Performance Management: A Pillar of Public Health Infrastructure
Today’s Agenda

• Performance Management and alignment with PHAB prerequisites and PHAB Standards
  o Agency Strategic Plan
  o Health Assessment
  o Health Improvement Plan
  o Quality Improvement Plan

• Tools for prioritizing issues and improving community engagement
Learning Objectives

Participants will be able to:

• State how performance management relates to community health assessment, health improvement plans, strategic plans and quality improvement plans

• Review tools for prioritizing strategic issues and for working with community groups to develop policies and plans
Public Health Performance Management Centers for Excellence

It's a puzzle!

Performance Measurement

Public Health Indicators

Lean Six Sigma

QI Plans & Councils

QI Methods & Tools

Standards for Public Health

Self-Assessment or Accreditation

Business Process Analysis

Breakthrough Collaborative 01/20/2011
PERFORMANCE STANDARDS
• Identify relevant standards
• Select indicators
• Set goals & targets
• Communicate expectations

PERFORMANCE MEASUREMENT
• Refine indicators & define measures
• Develop data systems
  • Collect data

REPORTING OF PROGRESS
• Analyze data
• Feed data back to managers, staff, policy makers, constituents
• Develop a regular reporting cycle

QUALITY IMPROVEMENT PROCESS
• Use data for decisions to improve policies, programs & outcomes
• Manage changes
• Create learning organization

PERFORMANCE MANAGEMENT SYSTEM
Performance Standards

• Establish performance standards
  o State or Public Health Accreditation Board (PHAB) standards
  o Agency-level Strategic and Improvement Plans

• Establish and define outcomes and indicators
  o Program performance measures
  o Process outcomes
  o Health outcomes
Monitoring of Performance

- Review of performance (Accreditation/Self-Assessment) results
- Program evaluation results

Monitoring of Indicators and Outcomes

- Program outcomes results
- Process/short-term outcomes
- Health indicators and outcomes
Quality Improvement Process

• Establish QI structure and capacity in agency
  o Establishing QI councils and plans
  o Conducting QI teams

• Quality improvement methods and tools
  o Plan-Do-Check/Study-Act cycle
  o Rapid Cycle Improvement (RCI)
  o Improvement collaboratives
  o Lean Six Sigma
  o Adapting or adopting model practices
Definition of Quality Improvement

“A management process and set of disciplines that are coordinated to ensure that the organization consistently meets and exceeds customer requirements.”

Top management philosophy resulting in complete organizational involvement

Conduct of improving a process at the micro-system level

Bill Riley and Russell Brewer, Review and Analysis of QI Techniques in Police Departments, JPHMP Mar/April 2009
Example of Building QI into the Standards and Measures

• Domain 9: Evaluate and continuously improve processes, programs, and interventions.
  
  o Standard 9.1 B:
    
    ➢ Evaluate and continuously improve processes, programs, and interventions provided by public health or other practitioners or agencies.

  o Standard 9.2 B:
    
    ➢ Implement QI of PH processes, programs and interventions
9.1.3 B: Establish goals, objectives and performance measures for processes, programs and interventions.

9.1.4 B & 9.1.5 B: Monitor performance measures and evaluate effectiveness

9.1.5 B: Identify needs for improvements are based on evaluation data and results

Conduct specific program activities that contribute to achieving goals and performance measures.
Plan-Do-Study-Act: Standard 9.2

9.2.1 B Establish a quality improvement plan based on organizational policies and direction.

9.2.2 B Implement QI efforts

9.2.4 L/S Revision of the plan with new objectives based upon the review.

9.2.4 L/S Annual review of the quality plan includes: performance measures are tracked, reported and used to assess the impact of improvement actions and meaningful improvement is demonstrated in at least one objective....

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Funded by the US Centers for Disease Control and Prevention
Reporting Progress

• Performance in standards
• Performance/progress in Strategic and Improvement Plan implementation
• Indicators and outcomes
  o Process outcomes
  o Health indicators
  o Program evaluation data
• Regular data tracking, analysis and review
• Basis for QI efforts
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Centers for Excellence

Application of P-D-S-A Cycle

- **PLAN** Standards
  - **ACT** Areas for Improvement
  - **STUDY** Report/Recommend
- **DO** Evaluate/Modify or Implement
- **PLAN** Target Improvements
  - **ACT** Improvement work
  - **STUDY** Study Results
- **DO** Evaluate
  - **PLAN** Standards
  - **ACT** Areas for Improvement
  - **STUDY** Report/Recommend

**Self-Assessment or Accreditation**

**Performance Improvement Cycle**

**Self-Assessment or Accreditation**

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Let’s Discuss!

• What is your experience with the four components of performance management in your Health Department?
PHAB Pre-Requisites

- Currently, PHAB has required that all applicants submit three documents with their request for an accreditation survey:
  - Community/State Health Assessment
  - Community/State Health Improvement Plan
  - Agency Strategic Plan

- Few specific requirements established to date for the contents of these prerequisites
CHAs/CHIPs, SPs, and QI Plans and Standards Requirements

- CHA/SHA: Link to requirements in Domain 1 and Domain 4
- CHIP/SHIP: link to requirements in Domain 4 and are explicitly required in Domain 5, Standard 3
- SP: Explicitly required in Domain 5, Standard 2
- QI Plan: Explicitly required in Domain 9, Standard 2
- These documents provide evidence for some of the requirements in these standards.
## Domain 1: Conduct & disseminate assessments [of] population health status...

<table>
<thead>
<tr>
<th>Standard 1.1 B: Collect and maintain reliable, comparable, and valid data that provide information on conditions of public health importance and on the health status of the population.</th>
<th>Standard 1.2 B: Analyze public health data to identify trends in health problems, environmental public health hazards, and social and economic risks that affect the public’s health.</th>
<th>Standard 1.3 B: Provide and use the results of health data analysis to develop recommendations regarding public health policy, processes, programs or interventions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1.1 B: Demonstrate that a surveillance system is in place for receiving reports 24/7 and for identifying health problems, threats, and environmental hazards</td>
<td>1.2.1 B: Analyze and draw conclusions from data to identify trends over time, clusters, health problems, behavioral risk factors, environmental health hazards, and social and economic conditions that affect the public’s health</td>
<td>1.3.1 B Use data to recommend and inform public health policy, processes, programs and/or interventions</td>
</tr>
<tr>
<td>1.1.2 B: Communicate with surveillance sites on at least an annual basis</td>
<td>1.2.2 S: At least annually, provide statewide public health data to various audiences in the form of reports on a variety of public health issues</td>
<td>1.3.2 S Develop and distribute statewide health data profiles to support health improvement planning processes at the state level</td>
</tr>
<tr>
<td>1.1.3 B: Collect additional primary and secondary data on population health status</td>
<td>1.3.3 S Provide support to LHDs in the development of community health data profiles</td>
<td>1.3.2 L Develop and distribute community health data profiles to support public health improvement planning processes at the local level</td>
</tr>
<tr>
<td>1.1.4 L/S Provide reports of primary and secondary data to SHA/LHDs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Domain 4: Engage with the community to identify and address health problems

<table>
<thead>
<tr>
<th>Standard 4.1 B: Engage the public health system and the community in identifying and addressing public health problems through an ongoing, collaborative process.</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1.1 B: Establish and actively participate in collaborative partnerships and coalitions to address public health issues</td>
</tr>
<tr>
<td>4.1.2 B: Recruit and engage governing entity members, stakeholders, community partners and the public to participate in collaborative partnerships and coalitions to address important public health issues</td>
</tr>
<tr>
<td>4.1.3 S: Provide technical assistance to LHDs and/or public health system partners regarding models for recruiting and engaging the community</td>
</tr>
<tr>
<td>4.1.3 L: Link stakeholders to technical assistance regarding models of recruiting and engaging with the community, as requested</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standard 4.2 B: Promote understanding of and support for policies and strategies that will improve the public’s health.</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2.1 S: Disseminate the results of community health assessments to statewide stakeholders</td>
</tr>
<tr>
<td>4.2.1 L: Disseminate the results of community health assessments to the community</td>
</tr>
<tr>
<td>4.2.2 B: Engage the community about policies and strategies that will promote the public’s health</td>
</tr>
</tbody>
</table>
## Domain 5: Develop public health policies and plans

<table>
<thead>
<tr>
<th>Standard 5.2 B: Develop and implement a health department organizational strategic plan.</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.2.1 B: Conduct a strategic planning process</td>
</tr>
<tr>
<td>5.2.2 B: Develop a strategic plan</td>
</tr>
<tr>
<td>5.2.3 B: Implement the strategic plan</td>
</tr>
<tr>
<td>5.2.4 B: Review and revise the strategic plan</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standard 5.3 L/S: Conduct a comprehensive planning process resulting in a community health improvement plan [CHIP]/state health improvement plan [SHIP].</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.3.1 L/S: Conduct a community/state health improvement process that includes broad participation from the community/stakeholders</td>
</tr>
<tr>
<td>5.3.2 L/S: Produce a community/state health improvement plan as a result of the community/state health improvement process</td>
</tr>
<tr>
<td>5.3.3 L/S: Implement elements and strategies of the community/state health improvement plan, in partnership with others</td>
</tr>
<tr>
<td>5.3.4 L/S: Monitor progress on strategies and health improvement in order to revise the CHIP/SHIP, as needed</td>
</tr>
</tbody>
</table>
**Domain 9: Evaluate & continuously improve processes, programs, & interventions**

<table>
<thead>
<tr>
<th>Standard 9.1 B: Evaluate public health processes, programs, and interventions provided by the agency and its contractors.</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.1.1 B: Engage governing entity in establishing agency policy direction regarding a performance management system</td>
</tr>
<tr>
<td>9.1.2 B: Establish agency policy and capacity to implement a performance management system</td>
</tr>
<tr>
<td>9.1.3 B: Establish goals, objectives and performance measures for processes, programs and interventions</td>
</tr>
<tr>
<td>9.1.4 B: Monitor performance measures for processes, programs and interventions</td>
</tr>
<tr>
<td>9.1.5 B: Evaluate the effectiveness of processes, programs, and interventions and identify needs for improvement</td>
</tr>
<tr>
<td>9.1.6 B: Implement a systematic process for assessing and improving customers’ satisfaction with agency services</td>
</tr>
<tr>
<td>9.1.7 S: Provide training and technical assistance regarding evaluation methods and tools to SHA and LHD staff</td>
</tr>
<tr>
<td>9.1.7 L: Require staff participation in evaluation methods and tools training</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Standard 9.2 B: Implement quality improvement of public health processes, programs, and interventions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.2.1 B: Establish a quality improvement plan based on organizational policies and direction</td>
</tr>
<tr>
<td>9.2.2 B: Implement quality improvement efforts</td>
</tr>
<tr>
<td>9.2.3 S: Provide training and technical assistance regarding quality improvement methods and tools to SHA and LHD staff</td>
</tr>
<tr>
<td>9.2.3 L: Demonstrate staff participation in quality improvement methods and tools training</td>
</tr>
</tbody>
</table>
CHA/CHIP/SP/QI Plan

Strategic Plan
• Emerging and New Initiatives may not be in other 2 plans

CHIP
• Health Status and Health Risk Interventions to address Health Assessment may not be in other 2 plans

QI Plan
• Operational Issues and Current Data on Process Outcomes may not be in other 2 plans

Community Health Assessment informs all three agency plans
Planning and Developing Agency Level Plans
Development of Agency Plans

- MAPP is an excellent framework for development of CHIPs and Strategic Plans for local agencies
- Conducting the four MAPP assessments is not required, if data and results are available through other reports and assessments
- There are many other good processes for development of Strategic Plans and QI Plans
MAPP is:

- A **community-wide strategic planning process** for improving public health.
- A **method to help communities prioritize** public health issues, identify resources for addressing them, and take action.
MAPP as a Framework

- Partnerships and Coalitions
- Organizational or Community Visions
- Qualitative data on Community Perceptions
- Community Health Assessment
- Priority Areas
- Strategies
- Public Health Activities

MAPP slides courtesy of Laura Landrum
## The MAPP Paradigm Shift

<table>
<thead>
<tr>
<th>FROM</th>
<th>TO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operational planning</td>
<td>Strategic Planning</td>
</tr>
<tr>
<td>Focus on the agency</td>
<td>Focus on community &amp; entire public health system</td>
</tr>
<tr>
<td>Needs assessment</td>
<td>Emphasis on assets and resources</td>
</tr>
<tr>
<td>Medically oriented model</td>
<td>Broad definition of health</td>
</tr>
<tr>
<td>Agency knows all</td>
<td>Everyone knows something</td>
</tr>
</tbody>
</table>
Community Health Status Assessment

Analyzes Data about:
- Health status
- Quality of life
- Risk factors
Community Health Status Assessment

11 Categories of Data

- Demographic Characteristics
- Socioeconomic Characteristics
- Health Resource Availability
- Quality of Life
- Behavioral Risk Factors
- Environmental Health Indicators
- Social and Mental Health
- Maternal and Child Health
- Death, Illness and Injury
- Infectious Disease
- Sentinel Events
PDSA Application to Community/State Health Assessments

- **Plan:** Description of planning for data collection and analysis, including community input and review of results
- **Do:** Conduct data collection and synthesis
- **Study:** Trended data compared to targets or goals for specific types of data, including health risks and status
- **Act:** Identify conclusions and make recommendations for action to inform Health Improvement Plan and agency Strategic Plan
• Standard 5.3 requires:
  ○ Conduct a community/state health improvement process that includes broad participation from the community/stakeholders
  ○ Produce a community/state health improvement plan as a result of the community/health improvement process
  ○ Implement elements and strategies of the community/state health improvement plan, in partnership with others
  ○ Monitor progress on strategies and health improvement in order to revise the CHIP/SHIP, as needed
### Translating MAPP into a Framework for CHIP / SHIP: Team Discussion

<table>
<thead>
<tr>
<th>Elements of MAPP</th>
<th>Part 1: List any current or previous activities, skills, and products that sound similar to components in MAPP. How could they be incorporated into your CHIP / SHIP framework?</th>
<th>Part 2: In incorporating these activities, skills, and products into the CHIP / SHIP framework, how would you ensure improvements in the way your agency does business?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1: Organizing for Success &amp; Partnership Development</td>
<td>Does your community or state partnership represent the key organizational players engaged in improving the public’s health?</td>
<td></td>
</tr>
<tr>
<td>Phase 2: Visioning</td>
<td>Is there a vision statement developed by your partnership group?</td>
<td></td>
</tr>
<tr>
<td>Phase 3: <strong>Four Assessments:</strong></td>
<td>Community / Statewide Themes &amp; Strengths Assessment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Is there a summary of cross-cutting themes?</td>
<td></td>
</tr>
</tbody>
</table>
Formulating Goals and Strategies
Strategic issues are fundamental policy choices or critical challenges that must be addressed in order for a community to achieve its vision.
The Process

- Determine the method for completing this phase
- Present summary of all four assessments
- Brainstorm potential strategic issues
- Develop an understanding about why an issue is strategic
- Consolidate overlapping or related issues
- Arrange issues into an ordered list
- Disseminate results
- Evaluate the process
Formulate Goals and Strategies

- Form goal statements related to strategic issues
- Identify strategies for achieving goals
Strategic Issue:
How can the public health community ensure access to population-based and personal health care services?

Goal:
All persons living in our community will have access to affordable quality health care.

Strategy:
Create a network of reduced cost primary care providers.
Provide free or reduced cost transportation services to care site.
1. Determine how goals and strategies will be developed

2. Develop goals
   • Reference vision statement and strategic issues

3. Generate a variety of strategies
   • Resist pressures to settle for an obvious or comfortable strategy
   • Reference MAPP assessment data
4. Brainstorm barriers to implementation
   Think about...
   - Resources
   - Community support
   - Legal or policy impediments to authority
   - Technological difficulties
   - Limited organizational or management capacity

5. Draft implementation details
   Consider...
   - What specific actions need to take place?
   - What is a reasonable timeline?
   - Which organizations and individuals should be involved?
   - What resources are required and where will they come from?
The Action Cycle

- **Plan**
  - What will be done? How will it be done?
  - Who will do it and when?

- **Implement**

- **Evaluate**
  - Evaluating progress and celebrating success
  - Feeding information back into the action cycle
  - Evaluation should occur throughout the process!
Organize Your SP Process

**Example Timeline/Workplan for the MAPP Process**

The example timeline/workplan below uses an 18-month timeframe. The activities and dates under each phase are examples of activities that could be conducted. As emphasized throughout the MAPP guidance, communities should implement each phase in the way that best addresses their community characteristics and needs. The timeline focuses on the planning aspect of MAPP, the implementation and evaluation activities (the Action Cycle) should be assessed long after the MAPP activities below end.

<table>
<thead>
<tr>
<th>MAPP Phase</th>
<th>Description of Activity</th>
<th>Month 1</th>
<th>Month 2</th>
<th>Month 3</th>
<th>Month 4</th>
<th>Month 5</th>
<th>Month 6</th>
<th>Month 7</th>
<th>Month 8</th>
<th>Month 9</th>
<th>Month 10</th>
<th>Month 11</th>
<th>Month 12</th>
<th>Month 13</th>
<th>Month 14</th>
<th>Month 15</th>
<th>Month 16</th>
<th>Month 17</th>
<th>Month 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assess</td>
<td>Assess community strengths and needs</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>2. Plan</td>
<td>Develop a plan of action</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>3. Engage</td>
<td>Engage community members</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>X</td>
</tr>
</tbody>
</table>

- What will the process entail?
- How long will it take?
- What results are we seeking?
- How will we know we are finished?
- Who will do the work?
Criteria and Methods for Prioritizing Strategic Issues
Criteria for Prioritizing Opportunities

- Rank topics/issues that are:
  - Important/relevant to population
  - Within agency control
  - High-risk
    - Health Alerts, Drinking Water, CD Investigations
  - High-volume
    - WIC, Food Safety, OSS, Immunizations
  - Problem-prone
    - Emergency Preparedness
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.
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<table>
<thead>
<tr>
<th>Control</th>
<th>No Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>No Knowledge</td>
</tr>
<tr>
<td>Do It</td>
<td>Influence</td>
</tr>
<tr>
<td>Get Help</td>
<td>Stay Away</td>
</tr>
</tbody>
</table>

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**Control and Influence**

- It helps to understand where:
  - we have control
  - we may need assistance
  - we can influence only
  - we should stay away from

- It also points out that we can expand our control area by becoming more knowledgeable, seeking assistance, and trying to be influential in areas beyond our control
### Criteria Matrix Tool

<table>
<thead>
<tr>
<th>Improvement Area</th>
<th>Importance</th>
<th>Control</th>
<th>Hi Risk</th>
<th>Hi Vol</th>
<th>Prob. Prone</th>
<th>Total pts</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HI (3)</td>
<td>MED (2)</td>
<td>LOW (1)</td>
<td>HI (3)</td>
<td>MED (2)</td>
<td>LOW (1)</td>
</tr>
<tr>
<td>1. Immunization</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Engage Community</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. CHIP</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Food Safety</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Family Planning</td>
<td>X</td>
<td></td>
<td></td>
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Prioritization Matrix

• Weighing Your Options
• Why use it? To narrow down options through a systematic approach of comparing choices by applying criteria
• What does it do?
  o Quickly surfaces basic disagreements to resolve up front
  o Forces teams to focus on the best things to do
  o Limits “hidden agendas” by surfacing criteria as part of process
  o Increases chance of follow-through as get more buy-in
  o Reduces the chance of selecting someone’s “pet project”
How to Use Prioritization Matrix

- 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
- Draw table on flip chart, label the rows with each of the criteria and column labels should correspond to row labels
How to Use Prioritization Matrix

- 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 = significantly more important
  - 10 = exceedingly more important
  - 1/5 significantly less important
  - 1/10 = exceedingly less important
- Assign agreed-upon value to the issue contributing more and the reciprocal score to the other
- Total the scores and prioritize the issues, highest to lowest
### Example of Prioritization Matrix (Importance criterion)

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Health Data</td>
<td></td>
<td>5</td>
<td>1</td>
<td>5</td>
<td>10</td>
<td>21</td>
</tr>
<tr>
<td>2. Engage Community</td>
<td>1/5</td>
<td></td>
<td>1</td>
<td>5</td>
<td>10</td>
<td>16.2</td>
</tr>
<tr>
<td>3. CHIP</td>
<td>1</td>
<td></td>
<td></td>
<td>5</td>
<td>10</td>
<td>17</td>
</tr>
<tr>
<td>4. QI Plan</td>
<td>1/5</td>
<td>1/5</td>
<td></td>
<td>5</td>
<td></td>
<td>5.6</td>
</tr>
<tr>
<td>5. Research Processes</td>
<td>1/10</td>
<td>1/10</td>
<td>1/10</td>
<td>1/5</td>
<td></td>
<td>0.5</td>
</tr>
</tbody>
</table>
### Popcorn Exercise—Taste criteria

<table>
<thead>
<tr>
<th></th>
<th>Air Popped</th>
<th>Oil or butter</th>
<th>Microwave</th>
<th>Row Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Air Popped</td>
<td></td>
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<td>Oil or butter</td>
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<td>Microwave</td>
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What questions or comments do you have?