

Public Health Performance Management Centers for Excellence

**Year One Review
Year Two Preview**

Centers Kickoff Meeting
October 26, 2011

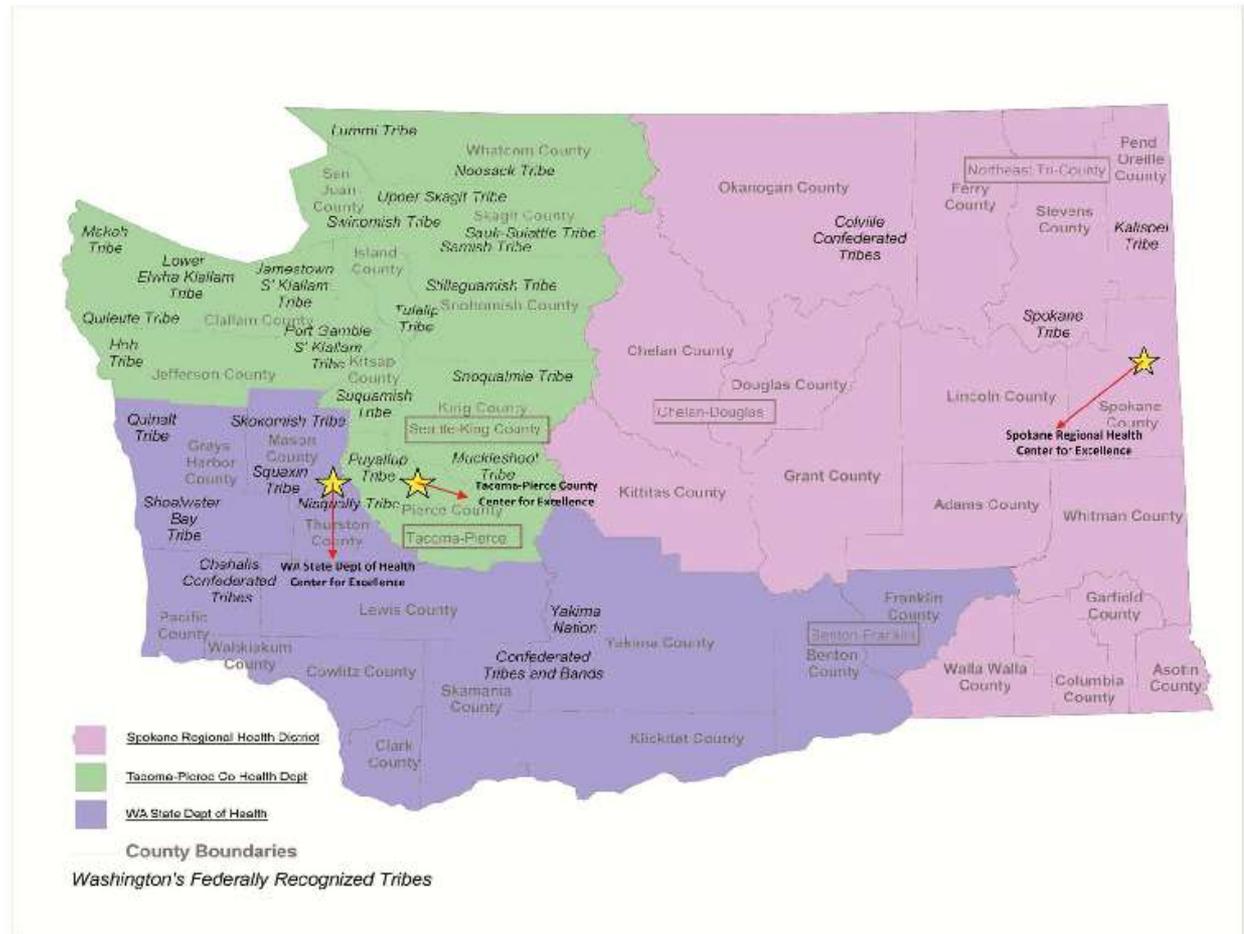
Megan Davis



*Public Health Performance Management
Centers for Excellence*

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Regional Service Areas



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WA DOH Center Staff

Susan Ramsey

- Director, Office of Performance and Accountability
- Co-chair, Washington State Standards workgroup
- Leader, Multi-state Learning Collaborative
- National Reviewer, PHAB Beta Test
- Project Lead, DOH Public Health Standards/PHAB Readiness Team
- Chair, Statewide Standards Review
- Accreditation Coordinator, DOH

Megan Davis

- National Public Health Improvement Initiative grant coordinator
- DOH Performance Management Center Quality Improvement Lead
- Seventeen years work with performance improvement initiatives in Washington State government

Diana Ehri

- Performance Management Consultant, Office of Performance and Accountability
- Project Lead, DOH Quality Improvement Teams
- Task Force Leader, Strategic National Stockpile, Reception, Staging, and Storage
- Twenty-five years in public health



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Spokane Center Staff

Torney Smith

- Administrator
- Co-chair, WA State Standards workgroup
- Board of Directors, NACCHO

Lyndia Tye

- Division Director, Disease Prevention & Response
- Developed Quality Council and agency-wide training and QI reporting system

Stacy Wenzl

- Program Manager, Community Health Assessment
- Spokane CFE Lead/Liaison
- Agency Standards/PHAB readiness team

Liz Wallace

- Epidemiologist, Program Evaluation
- Co-facilitator, Quality Council



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Tacoma Pierce County Center Staff



Cindan Gizzi

- Director, Office of Community Assessment
- 15 years experience utilizing quality management

Scott Davis

- QI Coordinator
- 20 years experience as quality management consultant

Susan Pfeifer

- Program Coordinator
- Facilitator to TPC Quality Council for 3 years

John Britt

- Prevention Coordinator
- Organizational Development Specialist
- Leads standards effort and CHIP at TPC



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Grant Administration Accomplishments

- Created three state-wide regional Performance Management Centers for Excellence (Center)
- Conducted pre-evaluations of 35 LHJs and 11 Centers' staff
- Conducted post-evaluation of 12 Centers' staff
- Developed Centers' web site, a comprehensive portal for public health performance management topics, tools, and resources
- Provided 15 performance management training events over 9 months, with 14 different expert presenters, attended by 390 participants from LHJs and tribes across Washington and 4 other states



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WA DOH Center Accomplishments

- Contacted all 12 regional LHJs
- Responded to 6 requests for assistance from 5 LHJs and 3 DOH requests for assistance
- Responded to 15 other states' requests for assistance
- 158 hours spent assisting LHJs and DOH (in addition to Centers training events)
- 43 individuals served
- Delivered 2 public trainings
- Improved LHJ, DOH and other states' capacity in:
 - Quality Improvement Planning and Tools
 - National Public Health Standards
 - Community Health Assessments /CHAT
 - Community Health Improvement Plans
 - Big QI and Quality Improvement Council
 - Strategic Planning
 - Performance Management Systems & Training₇



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Spokane Center Accomplishments

- Contacted all 13 regional LHJs
- Provided services to 4 different LHJs
- Responded to 12 separate requests for assistance
- 29 hours spent assisting LHJs (in addition to Centers training events)
- 35 individuals served
- Services included:
 - Community Health Assessment processes
 - Preparation for Standards Review
 - Strategic management process development
 - Quality improvement project selection , tools, and planning



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Tacoma Center Accomplishments

- Contacted all 10 regional LHJs and 3 tribes
- Provided services to 10 different LHJs and tribes
- Responded to 69 separate requests for assistance
- 175 hours spent assisting LHJs (in addition to Centers training events)
- 256 individuals served
- Delivered 5 public trainings
- Improved regional LHJ and tribe capacity in:
 - Quality Improvement Tools
 - Big QI and Quality Improvement Councils
 - Quality Improvement Planning
 - Basics of Health Departments



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49 Organizations Attended Public Training, Year One

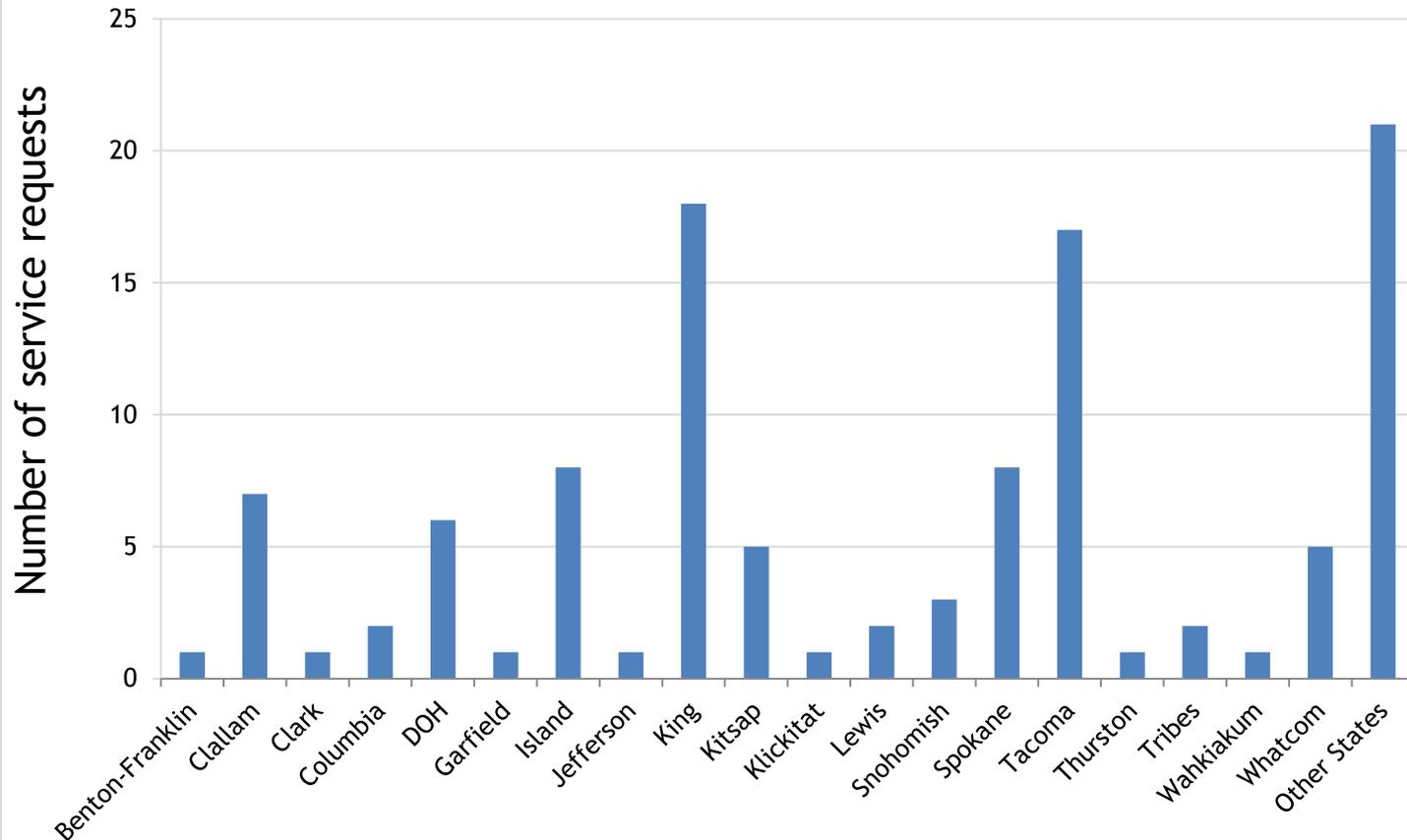
Health Departments in Washington	Column1	Tribes and Tribal Orgs	Other agencies & states
Asotin	Mason	Nisqually Tribe	Idaho Public Hlth Dist. 1
Benton-Franklin	NE Tri-County	Shoalwater Bay Tribe	Maricopa County, Arizona
Chelan-Douglas	Okanogan	Makah Tribe	Arizona Dept. of Health Services
Clallam	Pacific	Quinault Nation	WA State Health Care Authority
Clark	San Juan	Nez Perce Tribe	Idaho Dept. of Health and Welfare
Columbia	Seattle-King	Idaho Indian Health Services	Guam Dept. of Health & Social Svcs.
Cowlitz	Skamania	Indian Health Services	WA State Auditor's Office
Garfield	Snohomish	NW Portland Area Indian Health Board	WA State Health Care Authority
Grant	Spokane		
Grays Harbor	Tacoma-Pierce		
Island	Thurston		
Jefferson	WA Dept. of Health		
Kitsap	Walla Walla		
Kittitas	Whatcom		
Klickitat	Whitman		
Lewis	Yakima		
Lincoln			



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All Service Requests, Year One

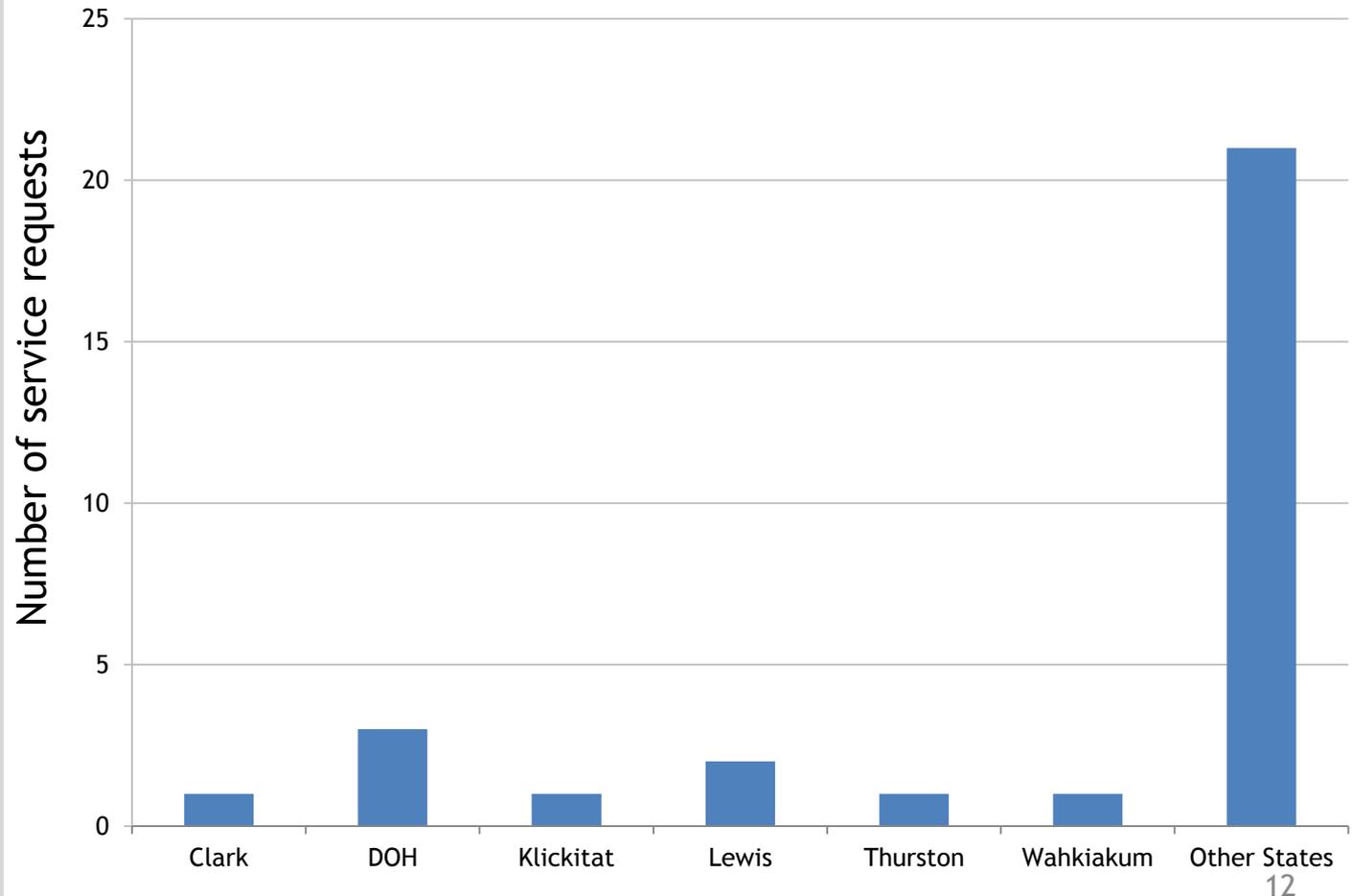
**111 Requests from 18 Health Departments
1 Tribe and 15 States**



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WA DOH Center Services, Year One

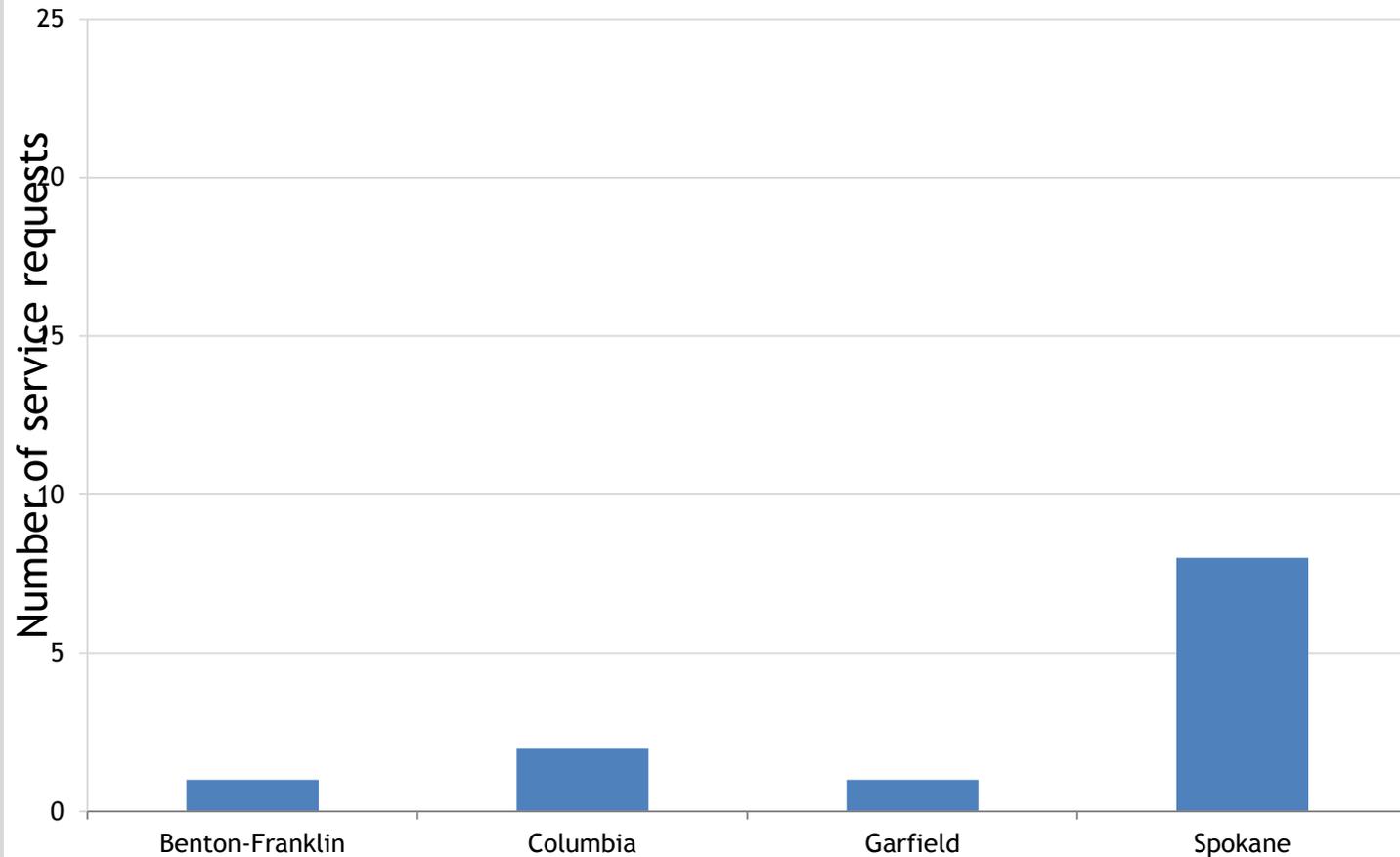
Requests by Clients



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Spokane Center Services, Year One

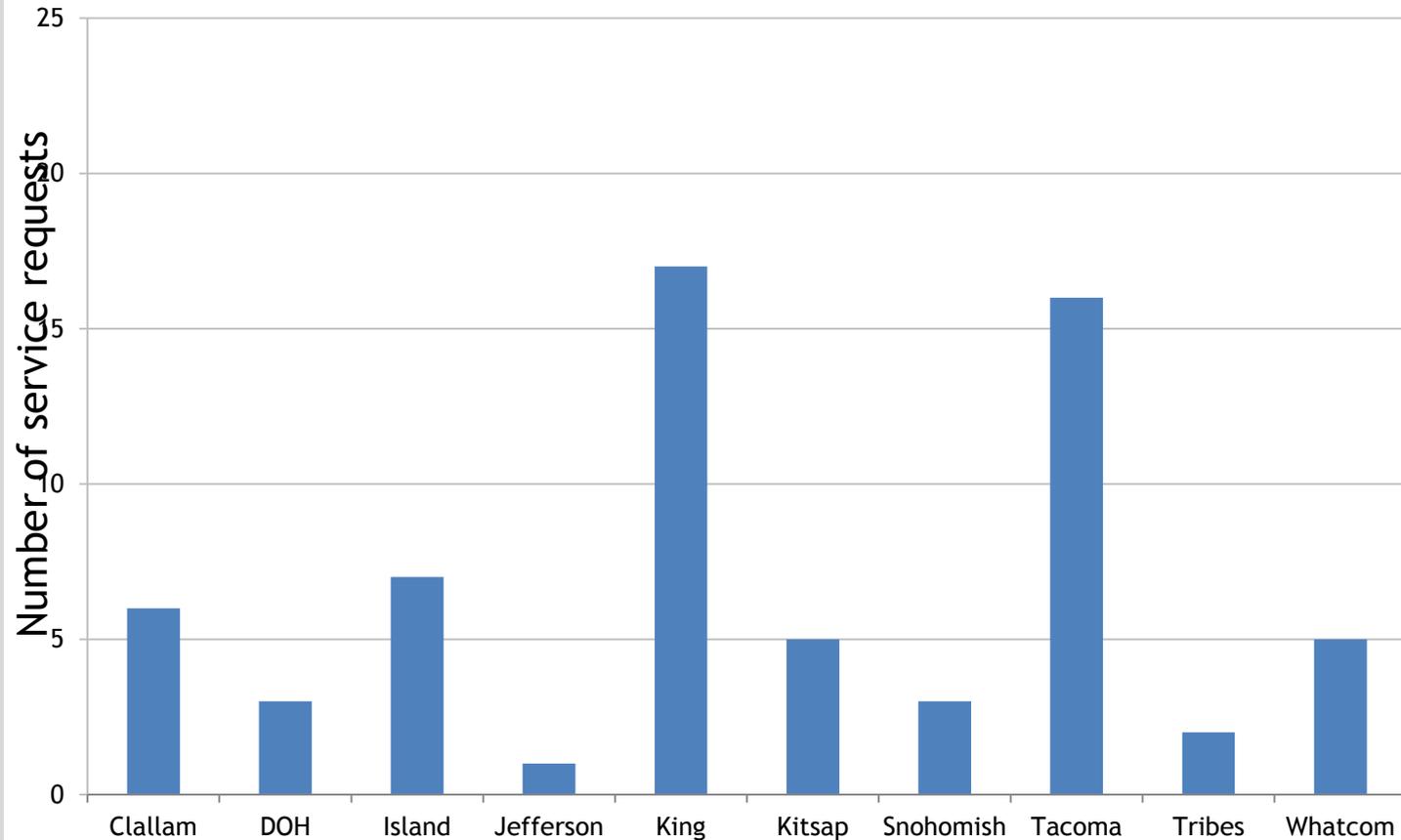
Requests by Clients



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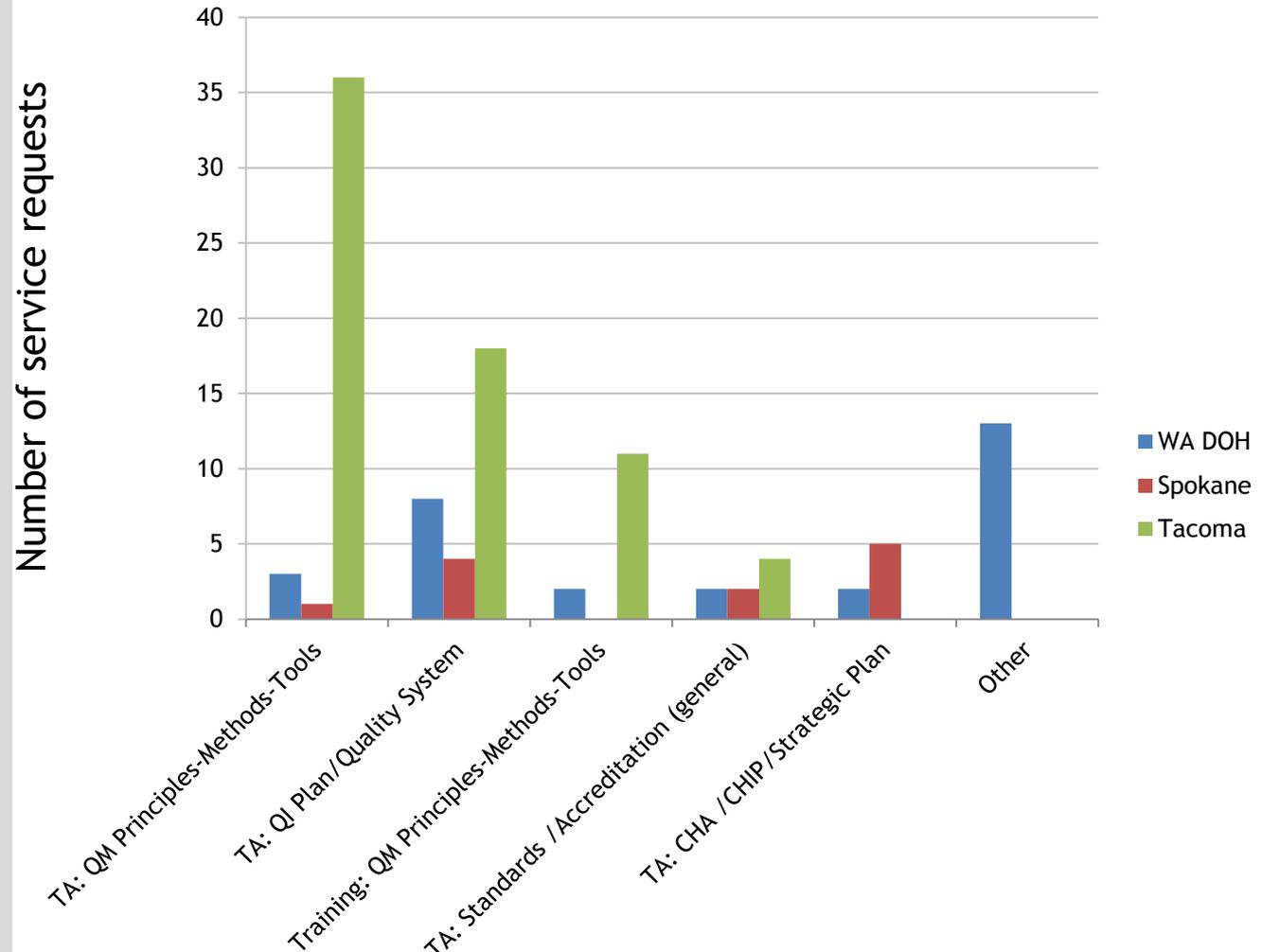
Tacoma Center Services, Year One

Requests by Clients



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Types of Service Requests by Center, Year One



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WA DOH Region - Analysis

A different story in every county

- Some LHJs are already on well established performance management journeys, for example Clark and Cowlitz Counties. Together, with support from academia, they are exploring regional accreditation along with very small Wahkiakum and Skamania in southwest Washington.
- Shrinking resources/time related to recent budget cuts has caused supporters to scale back, for example, use of the Basic 2010-2011 standards instead of larger set
- Some local Boards of Health are quite resistant
- New local capacity funding requirements or standards reviews motivated some less active LHJs
- Some are motivated by their quality or strategic plans (Clark, Benton-Franklin)
- In some cases, leaders have great expertise (Grays Harbor) while in others, mid-managers carry performance management and accreditation forward alone



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Spokane Region - Analysis

- Some LHJs are farther along in the QI journey than others (e.g. Walla Walla and Kittitas)
 - Desire to further efforts through interest in LEAN
 - Some setbacks from staffing changes
- Some local Boards of Health are quite resistant
 - Resulted in a County opting out of 2011 Standards Review; loss of LCDF funds
 - Many others opted for the basic set
- Economic climate continues to challenge participation
 - Eastern WA counties are NOT traveling
- New local capacity funding requirements
 - Motivated some less active LHJs: smaller LHJs expressing a willingness to work on systems-level QI but need examples that are meaningful and work for them (e.g. consolidating strategic plans, QI plans, performance management plans)
 - Some quite vocal in their response to the requirement
- Extent of setbacks due to leadership turnover unknown



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Tacoma Summary Data - Analysis

Why the variation?

- Does activity vary with size? To some degree, but not 1 to 1. Island and Clallam are both relatively small but active in quality management
- Lack of resources/time; adjustment to recent budget cuts is often mentioned among the less active
- Local politics vary - BOH's sometimes resistant

Motivation varies

- Some motivated to meet LCDF requirements or upcoming standards review -- tend to be less active
- Some motivated by internal plans (Kitsap) and/or strong desire to improve service/lower cost (Island) ... these tend to be more active

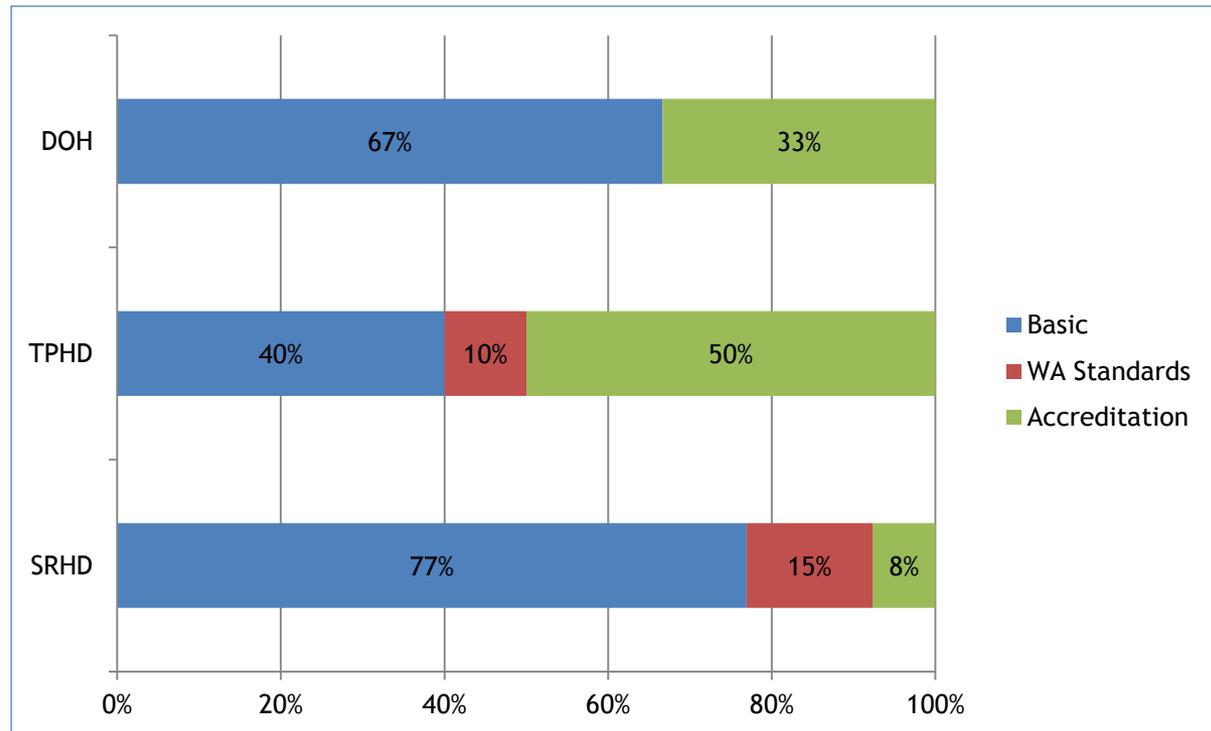
Proximity helps

- Kitsap and King can both easily send folks to classes we do @ TPCHD
- But ... we have done multiple sessions on site for Island, as well as single sessions so far with other LHJs



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Plans to Apply for Accreditation Vary



- The 2010-2011 Standards Review shows Tacoma's region has the greatest number of LHJs planning to apply for accreditation
- Spokane's region has the greatest number using Basic standards
- WA DOH's region has 2/3 of LHJs using Basic Standards and 1/3 planning for accreditation.



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LHJ Capacities - Year One Themes

Strengths

- Many LHJ interviewed are working on at least one prerequisite to accreditation
- Staff are looking for tools and grants such as the NACCHO Accreditation Support Initiative
- 2010/2011 Public Health Standards assessment data is being used to develop strategic plans and QI plans
- 390 participants from all three regions in the first year of training indicates widespread interest
- LHJs are already calling Centers for support with QI councils, plans, projects, and strategic planning

Barriers to Performance Management Activities

- Lack of resources/time
- Staff turnover, low morale
- Some are skeptical of benefit in standards and accreditation



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Next Steps

- Continuing outreach and providing technical assistance to LHJs, and to tribes with assistance from DOH Tribal Liaison
- Offering 6 public trainings to anchor 2011-2012 program (training plan in packet)
- Continuing to build the Center's Performance Management Website
- Continuing to work toward national accreditation within WA DOH, Spokane, and Tacoma LHJs
- Developing common practices, evaluation, and tracking tools for the three Centers
- Continuing training and development - 5 consulting / technical assistance trainings and 6 train-the-trainer offerings for all Centers staff members in 2011-2012



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Next Steps, *continued*

Select five quality improvement teams among
LHJs and tribes

- Package A: Preparing for Public Health Accreditation
- Package B: Quality Improvement Project
- Package C: Quality Improvement Training

Projects will address one of four areas:

- Health Promotion and Disease Prevention
- Public Health Policy and Public Health Law
- Health Informatics and Communications Infrastructure
- Workforce and Systems Development



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Next Steps, *continued*

Annual Training Plan - Four Training Levels

1. Train-the-Trainer for Centers Staff
 - Developing, Monitoring, and Using Performance Measures
 - Community Health Improvement Plans (CHIP/SHIP)
 - Strategic Planning
 - Logic Models in Public Health Program Management
 - Experiencing the QI method
 - Preparing for National Accreditation

2. Public Training
 - All topics above



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Next Steps, *continued*

Annual Training Plan *continued*

3. Consulting/Coaching Training
 - Lean Overview for Leadership
 - Lean train-the-trainer
 - Consulting to Develop Big QI in Local Health and Tribal Agencies
 - Standards Site Reviewer Training PHAB Standards, Version 1.0
 - Technical Assistance in Variation Theory and Use of Control Charts
 - Storytelling
4. Quality Improvement Team iLinc Training and Coaching Sessions
 - 12 sessions planned



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Questions & Comments

