

2011 Washington State Standards Performance Review Summary



**PRELIMINARY REPORT
STANDARDS WORKGROUP**

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Type of Standards Review by LHJ

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- **National/PHAB set: 10 LHJs including Benton-Franklin, Clark, Cowlitz, Island, Kitsap, Sea-King, Spokane, Tacoma, Thurston, Whatcom**
- **Washington State set: 4 LHJs including Asotin, Chelan-Douglas, Garfield, and Snohomish**
- **Basic set: other 20 LHJs, except Okanogan which did not submit for Standards review**
- **Status: All LHJs have received their site specific reports.**
- **Exemplary Practices Compendium is in the final stages of editing. More than 325 documents are included from almost all 34 LHJs. This compendium does not include documents from DOH at this time.**

Non-Comparability with Earlier Cycles

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No comparability at the measure level between earlier Standards results and the 2011 Standards results:

- Standards changed to PHAB Beta Test version
- Basic set (only 35 measures) changes included:
 - ✦ Only 2 “program review” measures and for CD and EH only
 - ✦ Some measures changed from program review to agency type of review
 - ✦ Some measures had 1 or more requirements eliminated
 - ✦ Some measures required just 1 example instead of 2 to demonstrate measure

National /WA Summary

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- DOH demonstrated 93% of the measures in the National /PHAB Set
- 14 LHJs submitted National or WA
 - Seattle-King County (largest) to Garfield County (smallest)
- 2011 range of percent demonstrated from 49% - 94%
 - Compared to 24% - 83% in 2008
- Average demonstrated performance in 2011 was 80% for the 14 LHJs
 - Compared to 56% for all 34 LHJs in 2008

National and WA Findings

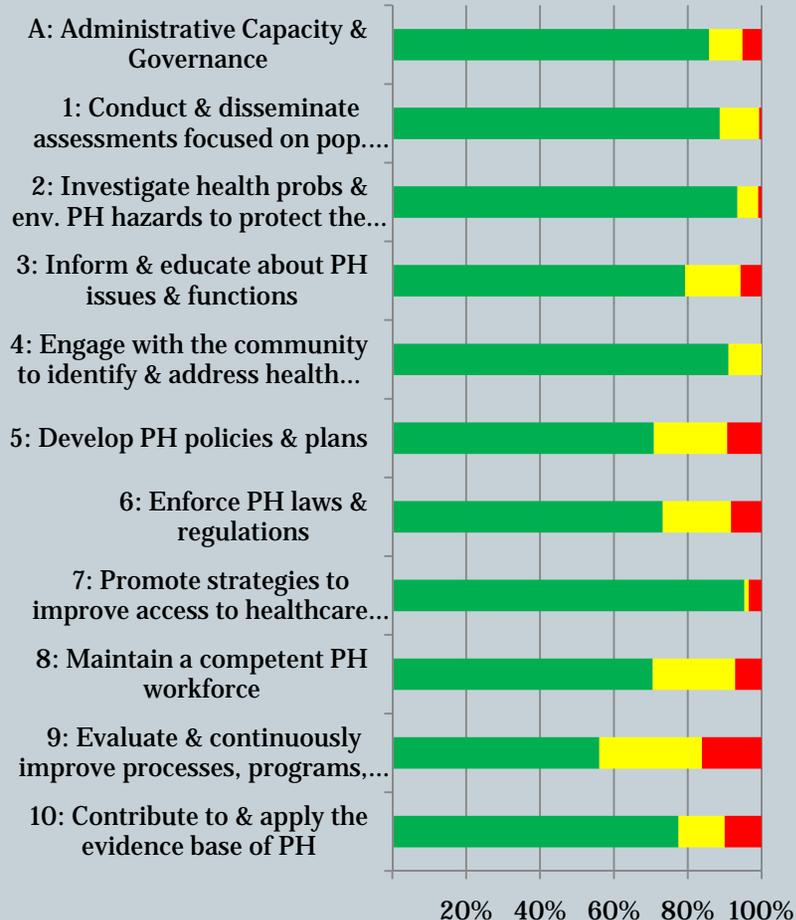
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- 5 of 11 Domains had >85% of the measures demonstrated
 - Part A-Administrative Capacity and Governance (86%)
 - Domain 1-Monitor Health Status (89%)
 - Domain 2- Investigate Health Problems (93%)
 - Domain 4- Community Engagement (91%)
 - Domain 7- Access to Healthcare Services (95%)



National and WA Findings

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- **6 domains had 56% - 79% of measures demonstrated**
 - Domain 3- Inform and Educate about PH issues (79%)
 - Domain 5- Develop PH policies and plans (71%)
 - Domain 6- Enforce PH laws and regulations (73%)
 - Domain 8- Maintain an Competent PH workforce (71%)
 - Domain 9- Evaluate and continuously improve programs (56%)
 - Domain 10- Contribute to and apply the evidence base of PH (78%)
- **No domains had <56% demonstrated!**

Opportunities for Improvement

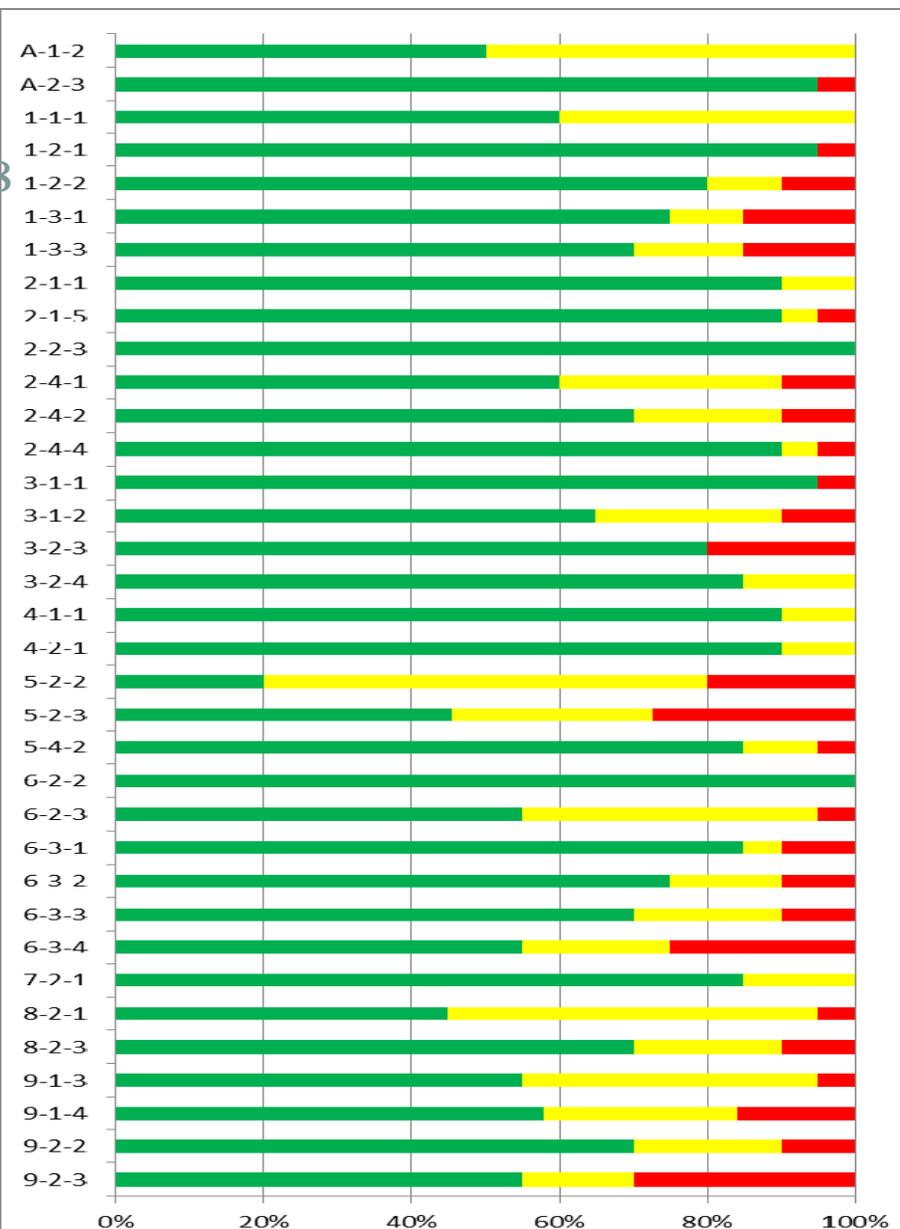
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- **Domain 9 – Program evaluation and quality improvement—these requirements and the activities to demonstrate performance should be identified for improvement action**
- **The other 5 domains with 70% - 80% demonstrated should have focused improvement efforts based on performance in specific standards, such as Standard 5.3-Health Improvement Plans (58% demonstrated) and on the eight specific measures with <50% demonstrated performance**

Basic Set Findings

- 20 LHJs submitted Basic set
- Avg. % demonstrated was 73%
- 7 LHJs demonstrated 80% or more of the 35 measures
- 11 LHJs demonstrated between 54% and 79% of the 35 measures
- 2 LHJs had less than 50% measures demonstrated, one with 38% and one with 43%; both LHJs were reviewed as individual jurisdictions for the first time in this cycle

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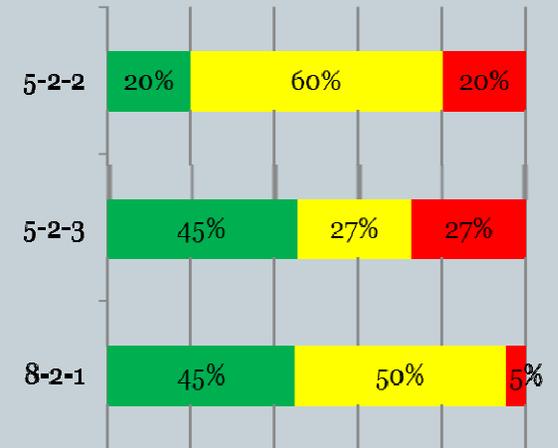


Basic Set Findings

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Just under half (16/35) of measures scored 80% or higher percent demonstrated; 3 measures scored less than 50% demonstrated including:

- **Measure 5.2.2B-Develop a Strategic Plan**
 - 20% demonstrated and 60% partially demonstrated
- **Measure 5.2.3B-Implement the Strategic Plan**
 - 45% of the 20% of LHJs that demonstrated 5.2.2B demonstrating implementation of the Strategic Plan. (5.2.3 was NA if 5.2.2 was not demonstrated)
- **Measure 8.2.1B-Complete Performance Evaluations and Training Plans**
 - 45% demonstrated



Closing Conference Feedback

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- “Frustrating with multiple changes made to standards along the way- it would be helpful to have stable set.”
- “Still waiting to hear about the benefits of PHAB accreditation. We need that before we dedicate more time to it.”
- “We struggled with how to use resources to best meet the needs of the community and participate in the Standards review.”
- “We have fewer resources and staff. We’re barely making it; meeting requirements as best we can.”

Closing Conference Feedback

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- “Electronic and offsite review worked well.”
- “Appreciated the opportunity to provide additional documents. Onsite very useful; validated our efforts.”
- “Basic Set of measures made this do-able for us.”
- “Cross-walk and Guidance were very helpful documents.”
- “The value of this cycle was in determining how best to organize and gather the documents to demonstrate the outcomes of our work.”

Recommendations for System Improvement

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Development and Implementation of Strategic Plans

- **Overall Recommendation:** *Ensure that all state and local Strategic Plans include objectives that have measurable and time-framed targets. This improvement will provide the capacity to effectively monitor progress on the implementation of the Strategic Plans.*

Development and Implementation of Community Health Improvement Plans

- **Overall Recommendation:** *Establish methods and templates for all health departments to develop and implement State/Community Health Improvement Plans (SHIPs/CHIPs) and support health departments' SHIP/CHIP planning and development activities in a systematic way.*

Taking Action on Data Analysis-Closing the Plan-Do-Study-Act Cycle

- **Overall Recommendation:** *All state and local management and evaluation processes should emphasize taking action in leadership and governance minutes and reports.*

Recommendations for System Improvement

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Continued Emphasis on Monitoring Performance Measures and Using the Results

- ***Recommendation for Using the Results of Data Analysis:*** *All programs in LHJs and DOH should continue their focus and initiatives to establish and monitor performance measures and use the results to improve programs and services.*

Implementation of Quality Improvement

- ***Recommendation for Implementation of QI Plans:*** *Ensure that health departments establish plans for conducting quality improvement efforts and for training their staff in QI methods and tools.*

Customer Satisfaction

- ***Recommendation for Customer Satisfaction:*** *Establish systematic customer satisfaction processes in all health departments and monitor satisfaction results to identify areas for improvement.*

Recommendations for System Improvement

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Performance Evaluations with Training Plans

- ***Recommendation for Performance Evaluations:*** *Ensure that performance evaluations, including plans for training and development, are conducted annually for all staff.*

Agency Knowledge and Application of Laws

- ***Recommendation for Knowledge and Application of PH Laws:*** *All LHJs should develop a list of the positions with regulatory and enforcement responsibility and ensure that training for consistency in the application of public health laws is documented. In addition, LHJs need to establish processes to ensure the consistency of the application of laws, such as audits or case review.*

Review of Prevention and Health Education Information

- ***Recommendation for Review of Education Information:*** *Implement systematic processes for the regular review of materials to revise or improve them, as needed.*

Recommendations for Next Performance Review

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- The Standards Workgroup should make a recommendation to the Secretary of Health in the Fall of 2011 regarding the set of standards for Washington in the next cycle, whether they are the National PHAB, Washington, or Basic.
- Plan to conduct next review cycle in 2014 using revised WA Standards to continue cycle of every three year evaluation of statewide public health performance.
- Plan to accept PHAB accreditation as fulfilling requirements of WA State Standards Review and accept PHAB scores as scores for WA review results.
- Involve and engage boards of health in increasing knowledge of role in demonstrating performance against the standards and in relationship to future PHAB accreditation.

Thanks for involving us in the journey!

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- Incredible effort made by DOH and WSALPHO leaders over the last decade to measure and improve public health practice is unique in the nation and provides an outstanding example of these efforts throughout the US.
- Everyone involved should be commended and celebrated for the amazing achievements in performance these efforts have accomplished.