Welcome!

Overview of Performance and Quality Management

will begin shortly

Overview of Performance and Quality Management

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Which Center for Excellence Region are you located in?

A. Department of Health

B. Tacoma-Pierce County Health Department

C. Spokane Regional Health District

D. Outside Washington State

PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND HEALTHIER WASHINGTON

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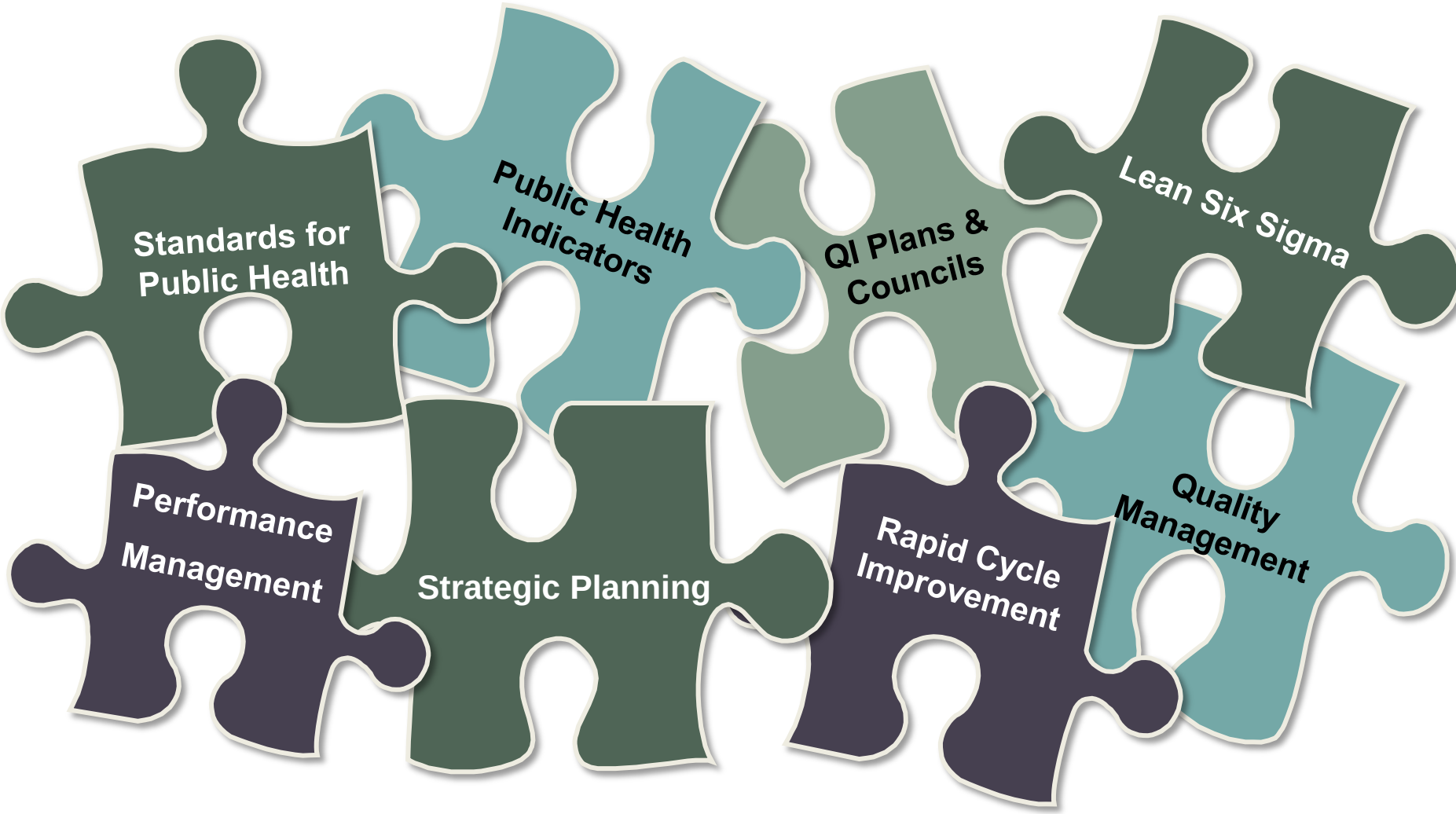
Today's Learning Objectives

Upon completion participants should be able to

- Describe at least two vital reasons for performance management and reporting
- State how performance management relates to community health assessment, health improvement plans, strategic plans, and quality improvement plans
- Describe at least two processes key to effective performance management
- Describe the three quality management approaches

Public Health Performance Management Centers for Excellence

It's a jumble of concepts and terminology!



Performance Management (PM) Definition

- *Performance management* is "the use of performance measurement information to help set agreed-upon performance goals, allocate and prioritize resources, inform managers to either confirm or change current policy or program directions to meet those goals, and report on the success in meeting those goals"

Guidebook for Performance Measurement ,
Turning Point Project

Quality Management (QM) Definition

The act of overseeing all activities and tasks needed to maintain a desired level of excellence. This includes creating and implementing quality planning and assurance, as well as quality control and quality improvement. It is also referred to as total quality management (TQM).

Investopedia explains 'Quality Management'

Why Is Managing Systematically Important?

- All work, including management, consists of linked processes forming a system, even if the system was not designed and is not understood.
- Every system is perfectly aligned to achieve the results it creates. **Process determines performance.**
- The results of an aligned system far exceed a system that fights against itself.
- Integrated management systems ensure that performance excellence happens by design, not by chance.

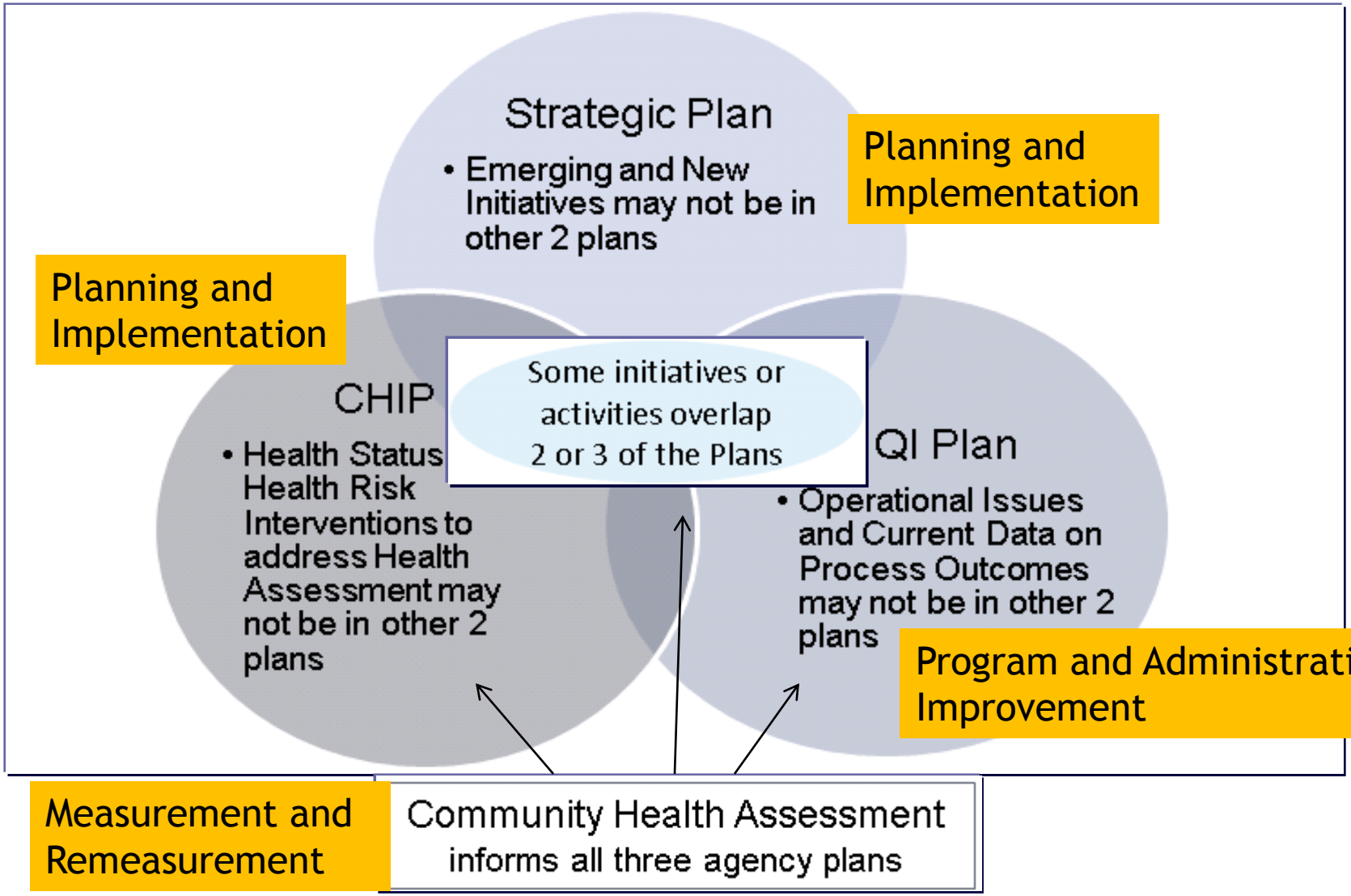
6 Performance Management Principles*

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

** Based on A Performance Management Framework from the National Performance Management Advisory Commission 2010*

CHA/CHIP/Strategic Plan/QI Plan

Public Health Performance Management Centers for Excellence

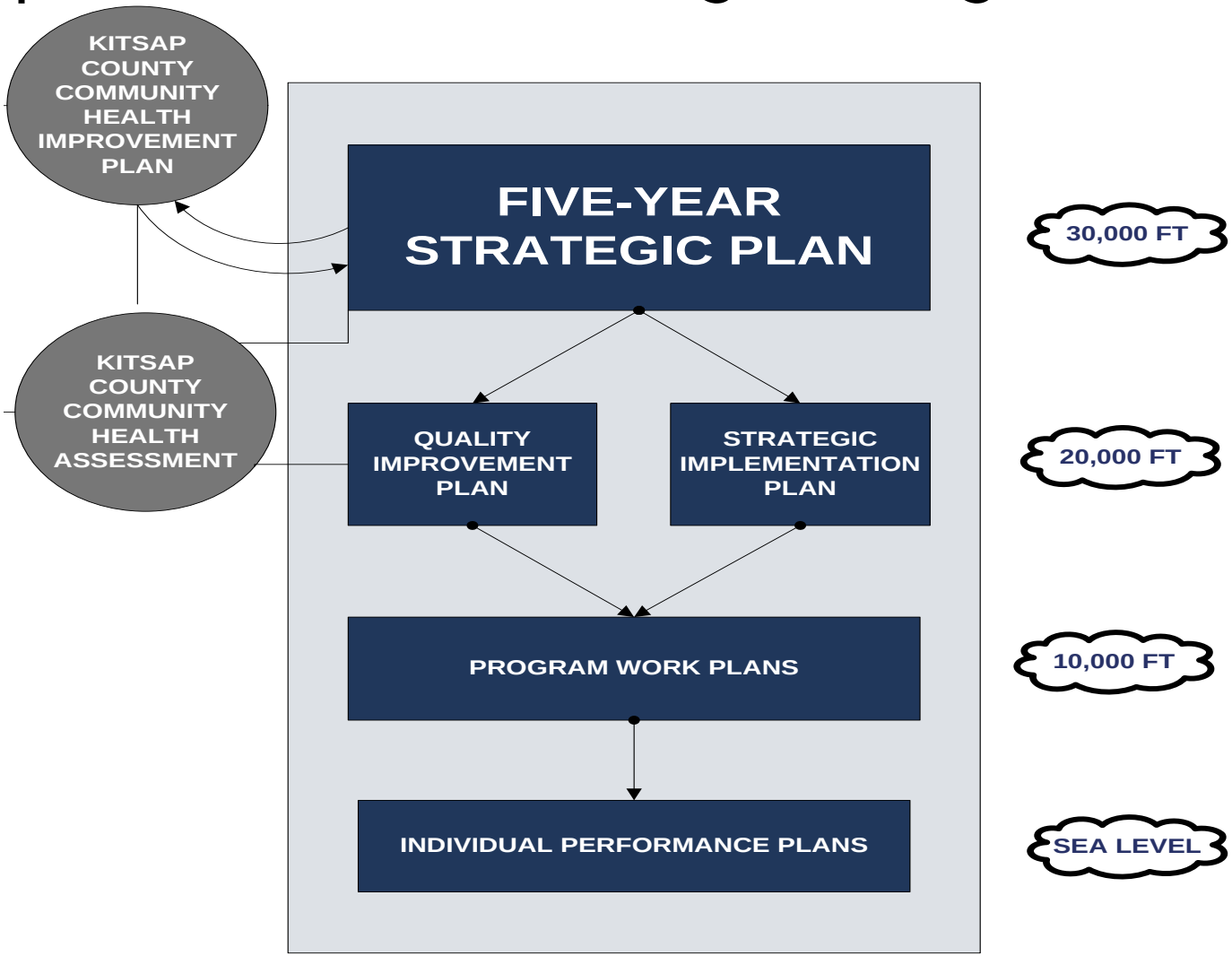


Form and name can differ – function matters

Examples of how performance management is built into the plans and operations of local and state health departments

- Kitsap County "Strategic Management System"
- Montana Public Health Services Division Integrated Management System
- Washington State Department of Health Performance Management System

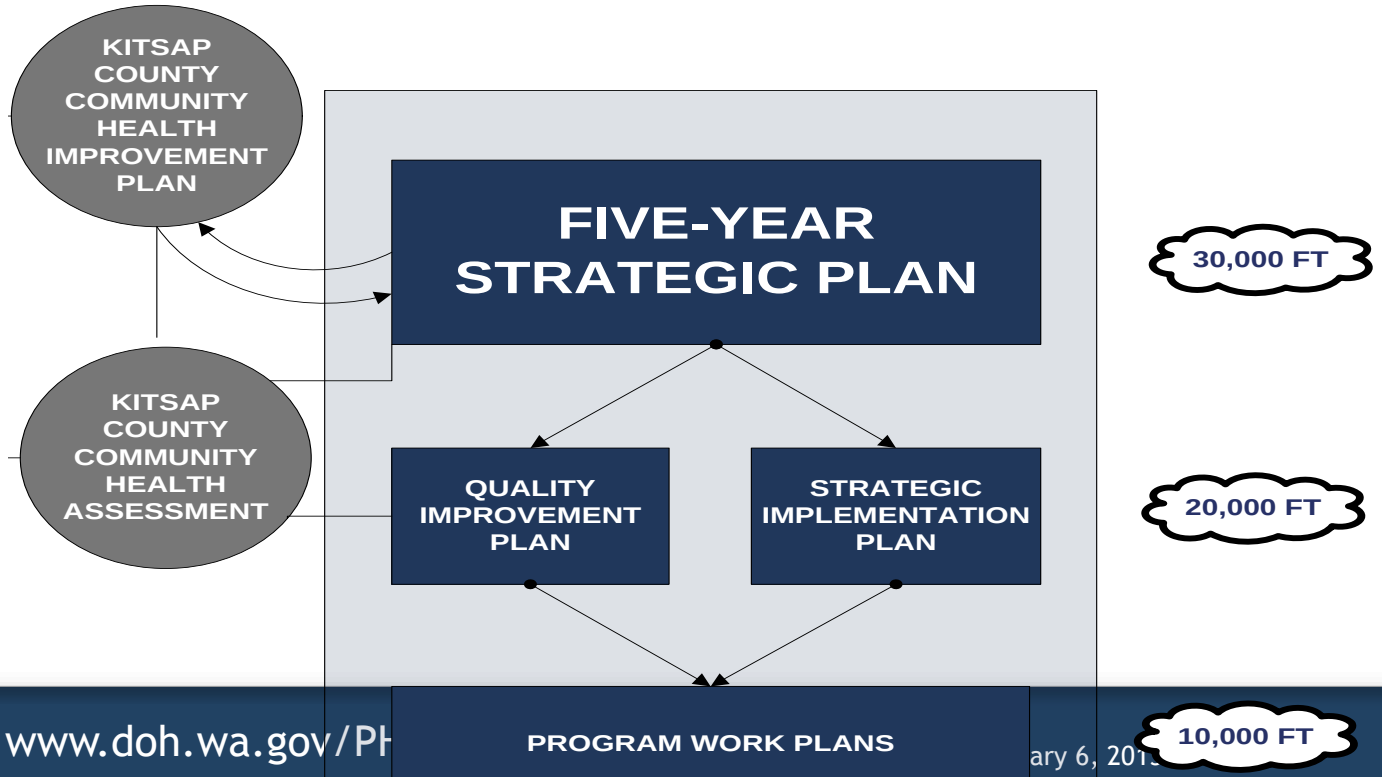
Adapted from KCHD Strategic Management System



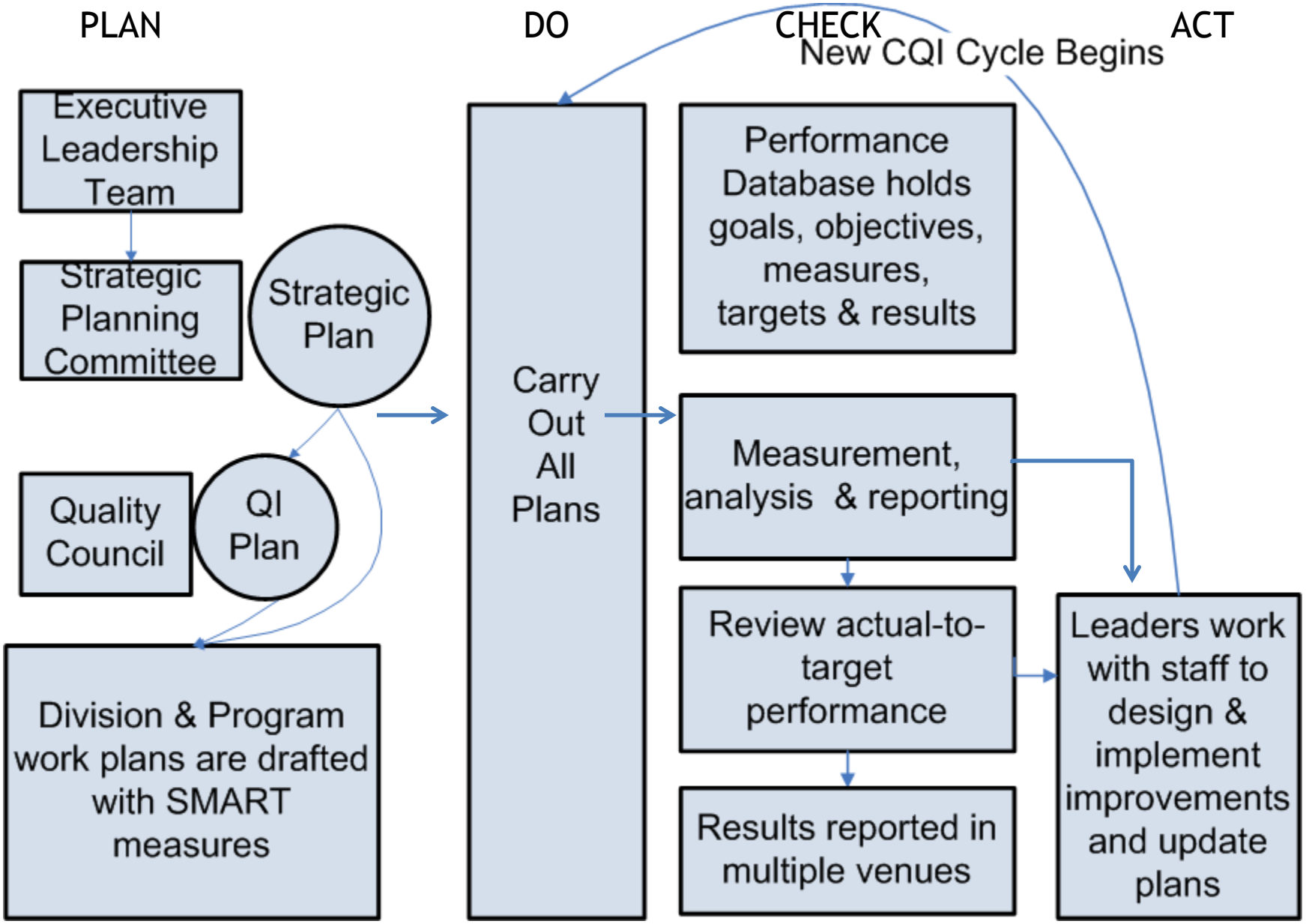
POLL

Why are the Community Health Assessment and Community Health Improvement Plan ovals outside the rectangle?

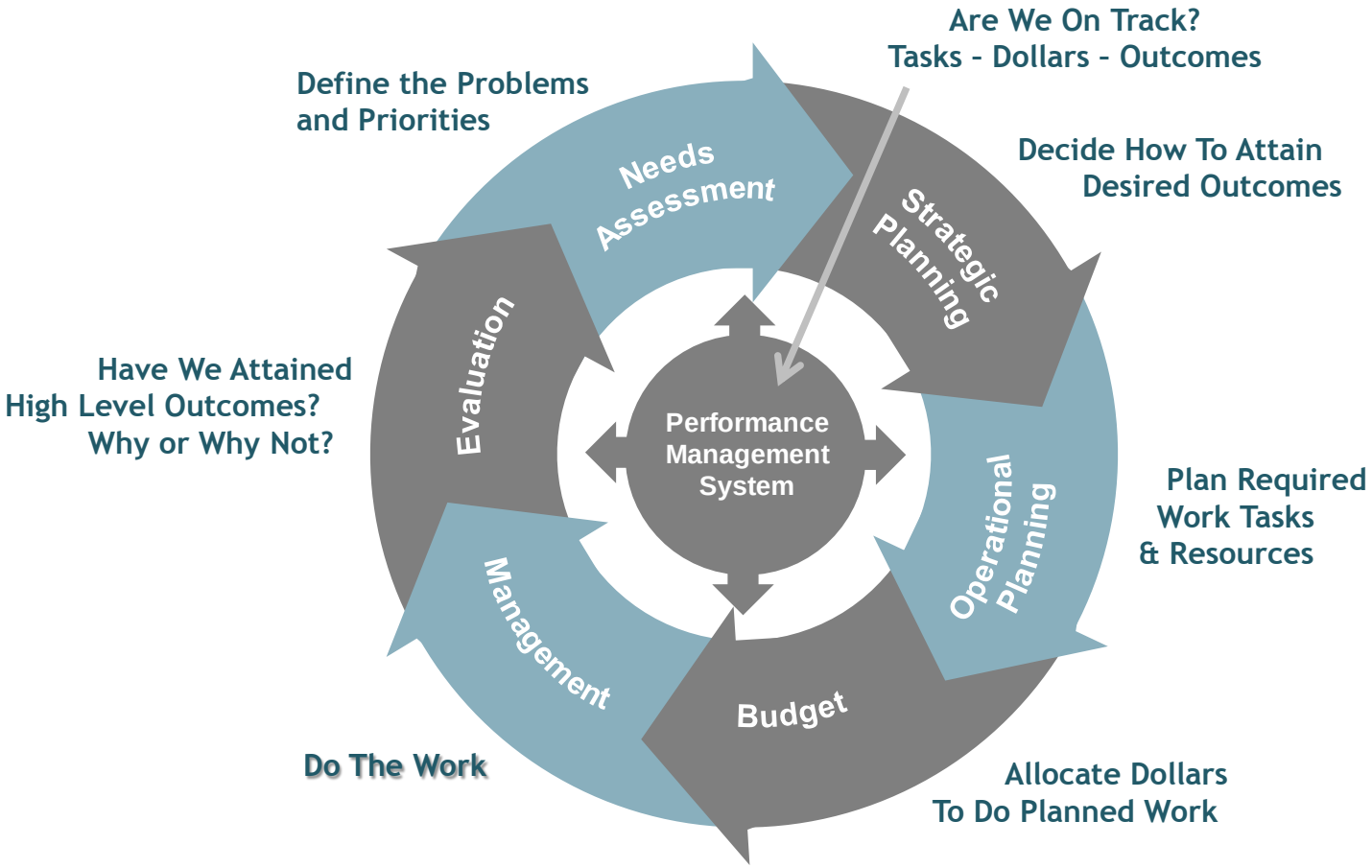
A. They are community-wide documents
B. The Health Department shares responsibility for them with community partners
C. They didn't fit into the rectangle
D. A and B above



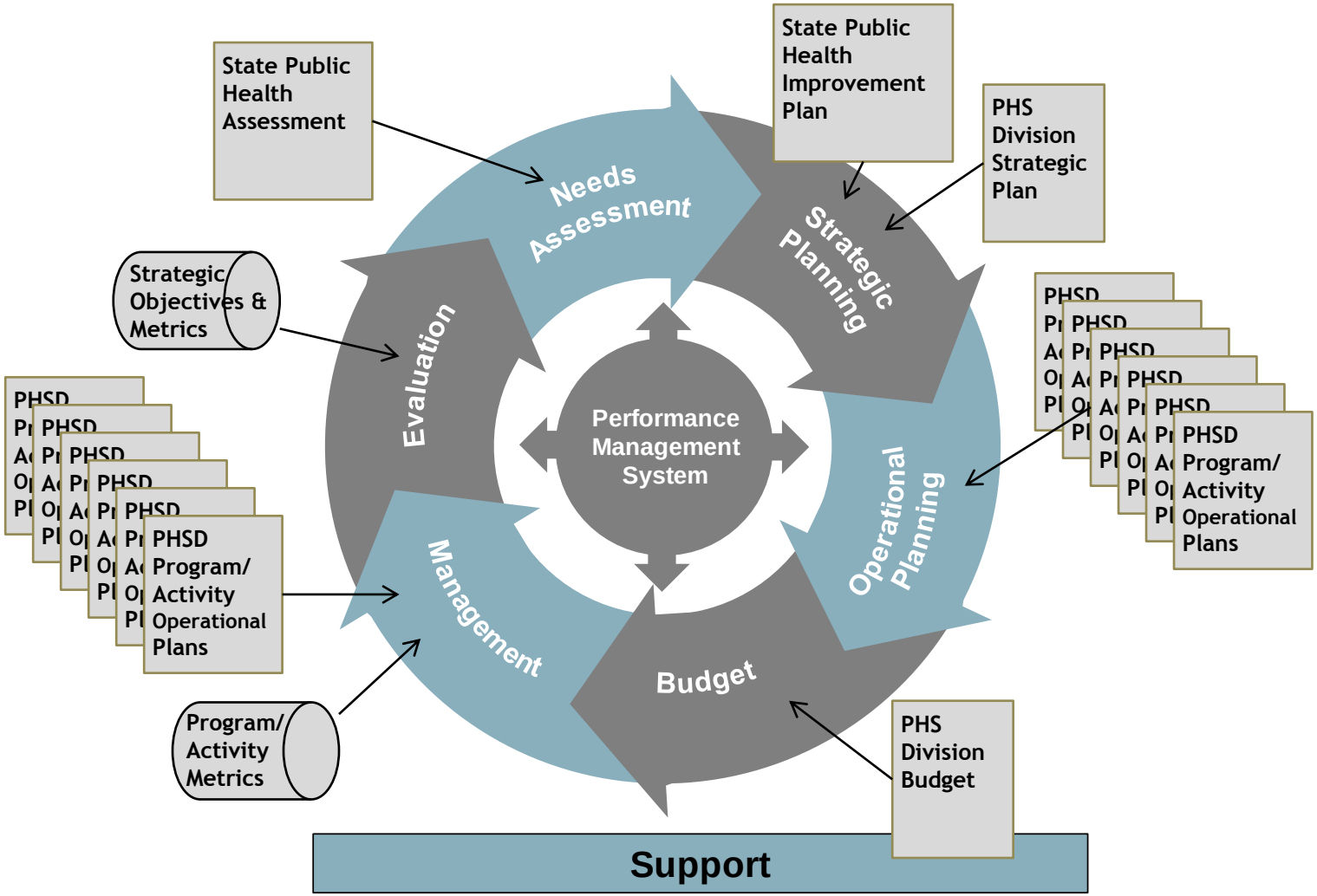
Adapted from the KCPH Strategic Management System Policy



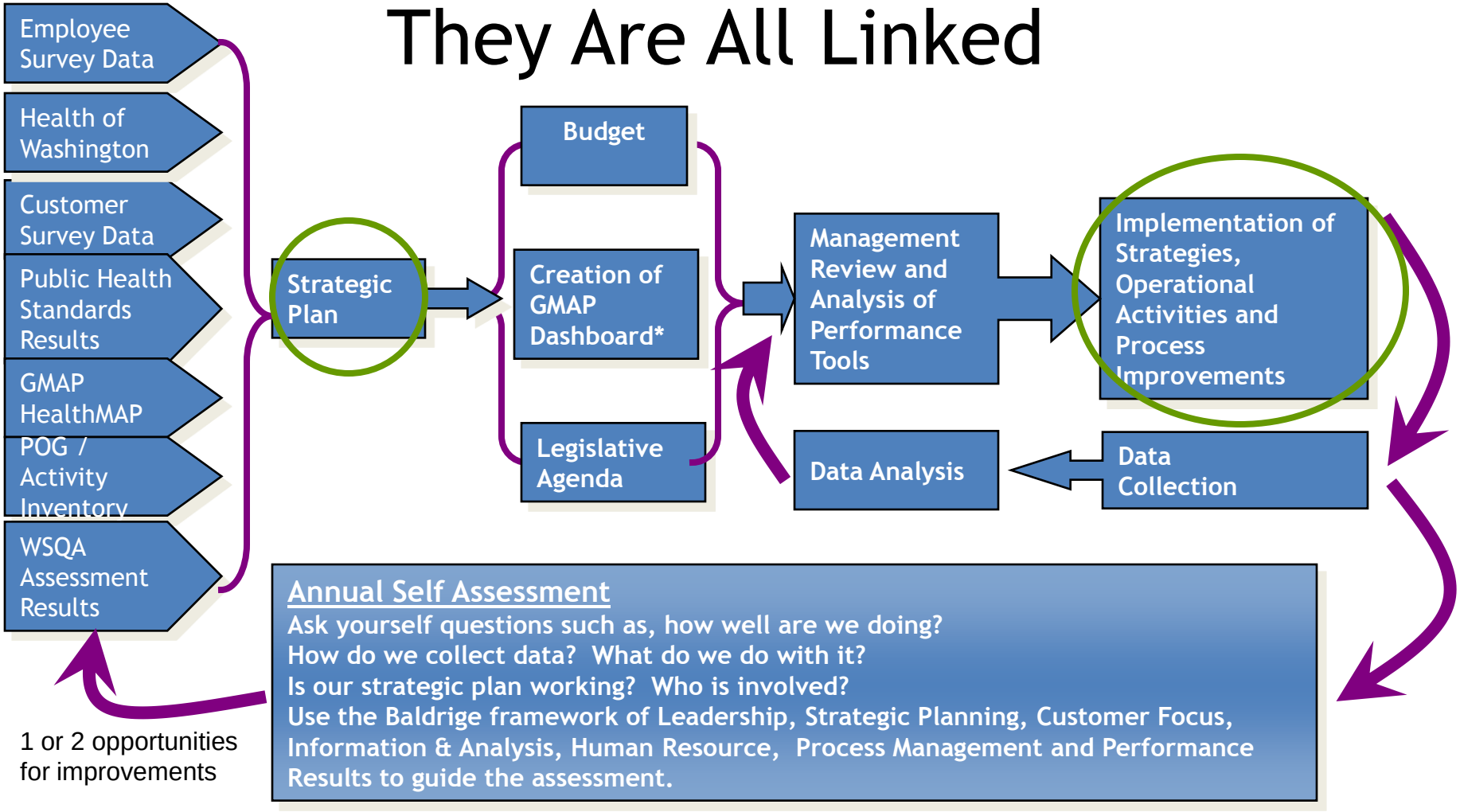
Montana's PHSD Integrated Management System



Integrated Management System Documents



WA State Dept of Health
They Are All Linked



Steps to Implement Performance Management

- Present case for Performance Management to decision makers
- Identify key purposes and objectives to initiate PM
- Define PM process
- Communicate plan to gain support from stakeholders
- Build agency capacity through training, hiring and/or in-house expertise; providing tools, and building a common terminology
- Monitor implementation process and adjust as necessary

** A Performance Management Framework from the National PM Advisory Commission 2010*

Processes Needed to Implement PM*

- Planning process to define mission and set agency priorities that will drive performance
- Community engagement process to identify needs
- Budget process to allocate resources based on priorities
- Measurement process to support entire PM system
- Accountability mechanisms
- Mechanism for collecting, organizing and storing data
- Process for analyzing and reporting performance data
- Processes for selecting and taking action on performance results

**Adapted from A Performance Management Framework from the National Performance Management Advisory Commission 2010*

Effective Performance Management

- Establishing and implementing performance management systems helps:
  - Align agency plans to reduce duplication and increase efficiency and effectiveness
  - Prioritize planning and improvement efforts
  - Address specific PHAB Standards requirements
  - Demonstrate the results of Public Health programs and services through performance measurement and reporting

Let's Discuss

What specific aspects of performance management could you apply in your agency?

What questions do you have about alignment of your agency policies and practices?

Turning Point PM Assessment Tool

- www.phf.org/resourcestools/Documents/Performance_Management_Self_Assessment_Tool_May_2012.pdf
- For each component, several questions serve as indicators of your performance management capacity.
- These questions cover elements of your capacity such as having the necessary resources, skills, accountability, and communications to be effective in each component.

Section I. Overall Readiness & Accountability

1. Is there a stated commitment from high-level leadership to a performance management system?
2. Is performance being managed for at least some priority areas that are critical to your mission and function?
3. Is performance actively managed in the following areas?
   A. Health Status (e.g., diabetes rates)
   B. Public Health Capacity (e.g., communities served by a health department or program)
   C. Human Resource Development (e.g., workforce training in core competencies)
   D. Data and Information Systems (e.g., injury report lag time, participation in intranet report system)
   E. Customer Focus and Satisfaction (e.g., use of customer/stakeholder feedback to make program decisions or system changes)
4. Is a team responsible for integrating performance management efforts across the areas listed in 3A - I?

And more…..

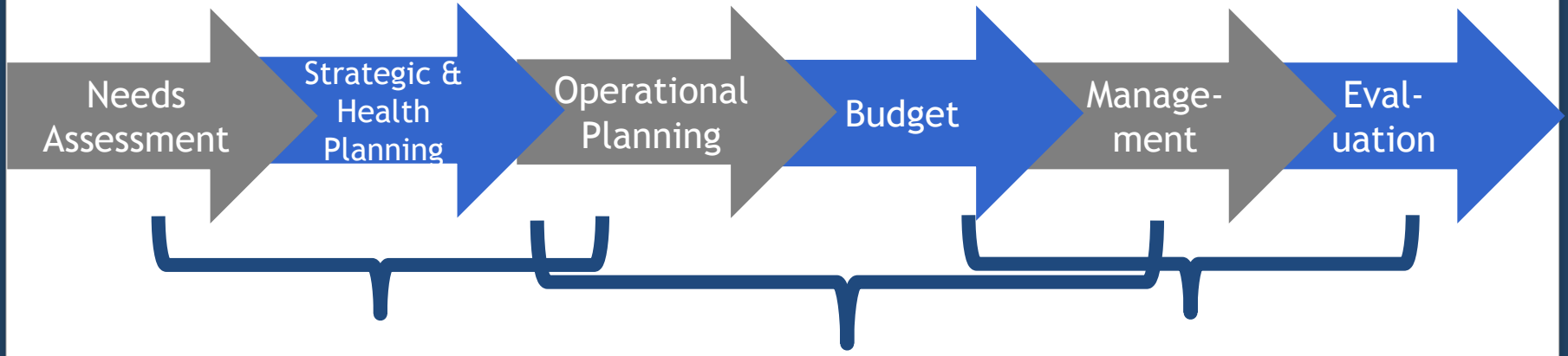
Starting PM with a PHAB Self-Assessment

A good way to start performance management activities related to public health standards is with a self-assessment against the PHAB standards or selected Domains of the PHAB standards, including the three pre-requisites; CHA, CHIP and Strategic Plan.

QUALITY MANAGEMENT PRINCIPLES AND METHODS

How do Performance Management and Quality Management Work Together?

(using Montana's Integrated Management System)



Quality Planning methods and tools help optimize health improvement and strategic planning processes

Quality Control methods and tools help measure and stabilize work processes

Quality Improvement methods and tools help make work processes more efficient and effective

The three aspects of quality management (QP, QC, QI) can overlap and be applied throughout performance management activities.

They Are Not the Same

Quality Assurance

- ✓ Reactive
- ✓ Works on problems after they occur
- ✓ Regulatory usually by State or Federal Law
- ✓ Led by management
- ✓ Periodic look-back
- ✓ Responds to a mandate or crisis or fixed schedule
- ✓ Meets a standard (Pass/Fail)

Quality Management

- ✓ Proactive
- ✓ Works on processes
- ✓ Seeks to limit errors
- ✓ Seeks to improve (culture shift)
- ✓ Led by staff
- ✓ Continuous
- ✓ Proactively selects a process to improve
- ✓ Exceeds expectations

They Are Linked but Not the Same

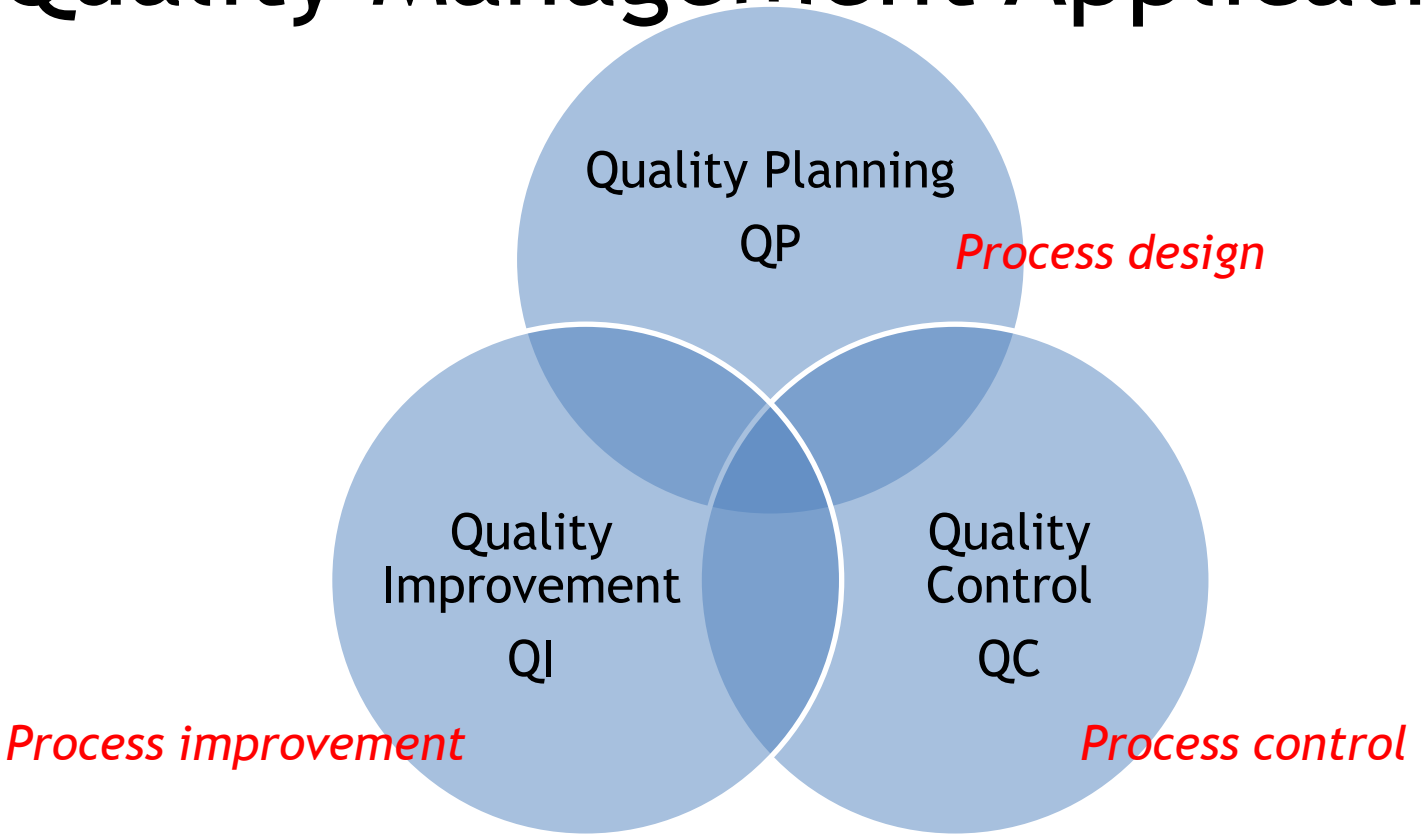
Program Evaluation

- ✓ Assess a program at a moment in time
- ✓ Static
- ✓ Does not include identification of the source of a problem or potential solutions
- ✓ Does not measure improvements
- ✓ Program-focused
- ✓ A step in the QI process

Quality Management

- ✓ Understand the process that is in place
- ✓ Ongoing
- ✓ Entails finding the root cause of a problem and interventions targeted to address it
- ✓ Focused on making measurable improvements
- ✓ Customer-focused
- ✓ Includes evaluation

Quality Management Applications



Joseph Juran, 1950s

Juran on Leadership for Quality, Free Press, 1989

Quality Management Principles

Focus on…

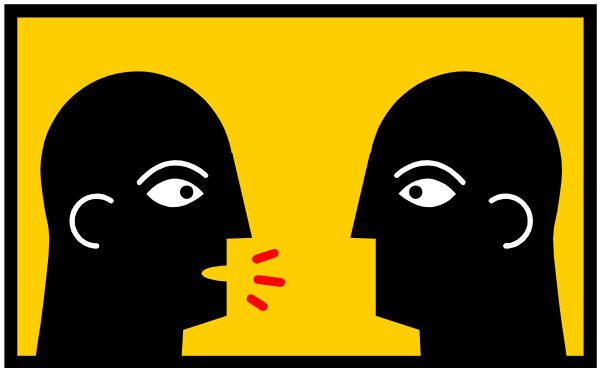
- Customer Requirements
- Process Performance
  - Capability
  - Variability
- Evidence based decision making
- Continuous & Scientific approach

Tacoma - Pierce County Health Department
Healthy People in Healthy Communities
www.tpchd.org

Customer Requirements

What they say

"I need good service!"



What they mean

- "Listen to me and remember
- Use words I understand
- Let me know what to expect
- Don't make me do something twice
- If something does go wrong, explain it to me and fix it When you say you will"

What we assume

"They want it fast"

Tacoma - Pierce County Health Department
Healthy People in Healthy Communities
www.tpchd.org

Customer Requirements

Identify customer and clients and their needs

- Community assessment
- Advisory council input
- Interviews
- Focus groups
- Surveys

Set goals based on identified need

Focus on process

- What is a process?
  - Series of related tasks directed at accomplishing one particular outcome
- What is a system?
  - Group of related processes

Variation in Process

- A main type of complexity in process
- All processes have variation
- By studying processes, variation can be reduced
- By standardizing processes, variation can be reduced

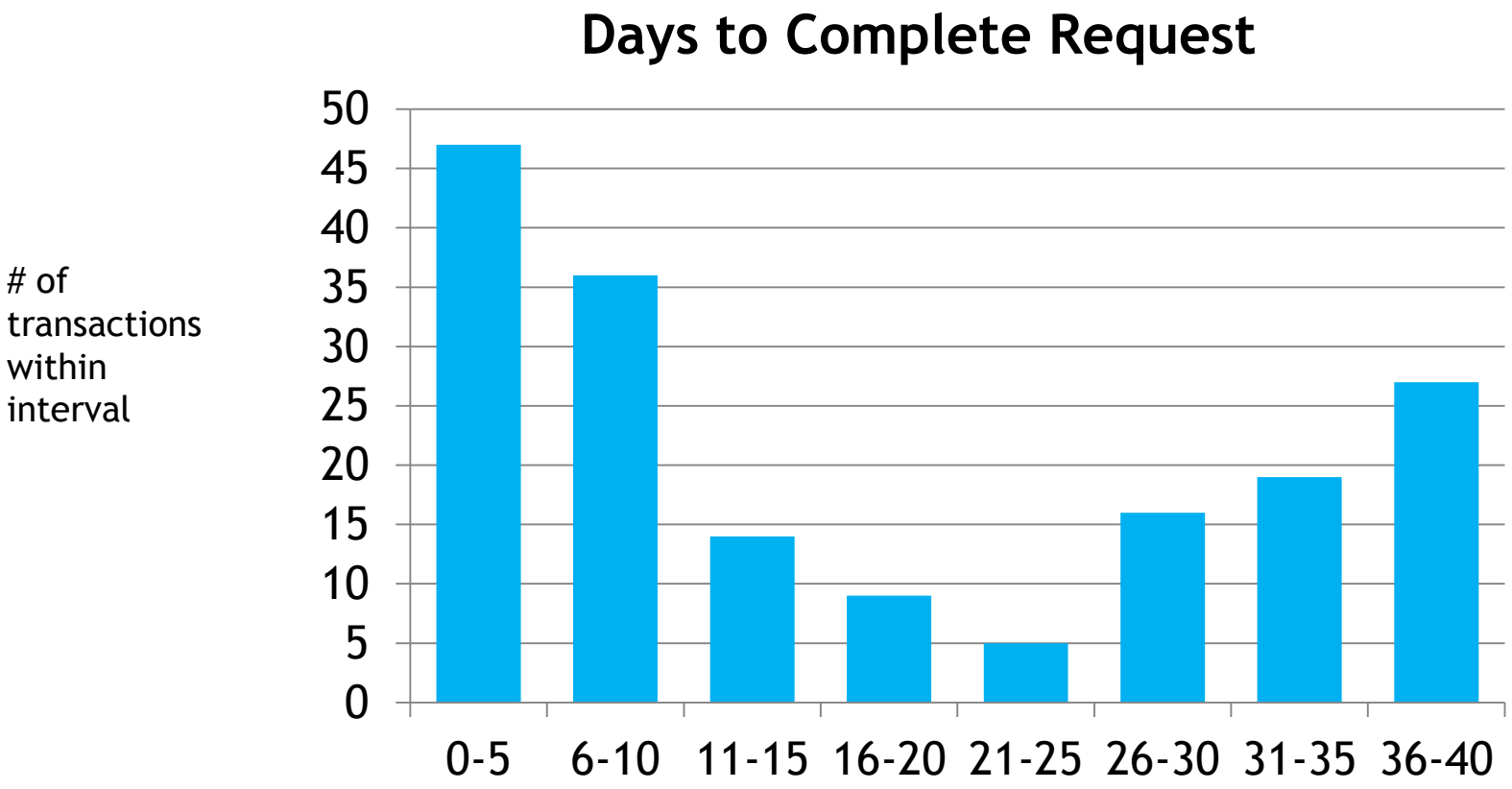
How to Study Processes

- Logic Models
- SIPOC and other work flow charts
- Value Stream Mapping
- Detailed process
- Spaghetti Diagram
- Others?

3 Views of a Process

- The way you want it to be (simple)
- The way you think it is (slightly more complex)
- The way it really is

Why is there variation in results? Most of the time … Because there is variation in the process.



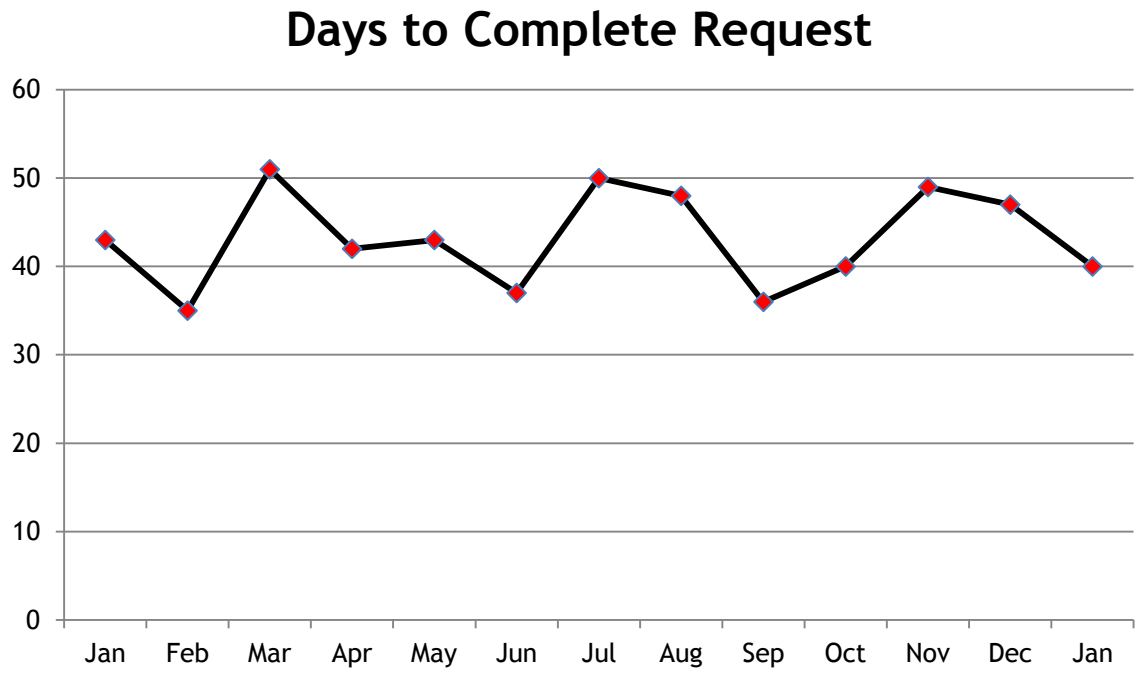
Sources of Variation

- Methods
- Machines
- Materials
- Environment
- Staff
- Measurements
- Customers

Which among these are variable?

Which among these are controllable?

Are we "capable" of meeting customer requirements?



Here's where we are

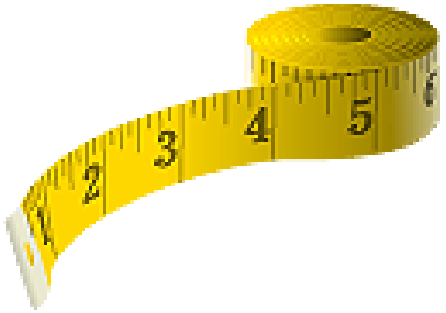
Customer requirement

Tacoma - Pierce County Health Department
Healthy People in Healthy Communities

Evidence-Based Decision Making

A QI oriented organization will …

- Measure processes and outcomes
- Evaluate data on an on-going basis
- Make decisions validated by data, not just logic, or worse, gut instinct



Decision making without evidence

The "logic" of bloodletting

Decision making without logic

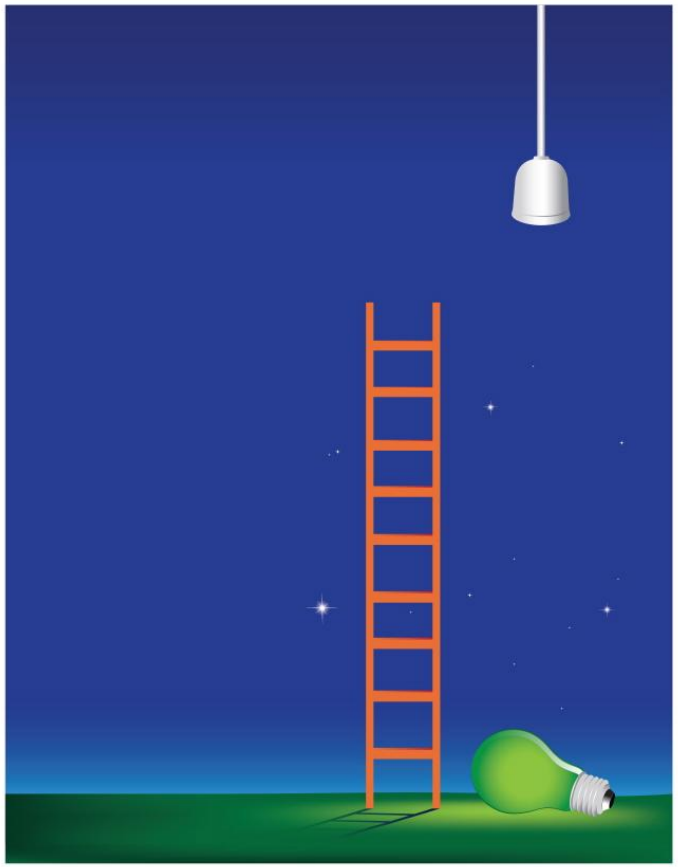
- 99.9% of all people who die from cancer have eaten pickles.
- Of the people born in 1839, who later dined on pickles, there has been 100% mortality.
- 96.8% of all Red sympathizers have eaten pickles.

Pickles and Humbug: A Bit of Comparative Logic. anonymous

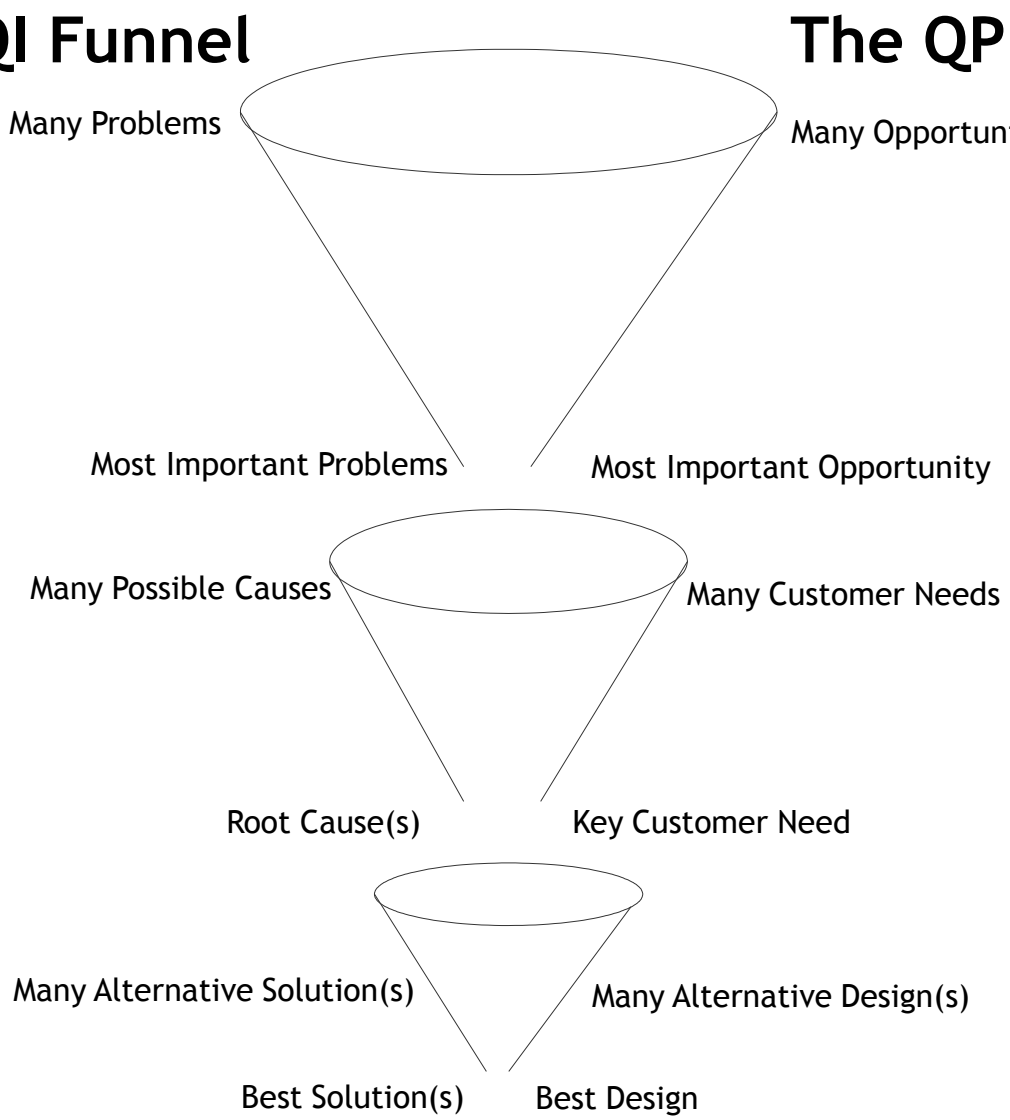
Continuous scientific method

So, *WHY* do we need a "method"? Why don't we just start fixing stuff?

- Efficient – steady process
- Effective – the "right" fix
- Sustainable – improvement that can be maintained



The Quality Management Funnels



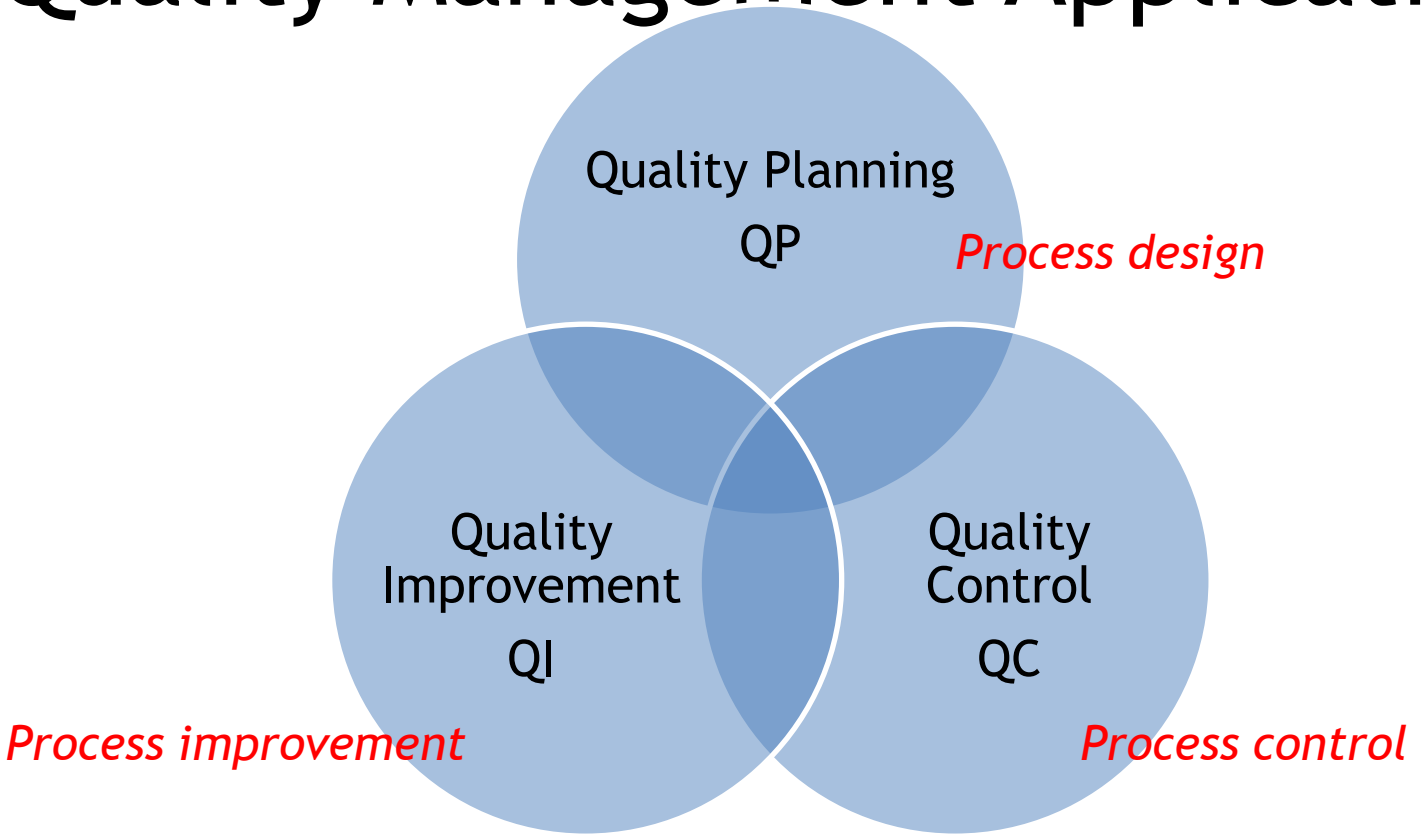
Exercise

POLL

Which of the following is NOT a key principle of Quality Management?

A. Understand process performance, including capability and variation
B. Employ a continuous scientific method
C. Customer needs are of secondary importance
D. Use evidence/data to make decisions

Quality Management Applications



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Trilogy as different starting places

Quality Control

- Problem(s) narrow & easily defined
- Variables understood
- Measures & Controls in place
- Customer needs understood
- Process is stable, predictable results

Quality Improvement

- Problem(s) more complex (though still easily defined)
- Process exists; may have been documented
- Few controls in place
- Data available but unanalyzed
- Customer needs assumed
- Process appears capable of meeting customer needs – at least some of the time
- Process reasonably stable

Quality Planning

- Customer needs are consistently going unmet
- Process/service does not exist, or
- Current performance not capable of meeting customer needs

When is Quality Planning project appropriate?

- Service/process has never existed before
- Customer requirements are not known
- OR, Existing service/process performance is not capable of meeting customer requirements
- Service/process is ad hoc; *extremely* variable; never been well defined or worked on before *as a whole*
- Current performance has multiple problems … not 1 or 2
- Unstable environment – major market, technology, organizational change on *near* horizon
- No performance data exist or would take excessive time/expense to collect data
- Organizational support for effort during and after the project

When is a Quality Improvement Project appropriate?

- Cross functional problem
- There is an existing process that is reasonably understood
- Problem can be narrowly defined – cycle-time, # of incidences, etc. (1 or *maybe* 2 problems; not many)
- Customer requirements are understood
- Performance data are available or can be collected without too much time and/or expense
- Environment is stable – no major market, organization, or technology changes on *near* horizon
- There is organizational support for effort during AND after project complete

When Do You "Do" Quality Control?

- Think of it as quality improvement in daily work
- Ongoing measures and procedures are already in place
- The data is being collected
- Someone actually looks at this data on a routine or systematic basis
  - *Understanding process variation*
- Data is assessed against known customer requirement(s)
  - *Understanding process capability*
- It's ongoing and forever – this is how you do your work

The QI-QP hybrid

- Projects can start with a QI approach and not find narrow "root" causes
- Large portions or even all of the process may need to be re-designed
- Or, you may find that the original process was never designed with the customer in mind
- Even standard QI projects can sometimes benefit by borrowing from the QP toolbox

"The Liger is pretty much my favorite animal"

-- Napoleon Dynamite

"I want to be a Drago-Sauer for Halloween"

-- Xavier Wenzl

Let's Discuss

- What ideas did you have about topics in your organization for quality improvement (process improvement) and quality planning (process design)?
- What questions do you have about the three aspects of quality management, planning, control and improvement?

STEPS TOWARD IMPLEMENTATION

Quality Management Methods & Tools

Public Health Standards Context

Domain 9: Evaluate and continuously improve processes, programs, and interventions Evaluate the Effectiveness of Public Health Processes, Programs, and Interventions

Standard 9.1 B: Evaluate public health processes, programs, and interventions provided by the agency and its contractors.

Standard 9.2 B: Implement quality improvement of public health processes, programs, and interventions.

2010-2011 Standards for Public Health in Washington State (Local Public Health Agencies)

Key Elements of Quality Management

1. Leadership
2. Measurement system
3. Adoption of methods and tools
4. Staff development
5. Culture shift

Quality Management Implementation Common Phase Characteristics

Exploration	• Senior leaders benchmark & study • Lead champion identified
Pilot	• More formal training of managers and key support staff • 1-2 pilot projects
Foundation	• Quality leadership group established • Measurement system established • Multiple QM projects
Expansion	• Measurement system improved and aligned • More QM projects • Formal quality agenda and alignment to strategic priorities • Dissemination of tools and practices
Routine	• No distinction between quality management and daily management • Improvement cycles routine and faster • Use of QI methods and tools ubiquitous

Review of Learning Objectives

- Describe at least two vital reasons for performance management and reporting
- State how performance management relates to community health assessment, health improvement plans, strategic plans, and quality improvement plans
- Describe at least two processes key to effective performance management
- Describe the three quality management approaches

Additional Resources

- A Performance Management Framework for State and Local Government, National Performance Management Advisory Commission, 2010, www.pmcommission.org/APerformanceManagementFramework.pdf
- Turning Point Performance Management, refreshed: www.phf.org/programs/PMtoolkit/Pages/Turning_Point_Performance_Management_Refresh.aspx
- Embracing Quality in Local Public Health: Michigan's Quality Improvement Guidebook, 2011, www.accreditation.localhealth.net
- Public Health Memory Jogger, GOAL/QPC, 2007, www.goalqpc.com
- Bialek R, Duffy DL, Moran JW. The Public Health Quality Improvement Handbook. Milwaukee, WI: ASQ Quality Press; 2009
- The Improvement Guide, Langley et al. Jossey-Bass, 1996.

Additional Resources

- Guidebook for Performance Measurement, Turning Point Performance Management National Excellence Collaborative, 2004, http://www.phf.org/pmc_guidebook.pdf
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- Juran, J.; Juran on Planning for Quality, Free Press, 1988
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- Peter Scholtes, The Team Handbook, Joiner, 1988
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THANKS FOR YOUR PARTICIPATION!

Please complete the evaluation you receive via email.

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March 20, 2013
"Communicating with Data"

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What Questions Do You Have?

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