

DPH Public Health Report Card & Aggregate Scorecard Results

CY 2015 & FY 15-16

Karen Swanson, PhD, ScM
Quality Improvement Director



Session Agenda

- 1) Review DPH Report Card results and the Aggregate Population Indicator & Performance Measure Scorecards
- 2) Program/Division-level break-out discussion groups

DPH Report Card: Based on 10 Foundations of Public Health (8 from the Institute of Medicine)

Capability Areas

1. Visionary leadership
2. Communication
3. Broad, robust health planning
4. Information systems and resources
5. Optimized administrative support services
6. Policy development, analysis, and decision support
7. Partnership development and community mobilization
8. Systems evaluation, program evaluation, and quality improvement
9. Competent workforce
10. Expertise in clinical medicine, service delivery and public health science

**Report Card
2015-2016
DRAFT
1.31.17**

2014-15 Result
2015-16 Result
2016-17 Result
Long-Term Goal



Capability Area 1: Visionary Leadership

1.1 Percent of programs that email updates to all their staff at least quarterly or have all-staff meetings at least quarterly	84.8	84.8	100%
1.2 Percent of programs with documented discussion of strategies to address gaps in performance measures or strategic plan goals	93.9	87.9	100%
1.3 Percent of programs with a leadership team that supports staff development programs	100	97.0	100%


Capability Area 2: Broad, Robust Health Planning

2.1 Percent of programs that perform surveillance	51.5	70.0	100%
2.2 Percent of programs that use population-based (or equivalent) data to guide planning and monitoring of activities	81.8	93.8	100%
2.3 Percent of programs with a division/program-level strategic plan	57.6	72.7	100%
2.4 Percent of programs with at least one strategic plan goal that addresses improvement in health equity	54.2	72.7	100%

Capability Area 3: Systems/Program Evaluation & Quality Improvement

3.1 Percent of performance measures that improved or met the target 	41.5	45.1	100%
3.2 Percent of programs working on a Quality Improvement Project 	80.0	44.4	100%
3.3 Percent of programs assessing customer satisfaction at least annually	87.9	81.8	100%
3.4 Percent of programs that perform economic analyses within the previous 3 years	36.4	50.0	50%

Capability Area 4: Policy Development, Analysis, & Decision Support

4.1 Percent of programs that track policies	92.6	89.3	100%
4.2 Percent of programs with a written analysis of a new or proposed policy	71.4	74.1	100%
4.3 Percent of programs that provide information about social determinants of health to inform external policy decisions	71.4	76.9	100%
4.4. Percent of programs that have participated in Health Impact Assessments within the past 5 years. 	9.1	27.0	N/A




Capability Area 5: Partnership Development & Community Mobilization

5.1. Percent of programs with documented engagement with stakeholders in planning & deciding the programs' strategic plan goals	65.0	76.9	100%
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Capability Area 5: continued

5-2. Percent of programs working with community partners on social determinants of health	82.1	85.2	100%
5-3. Percent of programs that collaborate with at least one other program within DPH	97.0	100	100%


Capability Area 6: External Communication

6.1. Percent of programs that develop, revise or update at least 2 health education materials per year that are approved by OCPA 	30.3	24.1	100%
6.2. Percent of health education materials that have been translated into threshold languages 	6.3	3.8	100%
6.3. Percent of programs with an internet web site that is updated according to a check list 	84.6	96.2	100%

Capability Area 7: Information Systems & Resources

7.1. Percent of programs that have a project or plan to use technology to improve their use of information	97.0	97.0	100%
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Capability Area 8: Optimized Administrative Support Services

8.1. Percent of draft Board letters (with supportive documentation) that met Contracts & Grants' submission deadline 	23.7	31.0	100%
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Capability Area 9: Expertise in Clinical Medicine, Service Delivery, & Public Health Science


9.1. Percent of programs using at least one evidence-based/best practice in their service delivery	90.9	87.9	100%
9.2. Percent of programs with at least one presentation (oral or poster) accepted at professional regional, state or national conferences/meetings	75.8	75.8	100%
9.3. Percent of programs that published at least one manuscript in a peer-reviewed journal	36.4	39.4	100%

Capability Area 10: Workforce Development

10.1. Percent of programs that encourage & support employee participation in wellness activities during the work day	100	93.9	100%
10.2. Percent of programs that use the DPH onboarding checklist (or a comparable one) for newly-hired employees	60.6	87.1	100%
10.3. Percent of staff certified as having completed 6 key mandatory trainings 	52.3	TBD	100%

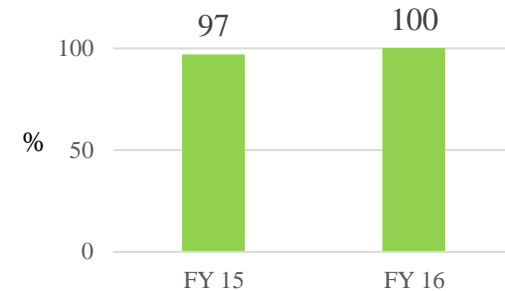
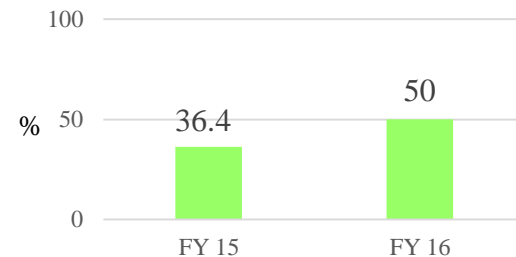
2014-15 Result
2015-16 Result
2016-17 Result
Long-Term Goal

 Long-term goal met
 Got worse
 Some improvement
 Stayed the same

 Measure data gathered centrally

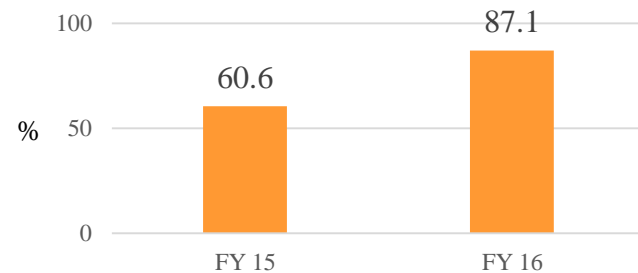
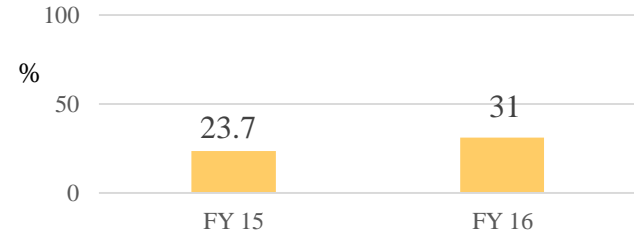
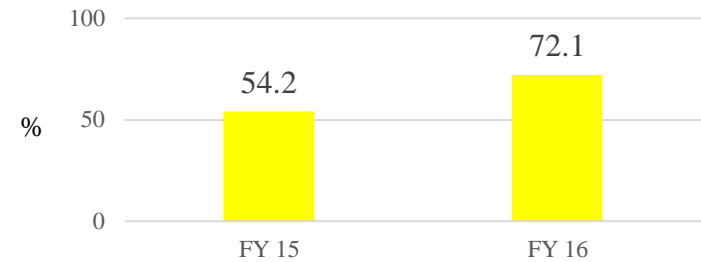
Measures that met the Target

- 3-4. Percent of programs that have performed economic analysis within the last three years
- 5-3. Percent of programs that collaborate with at least one other DPH program



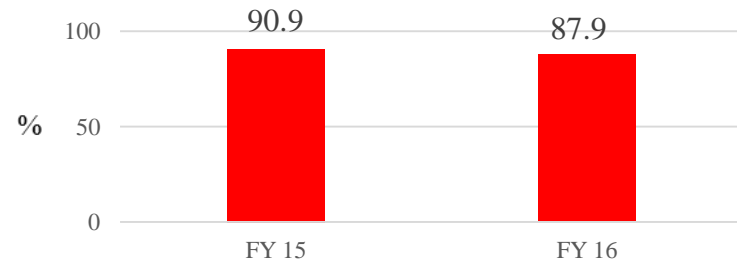
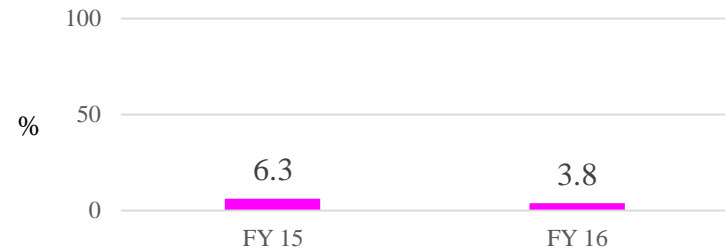
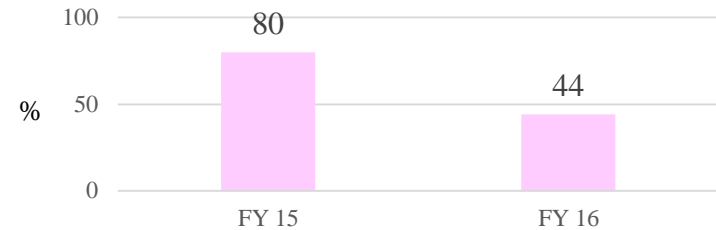
Some Improved Measures

- 2-4. Percent of programs with at least one strategic plan goal that addresses health equity
- 8-1. Percent of draft Board letters that met C&G's deadline
- 10-2. Percent of programs using the DPH (or equivalent) onboarding checklist



Some Measures Where Improvement is Needed

- 3-2. Percent of programs working on a Quality Improvement Project
- 6-2. Percent of health education materials that have been translated into threshold languages
- 9-1. Percent of programs using at least one evidence-based/best practice in their service delivery



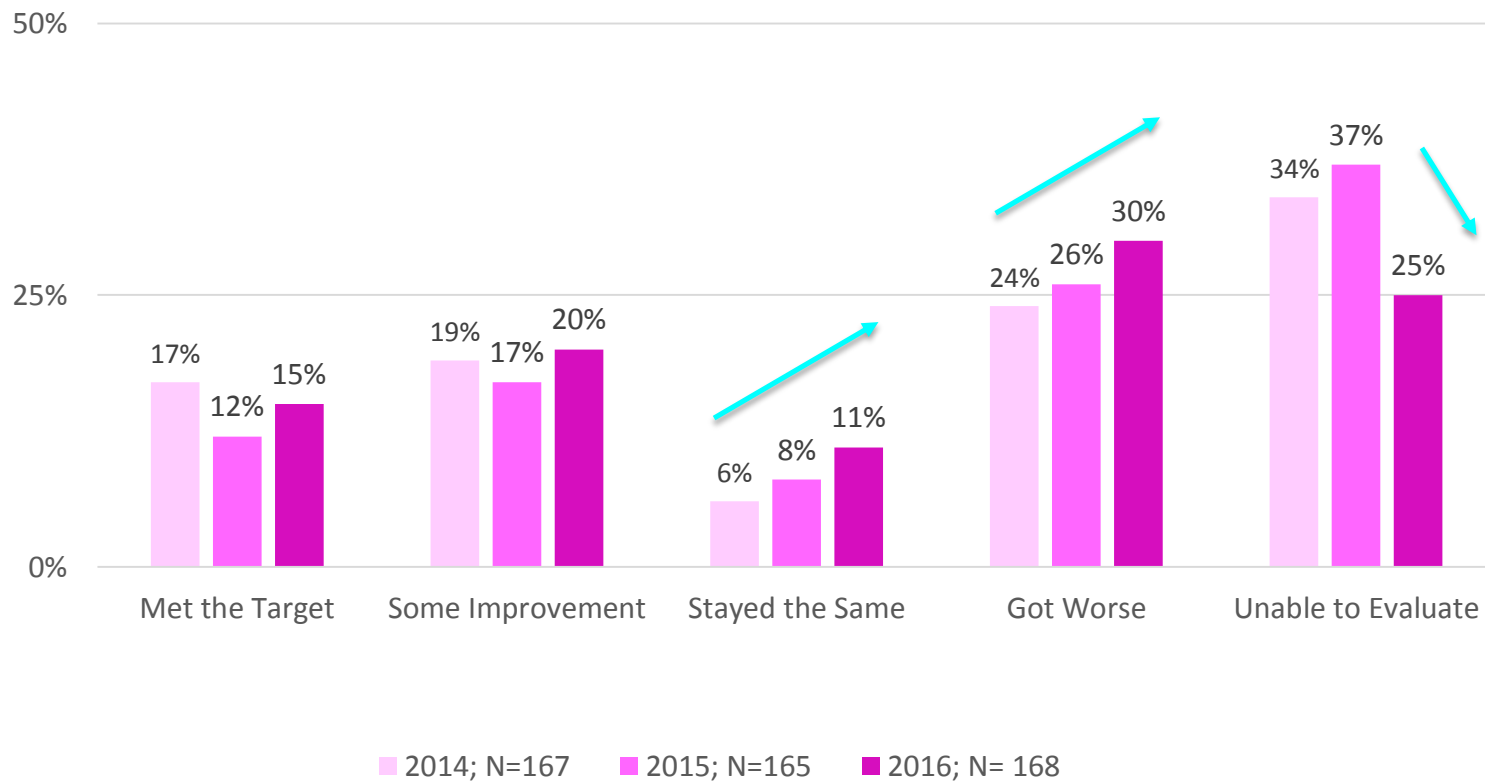
Next Steps

- Present Report Card Findings to Dr. Ferrer, our new DPH Director
 - Her input will be valuable
 - See if she wants us to add more measures to:
 - Information Services & Resources
 - Optimized Administrative Support Services

Public Health Measure Scorecards

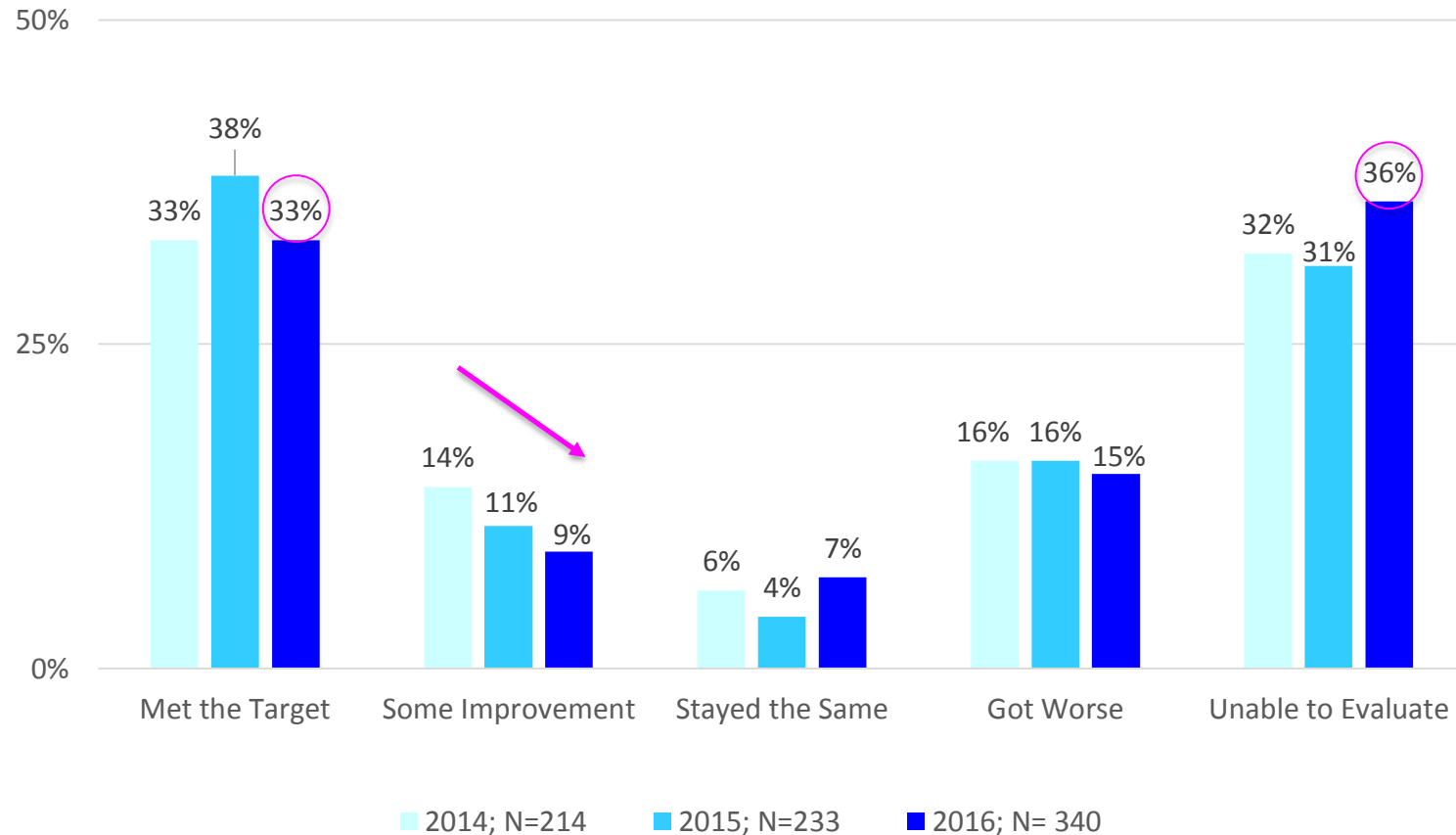
- Purpose: To compare population indicator and performance measure outcomes year to year and to selected target levels
- Outcome Definitions
 - Met the target
 - Outcome value = target value
 - Some improvement
 - Outcome value moved towards target value
 - Got worse
 - Outcome value moved away from target value
 - Stayed the same
 - Outcome value did not change from previous measurement
 - Unable to evaluate
 - No comparison can be made

Programs' Population Indicator Evaluation Results



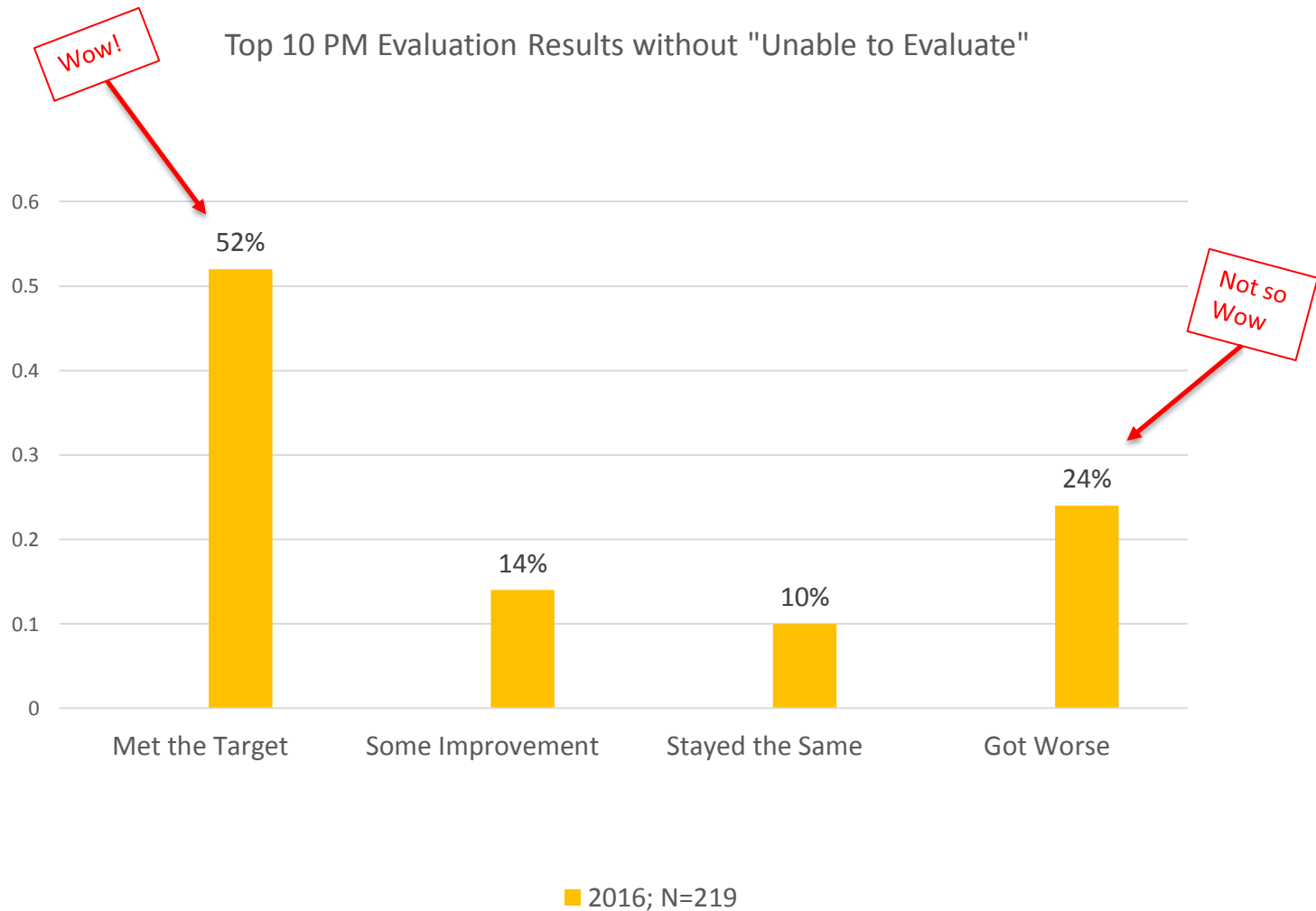
Note: Unable to evaluate = new measure, data still maturing, data not collected consistently, missing target or measurement data value.

Programs' Top 10 Performance Measure Evaluation Results

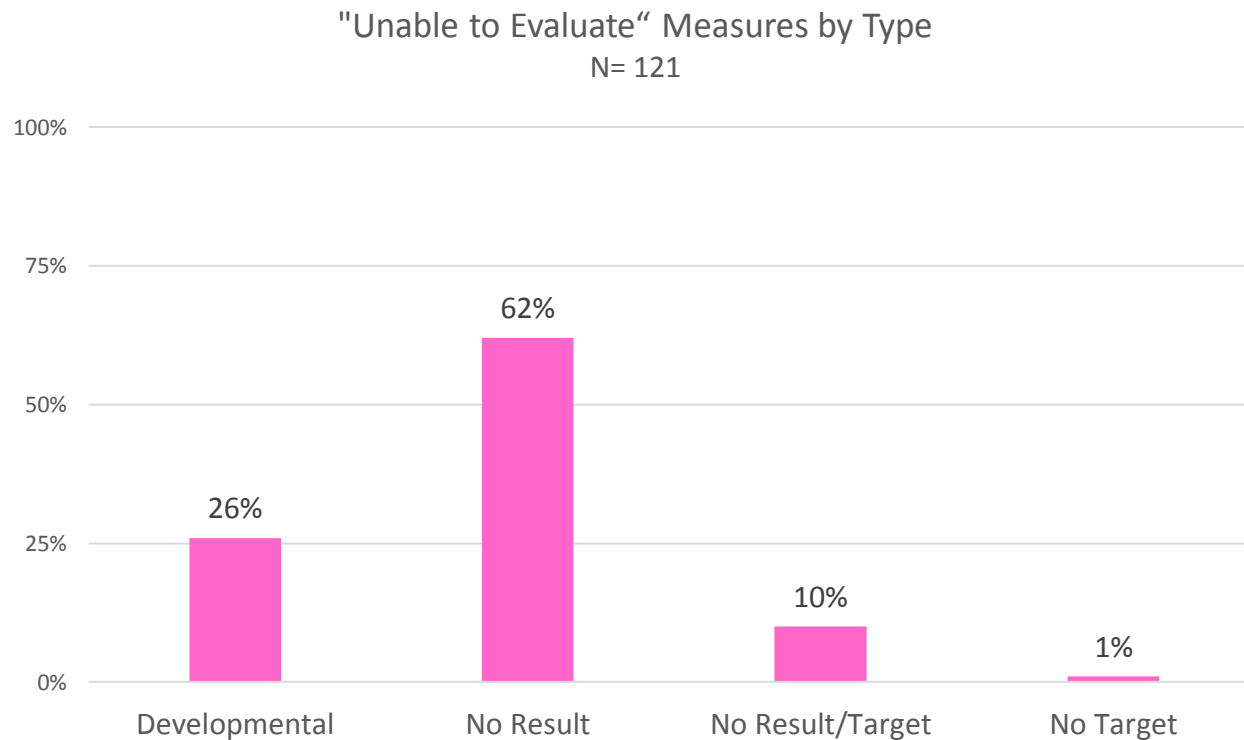


Note: Unable to evaluate = new measure, data still maturing, data not collected consistently, missing target or measurement data value.

After removing "Unable to Evaluate" from the analysis



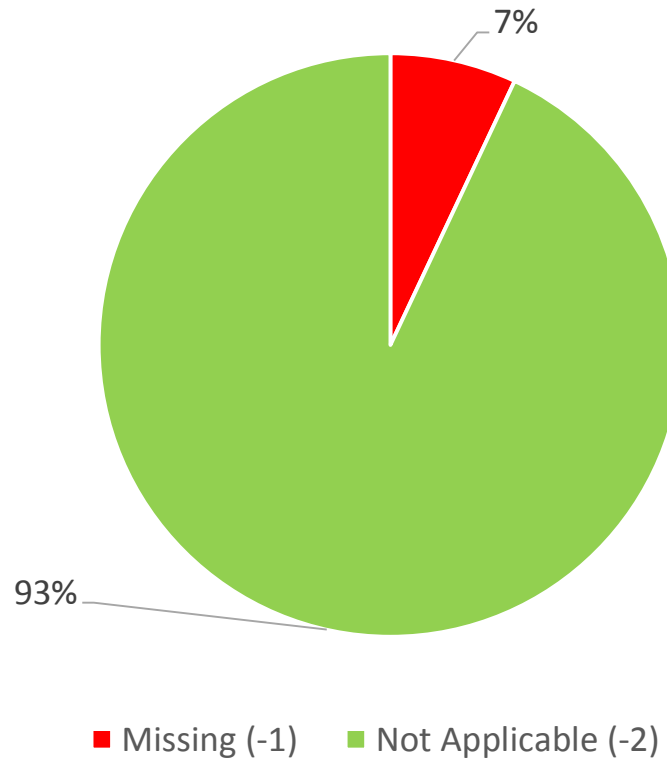
Why do we have so many measures that aren't able to be evaluated?



The true story about measures with no results....

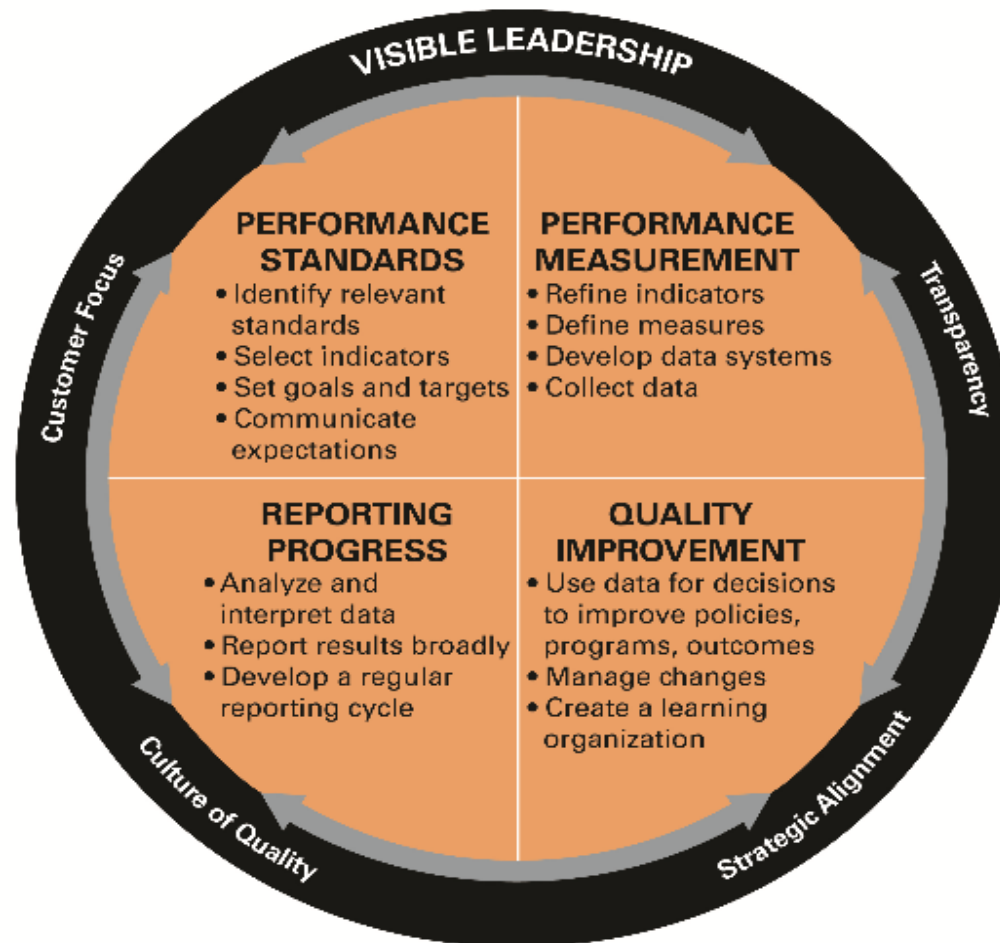


A Closer Look at "No Results"
N= 89



Discussion Groups by Program or Division

PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM



Scale for Comparing FY 15 to FY 16

Initial Measure Percentage	Percent Change
< 10%	+/- 1%
10 to <25%	+/- 2%
25 to <75%	+/-3%
75 to <90%	+/- 2%
>= 90%	+/- 1%