

## ***DIVISION OF PUBLIC HEALTH***

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**Policy Memorandum Number 63**

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**Subject: Performance Management System**

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Approved by: \_\_\_\_\_

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### **PURPOSE:**

To establish a policy and procedure for a Performance Management (PM) System within the Delaware Division of Public Health (DPH).

### **POLICY STATEMENT:**

DPH has an inherent interest in performing public health activities effectively and efficiently. DPH will use an organized and structured PM System to monitor activities, such as programs, processes, services, and interventions to ensure established goals and objectives are achieved. The Public Health Performance Management System outlined in Appendix A will be used as a guide.

### **OVERVIEW OF PERFORMANCE MANAGEMENT IN DPH**

Staff members responsible for programs and other public health activities establish objectives for those programs and activities and identify indicators for measuring progress toward achieving those objectives. Goals and objectives for DPH should align with the organizational strategic plan, Department of Health and Social Services (DHSS) initiatives, and other state plans, such as State Health Improvement Plan. Progress is monitored; data are collected, analyzed and reported. Opportunities for improvement are identified whenever progress toward goals and objectives is not reached; quality improvement methods and tools will be used to improve programs and other activities and processes. DPH leadership supports the Performance Management System through emphasis and inquiry.

The Strategic Leadership Group will function as the DPH Performance Management Committee and will monitor progress of the Division strategic priorities and Top Level Strategic Map objectives on a periodic basis.

### **KEY PM TERMS DEFINED:**

#### ***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. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA, May 2011)

#### ***Intervention***

Intervention is a generic term used in public health to describe a program or policy designed to have an impact on a health problem. For example, a mandatory seat belt law is an intervention designed to reduce the incidence of automobile-related fatalities. Five categories of health interventions are: (1) health promotion, (2) specific protection, (3) early case finding and prompt treatment, (4) disability limitation, and (5) rehabilitation. (Turnock. *Public Health: What It Is and How It Works (4th Ed)*. Jones and Bartlett. MA. 2009)

#### ***Objectives***

Objectives are targets for achievement through interventions. Objectives are time limited and measurable in all cases. Various levels of objectives for an intervention include outcome, impact, and process objectives. (Turnock, B.J. *Public Health: What It Is and How It Works. 4th ed*. Sudbury, MA: Jones and Bartlett; 2009.)

#### ***PDSA/PDCA***

The Plan - Do – Study (Check) – Act method is the most widely used, simple approach for use in quality improvement projects. The terminology of PDSA and PDCA may be used interchangeably. When described as the PDSA Cycle, the method is a continuous effort of repeated iterations of PDSA. DPH endorses the PDSA method or approach for QI projects given its universal application; however, DPH encourages the use of other models when appropriate for a specific QI project.

#### ***Performance Measurement***

Performance measurement is the development, application, and use of performance measures to assess achievement of performance standards.

### **Performance Standards**

Performance standards are the establishment of organizational or system standards, targets, and goals to improve public health practices. Standards may be set based on national, state, or scientific guidelines, benchmarking against similar organizations, the public's or leaders' expectations, or other methods.

### **Policy**

Policy is the general principles by which a government entity is guided in its management of public affairs. For a health department, this may encompass external or community-facing policies (e.g., clean air or school physical education guidelines) as well as internal policies affecting staff (e.g., family leave or hiring practices). (Adapted from: Garner, B.A. editor. *Black's Law Dictionary*. 8th ed. West Group; 2004)

### **Procedure/Protocol**

A procedure or protocol is a written description of the way in which a particular action or set of actions should be accomplished.

([www.merriam-webster.com/dictionary/procedure](http://www.merriam-webster.com/dictionary/procedure))

### **Programs, Processes, and Interventions**

Programs, processes, and interventions are the terms used to describe functions or services or activities carried out through the daily work of public health departments. (Public Health Accreditation Board. Unpublished definition. 2010-2011)

### **Public Health**

The mission of public health to fulfill society's desire to create conditions so that people can be healthy. Public health includes the activities that society undertakes to assure the conditions in which people can be healthy. These activities include organized community efforts to prevent, identify and counter threats to the health of the public.

Public health is:

- the science and the art of preventing disease, prolonging life, and promoting physical health and mental health and efficiency through organized community efforts toward a sanitary environment;
- the control of community infections; the education of the individual in principles of personal hygiene;
- the organization of medical and nursing service for the early diagnosis and treatment of disease; and
- the development of the social machinery to ensure to every individual in the community a standard of living adequate for the maintenance of health.

(Turnock. *Public Health: What It Is and How It Works (4th Ed)*. Jones and Bartlett. MA. 2009; Winslow. *Man and Epidemics*. Princeton Press. NJ. 1952. Institute of Medicine. *The Future of Public Health*. National Academies Press. Washington, DC. 1988; Public Health Accreditation Board. *Standards and Measures Version 1.5*. Alexandria, VA, May 2011)

**Public Health Program**

A public health program, for accreditation purposes, is defined as a set of activities and interventions aimed at improving the health of a particular segment of the population or of the population as a whole. Examples of public health programs include, but are not limited to environmental public health, maternal-child health, chronic disease management and prevention, and emergency preparedness. (Public Health Accreditation Board. *Standards and Measures Version 1.0*. Alexandria, VA. May 2011)

**Quality Improvement (QI)**

Quality improvement in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act (PDCA), which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community. (Riley, Moran, Corso, Beitsch, Bialek, and Cofsky. *Defining Quality Improvement in Public Health*. Journal of Public Health Management and Practice. January/February 2010)

**Quality Improvement Methods**

A variety of practices exist to assist in quality improvement efforts. The PDSA/PDCA or Shewart Cycle was popularized by W. Edwards Deming during the post-WWII effort to reindustrialize Japan. Other popular methods include Lean, Six-Sigma, Lean Six-Sigma, DMAIC (define/measure/analyze/improve/control), Performance Excellence (4<sup>th</sup> Generation Management), Model for Improvement, and the Malcolm Baldrige National Quality Standards.

**Quality Improvement Tools**

A variety of tools used to identify how processes, programs, and services can be improved. Tools include: flow charts, cause-and-effect diagrams, Pareto charts, scatter diagrams, control/run charts, brainstorming, logic models, SWOT analysis, and numerous others.

**Reporting Progress**

Reporting progress is the documentation and reporting of how standards and targets are met, and the sharing of such information through appropriate feedback channels.

### ***Strategy Map (see example in Appendix B)***

A strategy map is a visual representation of the strategy of an organization. It illustrates how the organization plans to achieve its mission and vision by means of a linked cause-and-effect chain of strategic objectives<sup>1</sup>. Measures and initiatives are associated with each objective, which can be included in a balanced scorecard,<sup>2</sup> a key component of a performance management system.

Some of the benefits of a strategy map are that:

- The discipline of creating the strategy map engages the team, and often promotes much greater clarity and commitment to the strategy;
- Once created, the strategy map is a powerful communication tool that enables employees and stakeholders to understand the strategy, and translate it into actions they can take to help the organization succeed;
- Aligns day-to-day work to the strategy;
- Provides a disciplined framework for measuring strategic objectives.

A balanced scorecard is a visual display of performance indicators categorized into four areas called perspectives. DPH uses the four perspectives below for its strategy maps

1. Outcomes
2. Implementation
3. Process and Learning
4. Assets

### ***The Strategic Leadership Group***

A subset of the Director's leadership team formed for the purpose of monitoring progress toward achievement of the Division's strategic priorities.

### ***Training***

Training for the public health workforce includes the provision of information through a variety of formal, regular, planned means for the purpose of supporting the public health workforce in maintaining the skills, competencies, and knowledge needed to successfully perform their duties. (Institute of Medicine. *Who Will Keep the Public Healthy?* National Academies Press. Washington, DC, 2003).

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<sup>1</sup> A User Guide for Strategy Mapping, Division of Public Health, Office of Performance Management. June 3, 2010.

<sup>2</sup> The concept of a balanced scorecard was first advanced by Robert Kaplan and David Norton in the 1990's.

## **RESPONSIBILITIES/PROCEDURES:**

### **The Strategic Leadership Group**

1. Will function as the DPH Performance Management Committee supported by the Office of Performance Management.
2. Will establish and maintain a top level strategy map including measurable objectives for monitoring the Division's progress.
3. Will monitor progress via key performance measures of the Division's strategic priorities and other top level strategy map objectives as outlined in the strategic plan at its monthly meetings.
4. Will use the Division's performance dashboard system to store key performance measures and to report on progress. While the preference will be to use a performance dashboard system for progress reporting, other methods of reporting can be used such as Microsoft Excel.
5. Will identify opportunities for improvement when progress toward goals and objectives are not reached for referral to the Quality Improvement Council established via PM 41.

### **Section Chiefs**

1. Are responsible for section programs and will establish objectives for those programs and identify indicators for measuring progress toward achieving those objectives.
2. Will establish progress monitoring and a reporting process during section level meetings.
3. Will use the Division's performance dashboard system to store key performance measures and to report on progress. While the preference will be to use a performance dashboard system for progress reporting, other methods can be used such as Microsoft Excel.
4. Will identify opportunities for improvement when progress toward goals and objectives are not reached.
5. Will use quality improvement methods outlined in the DPH Quality Improvement Program Policy (PM 41) to improve programs, activities, and processes.

## **Office of Performance Management**

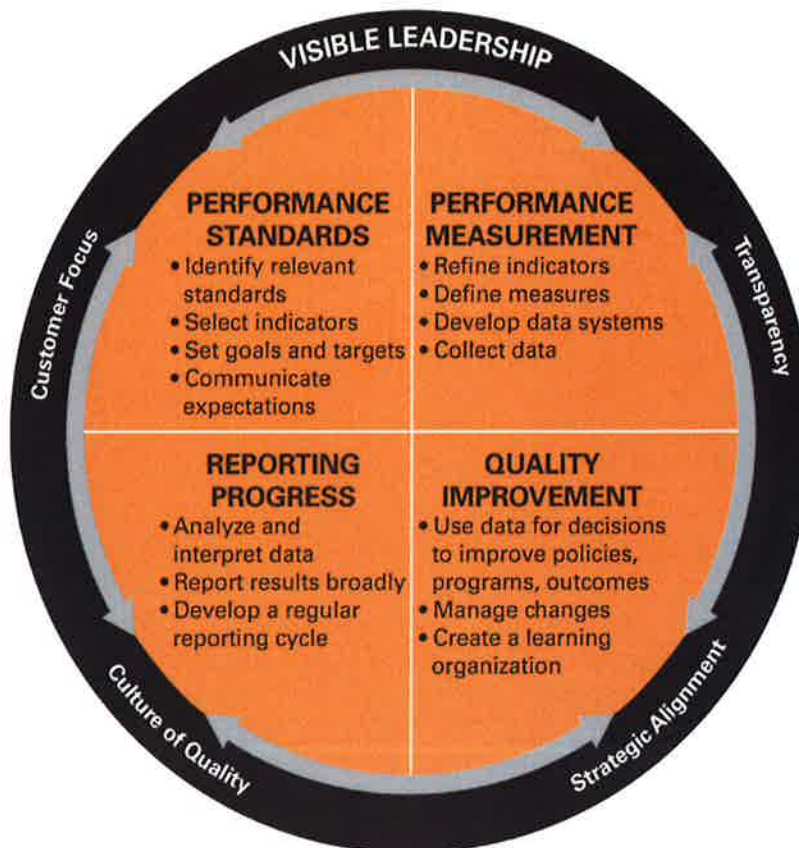
1. Will facilitate or arrange for performance management system training to support advancement of a performance management practices in DPH.
2. Will facilitate or arrange training for performance reporting using a performance dashboard reporting system.

### **EFFECT:**

1. This policy becomes effective immediately.
2. This division policy supersedes all other policies, directives, or rules related to subject.

## Appendix A

### PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM



In 2002, the Public Health Foundation (PHF) was part of the Turning Point Performance Management National Excellence Collaborative (PMC), which developed a package of resource materials to help public health systems manage performance. Acknowledging advancements in the public health field, changing priorities, and the breadth of examples that have been developed in recent years, PHF went through a two year process to refresh the Turning Point Performance Management Framework in 2012 as part of a refresh effort by a collaborative, multidisciplinary think tank. The updated Public Health Performance Management System Framework shown here depicts the practices by which PM can be achieved. Continuous integration of these practices into the core operations of an organization enables PM to produce long lasting benefits. The core practices within the circle must be supported by visible leadership in order to sustain a culture of performance excellence.

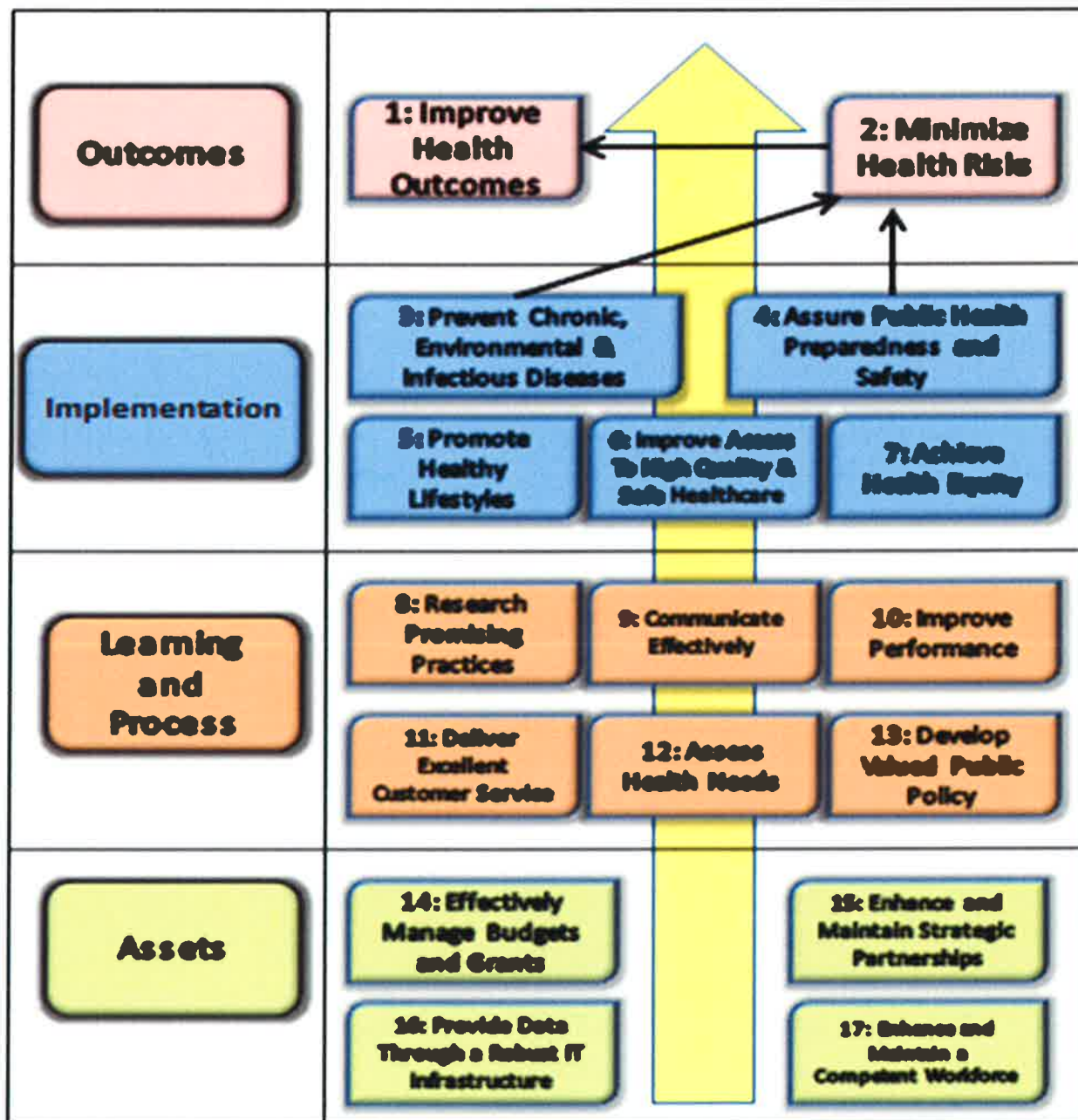
The five components are defined as follows:



- **Visible Leadership** is the commitment of senior management to a culture of quality that aligns PM practices with the organization's mission, regularly takes into account customer feedback, and enables transparency about performance between leadership and staff.
- **Performance Standards** are the establishment of organizational or system standards, targets, and goals to improve public health practices. Standards may be set based on national, state, or scientific guidelines, benchmarking against similar organizations, the public's or leaders' expectations, or other methods.
- **Performance Measurement** is the development, application, and use of performance measures to assess achievement of performance standards.
- **Reporting Progress** is the documentation and reporting of how standards and targets are met, and the sharing of such information through appropriate feedback channels.
- **Quality Improvement (QI)** is the establishment of a program or process to manage change and achieve quality improvement in public health policies, programs, or infrastructure based on performance standards, measures, and reports.

## Appendix B

### Delaware Division of Public Health Top Level Strategy Map



November 2011, Revised August 2012, Revised September 2013, Revised August 2014