

La Crosse County Health Department Performance Management System Plan 2016

(Version 2.0)



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Section I: Performance Management System Background and Description

This La Crosse County Health Department's Performance Management System describes the active and strategic use of performance standards and measures, and the process used to report on the progress of standards to ensure the agency achieves goals as identified by the Strategic Plan.

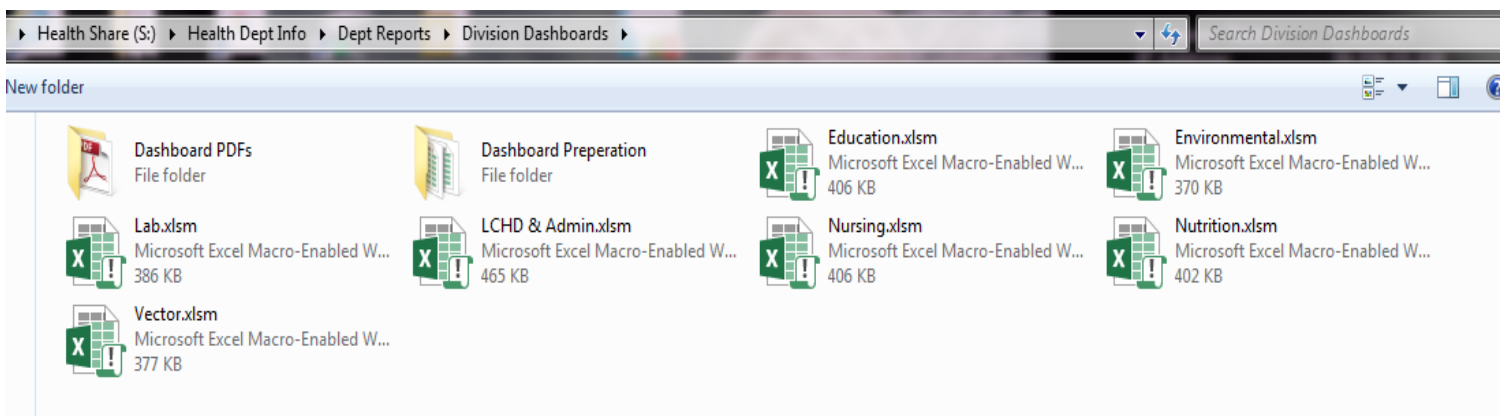
Performance Management allows for organizations to identify performance standards for programs, services, and operational processes, measure the standards, report on the progress of the standards, and if need be, take a program, service, or process through Quality Improvement Processes.

The La Crosse County Health Department's Performance Management System utilizes dashboard reports to inform stakeholders about the progress of performance standards and measures as well as determine the need for policy or program changes. It will also help ensure the health department is meeting the needs of the community and providing quality services.

A Health Department Dashboard was in place in 2014, tracking data at the management level. The La Crosse County Health Department formed a Performance Management Team in March 2015 to enhance the Quality Improvement work already established, and include staff at all levels.

The Performance Management Team provided guidance and support to the seven Divisions within the Health Department (Nursing, Nutrition, Health Education, Environmental, Laboratory, Vector, and Administration) to develop individual Performance Management Systems (Division Dashboard Reports). Headliners were identified from each Division Dashboard to be included in the broader La Crosse County Health Department (LCHD) Dashboard Report. This all-encompassing LCHD report is shared with stakeholders, including the Health and Human Services Board, quarterly. The individual Division Dashboards serve to guide each Division in making decisions related to their programs/services.

A screenshot of LCHD Division Dashboards saved in a Shared Drive:

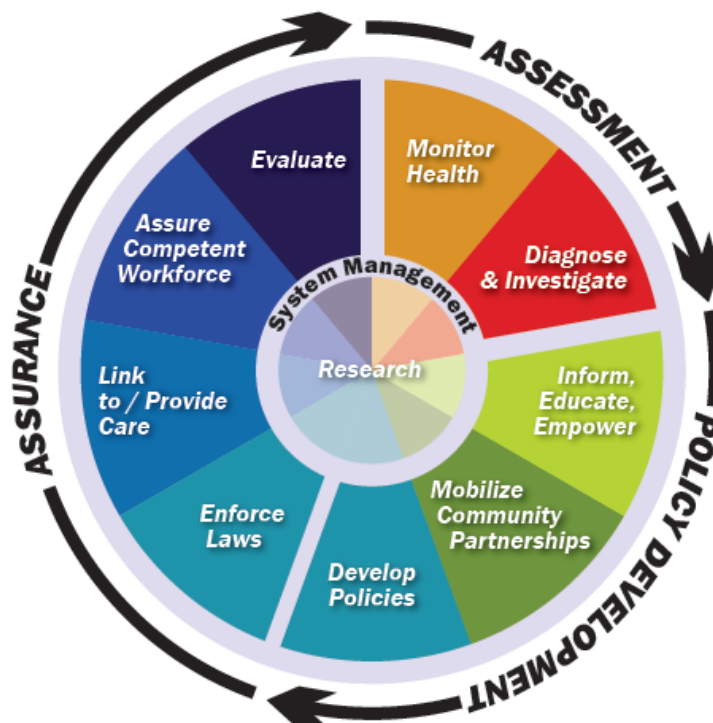


A. The 10 Essential Public Health Services:

Performance Management Systems are designed to ensure the [10 Essential Public Health Services](#) are met. The Essential Public Health Services were developed in 1994 by the Essential Public Health Services Work Group of the Core Public Health Functions Steering Committee. The 10 Essential Public Health Services grew out of a need to better communicate the scope and importance of governmental public health to the general public and legislators.

The 10 Essential Public Health Services are:

1. Monitor health status to identify community problems
2. Diagnose and investigate health problems and health hazards in the community
3. Inform, educate, and empower people about health issues
4. Mobilize community partnerships and action to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts
6. Enforce laws and regulations that protect health and ensure safety
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable
8. Assure a competent public health and personal health care workforce
9. Evaluate effectiveness, accessibility, and quality of personal and population- based health services
10. Research for new insights and innovative solutions to health



B. Definitions:

The La Crosse County Health Department utilizes the Performance Management System. See the diagram to the right. The four quadrants are further defined below.

The four quadrants are framed by the department ideals of visible leadership, transparency, strategic alignment, culture of quality, and customer focus.

There are many terms to describe performance management. The terms the La Crosse County Health Department is choosing to use are standards and measures.

Performance Standards are objective standards or guidelines used to assess an organization's performance. Standards are developed to reflect the services and programs provided, as well as the daily operations of the department. They may be determined by national, state, or scientific guidelines, the department's strategic plan, the 10 essential health services, or other methods. Standards may focus on social determinants of health, health rankings, available resources, community engagement, and workforce development. Performance Standards can be descriptive or numerical and identify the end state. Examples include:

- A system for communicable disease control shall be maintained (Descriptive)
- At least 80% of health department clients will rate services as "good" (Numerical)

Performance Standards are used to:

- Establish Performance Measures
- Set targets including measures, population being targeted, and date for accomplishment
 - Population can be all of La Crosse County residents or clients in a program
- Identify ranges to determine what follow-up action is needed
- Communicate expectations

Performance Measures are the specific qualitative or quantitative representations of a capacity, process, or outcome deemed relevant to the assessment of Performance Standard. Performance Measures have a date, measure (increase, decrease, maintain), and a population associated with it. Performance Measures should identify the means for obtaining the end state (Performance Standards). Examples of Performance Measures include:

- Answer to the question, "How many clients we saw through our clinic?"

PUBLIC HEALTH PERFORMANCE MANAGEMENT SYSTEM



- Actual percentage of clients who rate health department services as “good.”
- Is anyone better off? Decrease in number of low birth weight infants because of prenatal care.

Performance Measures look at what actually happened compared to what was planned or intended, how much we did, how well we did it, and is anyone better off. Performance Measurement also involves defining measures, developing data systems, and collecting data. To select specific Performance Measures, staff may consult local, regional, state or national tools containing tested measures, such as Healthy People 2020, grants, contracts, the CHIP, and the La Crosse County Health Department’s Strategic Plan.

Reporting of Progress is how performance data is shared with stakeholders. The La Crosse County Health Department will maintain division dashboards and a department-wide dashboard composed of Headliners from division dashboards. The 2016 LCHD Dashboard Report has 41 measures. The data on dashboard reports will be monitored quarterly throughout the year. Year-end data will be gathered and the final year-end results will be reviewed by department staff within the first quarter of the following year to determine if standards were met. At any time review of dashboard shows standards are not met a Quality Improvement (QI) project can be considered. The data is shared via staff meetings, newsletters, and Health and Human Services Board meetings.

Screenshot of the LCHD Performance Dashboard:

La Crosse County Health Department									
Performance Dashboard									
Mission: To protect, promote, and improve the health of all people to enhance the quality of life.									
Health Director: Jen Rombalski									
Report Date: 1st Quarter 2016									
Key Performance Indicators	2014	2015	2016	2017	2016 YTD	Annual Target	Program/Division	Strategic Plan Goal	
01.1: Complete Community Health Needs Assessment by April 1, 2016.	0%	0%	75%	0%	75%	100%	Administration	1. Assess/Monitor health status to identify & solve community health problems	
02.1= 100% of investigation and abatement rate for all disease mosquito habitat reported to the Health Department or found during county wide habitat canvassing projects.	0%	0%	100%	0%	100%	100%	Vector Control	2. Investigate/Diagnose & Investigate Health Problems & Health Hazards in the Community	
02.1 Maintain 0 confirmed foodborne outbreaks per calendar year at licensed establishments.	0	0	1	0	1	0	FSRL	2. Investigate/Diagnose & Investigate Health Problems & Health Hazards in the Community	
02.3. Contact investigations will be conducted on 100% of reported confirmed communicable diseases annually in the Wisconsin Electronic Disease Surveillance System (WEDSS).	0%	0%	100%	0%	100%	100%	Communicable Disease & Tuberculosis	2. Diagnose and investigate health problems and health hazards in the community. 6. Enforce laws and regulations that protect health and ensure safety.	
02.4. At least 500 Lead Tests will be completed annually on La Crosse WIC Children.	515	497	151	0	151	500	Lead	2. Investigate/Diagnose & Investigate Health Problems & Health Hazards in the Community	
02.5. At least a 100% completion rate to inform sampler of TNC unsafe bacteria and/or nitrate > 10 mg/l within 24 hours of completion.	100%	100%	100%	0%	100%	100%	Health Laboratory	2. Investigate/Diagnose & Investigate Health Problems & Health Hazards in the Community	
03.1: The La Crosse County Health Department will lead 1 community conversation on an emerging issue by December 2017.	0	0	0	0	0	1	Administration	3. Inform & Education/Inform, Educate & Empower People About Health Issues.	
03.2. At least 43% of 11 year olds, born 10/1/04-9/30/05, will have received one Meningococcal and one HPV vaccination by the end of the year (2016).	0.0%	41.0%	8.0%	0.0%	8.0%	43.0%	Immunization	3. Inform & Education/Inform, Educate & Empower People About Health Issues.	
03.3. At least 30% of infants participating in WIC will be breastfed until at least 6 months.	24.6%	25.5%	31.2%	0.0%	31.2%	30.0%	WIC BFPC	3. Inform & Education/Inform, Educate & Empower People about Health Issues	
03.4. Less than 30% of children ages 2-5 years participating in La Crosse WIC Program will be overweight/obese.	31.3%	31.7%	33.2%	0.0%	33.2%	30.0%	WIC	3. Inform & Education/Inform, Educate & Empower People about Health Issues	
04.1: Participate with community partners in at least 2 interventions identified in the Community Health Improvement Plan and Process by December 2017.	0	0	0	0	0	2	Administration	Community Engagement/Mobilize community partnerships & action to identify & solve health problems	
04.2 At least 7 childcare facilities that have certified as breastfeeding friendly according to the DHS toolkit.	0	0	0	0	0	7	MCH- Breastfeeding Friendly Childcare	4. Community Engagement/Mobilize Community Partnerships & Action to Identify & Solve Health Problems	
04.3. 0 drug overdose deaths have occurred among La Crosse County residents.	0	0	9	0	9	0	Heroin & Illicit Drug Taskforce	1. Monitor health status to identify and solve community health problems. 4. Community Engagement/Mobilize Community Partnerships & Action to Identify & Solve Health Problems	
05.1. Develop a Community Health Improvement Plan (CHIP) by August 2016.	0.0%	0.0%	50.0%	0.0%	50.0%	100.0%	Administration	Policies & Plans/Develop policies & Plans that support individual & community health efforts	
05.2. Identify 2 interventions aimed at reducing health									

Quality Improvement (QI) is the systematic evaluation or improvement of policies, processes, programs, and interventions. The purpose of the QI process is to improve the health of La Crosse County residents by understanding and improving the efficiency, effectiveness, and reliability of public health processes and practices. This occurs through use of Plan-Do-Study-Act, Rapid Cycle Improvement, or other quality improvement tools. Program evaluation is a key component of quality improvement since the success of programs must be measured in order to determine whether quality improvement action is warranted. The La Crosse County Health Department incorporates Quality Improvement initiatives by:

- Implementing an official quality improvement policy & procedure.
- Monitoring the status and progress of identified policies, processes, programs, and interventions.
- Encouraging and fostering a supportive culture of QI.
- Championing QI activities, tools and techniques.
- Involving staff through encouragement, training, support, and celebration of accomplishments.



Section II: Goals of LCHD Performance Management Plan:

Performance management practices have been shown to create efficiencies working with partners, help public health workers solve complex problems, and measurably improve the public's health. Performance management practices can also be used to allocate resources, prioritize programs, change policies, and improve the overall quality of public health practice.

The goals of the La Crosse County Health Department Performance Management Plan are to:

- Set specific performance standards.
- Measure progress of performance standards.
- Report progress to stakeholders regularly.
- Integrate quality improvement into agency operations through use of the quality improvement policy and procedure, forms, and tools.

The benefits of integrating a comprehensive Performance Management System into daily operations of the La Crosse County Health Department include:

- Improve the public's health.
- A better return on investment and use of dollars invested in public health.
- Greater accountability of funding and an increase in the public's trust.
- Reduced duplication of policies, processes, programs, and interventions.
- A better understanding of department accomplishments and priorities among stakeholders (employees, partners, the public).
- Increased emphasis on quality versus quantity.

- A more efficient and effective way to problem solve.

Section III: Relationship of Agency Strategic Plan to Performance Management Plan

The LCHD's Strategic Plan is a document that states the agency's mission, vision, and strategic goals. It is a roadmap to where the agency wishes to be in 3 years. Ensuring the goals established in the strategic plan are met requires a Performance Management System. A Performance Management System gives stakeholders the ability to track the progress of action items outlined in the strategic plan. If performance measures are not met then the quality improvement process can be utilized to uncover root causes and possible solutions.

Graphic showing how the pieces fit together to ensure that the LCHD's mission is achieved:



In January 2016 the Strategic Priorities were changed to align with the Accreditation Domains & the 10 Essential Public Health Services. Strategic Priorities are referred to as “Goals” in Version 2.0. Priorities for each of the “Goals” in Version 2.0 were selected from the original Action Items from Version 1.0. In addition, the Performance Management Team within the Health Department worked with each Division to develop and track performance measures on their Division dashboard. Two to three performance measures were identified by each Division as priority and added to the Strategic Plan Objectives in Version 2.0 under the revised “Goals”. The original Strategic Planning Committee was consulted and provided input on this revision.

Section IV: Resources

[LCHD Performance Management Policy & Procedure](#)

[LCHD Quality Improvement Policy & Procedure](#)

[NIATx Training \(on TRAIN website\)](#)

Public Health Foundation - Performance Management System Toolkit – www.phf.org

CDC - www.cdc.gov/stltpublichealth/performance