



Northwest Center for Public Health Practice

Promoting excellence in public health practice for 20 years.



SCHOOL OF PUBLIC HEALTH
UNIVERSITY of WASHINGTON



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Washington Department of Health
Public Health Performance Management
Centers for Excellence

National Public Health Improvement Initiative

Program Outcome Evaluation

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Northwest Center for Public Health Practice

Promoting excellence in public health practice

Mission:

The Northwest Center for Public Health Practice (NWCPHP) promotes excellence in public health practice by linking academia and the practice community.





Northwest Center for Public Health Practice

Promoting excellence in public health practice



Training, research and evaluation for state, local, and tribal public health in Alaska, Idaho, Montana, Oregon, Washington, and Wyoming.



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Promoting excellence in public health practice

Evaluation

- Public Health Training Needs
- Public Health Trainings
- Public Health Programs



Outcome Evaluation

- Determine extent to which CFEs have a measurable impact on the public health system by systematically increasing performance management capacity to strengthened public health infrastructure.



Contract Deliverables

- Conduct baseline needs assessment
- Conduct CFE pre- post- survey including
 - web-based questionnaire
 - key informant interviews
- Provide final summary reports



Quality Improvement (QI) and Performance Management Training Needs Assessment Questionnaire

- Participants were asked about:
 - Previous QI training
 - Impact on their work
 - Experience conducting QI projects
 - Interest in/commitment to quality improvement programs
 - Status of their agency's planning programs, and interest in technical assistance and training modalities



Design

- Web-based questionnaire
 - 47 items
 - 4 weeks w/3 reminders
 - Selected sample of key PH personnel



Selected Sample

- N=318
- 203 Responded the questionnaire
 - 63% overall response rate
 - 56% worked in local health
 - 42% in state health dept
 - 3% other (consultant, 3 county district, hospital)



Training of Respondents (All Respondents and by Center for Excellence (CFE) Region)

	All Respondents		Center for Excellence (CFE)							
			Spokane Regional Health District		Department of Health CFE		Tacoma/Pierce County Health District		All Centers for Excellence	
Type of Training	N	%	N	%*	N	%*	N	%*	N	%*
MLC-1	16	8.7	3	6.3	5	12.2	3	7.1	11	8.4
MLC-2	18	9.8	2	4.2	5	12.2	5	11.9	12	9.2
MLC-3	32	17.4	3	6.3	9	22.0	12	28.6	24	18.3
DOH QI Teams	4	2.2	4	8.3	3	7.3	1	2.4	8	6.1
Other QI Training†	37	20.1	17	35.4	5	12.2	6	14.3	28	21.4
No Training	77	41.8	19	39.6	14	34.1	15	35.7	48	36.6
Total	184	-	48	36.6	41	31.3	42	32.1	131	100.0



After having completed at least one training (MCL-1, MCL-2, MLC-3, DOH QI, other QI trainings) to having carried out one of the following actions (%).

Actions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Applied the knowledge I gained.	28.7	53.7	16.2	3.7	0.0
Shared the concepts I learned.	34.3	43.5	21.6	3.7	0.0
Applied the tools I learned	27.4	43.4	28.6	3.8	0.0
Implemented new approaches to my work	22.4	48.6	26.8	5.6	0.0
Actively participated in agency-wide QI efforts	29.6	49.1	15.1	6.5	1.9



Percent interested in receiving training on the following key areas

Practice Area	Not Interested	Somewhat Interested	Interested
Health Promotion and Disease Prevention	24.2	36.5	37.8
Public Health Policy	18.8	34.0	46.2
Public Health Law	25.5	39.6	33.1
Health Informatics and Communications Infrastructure	25.5	44.2	28.8
Workforce and Systems Development	17.6	41.9	39.4



Percent interested in receiving technical assistance on the following key areas

Practice Area	Not interested	Somewhat Interested	Interested
Health Promotion and Disease Prevention	36.4	37.1	23.2
Public Health Policy	30.9	37.5	28.9
Public Health Law	36.4	42.5	18.3
Health Informatics and Communications Infrastructure	33.9	43.4	19.7
Workforce and Systems Development	23.0	43.5	30.6



Percentage interested in receiving training in the following topic areas. (%)

Topic Areas	Centers for Excellence (CFE)											
	Tacoma/Pierce CFE* (N=27)			Spokane CFE* (N=11)			WADOH CFE* (N=33)			All Respondents (N=156)		
	Interest Level			Interest Level			Interest Level			Interest Level		
	Not	Somewhat	Very	Not	Somewhat	Very	Not	Somewhat	Very	Not	Somewhat	Very
Health Promotion and Disease Prevention	20.8	54.2	25.0	18.2	36.4	45.5	6.1	39.4	54.5	25.6	36.5	37.8
Public Health Policy	20.0	56.0	24.0	36.4	18.2	45.5	15.2	27.3	57.6	19.9	34.0	46.2
Public Health Law	44.0	44.0	12.0	27.2	27.2	45.5	21.2	36.4	42.4	27.3	39.6	33.1
Health Informatics and Communications Infrastructure	37.0	48.1	14.8	18.2	45.5	36.4	15.6	40.6	43.8	26.9	44.2	28.8
Workforce and Systems Development	19.2	53.8	26.9	18.2	27.3	54.5	6.3	46.9	46.9	18.7	41.9	39.4



Table 39: Respondent reported areas of interest for training

Tacoma/Pierce CFE (N=27)		
Training Area	N	%
Community health assessment	3	50.0
Other†	2	33.3
Logic models	2	33.3
Resources/ tool for best practices	1	16.7
Strategic planning	1	16.7
Performance Management	1	16.7

Spokane CFE (N=11)		
Training Area	N	%
Resources/ tool for best practices	12	50.0
Other††	9	37.5
Performance measurement	7	29.2
Logic Models	6	25.0
Community Health Assessments	4	16.7
Team facilitation	4	16.7
Project management	3	12.5
Quality improvement	2	8.3
Strategic Planning	1	4.2

WADOH CFE (N=33)		
Training Area	N	%
Other†††	16	76.2
Performance measurement	7	33.3
Logic Models	6	28.6
Quality improvement	5	23.8
Community Health Assessments	4	19.0
Strategic Planning	3	14.3
Resources/ tool for best practices	3	14.3
Policy assessments	2	9.5
Business process analysis	2	9.5
Cost benefit analysis	2	9.5



Table 40: Respondent reported areas of interested for technical assistance

Tacoma/Pierce CFE (N=27)			Spokane CFE (N=11)			WADOH CFE(N=33)		
Training Area	N	%	Training Area	N	%	Training Area	N	%
Quality improvement	6	50.0	Project management	12	63.2	Other+++	14	58.3
Strategic Planning	4	33.3	Quality improvement	11	57.9	Quality improvement	10	41.7
Project management	3	25.0	Team building and facilitation	10	52.6	Strategic Planning	9	37.5
Team building and facilitation	3	25.0	Strategic Planning	7	36.8	Project management	6	25.0
Other†	3	25.0	Performance measurement	6	31.6	Team building and facilitation	6	25.0
Performance measurement	2	16.7	None	2	10.5	Performance measurement	2	8.3
Logic models	1	8.3	Other++	2	10.5			



Summary Findings

- Most respondents have not received QI training
- Those who have incorporated into work responsibilities
- PH agencies are implementing QI projects that are reaching completion and have enough resources to sustain activities after project completion.



Summary Findings

- PH agencies are developing health improvement plans for their jurisdictions
 - Agency strategic plans, performance management programs, and quality improvement processes for their agency



Summary Findings

- PH agencies have staff dedicated to monitoring performance and quality improvement
- A small percentage of staff are formally trained in QI methods
- Length of time respondents have been working on QI activities varies by CFE Region.



Summary Findings

- Respondents are interested in receiving training and technical assistance in
 - health promotion and disease prevention, public health policy, public health law, health informatics and communications infrastructure, and workforce and systems development.
- Prefer shorter face-to-face sessions or distance learning sessions for training formats and have time available from work for training purposes



CFE Baseline Assessment

Designed to gather CFE KSAs on:

- Expertise in various QI and PM topics.
- Current capacity to deliver training in various QI and PM topics.
- Current capacity to provide technical assistance in various QI and PM topics.
- Curricula and/or materials CFEs can share on various QI and PM topics



CFE Baseline Assessment

- The knowledge gained and lessons learned gained from this assessment were used to inform the development of the three CFEs and the training and technical assistance DOH provides to them.



Methods

- Two-part Approach
 - 39 question online web survey
 - 5 question key-informant interview



Respondents

- 11 responses to the web-based survey
 - 4 Spokane
 - 4 Tacoma Pierce
 - 3 WADOH
- 10 Key informant interviews conducted



Summary Findings

- Respondents are experienced group, with the majority having worked in public health for over 10 years.
- Reported high levels of expertise, training capacity, and technical assistance capacity across the 5 domains.
- For nearly every topic, respondents indicated more capacity to provide technical assistance than training.



Summary Findings

- Respondents reported high levels of expertise and capacity in nearly every area of strategic planning and deployment.
- Organization values identification and mission and vision development were areas of the lowest capacity.
- Expertise and capacity in customer relations and satisfaction respondents was more mixed. The majority of respondents had no expertise and capacity in appreciative inquiry.
- Lower levels of expertise and capacity in focus groups and other qualitative customer research methods.



Summary Findings

- From the open-ended questions and the key informant interviews
 - Respondents indicated that were looking for the Washington State Department of Health to provide them overall coordination, clarification of roles and expectations, financial support, marketing and inside knowledge of LHJs to establish their Centers.
 - Major challenges or barriers might arise from limited time and/or money, interaction with LHJs, communication among centers, and the scope of CFE



Key Accomplishments

- Clarification of services and/or roles, coordination with other CFEs, development of staff and/or capacity at the CFE, and compilation of training materials
- Better understanding LHJs' needs and create acceptance/awareness of the CFE among client LHJs
- Expectations that their health departments expected them to create successful, sustainable centers and use the Center as a catalyst for change
- Respondents noted their health departments had concerns that their commitment to the CFE would draw their time away from other projects



Next Steps

Currently conducting year 1 post

- Web-based questionnaire
- Key informant interviews





Questions

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