Performance Management: Measuring What Matters in Public Health



Learning Objectives

- Preview the contents of NACCHO's new performance management guide
- Discover various frameworks for implementing performance management in your health department
- Learn about the main components of a public health performance management system
- Gain clarity in how to get started with managing internal performance
- Understand how performance management is linked to other aspects of performance improvement

Speakers



Pooja Verma NACCHO



Christina Hayes Lake County Health Department



Robert Hines Houston Health Department

Overview of Performance Management

The Public Health Dilemma





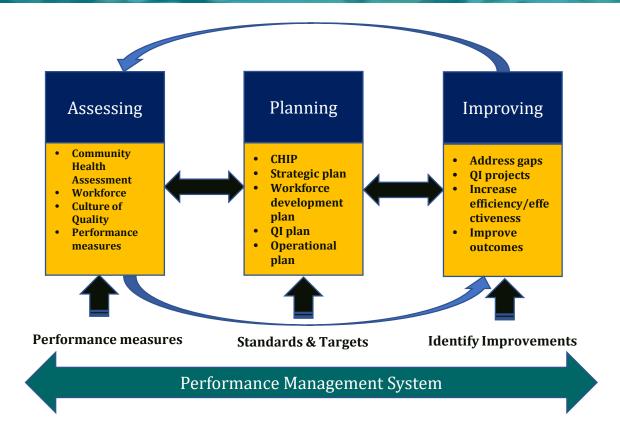
Performance Management

PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM



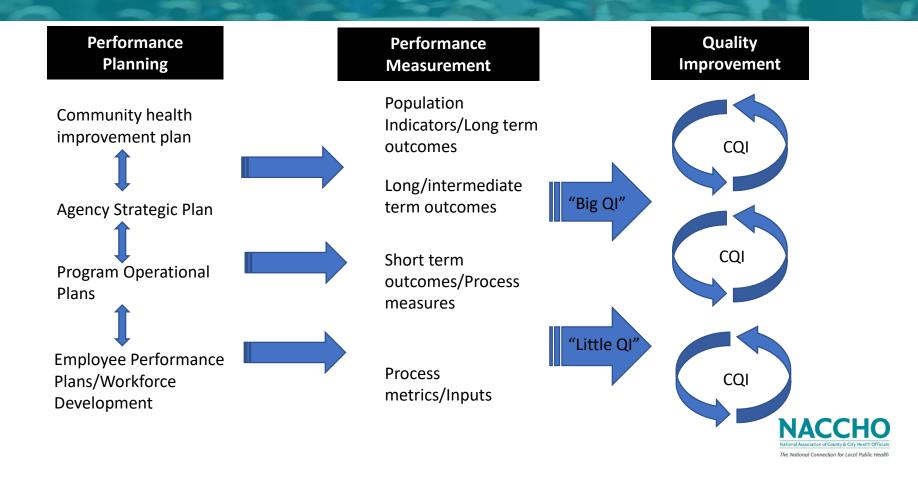


The Performance Improvement Framework

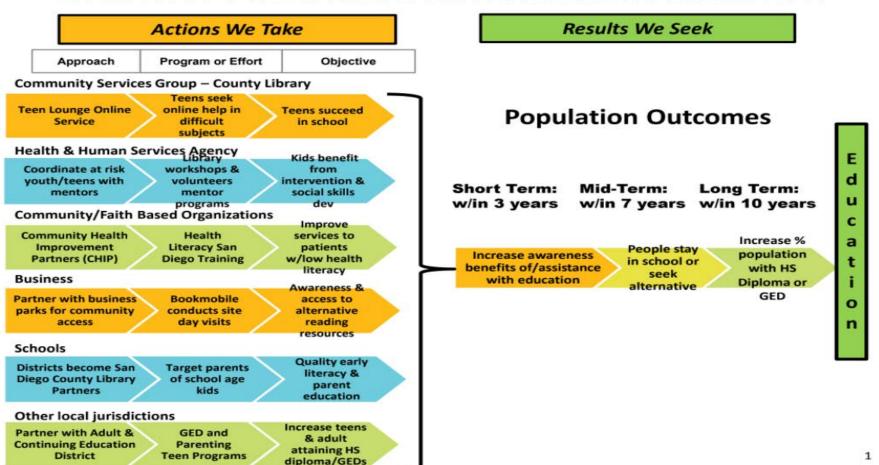




The Performance Improvement Framework: A Family of Measures



EXAMPLE OF COLLECTIVE ACTION FOR MEASURABLE IMPACT:



Source: Live Well San Diego (https://www.sandiegocounty.gov/content/sdc/live well san diego/indicators.html#

Steps to Performance Management

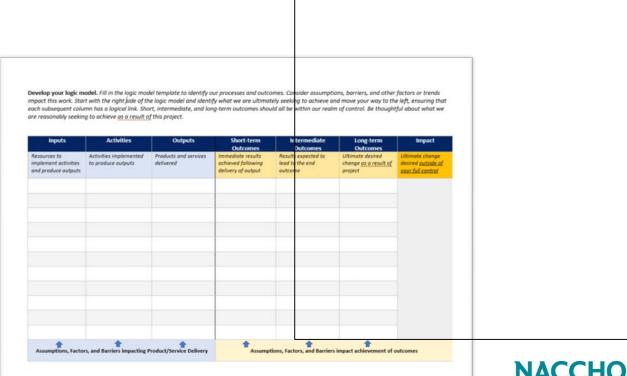
STEP 1	Align programmatic purpose with agency strategy	
STEP 2	Identify outcomes and objectives	
STEP 3	Link activities to outcomes and objectives	
STEP 4	Identify performance measures	
STEP 5	Set targets and standards for the measures	
STEP 6	Develop data collection and reporting protocols	
STEP 7	Prioritize and implement improvements	

- What impact on its customers does the program seek to achieve?
- How does the program's purpose align with agency mission and strategy?
- What outcomes does the program have influence over?
- How will the program influence these outcomes?
- What work will we do to achieve our objectives?
- How does our work align with our outcomes?
- How will we know if we are achieving our outcomes?
- How will we know if outcomes are impacted by our program?
- What level of performance are we seeking to achieve?
- How will we use data to make informed decisions?
- How will keep our stakeholders informed of our work?
- How will we continuously improve to better meet our community's needs?



NACCHO Guide to Performance Management

- Step-by-step guidance
- Facilitation questions and processes
- Worksheets and templates
- Stories from the field
- Coming in July!







Quality Management System

NACCHO Webinar

June 26th, 2018

Christina Hayes, MPH, ASQ-CQIA Quality Improvement Analyst

Lake County, Illinois

703,000 residents

- 64% White, non Hispanic
- 7% Black, non Hispanic
- 6% Asian/Pacific Islander
- 20% Hispanic

Great Lakes Naval Base

Large corporate presence

- Abbott Laboratories
- Discover Card
- Walgreens





Lake County Health Department and Community Health Center

- Board of Health Governance
- Approximately 1000 employees (650 FTEs)
- Largest provider of human services in county
- Over 50 distinct programs





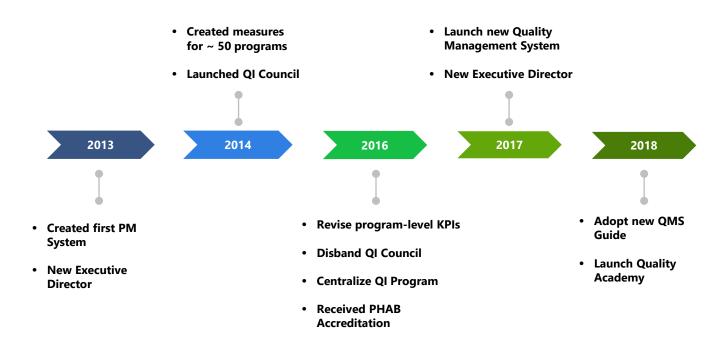
PHAB Accredited



March 11, 2016



Milestones





Quality Management System

QI COMMITTEE

Oversee quality initiatives across the agency

QMS GUIDE

Provides a context and framework for quality improvement

KEY PERFORMANCE INDICATORS

Quality
Financial
Operational

AGENCY WIDE TRAINING

Agency training focused on improving quality across LCHD

QUALITY ACADEMY

In-depth, hands-on training on and quality improvement tools and theory



System Alignment





KEY PERFORMANCE INDICAT	•Tracked KPIs to show we are meeting our organizational goals
Programmatic Strategic Init	TIATIVES • Program projects and action plans that secure results
Programmatic Objectiv	∕ES •Addresses specific programmatic goals
Programmatic Goals	•Goals for the program derived from the LCHD strategic plan
LCHD STRATEGIC INITIATIV	VES ●LCHD projects and action plans that secure results
LCHD STRATEGIC OBJECTIVES	•Addresses specific LCHD strategic plan goals
LCHD STRATEGIC GOALS	Overarching goals for LCHD as a public health organization derived from the LCHD strategic plan.
LCHD Mission & Vision	•Universally adopted inside LCHD
CHIP STRATEGIC INITIATIVE	 Community wide strategic initiatives that LCHD adopts as its own
V	nmunity Health Improvement Plan (CHIP) is used, in collaboration with



community partners, to set priorities and coordinate and target resources

Quality Toolbox

Welcome to the Quality Toolbox site!

Click on the links below to access dashboards and resources, and to view or share completed quality improvement initiatives.



Quality Key Performance Indicator Dashboards

Access your Quality KPI Dashboards and reports.



Quality Improvement Resources

View quality improvement tools and templates



Quality Management System Materials

Learn about our Quality Managament System



Quality Improvement Efforts

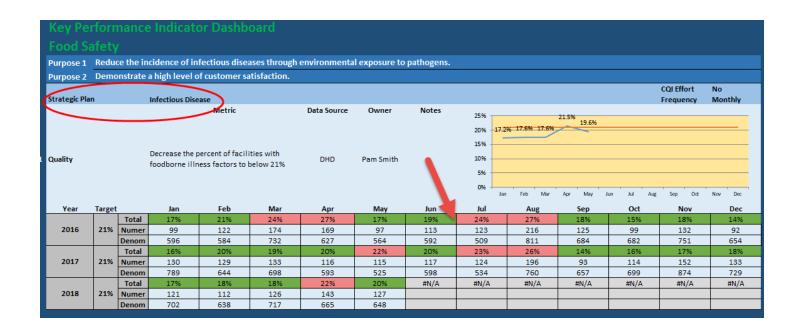




#	КРІ Туре	Metric	Owner	Last Updated	QI Effort	Strategic Plan	Target	Time	Current	Trend
1	Quality	Reduce tobacco use among Lake County adults to 12.0%	Lea	2016	No	Hyperten sion/Dia betes/Ob esity	12%	Not Late	14%	No Trend
2	Quality	Increase the number of smoke-free housing units in Lake County from baseline (1123)	Lea	Q1	No	Hyperten sion/Dia betes/Ob esity		Not Late	3904	No Trend
3	Quality	Increase the number of communities in Lake County amending their Smoke- Free Illinois ordinances to include electronic smoking devices (2016 Baseline = 4).	Danielle	Q1	No	Hyperten sion/Dia betes/Ob esity		Not Late	4	No Trend
4	Quality	Increase the number of communities in Lake County raising the Minimum Legal Sales Age (MLSA) to 21 to purchase tobacco products. (Baseline = 0)	Danielle	Q1	No	Hyperten sion/Dia betes/Ob esity		Not Late	9	No Trend

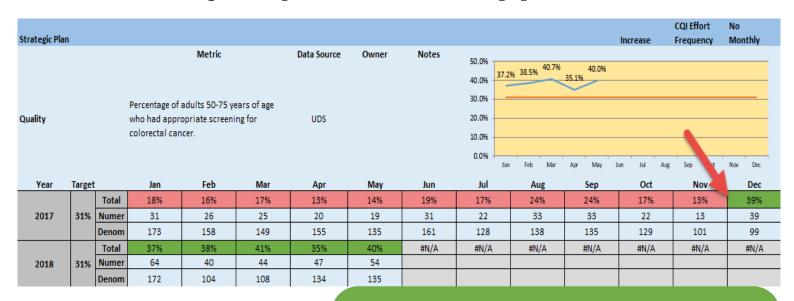


KPI Dashboards





Identify Improvement Opportunities



- Colorectal Cancer Screening QI Effort
- Staff implemented a patient agreement form
- Resulted in an increase in return rate of FOBT kits.









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HealthDepartment



@LakeCoHealth



LakeCoHealth



Robert A. Hines, MSPH, HHD Accreditation Coordinator

ABOUT

HOUSTON

POPULATION¹: 2,099,451

LAND AREA¹: Approx. 600 sq. mi.

HARRIS COUNTY POP¹: 4,092,459

POPULATION SERVED: 2.2 million

TOTAL EMPLOYEES: 1,200 +

PHAB ACCREDITED: December 12, 2014



PERFOMANCE MANAGEMENT

EVOLUTIONBASELINE

- No formal structure, some programmatic methods of PM tracking (e.g. funding requirements)
- Wery little awareness of PM Generally, perceived connection was employee evaluation

GOAL

- Formalized structure encouraging employees to facilitate their own performance management and growth
- Department as a whole to be aware and excited about PM

ADDRESSING EMPLOYEE PERCEPTION

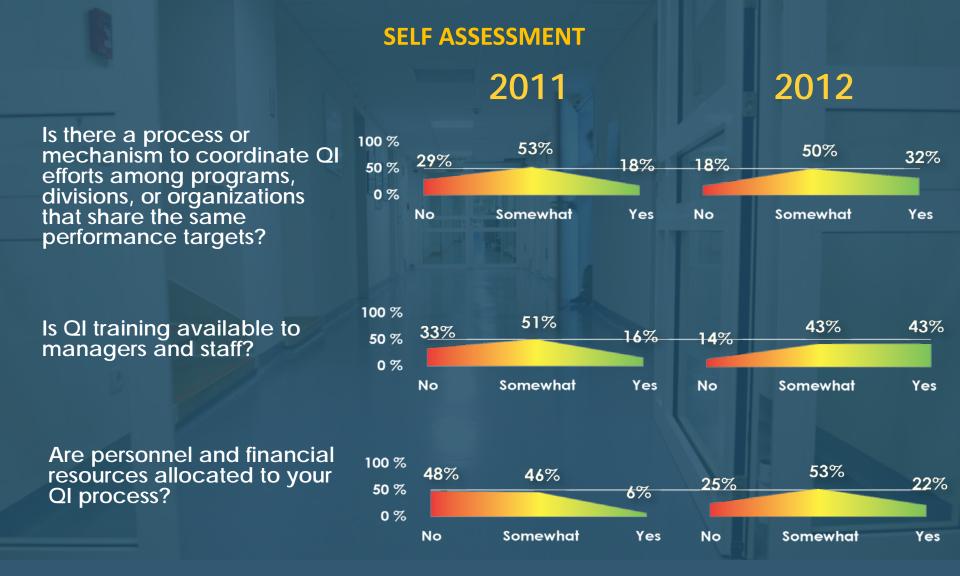
TURNING POINT ASSESSMENT

- Determine a baseline
- Gain an understanding of employee knowledge, experience, and awareness
- Identify best approach for engaging

TRAINING

- Addressing employee perception
 - more often than not, it is perceived negatively





INITIAL

REACTIONS TO QI

FEAR AND LOATHING



- Common reaction
- Fear: threat to job stability
- Fear: more work
- Fear: it will (or won't) change the status quo

CONFUSION



- Poor understanding of accreditation and QI
- Lack of awareness of the need or purpose for accreditation or OI

DISINTEREST



- Lack of understanding of relationship between accreditation and work
- Expectation (real or perceived) that there isn't enough high level support

ADDRESSING

REACTIONS TO QI

FEAR AND LOATHING



- Stress value of grass-roots ownership
- Do not portray QI as a mandatory initiative

CONFUSION



- Addressed by Education (Training on what QI is and its value)
- Provide examples of successful project

DISINTEREST



- Addressed by Education (Training on what QI is and its value, 10 Essential PH services)
- Stress Leadership role
- Provide examples of successful projects

HIGHLIGHTS

RESOURCES THAT WORK

KLIPFOLIO

INTERNAL, CENTRAL TRACKING TOOL

HEALTHY COMMUNITIES INSTITUTE (HCI)

COLLABORATIVE, EXTERNAL TRACKING TOOL **POWER BI**

INTERNAL, CENTRAL TRACKING TOOL

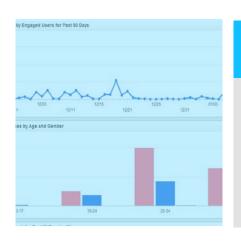
KLIPFOLIO

"An online dashboard platform for building powerful real-time business dashboards for team or clients"

- Started with counts and measures
- Became more sophisticated with developing measures and actual performance targets
- Added STRAT and CHIP objectives later



KLIPFOLIO



UTILITY

User friendly
Does not require
much technical
expertise

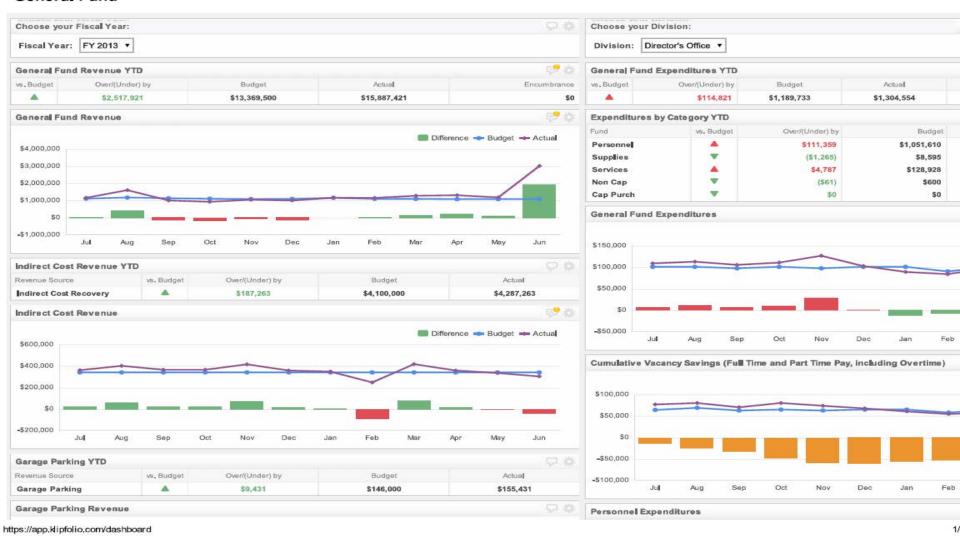
COST

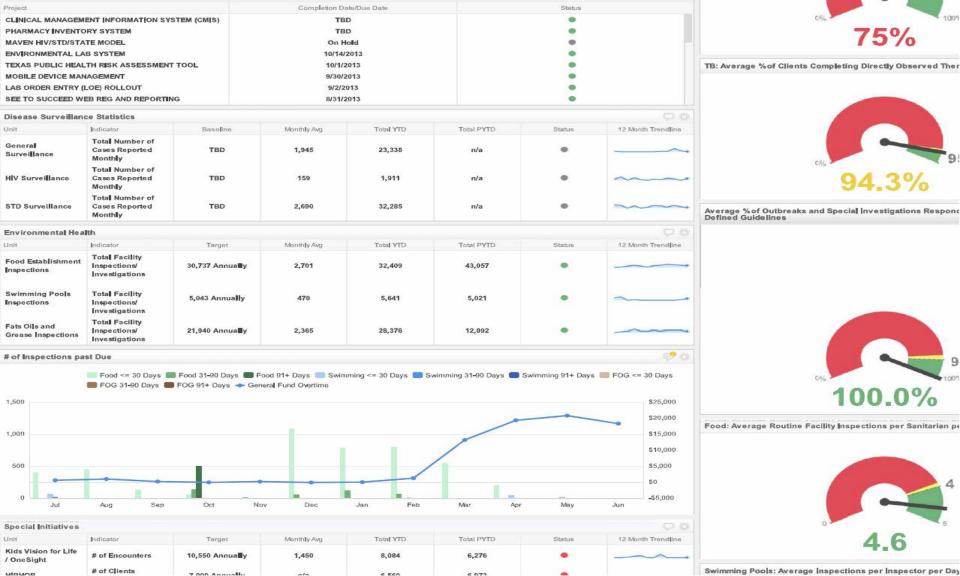
Affordable (\$20/user/month) Doesn't require much storage space

ADMIN

Flexible
Easy to modify inhouse

General Fund





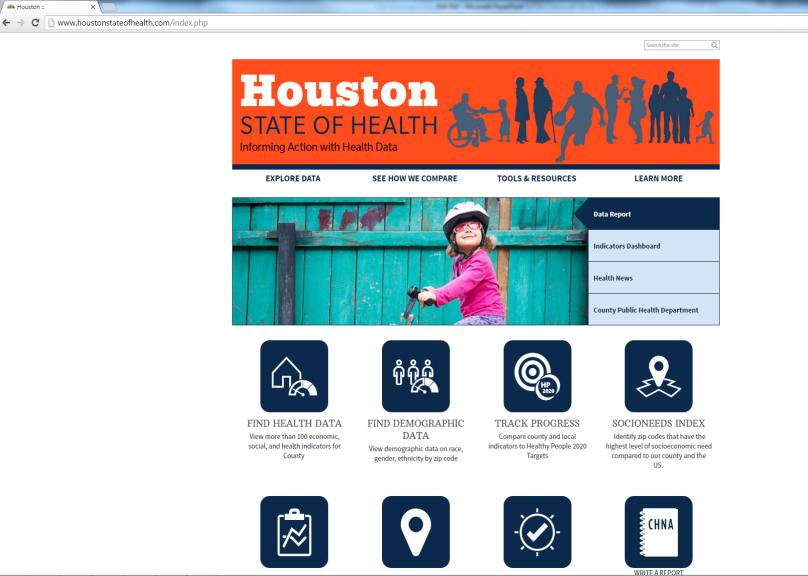


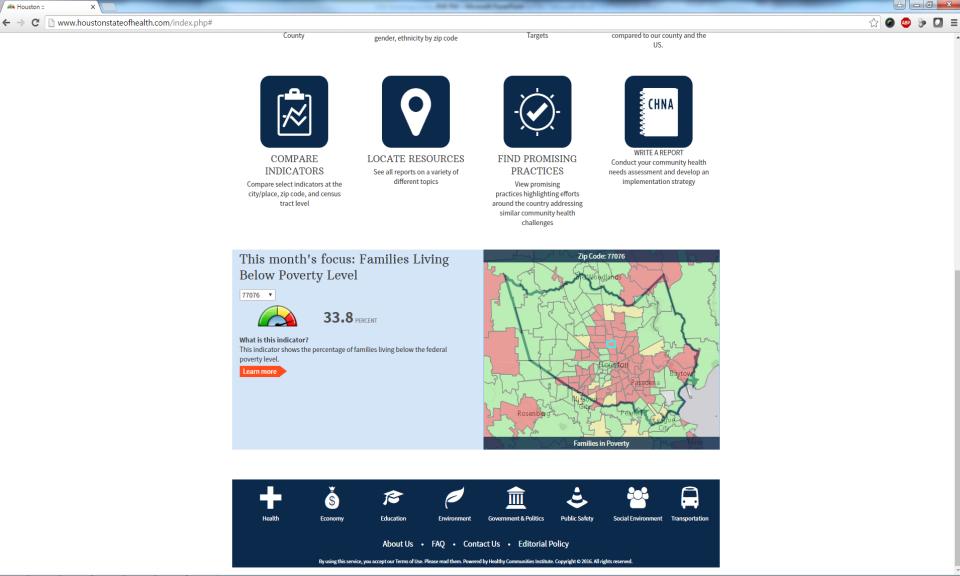
HEALTHY COMMUNITY INSTITUTE

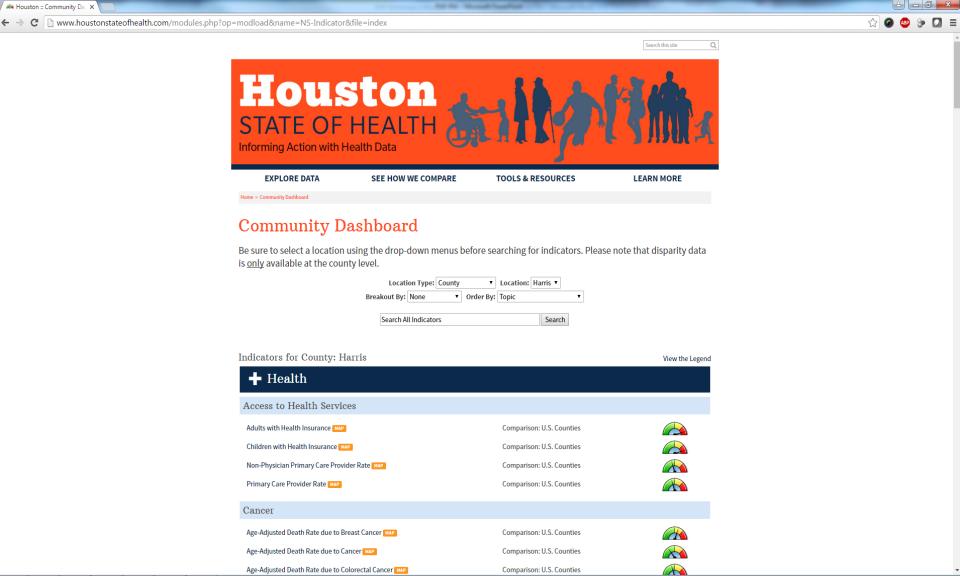
HCI

"Web-based platform which enables local public health departments, hospitals and community coalitions to measure community health, share best practices, identify new funding sources and drive community health improvement. "

- Accessible to the community
- Updated on a quarterly basis and has the ability to export data reports for specific analysis and comparisons
- Includes data on population and health indicators
 - Educational factors, housing information, cancer data, transportation, housing info, health disparities, environmental health, etc.
- Will enhance community partnership











CONTACT INFORMATION

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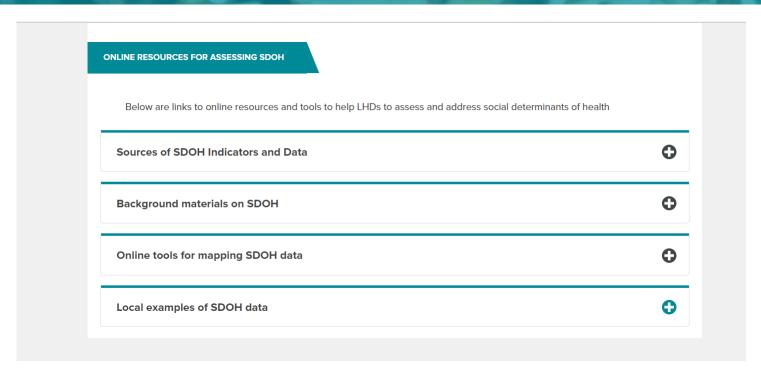
Panel Discussion



Resources

- NACCHO Guide to Performance Management (Coming in July)
- Organizational Culture of Quality Self-Assessment Tool Version 2.0 (Coming in September)
- Roadmap to a Culture of Quality (<u>www.qiroadmap.org</u>)
- NACCHO Strategic Planning Guide
- Mobilizing for Action through Planning and Partnerships
- P.I. Compass Newsletter (subscribe at <u>www.naccho.org/pi</u>)
- Performance improvement questions? E-mail us at accreditprep@naccho.org

Online Resources for Assessing Social Determinants of Health



https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/hp2020-and-sdoh

Thank You!