Building a Culture of Quality and Performance Improvement

August 27, 2015
Webinar
10:30 AM - Noon

IPHI Performance Improvement Webinar Series

- Performance Management Overview
  - August 6, 2015
  - 10:30 AM - Noon

- Quality Improvement 101
  - August 13, 2015
  - 10:30 AM - Noon

- Building a Culture of Quality and Performance Improvement
  - August 27, 2015
  - 10:30 AM - Noon

Webinars are being recorded and will be available for future viewing.

Partners
Webinar Presenters

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Webinar Objectives

1. Describe change management principles.
2. Define the phases of NACCHO’s Roadmap to a Quality Culture.
3. Identify and describe the use of a self-assessment tool.
4. Describe the components of a QI Plan.

Poll Question 1: Did you participate in the Performance Management Overview Webinar on 8/6?

a) Yes
b) No
c) Unsure
Poll Question 2: Did you participate in the QI 101 Webinar on 8/13?

a) Yes
b) No
c) Unsure

Public Health Accreditation Board (PHAB) Domain 9

Standard 9.1
- Use a Performance Management System to Monitor Achievement of Organizational Objectives

Standard 9.2
- Develop and Implement Quality Improvement Processes Integrated Into Organizational Practice, Programs, Processes, and Interventions

Source: PHAB Standards and Measures, Version 1.5, December 2013

PHAB Standard 9.1
Use a Performance Management System to Monitor Achievement of Organizational Objectives

- 9.1.1 A - Staff at all organizational levels engaged in establishing and/or updating a performance management system
- 9.1.2 A - Performance management policy/ system
- 9.1.3 A - Implemented performance management system
- 9.1.4 A - Implemented systematic process for assessing customer satisfaction with health department services
- 9.1.5 A - Opportunities provided to staff for involvement in the department’s performance management
- 9.1.6 S - Technical assistance and/ or training provided on performance management to Tribal and local health departments

Source: PHAB Standards and Measures, Version 1.5, December 2013
PHAB Standard 9.2
Develop and Implement Quality Improvement Processes
Integrated Into Organizational Practice, Programs, Processes, and Interventions

- 9.2.1 A - Established quality improvement program based on organizational policies and direction
- 9.2.2 A - Implemented quality improvement activities

Source: PHAB Standards and Measures, Version 1.5, December 2013

Poll Question 1: What is your health department’s PHAB accreditation status?

a) Accredited
b) Have applied and formally in the process
c) Planning to apply in the next year
d) Planning to apply in the next two years or more
e) No plans to apply

What is a Performance Management System?
A fully functioning performance management system that is completely integrated into health department daily practice at all levels includes:

1) setting organizational objectives across all levels of the department,
2) identifying indicators to measure progress toward achieving objectives on a regular basis,
3) identifying responsibility for monitoring progress and reporting, and
4) identifying areas where achieving objectives requires focused quality improvement processes.

6 Performance Management Principles

1. Results focus permeates strategies, processes, organizational culture, and decisions.
2. Information, measures, goals, priorities, and activities are relevant and aligned to health improvement and strategic initiatives.
3. Information is transparent – easy to access, use, and understand.
4. Decisions and processes are driven by timely, accurate, and meaningful data.
5. Practices are sustainable over time and organizational changes.
6. Performance management is transformative to the agency, its management, and the policy-making process.

Source: A Performance Management Framework from the National Performance Management Advisory Commission 2010 as presented by Marni Mason and Susan Ramsey.

Why is a Performance Management System Important?

- Efficiency
- Effectiveness
- Transparency
- Accountability
Poll Question 4: What is/will be the most challenging component of a Performance Management System for your organization?

a) Leadership  
b) Performance Standards  
c) Performance Measurement  
d) Reporting Progress  
e) Quality Improvement

What is Quality Improvement (QI)?

- Deliberate and defined improvement process  
- Responsive to customer needs and improving population health  
- Continuous and ongoing effort

Increased Equity  
Improved Community Health


Quality Improvement

- Use of data for decisions to improve policies, programs, and outcomes,  
- Managing changes through use of quality improvement methodology,  
- Creating a learning organization, where repeated cycles of quality improvement projects lead to a culture of ongoing learning and improvement.

NACCHO’s Roadmap to a Culture of Quality:
www.qiroadmap.org

What contributes to the culture of an organization?

- Core values and guiding principles
- Behaviors
- Norms
- Attitudes
- Tangible Signs
- Assumptions

What does a “Quality Culture” look like?

- All employees, from senior leadership to frontline staff, have infused QI into the way they do business daily.
- Employees continuously consider how processes can be improved.
- QI is no longer seen as an additional task but a frame of mind in which the application of QI is second nature.

Change Management

- Shifting an organization's culture
- Structured approach to transitioning an organization from a current state to a future desired state.

Understanding the needs on the 2 Sides of Change

"Human" Side
- How are staff responding?
- Is there resistance?
- Are arising issues addressed?
- Is the environment “safe?”
- Continually assess culture

"Process" Side
- What systems/processes must be put in place?
- Do we measure performance?
- Are formal plans, policies, and procedures?
- Is there accountability?
Poll Question 5: How would you describe change management in your agency?

a) More focused on the “Human Side”

b) More focused on the “Process Side”

c) Neither

d) A good balance of both

Addressing the 2 Sides of Change

Process Side of Change
• Developing plans
• Building the infrastructure
• Changing processes or systems
• Redefining policies
• Incorporating expectations into job descriptions, performance plans etc.

Human Side of Change
• Helping employees impacted by the change understand and adopt it
• Providing training
• Soliciting input
• Supporting needs
• Removing barriers
• Providing models

6 Foundational Elements

1. Employee Empowerment
2. Teamwork and Collaboration
3. Leadership
4. Customer Focus
5. QI Infrastructure
6. Continuous Process Improvement
**Employee Empowerment**

**Human Side of Change**
- What are sources of employee resistance against QI?
- Do employees have the necessary knowledge, skills, and abilities (KSAs) to engage in QI?
- Do employees understand why quality is important to public health and their job-specific duties?
- Are employees incentivized and rewarded for QI activities?

**Process Side of Change**
- How do employees account for time dedicated to QI?
- Is QI incorporated into position descriptions?
- Is QI incorporated into the employee performance appraisal process?
- Do employees have the necessary autonomy or authority to make process improvements?
- Are there processes for employees to formally nominate and/or initiate QI projects?

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**Teamwork and Collaboration**

**Human Side of Change**
- Do employees feel comfortable collaborating within teams/programs and across departments/divisions?
- Are individual team member voices valued and respected within organizational teams?
- Are teams effective at conflict resolution?
- How often do employees convene for the purposes of problem solving and innovation?

**Process Side of Change**
- Are formal and informal mechanisms in place for employees to collaborate and share?
- Is the organization’s physical space conducive to collaboration?
- Is there a process to form and disband teams, as needed?
- How is team performance monitored?

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**Leadership**

**Human Side of Change**
- Is there senior leadership and middle management buy-in to QI?
- Are leaders trained in change management and quality management?
- What is the organizational leadership style?
- How does leadership communicate about QI?
- Do leaders serve as good QI role models and mentors for employees?
- Do leaders continuously assess and address employee resistance to QI?

**Process Side of Change**
- Is there a process to hold employees accountable to QI?
- Are adequate resources dedicated to building a quality culture?
- Do leaders have a clear vision for the future culture of quality?
- Do leaders engage in data driven decision making?
- Have leaders adopted organizational policies and plans that support a culture of quality?
Customer Focus

Human Side of Change
- Do staff value the customer and understand the importance of ensuring customer satisfaction?
- Do staff have the KSAs to meet customer needs?

Process Side of Change
- Is there a process for assessing customer needs and satisfaction?
- Is customer satisfaction data collected and used for process improvements?
- Are customer needs appropriately considered during decision making?

QI Infrastructure

Human Side of Change
- Are employees engaged in the development of a performance management system?
- Do employees understand how their work and performance measures link to the strategic plan?
- Do employees have the KSAs to monitor and track performance?

Process Side of Change
- How is organizational performance being measured?
- What is the organizational QI planning process?
- Are organizational plans aligned (e.g., CHIP, strategic plan, QI plan, operational plans)
- What technology is used for performance management?

Continuous Process Improvement

Human Side of Change
- Do employees have the KSAs to implement QI projects?
- Do employees have a voice in the QI nomination/selection process?
- Are QI successes recognized and celebrated?
- Do employees continuously question how processes can be improved?

Process Side of Change
- How are QI projects selected?
- What QI methods are used in the organization?
- How are QI projects documented?
- How are improvements monitored and sustained?
Poll Question 6: If you had to choose an area of strength on the QI Culture journey, which would you say is strongest for your organization?

a) Employee Empowerment
b) Teamwork and Collaboration
c) Leadership
d) Customer Focus
e) QI Infrastructure
f) Continuous Process Improvement

NACCHO’s Roadmap to a Culture of Quality

Poll Question 7: Which phase do you think best matches your organization today?

a) Phase 1 – No Knowledge of QI
b) Phase 2 – Not Involved with QI
c) Phase 3 – Informal or Ad Hoc QI
d) Phase 4 – Formal QI in Specific Areas
e) Phase 5 – Formal Agency-Wide QI
f) Phase 6 – QI Culture

CDPH’s Journey to a Culture of Quality and Performance Improvement

Kirsti Bocskay, PhD, MPhil, MPH
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Roadmap to a Culture of Quality Improvement

Phase 1: No knowledge of QI activities
Phase 2: Not involved with QI activities
Phase 3: Informal or ad hoc QI activities
Phase 4: Formal QI activities implemented in specific areas
Phase 5: Formal agency-wide QI
Phase 6: QI culture

Performance & Quality Improvement Development

1. Leadership Commitment
   • Mayor
   • Commissioner
   • Managers
2. QI Infrastructure
   • PM Team → PQI Team (e.g., PM/QI Council)
   • Performance Management System: Balanced Scorecard
   • QI Plan
3. Employee Empowerment and Commitment
   • QI Learning Collaboratives
   • Kaizen Events
4. Customer Focus
   • Annual employee satisfaction survey
   • Annual PQI system assessment
   • Meeting/project evaluations
5. Teamwork and Collaboration
   • Workforce committees
   • PQI Team
   • Accreditation Team
   • HC2.0 Action Teams
6. Continuous Process Improvement
   • Accreditation
   • Dedicated resources
Reaching a QI Culture at CDPH

- Increase PQI training and support to reach all staff and programs
- Streamline PM reporting process
- Include PQI in employee performance evaluation and expectations
- Integrate PQI into strategic planning efforts at the program and organizational level

Foundational Elements to Build a Culture of Quality

- leadership commitment
- QI infrastructure: PM/QI Council, Performance Management System, QI Plan
- employee empowerment
- customer focus
- teamwork and collaboration
- continuous process improvement

Tools for Conducting an Assessment

2. Performance Management PDCA Self-Assessment Tool State or Local Tool (Epstein and Moran): http://www.phf.org/resourcestools/Pages/PM_System_PDCA_Self_Assessment_Tool.aspx
4. The QI Maturity Tool, Version 5 MLC, evaluation team at the University of Southern Maine’s Muskie School, http://www.phf.org/resourcestools/Pages/PM_System_PDCA_Self_Assessment_Tool.aspx

Why use a self-assessment?

• Baseline of Knowledge – What are our gaps?
• Accelerate the development of a culture of quality by providing an understanding of what such a culture looks like and key actions that enable its creation.
• Such advancement of a quality culture should enable LHDs to serve their communities more effectively and efficiently. The discussion generated by completing the SAT provides significant insights into organizational performance and alignment of organization-wide initiatives. Communicating the results can help clarify organizational direction and provide a common basis and language for collective sharing and learning. Additionally, by accelerating the development of a culture of quality, the SAT can be an important tool in helping an LHD achieve and maintain PHAB accreditation status.

Public Health Performance Management Self-Assessment Tool

5 components
• Visible Leadership
• Performance Standards
• Performance Measurement
• Reporting Progress
• Quality Improvement

Self-Assessment Questions Related to:
• Resources
• Skills
• Accountability
• Communications

Purpose of Tool

- Are we really managing performance?
- Do we have specific components of a performance management system?
- Identify areas of performance management which may need improvement
- Identify areas that are already strong, and should be maintained and/or leveraged to strengthen other areas.

Public Health Foundation, Developed in 2013, adapted from the 2003 Turning Point Performance Management System Framework.
http://www.phf.org/focusareas/performancemanagement/Pages/Access_the_Performance_Management_Self_Assessment_Tool.aspx

Next Steps

- What are examples of work that fall within a performance management system? Do we call them performance management?
- For those components of performance management we are doing, how well are we doing them?
- In which areas do we need to invest more time and resources to manage performance more successfully?
- What can leadership and staff do to make the performance management system work?
- What steps could we try out this month (or this week) to improve our performance management system?

Public Health Foundation, Developed in 2013, adapted from the 2003 Turning Point Performance Management System Framework.
http://www.phf.org/focusareas/performancemanagement/Pages/Access_the_Performance_Management_Self_Assessment_Tool.aspx

NACCHO’s Organizational Culture of Quality Self-Assessment Tool

- Comprehensive assessment
- Aligned with QI Roadmap
- 3 main components
  - Diagnostic Statements to assess the current organizational culture of quality and identify priority gaps.
  - Corresponding Transition Strategies that provide suggested actions to close priority gaps.
  - Scoring Summary to document results.
Purpose of Tool

Based on 6 Foundational Elements (20 sub-elements)

1. Leadership
2. Employee Empowerment
3. Customer Focus
4. Teamwork and Collaboration
5. QI Infrastructure
6. Continuous Process Improvement

Allows LHDs to assess the degree to which:
• QI has been integrated into the organizational systems;
• Identify concrete steps to advance a culture of quality; and
• Gauge progress in the transformation.

Using the Tool

Steps to follow:
1. Assess.
2. Score.
3. Identify strategies.
4. Prioritize gaps.
5. Prioritize strategies.
7. Develop an action plan.

New to QI?
Focus on transition strategies in the following sub-elements first:
• 1.2: Employee Knowledge, Skills, and Abilities;
• 3.1: Culture; and
• 3.2: Resourcing and Structure.
QI Maturity Tool,
Version 5

- Validated 29-item assessment instrument
- Three overarching domains:
  1. QI Culture;
  2. Capacity & Competency; and
  3. Alignment
- Series of underlying dimensions corresponding to factors in the literature where there is a strong consensus about their relationship to the adoption and spread of change, and the cultivation of a QI culture.


Purpose of Tool

- Identify features of an organization that may enhance or impede QI approaches
- Monitor the impact of efforts to create a more favorable environment to succeed
- Define potential cohorts of public health agencies with respect to their level of QI sophistication.


Performance Management System PDCA
Self-Assessment Tool

- 2 Versions in Excel
  - State Public Health Agency Tool
  - Local Public Health Agency Tool
- Follows the QI Cycle of PDSA – the organizations performance information and population outcome data are fed back into the system to improve future decisions.
- Questions are based on key types of alignment and select practices needed for a robust PM system.

Developed by Paul D. Epstein and John W. Moran. http://www.phf.org/resources/tools/Pages/PM_System_PDCA_Self_Assessment_Tool.aspx
Poll Question 8: Which assessment tool do you think will work best for your organization?

a) Public Health Performance Management Self-Assessment Tool (Turning Point/PHF)

b) Organizational Culture of Quality Self-Assessment Tool (NACCHO)

c) QI Maturity Tool (MLC, University of Southern Maine's Muskie School)

d) Performance Management System PDCA Self-Assessment Tool (Epstien and Moran)

e) Unsure

PHAB Required Components of a QI Plan

- Key Quality Terms
- Culture and Desired Future State
- Key Elements of the QI Structure
- Types of QI Training Available and Conducted
- Project Identification, Alignment w/ Strategic Plan
- QI Goals, Objectives and Measures w/ Time-framed Targets
- Approach to Monitoring the QI Plan
- Regular Communication of QI Activities Conducted in the Health Dept.
- Process to Assess the Effectiveness of the QI Plan and Activities

Source: PHAB Standards and Measures, Version 1.5, December 2013

Poll Question 9: Do you have a formal QI Plan for your organization?

a) Yes

b) No

c) Unsure
Additional Resources


• NACCHO: Performance Management http://www.naccho.org/topics/infrastructure/PM/index.cfm

THANK YOU!

“TThis project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number UB6HP27881 Region V Public Health Training Collaborative. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.”

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