

Embracing a Culture of Performance Improvement (PI)

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Program Plan

- Mission: to improve the quality of public health practices/services to improve health outcomes
- Strategy: program management & accountability
- Framework/Theory/Terminology
- Goals:
 - to change knowledge, skills, behaviors
 - to motivate DPH to use them



Plan Goals & Objectives

- Change knowledge, skills, behaviors
 - Training & implementation tools
 - Technical assistance for projects
 - Communicate progress/results
- Motivation for organizational change

Change is mandatory. Progress is not.

- Leadership
- Incentives
- Pilot projects



Program Structure

- QI Division , under DPH Medical Director
 - PI Team - representatives from DPH programs
 - PI Team Workgroups—Training, PDSA, Data
 - Executive leadership/advisory group
-
- Terminology Challenge: Thus far, QI and PI have been used interchangeably within DPH.



Training – Plan

A program within a program...

- Create a program plan:
 - mission statement
 - goals & measurable “SMART” objectives
 - tasks & timelines
- Know your grant deliverables.
- Know the skills of your staff/workgroup.



Training – Needs Assessment

- Survey stakeholders: QI director, staff, DPH learners = end-users, etc.
- What resources already exist?
 - Within our department of public health
 - Within other departments of public health
 - Within the world of healthcare/business
- What do we need to create or assemble?



Training – Needs Assessment

- “In-house” resources we may not know about:
 - QI/PI-trained staff
 - QI/PI trainings offered to employees
 - QI/PI work already being done
- External resources:
 - What is out there (reports, guides, powerpoints, eLearning modules)?
 - Is anything evaluated?
 - Which do we want to use/promote?



Training – Needs Assessment

- Self-assessed capacity & empowerment
- Obstacles to implementation
- Desired training for targeted staff:
 - Topic
 - Format
 - Duration
 - Continuing education units
 - Certification



Training – Curriculum

- NOT – “What do I want to teach?”
- INSTEAD – “What do you want your students to be able to do when they finish your training?”
 - NOT :academic slide presentations
 - INSTEAD: practical skills training

After this training, the student will be able to do...

Fill in the blank with action verbs, on-the-job tasks...
- Your goal is a competency-based curriculum!



Training – Curriculum & Lessons

- For each competency, break it down into the steps needed to learn and apply:
 - WHY – attitude & motivation to learn
 - WHAT – knowledge & content to learn
 - HOW – skills, practice, application → ACTIVITIES
- Then, break it down into discrete lesson plans:
who, what content, what format, what take-away tools, when, where...
- The script comes LAST.



Training – Learning Theory

BLOOM'S TAXONOMY: domains & levels of learning

- **Affective domain:** WHY – receiving/awareness, responding, valuing, prioritizing, internalizing
- **Cognitive domain:** WHAT – recall/remember, comprehend meaning, apply/use concept, analyze/evaluate, create – design & implement!!!
- **Psychomotor domain:** HOW – perception, readiness to act, imitation, habit/proficiency, skilled response – can face challenges, adaptation/creation

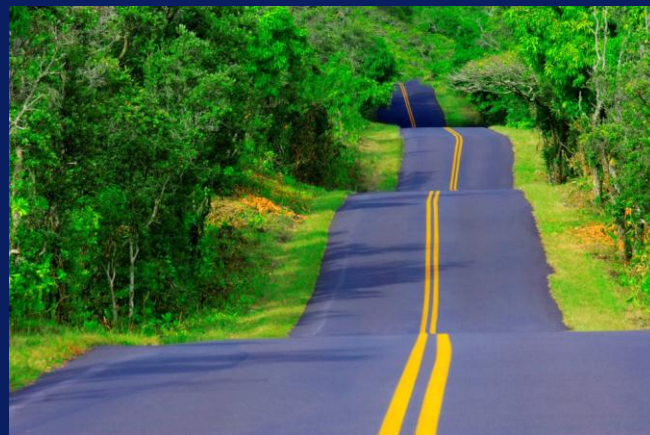
LEARNING STYLES: hearing, reading, seeing, doing



Paving a Path toward Performance Improvement

New resources to help Programs reach their own performance improvement goals:

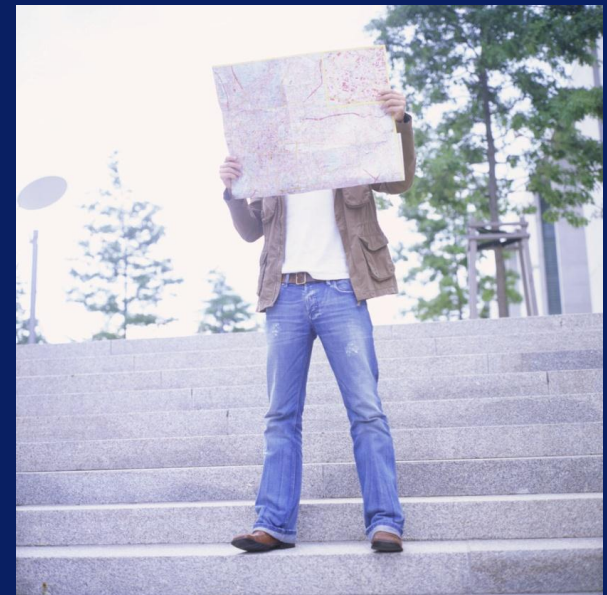
- Tools to improve staff knowledge of performance improvement principles, roles, and resources
- Streamlined process for providing PI support, tools, training and technical assistance



The PI Roadmap

Tools for Navigating the PI Process

- Written PI plan to guide Department and Program PI efforts
- Training and online tools
- Uniform system for managing PI support requests
 - Process map
 - PI Support Request Form



Three Steps Toward Improved Performance

Step 1: Review the PI plan and complete PI training.

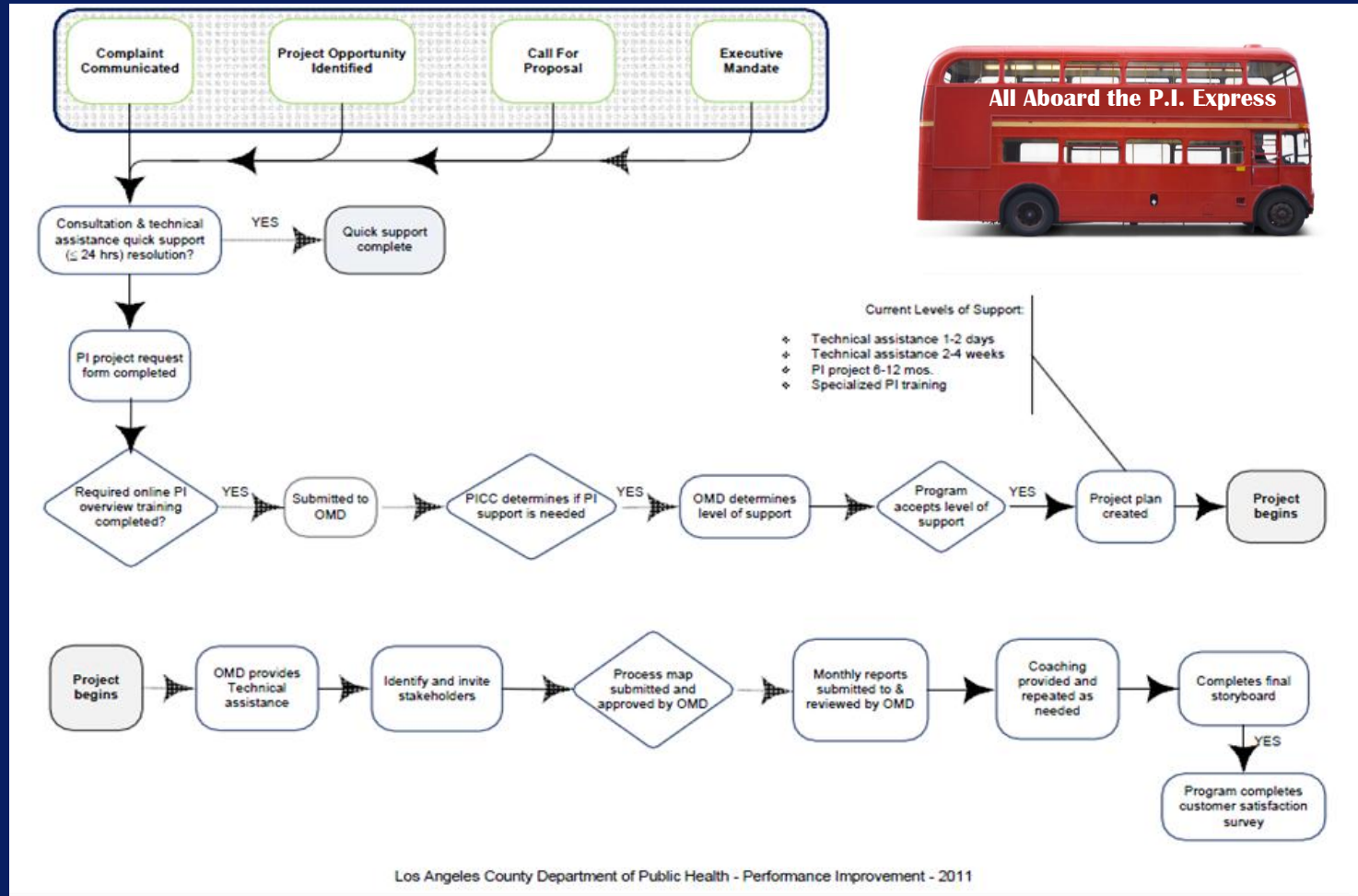
Step 2: Identify a PI opportunity and submit a PI Support Request Form to the Division of QI.

Step 3: Complete the support option recommended by the Division of QI.

- Short-term Technical Assistance
- Training
- Longer term Support for a PI Project



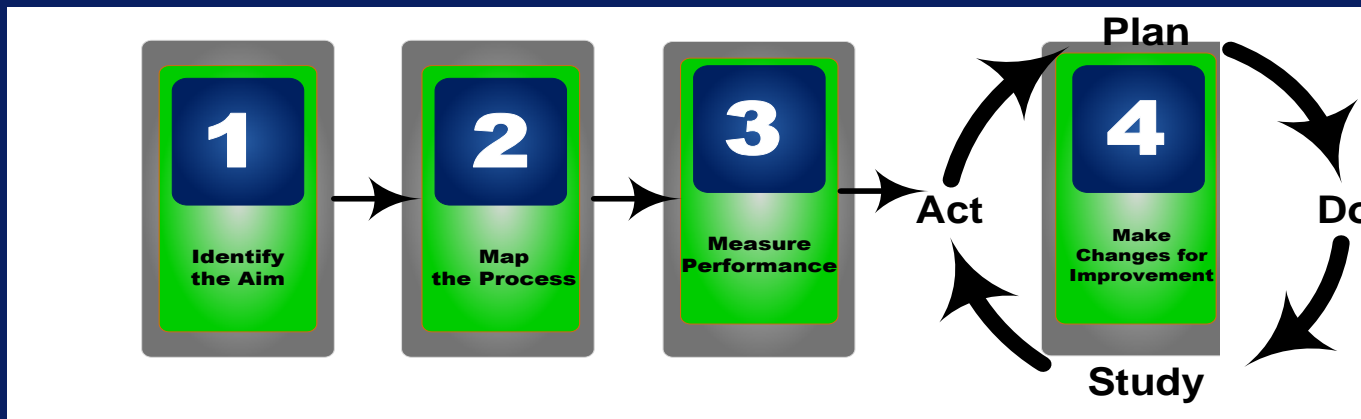
The PI Process Map



The Final Destination: *A PI Project in Every Program*

The new PI plan, training, and TA encourage adoption of:

- The 4-Step Model: Identify an aim for improvement, develop a plan to address the improvement need, measure impact, and adjust your plan.
- PDSA Cycles: Test a promising change rapidly on a small-scale, learn how it works, and refine (as needed) before implementing it broadly.



The Role of Data Management

Accurate, timely, and accessible data can help Public Health Programs and stakeholders:

- Identify PI needs
- Test process changes
- Compare outcomes between Programs, Departments and regions
- Improve decision-making at the Department and Program level



PI Measurement can Enhance Organizational Effectiveness

- Each DPH Program tracks population indicators and performance measures.
 - 74 population indicators
 - 227 performance measures
- Measures should be:
 - evidence based
 - archived/storage for analysis
 - used for change or improve the care/service



Building the Performance Improvement Application

- **Data Workgroup formed to develop a PI Application**
 - Led by the Office of the Medical Director, with representation from 31 DPH programs
- **Aims of the PI Application**
 - Centralized, more efficient data tracking
 - Generate cause-effect diagrams, process maps and graphics for storyboards and reports
 - Aggregate and track results
 - Use data to learn from other Programs

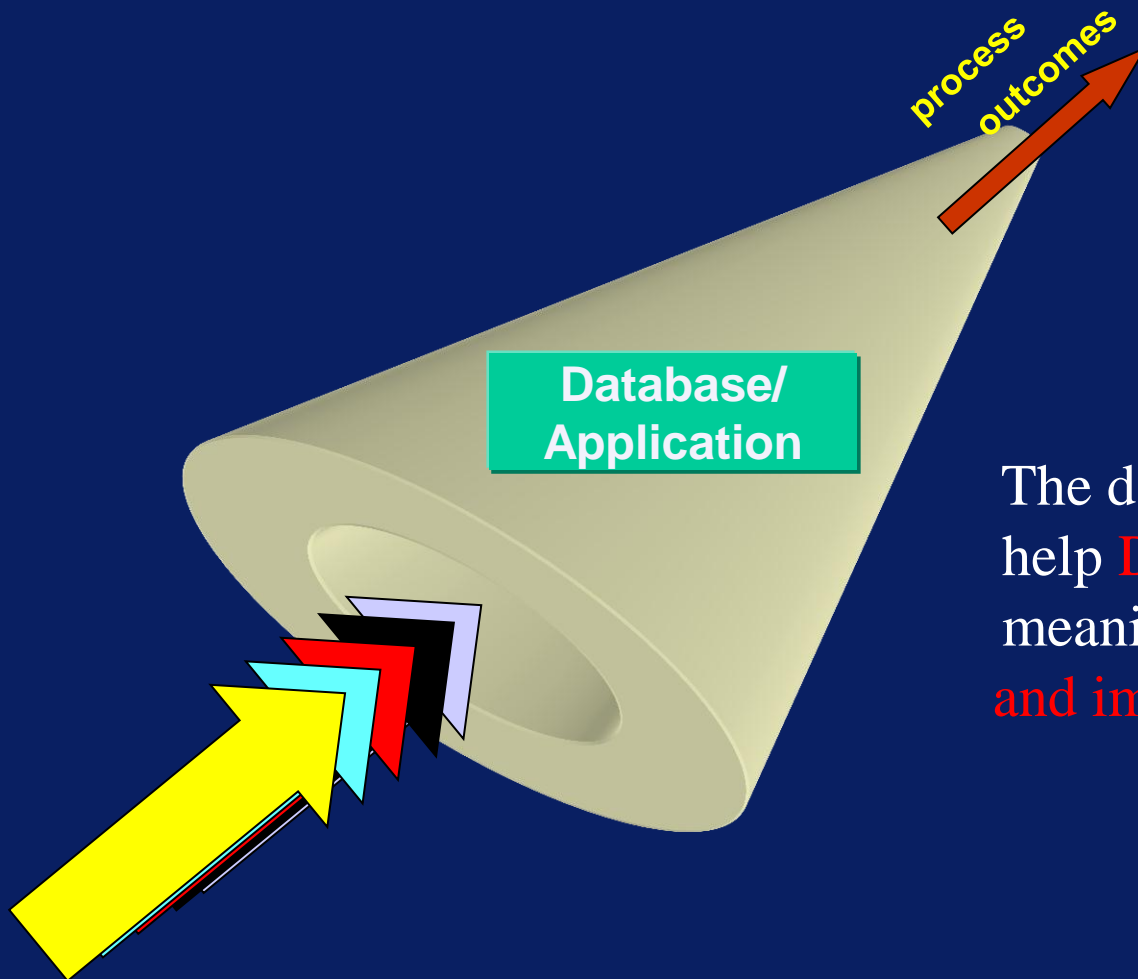


PI Application Key Features

- Easy import and export options
- Query capability for data management and analysis
 - Standardized reports at the push of a button
 - Tracks indicators over time
- High impact visual representations of data
 - Bar graphs, trend lines, dashboards, etc.
 - Import capability for GIS mapping
- Future interface with Business Intelligence Software



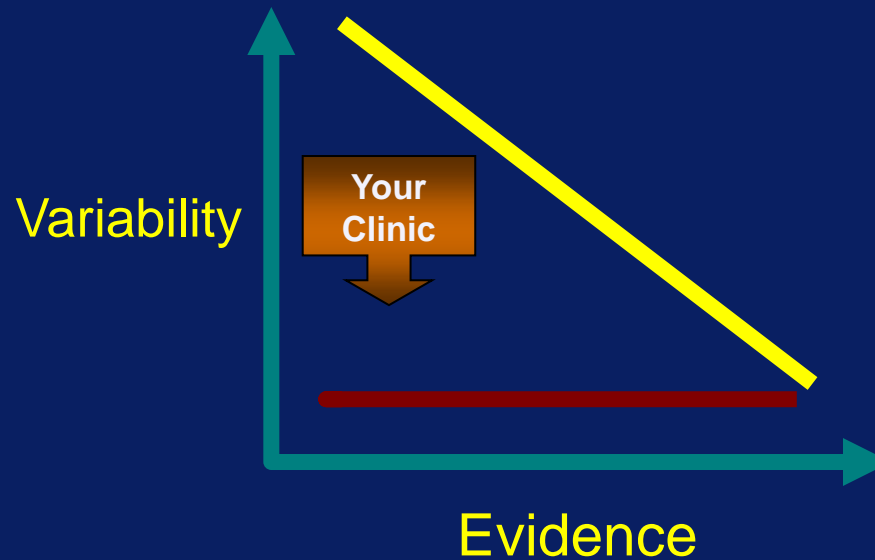
Good Data In = Great Outcomes



The data we collect will also help **DPH** programs determine meaningful things to measure and improve



Data Management (Cont.)



- Performance Measures/ Population Indicators
- Ability to Improve your Services/Treatment



Building a PI Infrastructure

Challenges and Lessons from the PDSA Group

The collaborative process takes time.



- Program involvement makes it more likely that resources are relevant and used.
- Build sufficient time for Program input into timelines.

Department and Program priorities lead to starts and stops. Maintain momentum by:



- Keeping Programs informed through emailed updates.
- Encouraging volunteers to keep projects moving between meetings.

Building a PI Infrastructure

Challenges and Lessons from the PDSA Group



Limited staffing impacts capacity to participate.

- Defer meetings that are not needed and allow participation by phone.
- Simplify forms and processes.
- Help Programs improve systems that can save time.



PI expertise within the Department varies.

- Recruit a PI liaison from each Program.
- Assess training needs. Offer **beginner and advanced options**.
- Create a repository of tools.
- Tailor TA and support to Program needs and resources.

Lessons Learned

- Leadership from top
- First direct, then inspire
- Focus
- Perseverance not brain surgery
- Accountability
- Start with people
 - Reward and recognition
 - Low performers



Any major change takes courage and patience.



Next Steps

- Release PI plan, process map and PI Support Request Form
- Launch Training Program
- Marketing Campaign
- Finalize Data Application



Questions



Thank You

