

# San Joaquin Valley Public Health Performance Management Training Project

Central Valley Health Policy Institute  
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**FRESNO STATE**  
Central Valley Health Policy Institute

## Staff Introductions

- ▶ John Capitman, PhD
- ▶ Allison Hensleit, MBA
- ▶ Donna DeRoo, MPA, ABD
- ▶ Ashley Hart

## Recognition

- ▶ San Joaquin Valley Public Health Consortium
- ▶ San Joaquin Valley Public Health Departments  
Participating Counties: Fresno, Madera, Merced,  
San Joaquin, Tulare
- ▶ California Department of Public Health
- ▶ Center for Disease Control and Prevention
- ▶ National Network of Public Health Institutes  
(NNPHI)

## History of Project Overview

- ▶ Early success with a grant from the National Association of County and City Health Officials (NACCHO) allowed us to provide a deeper level of Performance Management System support to San Joaquin Valley Health Departments



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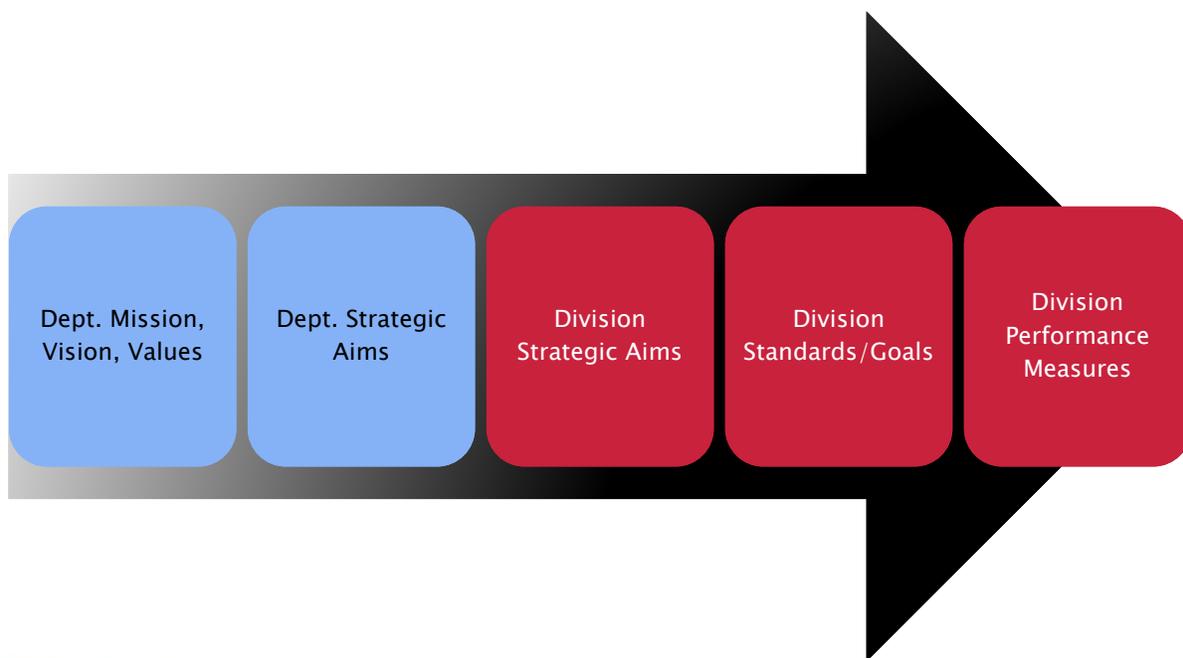
## Project Overview

- ▶ Guided Local Health Departments to envision, develop, and implement a Performance Management System in support of their accreditation efforts
  
- ▶ San Joaquin Valley Public Health Departments taking part in the grant were:
  - All Divisions for Fresno, Madera, and Merced Counties
  - Two Divisions for San Joaquin and Tulare Counties

## How We Did It



# Performance Management... The Beginning



# Approach

*We chose this one ...*

- Robust discussion
- Team building
- Highly collaborative
- Pulse read of activities

1-on-1  
Training

Webinars

- Accommodates flexible schedules
- Easily accessible

- Accommodates flexible schedules
- Remote accessibility

Conference  
Calls

# Process

Met with Senior Leadership

- Background & general PMQI overview

Met with ALL managers & supervisors

- Background & general PMQI overview

Met with Division/ Cluster/ Programs

- **M1:** Brainstorm Aims, & Goals
- **M2:** Prioritize Aims, Brainstorm Goals & Performance Measures
- **M3:** Prioritize Goals & Performance Measures, Draft Targets, Timing, Responsibility, Data sources
- **M4:** Presentation of Performance Management System Tool

**Performance Management System Tool Delivered!**

- User Guide

M1: 1<sup>st</sup> Meeting  
M2: 2<sup>nd</sup> Meeting  
M3: 3<sup>rd</sup> Meeting  
M4: 4<sup>th</sup> Meeting

## Sample LHD Aim Statements

### Public Health Nursing

- Provide group interventions and case management services to women and children

### Emergency Medical Services

- Improve patient care throughout the EMS System

### Financial Services

- Ensure financial compliance across all contracts and budgets

### Environmental Health

- Monitor environmental health status to identify and solve community and environmental health problems

### Communicable Disease

- Partner with community agencies who serve at risk populations to provide education to promote early detection

### Lab

- Responds to community needs in providing effective laboratory services and excellent customer service

## Aims prioritization and filtering....



On average, we were working with over 20 Aim statements identified through M1 brainstorming exercises

By end of M2 meeting, we had filtered down the Aim statements to the top 4-5 Aims that captured the purpose and intent of the Division

# Performance Management System

B	C	D	E	F	G	H
DEPT	Madera County					
CLUSTER	Program, Policy, and Planning				<a href="#">Go To Data Entry</a>	
PROGRAM	Program, Policy, Planning				<a href="#">Go To Dashboard</a>	
PROGRAM MNGR						
MANAGER EMAIL						

Objectives and Measures	Description	Who's Responsible <i>Who is responsible for preparing the measure?</i>	Timing <i>What is the frequency of preparing the measure?</i>	Unit of Measure	Formula	Source <i>What is the frequency of preparing the measure?</i>
	Well-trained workforce that provides excellent service					
	Increase number and frequency of training opportunities					
	Measure # of trainings offered per year	Gilda		Number		HR Records
	Measure % of staff attendance	Gilda		Percent		HR Records
	Ensure work related satisfaction of staff and partners					
	Measure internal satisfaction	Gilda, Kim, Favy		Percent		Surveys
	Measure external partners satisfaction	Gilda, Kim, Favy		Percent		Surveys
	Program, Policy, and Planning will be a reliable source of health statistics to internal staff, community partners, policy makers, and the general public					
	Improve regularity of reports and disseminated information					

# Performance Management System

## Program, Policy, Planning Program Performance Dashboard

Target:  
 Email:  
 Date:

[Go To Measure Def](#)

[Go To Data Entry](#)

Goal		Key Performance Indicators		2013-2014 YTD	2014-2015 YTD	Annual Target	2013-2014 Status	2014-2015 Status	P
Well- that	Goal 1.1: Increase number and frequency of staff training opportunities	1.1.1 Increase # of trainings offered per year		5	6	5	+	+	
		1.1.2 Increase % of staff attendance		68%	69%	70%	~	~	
	Goal 1.2: Ensure work related satisfaction among staff and partners	1.2.1 Increase internal satisfaction		86%	0.84	85%	+	~	
		1.2.2 Increase external partners satisfaction		84%	86%	85%	~	+	
Policy e a alth staff, rs, the	Goal 2.1: Improve regularity of reports produced and disseminated	2.1.1 Increase frequency of quarterly reports that are produced by the first day of the following month		7	2	1	-	~	
	Goal 2.2: Improve compliance with data reporting to state	2.2.1 % of birth certificates registered within 10 days		79%	81%	80%	~	+	
		2.2.2 % of death certificates registered within 8 days		86%	87%	85%	+	+	
		2.3.1 % of CMRs (Confidential Morbidity Report) entered within 5 days		71%	75%	70%	+	+	
	Goal 2.3: Increase the quality and								

## Performance Management System implementation requires commitment...

- ▶ Complex scheduling coordination
- ▶ Requires more time than LDHs anticipated
- ▶ Right leaders in the room
- ▶ Fear of change
- ▶ Fear of accountability given reduced resources
- ▶ Marathon not a sprint
- ▶ Don't bite off more than you can chew
- ▶ Strategic plans may need to be refreshed
- ▶ Not for the faint of heart – **requires commitment**

## Where the magic happened....

- ▶ Built community of practice
- ▶ New collaborations
- ▶ Improved internal awareness
- ▶ Potential for maximization of resources
- ▶ Asking the right questions to propel their community impact forward
- ▶ Ownership in the performance management system

## Lessons Learned

- ▶ We would have expanded the implementation timeline to allow the LHDs a month of piloting the performance management tool
- ▶ Basic level of Microsoft Excel experience was much lower than anticipated
- ▶ Underestimated the amount of time required to facilitate the journey from strategic Aims to Performance Measures and Targets
- ▶ Essential to have the groups working together in a room to discuss and collaborate with one another
- ▶ Requires a cultural change from the top down

## What's Needed Next?

- ▶ Full divisional development and implementation in San Joaquin and Tulare Counties
- ▶ San Joaquin Valley LHDs to pilot the performance management system tool for a quarter to refine goals, measures, and targets
- ▶ Follow up and support LHDs as they embed the Performance Management System tool within their divisions
- ▶ Assist LHDs build quality improvement standards of practice

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**Questions?**

