

**Performance Management in Public Health:
From Conceptualization to Implementation
Webinar: Wednesday, June 26th 3:00PM ET**

THE WEBINAR WILL BEGIN SHORTLY

The audio portion of this webinar is being broadcast through your computer speakers. If your computer does not have sound capabilities, or you cannot hear, please call **1-800-771-7838**

The slides for this presentation were e-mailed to registrants yesterday. If you did not receive them, please visit www.naccho.org/accreditation/webinars and select today's program

If you need technical assistance, please e-mail help@readytalk.com or dial **1-800-843-9166**.



**Performance Management in Public Health:
From Conceptualization to Implementation**

Wednesday, June 26, 2013

Pooja Verma, MPH
Senior Program Analyst
National Association of County and City Health Officials

Heather Reffett, MPA, CPM
Performance Improvement Manager
District of Columbia Department of Health



Performance Management in Public Health: From Conceptualization to Implementation Webinar: Wednesday, June 26th 3:00PM ET

GOAL:

Explain how health departments can develop and use a performance management system.

OBJECTIVES:

- Describe the purpose and structure of performance management at health departments.
- Share the story of one health department that developed a performance management system.
- Provide insight that is applicable to health departments of all sizes, budgets, and capacities.



Agenda

- Introduction to Performance Management
- Speaker Presentation: Local Health Department Perspective
- Questions and Answers



Performance Management in Public Health: From Conceptualization to Implementation Webinar: Wednesday, June 26th 3:00PM ET

Speaker



Heather Reffett, MPA, CPM

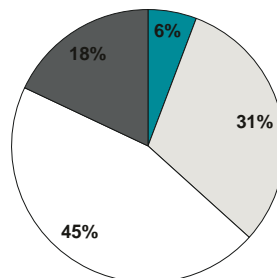
District of Columbia Department of Health



Experience with Performance Management

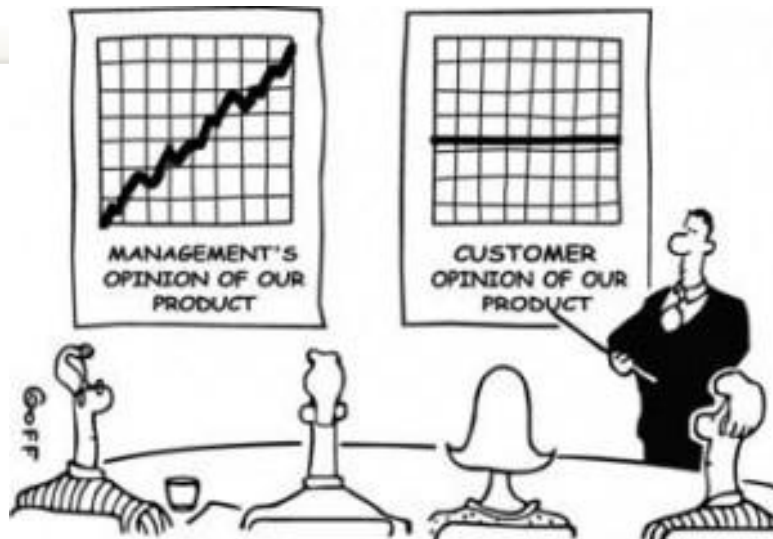
Experience of Webinar Registrants

- No knowledge or experience
- Familiar with the concept, but no experience
- Limited experience
- Significant experience



What is Performance Management?

PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM



Source: <http://www.electricalmarketingbestpractices.com/2011/12/marketing-metrics-more-than-just-numbers/>



Performance Standards

“Generally accepted, objective standards of measurement such as a rule or guideline against which an organization’s level of performance can be compared.”

- Turning Point Management Collaborative, 2003

80% of clients rate health department services as “good” or “excellent.”



Performance Measures

“A specific quantitative representation of a capacity, process, or outcome deemed relevant to assessment against a performance standard.”

- Turning Point Management Collaborative, 2003

% of clients that rate health department services as “good” or “excellent.”



Reporting of Progress

- Performance against standards and progress toward strategic goals
- Internal and external stakeholders
- Foundation for identifying QI efforts

In 2011, 50% of clients rated health department services as either “good” or “excellent.”



Quality Improvement

A continuous effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community.

“Increase client satisfaction of health department services to 70% by January 2014”



* Definition developed by the Accreditation Coalition Workgroup and approved by the Accreditation Coalition on June 2009



Performance Management in Public Health: From Conceptualization to Implementation Webinar: Wednesday, June 26th 3:00PM ET

PHAB Standard 9.1
(Standards and Measures Version 1.0)



Standard 9.1: Use a Performance Management System to Monitor Achievement of Organization Objectives

Measure 9.1.1 A: Engage staff at all levels in establishing a performance management system

Measure 9.1.2 A: Implement a performance management system

Measure 9.1.3 A: Use a process to report on achievement of goals, objectives, and measures set by the PM system

Measure 9.1.4 A: Implement a systematic process for assessing customer satisfaction with health department services

Measure 9.1.5 A: Provide staff development opportunities regarding performance management

Frameworks & Approaches for Performance Management



Why is Performance Management Important?

- Foundation for decision making
- Alignment of efforts with agency strategic direction
- Shift in focus from individuals/activities to results
- Meaningful feedback to employees
- Helps identify improvement opportunities
- Promotes learning and improvement culture



Performance Management Myths

- Mechanism to punish employees
- Fancy or expensive technology
- Can be 'copied and pasted'
- PM is not feasible in small agencies



Performance Management in Public Health: From Conceptualization to Implementation

Webinar: Wednesday, June 26th 3:00PM ET

District of Columbia Department of Health

Heather A. Reffett,
Performance Improvement Manager

June 26, 2013

Performance Standards



- Set goals & targets
- Communicate expectations

Performance Measurement



- Define measures
- Develop data systems

Reporting Progress



- Analyze & Interpret Data
- Develop regular reporting cycle

Quality Improvement



- Use data to improve policies, programs and outcomes
- Manage changes



Context


- City Government
- History of Performance Activities

City of Washington D.C.

- Mayor, City Council structure
- Annual Budget and Laws require U.S. Congressional oversight
- 2012 population: 623,323
 - 50.7% African American
 - 9.5% Hispanic or Latino
 - 13.3% Foreign-Born
 - 50.5% Bachelor's Degree or higher
 - \$43,993 per capita income
 - 18.2% below poverty
- S&P Triple A Bond Rating

Profile of DOH

- Mission: to promote and protect the health, safety and quality of life of residents, visitors and those doing business in the District of Columbia.
- 707.8 FTEs
- \$269.4 M
- 7 Divisions
- Submitted Application to PHAB on March 28th



History of DOH Performance

- D.C. Laws
- 2010 CDC NPHII Grant

D.C. Laws


- 1996 Financial Control Board required monthly performance measures report
- 2001 Performance and Financial Accountability Act required performance based budgeting
- 2005 Budget Support Act required financial cost drivers



2010 CDC NPHII Grant

- “Strengthening Public Health Infrastructure for Improved Health Outcomes”
- PIM
- Annual Meeting
- 4 Objectives
 - Accreditation Readiness
 - Organization Self-Assessment (NPHPSP)
 - Quality Improvement
 - Performance Management System

Steps to Develop a Performance Management System

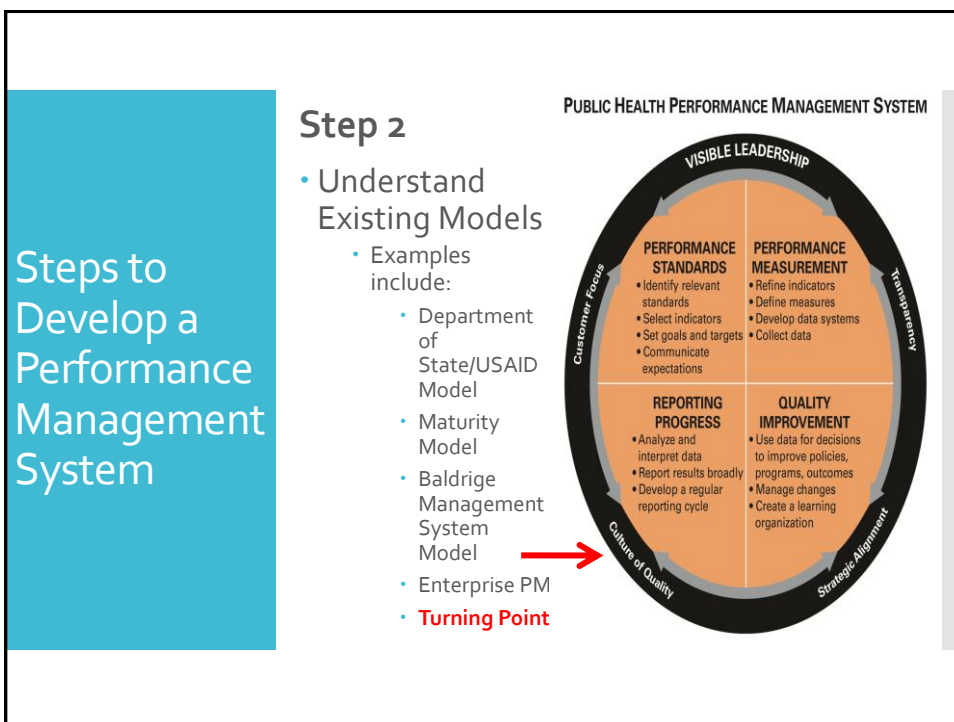
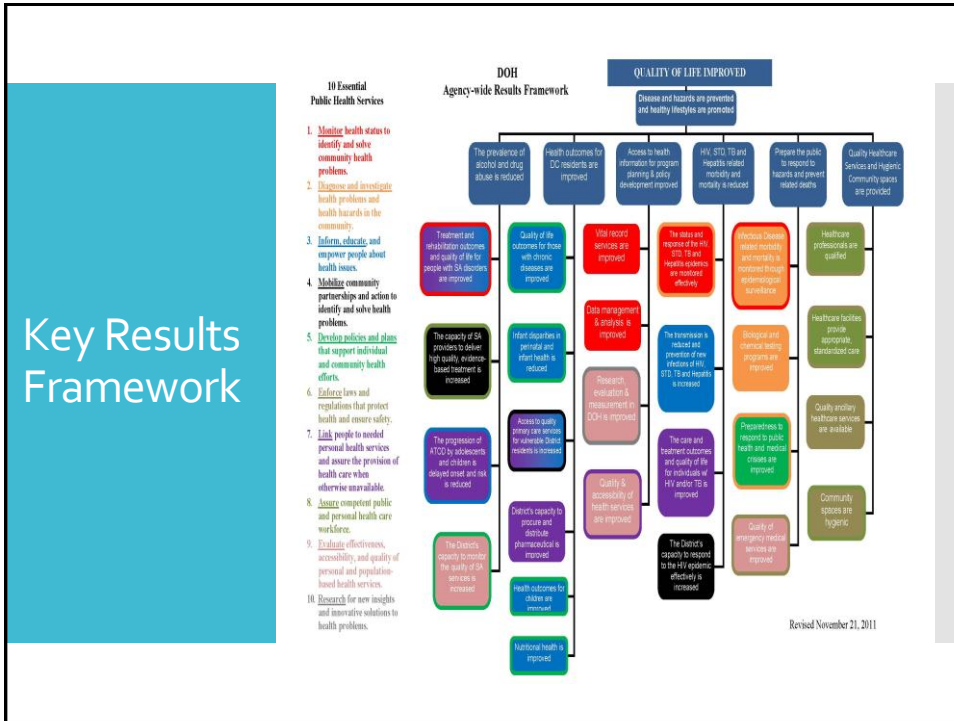


Step 1

- Identify what you are already doing
 - Know which scale you are applying the system and define the parameters
 - Department-wide
 - State-wide
 - Program specific
 - Process specific
- Agency Performance Plan
- Performance Accountability Report
- Healthy People
- Monitoring & Evaluation Workgroup
 - Key Results Frameworks
- Employee Performance Plans & Evaluations

Performance Management in Public Health: From Conceptualization to Implementation

Webinar: Wednesday, June 26th 3:00PM ET





Steps to Develop a Performance Management System

Step 3

• Fit Your Organization's performance activities into the selected model

- ❑ Purpose – what is the intended outcome of this activity
- ❑ Time Frame-frame – how often do we engage in this activity: monthly, quarterly, annually, every 5 years, etc.
- ❑ Performance Management Area – which of the four Turning Point quadrants does this activity fit
- ❑ Components – what functions comprise the activity (i.e. planning, report, objectives)
- ❑ Audience – who is the intended audience of the activity; how is the information reported, communication style
- ❑ Participants – who must be engaged in order to complete the activity
- ❑ Benefits – what are the actual, tangible benefits of doing this activity
- ❑ Limitations – what are the limitations of this activity and challenges that may present
- ❑ Requirement – is this action legally required or public health practice

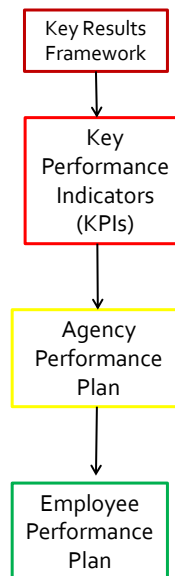
Steps to Develop a Performance Management System

Step 4

- Create linkages between your activities

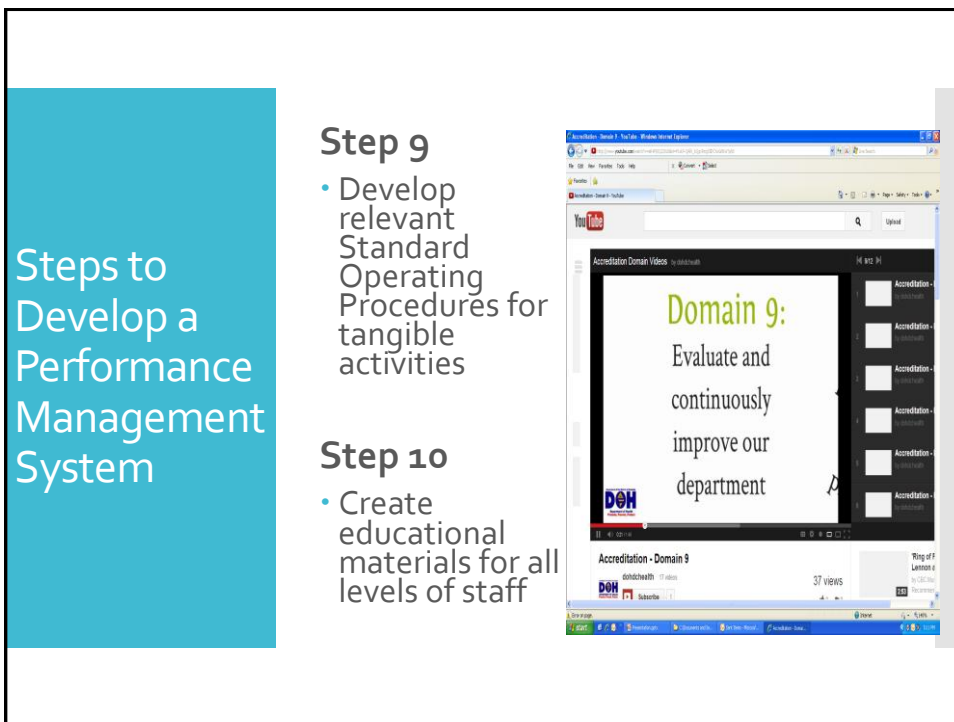
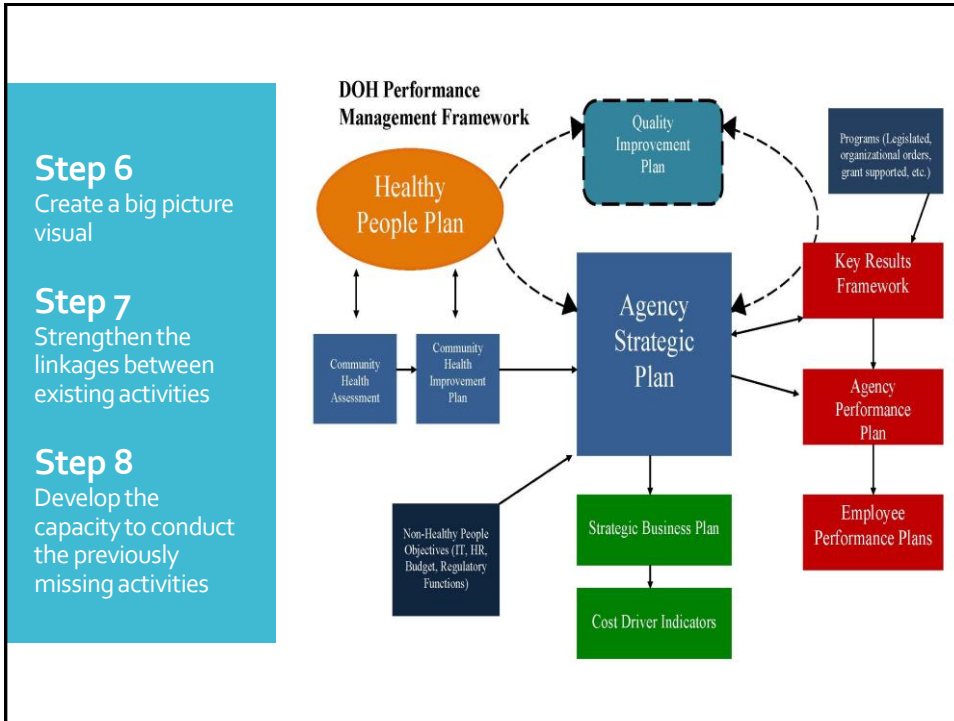
Step 5

- Identify what activities are missing in relation to the PM model you are using



Performance Management in Public Health: From Conceptualization to Implementation

Webinar: Wednesday, June 26th 3:00PM ET



Steps to
Develop a
Performance
Management
System

Step 11

- Routinely work the process

Step 12

- Continuously evaluate and improve



Contact
Information :

Heather A. Reffett

(202) 442 – 9186

Heather.reffett@dc.gov

Performance Management in Public Health: From Conceptualization to Implementation Webinar: Wednesday, June 26th 3:00PM ET

Performance Management Resources

- Performance Management Self-Assessment Tool:
http://www.collaborativeleadership.org/pages/pdfs/CL_self-assessments_lores.pdf
- Turning Point Resources:
<http://www.turningpointprogram.org/Pages/perfmgt.html>
- PHF's Performance Management & QI Website:
<http://www.phf.org/focusareas/PMQI/Pages/default.aspx>
- Public Health Performance Management Centers for Excellence:
<http://www.doh.wa.gov/PHIP/perfmgtcenters/index.htm>
- Developing, Monitoring, and Using Performance Measures:
http://www.doh.wa.gov/PHIP/perfmgtcenters/modules/Year2/11-09-11_PerfMeas_public_main.htm



QIroadmap.org



About the QI Roadmap **Foundational Elements of a QI Culture** How to Use the QI Roadmap Where are you on the QI Roadmap? Resources

Roadmap to a Culture of Quality Improvement

A guide to leadership and success in local health departments

Exit 4: Formal QI Activities Implemented in Specific Areas

Following adoption of one or more formal QI models, QI is being implemented in specific program areas, but QI is not yet incorporated into an organization-wide culture.

When building a culture of quality in LHDs, a natural evolution of change tends to occur, impacting both the people and processes within the organization. The QI Roadmap provides LHDs with guidance on progressing through six phases or levels of QI maturity until a culture of quality has been reached and can be sustained. For each phase, the Roadmap presents common organizational characteristics and strategies and resources for transitioning to the next phase. The QI Roadmap also describes six foundational elements of a QI culture that LHDs should cultivate over time. Whether a novice or advanced in QI, any LHD can adapt the QI Roadmap as a guide to understanding the current state and identifying next steps for advancing to the next


Performance Management in Public Health: From Conceptualization to Implementation Webinar: Wednesday, June 26th 3:00PM ET

About the QI Roadmap Foundational Elements of a QI Culture How to Use the QI Roadmap Where are you on the QI Roadmap? Resources

Foundational Elements of a QI Culture

The culture of an organization is the embodiment of the core values, guiding principles, behaviors, and attitudes that collectively contribute to its daily operations. (5) Organizational culture is the very essence of how work is accomplished; it matures over several years, during which norms are passed on from one "generation" of staff to the next. Because culture is ingrained in an organization, transforming culture to embrace QI when minimal knowledge or experience with QI exists requires strong commitment and deliberate management of change over time.

Each foundational element described below is essential to achieving culture of quality. An organization's evolution from implementation of small, discrete QI efforts or an informal application of quality concepts to complete infusion of QI into its culture will occur through a process of cultivating these foundational elements over time. Various aspects of these elements are likely already present in many health departments, but each element must be fully developed to ensure sustainability of progress toward a strong QI culture.



Leadership Commitment

Senior leadership's commitment is vital for the success and sustainability of a QI culture. The health director and senior management should initiate and lead the process for transformational change, dedicate financial and human resources to QI, communicate progress, and exhibit lasting support for QI. Without leadership commitment, progress will diminish and likely result in relapse to the previous state. (6)

A primary role for senior leadership is change management. Defined as a structured approach to transitioning an organization from a current state to a future desired state, change management must be deliberately used to address challenges throughout the change process. (7) When integrating QI into culture, management can use change management concepts and strategies to address both the process side of change (e.g., building the infrastructure, processes, and systems needed for effective QI) and the human side of change (e.g., alleviating staff resistance, maintaining transparency, meeting training needs, attaining staff support). (8)

QI Infrastructure

To build a culture of QI, infrastructure must be in place to ensure that QI efforts are aligned with the organization's mission, vision, and strategic direction and that QI is linked to organizational performance. The following are components of a strong QI infrastructure:

- **Performance Management System**—This cyclical process of measuring, monitoring, and reporting of progress toward strategic organization, division, and program goals and objectives provides a structured, data-driven approach to identifying and prioritizing necessary QI projects. (9) The performance management system (PM system) should be guided by an agency's strategic plan.
- **PM/QI Council**—The performance management committee or QI Council (PM/QI Council) oversees the implementation of the PM system and QI efforts. This group of leaders and key staff is responsible for implementing, evaluating and revising the QI plan; supporting specific QI projects; reviewing performance data and reporting progress; and recommending next steps. All divisions/departments should be represented on the PM/QI Council. (10)

The QI Roadmap

- Phase 1: No Knowledge of QI
- Phase 2: Not Involved with QI Activities
- Phase 3: Informal or Ad Hoc QI activities
- Phase 4: Formal QI Activities Implemented in Specific Areas
- Phase 5: Formal Agency-Wide QI
- Phase 6: QI Culture


Related Content

About the QI Roadmap Foundational Elements of a QI Culture How to Use the QI Roadmap Where are you on the QI Roadmap? Resources

Resources

καστομάρι το α κουλτούρα οί quality improvement
A guide to leadership and success in local health departments

Search



The QI Roadmap offers downloadable tools and resources to assist local health departments (LHDs) in cultivating a QI culture. All the resources presented throughout the QI Roadmap can be found in the searchable database below. Sort the resources by each foundational element of a QI culture, by the "Phases" in the QI Roadmap, or by the type of resource (e.g. template, training). Search for resources around a specific topic area (e.g. performance management, Aim Statement) by typing a keyword in the "Search" box below.

Exit Resources

Show 10 entries

Search: performance management

Name	Description	Type	Foundational Element	Source	Resource
All Systems Go	Prior to selecting an information system or software for performance management, it is important to complete a requirements gathering process. This resource offers initial guidance on important considerations for selecting a system and an initial planning checklist.	Guide	QI Infrastructure	PuHealth Informatics Institute, NACCHO	Phase 3 Resources
Whether adopting the Baldrige					

qiroadmap.org/wp-content/uploads/2013/06/Road-resources.jpg

The QI Roadmap

- Phase 1: No Knowledge of QI
- Phase 2: Not Involved with QI Activities
- Phase 3: Informal or Ad Hoc QI activities
- Phase 4: Formal QI Activities Implemented in Specific Areas
- Phase 5: Formal Agency-Wide QI

Performance Management Resources

- Embracing Quality in Public Health: **A Practitioner's Performance Management Primer**
- Developed by Michigan Public Health Institute & Debra Tews, PIM at the Michigan Dept. of Community Health
 - Free online training done at your own pace
 - Certificate of completion

<http://mphiaccredandqi.org/PMQITraining/>



Question & Answer Session

Type your questions in the Chat Box
located on the lower left side of your screen.



Thank you for joining today's webcast!

**Please complete the brief evaluation,
which will appear on your screen momentarily and
will be sent via e-mail shortly!**

Visit our website at www.naccho.org/accreditation/webinars
to see the resources we discussed today or find more
information about our webinar series.

accreditprep@naccho.org.

