



When the Standards Align

Developing a Process of Performance Management and
Quality Improvement for Public Health and Clinical Health Care

OUR NATIONS, OUR JOURNEYS INDIGENOUS
PUBLIC HEALTH FORUM

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Objectives Today

1. Describe the basics of a performance management system and the QI process.
2. Identify strategies for aligning clinical health care and public health performance management and quality improvement efforts.



Introductions

What brings you here today?

Performance Management: What Is It?

CONCEPTS AND COMPONENTS OF PERFORMANCE
MANAGEMENT

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Purpose of Performance Management System

“...to move the field of public health from simply measuring performance of individual programs to actively measuring and managing performance of an entire agency system.”

Silos to Systems: Using Performance Management to Improve the Public's Health.
Turning Point Performance Management National Excellence Collaborative: Seattle,
WA; Turning Point National Program, 2003

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Performance Management System

A fully functioning performance management system that is completely integrated into health department daily practice at all levels includes:

- **Setting organizational objectives** across all levels of the department

- **Identifying indicators** to measure progress toward achieving objectives on a regular basis

Performance Management System

A fully functioning performance management system that is completely integrated into health department daily practice at all levels includes:

- Identifying **responsibility for monitoring progress** and reporting

- Identifying areas where achieving objectives requires **focused quality improvement** processes

PM – A Familiar Analogy

“Taking the Temp” of Your
Organization



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Okay, so what is performance management - really?

Uses Data to Measure and Evaluate

- The quantity of your efforts and your capacity to undertake your work
- The quality of your efforts
- The outcomes of your efforts

Main Goals for Performance Management

- Improved quality and performance-to be more Effective & Efficient
- Increased transparency
- Collaboration across the health system

PM helps answer these types of questions

- How well is our health department performing?
- Do we all know where we are headed?
- Are we making progress as an organization?
- Are we achieving what we set out to do?
- Are we accountable and demonstrating results?
- Do we need to do something different?



What is a Performance Standard?

A performance standard establishes the level of performance expected

(External or your own)



Example: This is a Standard to be met

90% of Tribal member kindergarten students enrolled in the public schools will be in compliance with immunization requirements

- **What?** Immunization compliant
- **When?** No specific date. A standard to be reached
- **How Much?** 90%
- **For Whom?** Tribal member kindergarten students enrolled in public schools

What are Performance Measures?

Regular collection and reporting of data

- to track work produced
- and results achieved
- to assess progress toward the performance standards

Courtesy of James Butler & Associates



To Summarize Measurement

A performance measure measures something. It can measure:

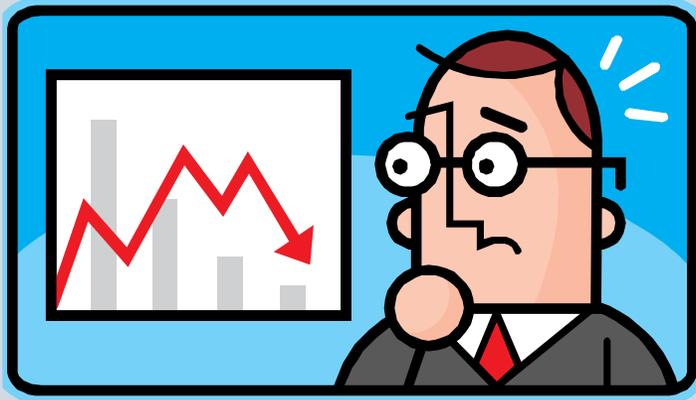
- Your **capacity** to undertake public health services
- The specific **things you do** to provide the services or **how you do them**, and
- The **consequences** of having provided the services

It is a **quantitative representation** of public health activities

Courtesy of James Butler and Associates

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Where does QI come into all of this?

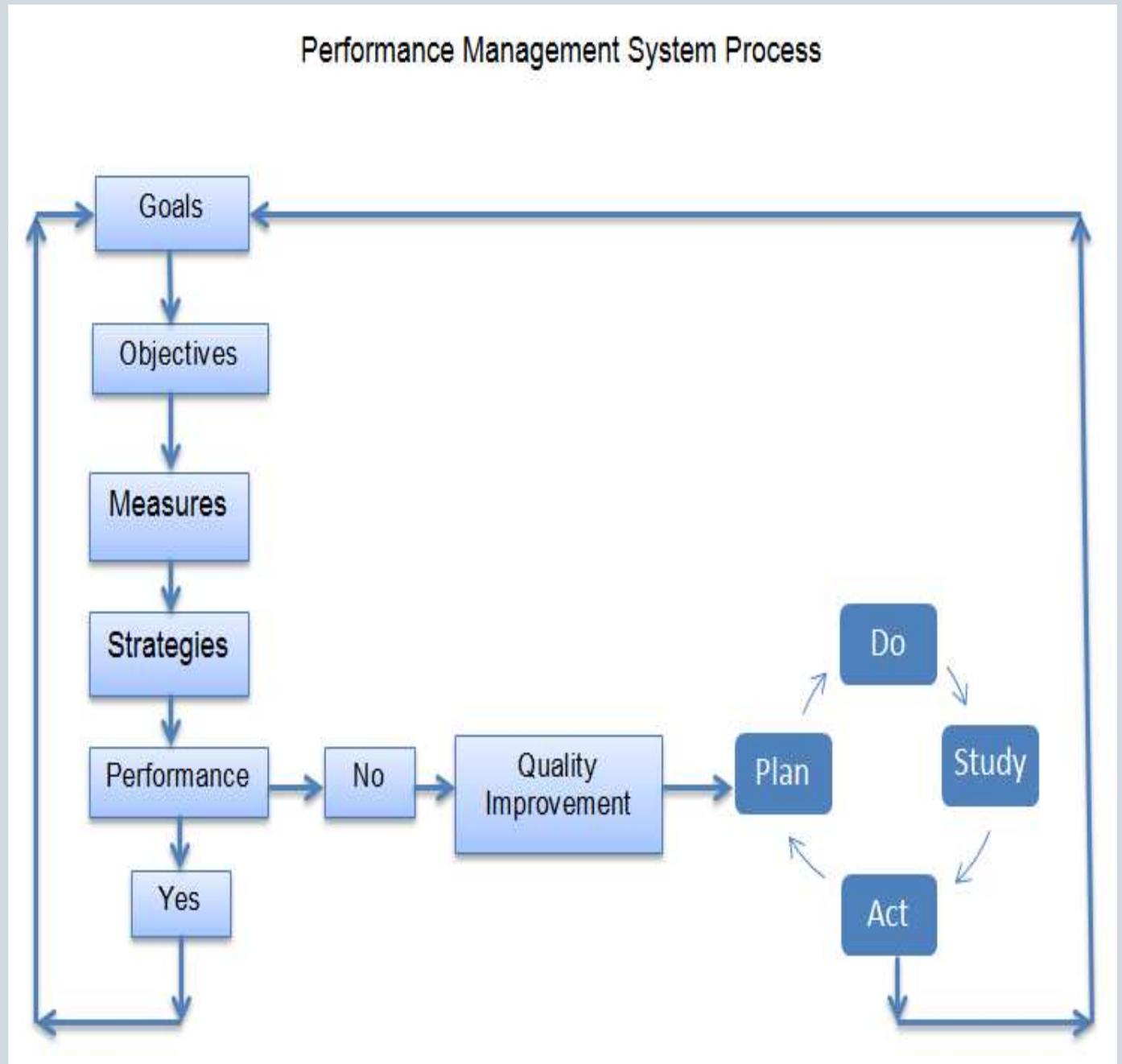


Quality Improvement

Quality Improvement is what you do to “fix” a problem that you found “not up to the standard”

Performance Management System Process

Pierce County Health Department, WI,
Performance Management System and Quality Improvement Plan, January 2013-December 2014.



These Are Not the Same

Quality Assurance

- Reactive
- Works on problems after they occur
- Regulatory usually by State or Federal Law
- Led by management
- Periodic look-back
- Responds to a mandate or crisis or fixed schedule
- Meets a standard (Pass/Fail)

Quality Improvement

- Proactive
- Works on processes
- Seeks to improve (culture shift)
- Led by staff
- Continuous
- Proactively selects a process to improve
- Exceeds expectations

Adapted from Introduction to QI_NACCHO QI site

Performance Management Where does it fit in accreditation?

Domain 9 - From the Eagle's viewpoint

“Cultivating a culture of high performance and quality”

(A Tribal Public Health Accreditation Readiness Guidebook and Roadmap, p.9)



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Performance Management

Lessons Learned from the Three Sisters – Corn, Beans and Squash

- When accreditation process is like the planting cycle from planning to harvest
- Then, the performance management system is the garden!
- The gardener does the planning, the oversight, the “how did that go?”, and the tweaking for the next harvest
- The gardener may be the PM/QI manager, the accreditation coordinator or a committee



Putting the Pieces Together

HOW DOES PM RELATE TO CLINICAL HEALTH CARE?

Your Turn!

Think about one area where you've had an understanding of what clinical might be doing differently or the same as public health



Clinical Health Care

To whom do they answer?

GPRA/GPRAMA - Government Performance and Results Act of 1993 & GPRA Modernization Act

- An IHS Clinical Reporting System
- The clinical standards (called “targets”) and measures are set by the IHS in conjunction with the Department of Health and Human Services
- No local measures or targets in this reporting system.. Although a clinic may decide to measure and report local measures for their own use

- The handbook never uses the words “performance management” or “quality improvement”
- It is implied that a clinic will continue to strive to meet the targets set each year
- No mention of the “how” to meet the targets

National GPRA/GPRAMA Report Performance Measure List and Definitions,
V.18, Nov. 2017

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GPRA Example

Note the categories that are of similar interest to Public Health

Target is individual patient behaviors/results

GPRA FINAL	National 2017 Target %	Denom	Panel % Met YTD
DIABETES			
Good Glycemic Control <8	48.4%	377	54.6
Controlled BP <140/90	63.8%	377	65.8
DM Statin Therapy	61.9%	288	69.1
Nephropathy Assessed	63.3%	377	69.2
Retinopathy Assessed	63.1%	376	70.7
DENTAL			
Dental Access General	29.7%	3205	47.2
Intact Sealants 2-15	16.6%	753	19.3
Topical Fluoride 1-15	29.9%	786	45.4
IMMUNIZATIONS			
Influenza 6mos - 17yrs NEW	37.1%	609	28.4
Influenza 18+ NEW	38.7%	1680	41.1
Pneumovax Ever 65+	86.7%	204	88.2
Active IMM 4313*314	74.8%	17	64.7

Clinical Health Care

To whom do they answer?

AAAHC – Accreditation Association for Ambulatory Health Care, Inc.

- Voluntary to seek accreditation for a health clinic
- They define PM and/or QI: ”In striving to improve the quality of care and to promote more effective and efficient use of facilities and services, an accreditable organization maintains a quality management and improvement program that links peer review, quality improvement activities, infection prevention and safety, and risk management in an organized, systematic way

Note the language very specifically pointing to Quality Improvement, but no overall Performance Management System requirement

- Is this word choice?
- Is this due to common measures across clinical areas?
- Is this reactive/quality assurance?

Depends.....

The 2018 edition of the *Accreditation Handbook for Ambulatory Health Care*

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No right or
wrong....

Just a different view
of each of our
worlds...



Clinical Health Care & Public Health PM/QI

Various Models Possible

- Tribal government might have overriding initiatives to achieve
- Strategic plans may have similar, or common, goals-objectives-strategies
- Clinic & public health acknowledge that there is common data & initiatives, but each plays their own role, e.g. childhood obesity, alcohol use, breastfeeding
- Clinic health care & public health go their separate ways
- Sharing of areas of concern, quality improvement studies, etc.
- Joint committees to coordinate strategies on health issues for the community
- All the way up to a common data and reporting tool with separate sections

Clinical Health Care

How do we talk with each other?

- Be aware of clinical language being slightly different... quality assurance, may not understand QI as formal projects, may not have had opportunities to learn PM/QI
- Strive to understand their view of the individual/family as patient vs. groups and the community as public health's "patient"



Questions

Questions or concerns about Performance Management or understanding of what clinical might be doing differently or the same as public health



What's up
next ?

Carrie Sampson

Quality Director and
Interim Community
Wellness Director

Yellowhawk Tribal
Health Center on
the Confederated
Tribes of the
Umatilla Indian
Reservation



Selected Resources

1. Seven Directions, A Center for Indigenous Public Health, *A Tribal Public Health Accreditation Readiness Guidebook and Roadmap: Cultivating a Culture of High Performance and Quality: Lessons Learned from the Three Sisters-Corn, Beans, and Squash*. (March 2018).
2. Crucial Conversations, Grenny, Patterson, McMillan, Switzler, VitalSmarts, L.C., 2004.
3. Public Health Foundation ,
http://www.phf.org/focusareas/performancemanagement/Pages/Performance_Management.aspx
4. Public Health Foundation. *Turning Point: Performance Management Projects and Publications*.
http://www.phf.org/resourcestools/Pages/Turning_Point_Project_Publications.aspx. Accessed February 15, 2018.
5. NACCHO Roadmap to a Culture of Quality Improvement , <http://www.qiroadmap.org/culture-to-qi/>
6. Public Health Quality Improvement Exchange, www.phqix.org

A close-up, grayscale photograph of a horse's face, showing its eye and part of its muzzle. The image is slightly blurred, creating a soft, artistic background for the text.

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Practical Solutions for the Public Good

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