

**Kansas Department of Health & Environment**  
**Performance Management Environmental Scan**  
February 2019



How does using performance data improve health? The Public Health Foundation asserts that when monitored regularly, performance data helps leadership prioritize and allocate resources, inform managers of needed adjustments in policy or program to meet goals, to build reports on success in meeting goals, and to improve the quality of public health practice<sup>1</sup>. The current performance management (PM) system at the Kansas Department of Health and Environment (KDHE) represents a significant opportunity for improvement. This report describes the current state of the performance management system, including the recent findings of an environmental scan conducted by the agency’s Performance Improvement Manager. Finally, proposed next steps can be found at the end of this document, along with a list of additional resources.

**PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM**



Figure 1: Turning Point Performance Management Framework, Revised 2013

**Background**

KDHE’s framework for managing agency-level performance is adapted from the Turning Point Performance Management model (see Figure 1). Having an operational PM system is required of all health departments who hold PHAB accreditation status<sup>2</sup>. After the PHAB site visit in August 2017, PHAB site visitors identified measure 9.3.1A as an area for improvement. The site visit report states, “KDHE has elements in place to support performance management and to respond to performance issues with targeted quality improvement, but there is an opportunity to use these elements for more systematic management of performance. It is unrealistic to expect perfect alignment among [all agency plans], but it is possible to pull their performance management and accountability processes together (with or without a single IT system to support it) for a more comprehensive view. KDHE should continue work to relate and align its performance

<sup>1</sup> Turning Point Performance Management National Excellence Collaborative. From Silos to Systems: Using Performance Management to Improve Public’s Health. 2003. Available at: [www.phf.org/resourcestools/Documents/silosystems.pdf](http://www.phf.org/resourcestools/Documents/silosystems.pdf). Accessed January 25, 2019.

<sup>2</sup> Public Health Accreditation Board. (2011, May). Public Health Accreditation Board Standards: An Overview (Publication). Retrieved September 18, 2018, from Public Health Accreditation Board website: <http://www.phaboard.org/wp-content/uploads/PHAB-Standards-Overview-Version-1.0.pdf>

indicators and measures into a robust agency-wide performance management system that informs decisions and is useful to staff, executive leadership and its governing body.”

KDHE’s current performance management system involves a wide array of performance data, that is collected in a variety of methods. Some performance measures are tracked at the bureau level, and then reported to the state budget office, as part of performance-based budgeting. Other important public health status indicators are published on Kansas Health Matters, a public facing website. Still, other performance measures are reported directly from specific, grant-funded programs to their federal or other external partners and stakeholders. Performance data is not easily accessible for agency leadership, which leads to a reduced ability to use the data for decision making and quality improvement efforts, and to report to staff and other constituencies.

The disconnect between collecting performance measures and consistently using them at the agency level to guide decision-making can be considered both a technical and adaptive challenge<sup>3</sup>. Technical, because current know-how could be applied to developing a tracking system and issuing requirements for reporting. Adaptive, because it will require all program managers and staff who are responsible for specific performance measures to learn a new system and to adopt new habits of reporting and utilizing performance data.

## Environmental Scan

### Purpose

Upon hire in August 2018, the Performance Improvement Manager (PIM) began collecting information to be included in an environmental scan. The purpose of the environmental scan was to identify current performance management activities and practices at KDHE, to gather information on the current practices of other PHAB accredited health departments and synthesize the information into a usable format for agency leadership. The goal of this environmental scan is to provide a comprehensive assessment aimed at exploring the possibilities for performance management at KDHE, and to empower leadership and stakeholders with information for future strategic planning and decision making.<sup>4</sup>

### Methods

A five- to six-month timeline was established for the collection of information to ensure its inclusion into the first PHAB annual report (due by December 31<sup>st</sup>, 2018). The following information is included: Performance Management Self-Assessment Tool (PM SAT) conducted by each bureau across the agency, PM system survey to PHAB accredited state health departments, and key informant interviews with external partners.

### *PM SAT*

KDHE’s PM system follows the updated Public Health Foundation’s adaptation of the Turning Point framework, which is composed of five main components: visible leadership, performance standards, performance measurement, reporting progress, and quality improvement. The PM SAT is designed to identify

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<sup>3</sup> Heifetz, Ronald A., and Martin Linsky. *Leadership on the Line: Staying Alive through the Dangers of Leading*. Boston, MA: Harvard Business Review Press, 2002.

<sup>4</sup> Purpose adapted from: Wilburn A, Vanderpool RC, Knight JR. Environmental Scanning as a Public Health Tool: Kentucky’s Human Papillomavirus Vaccination Project. *Prev Chronic Dis* 2016;13:160165. DOI: <http://dx.doi.org/10.5888/pcd13.160165>.

the extent to which the components of a PM system are in place. It is intended to generate group discussions about building and improving a performance management system<sup>5</sup>.

The PIM engaged internal stakeholders to ensure that quality information was provided. Internal stakeholders of the performance management system include the staff at KDHE, bureau directors, and the executive leadership team. Prior to conducting the PM SAT, the Deputy Secretary for Public Health and Director of Environment expressed support for the project to bureau directors. The PIM also offered to facilitate the bureaus' completion of the PM SAT in its preferred discussion format.

### *Organizational Culture Analysis*

To better understand the context for necessary changes to take place, it is necessary to examine KDHE's organizational culture that exists around performance management. Organizational culture is defined as the "pattern of shared basic assumptions that arise/coalesce based on learning about how relate to one another and to their environment."<sup>6</sup> The PIM used Edgar H. Schein's structure for uncovering the basic assumptions of performance management held by KDHE by starting with observable artifacts, linking them to the values they represent, and then diving deeper to the unconscious beliefs held by the organization.

### *PM System Survey of Other States*

To gain a broader understanding on how other states approach performance measurement, the PIM conducted additional external research. A short survey was developed to provide KDHE with an idea of the current performance management tracking tools in use by other states, and to guide the agency's efforts in choosing a best fit. Responses were collected from PHAB accredited, state-level health departments. The survey captured agency size, performance management system name/vendor, web-based capabilities, cost structure, benefits, challenges, and number of measures tracked.

### *Key Informant Interviews*

In addition to the survey, the PIM interviewed performance improvement counterparts from Iowa, Vermont, and South Carolina. These were voluntary, one-hour interviews regarding the structure and processes of performance management. The PIM established interest through the Public Health Performance Improvement Network (phPIN), a learning community and peer exchange network for those working in the field of performance improvement in public health. Participants shared additional insights and challenges they face in performance management.

## Findings

### *PM SAT*

The self-assessment was conducted in November 2018. 8 bureau directors from both the Division of Environment and the Division of Public Health and the Office of Personnel Services completed the PM SAT. KDHE's current status for performance management was measured with a series of indicator questions for each of the five components (visible leadership, performance standards, performance measurement, reporting progress, and quality improvement). Through Pareto analysis of the results, Reporting Progress was identified as the component with the highest frequency of Never/Almost Never responses.

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<sup>5</sup> Public Health Foundation. Public Health Performance Management Self-Assessment Tool. June, 2013. Available at: [http://www.phf.org/focusareas/performancemanagement/toolkit/Pages/PM\\_Toolkit\\_Self\\_Assessment.aspx](http://www.phf.org/focusareas/performancemanagement/toolkit/Pages/PM_Toolkit_Self_Assessment.aspx)

<sup>6</sup> Schein, E. H. (2010). *Organizational Culture and Leadership*. San Francisco, CA: Jossey-Bass.

During a facilitated discussion with the Bureau of Community Health Systems, as they were completing the PM SAT, program directors described that they are regularly reporting program-level progress to staff, managers and leaders both internal and external to KDHE. However, there is no direction or linkage to the agency’s strategic plan, or higher-level agency measures of public health status and capacity, workforce development, data and information systems, customer focus and satisfaction, management practices or service delivery.

The results from the PM SAT establish the need for a mechanism to track performance measures at the agency-level. Performance measurement occurs frequently but is not easily accessible to agency leadership and program managers through reporting.

Additional analysis (see Chart 1) of the cross-cutting questions of the PM SAT revealed another need—for training. In each of the five components, responses point to a need for training: to help staff use performance standards, help staff select performance measures, effectively analyze and report performance data, to help managers and staff use quality improvement tools, and to help managers manage performance.

Cross-Cutting Questions: Training

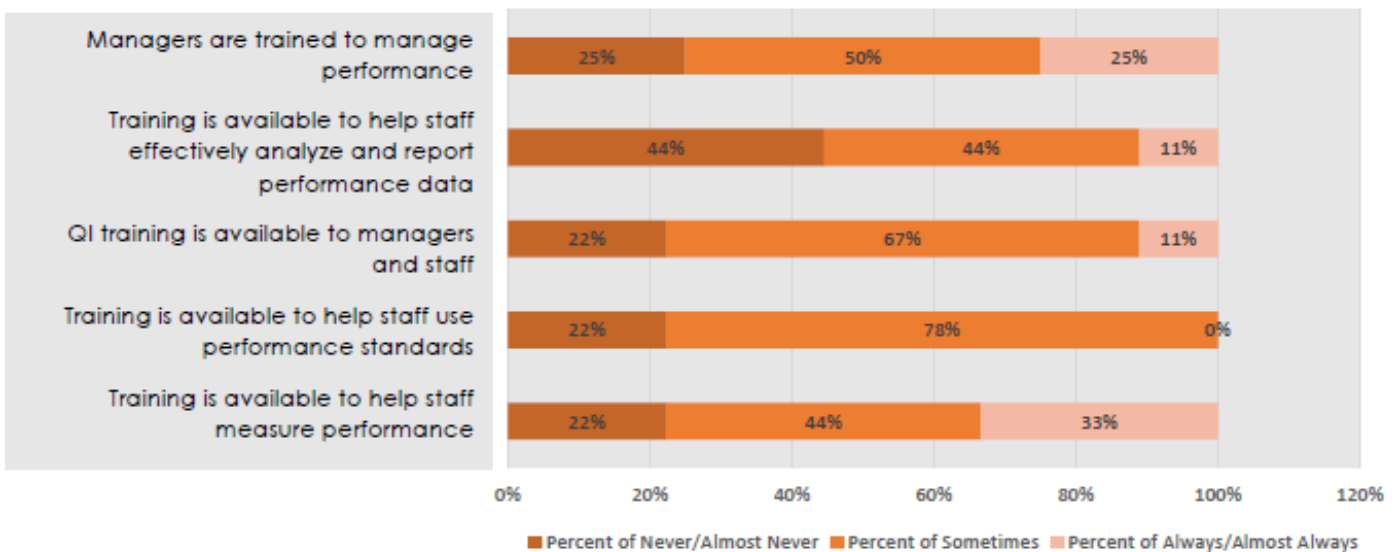


Chart 1

*Organizational Analysis*

The PIM applied Schein’s framework for analyzing organizational structure to the PM system at KDHE. Figure 2 is a visual representation of the different levels (described below) of the performance management culture at KDHE.

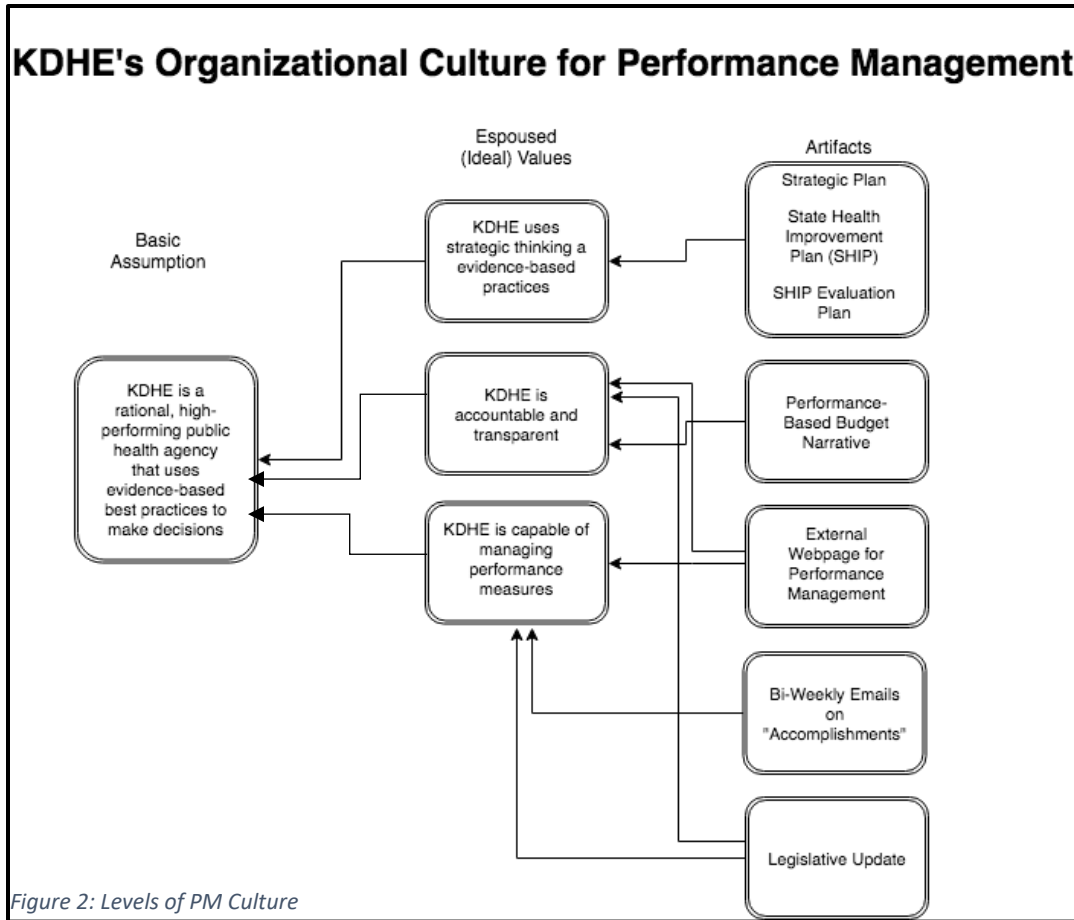


Figure 2: Levels of PM Culture

### Artifacts

There are several artifacts of the culture of performance management at KDHE, for example: an agency strategic plan, state health improvement plan (SHIP), an SHIP evaluation plan and annual performance-based budget narrative. All these written documents contain some agency-level performance measures. On the agency website, there is a performance management page. Monthly legislative updates that are sent to KS Legislators and the Governor’s office are artifacts that document our agency’s performance to our external partners. Emails of accomplishments are sent from program-level staff to bureau directors on a bi-weekly basis.

### Values (Ideal)

The artifacts listed above are linked with the aspired values of strategic thinking and using evidence-based practices. They were developed to represent the idea that KDHE is taking a strategic approach to improving population health, and that the agency is capable of managing its performance. These values reflect the desired behavior of the organization.

### Basic Assumptions

The basic assumptions held at KDHE around performance management are more difficult to uncover. They center around the idea that KDHE is proficient in performance management; that

someone is looking at every measure, through every data source, and making decisions based on rational information.

#### External Adaptation

Many of the artifacts of the performance management system were put into place to meet additional PHAB requirements and achieve accreditation status. This external adaptation has led to a consistently shared internal assumption that many performance management activities are only done to maintain accreditation status, not because it is intended to improve public health practice. This assumption, if not actively addressed by executive management, can become a liability to the organization. If staff continue to hold this belief, accreditation status may be prioritized over quality improvement initiatives.

#### Internal Integration

KDHE could do more to truly integrate the espoused values of the agency into its culture. There is not a common language for performance management in training or onboarding of new staff. While the current system of performance-based budgeting is required to be submitted by each bureau, there is little formal guidance or direction given. The current internal process for updating performance measures within the budget narrative varies across bureaus and is done on an annual basis.

#### Subcultures

KDHE is a large agency, with approximately 1,200 staff. The bureaucratic structure lends itself to the existence of many different subcultures. For example, there are three broad divisions within KDHE: The Division of Public Health, Environment, and Health Care Finance. Divisions are made up of multiple bureaus. Within bureaus are sections or units, and finally, within the sections are the programs. Subcultures also exist across the different physical locations of KDHE, which, excluding district offices, span to three different locations in Topeka. Practices for performance management can vary based on which building and floor a particular program resides.

#### Dysfunction

Specific aspects of KDHE's organizational culture that indicate dysfunction include the disconnect between external adaptation and internal integration. KDHE's Strategic Plan, one of the agency's key artifacts and a requirement for PHAB Accreditation, is outdated. It has not been updated to reflect current priorities and agency values. This presents a conflict for employees and reflects the notion that having a strategic direction is not important to KDHE.

This dysfunction continues when steps are not taken to ensure that internal integration of values occurs at the frontline worker level. For instance, there is not a common language for performance management that is used throughout the agency. No trainings exist to help program managers develop relevant performance measures for their programs. Additionally, there is no clear definition of responsibilities of staff in conducting performance management activities. These issues make it difficult for staff to know which values they should emulate—their own, or the agency's.

*PM System Survey of Other States*

Of the 30 other state health departments who held PHAB accreditation status as of November 2018, 12 states responded. An additional 6 states had public-facing components of their existing system. Performance management systems were categorized based on the following types—those developed in-house, and those developed externally. See Appendix A for a comparison of the different types of systems.

*Key Informant Interviews*

Reaching out to different states provided a valuable opportunity to learn more about different structures and approaches. Interviewees offered insight to performance management at a state-level public health agency, and provided lessons learned. As a result of the discussion, participants in Iowa offered an opportunity for collaboration in training staff on performance management and quality improvement.

Table 1. Key Informant Interviewees and Related Feedback

<i>State</i>	<i>Feedback</i>
<i>Iowa</i>	<i>Prioritize measures based on the following criteria: will these measures get us where we want to be in 5 years? “Make your performance management team to include equal parts: people who do the work, people who make decisions, and people who do data.”</i>
<i>South Carolina</i>	<i>Program managers manage their own SharePoint pages, and the role of the performance improvement specialist is a supportive role. “I don’t force programs to do anything, I just give them the tools.”</i>
<i>Vermont</i>	<i>“Software will not solve all problems, we used MS Excel to start out and submitted IT requirements gathering process. We also made sure Legislature was on board with results-based accountability. For the cost, it has been a good fit, not necessarily about disseminating public data but more as a decision-making tool. Counterparts at other state agencies such as Human Services have adopted the model.”</i>

**Proposed Next Steps**

Considering the current state of KDHE’s performance management system, and the cultural elements surrounding the issue, it is evident that change needs to happen. Technical solutions, while necessary, will not be enough to address the underlying basic assumptions that exist within the agency. Internal integration of performance management behaviors will require some adaptive solutions as well.

The main technical solution is to decide on a specific data tracking tool to aid in performance management processes, specifically reporting and analyzing current measures. Adaptive solutions then include: convening a performance management team to support efforts to increase use of performance data; communicating a clear vision and goal for the performance management system; conducting formal training to staff on technical aspects and to address values and basic assumptions; recognizing positive role models within the



agency who are already tracking performance measures and utilizing them for decision-making and quality initiatives; and providing support for programs who are hesitant to report measures.

## Conclusion

Changing the basic assumptions of KDHE staff around performance management will not happen easily. Leading through adaptive challenges requires sacrifice, especially as staff are asked to trade old behaviors for new ones. It is important to consider the programs and staff who will experience such loss. It will be necessary to take their processes and ideas into consideration before deciding on a technical solution. It will also be important to be transparent and communicate openly about the reasoning behind the change.

Regardless of the steps that are taken, it is necessary that improvements to KDHE's performance management system occur as part of a larger strategic directive. Having an aligned performance management system requires an updated strategic plan, and alignment to the state's health improvement plan (Healthy Kansans 2020).

PHAB describes the significance of using a performance management system as follows:

*“To continuously improve public health practice, the health department leadership and staff need to commit to establishing and using a performance management system. The performance management process must intentionally engage all levels of the organization in reaching decisions about the functionality and integration of various components of the performance management system. Staff ownership is required because implementation of a performance management system is successful only when staff is involved early and continuously in decision making. When department leadership and staff work together to promote the use of performance management practices, it is easier to achieve an integrated performance management system. Keeping top-down and bottom-up dialogue alive reinforces the importance of organizational excellence inherent in a fully functioning and completely integrated performance management system.”<sup>7</sup>*

As KDHE continues to improve and enhance its performance management system, agency leaders will be equipped with the ability to track and monitor progress, quickly identify areas for improvement, and easily develop reports to describe status on agency priorities. All these benefits will help KDHE in achieving its mission, to improve the health and environment of all Kansans.

## Additional Resources

*Performance Management Leadership Guide*, April 2017

Association for State and Territorial Health Officials (ASTHO)

<http://www.astho.org/Accreditation-and-Performance/Performance-Management-Leadership-Guide/Home/?terms=performance+managemenT>

*Measuring What Matters: A Health Department's Guide to Performance Management*, Summer 2018

National Association of County & City Health Officials (NACCHO)

<https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/performance-management>

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<sup>7</sup> Public Health Accreditation Board. (2013, December). Public Health Accreditation Board Standards: An Overview (Publication). Retrieved February 12, 2019, from Public Health Accreditation Board website:

<http://www.phaboard.org/wp-content/uploads/SM-Version-1.5-Board-adopted-FINAL-01-24-2014.docx.pdf>

## Appendix A

### Performance Management Feedback: External Systems

States	Software/System Used	Benefits	Challenges
Nebraska, Vermont, Connecticut, New Mexico	Results-Based Accountability	<ul style="list-style-type: none"> <li>• Specifically designed to focus on performance</li> <li>• Easily understood language</li> <li>• Cultural and linguistic sensitivity makes it ideal for public dashboards.</li> <li>• Easy to use, no fancy data analytics knowledge required; anyone can be trained</li> <li>• Partner Connect feature, so autonomous agencies can share data, create merged dashboards, etc.</li> <li>• Can be used for grants management</li> <li>• Inexpensive</li> <li>• Multiple people could use a single license, if they were using at different times</li> <li>• Can easily create pdfs for instant fact sheets and quick reporting</li> <li>• Can integrate images, videos, links, documents, etc.</li> <li>• Had a pre-developed scorecard for PHAB</li> <li>• Really nice for SHA/SHIP reporting</li> <li>• Great to use with partnerships following the RBA process</li> <li>• Regular Updates</li> <li>• Great Customer Service</li> <li>• Tons of training for free on their site, and advanced training is \$600 via a virtual course</li> <li>• Dashboard displays in a simple visual format</li> <li>• Allows us to track, in an organized way, where we are excelling and where we have room for growth.</li> </ul> <p>Agency Dashboard allows for transparency to our customers, the public, stakeholders, and legislatures.</p>	<ul style="list-style-type: none"> <li>• It is NOT a data analytics platform, as it's meant to monitor progress, one indicator at a time.</li> <li>• You can create comparative tables, but there are some limitations here, that we're hoping they will address.</li> <li>• The architecture can take some time learning how to best set up, but still easy to use</li> <li>• Does not replace a comprehensive data analysis system</li> <li>• Some other nitpicky technical annoyances</li> <li>• Some glitches, data only showed one way (trend line)</li> <li>• Not a customizable data visualization tool (not tableau)</li> <li>• Not a one-stop shop for data</li> <li>• The biggest challenge has been the culture shift to tracking and managing performance in this manner. This inevitably takes time, so we are continually working to engrain performance management and quality improvement in everything we do as an agency.</li> </ul>
Missouri, Mississippi, North Dakota	VMSG	<ul style="list-style-type: none"> <li>• Great TA provided</li> <li>• easily comprehensible structure</li> <li>• User friendly</li> <li>• Cost effective</li> <li>• Vendor has worked to customize platform for user needs</li> </ul>	<ul style="list-style-type: none"> <li>• Displaying the data in a customer friendly way is a bit limited</li> <li>• Meaningful measurements, the staff here seem to view it as "high tech" I think, but we have a large portion of seasoned staff</li> <li>• Linking performance measures at department/strategic level and program level</li> </ul>
Maine, Alabama	Insight Information, Inc.	<ul style="list-style-type: none"> <li>• Mostly comparable to other systems</li> <li>• One feature is in this system that had not yet been developed for other systems. That is the reaccreditation module for documentation preparation and management.</li> </ul>	<ul style="list-style-type: none"> <li>• Learning the system's intricacies while implementing takes some time and a technical staff member dedicated to it.</li> </ul>

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Colorado, California	Tableau (Enterprise License)	<ul style="list-style-type: none"> <li>• Able to publish reports without much know-how</li> <li>• Used across the agency for lots of sophisticated reasons</li> <li>• Can consume all kinds data,</li> <li>• Can be refreshed on a nightly basis and updated,</li> <li>• Embeds to any webpage with HTML scripts,</li> <li>• Works well with Google Drive</li> <li>• Agency already had infrastructure in-place</li> <li>• Helps to have a User Group to support learning/use</li> </ul>	<ul style="list-style-type: none"> <li>• Doesn't replace GIS program or advanced stats programs (SAS, SPSS, etc.)</li> <li>• Firewall prevents a live connection</li> <li>• Interface not user friendly</li> </ul>
Oregon	SmartSheet	<ul style="list-style-type: none"> <li>• No duplication of documents</li> <li>• Accountability</li> <li>• Automated reminders and notifications</li> <li>• Workflow approvals</li> <li>• Built-in reporting and dashboard capability</li> <li>• Form collection and calculation functionality</li> </ul>	<ul style="list-style-type: none"> <li>• Learning new software</li> <li>• Change management for adoption of new measures</li> </ul>

Performance Management Feedback: In-House Systems

States	Software/System Used	Benefits	Challenges
Oklahoma, Washington, Idaho, Rhode Island	Combination of SharePoint, Excel, Tableau	<ul style="list-style-type: none"> <li>• All agency staff can access the program with ability to easily upload information and restrict and/or allow users to view specific pages or information.</li> <li>• It is user-friendly with ability to create and customize pages for as many areas/divisions as needed</li> <li>• Low cost</li> <li>• Somewhat flexible</li> <li>• Advances efforts to use SharePoint environment more</li> <li>• Low Tech, Low Cost</li> </ul>	<ul style="list-style-type: none"> <li>• There are specific restrictions we face in Oklahoma, which doesn't allow us to access full functionality to the system. It is part of our internal intranet, so the public CANNOT access.</li> <li>• It helps to have a SharePoint Coordinator to oversee and administer overall permissions or challenges that arise.</li> <li>• Limited graphic capabilities</li> <li>• Not a Database</li> <li>• No Automatic Feeds</li> <li>• Cumbersome to Maintain</li> </ul>
Arizona	(State-Provided) Arizona Management System	<ul style="list-style-type: none"> <li>• Every state agency uses same system which promotes consistency</li> <li>• Encourages QI efforts across Agency</li> <li>• Provides framework for performance management</li> <li>• Aligns with accreditation needs</li> </ul>	<ul style="list-style-type: none"> <li>• Moving from paper to web-based tracking</li> <li>• Metric development</li> <li>• Employee engagement around performance management</li> </ul>
Montana	HealthSTAT	<ul style="list-style-type: none"> <li>• Simple to use</li> <li>• Organizational based</li> </ul>	<ul style="list-style-type: none"> <li>• Requires constant updating</li> <li>• Contains a fatal flaw where the database uses State Fiscal Year only, which is detrimental when tracking measures that are calendar, fed fiscal, or off calendar year time frames. (to fix would cost \$37K)</li> </ul>