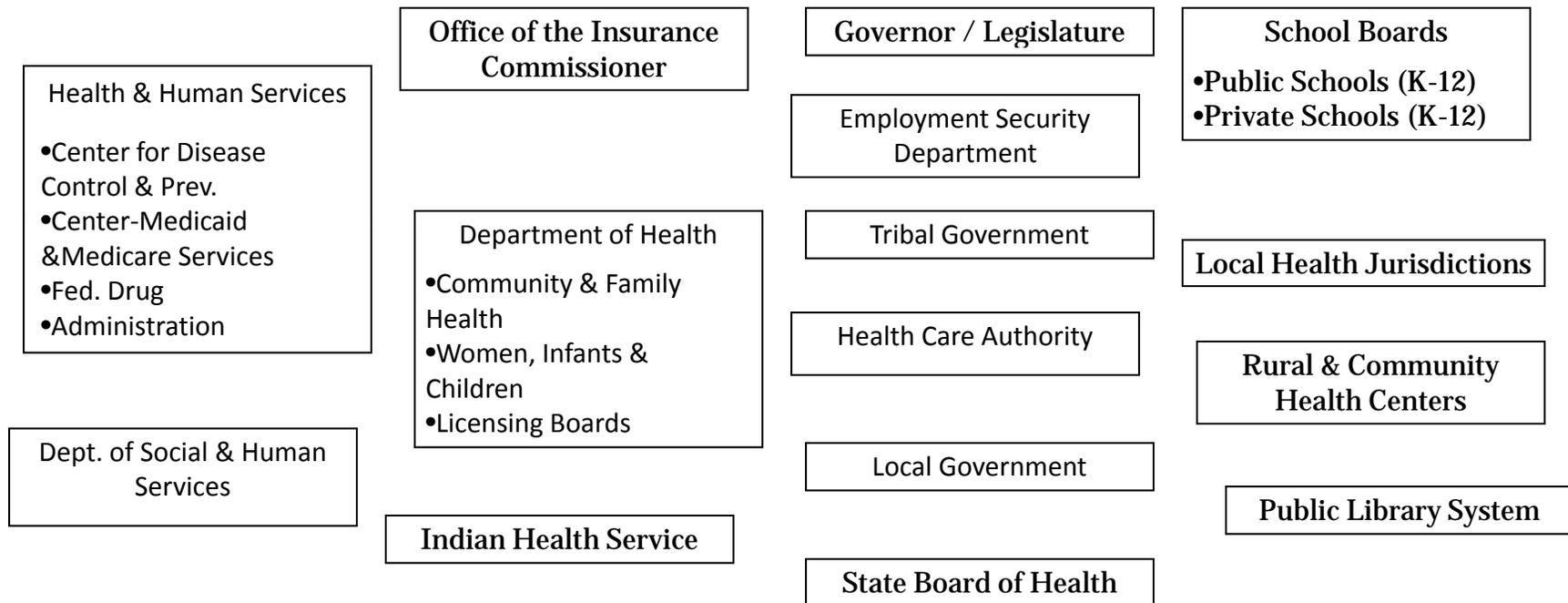


Sector Mapping Tool



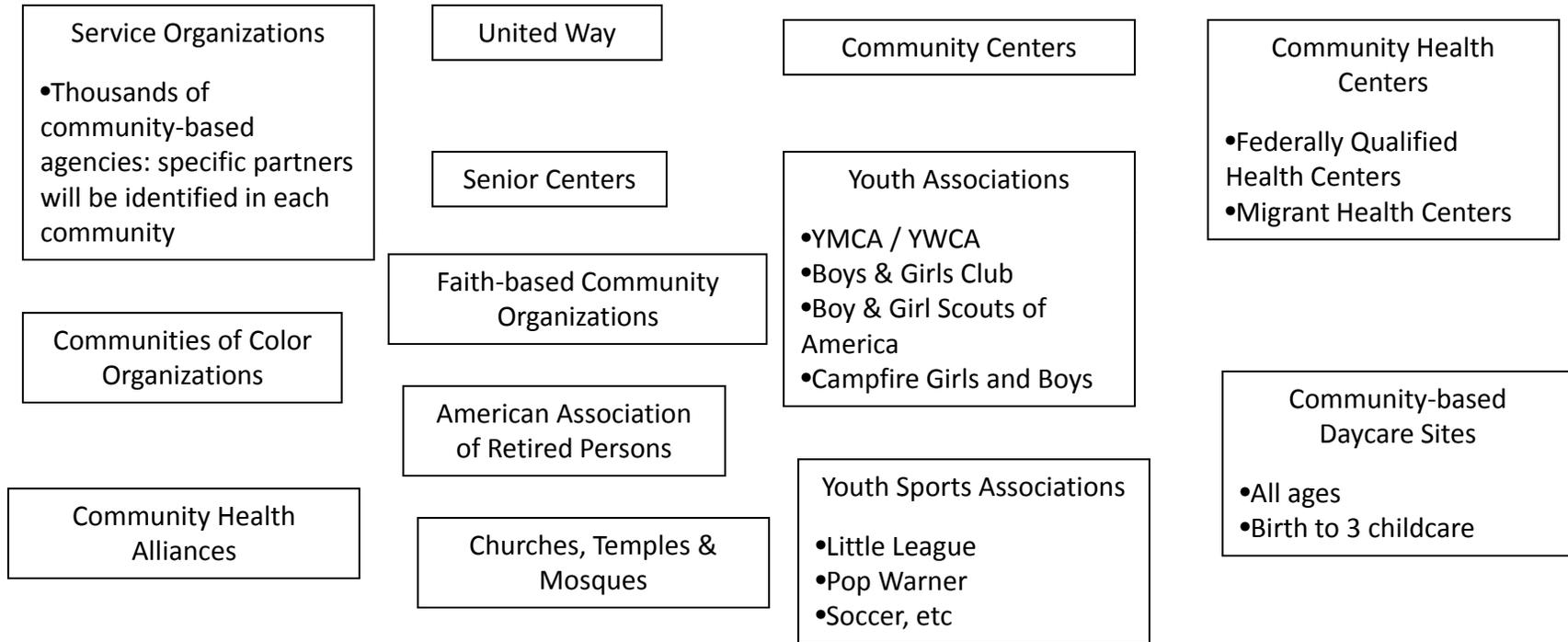
- Use sector maps to identify a wide range of key stakeholders and partners in different sectors of a system
- Categories of sectors can include:
 - Public Sector
 - Private Sector
 - Community Sector
 - Academic/Research Sector

Sector Maps for Planning –Public Sector



Bullets refer to examples of organizations and are not a comprehensive listing.

Example of Community-Based Sector



Bullets refer to examples of organizations and are not a comprehensive listing.

Affinity Diagram*



- **Why use it?**
 - To allow a QI team to creatively generate a large number of ideas/issues and organize in natural groupings to understand the problem and potential solutions.
- **What does it do??**
 - Encourages creativity by everyone on team
 - Breaks down communication barriers
 - Encourages non-traditional connections among ideas/issues
 - Allows breakthroughs to emerge naturally
 - Encourages ownership of results
 - Overcomes “team paralysis” **PH Memory Jogger page 12*

How to Build an Affinity Diagram



- Phrase the issue under discussion in a full sentence and write at the top of full size flip chart paper
- Distribute 3 x 5 post-it notes to each participant
- Follow the rules for brainstorming
- Have each participant write their ideas on the Post-Its, one idea per sheet in large letters, 4-7 words each
- Have participants place their Post-Its on Flip Chart
- Facilitator assists group to sort Post-Its into 5 – 10 related categories
- For each category create a title or heading
- Review categories and ideas to rearrange, if necessary

Uptake of Vaccines Example (Kittitas, WA)

Physicians reasons

Barriers

Vaccine efficacy is low

Insurance status

Lack of routine healthcare in adolescents

Severity of infection is

comfortable with your

Patient-related

Parent knowledge about illnesses is insufficient

Parent perception of vaccinations

Overestimated risk of side effects – parent fear

Parent perception that children are at low risk of contracting illness

Adolescent/parent refusal

Other questions

Would you support vaccinations in other settings? (school clinics, teen clinics, health department clinics)

What are your clinics plans with the loss of universal vaccine status in WA?

What do you think your coverage rate is?

Do you refer elsewhere for immunizations?
All, or only certain?
List of reasons...

Do you have a system to track/recall immunization patients?

Do you ever perform routine audits of charts for immunization status?

How do you check imms status, EMR, paper chart, CHILD profile?

Barriers to vaccinating adolescents

Reasons for not vaccinating

Insurance

Unknown vaccine efficacy

New vaccine with little safety track record

Promotes promiscuity

Incomplete record status

Severity of infection is low

Can cause other health problems (allergies, autism)

Children oppose vaccination

Herd immunity

Diseases are very rare

Do you have a priority that can give i

Safety of vaccination

Lack of knowledge about recommended vaccines

Don't know current recommendations - they change frequently

Cost o

Oppose vaccinations
personal or religious values

Need for multiple doses

Don't know what shots my child has had - no access to record

Would you seek settings? (school health dep

Inconvenient

Vaccines may cause the diseases meant to protect against

Residen

Too many vaccines may "overwhelm" immune system

School entry requirements

Medical contraindication of child or sibling

Does your provider remind you of needed immunizations?

My child i

Signed exemption?

Forgetfulness

Force Field Analysis



- **Why use it?**
 - To identify the forces and factors in place that support or work against the solution of an issue or problem so that the positives can be reinforced and/or the negatives eliminated or reduced.
- **What does it do?**
 - Presents the positives and negatives of a situation so that they can be compared
 - Forces people to think about all aspects of making a desired change a permanent one
 - Encourages honest reflection and agreement about the relative priority of factors on each side of the “balance sheet”

PH Memory Jogger pg. 63



Kane County Community Partnership QI Project

Force-Field Analysis

Ideal State:

We participate in meaningful community partnerships that are productive and objective-based with appropriate from agencies creating mutually beneficial outcomes.

+ Driving Forces

Efficiency →
Synergy →
Outcomes →
Create Momentum →
Productive →
↑ Collaboration to build momentum →
Clout →
Connections →
Visibility →
Positive relationships with partners →

Restraining Forces -

← Lack of Ownership
← Follow Through
← Time Barriers
← "Who gets credit" issues
← Competition
← Duplication
← Inertia
← Funding

Prioritizing Forces of Change

● Measurable outcomes↑	5
● Follow through↓	5
● Productive↑	4
● Positive relationships w/ partners↑	4
● Duplication↓	2
● Lack of ownership↓	2
● Visibility↑	1
● Efficiency↑	1
● Funding ↓	1

Kane County July 20, 2009

Down arrow signifies restraining force, up arrow signifies driving force

Force Field Analysis*

*Please Note: positive driving forces amplitudes have not been substantiated by quantitative data

Force Field Analysis

Initiating and Maintaining Breastfeeding for up to 12 Months



Example- AIM for Meeting Effectiveness



- What are We Trying to Accomplish? *Increase the effectiveness of Community Health Improvement Plan (CHIP) coalition meetings and maximize stakeholder participation. We do this in order to increase member engagement and contribution to the implementation of the CHIP.*

Evaluating Meeting Effectiveness



Evaluating Meeting Effectiveness

Instructions: After each meeting, use this form to evaluate your group's ongoing effectiveness. Have each participant complete the form, and then discuss the results to identify what went well, and what could be improved in future meetings. Please use a scale from 1-5 for each item, with 1 = not very and 5 = to a great extent. (Rating of 5 is best)

- 1. Commitment to the group:** To what extent was I committed to helping to achieve the group's goals for this meeting?

Meeting #

1	2	3	4	5	6	7	8	9	10

- 2. Clear Goals:** To what extent were the goals clear for this meeting?

Meeting #

1	2	3	4	5	6	7	8	9	10

- 3. Communication:** To what extent was the discussion open, with sharing of diverse ideas and perspectives?

Meeting #

1	2	3	4	5	6	7	8	9	10

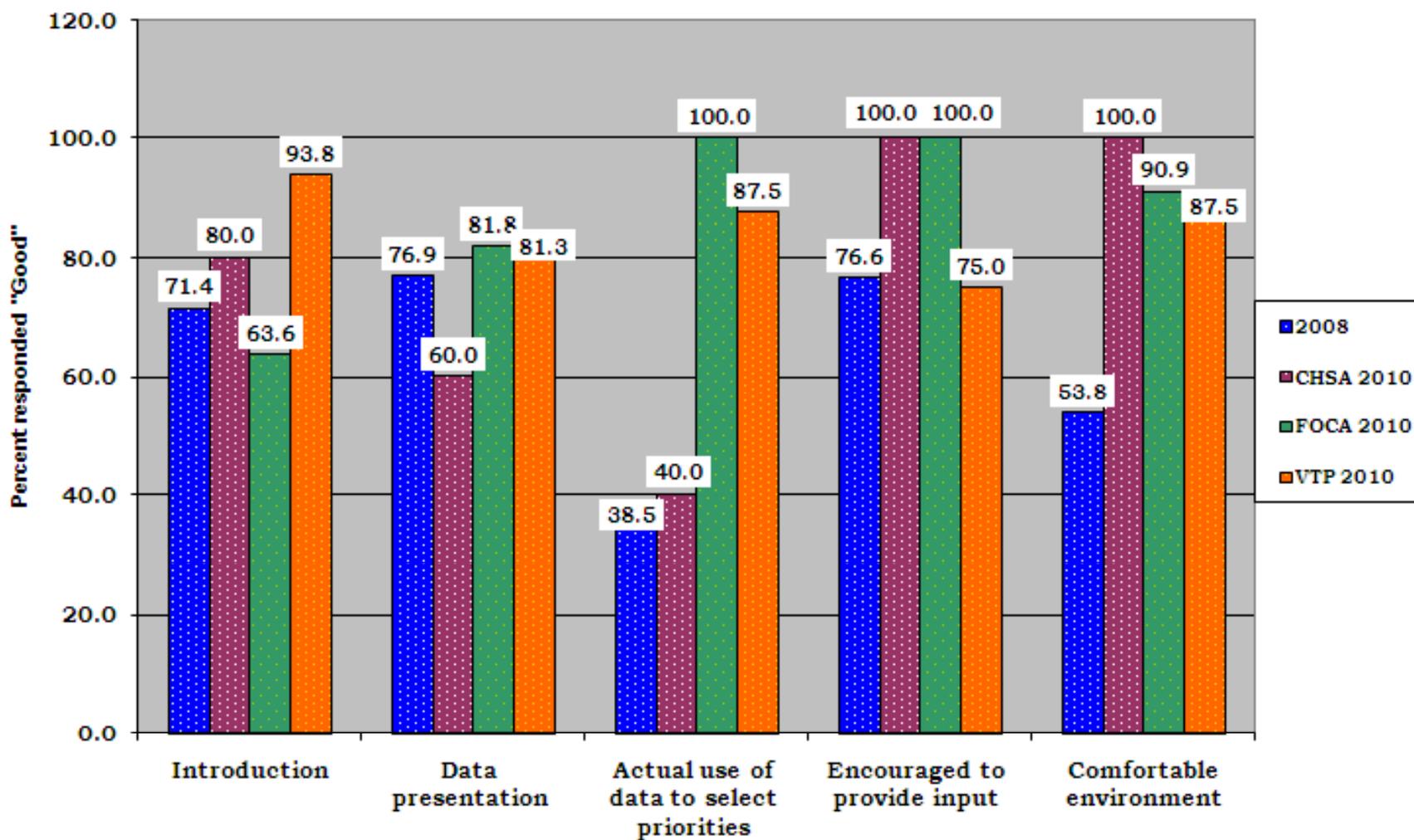
How Will We Know When We Get There?

Measurements



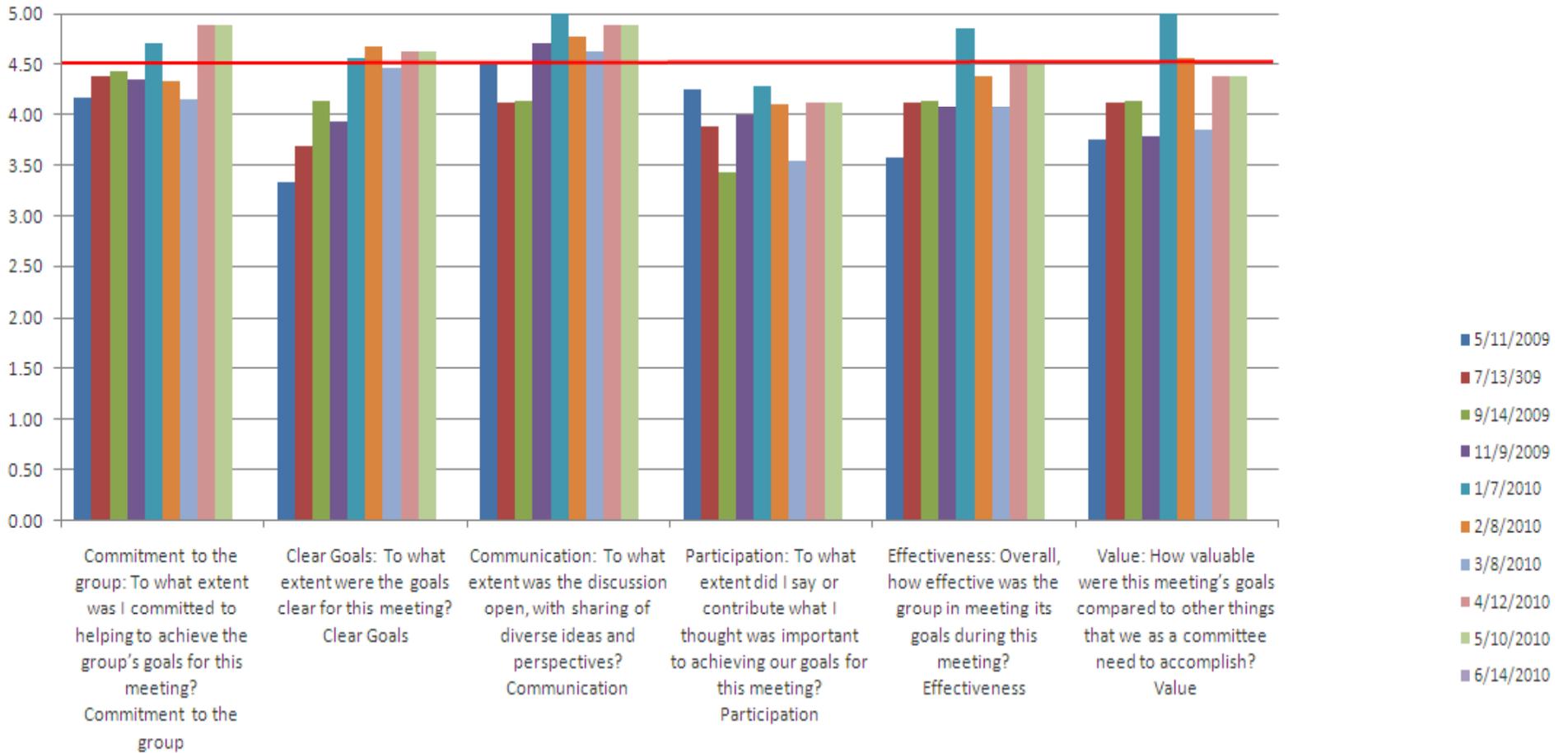
- Increase in meeting attendance (% of members that regularly attend)
- Increase in effectiveness (% of members rating meetings as effective or valuable)
- Increase in engagement (% of members rating their commitment as high)
- Increase in participation (% of members that contribute resources to CHIP activities)

Comparison of 2008 and 2010 Processes (%)



Comparing Participant Evaluation Data Peoria County

Meeting Effectiveness Measurements Adams County



In Summary...



- **Using Quality Planning methods and tools can improve public health planning processes**
- **Build on proven practices from other health departments**
- **Be intentional about which methods and tools to use for improvement based on the topic and needs**
- **Remember to plan for holding the gains and sustaining improvement (quality control)**

