

Public Health Performance Management Centers for Excellence

2012 Quality Improvement Grantees Learning Congress

November 1, 2012

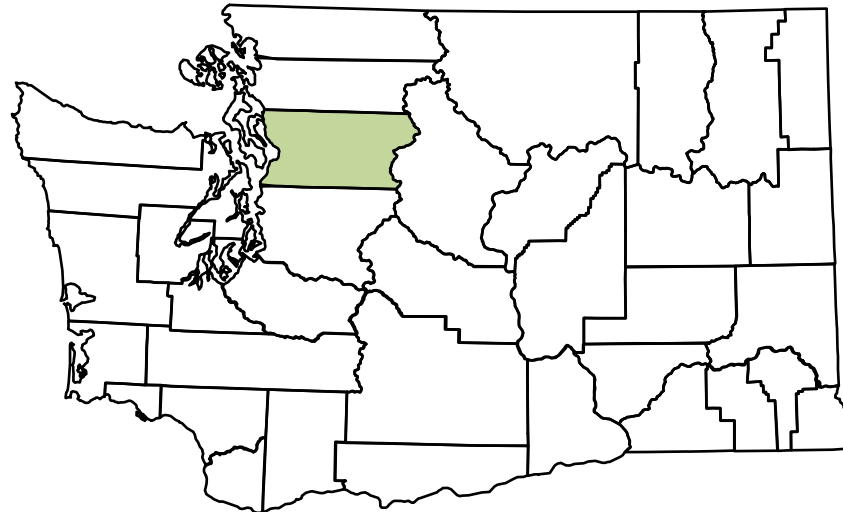
- 1) QI Training
- 2) Improving Immunization Process



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Snohomish County

- Total population: 717,000
- 42% reside in unincorporated areas
- SHD: 164 FTE, 2012 budget \$16.4M



Nov. 1, 2012

Trainings Project Team

- Gary Goldbaum, MD, MPH, Health Officer & Director
- Jeff Clark, Deputy Director (now Peter Mayer)
- Charlene Shambach, RN, Director of Community Health
- Tim McDonald, Director of Communicable Disease Control
- Randy Darst, Director of Environmental Health



Trainings Project Identification

- 2011 Performance Review highlighted need for QI structure & process
- Adapted Tacoma's model & created QI Council
- QI Council identified training as next step

Trainings AIM Statement

- *Train 100% of SHD Managers & Directors on what Quality Improvement (QI) means & on key tools to conduct QI*

Training Project Activities

- January—Contracted with Tacoma’s Center of Excellence for two half-day trainings
- February—Scott Davis trained 22 of 23 Directors & Managers
- June—Scott trained QI Council on project selection
- July—Scott trained 10 SHD staff to be technical & facilitation resources for the agency

Training Next Steps

- Conduct pilot project to improve immunization practices
- Debrief immunization project with Quality Council to identify additional training or other resources needed
- Seek additional resources as indicated

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Immunizations Project Team

- Scott Davis, QI Coordinator TPCHD
- Brenda Newell, LICSW HIV/STD/VHO Mgr SHD
- Rita Mell, RN, BSN Immunization Mgr SHD
- Ivy Giessen, Applications Systems Analyst SHD
- Immunization Clinic Staff SHD

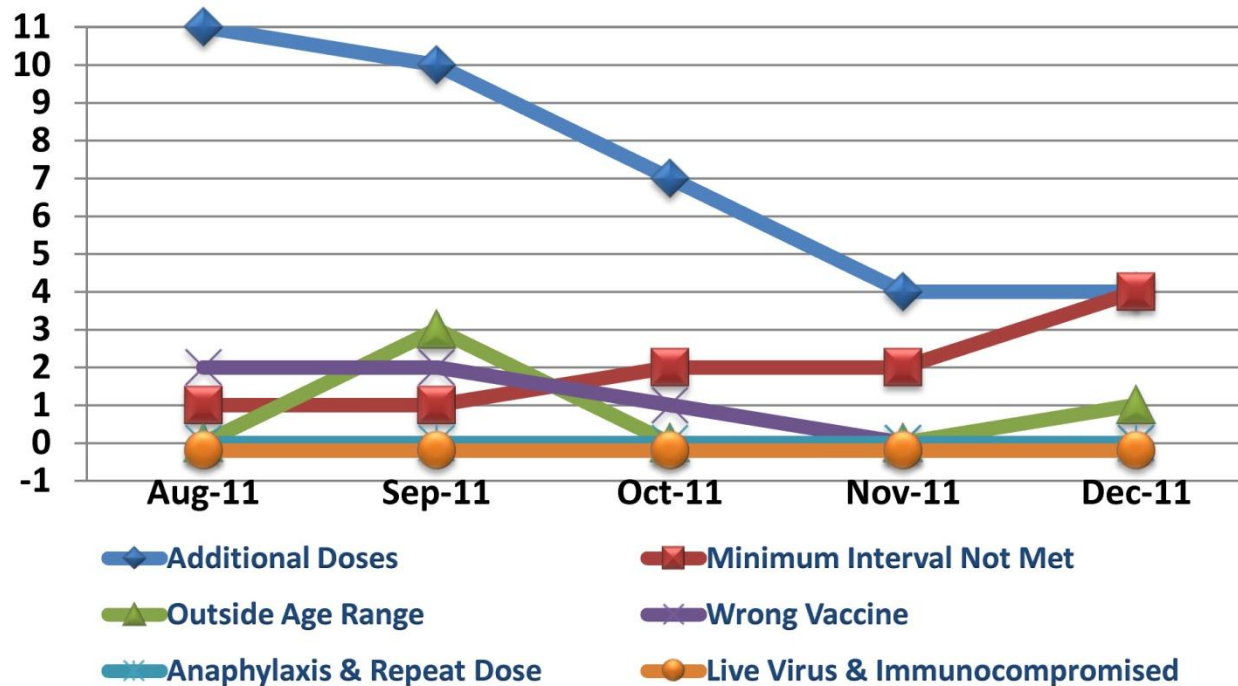
Immunization Project Identification

VPD QI Vaccination Data Quality Report August 2011 - December 2011

Error Type

Total Errors = 55

Errors



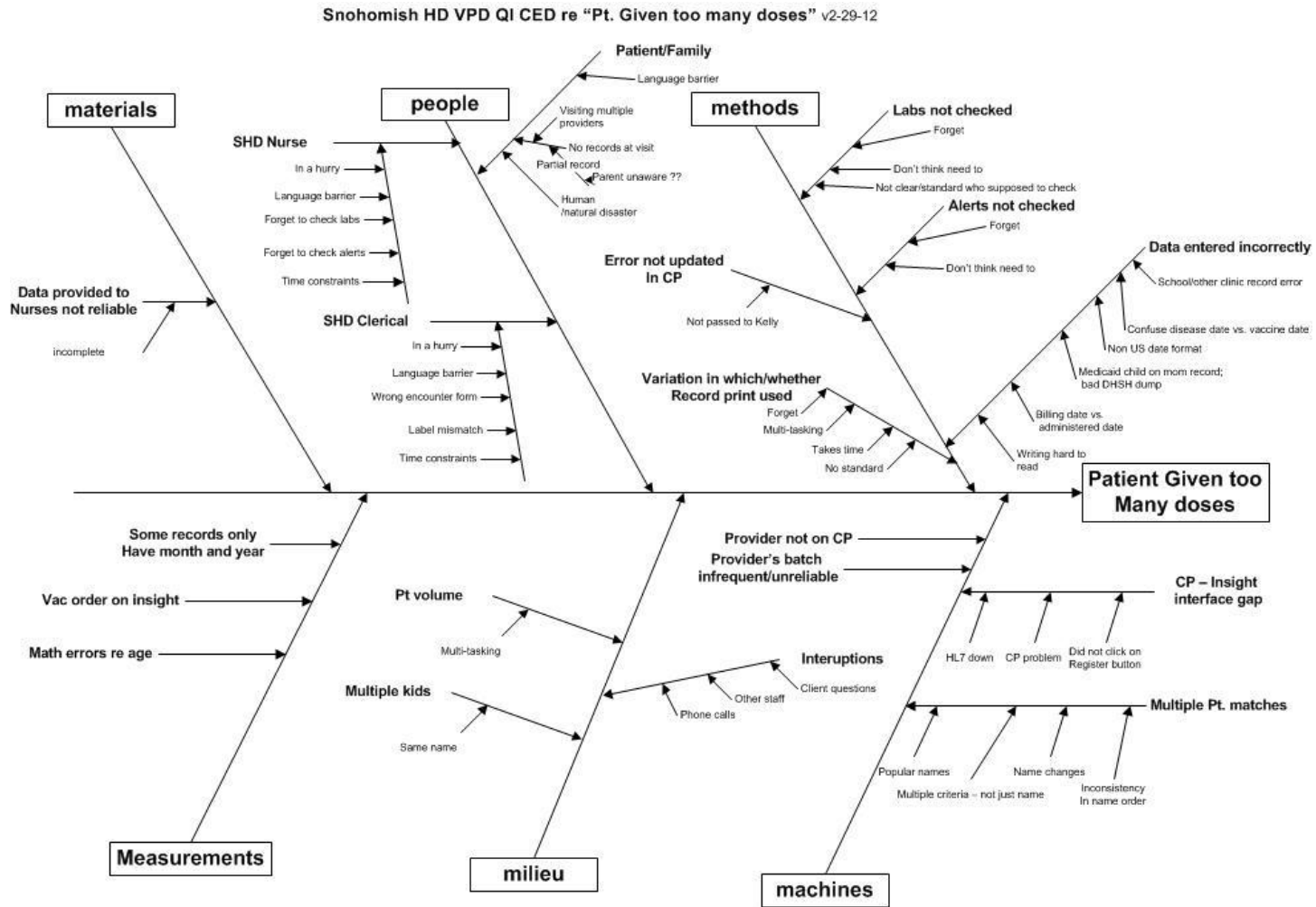
Immunization AIM Statement

- *Reduce the immunization error rate from 1-2/1000 to less than 1/10,000 administrations by 12/31/2012*
- *30% reduction in error rate from 5.3/1000 to 4/1000 administrations by 12/31/2012*

Immunization Project Activities

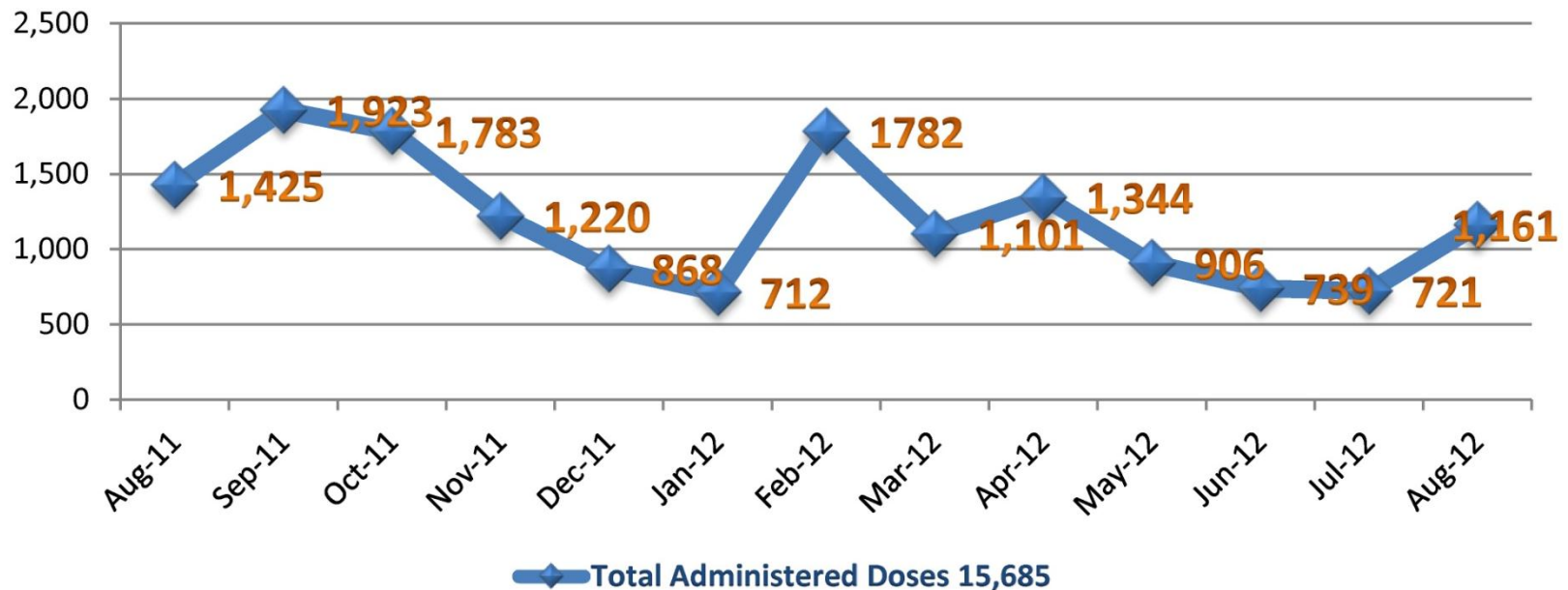
- Introduce QI method to staff - buy in
- Obtain baseline data
- Define error type
- Standardize clinic processes
- Establish new work flow

Immunization Root Cause



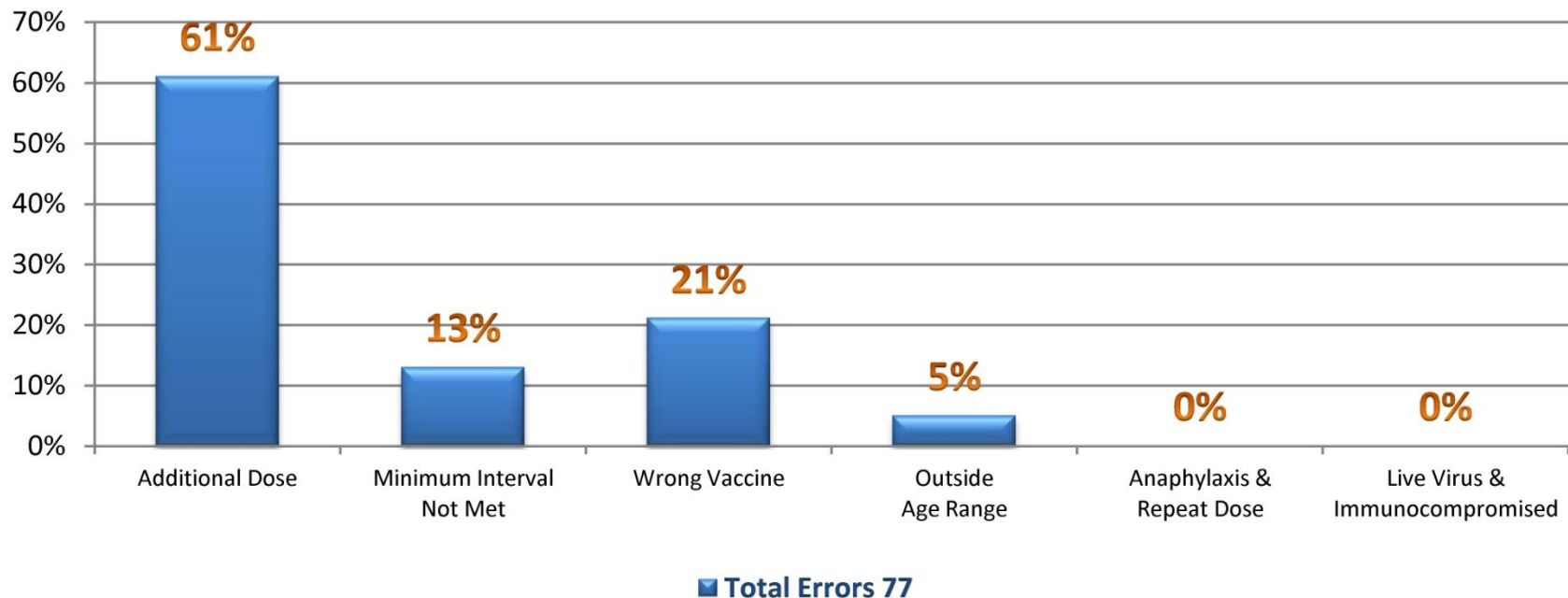
Immunization Improvement

VPD QI Vaccination Data Quality Report
August 2011 - Aug 2012
Administered Doses; Source: Insight Data



Immunization Improvement

VPD QI Vaccination Data Quality Report August 2011 - August 2012 Error Type



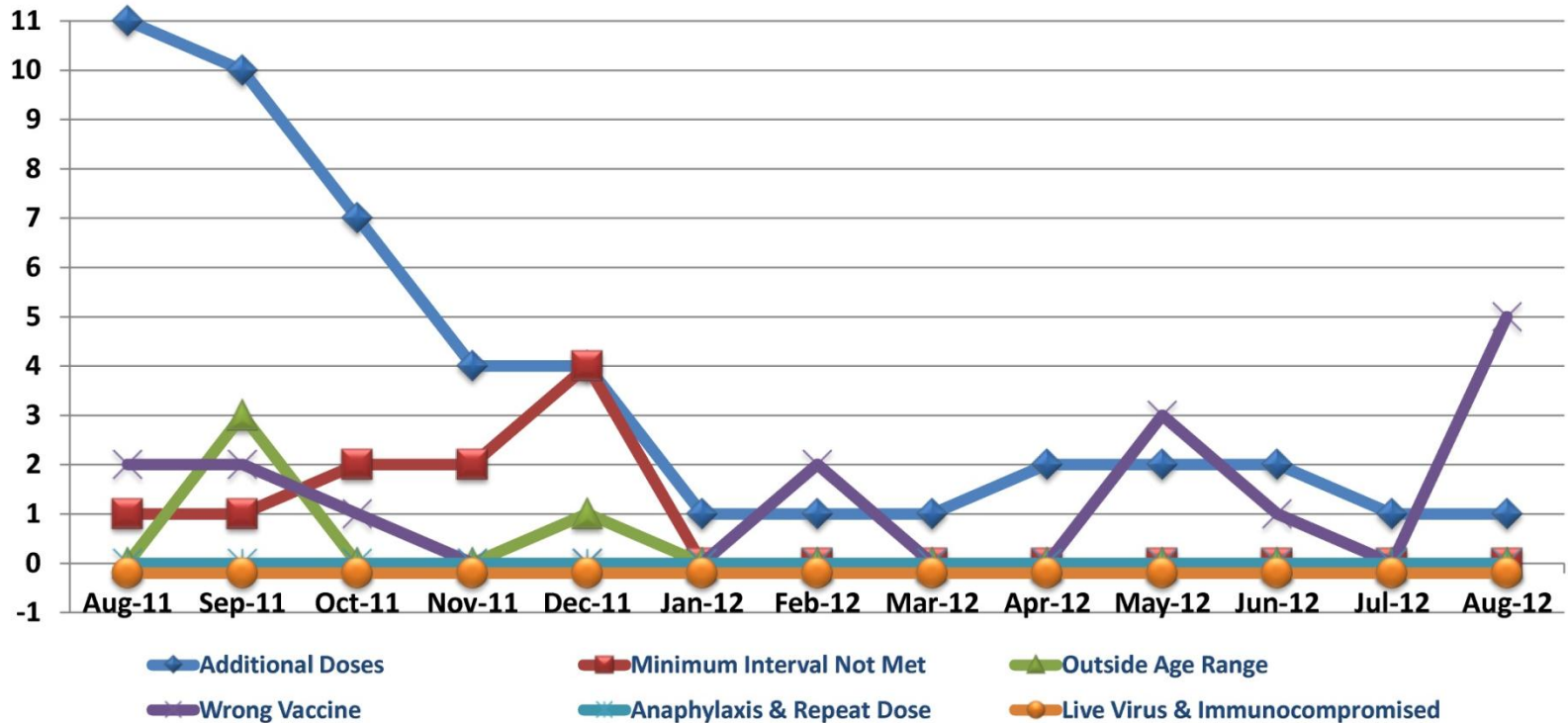
Immunization Results

VPD QI Vaccination Data Quality Report August 2011 - August 2012

Error Type

Total Errors = 77

Errors



Aim Statement

30% reduction in error

- Dec. 2011, baseline 5.3/ 1000
- Jan.—Aug. 2012:
 - Total doses = 8,466
 - Total errors = 22
 - 2.5/ 1000 error rate
 - Exceeded expectations by 53%!

Next Steps

- Continue monthly analysis of doses administered
- Calculate error rate
- Remediate repetitive errors
- Create atmosphere of excellence
- Embrace change

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20