Performance Management Centers for Excellence

Susan Ramsey, Megan Davis, Diana Ehri, Jennifer Bush
Department of Health

Cindan Gizzi, Scott Davis, Susan Pfeifer, John Britt
Tacoma-Pierce County Health Department

Torney Smith, Lyndia Tye, Stacy Wenzl, Liz Wallace
Spokane Regional Health District

July 20, 2011
Agenda

• Project overview
• Who was involved
• What did we learn
• What did we produce
• What does the future hold
Project Overview
Project Overview

Goals

• Establish three regional Performance Management Centers for Excellence

• Offer performance management training and technical assistance to local and tribal health entities

• Create a Web portal with tools, resources, and best practices

Outcomes

• Centers are established and connected to regional LHJs and tribes

• Training program presented statewide from January through September 2011

• Web portal is live, in use, growing

Funder

• U.S. Centers for Disease Control and Prevention

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Washington’s Interest in Performance Management Centers

- Build on Multi-state Learning Collaborative gains
- Expand performance management expertise regionally (statewide)
- Contribute to a predictable level of public health protection and service throughout the state
- Increase interest and capacity to apply for national accreditation
- Improve public health outcomes
Centers Development Timeline

November 2011
- Selected Spokane Regional Health District and Tacoma - Pierce County Health Department as Performance Management Centers for Excellence
- Hired project coordinator at Department of Health

December 2011
- Kick-off meeting with the Centers and consultants
- NWCPHP gathered baseline data from all LHJs and Centers staff

January through September 2011
- Building Centers’ staff capacity in performance management
- Presented trainings each month, open to all LHJs and tribes
- Three Centers are in touch with LHJs regionally
- NWCPHP gathering data on Centers’ progress and needs
Who was involved?
## Broad Representation

**Contractors:**
- MarMason Consulting

**Local Health Agencies:**
- Spokane Health District
- Tacoma-Pierce Health District

**State Health Agency:**
- Department of Health

**Academia:**
- Northwest Center for Public Health Practice

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Public Health Performance Management
Centers for Excellence

Needs Assessment Data

Table 18: Percent Agreement level respondents are interested in participating in the following activities (%)

<table>
<thead>
<tr>
<th>Activities</th>
<th>All Respondents (N=182)</th>
<th>Tacoma/Pierce CFE* (N=35)</th>
<th>Spokane CFE* (N=16)</th>
<th>WADOH CFE* (N=35)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning more about QI concepts and tools</td>
<td>67.6 25.8 6.6</td>
<td>65.7 25.7 8.6</td>
<td>75.0 25.0 0.0</td>
<td>77.1 20.0 2.9</td>
</tr>
<tr>
<td>Participating in QI projects at my agency</td>
<td>68.1 25.3 6.6</td>
<td>68.6 28.6 2.9</td>
<td>68.8 31.3 0.0</td>
<td>85.7 11.4 2.9</td>
</tr>
<tr>
<td>Leading QI projects at my agency</td>
<td>56.2 31.5 12.3</td>
<td>69.7 30.3 0.0</td>
<td>62.5 31.3 6.3</td>
<td>62.9 25.7 11.4</td>
</tr>
</tbody>
</table>

*Estimates exclude individuals from Spokane, WADOH, and Tacoma/Pierce.
\*Strongly Agree/Agree
\**Disagree/Strongly Disagree

Table 30: Public health agency participated in developing a health improvement plan for respondents local jurisdiction by all respondents and respondents by CFE

<table>
<thead>
<tr>
<th>Health improvement plan</th>
<th>All Respondents</th>
<th>Tacoma/Pierce CFE*</th>
<th>Spokane CFE*</th>
<th>WADOH CFE*</th>
<th>All Centers for Excellence*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, within the last 3 years</td>
<td>95 57.2</td>
<td>15 51.7</td>
<td>5 33.3</td>
<td>17 51.5</td>
<td>37 48.1</td>
</tr>
<tr>
<td>Yes, between 3-5 Years ago</td>
<td>13 7.8</td>
<td>6 17.2</td>
<td>1 6.7</td>
<td>2 6.1</td>
<td>8 10.4</td>
</tr>
<tr>
<td>Yes, five years ago</td>
<td>9 5.4</td>
<td>2 6.9</td>
<td>1 6.7</td>
<td>1 3.0</td>
<td>4 5.2</td>
</tr>
<tr>
<td>No, but plan to in next year</td>
<td>27 16.3</td>
<td>2 24.1</td>
<td>4 26.7</td>
<td>4 12.1</td>
<td>15 19.5</td>
</tr>
<tr>
<td>No</td>
<td>22 13.3</td>
<td>0 0.0</td>
<td>4 26.7</td>
<td>9 27.3</td>
<td>13 16.9</td>
</tr>
</tbody>
</table>

Total 166 22 - 15 - 33 - 77 -

*Estimates exclude individuals from Spokane, WADOH, and Tacoma/Pierce.

Table 31: Public health agency developed an agency strategic plan by all respondents

<table>
<thead>
<tr>
<th>Agency strategic plan</th>
<th>All Respondents</th>
<th>Tacoma/Pierce CFE*</th>
<th>Spokane CFE*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, within the last 3 years</td>
<td>122 70.1</td>
<td>14 43.8</td>
<td>6 40.0</td>
</tr>
<tr>
<td>Yes, between 3-5 Years ago</td>
<td>16 9.2</td>
<td>8 25.0</td>
<td>2 13.3</td>
</tr>
<tr>
<td>Yes, five years ago</td>
<td>16 9.2</td>
<td>8 9.4</td>
<td>3 20.0</td>
</tr>
<tr>
<td>No, but plan to in next year</td>
<td>14 8.0</td>
<td>7 21.9</td>
<td>3 20.0</td>
</tr>
<tr>
<td>No</td>
<td>6 3.4</td>
<td>0 0.0</td>
<td>1 6.7</td>
</tr>
<tr>
<td>Total</td>
<td>174 -</td>
<td>32 -</td>
<td>15 -</td>
</tr>
</tbody>
</table>

*Estimates exclude individuals from Spokane, WADOH, and Tacoma/Pierce.

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What did we learn?
Learnings

• Local health jurisdictions have wide variety of needs and interest levels around performance management
• Tribal connections begun will take time to develop
• Web-based training in demand
• Training in modules (short time frames) in demand
• Training on CHA/CHIP/SHIP of high interest
• Many opportunities to network and connect LHJs to each other for learning and support
• Demand for tailored training and coaching around 2011 standard results in year two
What did we produce?
Public Health Performance Management
Centers for Excellence

A statewide resource for training, consultation, and technical assistance

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What does the future hold?
Coming soon:

Consultation
Technical Assistance
Guidebook
Continue Building Centers’ Capacity

- Focus on knowledge of national standards
- Continue train the trainer activities
- Develop additional training materials
- Add tool kits & other Web resources

Select LHJs, tribal agencies, or collaborative teams for performance improvement projects

- Teams will choose from a package of options
- Teams receive training, technical assistance, and funds
Semi-monthly training and tailored support
• Training program for LHJs focused on needs identified in 2011 standards review
• Centers continue building relationships regionally

Ongoing evaluation
• Annual evaluation of LHJs by the Northwest Center for Public Health Practice (NWCPHP)
• Annual evaluation of Centers by NWCPHP
• LHJs will evaluate training and service from Centers
• Develop future years’ project plans based on data
## Quality Improvement Packages

<table>
<thead>
<tr>
<th>Package A</th>
<th>Package B</th>
<th>Package C</th>
</tr>
</thead>
</table>
| **Organize agency for national accreditation**  
Examples:  
• Consulting on collecting and preparing data and documentation  
• Technical assistance on evidence collection and documentation  
• Identification of staff roles, team charters, and establishing leadership support. | **Single QI project to increase efficiency and/or prepare for accreditation**  
Examples:  
• CHA/CHIP  
• Strategic Plan  
• Decrease time to award contracts  
• Decrease time to deliver services  
• Decrease cost to deliver services  
• Decrease staff allocated to service delivery, etc. | **Quality improvement training of health department staff**  
Choose from options such as:  
• Community-focused Performance Management  
• Statistical Process Control  
• Lean  
• Six Sigma  
• Change Management  
• Quality Decision Making |

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Thank you

Susan.Ramsey@doh.wa.gov  |  (360) 236 4013