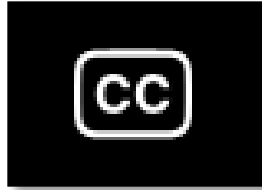# Operationalizing Performance Management in Health Departments

August 28, 2024 | 8-9 pm ET

Introductions and Housekeeping
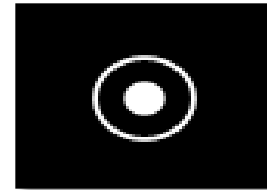
In the chat, please share:

- Health Department

- In 2-3 words, describe the status of implementing your PM system/infrastructure

Closed Captioning is enabled.

Drop your questions & comments into the chat.

Webinar is being recorded.

astho™

Today's Speaker

Amanda McCarty, MS, MBA, MHA
The Public Health Foundation

Performance Management Model - Review

At the core of all quality improvement and performance management activities is the use of data to drive decision making and monitor progress.

Quality Improvement & Performance Management are tools that, when used together, help to improve the value and impact of programs.

- Source: From Silos to Systems: Using Performance Management to Improve Public Health Systems – prepared by the Public Health Foundation for the Performance Management National Excellence Collaborative, 2003.

- Updated framework by the Public Health Foundation, 2013.

- Also PHF Website: http://www.phf.org/focusareas/performancemanagement/Pages/Performance_Management.aspx

QI Framework for a Public Health Organization-wide PM System

Plan
SHIP/CHIP (e.g., MAPP)
Strategic Plans
Operating Plans
Financial Plan (Budget)

Expectations

Do
Program & Policy Implementation

Operational QI

Data

Check
Performance Monitoring & Reporting for the Population & Organization (incl. SHA/CHA, MAPP)

Analysis of Results

Information

Act
Performance-based Decision Making
Decisions on Changes to Improve Results

Direction

Engagement of:
- Leaders & managers
- Employees
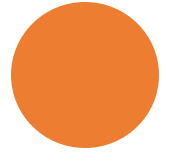- Partners
- Other stakeholders

5

PM and QI

Performance management (PM) is the systematic process of using data to make decisions.

Data is used to measure, monitor, and communicate progress toward intended outcomes.

Quality improvement (QI) tools are used to overcome barriers to progress

Prioritize

Performance Management Components

Goals — General umbrella statement, under which specific objectives can be clustered.

Objectives — Specific, measurable steps that can be taken to meet the goal.

Measures/Indicators — Clearly defined indicators for collecting data to assess achievement

Activities, strategies that are contributing to your objectives

Demonstrate progress

Instructions

Go to

www.menti.com

Enter the code

8345 1896

Or use QR code

Designing Measures

Measures Review

- *Performance measurement* is the "regular collection and reporting of data to track work produced and results achieved"

- *Performance <u>management</u>* is using the information from measures to manage your program

Levels of Measurement
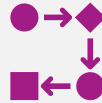
1. How much are we doing?
2. **How effectively are we doing? How well did we do?**
3. Who cares? Is anyone better off?

Measures

	Output	How much are we doing?
	Process	How well are we doing it? Develop to support and achieve outcome measures
	Outcome	Is anyone better off? Are they achievable?

Figure 5: Mapping Outcomes Using a Logic Model

Inputs
Strategies
Activities
Outputs

Short-term Outcome
- Results that are directly tied to the program activities.
- Usually reflects a change in knowledge or attitudes of an individual or group.
- Programs have the most control over these outcomes
- Typically occur immediately after delivery of program or service

Intermediate Outcome
- Results that typically reflect actions or behavior changes that are based on changes in knowledge or attitudes resulting from the program.
- Likely to lead to long-term outcomes.
- Programs have less control over these outcomes
- Typically occur within several months after program delivery

Long-term Outcome
- Reflect change in status or conditions due changes knowledge, attitudes, and behaviors resulting from program.
- Seen among customers of the program
- Factors outside of the control of the program impact these outcomes.
- Typically occurs several years after program delivery

Impact
- Organizational, community, or system level changes resulting from coordinated efforts across programs, organizations, and sectors.
- Improved living conditions, health status, or policy change at the societal level.
- Typically occur after 6+ years

Figure 6: Enhance Access to Public and Private Smoke-Free Spaces: Outcomes Sequence Example

Inputs
Strategies
Activities
Outputs

Short-term Outcome	Intermediate Outcome	Long-term Outcome	Impact
• Increased public and policy-maker knowledge of tobacco-related health disparities and dangers of second-hand smoke	• Increased public and policy-maker support for smoke-free policies • Increased public compliance with existing tobacco-control policies.	• Increased adoption of smoke-free policies in public and private spaces • Decreased exposure to second-hand smoke	• Decreased tobacco-related disease • County or state level policy change

Measuring What Matters in Public Health: A Health Department's Guide to Performance Management
NACCHO: https://www.naccho.org/uploads/downloadable-resources/NACCHO-PM-System-Guide.pdf

Figure 7: Access to Public and Private Smoke-Free Spaces: Performance Measures

Input Measures	Process Measures	Output Measures	KPIs/ Outcome Measures	Community Indicators
- # of Tobacco Control Program (TCP) FTEs - TCP annual budget	- Cost per smoke-free training - % of training invitations accepted	- # of multi-unit housing owners trained in dangers of second-hand smoke	- **Intermediate**: % of multi-unit housing owners who support smoke free policies - **Long-term**: % of low-income housing units that are smoke free	- % of population exposed to second-hand smoke - Rate of tobacco related disease

Measuring What Matters in Public Health: A Health Department's Guide to Performance Management
NACCHO: https://www.naccho.org/uploads/downloadable-resources/NACCHO-PM-System-Guide.pdf

Environmental Health Enforcement & Investigation Example

Goal: Minimize EH Risks & Disparities in Risk

1. Objective: Enforce Environmental Health Codes
   - *Performance measure: Number establishments in top safety tier for its type*
   - *Performance measure: % inspections on schedule (including re-inspections)*
   - *Outcome measure: Total outstanding EH violations*
   - *Outcome measure: Number EH-related illnesses & injuries per 1,000 residents*
   - *Outcome measure: Number food borne illnesses per 1,000 residents*

2. Objective: Develop Policies that Incentivize Compliance
   - *Performance measure: % fee & fine schedules updated & approved by BOH*

3. Objective: Engage the Community to Reduce Need for Enforcement
   - *Performance measure: Number of targeted establishments that participate in training*

Maternal Child Family Health Example

Goal: Improve Maternal & Child Health Outcomes

1. Objective: Assess Smoking & Pregnancy Status at State and County Levels
   - *Performance measure: % of Medicaid women who smoke during the last three   months of pregnancy*

2. Objective: Increase the availability of school-based dental sealant programs
   - *Performance measure: # of Title I school with Dental Sealant programs*
   - *Performance measure: # of students provided a dental sealant service*

Diabetes Prevention Program Example

Goal: Increase access to Diabetes Prevention Program services for those at high risk of developing Type 2 Diabetes

1. *Objective: Increased identification and referral of people at high risk of developing Type 2 Diabetes to Diabetes Prevention Program services*
   - \# Identified to have Prediabetes or a high risk of Type 2 Diabetes
   - \# Partners funded by program to screen, test and refer patients
   - \# referred to a program
2. *Objective: Increase access and availability to evidence-based programming for adults with Prediabetes or those at high risk for Type 2 Diabetes*
   - \# programs (providers offering program) available
   - \# regions identified has having no programming
   - \# participants in virtual coaching program

Creating A Connection

Performance Measures

{Connector}

Strategic Goals or Priorities

Health Equity Considerations

1

Identify health disparities

- Process for understanding if and what health outcomes are different in your target population

2

Identify the factors that lead to health disparities

- Process for understanding what contributes to differences in health outcomes

3

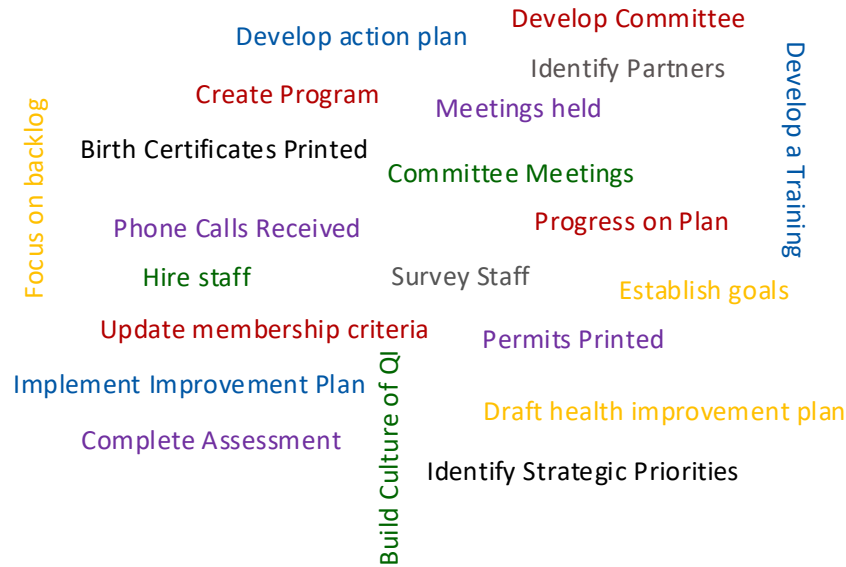Identify how to track/measure the factors

- Process for measuring how the factors affect the population

4

Address the factors through targeted interventions

- Programmatic efforts
- Work with community partners
- Policy/system change

Caution: Performance Management is not Project Management

- An agency's performance management system should not be used for project management

- A project is a temporary endeavor undertaken to create a unique product, service, or result.

Project Work Plan						
Task #	Task Title	Responsible Party	Start	Finish	Status	Notes

Business As Usual – Tasks that Need to Happen

Develop action plan

Develop Committee

Identify Partners

Create Program

Meetings held

Birth Certificates Printed

Committee Meetings

Focus on backlog

Develop a Training

Phone Calls Received

Progress on Plan

Hire staff

Survey Staff

Establish goals

Update membership criteria

Permits Printed

Implement Improvement Plan

Build Culture of QI

Draft health improvement plan

Complete Assessment

Identify Strategic Priorities

Project Management or Performance Management?

Implement employee trainings

% employees participating in training

Project Management or Performance Management?

Create Customer Satisfaction Data System

% Customers reporting satisfactory or higher

Project Management or Performance Management?

Employee Absenteeism Rating

Employee Recruitment

Creating Performance Measures

wic participatation

programs participating

inspections

quit line participation

core competency trainings

emergency preparedness

response compliance

processes improved

turnover rate

incident response

program participants

individuals tested

training offered

number vaccinated

number of education sites

priority goals

percent positive test

safe drinking water

vital statistics

communicable disease

cessation at six months

clinic wait times

budget

tests administered

statistics

customer satisfaction

abatement permits

storage capacity

employee satisfaction

professional development

lpp homes abated

asbestos permits

client screening complete

immunization compliance

strategic planning work

What could we measure related to PM & QI efforts?

- ★ # QI projects completed
- ⚙ # processes improved
- 👥 # staff trained on QI
- 📈 % programs with QI projects and progress
- 💙 % programs that have performance measures being actively measured & monitored

Example Agency-Wide Performance Management Measures

% of programs who have updated measures

% of programs that have at least 3 effective measures

% of programs reporting at least quarterly on their measures

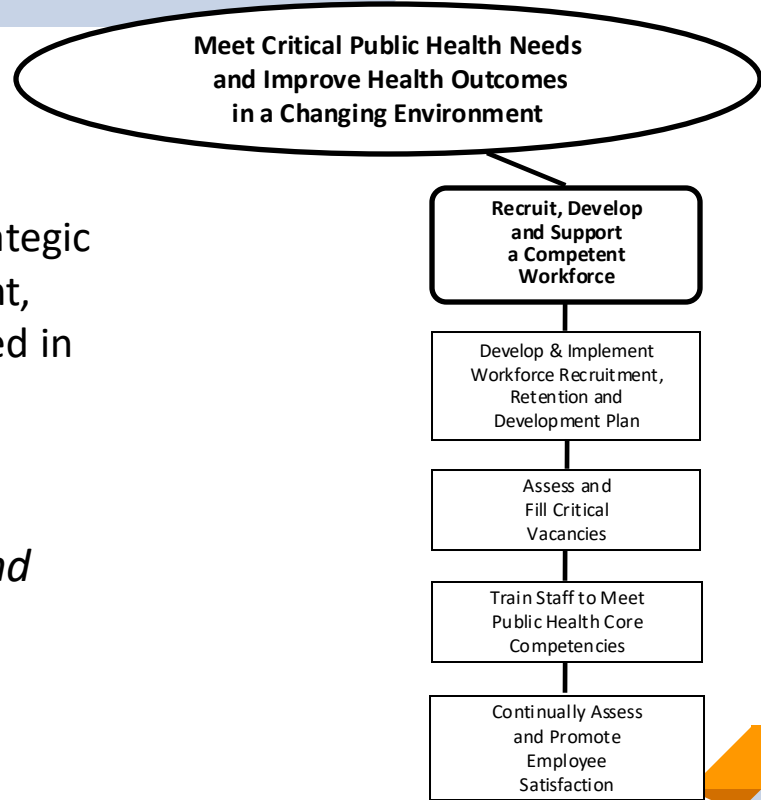% of programs who have identified a QI project as a result of their measures

# of processes that had been improved as a result of the QI or PM efforts

Group Exercise – Utilizing Chat

Scenario: This is a portion of your agency's strategic map.

In an effort to align agency plans and strategic initiatives with performance management, strategic plan priorities should be included in the PM System.

How would you define measures/ indicators *that will inform progress and decision making*

Meet Critical Public Health Needs and Improve Health Outcomes in a Changing Environment

Recruit, Develop and Support a Competent Workforce

Develop & Implement Workforce Recruitment, Retention and Development Plan

Assess and Fill Critical Vacancies

Train Staff to Meet Public Health Core Competencies

Continually Assess and Promote Employee Satisfaction

Develop the performance management plan for deploying and monitoring the system.

What is a Performance Management Plan

1. Purpose | Definitions | Culture
2. Support Structure & Council
3. Training & Resources
4. Development of Goals, Objectives, Measures (How are these revised?)
5. Monitoring
6. Identifying Improvement Efforts
7. Communication
8. Work Plan

McCarty, A. E., Armbruster, S. M., and Moran, J. W. (2020). *Collaborative Performance Management For Public Health: A practical guide.* New York, NY: ROUTLEDGE.

1. Purpose | Definitions | Culture

Developing a Performance Management Plan

PHF
Public Health Foundation

Purpose Statement

- Examples:

    - provide a framework for organizational performance management and quality improvement efforts

    - align with other agency plans and initiatives

    - introduce the foundation and structure in which the agency conducts performance management activities

- Discuss the agency's commitment to enhancing a culture of PM/QI and the desired impact

- Typically 1-2 paragraphs

Definitions

- Sets the tone or creates a consistent use of terminology

- Describes what performance management means to the agency and how it aligns with the agency's mission, vision and strategic goals

- Outlines key components to the PM System

2

Support Structure & Council

Support Structure

- Outlines the support for implementation and ongoing monitoring

- Designates who will be responsible for implementing the PM Plan

- Outlines expectations from leadership at the executive level and programmatic level

PM Council (committee or team)

- Identify key staff to serve as the PM Review Council or Team is fundamental to the process.
- Example structures:
    - The existing leadership team devotes time in every meeting or every other meeting to review sections of the PM System
    - Convene all program managers quarterly to discuss the lessons learned and report out their PM data

Culture Elements

Continuous Quality Improvement

Never ending quest to improve Aims to increase customer and community satisfaction.

Leadership Commitment

Sets vision, dedicates resources, communicates progress, addresses staff concerns and exhibits visible support for QI Structured approach to change management

Teamwork & Collaboration

Teams have clearly defined expectations. Foster collaboration among divisions and programs.

QI Infrastructure

PM/QI Council or Team, Performance Management System, QI Plan

Customer Focus

Understand and meet community needs. Codesign solutions to problems

Employee Empowerment

Include QI in job descriptions and performance appraisals, provide ongoing training opportunities, grant authority to make decisions, and eliminate fear of consequences

Culture Of QI

Source: NACCHO QI Roadmap: https://virtualcommunities.naccho.org/qi-roadmap/elements

Key Agency Infrastructure

- PM/QI Plan
    - What gets measured gets done.
    - Gets reviewed and used – living document
- PM/QI Expectations in job descriptions

- PM/QI Training

- Active PM/QI Council

- Celebration of QI Projects

☑ Performance Management System

What should the QI/PM Team discuss?

Action → Questions to Consider

- Why do these data matter?
- What result do they produce?
- Is this the result the public/stakeholders are seeking?
- What partners were engaged in this work?
- Are additional partners needed for success?
- What opportunities exist to collaborate within the agency?
- How has this effort contributed to Public Health evidence base/research?
- What QI work is happening related to this measure?

3

Training & Resources

Training

- Council members must have sufficient training to carry out responsibilities
- What resources will be made available to Council members and employees?
- Training should be targeted to improve PM & QI skills, knowledge and practices
- Assess workforce to determine training needs
  - Utilize PM self-assessment
  - Assess workforce against Core Competencies for Public Health Professionals

4

Goals, Objectives, Measures

Goals, Objectives & Measures in the PM Plan

- Define the steps programs within the agency would take to begin prioritizing and developing meaningful goals, and associated objectives and measures

- Is the Council available to help programs build this out?

- Make a plan for annual reviews of agency and programmatic information in the PM System – want this to be and remain meaningful, do not want stagnant

5

Monitoring & Reporting

Monitoring & Reporting

- How will regular reporting be collected in the PM System?
- How will the data within be monitored?
- Define standardized method for organizing all goals, objectives & measures within the PM System
- Discuss ongoing expectations for monitoring of the PM System and utilization of data throughout the agency
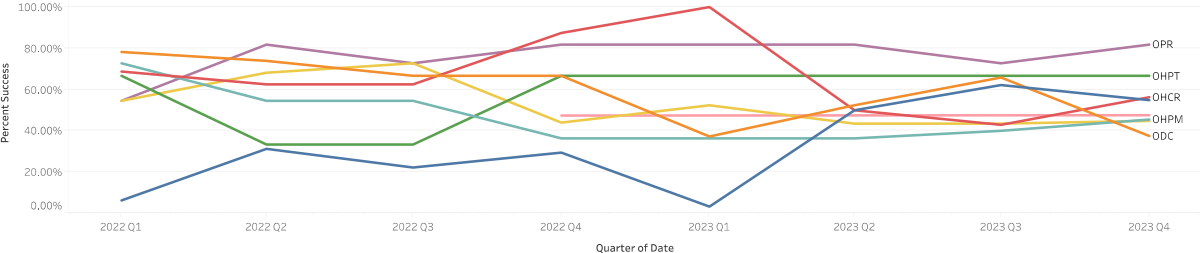
Agency Quarterly Performance Management Process
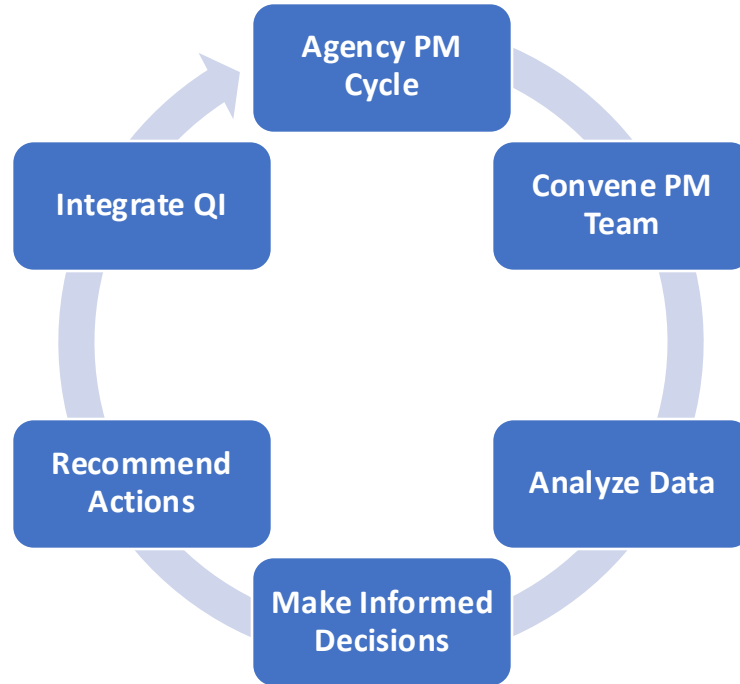
Public Health Performance Management Indicators

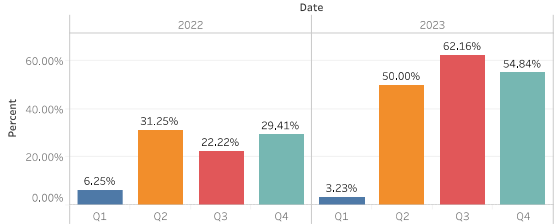| Performance Measure	Previous Period	Current Period	Target Current Period	Trend Direction	Number of Periods	Frequency
COMMUNITY HEALTH OUTCOME Goals: Measures						
[Percent of Medicaid women who smoke in the last three months of pregnancy](#)		42%	39%	⬆️ (red)	1	Annually
[Number of infant deaths due to SIDS/SUID](#)		36	35	⬆️ (red)	1	Annually
[Number of births to teenagers age 15-17](#)		522	600	⬇️ (green)	1	Annually
[Percent of third grade students with dental sealants](#)		23%	32%	⬇️ (red)	1	Annually
COMMUNITY IMPLEMENTATION Objectives: Measures						
[Number of women enrolled in quitline services](#)	196	254	336	⬆️ (green)	4	Quarterly
[Percentage of RFTS smoking clients enrolled in SCRIPT services](#)		28%	35%	⬇️ (red)	1	Annually
[Initiative: Develop a BPH communication plan for smoking during pregnancy](#)		1	1	⬤ (green)	1	Annually
[Number of WV Title I Elementary Schools with dental sealant programs](#)	105	110	110	⬆️ (green)	4	Quarterly

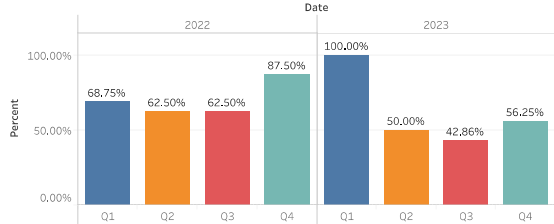# Program Goal Success Rate - All Offices

Program Goal Success Rate by each Office

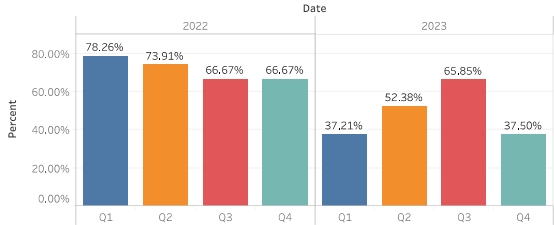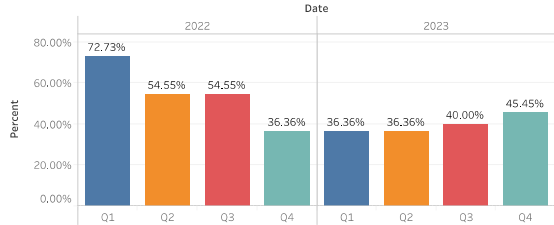* Percentages of target data compared to actual data for each fiscal year that have been met.

CMHS

OHCR

ODC

OHPM

Program Performance by Measure

Office
All

Objectives
All

Result
🟩 Met
🟥 Not Met

Office	Objectives	Measures	2022 Q1	2022 Q2	2022 Q3	2022 Q4	2023 Q1	2023 Q2	2023 Q3	2023 Q4
CMHS	Communities of Color Special At Risk Populations (COCSP)	HIV Tests Administered	🟥	🟩	🟥	🟥	🟥	🟥	🟥	🟩
		Number of HIV Referrals for screening	🟥	🟥	🟥	🟥	🟥	🟥	🟥	🟥
		Number of individuals referred for HIV Treatment	🟥	🟥	🟥	🟥	🟥	🟥	🟥	🟥
		Number of participants in Outreach and Awareness Events/Activities	🟥	🟥	🟥	🟥	🟥	🟥	🟥	🟥
		Tested Positive for HIV	🟥	🟥	🟥	🟥	🟩	🟥	🟥	🟥
	COVID Equity Program - Community Revitalization Grant	Total number of Coalition meetings					🟥	🟩	🟩	🟥
		Total number of community coalitions					🟥	🟩	🟩	🟥
		Total number of community partners								🟩
		Total number of subgrantee coaching sessions (Individual/Group)					🟥	🟩	🟩	🟩
		Total number of subgrantee community events								🟩
		Total number of technical assistances to coalitions/partners								🟥
	COVID Homeless Supports 2023	Total number of COVID-19 Home test distributed.					🟥	🟩	🟩	🟩
		Total number of educational materials distributed.								
		Total number of educational sessions.						🟩	🟩	🟩
		Total number of outreach events.								🟩
		Total number of protective equipment distributed.					🟥	🟩	🟩	🟩
		Total number of referrals to COVID-19 treatment and wrap around s..					🟥	🟩	🟩	🟩
	COVID Peer Educator Program 2023	Total number of COVID-19 vaccine, testing, treatment referrals.					🟥	🟥	🟩	🟥
		Total Number of educational sessions					🟥	🟥	🟩	
		Total number of referrals for wrap around services.					🟥	🟥	🟩	🟩
	COVID Peer Educator Program 2024	Total number of people educated.					🟥	🟥		🟥
	COVID-19 Community Based Testing and Interventions Targeting Minority Population	Education Materials: Number of people reached							🟥	🟥
		Education: Number of people referred for additional services							🟩	🟥
		Outreach Events: Connections to vaccine							🟩	🟩
		Outreach Events: Mobile testing: number and locations of events							🟩	🟩
		Outreach Events: Number of COVID tests given							🟩	
		Quarantine and Isolation supports: Number of people served								
	COVID-19 Migrant Workers Mobile Testing & Outbreak Response	Migrant Camp Response: Number of COVID-19 educational materials..								🟩
		Migrant Camp Response: Number of people getting COVID test								🟩
		Migrant Camp Response: Number of people vaccinated								🟩
		Migrant Camp Response: Number of positive test results per event								🟩
		Migrant Camp Response:Number of people referred for additional se..								🟩
		Outreach Events: Mobile testing: number and locations of events								🟩
	Hepatitis Prevention	Number of Hepatitis B screenings administered	🟥	🟩	🟥	🟩	🟥	🟥	🟥	🟩
		Number of individuals referred for screenings	🟥	🟥	🟥	🟥	🟥	🟥	🟥	🟥
		Number of individuals referred for treatment	🟥	🟥	🟥	🟥	🟥	🟥	🟥	🟥
		Number of participants in group outreach and education events	🟩	🟩	🟩	🟩	🟥	🟩	🟩	🟩
	Increasing COVID-19 Outreach in..	Number of.. Hep.. to.. COVID-19 educational/outreach events								🟥

Using the chat – what are some strategies you have for monitoring and reporting?

6

Identifying Improvement Efforts

PHF Public Health Foundation

Options for Improvement

- Formal QI Projects

- Small programmatic tweaks to delivery

- Customer feedback

- Fostering ownership of problem solving

7

Communication

Communication Strategy

- PM Success determined by communications
- Can help gain support, staff resources and momentum
- Communications necessary throughout the development, deployment and sustainment of the PM System
- Who needs to care about PM work?
- Who do we need involved to make this successful?

Guide to Communicating about Performance Improvement

http://toolbox.naccho.org/pages/tool-view.html?id=3640&userToken=ad38f0da-ede6-4b7a-9f13-69ea31ad1b0f&Site=NACCHO

8

Work Plan

	January –May Year 1	June – December Year 1	January – May Year 2	June – December Year 2	Ideas to be Incorporated As Time Permits
Performance Management Implementation Plan Summary					
Assessment	– Evaluate current culture around QI and PM and identify gaps. Develop training around these needs. Training may need to be specific to office/program needs – Review assessment results with Senior Leadership Team	– Offices/programs to evaluate current performance measures – Offices/programs to develop strategies to address performance management gaps – Re-assess Quality Culture and recognize improvements made	– Survey employees to determine PM/QI needs, interests and questions – Programs to annually review measures for reliability and meaningfulness	– Develop strategies to address quality and performance management gaps – Report progress to Senior Leadership Team	– Revise PM plan to meet the needs moving forward
Communication (Internal & External)	– Senior leadership to set and communicate PM/QI priorities to all employees – Incorporate introduction to PM/QI into the DPH's new employee orientation	– Educate employees on PM/QI Council Professional development forums for employees to learn about PM and hear about best practices	– Identify additional venues for sharing results and best practices internally and externally – Share PM/QI successes in employee Newsletter	– Communication to all employees regarding results of employee QI survey and QI Council next steps	
Customer Focus	– Work with all programs to ensure that customer base has been identified (internal & external) – Work with Senior Leadership to develop a focus on Customers	– Provide training to employees on Customer Satisfaction and the importance of Customer Satisfaction	– Evaluate Customer Satisfaction data/feedback to identify QI efforts/projects	– Provide training to employees on Customer Satisfaction – Assess utilization of customer satisfaction data to inform program changes/improvements	– Use data regarding percent of staff who have completed Customer Satisfaction Training as an agency-wide performance metric
Performance Management	– Adopt criteria for evaluating measures – Provide monthly updates to all staff that highlight PM/QI related efforts	– Design a process for sharing PM data – Provide training to employees on PM basics	– Council to serve as QI resource for staff to help troubleshoot PM/QII issues	– Provide monthly updates to all staff that highlight PM related efforts	

Available at PHF's website:

http://www.phf.org/resourcestools/Pages/Collaborative_Performance_Management_for_Public_Health_A_Practical_Guide.aspx

ROUTLEDGE FOCUS

COLLABORATIVE PERFORMANCE MANAGEMENT FOR PUBLIC HEALTH

A Practical Guide

Amanda E. McCarty, Sonja M. Armbruster and John W. Moran
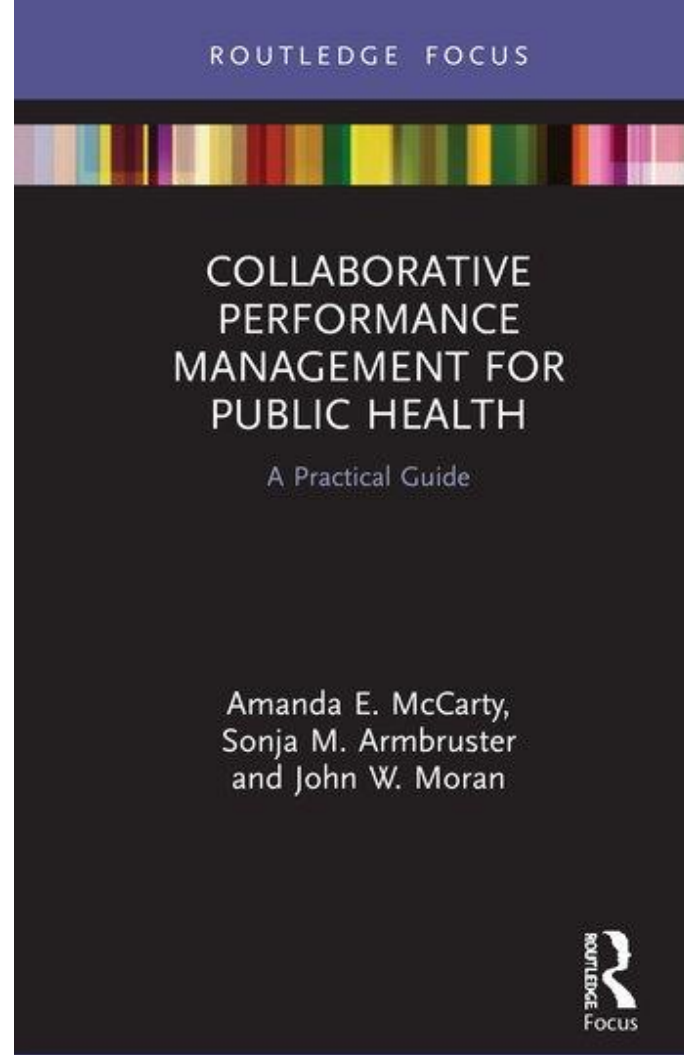
McCarty, A. E., Armbruster, S. M. & Moran, J.W. (2020). *Collaborative Performance Management For Public Health: A practical guide*. New York, NY: ROUTLEDGE.

What's one new thing you'd like for your program to try related to Performance Management?

All responses to your question will be shown here

Each response can be up to 200 characters long

Turn on voting in Interactivity to let participants vote for their favorites

Save the Date

Webinar #2

Operationalizing Performance Management in a Health Department

September 17, 2024 | 3 PM ET

Save the Date

Elevating Tools and Resources for Transforming Performance Management

October 29, 2024 | 3 PM ET

astho ™

Evaluation

https://bit.ly/4dTQSXg

Questions: performanceimprovement@astho.org