

Sedgwick County: Building a Culture of Quality Improvement at a Local Health Department



Sedgwick County and Quality Improvement (QI)

Sedgwick County, which is located in southeast Kansas and encompasses the city of Wichita, is home to just under half a million people. The Sedgwick County Health Department (SCHD) serves the county's population with its 160 employees. The state of Kansas has a decentralized public health system, with the agency functioning autonomously from the state health department. Sedgwick's Board of County Commissioners is the governing entity.

Since becoming SCHD's health director, Claudia Blackburn has been working to improve the services offered by her local health department (LHD). Armed with the knowledge that the tools, strategies, and principles of QI allow LHDs to analyze barriers, streamline processes, conserve resources, empower staff, and provide high-quality services, she decided to lead her LHD on a path of continuous QI.

In November 2008, SCHD officially began the journey towards a culture of continuous QI. Blackburn understood the importance of evaluation and performance improvement and firmly believed that, in order to commit to building a culture of QI and pursuing accreditation, the LHD needed a person to lead these efforts. To meet these needs, job duties for a vacant position were tweaked to include 50 percent of a full-time equivalent's (FTE's) time to focus on accreditation and QI. Ty Kane, who was appointed to this position, dedicates half of his time to QI and accreditation, while also focusing on

community health assessment efforts. In addition, Blackburn allocated a small percentage of another FTE to supervise Kane's QI work. Like many LHDs, SCHD is facing financial hardships. Blackburn has no qualms about using LHD funds to address QI, however, because "having a comprehensive quality improvement program says to customers and elected officials that SCHD is constantly striving to improve its services, programs, and the way it does business." Blackburn also notes that QI work demonstrates to policymakers that her LHD cares about being good stewards of limited resources.

Addressing QI Gaps

In March 2009, SCHD accepted the Public Health Accreditation Board's (PHAB's) open invitation to LHDs to vet the draft standards for the national accreditation program. This opportunity allowed SCHD to provide valuable feedback to PHAB and to assess strengths and weaknesses in relation to national standards. SCHD's analysis of the standards and measures uncovered a gap in the agency's QI activities—in order to meet accreditation standards, SCHD would have to improve its QI culture.

Shortly thereafter, SCHD pursued capacity-building funding from the Sunflower Foundation of Kansas to begin building a QI culture within the LHD. This small grant allowed SCHD to partner with the Public Health Foundation and select Dr. Jack Moran¹ as the QI training consultant to help reach the goal of "creating a continuous and ongoing plan to achieve measurable improvements to achieve

equity and improve the health of the community." The specific objectives associated with the project included developing an agency-wide Quality Council (Q-Team), creating a 2011 SCHD QI Plan, training all staff (including leadership), and conducting rapid-cycle QI projects.

QI Teams and Training

In March 2010, the Q-Team, comprising representatives from each division of the LHD and from all position levels, held its first meeting. The group was charged with leading simple QI projects to engage staff. The Q-Team met monthly, schedules permitting, and worked with Moran to develop and implement a six-month training plan for SCHD that included training for a group of 40 supervisors, managers, and Q-Team members and one in-person all-staff training. The training plan was based on the North Carolina Center for Public Health Quality's "Public Health QI 101" training timeline² and included two half-day principles and tools trainings followed by a half-day workshop focused on conducting QI activities. The first training introduced QI in public health; tools and principles; and the creation of eight QI project teams. Leadership had selected QI projects ahead of time, and team members chose the project most relevant to their work. At the second training, participants continued their work on the QI projects and worked in the QI project teams to carry out early steps of the Plan, Do, Study, Act (PDSA) process.

After the two trainings, at the QI workshop, QI project teams worked together to launch their projects officially. The teams completed a "QI Project Description Form" and used several tools including a "high-level, as-is-state flowchart," cause-and-effect and solution-and-effect diagrams, and a project timeline (Gantt chart) to guide their work. Over the next three months, the teams used the PDSA approach to address various issues including new employee orientation, purchasing protocols, and customer satisfaction. The QI project teams (led by Q-Team members) led their QI project groups



in documenting steps, developing plans, and creating storyboards.³ SCHD created a shared Intranet site so project teams could share their progress with others. This site included examples, templates, and info sheets.

In January 2011, all SCHD staff participated in a QI training, led by Moran, which introduced the basics of QI and PDSA. The QI project teams presented their storyboards and answered questions from staff. Each project saw successes, but highlights include improved customer experience in clinic due to new signage; and clearer understanding of laboratory testing accuracy.

QI Plan

Throughout the QI training process, the QI team worked on the 2011 QI plan. In addition to completing this plan, Moran and several SCHD staff members developed a QI plan guidance document for other agencies.⁴ This guidance detailed the key components of a QI plan, which are also discussed in the National Association of County and City Health Officials (NACCHO) webinar "Building a QI Culture."⁵

NACCHO's Roadmap to a Culture of QI

Since Kane began his QI work at SCHD, he has been involved with NACCHO's QI Leaders Learning Community.⁶ This group holds regular calls to discuss common successes and lessons learned around practicing QI work at LHDs. The group works with NACCHO to identify technical assistance needs and develop resources. As part of this effort, in mid 2011, SCHD contributed to the development of NACCHO's Roadmap to a Culture of Quality Improvement.⁷ SCHD has since adapted this Roadmap to create tools for the LHD as it continues the journey towards a culture of QI. SCHD has created handouts based on experience with the Roadmap and several presentations for staff.

In each of Roadmap's six phases, NACCHO provides strategies to transition to the following stage. The peer networking provided by NACCHO's learning community and the hands-on tools referenced

in the QI Roadmap have also helped SCHD develop a strategy and plan to continue QI efforts. In late 2011, SCHD began an evaluation of the 2011 QI Plan in order to develop a more robust 2012 QI plan. SCHD completed a force field analysis⁸ around QI in the agency, fielded a staff survey, and conducted several informant interviews with key staff and community partners. This work allowed SCHD to ensure that the 2012 QI Plan effectively incorporated QI techniques and included input from stakeholders. Additionally, because SCHD monitored the progress of past QI projects and began to implement a performance management system to decide on new QI initiatives, the LHD is improving its ability to meet the requirements for Domain 9 of PHAB's Standards and Measures, Version 1.0. The results of SCHD's 2011 QI Plan evaluation will be available by summer 2012.

Sedgwick plans to apply for PHAB accreditation in 2012 or 2013, and SCHD's work to build a culture of continuous QI will be invaluable in that process.

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References

1. Dr. Jack Moran is a consultant with the Public Health Foundation. Information about him is available at http://www.phf.org/people/pages/john_moran.aspx.
2. Information about NCIPH program timeline is available at <http://bit.ly/A1JGyD>.
3. Storyboard information is available at <http://www.naccho.org/topics/infrastructure/accreditation/qi-storyboards.cfm>.
4. This document is available at <http://bit.ly/zldMD5>.
5. To view this webinar, visit www.naccho.org/accreditation/webinars.
6. For information about NACCHO's QI Leaders Learning Community, contact Pooja Verma at pverma@naccho.org.
7. Find out about NACCHO's Roadmap to a Culture of QI at <http://www.naccho.org/topics/infrastructure/accreditation/qi-culture.cfm>.
8. Find information about the force field analysis tool at http://www.mindtools.com/pages/article/newted_06.htm.

FOR MORE INFORMATION

Please contact accreditprep@naccho.org.

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1100 17th St, NW, 7th Floor Washington, DC 20036

P 202-783-5550 F 202-783-1583

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