

Domain 9: Evaluate and continuously improve health department processes, programs, and interventions

Domain 9 focuses on using and integrating performance management quality improvement practices and processes to continuously improve the public health department's practice, programs, and interventions.

DOMAIN 9 INCLUDES TWO STANDARDS:

Standard 9.1

Use a Performance Management System to Monitor Achievement of Organizational Objectives

Standard 9.2

Develop and Implement Quality Improvement Processes Integrated Into Organizational Practice, Programs, Processes, and Interventions

STANDARD 9.2: DEVELOP AND IMPLEMENT QUALITY IMPROVEMENT PROCESSES INTEGRATED INTO ORGANIZATIONAL PRACTICE, PROGRAMS, PROCESSES, AND INTERVENTIONS.

Performance management system concepts and practices serve as the framework to set targets, measure progress, report on progress, and make improvements. An important component of the performance management system is quality improvement and the implementation of a quality improvement program. This effort involves integration of a quality improvement component into staff training, organizational structures, processes, services, and activities. It requires application of an improvement model and the ongoing use of quality improvement tools and techniques to improve the public's health. Performance management leads to the application of quality improvement processes.

Quality improvement is the result of leadership support. It requires staff commitment at all levels within an organization to infuse quality improvement into public health practice and operations. It also involves regular use of quality improvement approaches, methods, tools and techniques, as well as application of lessons learned from evaluation.

Standard 9.2: Develop and implement quality improvement processes integrated into organizational practice, programs, processes, and interventions.

Measure	Purpose	Significance
<p>9.2.1 A Establish a quality improvement program based on organizational policies and direction</p>	<p>The purpose of this measure is to assess the health department's efforts to develop and implement a quality improvement program that is integrated into all programmatic and operational aspects of the organization.</p>	<p>To make and sustain quality improvement gains, a sound quality improvement infrastructure is needed. Part of creating this infrastructure involves writing, updating, and implementing a health department quality improvement plan. This plan is guided by the health department's policies and strategic direction found in its mission and vision statements, in its strategic plan, and in its health improvement plan.</p>

Required Documentation	Guidance
<p>1. A written quality improvement plan</p>	<p>1. The health department must provide a quality improvement plan. An example of an acceptable plan is one that describes:</p> <ul style="list-style-type: none"> • Key quality terms to create a common vocabulary and a clear, consistent message. • Culture of quality and the desired future state of quality in the organization. • Key elements of the quality improvement plan's governance structure, such as: <ul style="list-style-type: none"> --Organization structure --Membership and rotation --Roles and responsibilities --Staffing and administrative support --Budget and resource allocation

Measure 9.2.1 A, continued

Required Documentation	Guidance
	<ul style="list-style-type: none">• Types of quality improvement training available and conducted within the organization, such as:<ul style="list-style-type: none">--New employee orientation presentation materials--Introductory online course for all staff--Advanced training for lead QI staff--Continuing staff training on QI--Other training as needed – position-specific QI training (MCH, Epidemiology, etc.)• Project identification, alignment with strategic plan and initiation process:<ul style="list-style-type: none">--Describe and demonstrate how improvement areas are identified--Describe and demonstrate how the improvement projects align with the health department's strategic vision/mission• Goals, objectives, and measures with time-framed targets:<ul style="list-style-type: none">--Define the performance measures to be achieved.--For each objective in the plan, list the person(s) responsible (an individual or team) and time frames associated with targets--Identify the activities or projects associated with each objective and describe the prioritization process used• The health department's approach to how the quality improvement plan is monitored: data are collected and analyzed, progress reported toward achieving stated goals and objectives, and actions taken to make improvements based on progress reports and ongoing data monitoring and analysis.• Regular communication of quality improvement activities conducted in the health department through such mechanisms as:<ul style="list-style-type: none">--Quality electronic newsletter--Story board displayed publicly--Board of Health meeting minutes--Quality Council meeting minutes--Staff meeting updates

Measure 9.2.1 A, continued

Required Documentation	Guidance
	<ul style="list-style-type: none">• Process to assess the effectiveness of the quality improvement plan and activities, which may include:<ul style="list-style-type: none">-Review of the process and the progress toward achieving goals and objectives-Efficiencies and effectiveness obtained and lessons learned-Customer/stakeholder satisfaction with services and programs-Description of how reports on progress were used to revise and update the quality improvement plan.

Standard 9.2: Develop and implement quality improvement processes integrated into organizational practice, programs, processes, and interventions.

Measure	Purpose	Significance
<p>9.2.2 A Implement quality improvement activities</p>	<p>The purpose of this measure is to assess the health department's use of quality improvement to improve processes, programs, and interventions.</p>	<p>It takes practice to effectively use the quality improvement plan to improve processes, programs, and interventions. Staff benefit from seeing the plan put into action and receiving regular feedback on progress toward achieving stated objectives, as well as on how well they have executed their respective roles and responsibilities.</p>
Required Documentation	Guidance	
<p>1. Documentation of quality improvement activities based on the QI plan</p>	<p>1. The health department must provide two examples that demonstrate implementation of quality improvement activities. One example must be from a program area and the other from an administrative area. The examples should illustrate the health department's application of its process improvement model. The examples should demonstrate:</p> <ul style="list-style-type: none"> • how staff problem-solved and planned the improvement, • how staff selected the problem/process to address and described the improvement opportunity, • how they described the current process surrounding the identified improvement opportunity, 	

Measure 9.2.2 A, continued

Required Documentation	Guidance
<p>2. Demonstrate staff participation in quality improvement activities based on the QI plan</p>	<ul style="list-style-type: none">• how they determined all possible causes of the problem and agreed on root cause(s), and• how they developed a solution and action plan, including time-framed targets for improvement. <p>The example should also demonstrate what the staff did to implement the solution or process change. It should also show how they reviewed and evaluated the result of the change, and how they reflected and acted on what they learned.</p> <p>Examples of acceptable documentation include quality improvement project work plans or storyboards that identify achievement of objectives and include evidence of action and follow-up. The health department's documentation should demonstrate ongoing use of an improvement model, including showing the tools and techniques used during application of the process improvement model. Documentation should also describe: actions taken, improvement practices and interventions, data collection tools and analysis, progress reports, evaluation methods, and other activities and products that resulted from implementation of the plan.</p> <p>2. The health department must demonstrate how staff were involved in the implementation of the plan, worked on improvement interventions or projects, or served on a quality team that oversees the health department's improvement efforts. Examples of documentation may include minutes, memos, reports, or committee or project responsibilities listings.</p>