

# Performance Management Framework Presenters: Rachel Posnick, Epidemiologist Lyndsie Schwarz, Health Educator



February comment

February comme

March comments

March comments:

Fraction:

Performance Standards are comprised of organizational or system standards, targets, and goals to improve public health practices. Standards may be set based on national, state, or scientific guidelines, benchmarking against similar organizations, the public's or leaders' expectations, or other methods.<sup>1</sup>

Performance Measurement is the development, application, and use of performance measures to assess achievement of performance standards.<sup>1</sup>

Performance is measured at

program and community.

three different levels: process,

•Short term outcomes

Many process measures

may contribute to each

Mid-term outcomes

Many program measures

Action Item

(including

Marion County program measures were

developed by program leaders with input from

staff. Moving forward programs will develop

new measures as standards are met. Positive

outcomes from the Strategic Plan as well as QI

projects will be monitored for maintenance of

progress as program measures.

**Root cause identification –** Inconsistent

process and definition of terms.

may contribute to each

Long-term outcomes

•Indicate overall health of

community water syster alerts being addressed by 100.0% Marion County within one nvironmental working day Fraction: N = Number of water system alerts addressed in one working day/Number of water system alerts Percent: December comments: Percent: July comments Percent: | Comments restaurant violations addressed by "closing the 98.5% 98.0% loop" or reinspection nvironmental N = Number of restaurants Target Source: Fraction: with properly addressed violations/Number of Marion County Health restaurants with violations Percent: December comments: Percent: July comments: enerated by Marion Cou \$260,450.00 \$260,450.0 vital statistics Target Source: Fraction: Fraction: Vital Statistics N = Percent of net revenue Marion County Health reporting period Department 2013 Vital

Marion County Public Health performance standards include targets from an array of sources ranging from national benchmarks like Healthy People 2020 and United States Department of Health and Human Services to targets established by Marion County Public Health staff. All levels of performance standards hold us accountable to achieve goals and provide better service to our community.

Marion County United States Health Indicato Target Year Data Year Data Year 2012 85.0% Hospital ncrease percent of infants receiving arget Source 2012 70.0% 71.6% Hospital birthdose of 60.5% Hepatitis B at Santiam local hospitals Healthy 2012 Hospital-People 2020 Marion County United States Oregon Target Data Year Data Year 100,000 Decrease HIV incidence rate 6.6 per 100,000 19.1 per 100,000 5.31 per Jnited States 2012 2012 100,000 Department Health & Human

### PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM

USIBLE LEADERSHIP **PERFORMANCE PERFORMANCE MEASUREMENT STANDARDS**  Identify relevant Refine indicators Define measures standards Select indicators Develop data systems Set goals and targets
 Collect data Communicate expectations REPORTING QUALITY **PROGRESS IMPROVEMENT**  Use data for decisions Analyze and interpret data to improve policies, Report results broadly programs, outcomes • Develop a regular Manage changes reporting cycle Create a learning organization

Criteria for selecting a measure for a

The measure is not consistently meeting the

standard or target & the appropriate target is set

(indicated by red shading in the program measure

The problem is within our control or influence

➡There is a significant number of customers

Resources are available for the project.

There is a need for improvement/it is a significant

icrease DTaP4 coverage in 2 year olds

N = Number of 2 year olds

receiving 4th DTaP at

MCHD/Number of 2 year olds

due for 4th DTaP at MCHD

community water system

alerts being addressed by

Marion County within one

N = Number of water system

Alerts addressed in one working day/Number of Alerts

ncrease percent of restaurant

violations addressed by "closing the loop" or

reinspection

N = Number of restaurants

with properly addressed

violations/Number of restaurants with violations

There is a potential for cost savings.

formal QI project:

tracking log—seen below)

Immunization

Environmental Health

Environmental Health

affected

problem

Figure 3:	
Strategic Priority 1: Provide the Five Basic Health Services	
Goal 1: Improve and/or maintain infrastructure that supports the Five Basic Health Services	

Goal 1: Improve and/or maintain infrastructure that supports the Five Basic Health Services			
<b>Objective A:</b> Develop process for the addition, evaluation, and removal of program measures from the performance management of the performance management o	rement system		
Linkages: Performance Management System, Quality Improvement Plan	sement system		
Action Steps	Responsible Party	Target Completion Date	Update on progress
a: Complete writing process for the addition, evaluation, and removal of program measures	Epidemiologist (Rachel Posnick)	July 2015	
b: Get process approved by Public Health Quality Council	Epidemiologist (Rachel Posnick)	Aug 2015	
c: Implement approved process	Public Health Quality Council	Dec 2015	
Objective B: Assure program and public health division non-medical policies are clear and concise, are reviewed and appro	ved at least every 5 years and adhere	to proper policy format	
Action Steps	Responsible Party	Target Completion Date	Update on progress
a: Assess current development and maintenance procedures of program and division non-medical policies.	Accreditation Coordinator (Lyndsie Schwarz)	July 2015	
<b>b:</b> Develop spreadsheet to track last review date and when due for next review for all program and division non-medical policies	Accreditation Coordinator (Lyndsie Schwarz)	Sept 2015	
<b>b:</b> Develop checklist tool to facilitate alignment (including peer review process) with PH-6 Standardization of Written Materials for Documentation, Communication, and Outreach	Accreditation Coordinator (Lyndsie Schwarz)	Dec 2015	
c: Get check list approved by Public Health Management Team	Accreditation Coordinator (Lyndsie Schwarz)	Jan 2016	

Figures 1 & 2 are small sections of our program measures and community Figure 3 is a section of our strategic action plan.

**Reporting Progress** is the documentation and reporting of how standards and targets are met, and the sharing of such information through appropriate feedback channels.1

Marion County reporting of progress adds transparency and assures all stakeholders are on the same page. Allows us to prioritize targeted improvement based on data.

## **Reporting Matrix**

		Reported to:			
	Report Format	Marion County Health Department Staff	Stakeholders/ Partners	Community/ Public	
ators	Program Measure Tracking Log	<ul> <li>Quality Improvement         Committees</li> <li>Community Health         Awareness Team</li> </ul>	•Health Advisory Board	N/A	
Select Indicators	Community Health Assessment		•Email •Board of County Commissioners	•Internet	
	Community Health Improvement Plan	•Team Meetings	•Email •Board of County	•Internet	
	Strategic Action Plan		Commissioners		

#### **Force Field Analysis**

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DRIVING FORCES:	RESTRAINING FORCES:
Required by state to inspect semi-annually.	Unable to locate mobile unit
Operator pays for inspections via license fee	Unit licensed but no commissary.
Ensure safe food and public health/safety	Mobile unit not operating.
Have owner/operators contact info from plan review	Phone number disconnected
Clear info provided.	No longer at previous address/location
Clear schedule location and time provided.	Leave messages and operator does not return calls or respond.
Current phone number provided.	Operators not responding to letters sent.
Commissary info, location and hours of operation provided.	Incomplete paperwork submitted
Standardize how many attempts needed before writing off.	Not operating in county
Use consistent language on reports/letters.	Unable to locate operator
Track time to find/ locate then could quantify savings.	Unit sold.
Area satisfaction	Cooking at home.
Personal accountability	Don't know how many attempts are enough to write off a unit.
Make sure operators know rules of food safety	Operate in multiple areas-assumption assigned inspector will inspect
Make sure operators are working within their class	Operate at busy event or weekend, too busy/ tired to get and skip because assume it will be inspected later by assigned inspector.
	Hard to find mobile
	Hard to communicate with mobile
	Waste time
	No standard procedure. Process done 5 different ways.
	No process to discontinue license.
	No guidelines.
	Track time to find/locate then could quantify savings
	Seasonal unit not inspected when in operation.
	Off hours of operation
	Operator won't tell where they are set up
	No set location/hours

Percent: February comments

Percent: February comments:

February comments:

286/450

100.0%

raction:

99.2%

120/121

January comments:

January comments:

**Flow Chart** Determine location and time of operation Pull file Observe/follow Look at previous inspection email Call Social media Ask last inspector Located? YES Inspect Input inspection Bad phone number (disconnected no return call, wrong number)
No history. Can't find. Send letter (not operating, seasonal, etc)

process or program measure.

March comments

March comments

279/440

Percent:

100%

Fraction:

98.7%

154/156

Go to ACT Adopt Protocol. Continue to collect and monitor data. As a

with properly addressed 131/135 120/121 violations/Number of Organizing the levels of performance measurement into process, program and community measures allows staff to see the effect of everyday actions on community health = process measure = program measure = community measure †appropriately assigned case load ↓inactive cases in

Create letters & policy. Test protocol.

Subject:
A Zastoupil,REHS
A Zastoupil,REHS
Of/01/2013

99.2%

**Quality Improvement** Ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality to improve the health of the community.<sup>2</sup>

Go to DO

#### Plan-Do-Check-Act (PDCA) project

lan

Problem: It was taking our environmental health sanitarians too long to find food trucks to inspect. AIM- We aim to increase our documented mobile unit inspection rate from 52% to 100% by Dec 31, 2013.

year olds

N = Number of 2 year olds

receiving 4th DTaP at

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Alerts addressed in one

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Marion County within one

Fraction

Percent:

100.0%

Fraction:

Percent:

97.0%

Fraction:

January comments:

January comments:



abject: Prepared by: Approved by/Date tandard Inspection procedure for mobile A. Zastoupil,REHS Rick Sherman,REHS PURPOSE: All licensed mobile units must be inspected semi-annually and properly documented dition:
"Mobile Unit" means any vehicle that is self-propelled or that can be pulled or pushed down a sidewalk, street, highway or waterway, on which food is prepared, processed or converted or which is used in selling and dispensing food to the ultimate consumer.

Inspector shall go to site of operation during operating hours and inspect in timeframe required (every six months, once per semi-annual inspection period).  $3. \ \ \text{If the mobile unit is not available for inspection the following action is required:}$  Two attempts are to be made at inspecting operating location and documented in Phoenix as surveillance inspections. One phone (and email, if possible) and one mail contact using template letter (H:VENV Home\Mobile Units\Letter templates) is to be made.

c. If no response, send certified template letter ( $\underline{HAENV\_Home} \underline{Mobile\ Units}\underline{Letter\ templates}$ ) to operator d. If no response then document in semi-annual inspection that mobile unit is not operating

If the unit has two consecutive not operating semi-annual inspections, the unit will be closed in Phoenix and a copy of the inspection report stating out of business will be mailed to operator.

**Before QI** After QI inspections performed

Sources: 1 Public Health Foundation, 2 Public Health Accreditation Board, image PDCA from Oregon Health Authority