

Countryside Public Health

Quality Improvement Plan

Draft: September 8, 2014
Revised October 9, 2014

Purpose, Mission and Vision:

Purpose: The purpose of Countryside Public Health (CPH) is to provide a framework and process for quality improvement throughout the agency.

Mission/Vision: Countryside Public Health will develop and facilitate an agency culture and standard of practice that incorporates continuous quality improvement processes into all agency activities.

Values of Countryside Public Health:

Quality improvement is a system approach to assessing services and improving them on a priority basis and is based on the following values:

- 1) **Community Health Assessment and Planning.** Community needs, resources, and available services are assessed to assure agency activities work to support a community/systems approach to meeting priority needs. Countryside Public Health works to facilitate effective collaboration amongst community partners and strives to be a trusted, a respected, and a valued community partner.
- 2) **Prevention Oriented.** Services are characterized by a commitment to promoting and preserving wellness.
- 3) **Employee Empowerment.** Effective programs involve people at all levels of the organization in improving quality.
- 4) **Leadership Involvement.** Strong leadership, direction, and support of quality improvement activities by the Countryside Board of Health and administration team are vital to performance improvement. Organizational leadership assures that quality improvement initiatives are consistent with Countryside's mission and strategic plan.

- 5) **Data Informed Practice.** Successful quality improvement processes create feedback loops, using data to inform practice and measure results. Fact-based decisions are likely to be correct decisions.
- 6) **Continuous Improvement.** Processes must be continually reviewed and improved. Small incremental changes *do* make an impact.

Countryside Public Health has a strong history of commitment to and belief in quality improvement processes. The agency has some individual components needed to support a quality improvement in place; however, the pieces need to be drawn into an operational framework.

The QI components that currently exist that can be built upon include:

- ❖ Annual program work plans and reports done monthly
- ❖ Program teams (employees are empowered to develop strategies and manage program activities independently)
- ❖ Administrative support/focus to program teams and work plan management
- ❖ History of success with past quality improvement projects
- ❖ Informatics/data support
- ❖ Culture - board, leadership and staff support of quality improvement
- ❖ New employee orientation and staff training
- ❖ Documentation system and program reports that can provide feedback and support performance management
- ❖ *Program advisory committee* (PAC) is an existing structure of public health staff that has the capacity for quality improvement oversight

The Organizational Structure and Charter for Countryside Public Health

The Program Advisory Committee (PAC) will provide ongoing operational leadership of continuous quality improvement activities at Countryside Public Health. PAC will be responsible for oversight of QI efforts and for promoting, training, challenging, and empowering all agency staff to participate in the ongoing process of QI.

Actions and decisions made by PAC will be compared against the QI mission statement to evaluate if the actions and decisions are consistent with the intent of the mission.

PAC will guide and evaluate the QI process by:

- Developing the QI plan and establishing a calendar for QI activities
- Identifying processes that need improvement
- Developing team consensus on the root cause of a problem and on the plan for improvement
- Identifying, monitoring, and reviewing results from QI projects using the *plan, do, check, act* (PDCA) cycle
 - ❖ **Plan** what to accomplish over a period of time and what needs to be done
 - ❖ **Do** what is planned
 - ❖ **Check** the results of what was done to see if objectives were achieved
 - ❖ **Act** on the information
- Evaluating and approving the QI plan
- Championing QI activities, tools, and techniques
- Developing a strong customer focus - internal and external
- Encouraging and fostering a supportive QI environment
- Involving all staff through encouragement, training, support, and celebration of accomplishments
- Mobilizing knowledge to improve decision making
- Providing a safe and efficient outlet for ideas at all levels
- Facilitating and supporting approved individual quality improvement project teams

The administration team supports the efforts of PAC and will be attentive to seek out feedback to support QI projects. The administration team is accountable to regularly touch base with PAC to ensure QI projects are moving forward.

Membership:

Employees with a strong desire to support quality improvement processes and values will be sought for membership to PAC as PAC members will be key “QI champions.” Members may be from any discipline and any office location (potential members will not be excluded because of concurrent representation of office or discipline).

Basic quality improvement training will be presented to all staff as well as an outline of PAC expected tasks and commitments prior to membership recruitment so employees have the opportunity to understand the scope and duties that PAC membership will entail.

PAC will meet every other month, with an expectation of two to three hours of assignment time between meetings. Meeting agendas, minutes, and handouts/presentations will be posted in a timely manner in a location accessible for review by all agency employees. PAC will provide a report of the QI program to the board of health twice annually.

Training:

New employees will receive an orientation on QI presentation materials. The Minnesota Department of Health website has excellent trainings for staff. The administration team will be responsible for new employees to attend/listen to QI training from the MDH website.

A basic overview of quality improvement processes will be provided to all agency staff. A presenter from the Minnesota Department of Health will be requested to provide QI training. When the membership of PAC has been formed additional training in specific quality improvement tools and methods will be conducted.

Quality improvement project teams would receive just-in-time training on tools and methods upon approval of the specific project.

At least annually, all staff is provided QI 101 training, is updated on QI projects, and participates in discussion about QI ideas.

Process for identifying projects:

All agency staff is encouraged to submit ideas for quality improvement projects.

Priority will be placed on projects that align with the agency priorities, existing goals, and/or identified gaps. PAC will identify cross-program QI projects. PAC will provide support to those projects which align with the agency mission and goals and which are able to be completed with available resources.

Examples of where improvement initiatives may come from might include:

- ❖ Areas where the agency or individual programs partially met or did not meet a public health standard
- ❖ An analysis of activity performance measures where efforts are falling short
- ❖ Strategic plan measures dealing with human resources, customer service and organization improvement
- ❖ Results of evaluations of programs or administrative systems and functions
- ❖ Employee views on systems that need improvement
- ❖ Assessment of internal and external customer feedback

The administration team will request feedback and suggestions for identifying QI projects on a regular basis.

Goals/Objectives and Measures

Goal 1. The PAC group will develop and oversee the QI plan. A schedule of meetings for 2015 will be established

Objective: To have a PAC group that functions as a QI council with QI projects

Measure: The PAC group will have scheduled meetings, minutes, and measured work plans for the QI projects chosen

Key Strategies:

- I. Recruit members for the PAC group
- II. Conduct QI basics training for the PAC group
- III. Create a formalized meeting schedule for 2015
- IV. Measure work plan progress

Goal 2. Develop an annual Countryside Public Health QI plan

Objective: QI plan will be developed by 3/31/2015; approved by the administration team

Measure: Countryside will have two QI projects

Key Strategies:

- I. Conduct an inventory of existing projects and issues the agency is working on
- II. Identifying new possibilities and frameworks to identify projects
- III. Select two QI projects by March, 2015

Goal 3. Countryside Public Health will have a formalized communication system between the informatics staff and the agency as a whole on QI projects

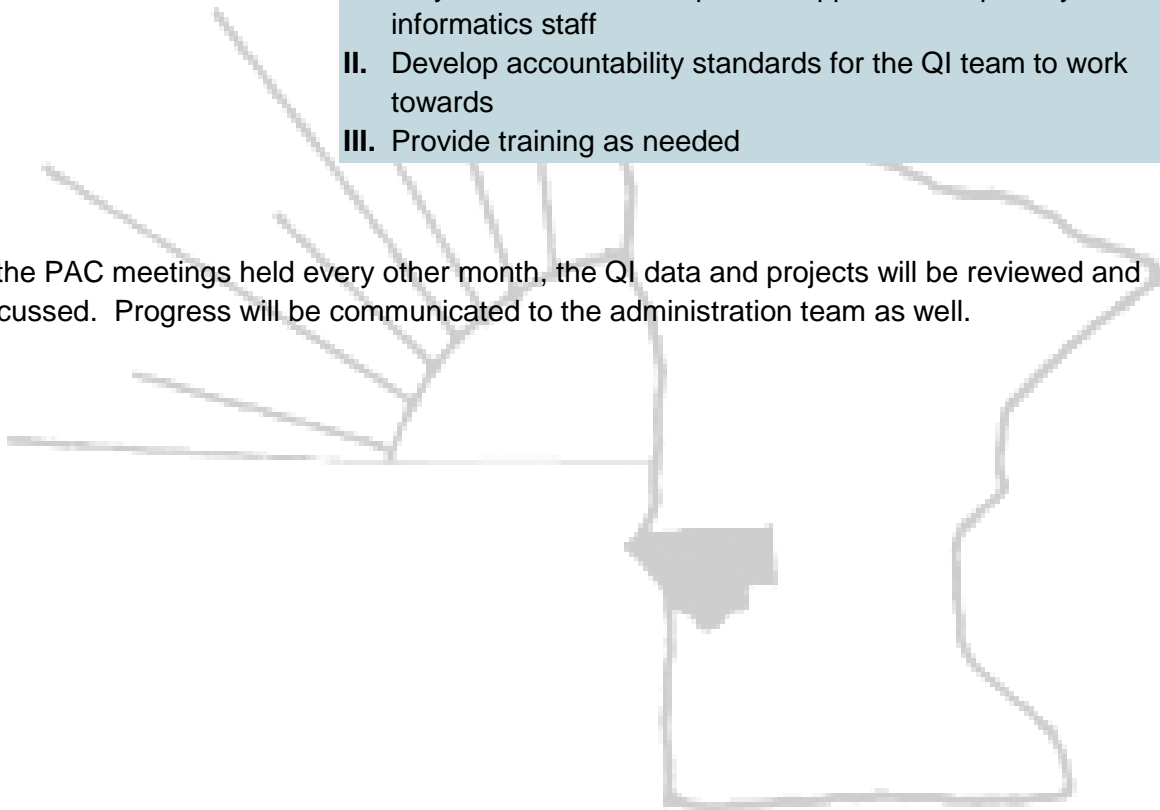
Objective: The PAC QI staff and informatics staff will develop a method of communication on the QI annual plan and projects selected

Measure: Administration will quarterly monitor the process developed to support the QI annual plan and QI projects chosen

Key Strategies:

- I. A system will be developed to support the QI plan by the informatics staff
- II. Develop accountability standards for the QI team to work towards
- III. Provide training as needed

At the PAC meetings held every other month, the QI data and projects will be reviewed and discussed. Progress will be communicated to the administration team as well.



Communication and Promotion

The PAC team will communicate the annual QI plan and update the activities and progress to the public health staff and Countryside community health board twice a year. The PAC team will take minutes of each meeting and an electronic folder will be created for access to all staff. The administration team will have communication related to QI on our Countryside Public Health website.

Countryside Public Health will share the results of the QI projects in the form of storyboard displays, presentations to the Countryside board or for other coalitions.

Monitoring the Plan/Assessing Effectiveness

The PAC team will annually review and make suggested revisions to the QI plan to ensure that the plan aligns with mission and vision of Countryside Public Health. Countryside Public Health will also evaluate if the QI plan partners with the national accreditation standards and the Minnesota local public health assessment and planning process.

The annual plan will be assessed to see if progress towards targets and goals for the selected QI projects are being met. The QI plan should align with the agency's overall work plans and community health assessment. The 10 identified health needs should also be assessed alongside this plan to evaluate if the population improved because of quality improvement work being tested and implemented.

