

# Performance Management and Quality Improvement Training Minutes

Friday, April 5, 2013, 10:00 a.m. – 12:00 p.m.  
Fresno County Department of Public Health, Room 120

## NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

- A. All in attendance introduced themselves
  - I. Those present at the training were: Sara Bosse, Maureen McCann, Dan Lynch, Pat Kirby, Dave Pomaville, Rose Mary Garrone, David Luchini, Ed Moreno, Karen Nunez, Joe Prado, Chris Markus, Gail Newel, Kathleen Grassi (Merced County), Allison Hensleit, John Capitman, Donna DeRoo, and Ashley Hart
- B. Pre-Training Survey
- C. Project Overview
- D. Quality Improvement Overview
- E. Public Health Accreditation Board (PHAB)
- F. Project Requirements
- G. Performance Management System
- H. Performance Measure Development
- I. Review/Renewal of Department Strategic Aims
  - I. The Department Strategic Aims were last updated 2-21-07, those present at the training were split into groups of three to evaluate the current strategic actions and revise or change as needed.
    - i) All residents in Fresno County have access to a healthier lifestyle.
      - (1) “Healthy”
      - (2) Improve access to a healthy lifestyle for the residents of Fresno County
      - (3) Health in all policies: Fresno County creates conditions that support healthy lifestyles (healthy school, work, hospital, restaurant environment), dept focused not resident focused, partners in community
      - (4) Access, want to ensure
    - ii) Fresno County prepared to respond to emergencies that impact public health and safety.
      - (1) Leave as is

- (2) Maintain, sustain current levels, maintains capacity to respond
- (3) Prepared is a more flexible word

iii) Department of Public Health is recognized as the leader in public health.

- (1) Goals can come out of this aim
- (2) Keep recognized; educate people to recognize the dept
- (3) Who recognize us?
- (4) Not define a level, board, community, state didn't know breadth of what the PHD does
- (5) Public support for the whole dept not one program
- (6) Marketing, doing the work but not recognized as the leader
- (7) Community leaders and voice of the community related to public health, credibility
- (8) ACA: changes to the PHD, involved in changes

iv) Effective and efficient organization.

- (1) Delete last two, one aim
- (2) Dept PH workforce is responsive to the ever-changing community and health care climate
- (3) Flexible, forward thinking, innovative, community focused
- (4) Need workforce to evolve with changing times
- (5) Effective and efficient administration of public health resources
- (6) External vs Internal: 4 and 5
- (7) Last two, how PHD is a leader in public health
- (8) Assess internal capacity of the PHD, improve internal flow of operations
- (9) Give employees resources they need to do work
- (10) Effective and efficient stewardship of public health assets
- (11) Less collaborative

v) Workforce excellence

J. Assigned Homework: review revised department aim statements

K. Adjourned at 12:02 p.m.

## Performance Management and Quality Improvement Training Minutes

Wednesday, April 17, 2013, 10:00 a.m. – 12:00 p.m.  
Fresno County Department of Public Health, Room 120

### NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

- A. All in attendance introduced themselves
  - I. Those present at the training were: Edward Moreno, David Luchini, Wayne For, Curtis Jack, Carolyn Vart, Tim Williams, Dale Dotson, Stephanie Kahl, Ken Austin, Sara Bosse, Rose Mary Garrone, Gail Newel, Norme Zieska, Evelyn Lotter, Claudia Smarn, Susan Shasikonis, Leila Gholamiezaei-Eha, Clara Escermertle, Ah Vang, Mary Jane Day, Deborah Kuest, Marger Morres, Rosemarie Amaral, Thea Jones, Roberta Bynum, Pilar Vasquez, Neng Moua, Tom Booth, Stephanie Garcia, Jena Adams, Van Do-Reynoso (Madera), Melody Keller (Madera), Gilda Zarate-Gonzalez (Madera), Allison Hensleit, John Capitman, Donna DeRoo, and Ashley Hart
- B. All present completed the Pre-Training Survey
- C. Project Overview
- D. Quality Improvement Overview
- E. Public Health Accreditation Board (PHAB)
- F. Project Requirements
- G. Performance Management System
- H. Performance Measure Development
- I. Assigned Homework: meet with division staff and brainstorm aim statements
- J. Adjourned at 11:42 a.m.

# Performance Management and Quality Improvement Work Group Minutes

Monday, April 29, 2013, 9:00 a.m. – 12:00 p.m.  
Fresno County Department of Public Health  
Office of Policy, Planning and Communication

## NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

Those present were: Sara Bosse, Bee Vang, Tina Starks, Ed Moreno, Leila Gholomaha, Marlene Moundjian, Rosemarie Amaral, Thea Jones, John Capitman, Donna DeRoo, Ashley Hart, and Allison Hensleit

### A. Introductions, Guidelines for Public Conversation

- a. All present introduced themselves and John Capitman explained the Guidelines for Public Conversation

### B. Reviewed Department Strategic Aims

- a. Aim 1: Keep it broad and have each division elaborate
- b. Aim 2: No comments
- c. Aim 3: “a” leader, not “the” leader
- d. Aim 4: Remove “a” as there is a lot going on, separate flexible and forward thinking, add innovations as it encompasses everything
- e. Aim 5: Remove the second work force as it is redundant, not very much continuing education, within the department is more important
- f. Add Aim 6: Public Health Accreditation Board

### C. Related Division Aims to Department Aims

- a. Allison Hensleit created a matrix to see where the division aims related to the department aims

### D. Reviewed Division Aims in Depth

- a. See attached draft Division Aims

### E. Example of S.M.A.R.T. Goals for One Aim

- a. Draft Aim: Implement an effective strategic communication / public relations plan
  - i. Sample Goal: By December 2013, the department will adopt a communication plan
- F. Assigned Homework: review draft division aims and consolidate or be ready to consolidate by the next meeting
- G. Adjourned Meeting at 11:58 a.m.

# Performance Management and Quality Improvement Work Group Minutes

Monday, April 29, 2013, 1:00 p.m. – 4:00 p.m.  
Fresno County Department of Public Health  
Public Health Nursing

## NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

Those present were: Sara Bosse, Ah Vang, Robo Mounsithirath, Diana Wells, Kathleen Kelley, Erica Alexander, Marge Morris, Mary Morrisson, Deborah Kuest, Helen Morozor, Rebecca Quijada, Jennifer Day, Aphivanh Xayavath, Gail Newel, Rose Mary Garrone, David Luchini, John Capitman, Donna DeRoo, Ashley Hart, and Allison Hensleit

### A. Introductions, Guidelines for Public Conversation

- a. All present introduced themselves and John Capitman explained the Guidelines for Public Conversation

### B. Reviewed Department Strategic Aims

- a. Aim 1: Add lifespan or lifecourse
- b. Aim 2: No comments
- c. Aim 3: debated “a” leader vs. “the” leader, people’s voice, takes all within the community
- d. Aim 4: why/how being efficient/effective, innovative means being able to evolve within the current and future challenges, stewardship means something similar and they were focused on the moral need to serve
- e. Aim 5: collaboration with in the community, excellent is non-specific, the department staff need to be well trained
- f. Add Aim 6: No comments

### C. Related Division Aims to Department Aims

- a. Allison Hensleit created a matrix to see where the division aims related to the department aims

- D. Reviewed Division Aims in Depth
  - a. See attached draft of PHN aim statements
- E. Example of S.M.A.R.T. Goals for One Aim
  - a. Draft Aim: Reduce maternal, fetal, and infant morbidity and mortality.  
Direct patient outcomes:
    - i. Sample Goal: Meet process goals for NFP program.
    - ii. Sample Goal: By XX date, 75% of babies of clients enrolled will deliver within two weeks of their due date.
- F. Assigned Homework: review draft division aims and consolidate or be ready to consolidate by the next meeting
- G. Adjourned Meeting at 3:58 p.m.

## **PHN Mission**

Increase promotion, preservation and protection of the community's health.

## **Aims**

1. Reduce health disparities of women, children and their families.
2. Reduce the black/white health disparity for AA women and infants. (Close the gap, promote wellbeing.)
3. Reduce maternal, fetal, and infant morbidity and mortality. Direct patient outcomes:
  - Meet process goals for NFP program.
  - By XX date, 75% of babies of clients enrolled will deliver within two weeks of their due date.Community outcomes:
  - Health education: number of people reached, contact logs
  - Health education: impact
4. Support elders and others with disabilities to remain safely in their homes.
5. Decrease the morbidity and mortality (OR Increase the health and longevity) of medically and socially high-risk infants and children age 0-5.
6. Maintain and support provider participation in CPSP in order to access to early quality perinatal care and education.
7. Reverse the trend of increasing infant and maternal morbidity and mortality.
8. Utilize the life course model to promote optimal health and wellbeing of women and their families.
9. Supporting pregnant and parenting women with perinatal mood disorders.
10. Support area hospitals in their effort to be baby friendly.
11. The division is recognized as the collaborative leader and voice of the community in maternal, child and adolescent health.
12. Promote preconceptional and interconceptional health of women through direct services and improvements to systems of care.
13. Use innovative strategies to maximize current and potential resources.
14. Support workforce excellence.
  - By December 2013, all division staff will comply with county, department, and program mandated trainings. Measure: At least 95%  
Data source: Training registry
  - Develop a training plan by December 2013. (Identify the priority trainings needed for each program, timeline, funding sources, mentoring, competencies, individual assessment)
15. The division leadership complies with Board of Registered Nursing regulations of DPH public health nurses.



# Performance Management and Quality Improvement Work Group Minutes

Tuesday, May 14, 2013, 1:00 p.m. – 4:00 p.m.  
Fresno County Department of Public Health, Room 120  
Public Health Nursing

## NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

Those present were: Robo Mounsithirath, Diana Wells, Jennifer Day, Marge Morris, Mary Morrisson, Erica Alexander, Helen Morozor, Rebecca Quijada, Deborah Kuest, Gail Newel, Rose Mary Garrone, Ah Vang, Kim Zepeda, Aphivanh Xayavath, John Capitman, Donna DeRoo, Ashley Hart, and Allison Hensleit

- A. Introductions and Guidelines for Public Conversation
- B. Review Department Strategic Aims
  - a. Those present agreed with the revised Department Strategic Aims
  - b. A few members in the group wanted to add diverse to the department aim, “Support and maintain a diverse and excellent workforce”
- C. Review Division Aims in Depth: Is everything covered?
- D. Review Division Aims in Depth: Choose top 3 aims per group
- E. Finalize Division Aims: Choose 6 aims for year one
- F. Create S.M.A.R.T. Goals for Division Aims
- G. Assigned homework: review division goals and determine actual and target
- H. Adjourned at 3:57 p.m.

## Public Health Nursing Strategic Aims and Goals

1. The division supports and maintains a diverse and excellent workforce
  - a. Overall indicator: 95% of division staff will be trained within one year of starting the position
  - b. Clerical staff will meet and/or exceed job standards
    - i. 6 month job rotation schedule
  - c. Nursing staff will meet or exceed job standards
    - i. Training schedule including mentorship
    - ii. Home visitation training (difficult subject matter, safety, when to call CPS)
  - d. Health education staff will meet and/or exceed job standards
    - i. Health education training schedule (mentorship/shadowing)
  - e. Supervisors will meet and/or exceed job standards
    - i. Supervisors/management training schedule
  - f. Other notes:
    - i. Evaluation writing, time management, difficult behaviors, communication, team building, home visitation, cultural competency, reflective practice, coaching, health promotion, outreach skills, spokesperson training, media policy, and leadership
2. Promote the health of women, children and the community through systems of care
  - a. Maintain a toll-free hotline to link community participants to available resources
    - i. # of calls
    - ii. # of referrals to various resources (WIC, Breast feeding, etc)
  - b. Support hospitals in the goal of becoming “Baby Friendly”
    - i. Increase # of “Baby Friendly” hospitals by X%
    - ii. All delivery hospitals will complete self-access by 6/2013
    - iii. Two hospitals be baby friendly by Fall 2013
  - c. Support CPSP providers in providing excellent perinatal care
    - i. # of site visits and chart reviews (annual for physicians)
    - ii. Provider training (quarterly)
    - iii. Provide technical assistance as needed to remain current with changes (billing changes, certification)
3. Promote the health and wellbeing of women, children and communities across the lifespan (direct service aim)
  - a. Overall indicator: X% of clients accepting referral resources, population level indicators
  - b. Comply with home visit timeline expectations
    - i. Tracking log: % of home visits within limits
  - c. Provide referral information to connect client to community resources
    - i. # of documented referrals provided
    - ii. # of documented referrals completed
  - d. Case management of referred high risk infants/children to reduce unnecessary rehospitalizations to less than 10%
    - i. Ratio: # of rehospitalizations per # of clients
  - e. Add more activities
4. Reduce health disparities

- a. Overall indicator: decrease # of CBW, VBLW, preterm, infant death prior to first birthday; decrease gap
  - b. Increase awareness of health disparities through community education
    - i. Measure level of awareness of health disparities (survey, pre/post tests)
    - ii. # of providers who refer to MCAH programs (especially BIH)
    - iii. # of providers who participate in disparity awareness education
    - iv. # of presentations to community organizations and within the Public Health Department
  - c. Promote awareness of and access to health promotion and preventative care
    - i. Increase the number of clients who report increased knowledge of health promotion activities
    - ii. Number of providers who provide expanded health education
  - d. Provide group interventions and case management services to women and children
    - i. Decrease number / % of LBW, VLBW , preterm and infant death prior to the first birthday
    - ii. Increase # of AA who participate in MCAH programs
    - iii. Increase # of Spanish speaking clients enrolled in MCAH programs
    - iv. Increase # of multilingual and disabled clients enrolled in MCAH programs
5. Use innovative strategies to maximize current and potential resources
- a. Overall indicator: Maintain / grow division budget or no overall indicator
  - b. Optimize matching funds via FFP and Title V
    - i. Track matching funds / train staff
    - ii. 5% increase in matching funds by 7/1/14
  - c. Electronic health records and data collection to improve funding and to direct policy/programs
    - i. Implemented division/department wide MIS by 1/1/15
  - d. Expand funding sources
    - i. Track funding: diversity of funding/amount of funding
    - ii. Track # of funding sources providing  $\geq$  5% of division budget
  - e. Workforce development: conduct an assessment of workforce plan in next year
    - i. Assessment completed by 7/1/14
6. The division is recognized as a collaborative leader and voice of the community in maternal, child and adolescent health
- a. Convene community meetings to promote MCAH health goals
    - i. # of meetings
    - ii. # of attendees at meetings
    - iii. # of meeting evaluations
  - b. Increase community outreach
    - i. Increase # of attendees at community events
    - ii. # of community members that access public health services
    - iii. # of clients who report satisfaction with services
  - c. Improve quality of care in child care settings
    - i. # of childcare providers completing health and safety component of accreditation requirements

- d. Participate in community collaboratives and task forces to communicate the MCAH perspective
  - i. # of meetings attended by MCAH staff
  - ii. Number of completed partnership agreements / MOU
  - iii. Evidence of task force / collaborative project impact
    - 1. Example: major collaborators survey from First 5 example, focus groups

## Performance Management and Quality Improvement Work Group Minutes

Thursday, May 16, 2013, 9:00 a.m. – 12:00 p.m.  
Fresno County Department of Public Health, Room B03  
Office of Policy, Planning and Communication

NACCHO Accreditation Support Initiative for Fresno County Department of  
Public Health

Those present were: Sara Bosse, Thea Jones, Tina Starks, Rosemarie, Marlene Moundjian, Leila Gholamrezaei-Eha, Donna DeRoo, Ashley Hart and Allison Hensleit

- A. Introductions and Guidelines for Public Conversation
- B. Reviewed Department Strategic Aims
  - a. OPPC had a suggested addition for the aims:
- C. Reviewed Division Aims and Goals in Depth
  - a. OPPC met prior to this meeting and consolidated their aim statements, created draft goals, and listed potential data sources
  - b. The group summarized why they chose these aims and goals and explained their rationale for choosing these aims
  - c. Many of the aims and goals were revised and combined
- D. Assigned homework: fill in the aim template, determine actual and targets for chosen goals and aims
- E. Adjourned at 12:01 p.m.

## **OPPC Aim and Goal Statements**

1. Aim: Increase the life expectancy in Fresno County.
  - Goal: Update and maintain YPPL Summary 2013 (multiple data sources)
    - Target: completed by X date
2. Decrease the disparities in life expectancies.
3. Promote and support healthy lifestyles and behaviors to reduce obesity and chronic disease.
4. Use innovative strategies to maximize resources.
5. Implement an effective, strategic communication and public relations plan.
6. Maintain a county-wide, comprehensive collaborative of traditional and nontraditional community partners.
7. Complete a comprehensive county-wide community health assessment and implementation plan.

## Performance Management and Quality Improvement Work Group Minutes

Thursday, May 23, 2013, 8:30 a.m. – 11:00 a.m.  
Fresno County Department of Public Health, Room B03  
Office of Policy, Planning and Communication

NACCHO Accreditation Support Initiative for Fresno County Department of  
Public Health

Those present were: Sara Bosse, Thea Jones, Tina Starks, Rosemarie Amaral, Leila Gholamrezaei-Eha, Donna DeRoo, Ashley Hart and Allison Hensleit

- A. Introductions and Guidelines for Public Conversation
- B. Reviewed Division Aims and Goals Template
  - a. See attached Division Aims
- C. Finalized Division Aims, Goals, Actuals, Targets, and Data Sources
- D. Assigned homework: choose aims and goals to pilot in the performance management system
- E. Adjourned at 11:02 a.m.

# Performance Management and Quality Improvement Work Group Minutes

Thursday, May 30, 2013, 1:00 p.m. – 4:00 p.m.  
Fresno County Department of Public Health, Room 120  
Public Health Nursing

## NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

Those present were: Marge Morris, Erica Alexander, Helen Morozor, Rebecca Quijada, Deborah Kuest, Gail Newel, Rose Mary Garrone, Kim Zepeda, Aphivanh Xayavath, Kathleen Kelley, Donna DeRoo, Ashley Hart, and Allison Hensleit

- A. Introductions and Guidelines for Public Conversation
- B. Reviewed Division Aims and Goals
- C. Drafted Actuals, Targets, and Data Sources
- D. Assigned homework:
  - a. Finalize targets, data sources, baseline, timing and responsible
  - b. Choose two goals for each aim to pilot in the Performance Management System
- E. Adjourned at 3:57 p.m.



## Performance Management and Quality Improvement Work Group Minutes

Tuesday, June 25, 2013, 9:30 a.m. – 11:00 a.m.  
Fresno County Department of Public Health, Room B03  
Office of Policy, Planning, and Communications

### NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

Those present were: Marlene Moudjian, Neng Moua, Thea Jones, Ashley Hart, and Allison Hensleit

- A. Explain the Electronic Performance Management System, including the dashboard
  - a. See sample attached
- B. Choose Red Zone Targets to Pilot in the Performance Management System
- C. Adjourned at 10:34 a.m.

## Performance Management and Quality Improvement Work Group Minutes

Tuesday, June 25, 2013, 11:00 a.m. – 12:30 p.m.  
Fresno County Department of Public Health, Room B03  
Public Health Nursing

### NACCHO Accreditation Support Initiative for Fresno County Department of Public Health

Those present were: Rose Mary Garrone, D Kuest, Gail Newel, Mary Morresson, Helen Morozov, Erica Alexander, Rebecca Quijada, Kim Zapeda, Ah Vang, Marjorie Morris, Aphivanh Xayavath, David Luchini, Diana Wells, Robo Mounsithirath, Ashley Hart, and Allison Hensleit

- A. Explain the Electronic Performance Management System, including the dashboard
  - a. See sample attached
- B. Choose Red Zone Targets to Pilot in the Performance Management System
- C. Adjourned at 12:12 p.m.