



# **Accreditation Support Initiative for Public Health Departments**

## **Mills County Case Study**

### **I. Background**

The Public Health Accreditation Board (PHAB) standards have pushed work on performance management in public health into the forefront. Performance management utilizes performance measures to compare data describing actual performance and data describing ideal performance. It emphasizes that data should be collected, analyzed and reported on regularly. Finally, when the data identifies a gap or situation that needs to be resolved quality improvement is used to address the gap or situation.

This project aims to assess the performance management capabilities of three county health departments in Iowa through interviews and submitted evidence. The participating departments received feedback on how to improve performance management capabilities to better meet the PHAB standards. Mills County, with a population of 15,059 was the smallest county selected to be a part of this project.

### **II. Analysis of Local Public Health's Use of Performance Management**

In order to analyze Mills County's performance management capability the department was asked to complete three activities.

1. Complete and submit a performance management readiness assessment.
2. Submit documentation demonstrating how their department meets Domain 9 of the PHAB standards.
3. Participate in two site visits with Iowa Department of Public Health staff to discuss the outcomes of activities one and two.

#### *Performance Management Readiness Assessment*

Overall the readiness assessment showed that Mills County has several strengths related to performance management but that much of the work around performance management has been informal.

## Strengths:

- Mills County has a strong understanding of what performance management is. They define it as a system that assures they can do quality work in the most efficient way possible, and as a way to determine if they accomplished their intended goals.
- Mills County would like to have a department-wide performance management system in place.
- Stakeholder feedback is obtained via satisfaction surveys, and this feedback is used to determine what changes need to be made.
- Monthly progress reports are submitted to the local board of health.
- Project managers meet weekly to discuss their progress.

## The department had the following challenges:

- Performance management and quality improvement are not done at a department level; instead program managers are responsible for their program's performance management and QI, and report this informally to the department head.
- Because performance management work is informal, there is little documentation of activities, making it difficult to prove that Mills County is practicing performance management.
- The department does not have a strategic plan, performance targets and monitoring are grant driven and based on funders' requirements.
- Programs not grant funded are not assigned specific performance measures and standards.

### *Use of data for making program management decisions*

Program managers are responsible for making decisions based on progress report results. The department has difficulty deciding what types of data to collect, and currently collects easily attainable data. Program management decisions based on data occur most frequently in grant funded programs. Formal documentation of the process does not exist.

### *Use of quality improvement*

Mills County reports that if a need for improvement is shown program staff and the department head meet to discuss ways to beneficially change the program. There is no formal process to conduct quality improvement in the department beyond this. Personnel and financial resources are not specifically allotted to quality improvement efforts. Quality improvement tools are sometimes used, but without the time or resources to train more staff quality improvement will remain informal.

### *Evidence for complying with PHAB standards related to performance management*

The department submitted documentation for three of the six Domain 9 measures. During the interview IDPH brainstormed with department staff about other documentation that could be considered.

#### Strengths:

- Regular meetings of staff provide opportunity to share about performance management and quality improvement.
- Local board of health receives regular progress updates.
- Programs with written goals and measures are tracked well and data is analyzed at least annually.

#### Gaps:

- No minutes are taken at leadership team meetings, this makes it difficult to show decision making process is based on data.
- If programs aren't grant funded performance measures are not in place.
- Staff aren't familiar with quality improvement tools or performance management concepts.

## **Conclusions and Recommendations**

### *Local public health's readiness for the use of performance management*

The Mills County Public Health Department is eager to begin using performance management, and understands the value of using quality improvement and performance management. The department is currently not ready to department wide performance management system. However, the department is willing to take small, manageable steps in order to increase their accountability and effectiveness.

### *Improvements for evidence collection to comply with PHAB standards*

As previously mentioned, the department does not currently meet all of the PHAB Domain 9 standards. Many positive activities taking place at the department cannot be submitted as evidence because they aren't documented. The department was encouraged to consider some strategic planning about how to formally approach performance management and quality improvement. Once the department has determined what projects should be included, consensus should be gained on a priority and work begun. At an interview we discussed that sometimes you have to just start. IDPH recommended quality improvement tools that could be used to begin brainstorming in preparation for strategic planning.

### *Identification of best practices for performance management*

Mills County has several examples of performance management for grant funded programs. Mills County could consider putting together similar documentation (measures, work plans, goals, etc.) about administrative and non-grant funded activities. Because the leadership team meets regularly and the board of health is well informed of outcomes Mills County has some good building blocks in place to more formally implement performance management. Finally, Mills County needs to begin doing more documentation of meetings and processes.

### *Recommendations for development of training curriculum*

Mills County requested training for staff that could be done onsite in the areas of quality improvement and performance management. They requested performance management resources and examples from counties of a similar size. Finally they requested assistance with gathering customer satisfaction data to inform their decision making process.