

# *Public Health Performance Management Centers for Excellence*

Welcome!

***Quality Improvement Tools for  
Improving Public Health Practice***

will begin shortly

*Public Health Performance Management  
Centers for Excellence*

***Quality Improvement Tools for  
Improving Public Health Practice***

**July 17, 2013**

**Susan Pfeifer and Stacy Wenzl**

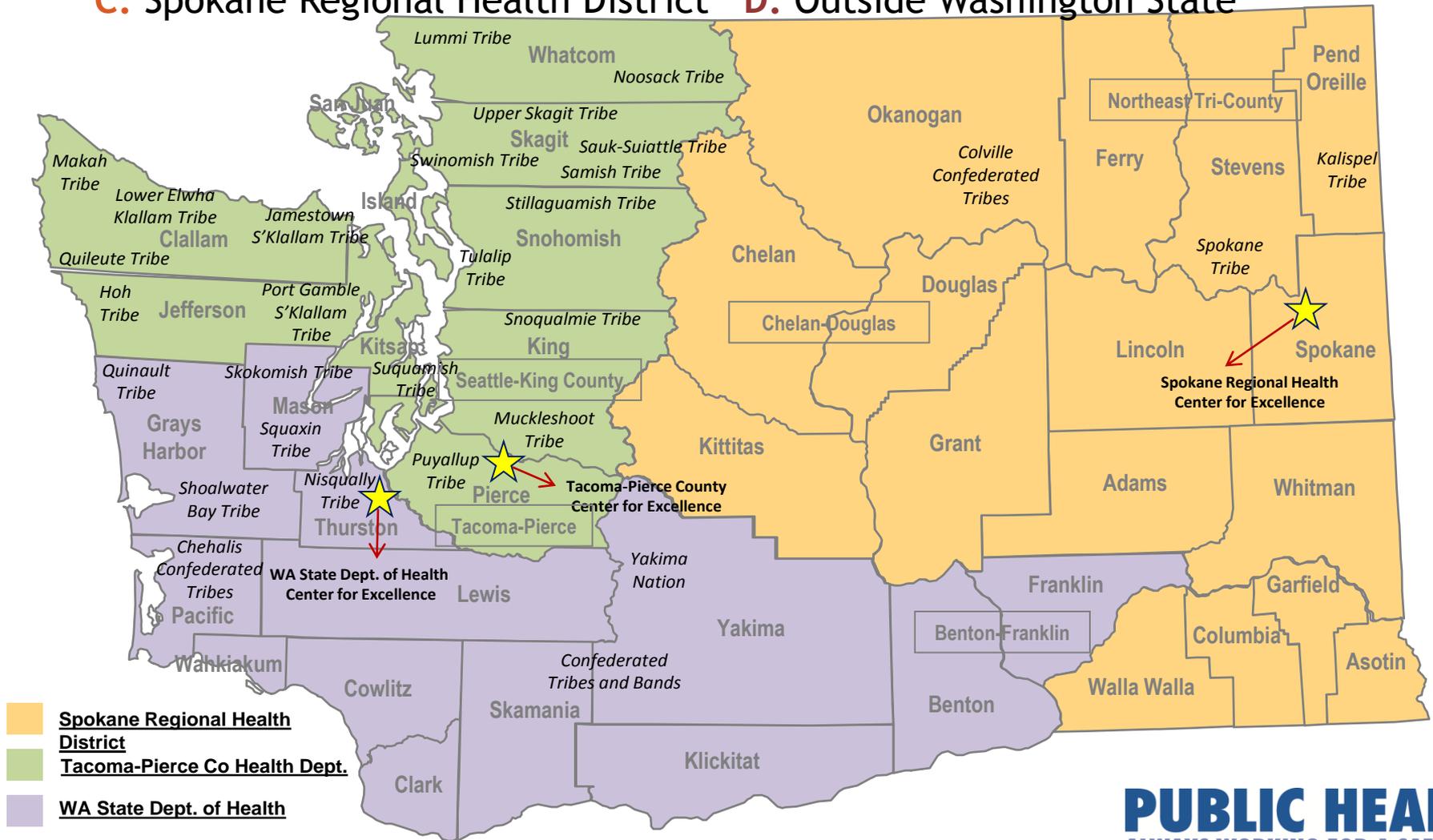
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July 2013

*Funded by the U. S. Centers for Disease Control's National Public Health Improvement Initiative*

# Which Center for Excellence Region are you located in?

- A. Department of Health
- B. Tacoma-Pierce County Health Department
- C. Spokane Regional Health District
- D. Outside Washington State



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ALWAYS WORKING FOR A SAFER AND  
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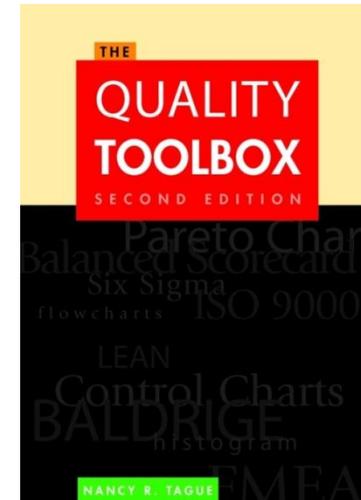
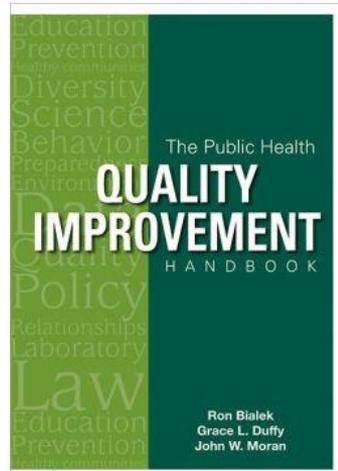
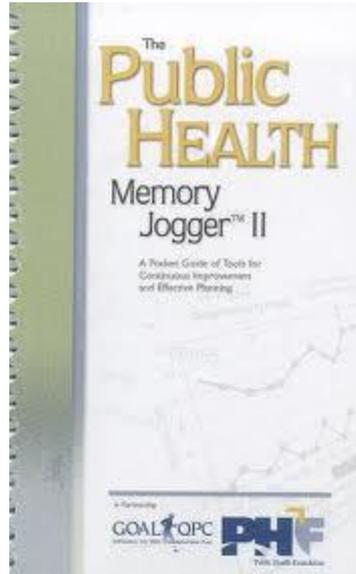
# Today's Presenters



Susan Pfeifer RN, MN, is the Office of Assessment, Planning and Improvement Program Manager at the Tacoma-Pierce County Health Department, where she has worked for more than 20 years. Susan has been the facilitator for the Department's Quality Improvement Council for seven years.



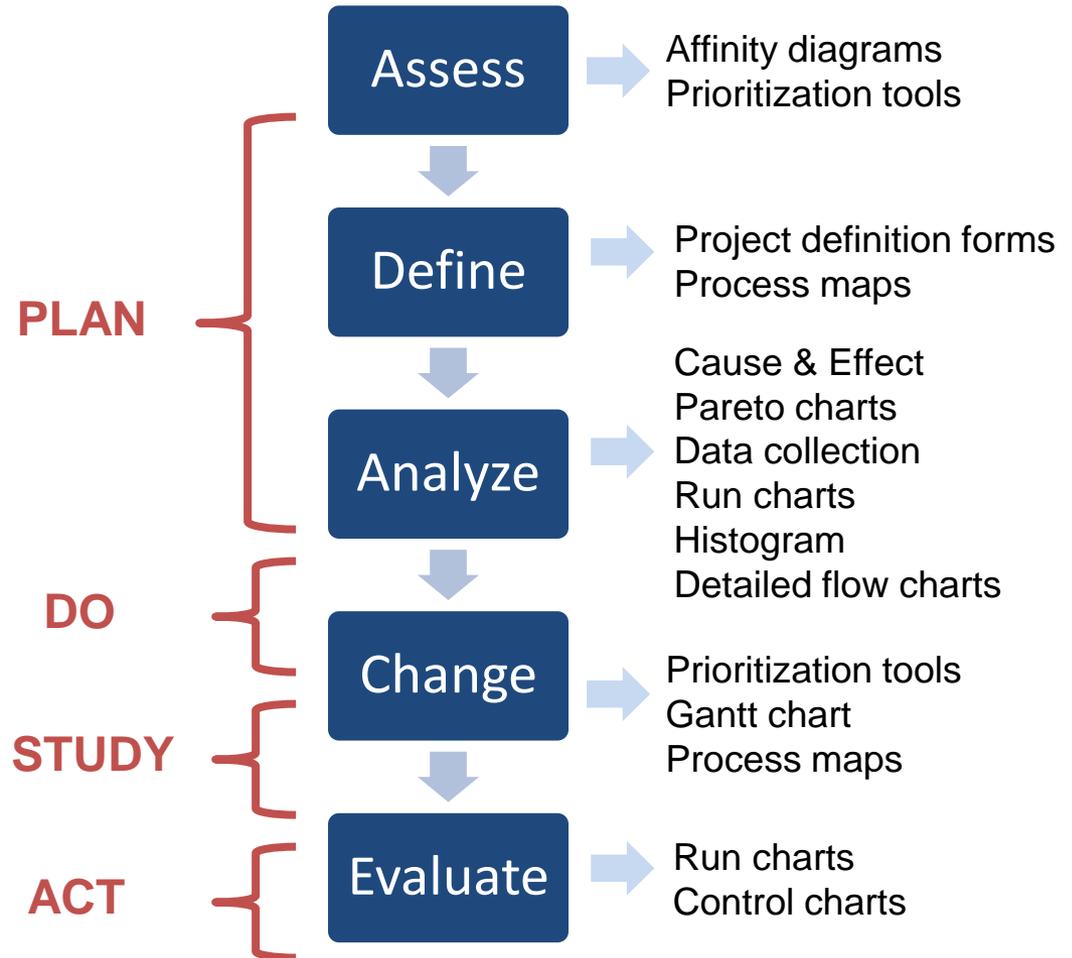
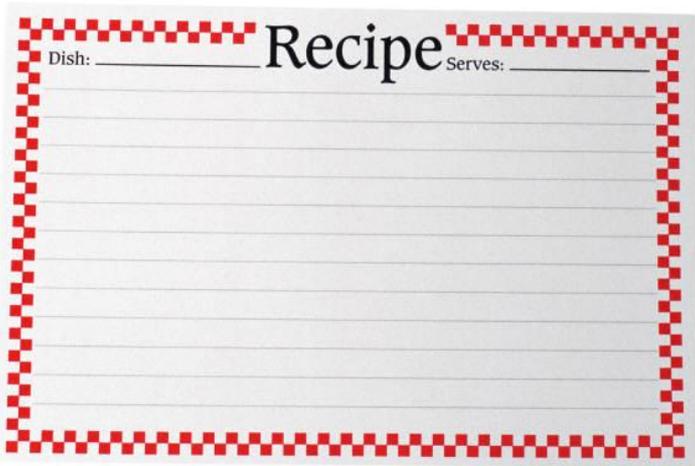
Stacy Wenzl, MHPA, is the manager of the Community Health Assessment, Planning, and Evaluation program at Spokane Regional Health District. She has worked at SRHD for almost 10 years and has experience in five different program areas. Stacy is currently co-Chair for SRHD's Quality Council.



# Today's Learning Objectives:

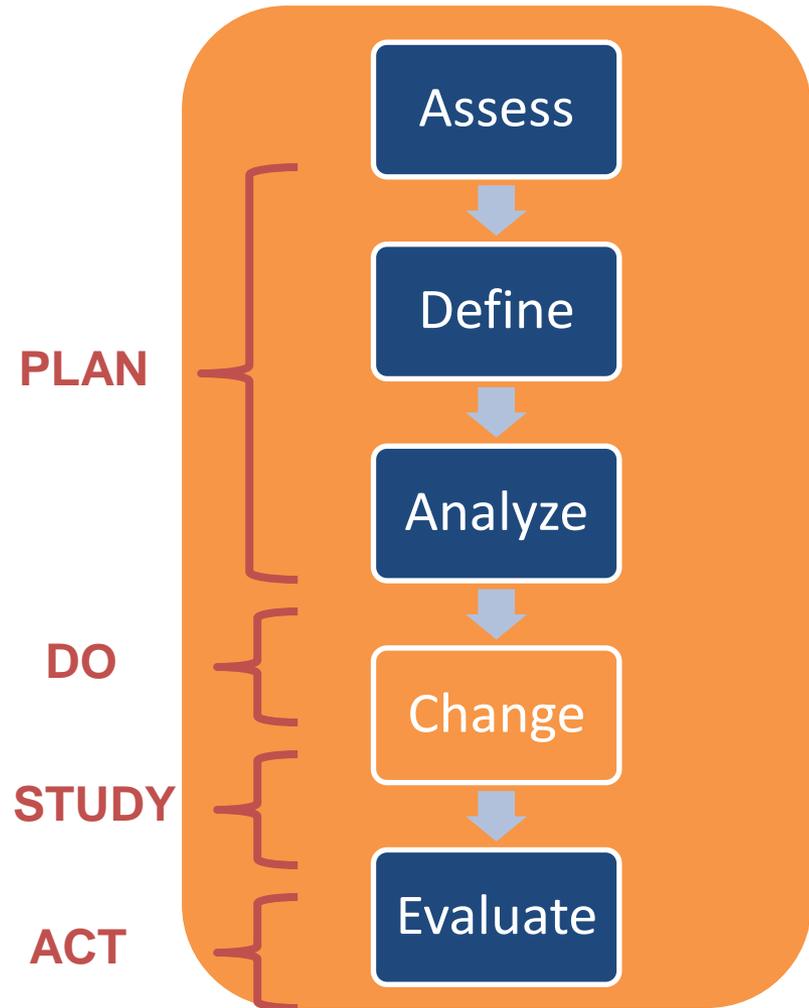
- Upon completion participants should be able to:
  - Review and practice **four** important Quality Improvement Tools to apply as part of their QI teams
    - Process Mapping
    - Cause and Effect Diagram
    - 5-S
    - Prioritization Matrix
  - Describe how they will apply at least two of the tools in their QI work

# What's the Difference: QI Method vs. QI Tool



# 5S + Safety A Lean Tool

# 5S: Where are we?



# Participant poll

- Have you used or currently use the 5S approach to quality?
  - A. Yes
  - B. No
  - C. Unsure

**5S+Safety** is a strategy to keep our workplace safe  
and in order

## 5S+Safety

You have  
everything  
you need.

You need  
everything you  
have.

You can see  
everything clearly  
belongs where it  
is.

# 5S+Safety

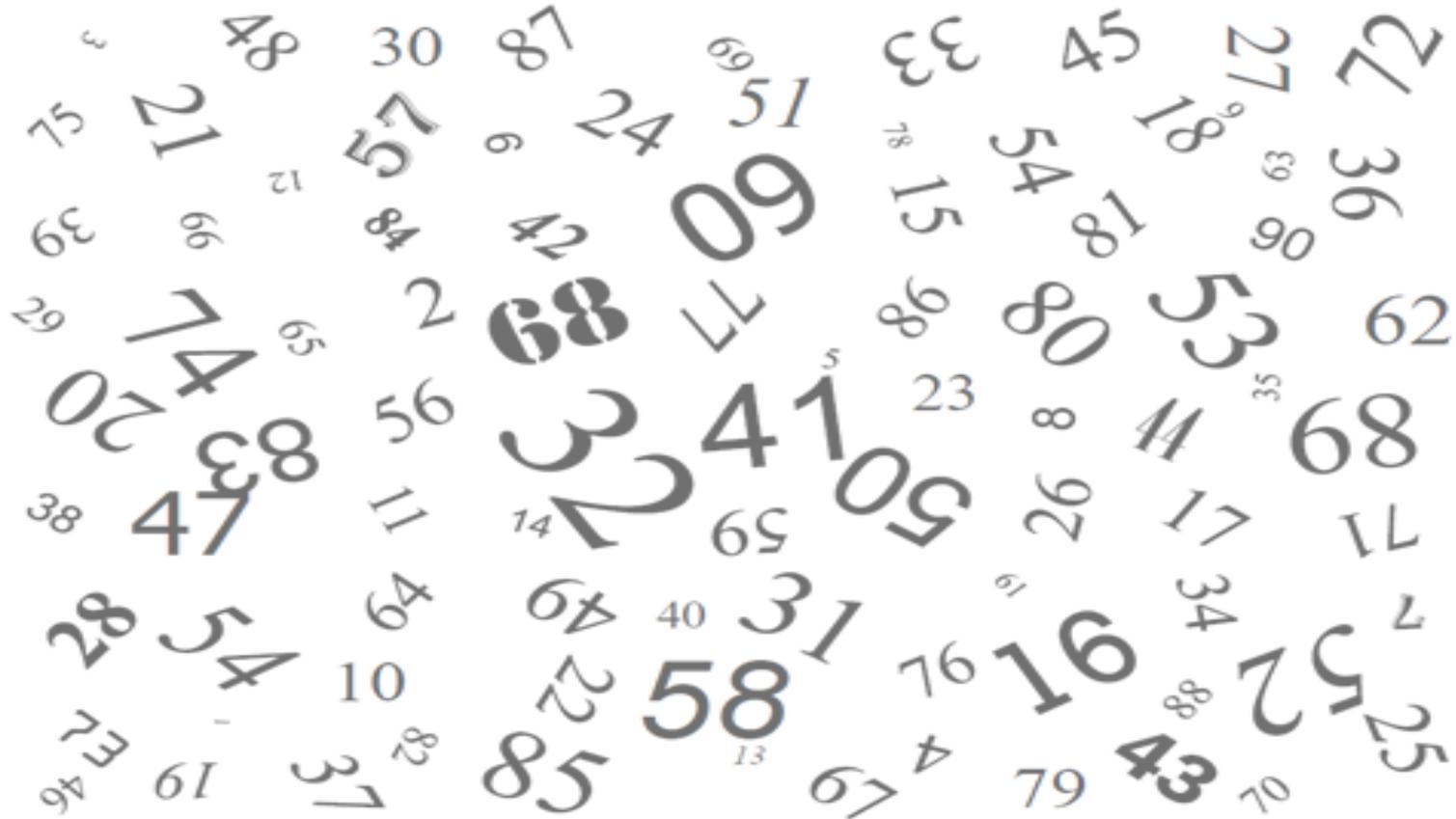


## 5S Exercise: Cat Herding

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**Scenario:** (*Application of Lean.org exercise “The 5S numbers game”*)  
You are a cat rancher. During a recent windstorm, your fence blew down, and your 49 prized “show” cats have been mixed in with another group of regular “farm” cats. You need to find each of your “show” cats and put them in their corral. Because cats have a distinct sense of social hierarchy, you must herd each cat in order of their social status. Fortunately, each cat wears a sweater with its number on it.





# Sort

Separate necessary from unnecessary

- Establish criteria
- Identify unnecessary items
- Move unnecessary items to holding area to reside for a limited time
- Conduct an initial cleaning



# Simplify

***“A place for everything.”***

- Arrange workplace
  - Identify key equipment and supplies
  - Determine location for each item
  - Visual management (labels, folders, etc.)
  - Document layout, equipment, supplies

3

6

9

2

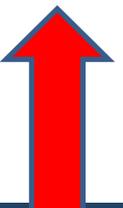
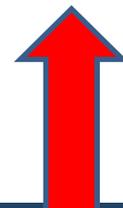
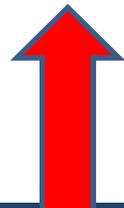
5

8

1

4

7



36

27<sup>9</sup>  
18

45

33

15

24<sup>6</sup>

42

30

48<sup>4</sup>

21<sup>12</sup>

39<sup>3</sup>

7

25

34

16

43

4<sup>53</sup>  
17  
26<sup>8</sup>  
92

23

3<sup>14</sup>  
2  
41<sup>5</sup>

2

29

07

38

47

11

7

25

34

16

43

4

31<sup>40</sup>  
6<sup>7</sup>  
4<sup>22</sup>

13

10

28

37

19<sup>1</sup>

46<sup>4</sup>

# Sweep

***“Everything in its place.”***

- Clean area
- Determine acceptable performance
- Mark equipment
- Create visual indicators to “sweep”
- Perform daily cleaning

# Public Health Performance Management Centers for Excellence

<p>3 48 30</p> <p>21</p> <p>12</p> <p>39</p>	<p>6 24</p> <p>42</p> <p>33</p> <p>15</p>	<p>45 27</p> <p>18<sup>9</sup></p> <p>36</p>
<p>29 2</p> <p>20</p> <p>38 47 11</p>	<p>5 23</p> <p>41</p> <p>32</p> <p>14</p>	<p>8 44 35</p> <p>26 17</p>
<p>28 10</p> <p>1</p> <p>46 19 37</p>	<p>49 40 31</p> <p>22</p> <p>13 4</p>	<p>16 34 7</p> <p>43 25</p>

# Standardize

***“Sort, simplify, and sweep always.”***

- Determine and agree upon best practice
  - Document
  - Communicate
  - Make it clear and simple

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	

# Self-Discipline

## ***“Make 5S+Safety a habit”***

- Maintain the gains and improve
  - Determine 5S+Safety level of achievement
  - Perform routine checks
  - Analyze results of routine checks
  - Measure progress and plan for continuous improvement

# Public Health Performance Management Centers for Excellence

<p>3      48    30</p> <p>    ■    </p> <p>    12</p> <p>39</p>	<p>        33</p> <p>6    24</p> <p>    ■    </p> <p>42</p>	<p>45      27</p> <p>    18<sup>9</sup></p> <p>        36</p>
<p>29                    2</p> <p>    20</p> <p>38   47              11</p>	<p>        5    23</p> <p>    41</p> <p>    32</p> <p>14</p>	<p>    ■    35</p> <p>44</p> <p>26    17</p>
<p>28                    10</p> <p>        1</p> <p>46   19    37</p>	<p>49   40    31</p> <p>22</p> <p>        13    4</p>	<p>        34    7</p> <p>16</p> <p>        43    25</p>

1	2	3	4	5	6	7	■	9	10
11	12	13	14	■	16	17	18	19	20
■	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	

# +Safety

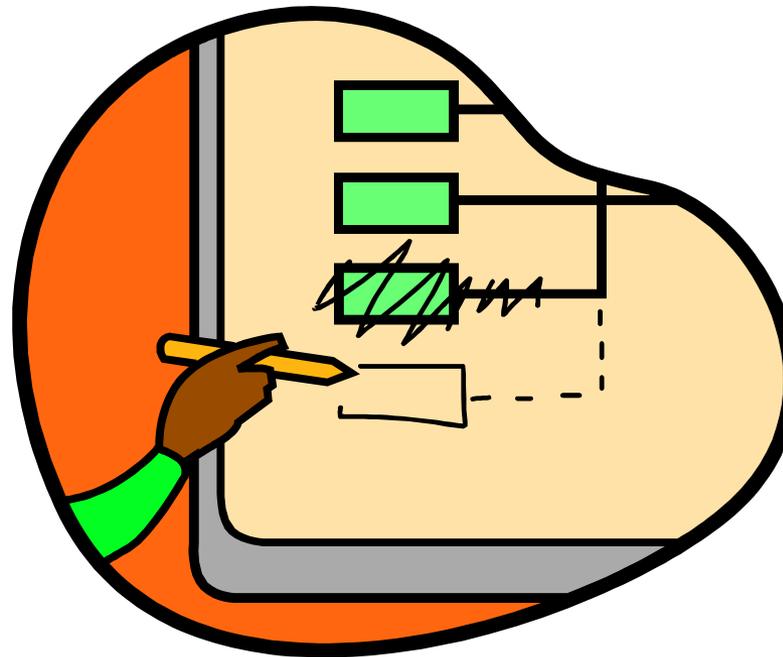
***“Safety is Job #1.”***

- Correct safety hazards (ergonomics, environment, etc.)
  - Identify
  - Investigate
  - Correct
  - Communicate

# Participant poll

- How likely are you to start using the 5S tool?
  - A. So cool, I'm gonna 5S my work space and garage!
  - B. Never gonna happen.
  - C. Intrigued but need more info.
  - D. Might give it a try.

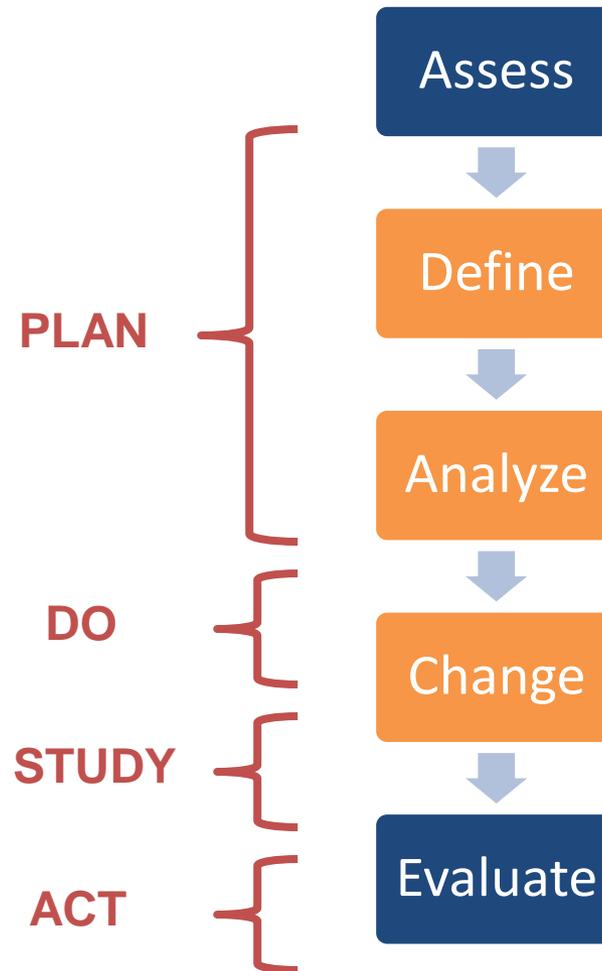
# Process Mapping



# Participant poll

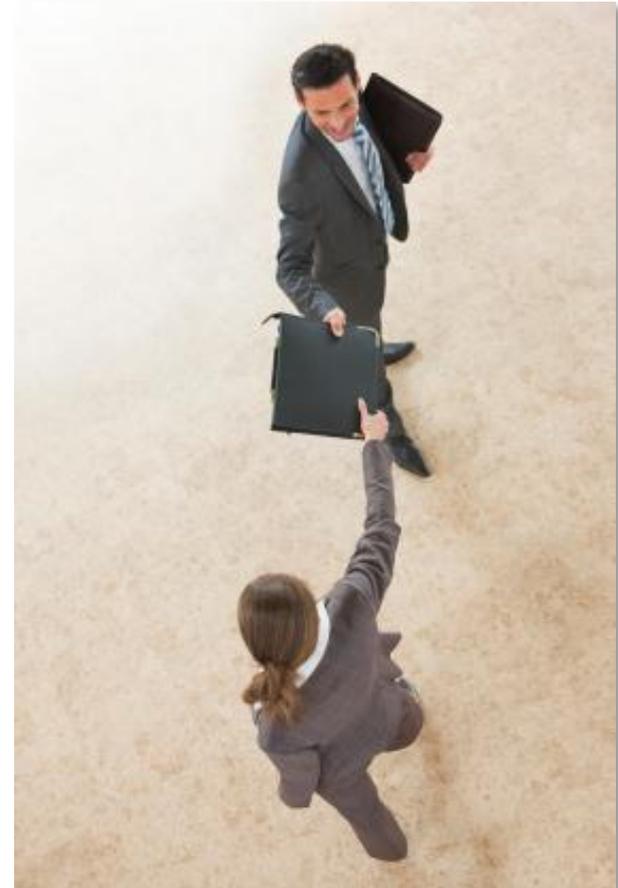
- Have you used or currently use process mapping for quality improvement projects?
  - A. Yes
  - B. No
  - C. Unsure

# Process Map: Where are we?



# Focus on Work Process

- Improve overall process, not just one part
  - 85% of poor quality is a result of poor work processes, not of staff doing a bad job
  - Processes often “go wrong” at the point of the “handoff”
  - Some of the most complex processes are the result of creating a “work around”



# 3 Views of a Process

- ▶ The way you want it to be (simple)



- ▶ The way you think it is (slightly more complex)



- ▶ The way it really is



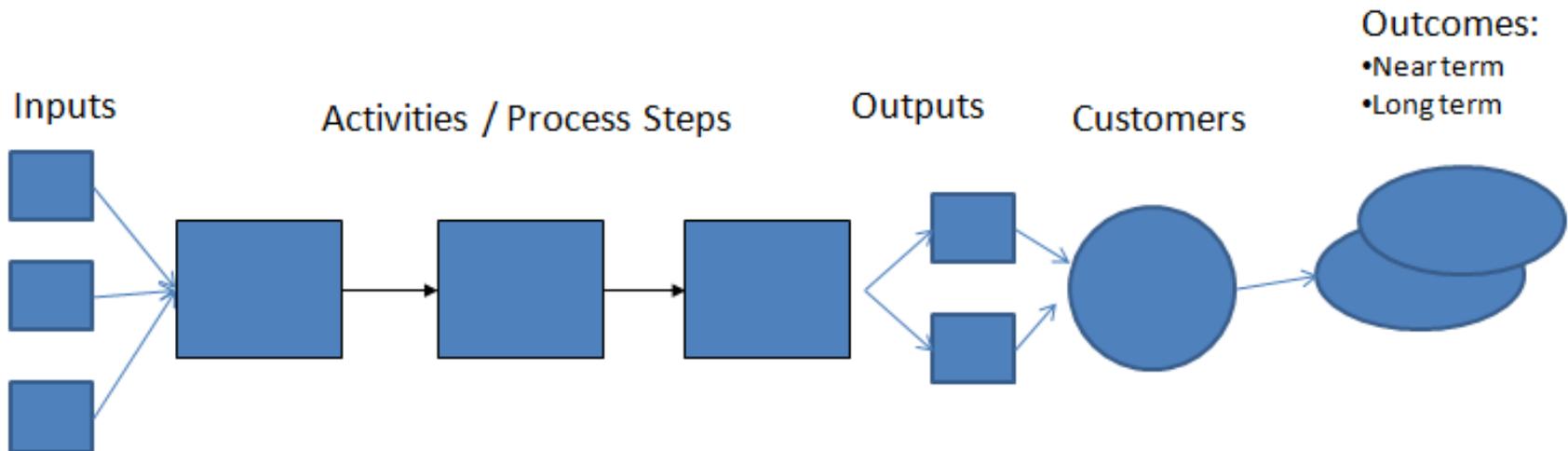
# Flow Charting

## When would I use this tool?

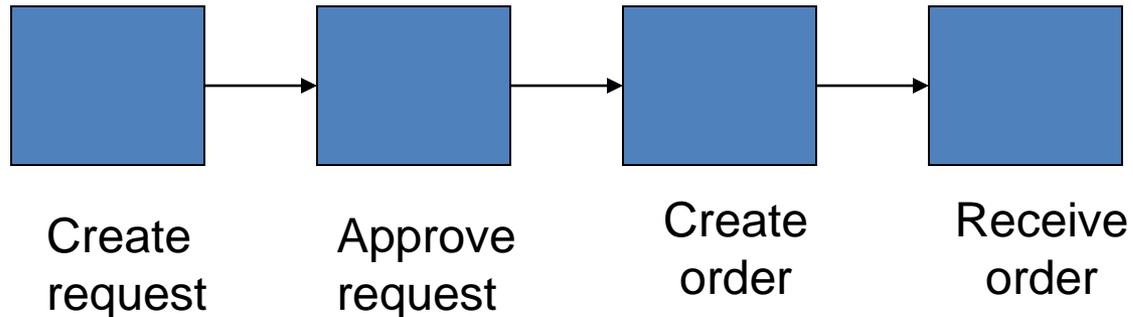
*Flow charting can be used for a variety of purposes*

- **High Level flow** charts are useful to frame the scope and boundaries of a project, to connect activities to outcomes (logic model), etc.
- **Matrix flow (swim lane/functional)** charts are good for framing analysis and for communicating a standard in an easy to follow format
- **Detailed flow** charts are good for analyzing a process, or for designing and communicating solutions, or for establishing a standard.

# High Level Flow



## High Level Flow

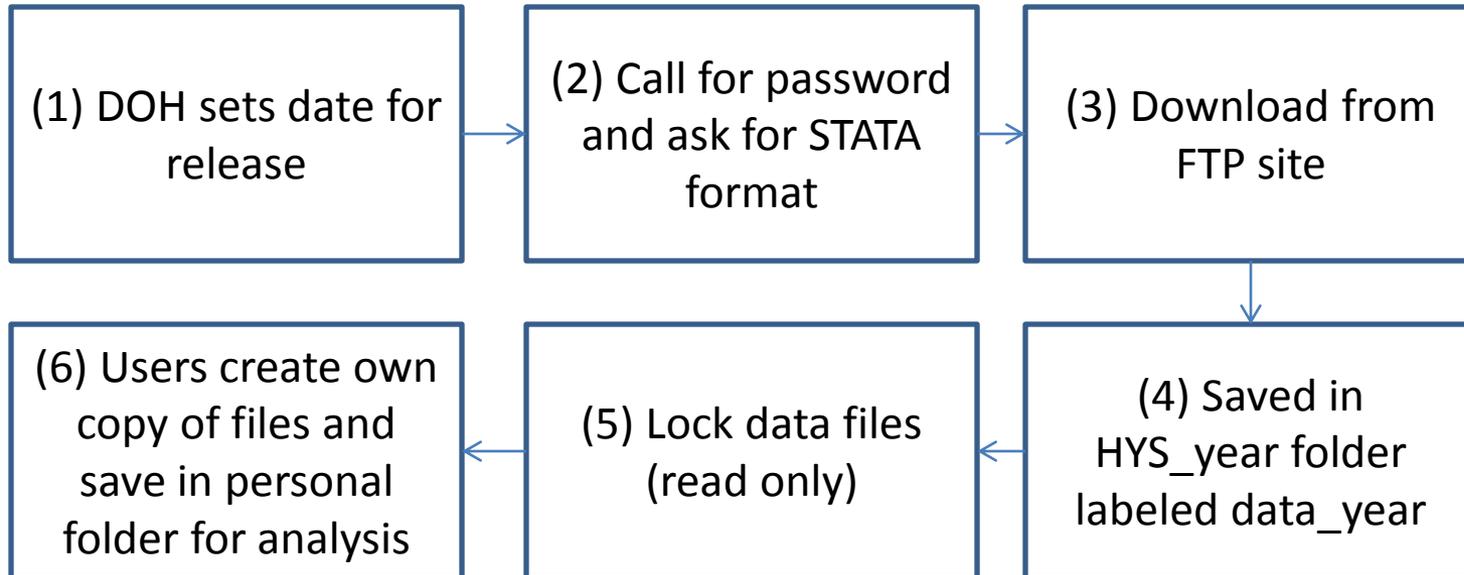


- Documents start and end of the process
- Documents primary objectives of the process
- 4-7 steps (typically)
- More conceptual

# High Level Flow

Healthy Youth Survey data processing procedure

Data owner: Liz

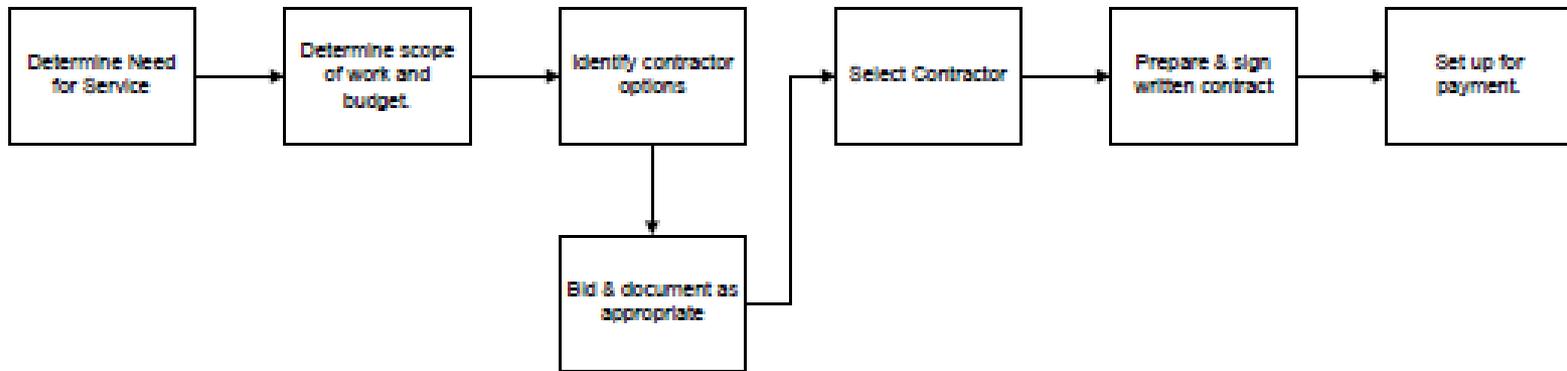


Example courtesy of Tacoma-Pierce County Health Department

# High Level Flow

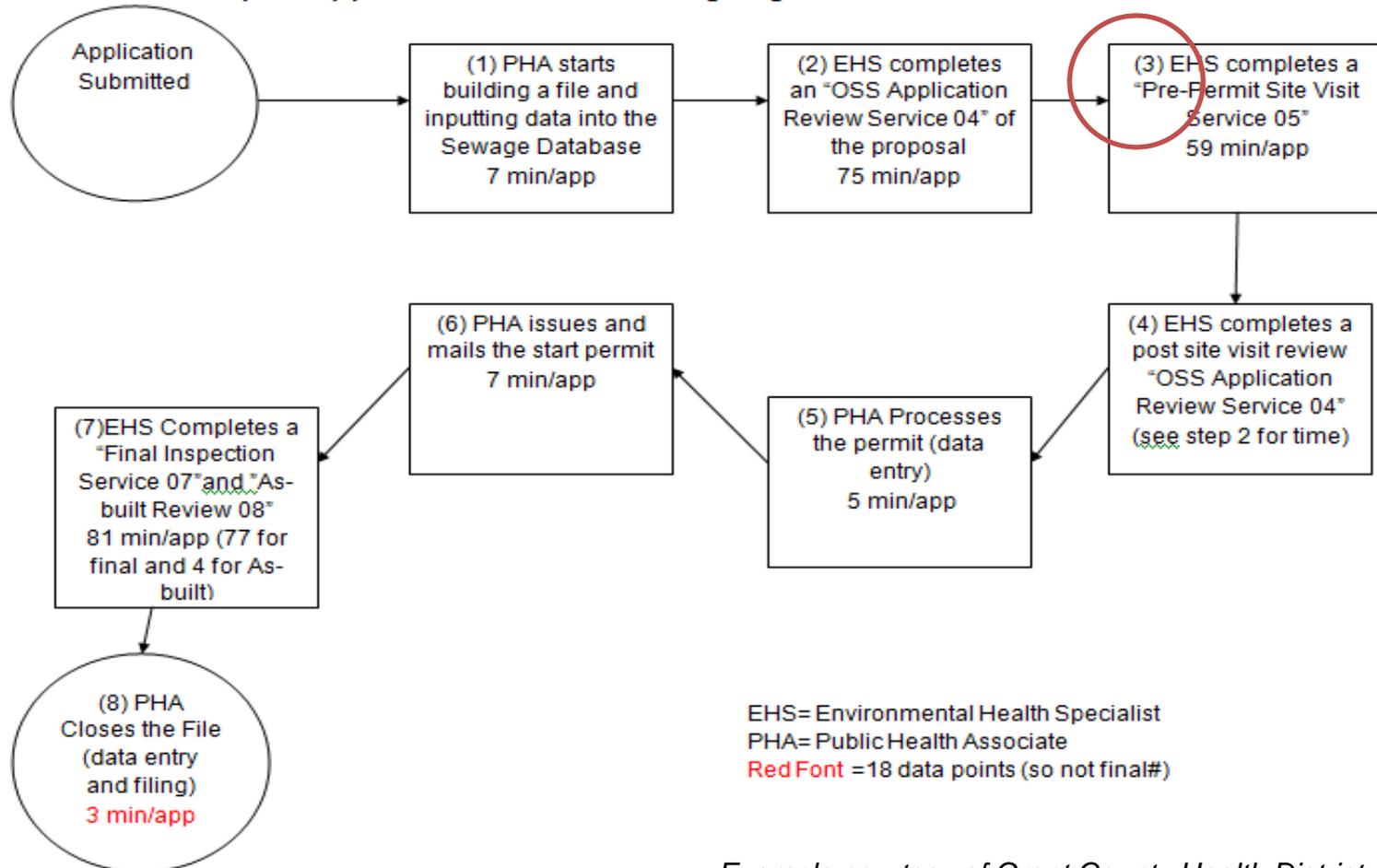
## Contracted Service Conceptual Flow

V 7-10



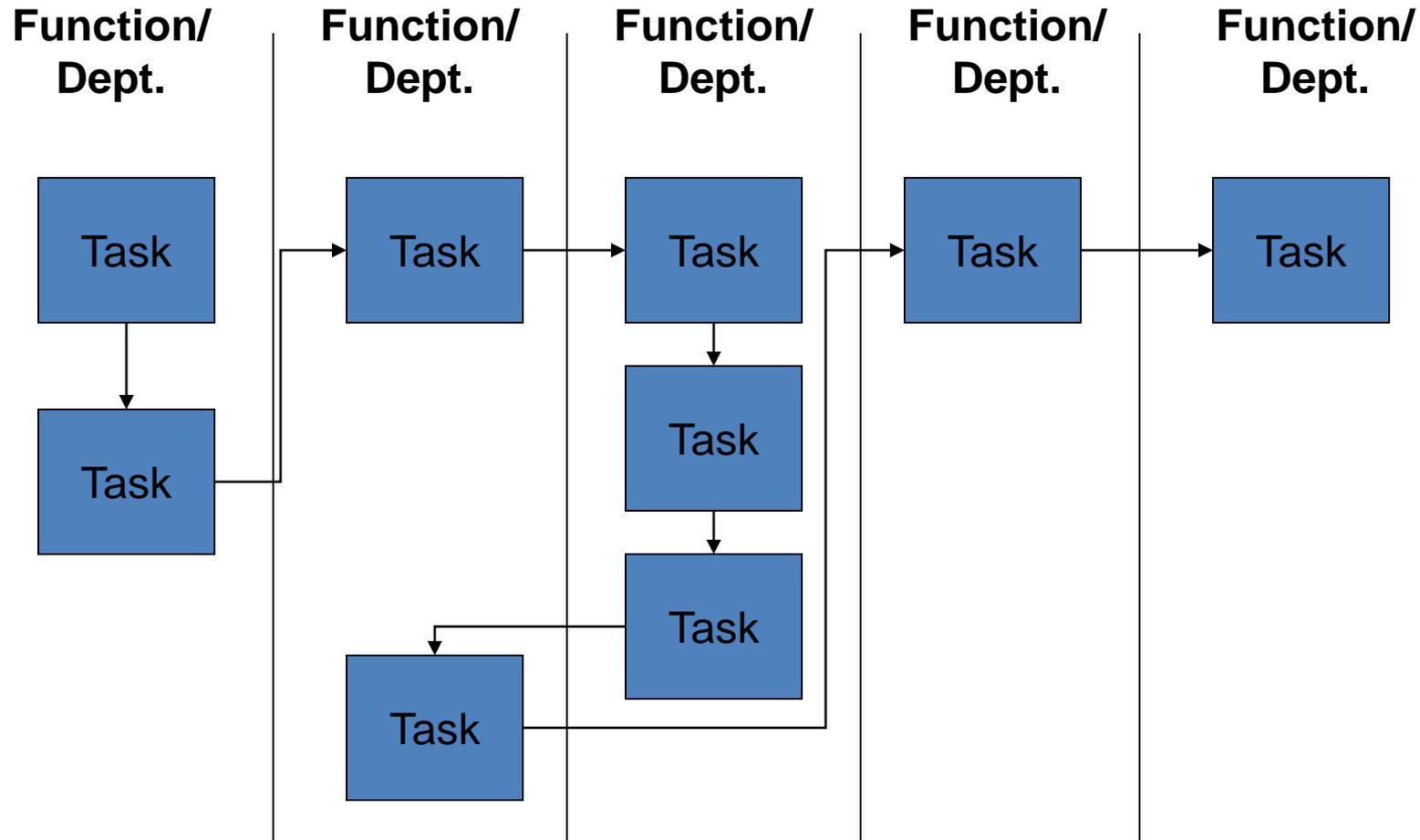
# High Level Flow

Septic Application and Permitting High-Level Process Flow



Example courtesy of Grant County Health District

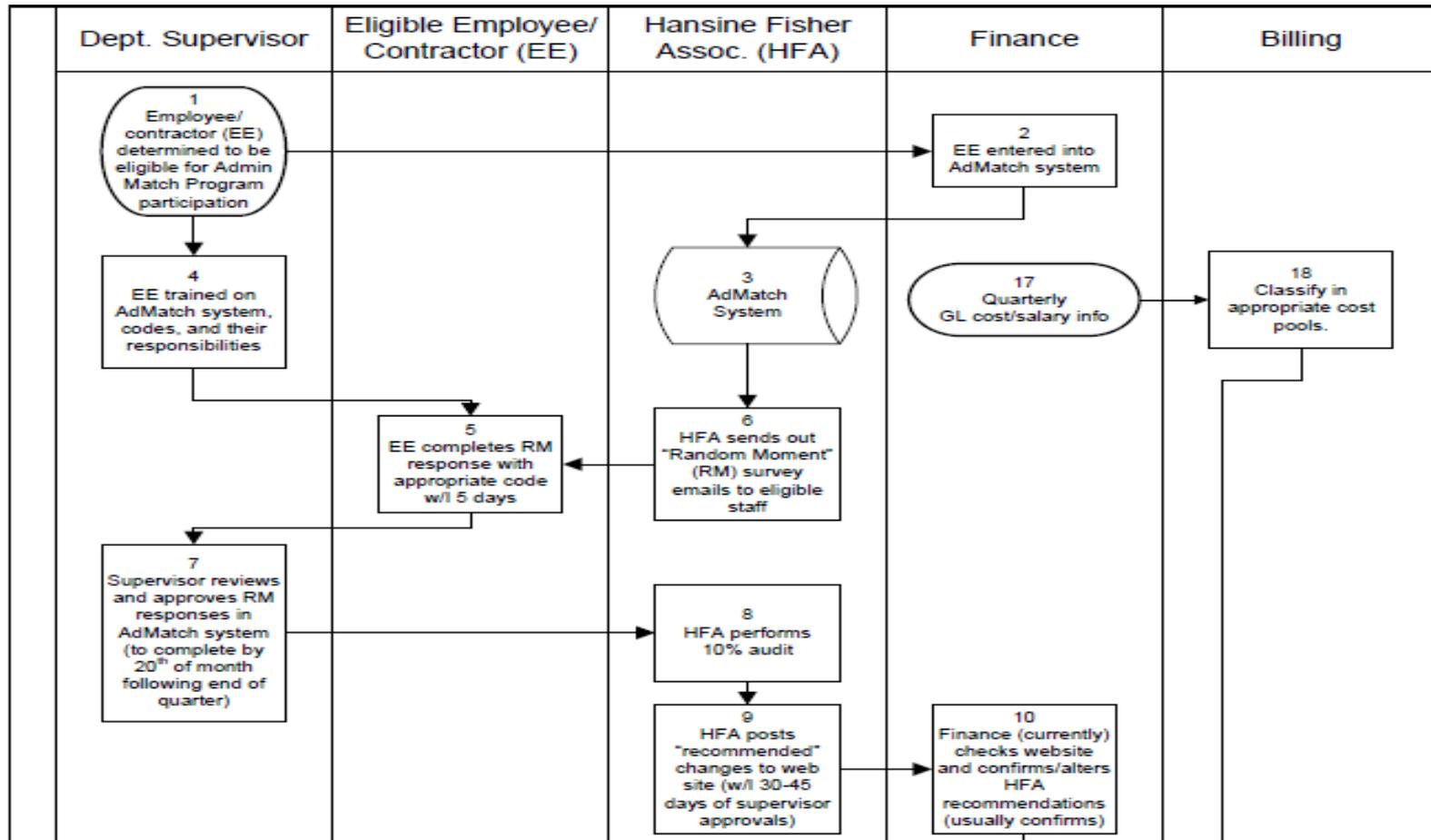
# Swim Lane/Functional/Matrix Flow



## **Swim Lane/Functional/Matrix Flow**

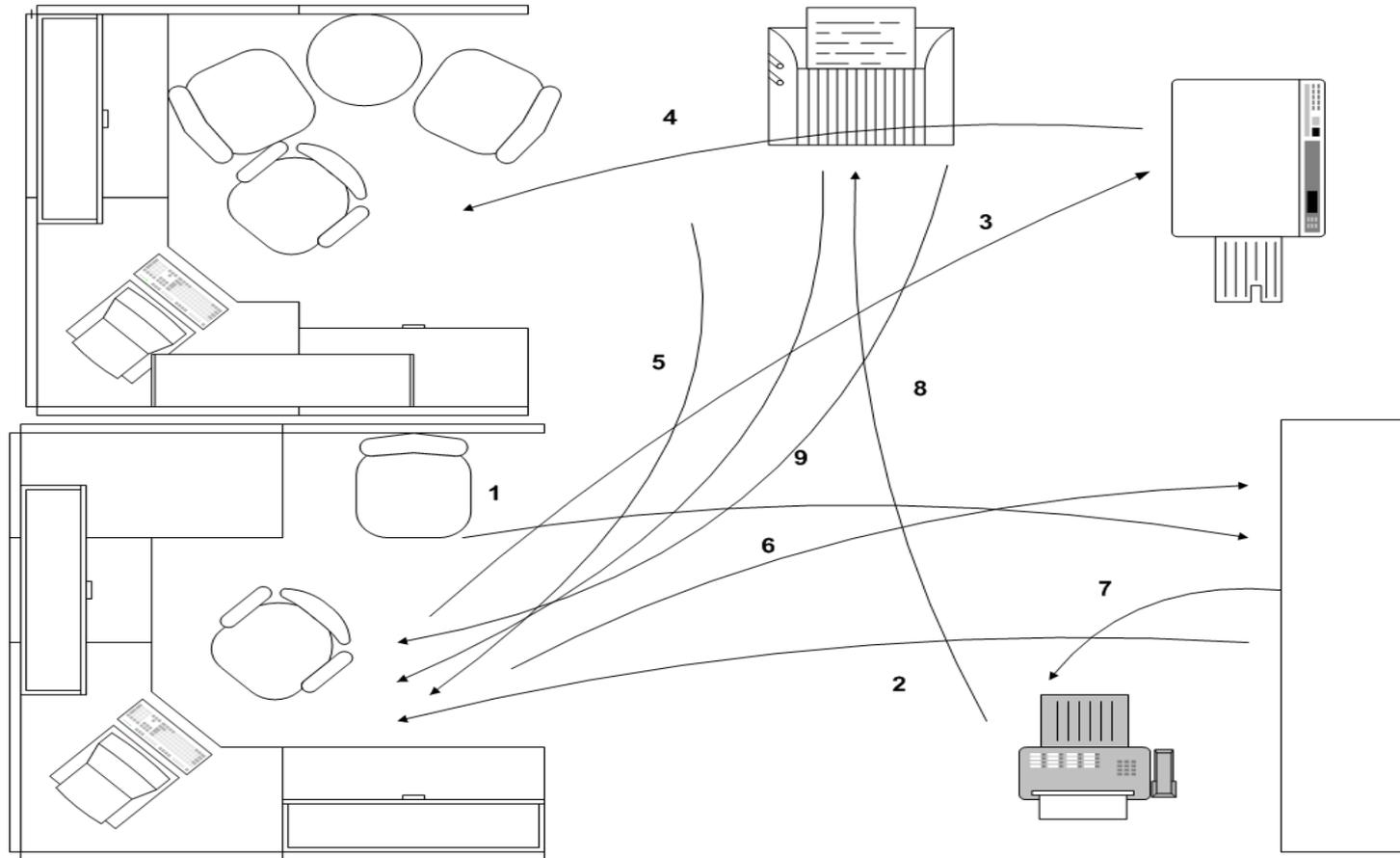
- Documents objectives of process and what department/function is accountable
- Documents the major steps necessary to complete the objectives
- Documents relationships and hand-offs between functions/departments
- Still somewhat conceptual
- Though ... can add as much detail as you like

# Swim Lane/Functional/Matrix Flow



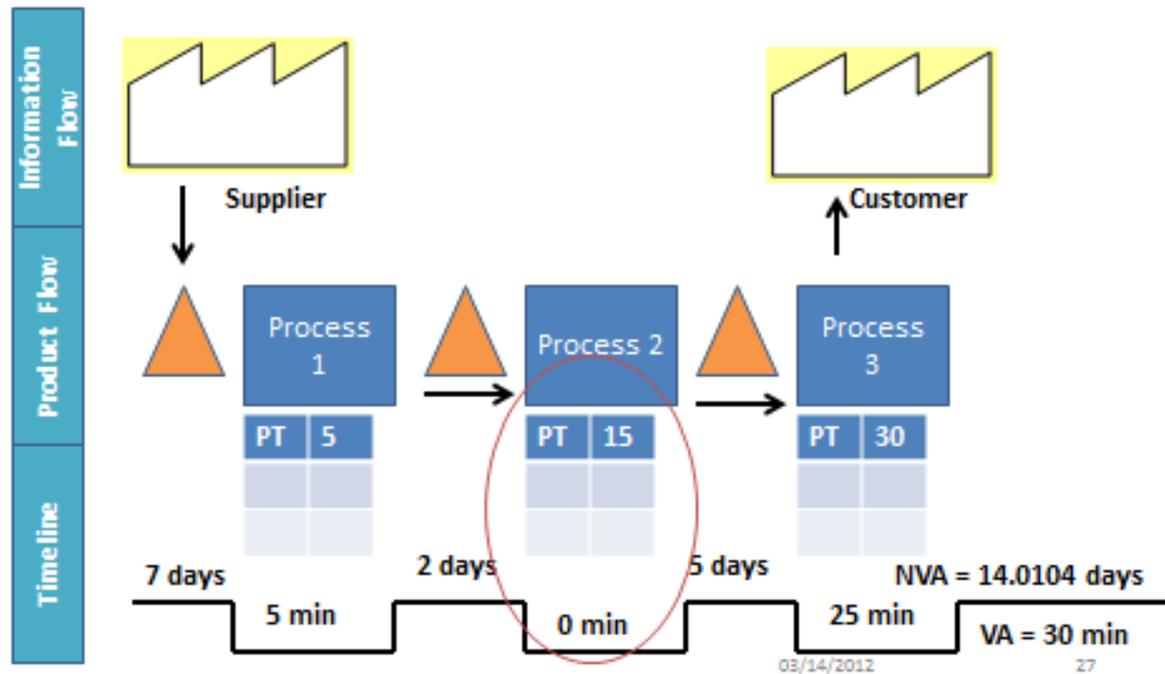
# Spaghetti Diagrams

A form of flow charting from Lean



# Value Stream Maps

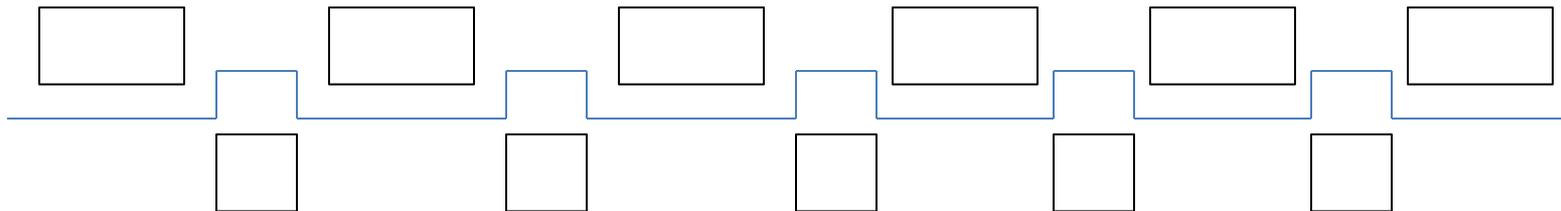
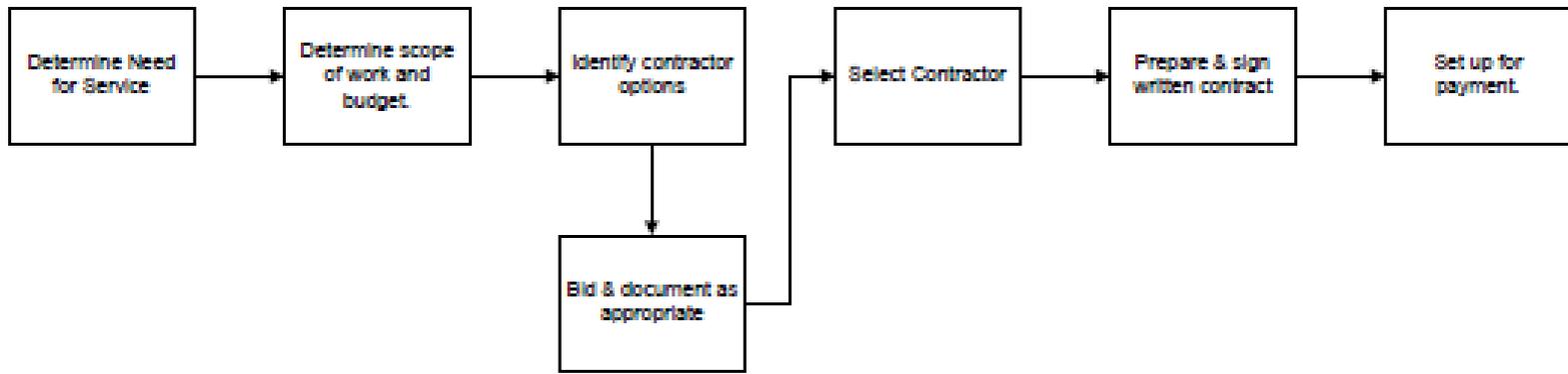
## Characteristics of a VSM



# Value Stream Maps – Current and Future State

## Contracted Service Conceptual Flow

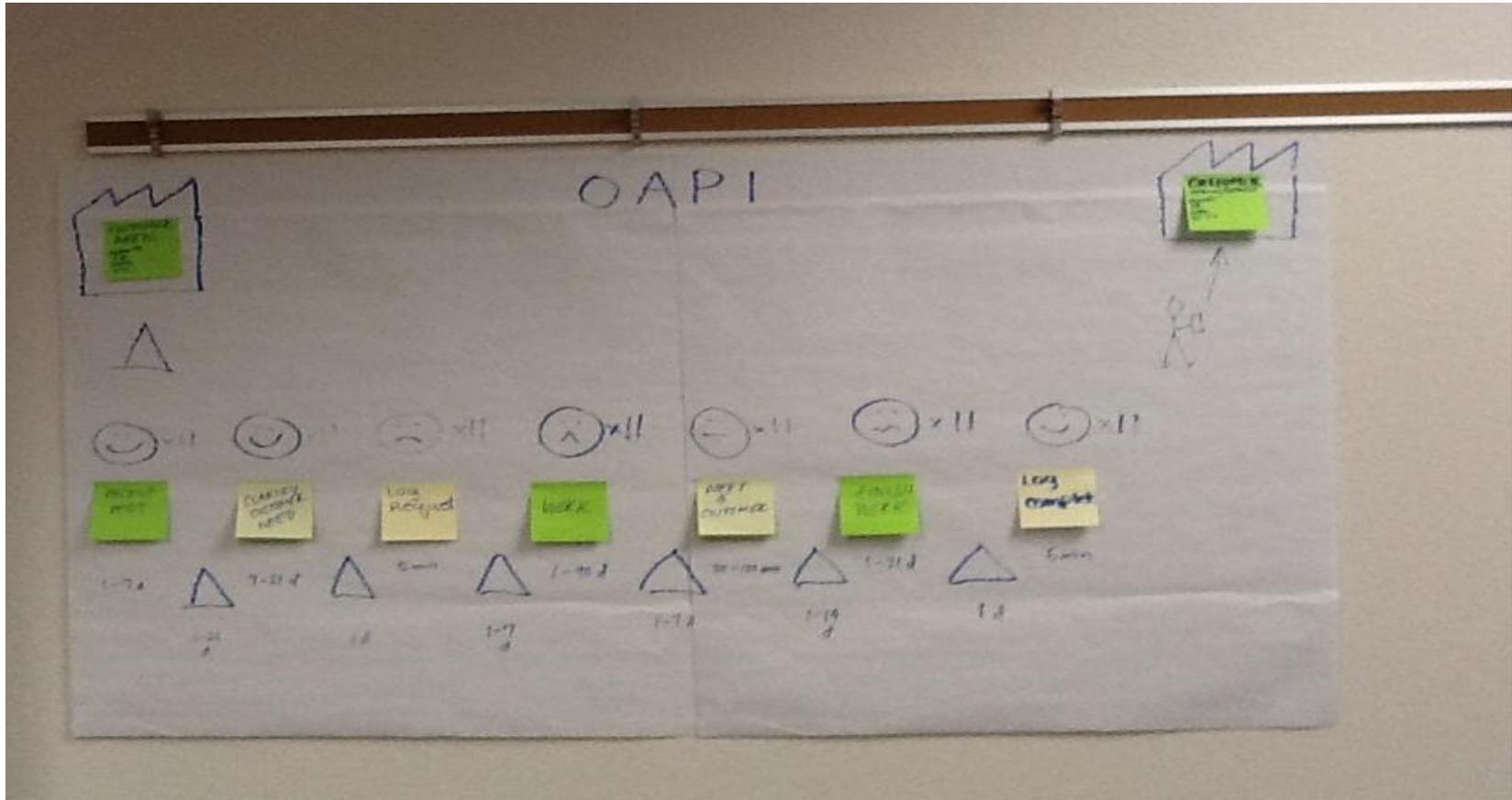
V 7-10



## Value Stream Maps – Current and Future State

- A Lean tool for work teams
- A visual tool showing how a product moves through the value stream
- Focus on improving the whole value stream rather than optimizing pieces of it.
- Created by those who actually do the work
- Time consuming to create
- Displays time spent waiting, as well as time spent touching the product
- Highlights wastes like rework, waiting, inspection, motion, batching, and errors
- Future state map shows improved future process and guides implementation

# Value Stream Maps – Current and Future State



## TPCHD-Data requests

Example courtesy of Tacoma-Pierce County Health Department

## Value Stream Maps – Current State



### DOH-HIV Early Intervention

*Example courtesy of WA State Dept of Health*

# Value Stream Maps – Future State



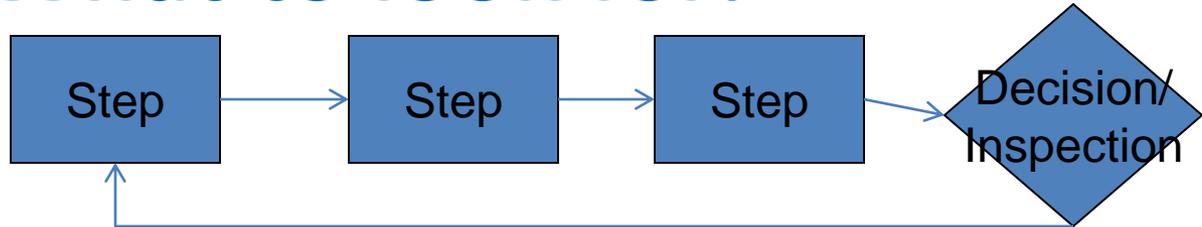
## DOH-HIV Early Intervention

## Detailed Process Flow Chart

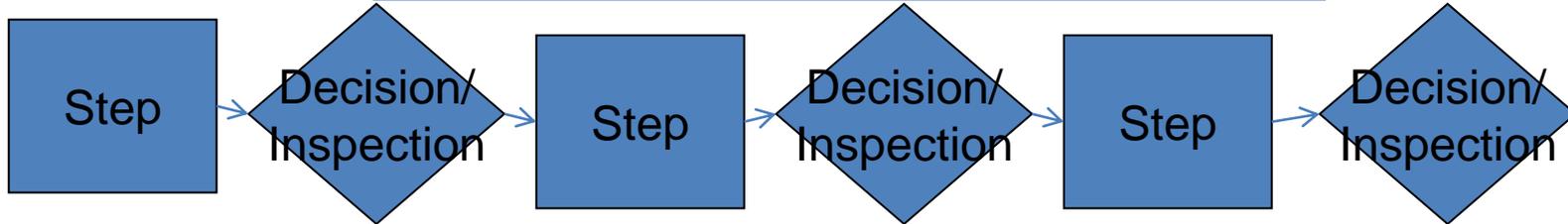
- Describes every step and decision
- Calls out documents, data bases, etc.
- *Shows reality* of process: rework loops, undefined specifics, redundancy
- Good for detailed analysis (and design)
- Very time consuming to create
- Sometimes leads to documenting more than is necessary
- Can be hard for others to follow/understand

# What to look for:

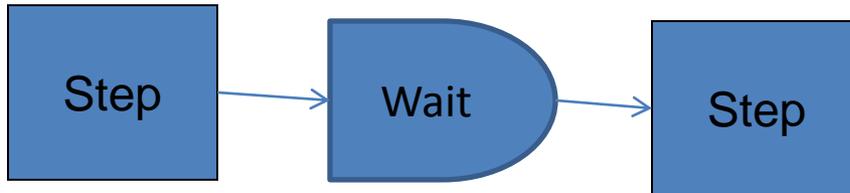
Re-work Loops – especially long ones



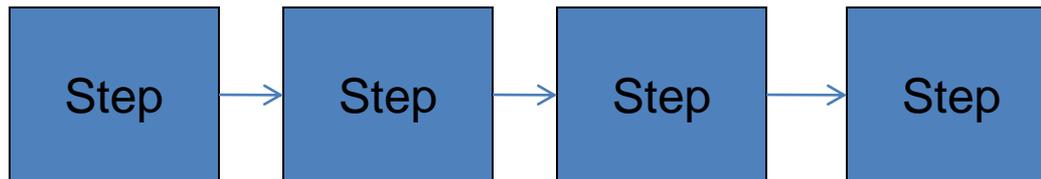
Multiple inspections



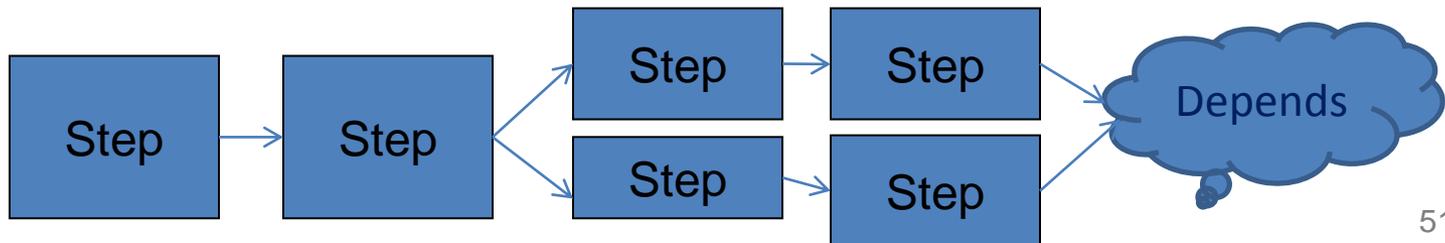
Wait states



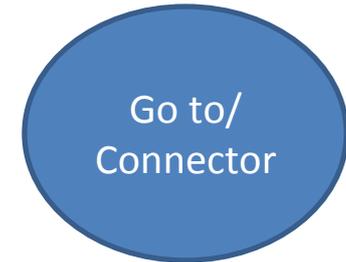
Too many steps;  
Hand-offs



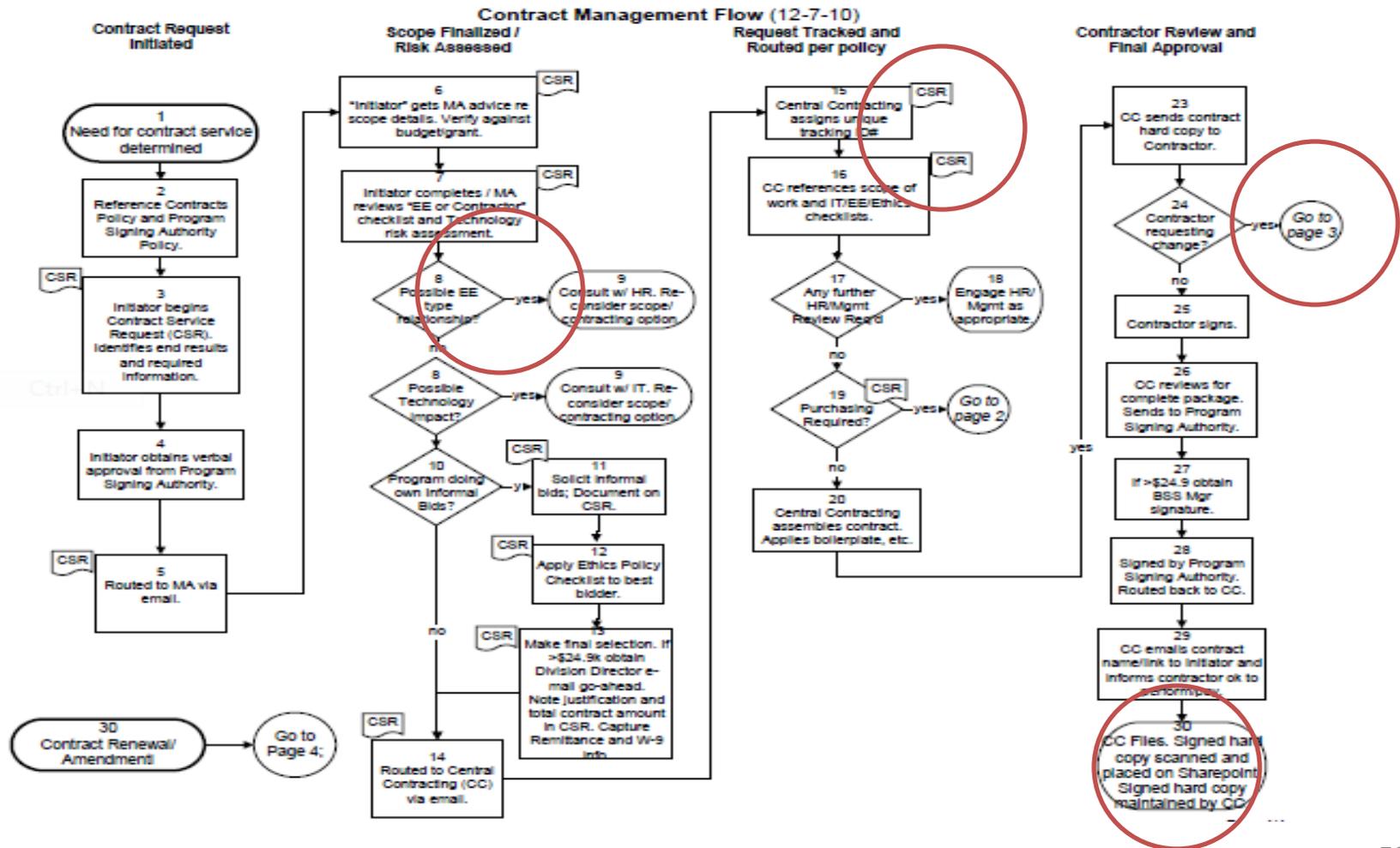
Variation



# Detailed Process Flow Chart Shapes



# Detailed Process Flow Chart Shapes



## Flow Charting Steps

- Define start and end of process
- Complete high-level flow (conceptual) with 4-7 objectives in between
- Add actions/steps to each objective as needed (consider matrix format)
- Add fine detail\* as needed (e.g., inspections/decisions, re-work loops, documents, data bases, etc.)

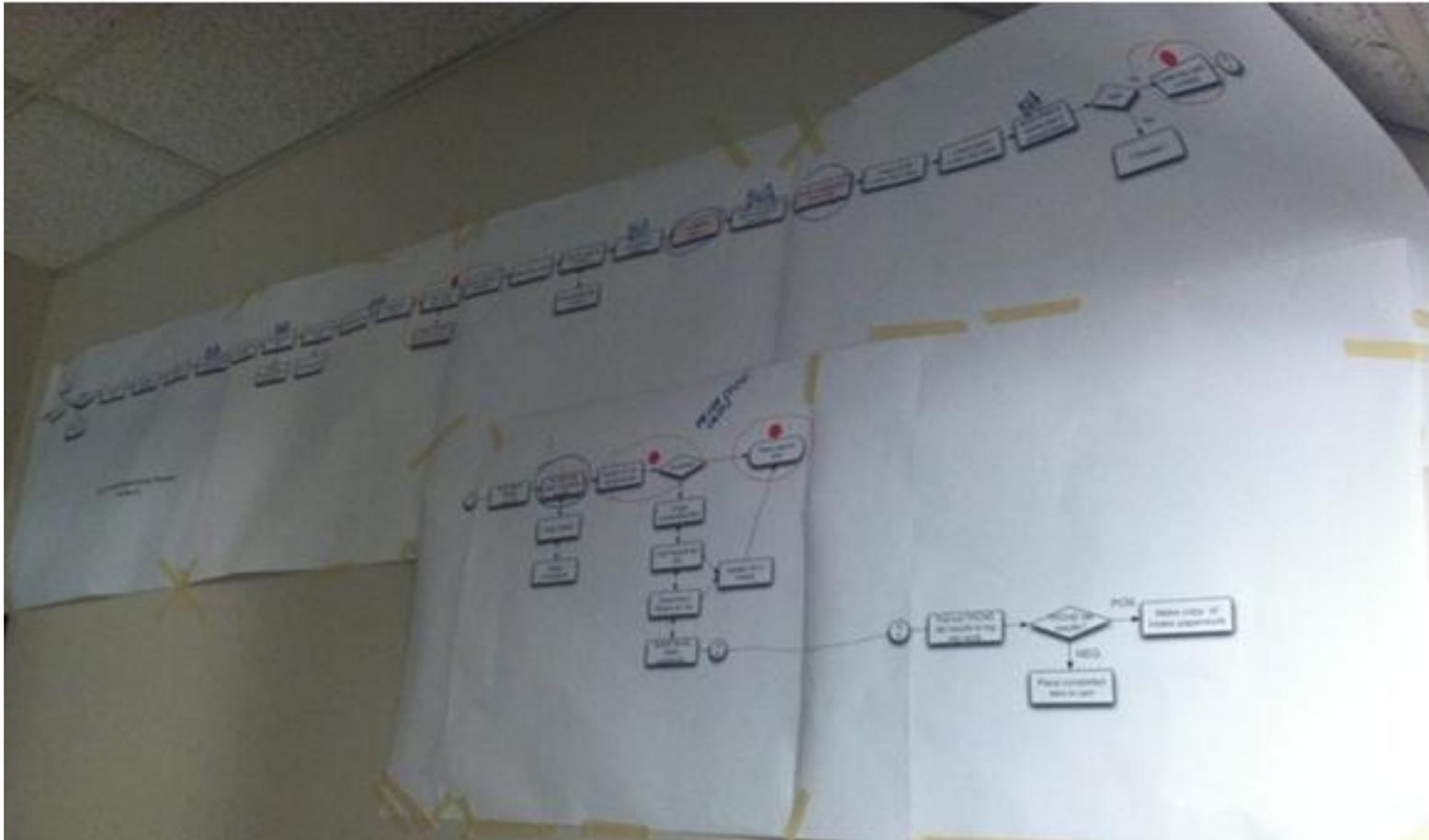
*\*You may not need fine detail for every objective! Avoid flow charting the world.*

# Flow Charting



## TPCHD-STD Surveillance

# Flow Charting



## TPCHD-STD Surveillance

# Root Cause Analysis

Cause and Effect Diagram

5 Whys?



Fishbone Diagram

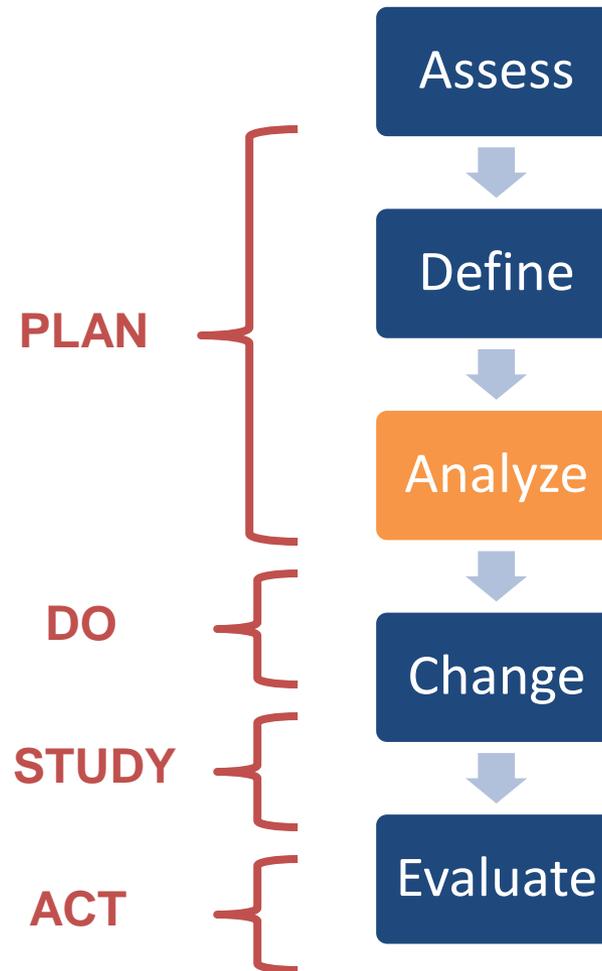
Ishikawa Diagram

## Participant Poll

Have you used or currently use root cause analysis approach to quality improvement projects?

- A. Yes
- B. No
- C. Unsure

# Root Cause Analysis: Where are we?



# The Power of Root Cause Analysis

W. Edwards Deming transformed quality control processes by applying his beliefs

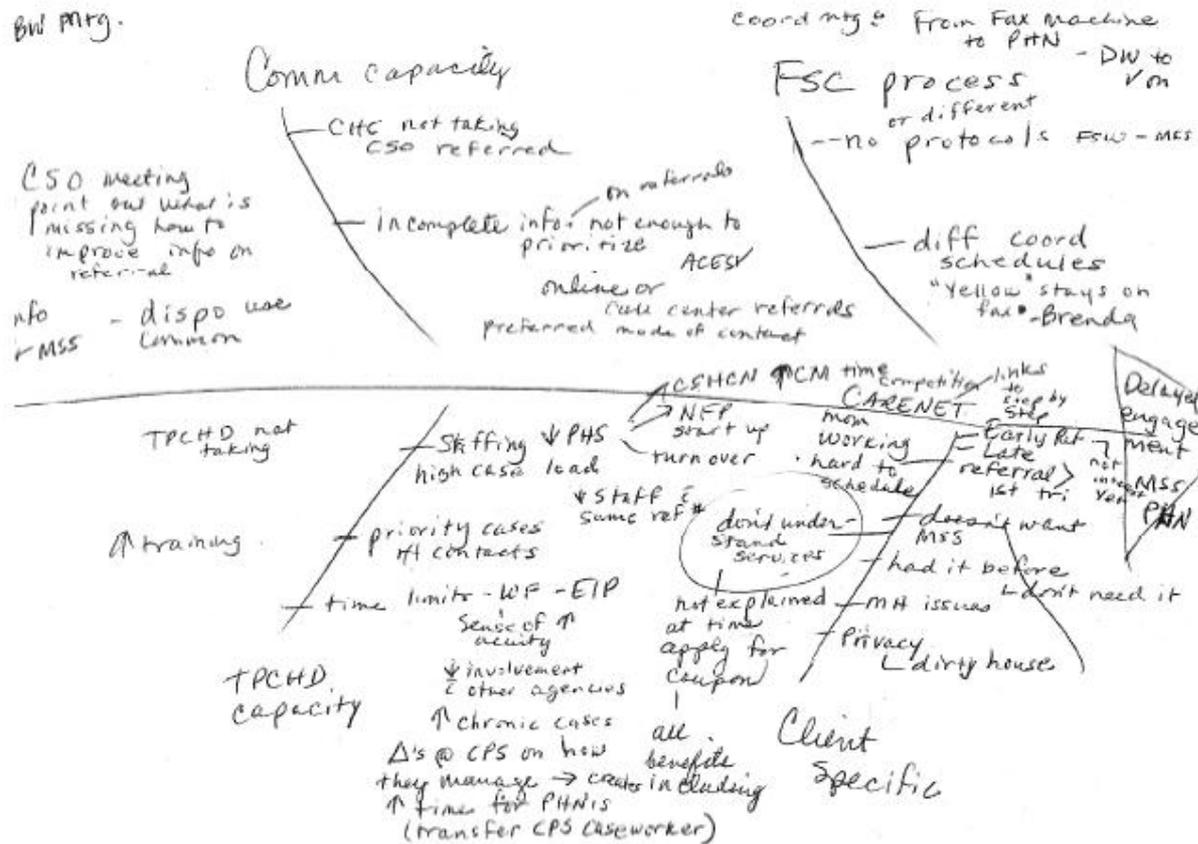
- Measuring outputs/outcomes at the end ignores root cause and ensuing poor results.
- Addressing root causes through ongoing evaluation and quality improvement avoids problems and improves quality.
- Ongoing measurement with feedback loops helps processes.

The Public Health Quality Improvement Handbook, p. 22

## Root Cause-Purpose

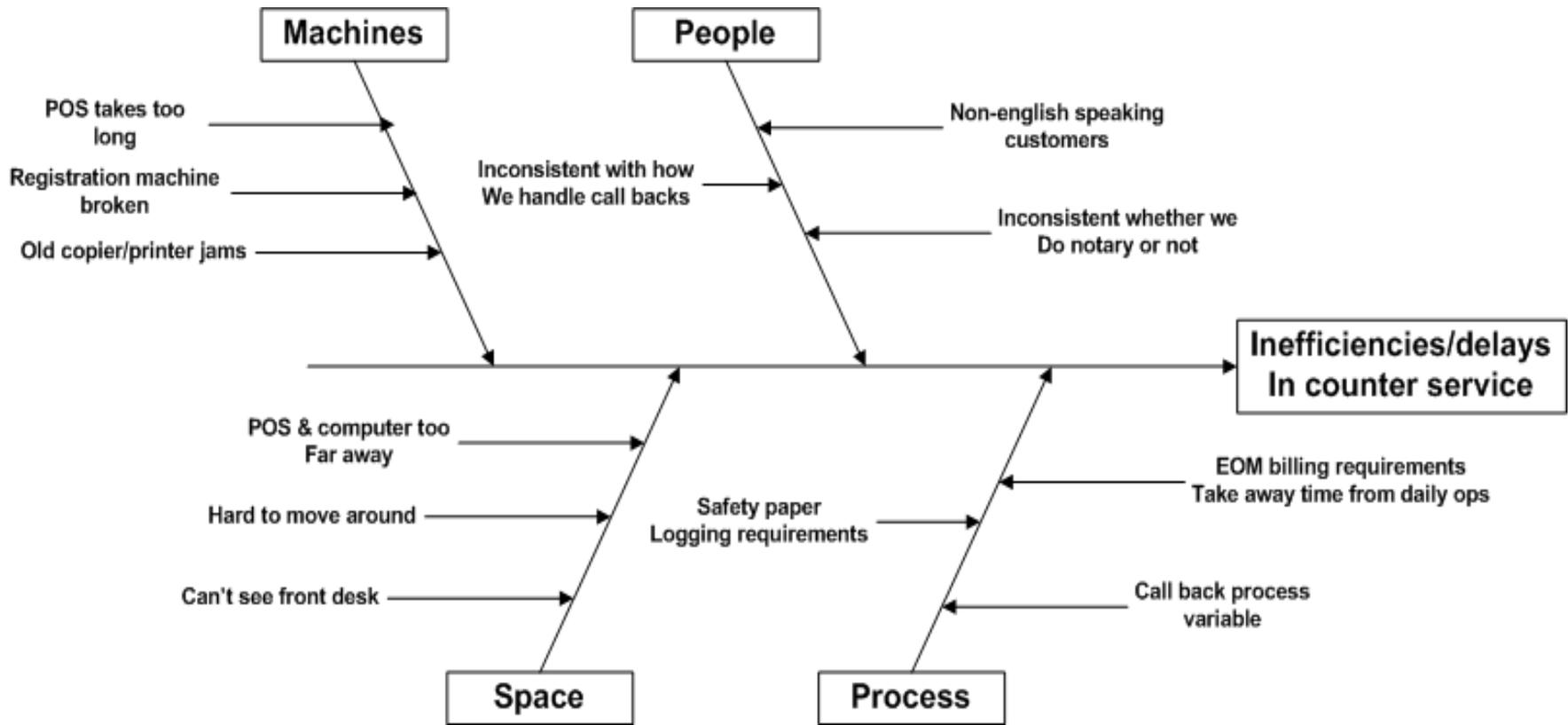
- To find the real cause of a problem or issue
- Understand the impact to the organization
- Resolve it with a permanent fix
- Encourages divergent thinking
- Demonstrates the complexity of the problem
- Encourages scientific analysis (rule-out)
- We need to determine:
  - what happened?
  - why it happened?
  - where it happened?
  - how to eliminate it?

# Root cause analysis-Fishbone



## TPCHD-Nurse Home Visiting

# Root cause analysis-Fishbone

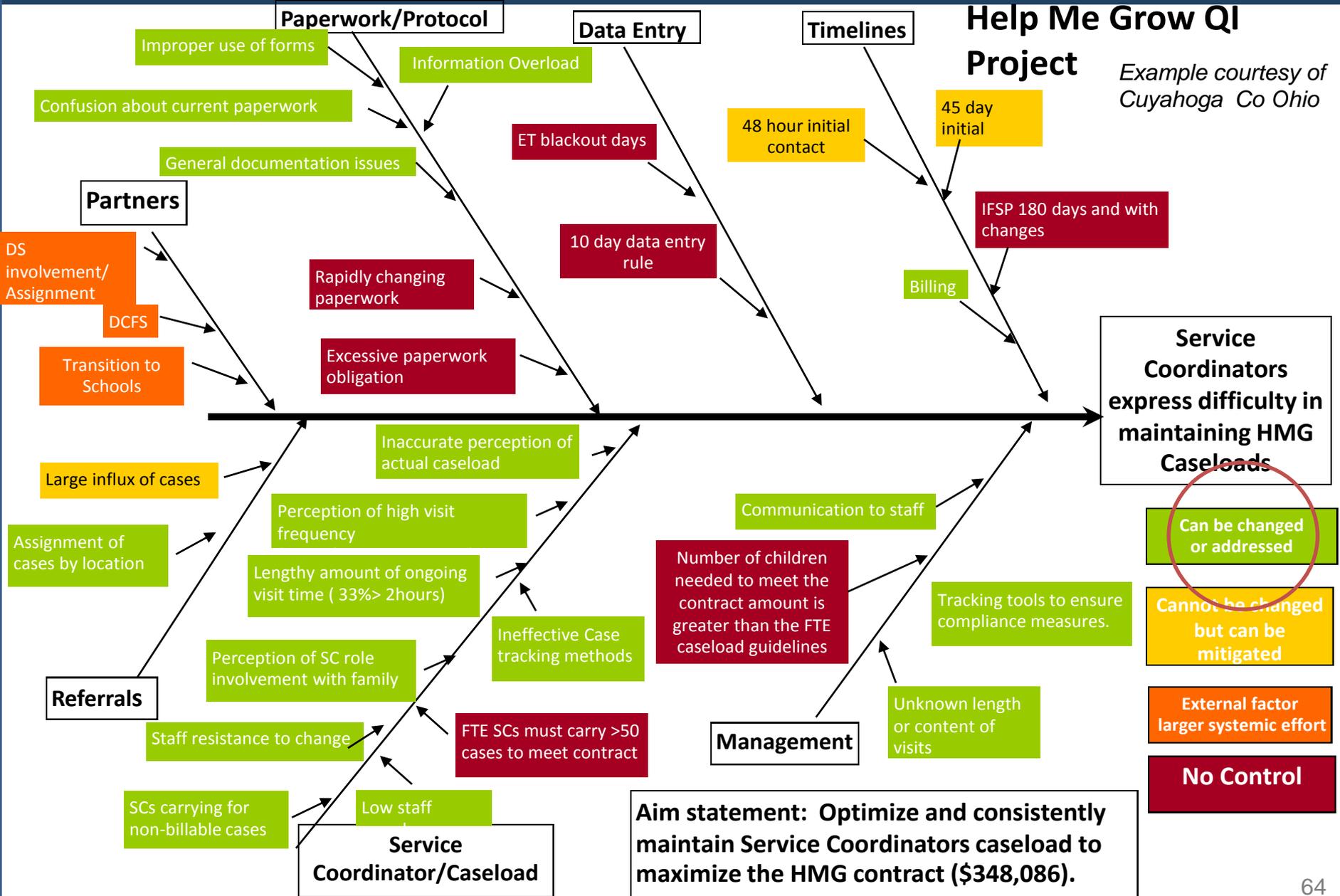


## Vital Records

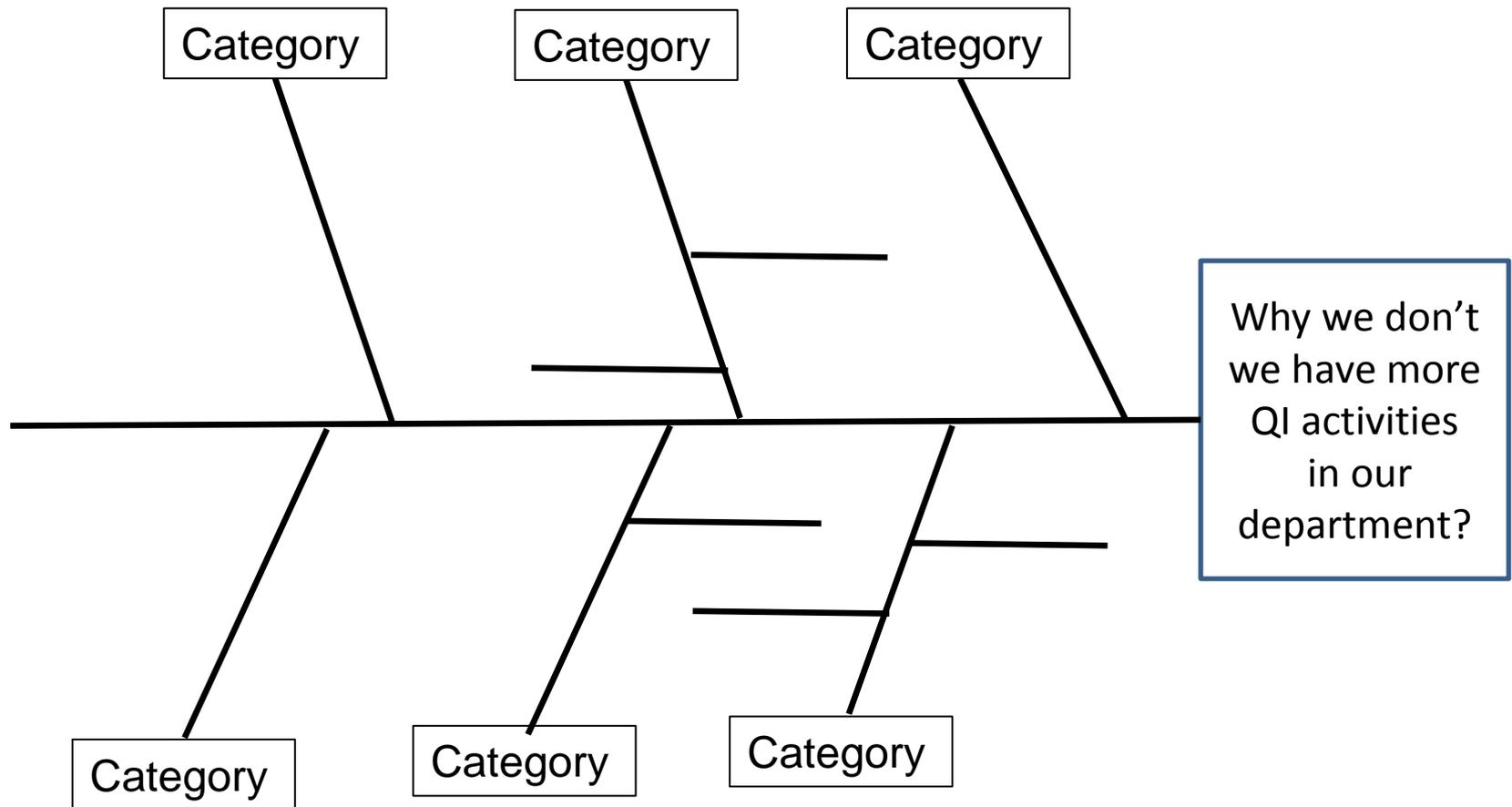
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## Help Me Grow QI Project

Example courtesy of Cuyahoga Co Ohio



# Root cause analysis-Fishbone



<http://asq.org/learn-about-quality/cause-analysis-tools/overview/fishbone.html>

## Testing Potential Root Causes

- Once the Fishbone Diagram has been constructed, the team should interpret or test for root cause(s) by one or more of the following:
  - Look for causes that appear more than once within or across categories
  - Choose most likely root causes through an unstructured consensus or a more formal process like Multivoting or Nominal Group Process
  - Collect data on selected causes to determine relative frequencies
  - Use an analysis tool, like a Pareto Chart, to identify root cause

# Don't miss an opportunity to share your story!

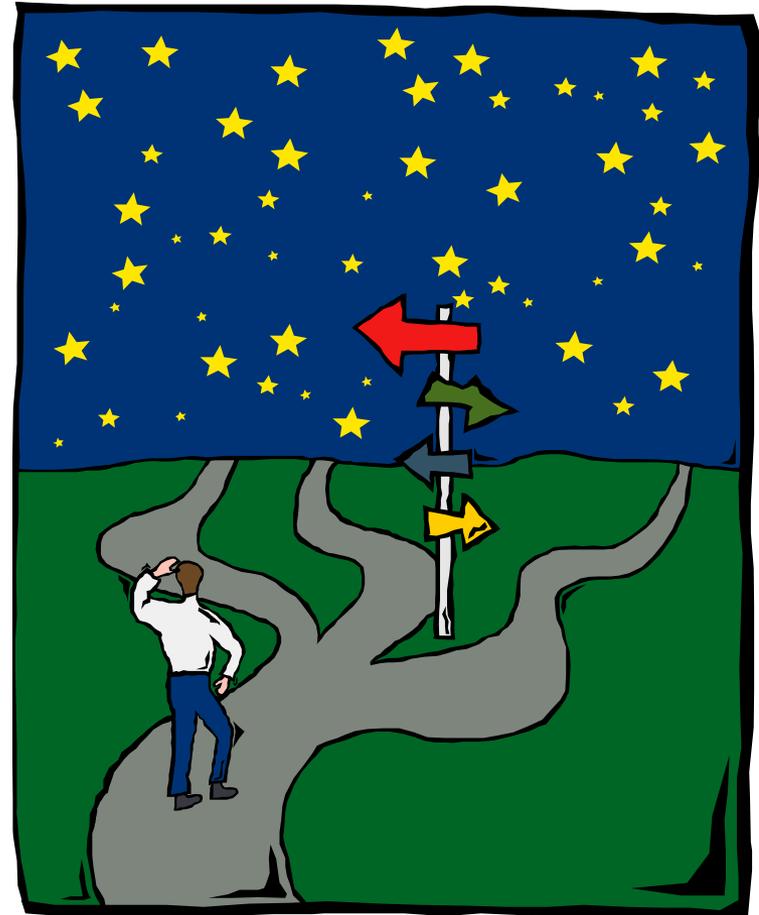


# Public Health Performance Management Centers for Excellence

## Prioritization Matrices

“If You Don't Know  
where You Are  
Going, Any Path  
Will Do.”

The Cheshire Cat, in Lewis  
Carroll's *Alice In Wonderland*



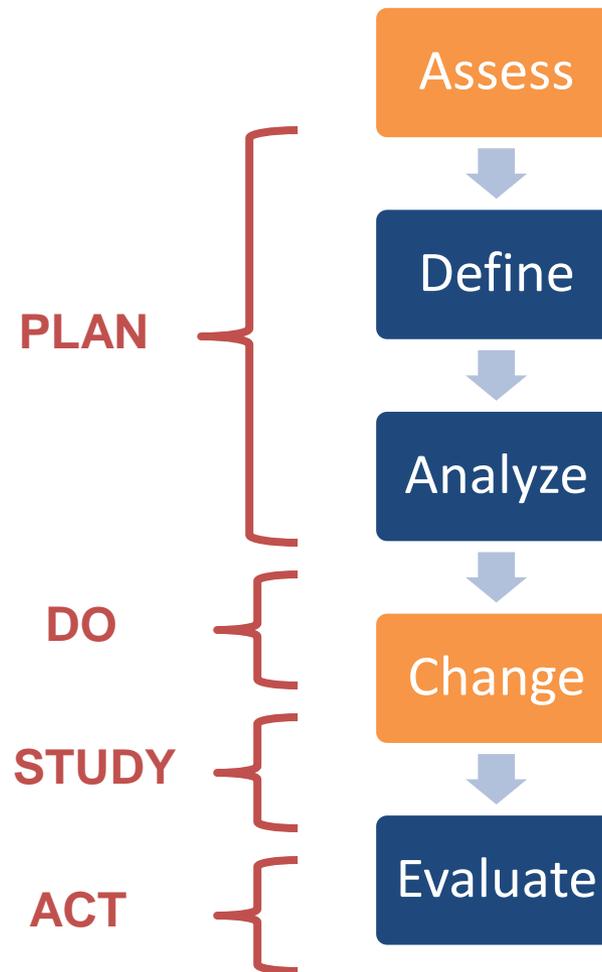
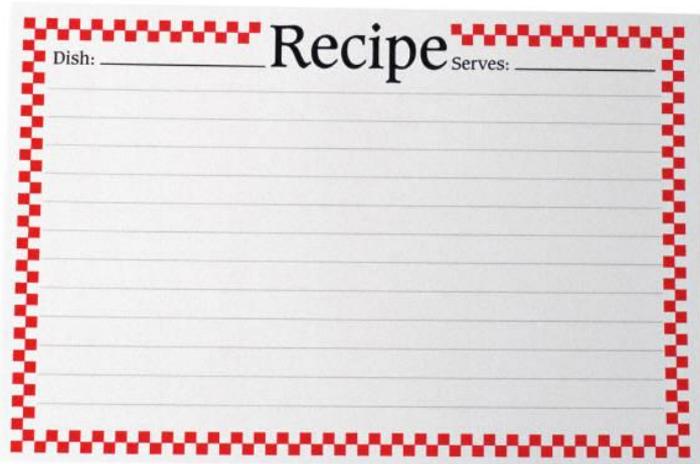
# Why use them?

- Decision tools are used to:
  - *Narrows* decisions
  - Limit “pet projects”
  - Increases transparency and validity of decision making
  - Consensus fosters buy-in
  - Provides focus
  - Other reasons?

## For what would I use them?

- CHA/CHIP
- Strategic plan
- Buying a car? Taking a vacation? Best wine?
- Prioritizing summer projects
- Quality improvement projects
- Other ideas?

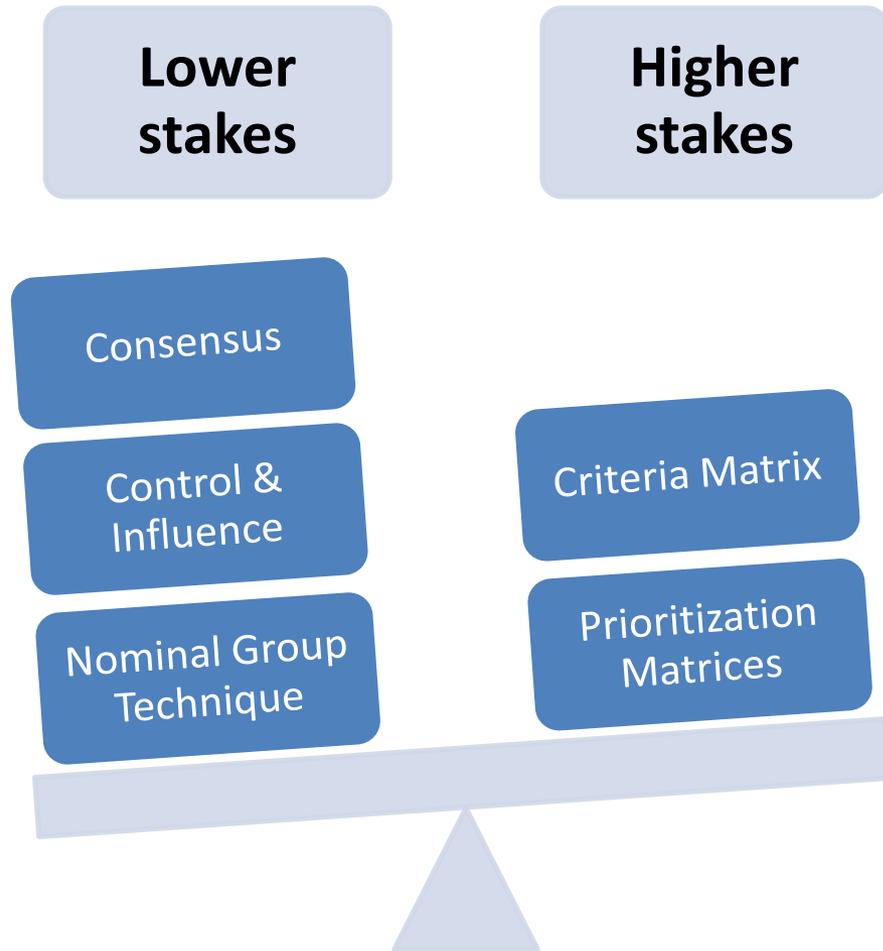
# Decision tools: Where are we?



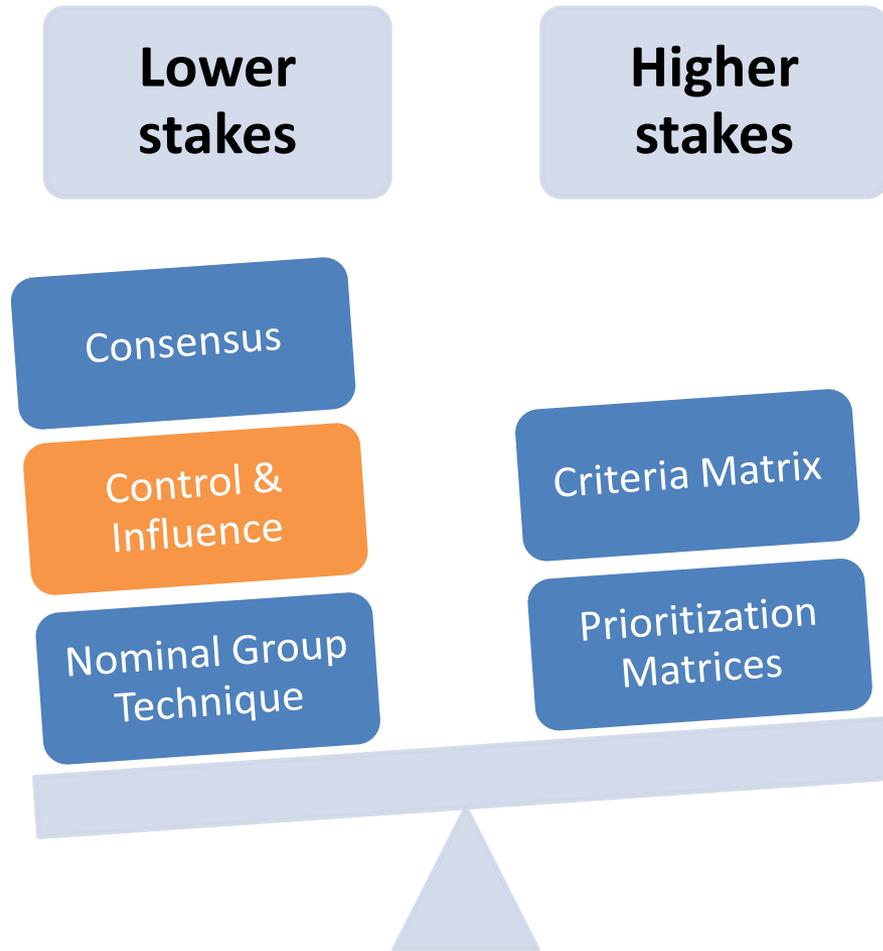
# How do I use it?

- Conduct a prioritization process to identify the higher priority issues to improve
- Use to identify best solution for implementation
- Select leaders and staff to participate in prioritization process
- Determine tool/process and criteria for prioritizing issues
- Select high-priority areas/solutions

# Types of Decision Tools



# Types of Decision Tools



# Control and Influence

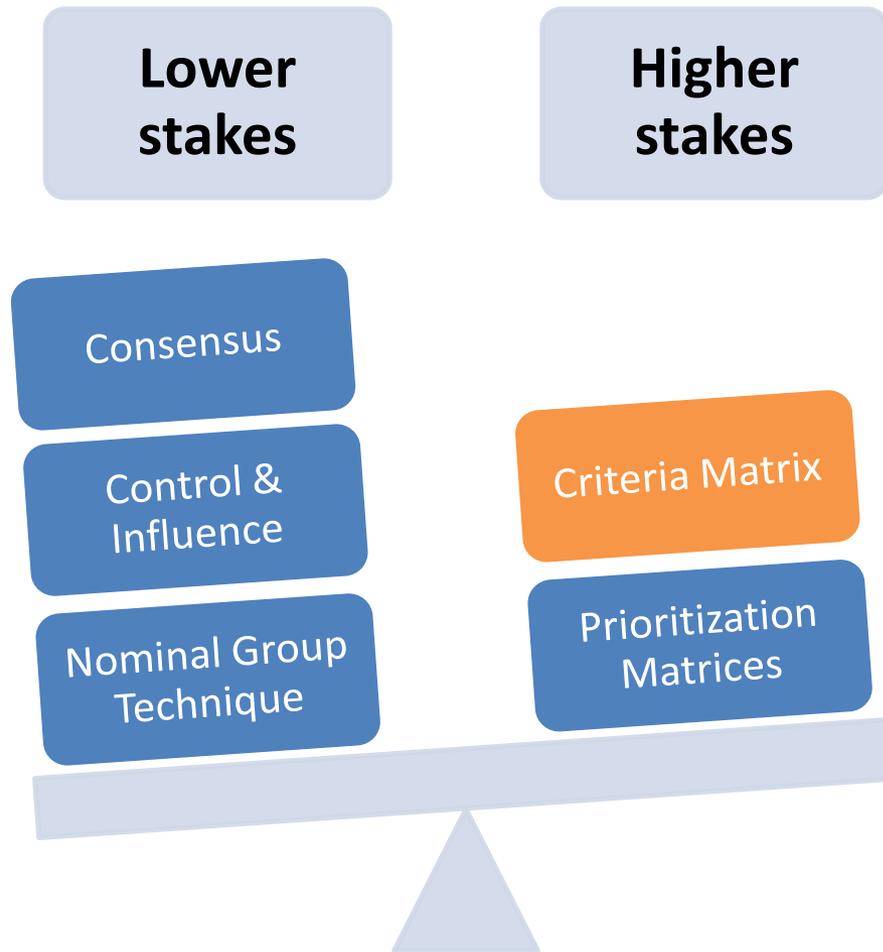
- This is a conceptual tool to help give a team guidance on what to focus on when trying to pick a topic to improve
- They should focus where they have both control and knowledge
- In Public Health we may work more in the influence part of the circle or quadrant

	Control	No Control
Knowledge	Do It	Influence
No Knowledge	Get Help	Stay Away

Example courtesy of Spokane Regional Health District

		Control	No Control
GI illness in long-term care facilities	Knowledge	Improving outbreak mitigation (decrease outbreak duration in LTC)	Reduce staff GI attack rate Reduce point source outbreaks Ensure LTC facilities are practicing infection control to community standards
	No Knowledge	Improve identification of high risk (ill) workers	Improve infection control training program within the nursing assistant curriculum

# Types of Decision Tools



# Choosing Criteria

- Why? Options are narrowed through a systematic approach of comparing choices by applying criteria
- Possible criteria
  - Improved quality
  - Lower cost
  - Strategic
  - Feasibility
  - Repeatability (i.e. volume)
  - Contribution to meeting Standards/Accreditation
  - Measurable
  - Scope or span across division
  - Risk
  - Impact
  - Others?

# Criteria Matrix Tool

Improvement Area	Importance			Control			Hi Risk	Hi Vol	Prob. Prone	Total points
	HI (3)	MED (2)	LOW (1)	HI (3)	MED (2)	LOW (1)	(1)	(1)	(1)	
1. Vaccines	<b>X</b>				<b>X</b>			<b>X</b>		<b>6</b>
2. Engage Community		<b>X</b>			<b>X</b>				<b>X</b>	<b>5</b>
3. CHIP	<b>X</b>				<b>X</b>		<b>X</b>			<b>6</b>
4. Food Safety		<b>X</b>		<b>X</b>			<b>X</b>	<b>X</b>		<b>7</b>
5. Family Planning		<b>X</b>				<b>X</b>	<b>X</b>	<b>X</b>		<b>5</b>

# Public Health Performance Management Centers for Excellence

Example courtesy of Kittitas County Public Health

Criteria Scoring Guide Criteria Weight	How much will this project contribute to meeting PHAB standards?			How much of this process can we control?			How easily can we measure this project?			How often does this process repeat itself?			To what extent will this project involve staff from multiple divisions of the health department?			TOTAL
	High 3	Med 2	Low 1	High 3	Med 2	Low 1	High 3	Med 2	Low 1	High 3	Med 2	Low 1	High 3	Med 2	Low 1	
	0.2			0.2			0.2			0.2			0.2			
	Score			Score			Score			Score			Score			
<b>Quality Improvement Project Ideas</b>																<b>TOTAL</b>
Improve functionality and reduce paper work for travel authorizations			1		14	2.0		13	1.9		12	1.7		15	2.1	<b>8.7</b>
Improve purchase request process			1		13	1.9		10	1.4		14	2.0		9	1.5	<b>7.8</b>
Reducing line item expenditures (copies, cell phones, etc.)			1		13	1.9		17	2.4		16	2.3		14	2.0	<b>9.6</b>
Reduce time spent on things we don't really do (mold, WIC questions, etc.)			1		13	1.9		12	1.7		17	2.4		15	2.1	<b>9.1</b>
Improve and streamline data reporting collection—EH, food handlers, inspections, etc.			3		20	2.9		17	2.4		18	2.6		16	2.3	<b>13.1</b>
Improve efficiency and effectiveness of staff meetings			1		18	2.6		14	2.0		14	2.0		17	2.4	<b>10.0</b>
Improve effectiveness of smoking in public places enforcement procedures			3		13	1.9		11	1.6		11	1.6		11	1.6	<b>9.6</b>
Improve effectiveness of environmental health enforcement			3		17	2.4		14	2.0		14	2.0		11	1.6	<b>11.0</b>
Improve business practices around compliance			1		15	2.1		11	1.6		11	1.6		12	1.7	<b>8.0</b>
Improve effectiveness and quality of services			2		19	2.7		13	1.9		9	1.3		18	2.6	<b>10.4</b>
Improve accuracy of vaccine lot #			2					17	2.4		13	1.9		8	1.1	<b>9.9</b>
											18	2.6		12	1.7	<b>12.2</b>

# Prioritization Matrix Types

- Full analytical criteria method
  - Smaller teams
  - Few options
  - Relatively few criteria
  - Complete consensus needed
  - Stakes are high if plan fails
- Consensus criteria method
  - Larger teams
  - Options are many
  - Significant number of criteria
  - Quick consensus needed
- Combination
  - Interrelationships among the options are high
  - Finding option with greatest impact critical

# How to Use Prioritization Matrix

- Agree on goal statement for prioritization
- Use potential topics from assessment results, brainstorming or affinity diagram
- Develop decision criteria for paired comparisons, e.g.:
  - Improved quality
  - Lower cost
  - Improved outcomes
  - Better service
- Using an L-shaped matrix, weight each criterion against each other
  - Draw table on flip chart, label the rows with each of the criteria and column labels should correspond to row labels

Public Health QI Handbook, pgs. 204–207

# How to Use Prioritization Matrix

- Compare ALL options relative to each weighted criterion Take topics/issues and ask:
  - Does X contribute more than Y in achieving the goal, based on our criteria?
- Once you have agreement on the answer, then decide how much:
  - 1 = **Equally** important
  - 5= **More** important
  - 10= **Much more** important
  - 1/5 **Less** important
  - 1/10= **Much less** important
- Assign agreed-upon value to the issue contributing more and the reciprocal score to the other
- Total the option scores
- Create one last matrix, compare each option based on all criteria combined
  - Multiply the criteria weighting by the option scores for each cell
  - Sum across
- Choose best option across all criteria

# Example of Prioritization Matrix

(Each issue against Importance criterion)

	1. Health Data	2. Engage Commu.	3. CHIP	4. QI Plan	5. Research Processes	Row Total
1. Health Data		5	1	5	10	21
2. Engage Community	1/5		1	5	10	16.2
3. CHIP	1	1		5	10	17
4. QI Plan	1/5	1/5	1/5		5	5.6
5. Research Processes	1/10	1/10	1/10	1/5		0.5

# QIG

(Quality Improvement Geek)

# You might be a QIG if...

- Your colleagues says, “It’s [missing data] messing up my run chart!” and you are totally sympathetic.
- You celebrate your first histogram with a glass of wine.
- You wake up excited for a Quality Council meeting.
- You use a prioritization matrix to help you decide what car to buy.

# Example Exercise

- Background

Family of four

Two kids in car seats

Have two-seater stroller

Like to go camping

We're not rich!



# Example Exercise

1. Agree on goal statement
  - Choose the best car to purchase for my family.
2. Create list of criteria
  - Cool factor
  - Space
  - MPG
  - Tow capacity
3. Using an L-shaped matrix, weight each criterion against each other

# Car Exercise - Criterion vs. Criterion

Criteria	Cool factor	Space	MPG	Tow capacity	Row Total	Relative Decimal Value
Cool factor		1/10	1/5	1/5	.5	.01
Space	10		5	5	20	.61
MPG	5	1/5		1	6.2	.19
Tow capacity	5	1/5	1		6.2	.19
Grand Total					32.9	1.0

1 = **Equally** important  
 5 = **More** important  
 10 = **Much more** important  
 1/5 = **Less** important  
 1/10 = **Much less** important



# Example Exercise

4. Compare ALL options relative to each weighted criterion
  - There will be as many options matrices as there are criteria to be applied
  - In this example, we are considering the relative merits of the Chevy Suburban, the Dodge Caravan, and the Mini Cooper
  - Use same rating scale but customize the wording for each criteria
    - 1 = **Equally ...**
    - 5 = **More ...**
    - 10 = **Much more ...**
    - 1/5 = **Less...**
    - 1/10 = **Much less...**

# Car Exercise - Option vs. “Cool” Criterion

Cool	Chevy Suburban	Dodge Caravan	Mini Cooper	Row Total	Relative Decimal Value (weight)
Chevy Suburban					
Dodge Caravan					
Mini Cooper					
			Grand Total		1.0 ✓

1 = **Equally** cool

5 = **More** cool

10 = **Much more** cool

1/5 = **Less** cool

1/10 = **Much less** cool

# Car Exercise - Option vs. “Space” Criterion

Space	Chevy Suburban	Dodge Caravan	Mini Cooper	Row Total	Relative Decimal Value (weight)
Chevy Suburban		5	10	15	.59
Dodge Caravan	1/5		10	10.2	.40
Mini Cooper	1/10	1/10		.2	.01
				25.4	1.0 ✓

1 = **Equal** space

5 = **More** space

10 = **Much more** space

1/5 = **Less** space

1/10 = **Much less** space

# Car Exercise - Option vs. “MPG” Criterion

MPG	Chevy Suburban	Dodge Caravan	Mini Cooper	Row Total	Relative Decimal Value (weight)
Chevy Suburban		1/10	1/10	.2	.01
Dodge Caravan	10		1/5	10.2	.40
Mini Cooper	10	5		15	.59
				25.4	1.0 ✓

1 = **Equal** MPG

5 = **More** MPG

10 = **Much more** MPG

1/5 = **Less** MPG

1/10 = **Much less** MPG

# Car Exercise - Option vs. “Tow Capacity” Criterion

Tow	Chevy Suburban	Dodge Caravan	Mini Cooper	Row Total	Relative Decimal Value (weight)
Chevy Suburban		5	10	15	.73
Dodge Caravan	1/5		5	5.2	.25
Mini Cooper	1/10	1/5		.3	.02
				20.5	1.0 ✓

- 1 = **Equally** capable or towing
- 5 = **More** capable of towing
- 10 = **Much more** capable of towing
- 1/5 = **Less** capable of towing
- 1/10 = **Much less** capable of towing

# Example Exercise

5. Using an L-shaped summary matrix, compare each option based on all criteria combined
  - List criteria horizontally in the first column and options vertically in the first row
  - For each cell in the matrix, multiply the option rating by the criteria weight. This creates an option score
  - Add each option score across all criteria for a row total
6. Choose the best option

# Car Exercise - Summary Matrix

Criteria Options	Cool factor (weight)	Space (weight)	MPG (weight)	Tow capacity (weight)	Row Total
Chevy Suburban	(option rating X .01) =	(.59 X .61) = <b>.36</b>	(.01 X .19) = <b>.00</b>	(.73 X .19) = <b>.14</b>	
Dodge Caravan	(option rating X .01) =	(.40 X .61) = <b>.24</b>	(.40 X .19) = <b>.08</b>	(.25 X .19) = <b>.05</b>	
Mini Cooper	(option rating .01) =	(.01 X .61) = <b>.01</b>	(.59 X .19) = <b>.11</b>	(.02 X .19) = <b>.00</b>	
				Grand Total	

For each cell in summary matrix, multiply the option rating by the criteria weight

# SRHD Quality Council: Prioritization Exercise

- Set the stage for prioritization
  - Role of our Quality Council
  - Developed and reviewed process for completion of QM projects
- Assessed for potential quality improvement projects
  - Aggregate customer satisfaction data
  - Logic model reviews and division reports
  - Performance measure data
  - Accreditation findings and recommendations
  - Strategic planning goal group progress
- Used the Quality Council's discussion board to generate QI project ideas

# Spokane Regional Health District Quality Council Prioritization: Setting the Stage

- Role of the QC
- Reviewed rolled-up agency performance information
  - Aggregate customer satisfaction data
  - Division logic model reviews
  - Performance measure data
  - Accreditation findings
  - Strategic planning goal progress
- Used the QC discussion board to generate QM project ideas

# Spokane Regional Health District Quality Council Prioritization Exercise

## Process

1. Review ground rules
2. Agree on goal statement
3. Review and gain consensus on list of decision criteria and their definitions
4. Assign weighting to criteria reaching consensus using a **prioritization matrice**
5. Review QM opportunities - eliminate as needed
6. Independently ranking each Quality Management Opportunity (*using a SurveyMonkey survey*) <https://www.surveymonkey.com/s/VZGSJXQ>
7. Co-chairs to tabulate results
8. Results reported out via discussion board with opportunity for comment
9. Process and outcome debrief at August QC meeting
10. Final recommendation to Executive Leadership Team

**Libraries**

- Site Pages
- Shared Documents
- QC Administrative Projects
- QC Binder

**Lists**

- Calendar
- Tasks
- Links
- 2013-2014 Planner
- QI Projects

**Discussions**

- QI/QP Projects

**QC Monthly Meeting**

- File Bin
- Content

<input type="checkbox"/>	Project Idea	Type of Project	Source of Project Idea	Problem Statement
	<a href="#">Ceate online food establishment application tool</a>	Quality Improvement Project	Other	The current food establishment application process is paper based. EPH would like application data, and it should make it easier to renew.
	<a href="#">Decrease Smoking Rates</a>	Quality Improvement Project	Other	Decrease smoking rates among postpartum women in the NFP and WIC programs.
	<a href="#">Develop Agency Documentation Standards</a>	Quality Improvement Project	Accreditation/Standards	When pulling documentation for WA State Standards and for PHAB, the team faced example, reports, fliers, procedures, minutes and other documentation that did not demonstrate that we met a measure. Development/implementation of documentation number of documents available to submit for accreditation.
	<a href="#">Facilitation and Presentation Skills Training</a>	Quality Improvement Project	Other	According to aggregate agency data from the presentation evaluations, staff could not create content to meet the level of audience. Interactive exercises and activities were rare. Coalition surveys indicate a need for facilitation skills training. There are techniques towards goals, and improved follow-up from members.
	<a href="#">HiAP Decision Support Process &amp; Tool</a>	Quality Planning Project	Strategic Planning	Currently, our agency and BOH does not have consistent and standardized process policies. Additionally, two of our four strategic planning goal groups have begun to meet and BOH. There is an opportunity to bring the goal groups together to develop one agency. This would help further the strategic planning goals related to improving agency and agency health priority areas.
	<a href="#">Increase % of surveys and evals run through CHAPE</a>	Quality Improvement Project	Division Report	In 2012, only 18.5% of customer service surveys, 30% of collaborative partnerships were run through CHAPE. These percentages are either the same or less than the target. It is a challenge in tracking and trending data and does not adhere to agency protocol.
	<a href="#">Increase Breastfeeding Rates</a>	Quality Planning Project	Logic Model	To increase the percentage of clients in WIC and NFP who are still breastfeeding at 6 months.
	<a href="#">SRHD.org Website Interface Update</a>	Quality Improvement Project	Other	Our current website site at SRHD.org has been in place for several years. To improve user experience, update the site's interface design. With proper design, the site will be able to better serve our users.
	<a href="#">Wellness tool for staff</a>	Quality Planning Project	Other	create a wellness tool for staff on our intranet.
	<a href="#">WIC Board</a>	Quality Improvement Project	Other	WIC would like to increase access to healthy nutrition advice through the board.

CRITERIA	Risk Impact	Feasible	Repeatable	Strategic	Problem Areas	Total
Risk Impact	<del>5</del>	5	10	1	5	<del>21</del> .42
Feasible	1/5	<del>5</del>	5	1	1/5	<del>6.4</del> .13
Repeatable	1/10	1/5	<del>5</del>	1/5	1/5	<del>.7</del> .01
Strategic	1	1	5	<del>5</del>	5	<del>12</del> .24
Problem Areas	1/5	5	5	1/5	<del>5</del>	<del>10.4</del> .20
Other?					<del>5</del>	<del>5</del> .10

- 1 = Equally Important
- 5 = More Important
- 10 = Much More Important
- 1/5 = Less Important (2)
- 1/10 = Much Less Important (1)

# Polling Scenario

- A. High level
- B. Matrix flow (swim lane/functional)
- C. Value stream mapping
- D. Detailed

**Scenario:** You are developing a new process for IT help-desk work assignments.

**Question:** What type of flow chart would you use?

# Polling Scenario

- A. High level
- B. Matrix flow (swim lane/functional)
- C. Value stream mapping
- D. Detailed

**Scenario:** Program managers have complained to the HR department that it takes too long to process new hires after accepting a job offer.

**Question:** What type of flow chart would you use?

# Polling Scenario

- A. Prioritization matrix
- B. High level flow chart
- C. Lean 5S
- D. Cause & Effect

**Scenario:** The maintenance manager at the health department is working on a QI project to reduce supply (cleaning and maintenance) costs of the agency. Through their Analysis phase, they learned that a great deal of different supplies get ordered by different programs, that then sit on the supply shelves, taking up limited space, and then get thrown out unused or hardly used when they expire.

**Question:** What might be one of the tools they use in the next phase of their project? Why?

# Polling Scenario

- A. Logic model
- B. Control & Influence
- C. Prioritization matrix
- D. Cause & Effect

**Scenario:** The Wellness committee at Any County Public Health is conducting a QI process to increase the level of physical activity of staff. They are getting ready to pilot (test and evaluate) one of the following interventions among 2 programs to get some quick feedback before rolling out to agency next week: onsite yoga class, pedometer loan program, discounted gym membership, agency softball team.

**Question:** What might be one of the tools they use in the next phase of their project? Why?

# Additional Resources

- Performance Management Centers for Excellence Web site:  
[www.doh.wa.gov/PHIP/perfmgmtcenters](http://www.doh.wa.gov/PHIP/perfmgmtcenters)
- Public Health Memory Jogger, GOAL/QPC, 2007,  
[www.goalqpc.com](http://www.goalqpc.com)
- The Public Health Quality Improvement Handbook, Bialek R, Duffy DL, Moran JW Milwaukee, WI: ASQ Quality Press; 2009
- The Improvement Guide, Langley et al. Jossey-Bass; 1996.
- Quality Toolbox, Tague, N., Milwaukee, WI: ASQ Quality Press; 2005
- Public Health Quality Improvement Encyclopedia, Kyle, E, Public Health Foundation; 2012  
[http://www.phf.org/news/Pages/Now Available Public Health Quality Improvement Encyclopedia.aspx](http://www.phf.org/news/Pages/Now_Available_Public_Health_Quality_Improvement_Encyclopedia.aspx)

**THANKS FOR YOUR PARTICIPATION!**

**Please complete the evaluation you  
receive via email.**

**Join us Next Time:  
September 9, 2013**

***Performance Measures in Quality  
Improvement***

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# What questions do you have?

