

Oregon Quality Connection

Quality and accreditation news for the Oregon public health system



January 2013 | Volume 3 : Issue 1

Inside this issue

Public Health Improvement Program (NPAIHB).....	1
Public Health Division accreditation update	2
QI spotlight: North Central Public Health District.....	3
Trainings and resources	4

Interested in reading more about the accreditation prerequisites? Check out www.healthoregon.org/about to learn more.

Program contact

PHD Performance Management Program
971-673-1223
lydia.s.emer@state.or.us

Public Health Improvement Program: Year 2 training goals achieved

Rachel Ford, MPH, Northwest Portland Area Indian Health Board (NPAIHB)

Public Health Improvement Program overview



The Northwest Portland Area Indian Health Board (NPAIHB) was one of eight tribal grantees chosen to participate in the Centers for Disease Control and Prevention's National Public Health Improvement Initiative (NPHII). NPAIHB's Public Health Improvement

Program is meeting the goals of the NPHII grant by helping its 43 member tribes use education and technical support to increase their organizational capacity and quality improvement (QI) efforts. NPAIHB is also promoting integration of a "QI culture" and linking QI with public health accreditation of tribally based health departments.

Public Health Improvement Program year 2 goal: Series of 3 public health accreditation trainings

The primary goal for year 2 was to bring a series of three public health accreditation trainings to the tribes. The trainings were chosen based on data collected from a Public Health Improvement Survey conducted in year 1 of the program. Training and travel costs were covered for all tribal participants. Twenty-four of the 43 tribes participated in one or more of the trainings,

The first training, *Tribal Public Health Accreditation 101*, was held February 9, 2012, and repeated on April 6, 2012. There were 33 participants in February and 11 in April. The second training in the series, *Tribal Public Health Accreditation Readiness and Self-assessment*, was conducted June 6 and 7, 2012, with 25 people attending. The third training in the series, *Tribal Public Health Accreditation Prerequisites*, was conducted September 18, 2012, and had 13 participants.

Congratulations to the most recent local health department grant recipients:

Clatsop County – will focus on developing a continuous quality improvement plan and public health strategic plan.

Klamath County – will develop an agency strategic plan.

Washington County – will create a workforce development plan in alignment with Domain 8.

**Public Health Improvement Program, continued
Year 3 training opportunities**

Four trainings will be available in year three: *QI Basics* taught by Marni Mason; *Cherokee Nation: Best Practices* taught by Laura Sawney-Spencer; and two additional public health accreditation trainings. All tribal health directors, delegates and prior training participants will receive training notices, and updated information will be available on the NPAIHB website.

For more information, contact Rachel Ford at rford@npaihb.org or at 503-416-3282.

Public Health Division – Accreditation Update



The Public Health Division (PHD) is thrilled to share that the Public Health Accreditation Board (PHAB) accepted our application for accreditation in September 2012. We have participated in the required PHAB training and are busy collecting and scoring documents. Accreditation has become a division-wide effort, with 31 volunteers joining our Accreditation Steering Committee to review document submissions. The scoring process is helping us identify gaps in our system that could be addressed through quality improvement activities or leadership assistance. However, we are also discovering terrific best practices that we plan to share across PHD and with the local public health system.

Along with our accreditation application work, PHD is also busy implementing our prerequisites. The strategic plan now has champions who are working to make the strategies come alive and reach out to our broader community for assistance. The statewide health improvement plan, *Oregon's Healthy Future*, is being updated to improve the strategies in the health equity and substance abuse priority areas. Expect to see a request for feedback on our updated plan in late January. We are aiming to publish an updated community health assessment in fall 2013.

For more information, contact Anona Gund at anona.e.gund@state.or.us or visit the Accreditation and Quality Improvement website at www.healthoregon.org/accreditation.

Performance Management Program contacts:

Lydia.S.Emer
@state.or.us

Performance Improvement
Manager

Sarah.C.Apodaca
@state.or.us

Administrative Specialist

Matt.S.Gilman
@state.or.us

Quality Improvement
Specialist

Anona.E.Gund
@state.or.us

Accreditation Analyst (PHD
accreditation)

Spencer.Soderlind
@state.or.us

Quality Improvement
Specialist



Quality improvement (QI) success stories

Local spotlight: Successful QI project in North Central Public Health District

A primary goal of public health accreditation is to promote performance improvement and continuous quality improvement. Many local health departments are actively working on quality improvement projects and writing QI plans and policies. Approximately 21 of the 34 LHDs have implemented some kind of formal quality improvement.

Here is an example of a successful QI project completed this past year:

North Central Public Health District (representing Sherman, Gilliam and Wasco counties) has been working on numerous QI projects. One successful project decreased clinic no-show rates. Historically, a high rate of clients (approximately 35 percent) did not show up for their scheduled family planning and STD appointments. This led to wasted staff resources to make reminder calls, prepare client charts and rooms, and review client history prior to arrival. In addition, staff was unable to offer missed appointments to other clients. All of this contributed to less consistent client care.

To launch this improvement, staff used the Plan-Do-Check-Act Cycle. They started by identifying the problem and then made a work plan. They implemented their improvement activities, which included making reminder calls to clients two days prior to appointments, clearly emphasizing the importance of keeping appointments, clarifying what the appointments would entail and dispelling any misconceptions. They also did follow-up calls with no-show clients to better understand the barriers.

The team discovered that reminder calls two days prior to the appointment helped decrease no-shows. They also found some clients were unaware of the procedures to expect during their visits.

At the end of the project, they decreased the no-show rate from 35 percent to 18.6 percent and realized an estimated average monthly revenue increase of \$3,278. The group plans to reassess the situation within a year to ensure the improvement has taken hold.

For more information, contact Kristy Beachamp at kristyt@co.wasco.or.us



Trainings and resources

Quality planning in public health

There is a tremendous amount of work happening throughout the state and nation to help prepare for public health accreditation. Continuous improvement is a core element of this work and critical to build high performing organizations.

Many of us are familiar with quality improvement tools and concepts that have been used for several years in the public sector. However, another set of improvement tools is also available: quality planning.

Quality planning consists of developing services and processes required to meet customers' and clients' needs.* In quality improvement, teams identify a process, collect data that highlights a problem, and work to improve what is currently being done.



There are a few key differences between quality planning and quality improvement.. First, quality planning can be used with a particular service or process that does not exist. It is also a helpful tool when clients' or customers' requirements are not readily known. Perhaps **the biggest difference between quality improvement and quality planning is that, with quality planning, no performance data exists or may take an excessive amount of time or expense to collect.**

Several helpful tools can help when beginning a quality planning endeavor. Frequently used tools include:

- Sector mapping – to identify key stakeholders and their specific needs.
- Force field analysis – to identify both driving and restraining forces.
- Meeting effectiveness tool – to improve the participation and contribution of community partners.
- Partnership profiles.

Quality planning offers a new way to approach process development in public health.

*“Juran on Planning for Quality”

Accreditation and quality improvement workshop with NACCHO speaker Judy Mattingly



Erin Mowlds, Local Accreditation Manager, Coalition of Local Health Officials

Save the date for this upcoming workshop on Wednesday, February 20, 8:30 a.m. to noon in Salem. You will receive an agenda with location and additional information soon. A speaker from Franklin County Health Department in Kentucky will discuss that organization’s accreditation experience (they were a beta test site and completed their accreditation site visit in October 2012), and how that has led them to develop a culture of QI. She will also share their QI plan (with comments from site visitors) and some examples of successful QI projects, and discuss how staff at all levels can be involved in QI and gathering accreditation documentation. There will be other accreditation and QI workshop activities for the rest of the session. Please watch for the agenda.

Accreditation Work Group meeting

The next Accreditation Work Group meeting will be held Monday, February 11, 1:30 to 3:30 p.m. at the Portland State Office Building; webinar and call-in options will be available. The meeting will focus on discussing documentation for Domains 2 and 11, along with some other updates and discussion topics. Please gather the documentation you plan to use for these two domains along with any questions or thoughts related to these requirements. An agenda will be distributed soon.

Call for articles

Does your local health department or public health program have a quality improvement success story to share?

Please email your story to Matt Gilman at:
matt.s.gilman@state.or.us.

Contact us:

**OHA Public Health Division
Performance Management
Program**
800 N.E. Oregon St., Suite 930
Portland, OR 97232
Phone: 971-673-1223

This document can be provided upon request in alternate formats for individuals with disabilities or in a language other than English for people with limited English skills. To request this form in another format or language, email matt.s.gilman@state.or.us, or call 503-731-3088 (voice) or 971- 673-0372 (TTY).