Building a Culture of QI through the PHAB Accreditation Process

Judy Mattingly, MA
Public Health Services Manager
Franklin County Health Department

Cal-PIM Webinar
June 17, 2013

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Franklin County Health Department (FCHD)

- Decentralized
- Single County
  - 49,285
- 65 FT, PT & Contract Staff
- Clinic, Environmental, Health Education, Emergency Preparedness & Home Health
- 12 member Board of Health
- 72+ Community Partners

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Why FCHD is Working to Build a Culture of QI

- Accreditation
- Held accountable to standards
- Improved efficiency
- Employee empowerment
- Breakdown silos
- Assure 10 Essential Public Health Services
- Customer Satisfaction

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Purpose of Accreditation

- The goal of the national public health department accreditation program is to improve and protect the health of the public by ***advancing the quality and performance*** of state, local, tribal and territorial public health departments.

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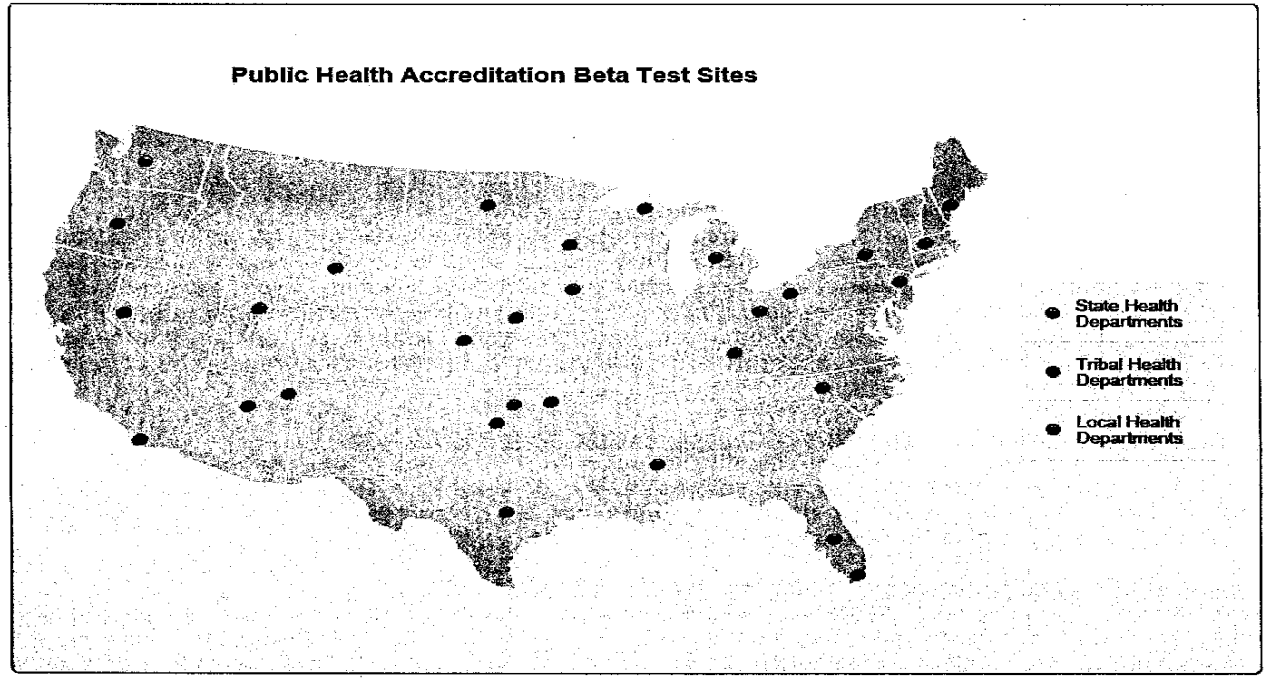
PHAB Beta Test

- September 2009



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PHAB Accreditation Process

1. Pre-application
2. Application
3. Document Selection and Submission
4. Site Visit
5. Accreditation Decision
6. Reports
7. Reaccreditation

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Pre-Application

- Readiness Checklists
- Online Orientation
- Statement of Intent

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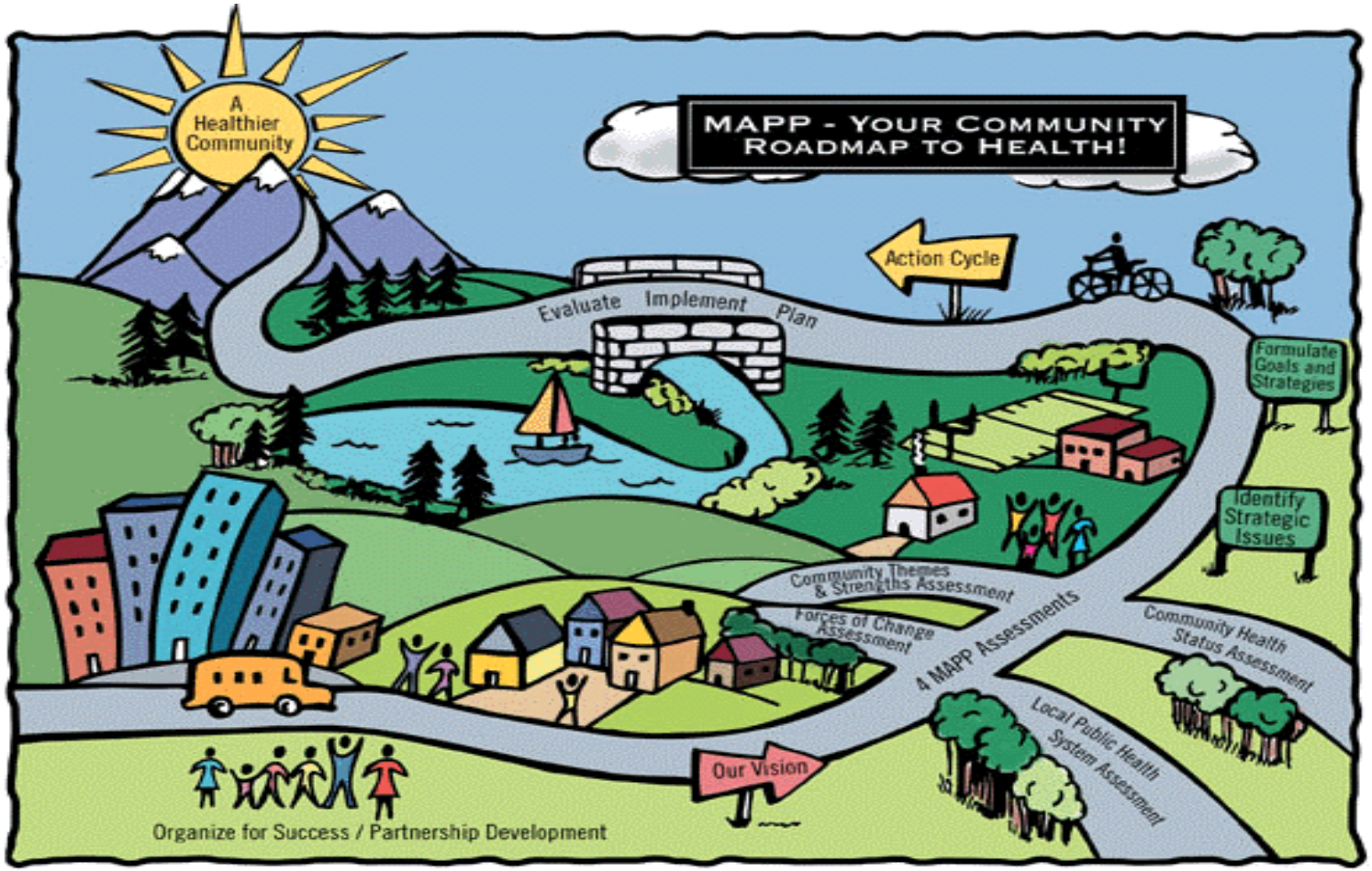
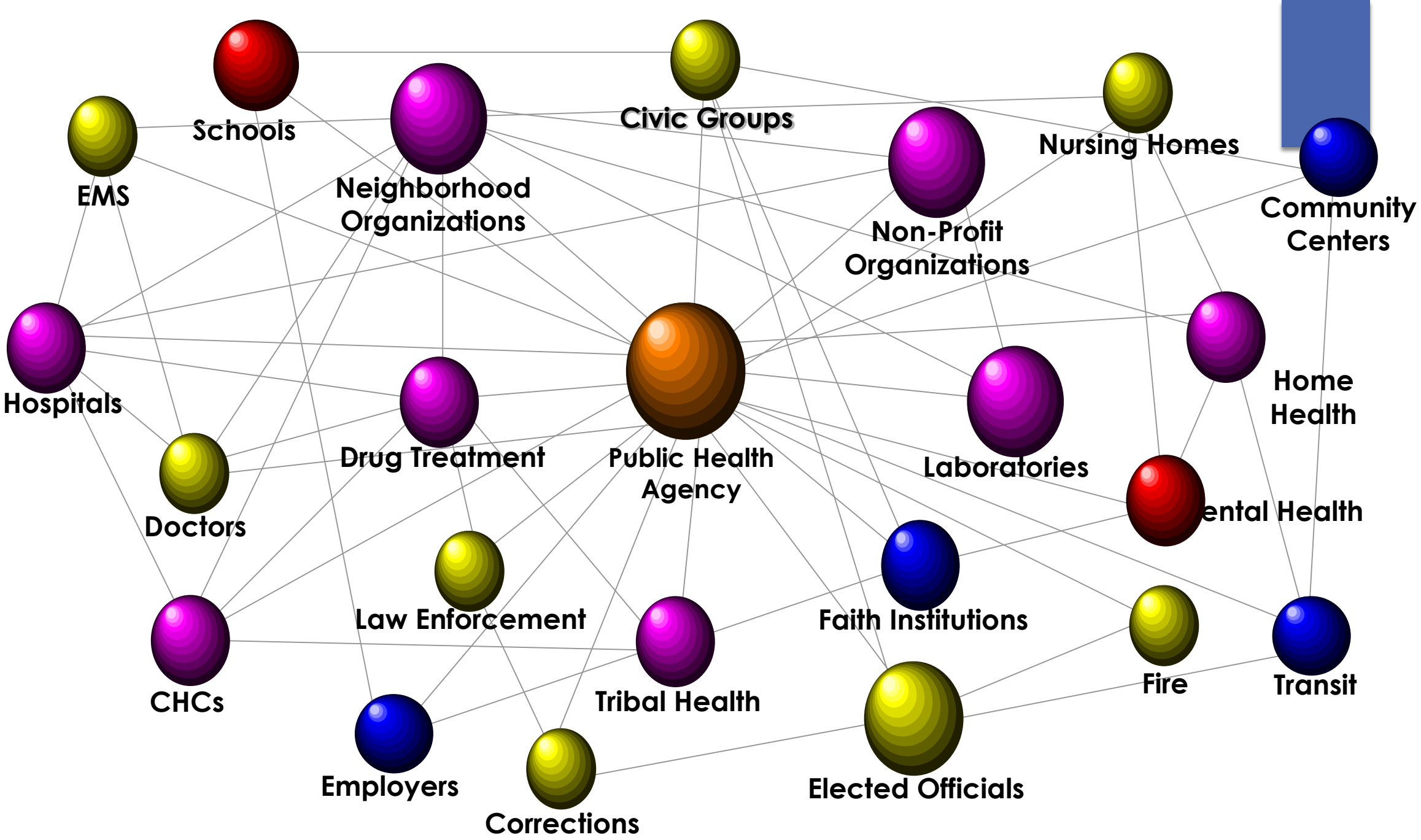
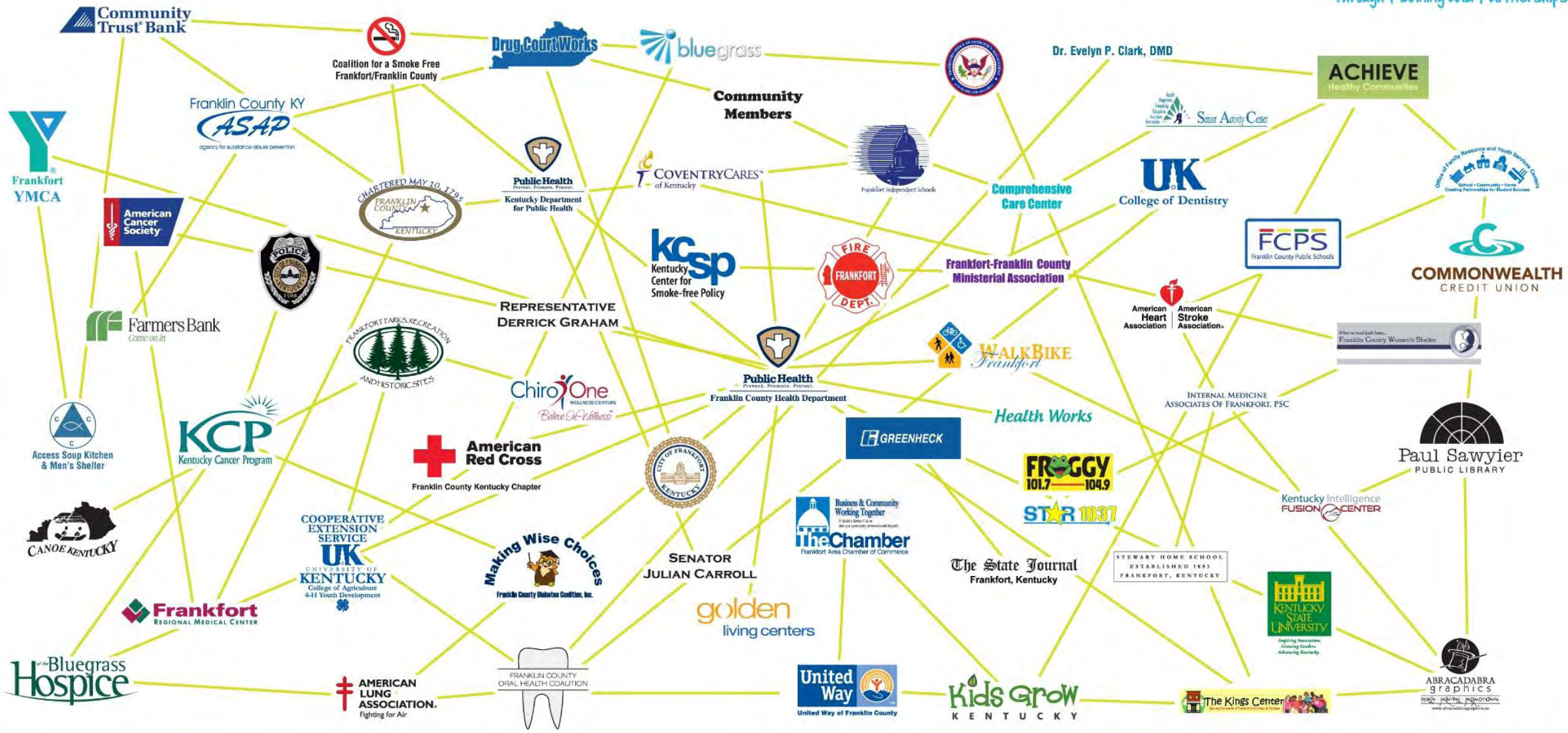
MAPP your Route to Accreditation




Schools
Civic Groups
Nursing Homes
EMS
Neighborhood Organizations
Non-Profit Organizations
Community Centers
Hospitals
Home Health
Drug Treatment
Public Health Agency
Laboratories
Doctors
ental Health
Law Enforcement
Faith Institutions
CHCs
Tribal Health
Fire
Transit
Employers
Elected Officials
Corrections

OUR PUBLIC HEALTH SYSTEM

Franklin County, KY MAPP
Mobilizing for Action through Planning and Partnerships



Application

- Application Form
  - Board of Health Letter of Support
  - Organizational Chart
  - Community Health Assessment
  - Community Health Improvement Plan
  - Strategic Plan
- Fees
- In-person training

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Accreditation Overview | Accreditation Process | Education Center | News Room | About PHAB

State Public Health Departments

A state health department is the governing entity with statewide primary statutory authority to promote and protect the public's health and prevent disease in humans.

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Welcome to e-PHAB

The Public Health Accreditation Board (PHAB) is the official accrediting body for national public health department accreditation. e-PHAB is PHAB's online information system that health departments, site visitors, PHAB staff, and PHAB's Accreditation Committee use throughout the accreditation process. Users are granted access to different information, depending on their role and the step in the accreditation process.

e-PHAB Login.

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PHAB e-PHAB

Accreditation Coordinator
Franklin County Health Department

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HOME STAFF SOI APPLICATION BILLING TRAINING DOC. SUBMISSION NOTES EMAIL HELP

APPLICATION SECTION	STATUS
Application Profile	Complete
Fee Calculation	Complete
Health Department Overview	Complete
Public Health Programs	
Immunizations	Complete
Screening	Complete
Treatment	Complete
Maternal and Child Health	Complete
Epidemiology	Complete
Prevention	Complete
Regulation	Complete
Other Environmental Health Activities	Complete
Other Health/Human Services	Complete
Health Department Facilities (Optional)	Complete
Health Department Unique Characteristics (Optional)	Complete
Required Documents	Complete

Internet 100%

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Prerequisites

Frankfort County Health Department
Strategic Plan

Mission				
Prevent. Promote. Protect. Franklin County.				
Vision				
Healthy Choices = Healthy Lifestyles				
GOAL 1				
Enhance public health education initiatives through effective partnerships				
Strategies	**Tactics**	**Time frame**	**Who initiates**	**Measure of progress**
Evaluate and enhance health education initiatives	Evaluate scope of existing educational initiatives in the Business Office, Environmental, Community Health Education, Clinic, Home Health, Preparedness, and Accreditation departments	Feb. 2012	Management Team	Have evaluation plan in place Timeframe extended due available resources. Will be added to Executive Committee agenda.
	Assess feasibility of current programs	April 15, 2011	Management Team	List of programs of FY 2012 planning and budget FY 12 budget completed with list of programs June 2011.
In collaboration with partners, develop and implement a **community health improvement plan**	Convene a summit of community health partners	Aug. 2, 2010	Judy Mattingly	Meeting Minutes Draft was presented to MAPP on June 30, 2011 and revised Sept. 8, 2011.
	Develop common goals for a community health improvement plan	Aug. 2, 2010	Judy Mattingly	List of strategic issues Goals were developed from April – July 2010.
	Define the actions (programs, policies, processes) required to implement these goals and set priorities for action	Nov. 2010	Judy Mattingly	List of selected strategies MAPP used a nominal group technique July 2010 to prioritize strategies. Strategies were revised June 2011.

Health Department Category	Population Size of the Jurisdiction Served	2011/2012 Total Fee
Category 1	Less than 50,000	$ 12,720
Category 2	50,000 to 100,000	$ 20,670
Category 3	>100,000 to 200,000	$ 27,030
Category 4	>200,000 to 1 million	$ 31,800
Category 5	>1 million to 3 million	$ 47,700
Category 6	>3 million to 5 million	$ 63,600
Category 7	>5 million to 15 million	$ 79,500
Category 8	>15 million	$ 95,400

PHAB Applicant Training

- Day 1
  - Accreditation process
  - Accreditation materials
  - Accreditation roles
  - Online system, e-PHAB
  - Documentation selection and submission
- Day 2
  - Site visit
  - Accreditation Decision
  - Annual Reports
  - Reaccreditation

Document Selection & Submission

- Identify documents that best demonstrate conformity with the standards and measures
- e-PHAB
- 12 months from the date you receive e-PHAB access

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Accreditation Team

- Health Department Director
- Accreditation Coordinator
- Administrative Support Manager
- Administrative Assistant
- Finance
- Emergency Preparedness Coordinator
- Environmental Health Director
- Environmentalist
- Director of Nursing
- Health Educator
- H.A.N.D.S. Technical Assistant
- Home Health Administrator

Accreditation Coordinator

- Organized/Structured
- Analytical
- Facilitation Skills
- Technology Skills
- Health Educators

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FCHD PHAB Documentation Spreadsheet 10.21.12 [Compatibility Mode] - Excel

FILE HOME INSERT PAGE LAYOUT FORMULAS DATA REVIEW VIEW

Mattingly, Judy A (CHFS LHD - Franklin Co)

J10

			Measure	Required Documents	Score (Not, Slightly, Largely or Fully)	Assigned to:	Document Title	Date	Expiration Date	Notes	Site Visitor Comments/ Notes
1	MAIN 1										
31		Standard 1.2	1.2.2 A								
32			1.2.2 A	1	Fully	Debbie F.	List of surveillance sites	12/2/2011	12/2/2012	Beta 1.1.2 B partially demonstrated	
33			1.2.2 A	2	Fully	Tammie	Surveillance site training (Epi reporting PPT, invite and sign-in for MGMA)	10/26/2011	10/26/2012		
34			1.2.2 A	3	Fully	Tammie	Weekly Influenza Surveillance Report	7/31/2011	7/31/2012	They may be expecting these reports from KY-EPHRS since that is how we showed the collection of data for 1.2.1	
35			1.2.2 A	3	Fully	Jenny	Animal Bite report Fiscal Year 2011	6/30/2011	6/30/2012		
							E-mail showing distribution of influenza			should these two examples show distribution to 2	

DOMAIN 1 DOMAIN 2 DOMAIN 3 DOMAIN 4 DOMAIN 5 DOMAIN 6 DOMAIN 7

READY 100%

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FCHD 2011-2012 PHAB Documentation

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Back Search Folders

Address F:\FCHD 2011-2012 PHAB Documentation Go

File and Folder Tasks

- Make a new folder
- Publish this folder to the Web
- Share this folder

Other Places

- Removable Disk (F:)
- My Documents
- My Computer
- My Network Places

Details

Measure 1.1.1 T-L	Measure 1.1.2 T-L	Measure 1.1.3 A	Measure 1.2.1 A	Measure 1.2.2 A	Measure 1.2.3 A	Measure 1.2.4 L	Measure 1.3.1 A
Measure 1.3.2 L	Measure 1.4.1 A	Measure 1.4.2 T-L	Measure 2.1.1 A	Measure 2.1.2 T-L	Measure 2.1.3 A	Measure 2.1.4 A	Measure 2.1.5 A
Measure 2.2.1 A	Measure 2.2.2 A	Measure 2.2.3 A	Measure 2.3.1 A	Measure 2.3.2 A	Measure 2.3.3 A	Measure 2.3.4 A	Measure 2.4.1 A
Measure 2.4.2 A	Measure 2.4.3 A	Measure 3.1.1 A	Measure 3.1.2 A	Measure 3.2.1 A	Measure 3.2.2 A	Measure 3.2.3 A	Measure 3.2.4 A

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Required Documentation 1.

Participation of representatives of various sectors of the Tribal or local community

Guidance:

The health department must provide documentation that the process for the development of a community health assessment included participation of partners outside of the health department that represent Tribal/community populations and health challenges. The collaboration could include hospitals and healthcare providers, academic institutions, local schools, other departments of government, community non-profits, and the state health department. Tribal health departments may include local health department representatives, and local health departments may include Tribal health department representatives. A membership list and meeting attendance records could provide this documentation.

DOCUMENTATION	TITLE	UPLOADED BY	ACTION
Document 1.1.1 L.1.1	MAPP Membership List	Judy Mattingly 02-05-2012	
Document 1.1.1 L.1.2	MAPP E-mail Distributio		
Document 1.1.1 L.1.3	MAPP Sign-In Sheets		

This MAPP membership list, from our Community Health Improvement Plan, shows all participating agencies and was current as of June 30, 2011. We are continually organizing for success by adding new members, but all members listed have participated in some aspect of our MAPP process and have been provided copies of our community health assessment and analysis.

Required Documentation 2.

Regular meetings

Guidance:

https://www.e-phab.org/uploads/0059218D/MAPP_membership_list_6.30.11.PDF
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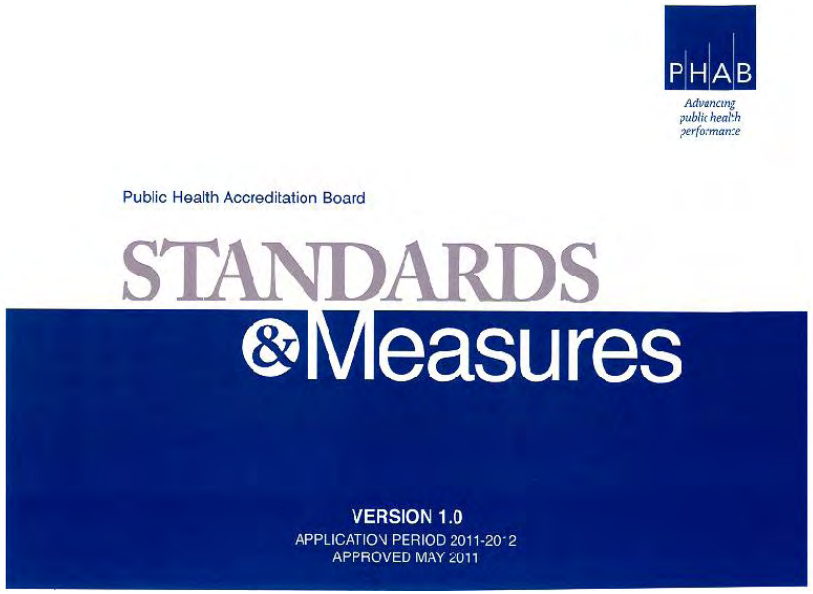
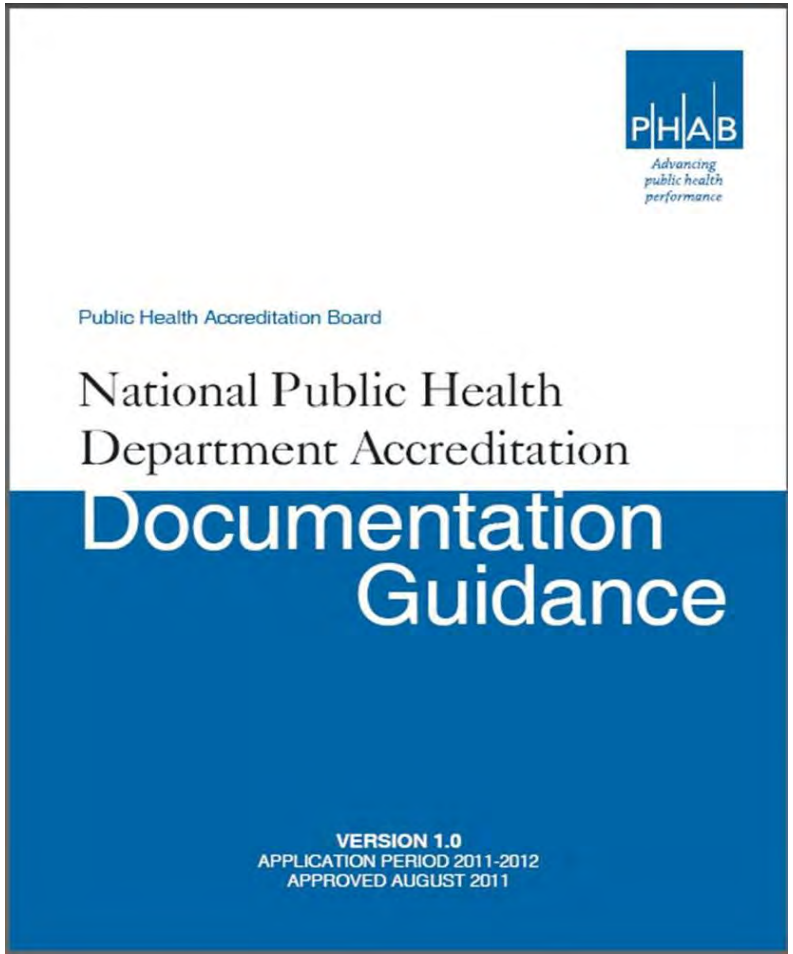
Lessons Learned





Lessons Learned

- TWO examples
- Breadth of examples
- Include all documentation (presentation referred to in meeting minutes)
- Document title
- Document description
- Order of documents in e-PHAB
- Narrative for measure
- Dated, signed, no drafts, no confidential information
- Highlight specific sections
- Expiration date
- Time for uploading

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Site Visit Agenda

- 8:15- Site Visit Team Arrives
- 8:30- Entrance Conference
- 9:00- Department Walk Through
- 9:30- CHA and CHIP
- 10:15- Break
- 10:30- Strategic Plan
- 11:00- Concurrent Domain Sessions (3)
- 11:45- Executive Session
- 12:45- Break
- 1:00- Lunch with Board of Health
- 2:00- Concurrent Domain Sessions (3)
- 2:45- Break
- 3:00- Concurrent Domain Sessions (3)
- 3:45- Concurrent Domain Sessions (2)
- 4:30- Adjourn

- 8:00- Executive Session
- 8:15- Breakfast with Community Partners
- 9:00- Domain 5 (minus CHIP and SP)
- 10:00- Meeting with Health Department Director
- 11:00- Executive Session
- 12:30- Exit Conference
- 1:30- Adjourn

Mock Site Visit

SAMPLE SITE VISIT REPORT - Microsoft Word

Kentucky Health Department Association
Accreditation Coordinators Workgroup
Oct. 13 & 14, 2011

SAMPLE SITE VISIT REPORT

MEASURE _____:

REQUIRED DOCUMENTATION	SCORE	COMMENT ON SOCRE *Describe how conformity with the measure was demonstrated;* *OR* *Explain what was missing, if the measure was not scored as "demonstrated."*	AREAS OF EXCELLENCE *Describe any areas of excellence or unique promising practices.*	OPPORTUNITIES FOR IMPROVEMENT *Describe any opportunities for improvement. (Even if the measure is met, describe any opportunities for improvement identified.)*
1.	☐ Not Demonstrated ☐ Slightly Demonstrated ☐ Largely Demonstrated ☐ Fully Demonstrated			
2.	☐ Not Demonstrated ☐ Slightly Demonstrated ☐ Largely Demonstrated ☐ Fully Demonstrated			
3.	☐ Not Demonstrated ☐ Slightly Demonstrated ☐ Largely Demonstrated			

Site Visit Report

https://www.e-phab.org/programs/2638/reports | Public Health Accreditation Bo... | e-PHAB - Report

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Accreditation Coordinator
Franklin County Health Department

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HOME STAFF SOI APPLICATION BILLING TRAINING DOC. SUBMISSION REPORTS NOTES EMAIL HELP

Show Score: Report Score

Pending | Not Demonstrated | Slightly Demonstrated | Largely Demonstrated | Fully Demonstrated

1.1.1 L	1.1.2 L	1.1.3 A	1.2.1 A	1.2.2 A	1.2.3 A	1.2.4 L	1.3.1 A	1.3.2 L	1.4.1 A	1.4.2 L	2.1.1 A	2.1.2 L	2.1.3 A	2.1.4 A	2.1.5 A	2.2.1 A	2.2.2 A
2.2.3 A	2.3.1 A	2.3.2 A	2.3.3 A	2.3.4 A	2.4.1 A	2.4.2 A	2.4.3 A	3.1.1 A	3.1.2 A	3.2.1 A	3.2.2 A	3.2.3 A	3.2.4 A	3.2.5 A	4.1.1 A	4.1.2 L	4.2.1 A
4.2.2 A	5.1.1 A	5.1.2 A	5.1.3 A	5.2.1 L	5.2.2 L	5.2.3 A	5.2.4 A	5.3.1 A	5.3.2 A	5.3.3 A	5.4.1 A	5.4.2 A	6.1.1 A	6.1.2 A	6.2.1 A	6.2.2 A	6.2.3 A
6.3.1 A	6.3.2 A	6.3.3 A	6.3.4 A	6.3.5 A	7.1.1 A	7.1.2 A	7.1.3 A	7.2.1 A	7.2.2 A	7.2.3 A	8.1.1 L	8.2.1 A	8.2.2 A	9.1.1 A	9.1.2 A	9.1.3 A	9.1.4 A
9.1.5 A	9.2.1 A	9.2.2 A	10.1.1 A	10.2.1 A	10.2.2 A	10.2.3 A	11.1.1 A	11.1.2 A	11.1.3 A	11.1.4 A	11.1.5 A	11.1.6 A	11.1.7 A	11.2.1 A	11.2.2 A	11.2.3 A	11.2.4 A
12.1.1 A	12.1.2 A	12.2.1 A	12.2.2 A	12.3.1 A	12.3.2 A	12.3.3 A											

Site Visit Team | Site Visit Report | Domains | Factual Errors

Site Visit Team Assignment

NAME	EMAIL	ROLE	DOMAIN ASSIGNMENT

2:17 PM
6/12/2013

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Site Visit Report

Overall Comments:

Three greatest strengths:

- It is obvious that Franklin County Health Department has solid relationships with community partners who share in the community assessment process. The poster showing the connection between community partners is a wonderful illustration of the Franklin County public health system.
- The Community Health Improvement Plan (CHIP) is excellent and could be used as a model for other health departments.
- The Department's QI activities are another strength.

Three most serious challenges or opportunities for improvement:

- Funding- The Department is highly dependent upon Medicaid reimbursement and they are going through a difficult time with receiving timely reimbursements from the Medicaid HMOs. This has created a fiscal crisis for them.
- Routine sharing of surveillance data with community partners, especially during outbreaks and flu season is an opportunity for improvement. During the site visit, staff noted that surveillance information is shared with the physicians in the community through the infection control nurse at the local hospital. This is a valuable partnership, but a formal mechanism to routinely share the data might be something to consider.
- Improving the analysis and exposition of local data is another opportunity.

Overall impression of the department as a functioning health department:

The Franklin County Health Department is a high functioning health department with strong leadership. They are facing many challenges as are most health departments. They understand the challenges and are moving forward to resolve them in a positive way. They have many strong partnerships and collaborations with the rest of the Franklin County public health system, which will be of great help to them in the future.

the documents.

1.1.1 L:

Participate in or conduct a Tribal/local partnership for the development of a comprehensive community health assessment of the population served by the health department

Score : Fully Demonstrated

Comments

Conformity:

Conformity was demonstrated through documentation of the use of the MAPP model with a diverse group of community partners who engage regularly to collect and analyze community health data.

Areas of Excellence:

Not Available

Opportunities for Improvement:

Continue to review the composition of the partners at the table and think of ways to engage unusual voices.

Accreditation Decision

- PHAB Accreditation Committee
- Accredited
- Not Accredited
  - 90 days to submit action plan
  - 1 year to implement action plan

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Celebration

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THREE RIVERS DISTRICT
HEALTH DEPARTMENT

NORTHERN KENTUCKY
INDEPENDENT DISTRICT
HEALTH DEPARTMENT

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1 of 11 First to Achieve National Accreditation!
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Annual Reports

- Address any measures that were not demonstrated
- Address any measures that were slightly demonstrated
- Address 3 overall opportunities for improvement

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Quality Improvement

- *The use of a deliberate and defined improvement process 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.*
  - *Accreditation Coalition Workgroup, 2009*

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PHAB Standards & Measures

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

Measure 9.2.1: Establish a quality improvement program based on organizational policies and direction

Measure 9.2.2: Implement quality improvement activities

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QI Plan

I. Definitions of quality terms
II. Desired future state of quality
III. Key elements of QI governance
IV. QI training
V. Goals, objectives, measures, and time-framed targets
VI. Monitoring and reporting
VII. Evaluate QI plan

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FCHD QI Plan

FCHD QI Plan 1.30.12 [Compatibility Mode] - Word

I. Purpose

The purpose of Franklin County Health Department's (FCHD) Quality Improvement (QI) Plan and Accreditation and QI Policy (Appendix 1) is to foster a culture of quality through continuous improvement of programs, services and administration. This goal is also reflected in FCHD's strategic plan.

II. Overview of Quality in FCHD

FCHD developed its first Accreditation/Quality Improvement (QI) Team in June 2010. Later that fiscal year the QI Steering Committee was formed and developed a QI plan followed by an Accreditation and QI Policy that was approved by the Franklin County Board of Health. Several key staff members have been trained in QI methods and tools. A QI Coordinator was appointed and provided a basic introduction to QI training that was required of all staff during Fiscal Year 2011. FCHD's QI Steering Committee will continue to develop staff knowledge of QI methods and tools.

III. Key Quality Terms

- Quality Improvement: "Quality improvement in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act, 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" (Accreditation Coalition Workgroup, 2009).
- Big QI versus little qi: Big QI denotes the macro effort toward quality improvement at the department level, while little qi represents small, discrete quality improvement efforts at the program level.
- Continuous quality improvement (CQI): An ongoing effort to increase an agency's

PAGE 2 OF 10 2174 WORDS

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Accreditation & QI Policy

FCHD QI Plan 1.30.12 [Compatibility Mode] - Word

Franklin County Health Department
100 Glenns Creek Road
231 East Main Street
851 East-West Connector
Frankfort, Kentucky 40601

Policy IC-47 **August 2011**

ACCREDITATION AND QUALITY IMPROVEMENT

Purpose The Franklin County Health Department supports national public health accreditation. This accreditation establishes standards and benchmarks for the provision of essential public health services. Those that do the work are most knowledgeable about the processes and opportunities for improvement, their participation in Quality Improvement should therefore be actively encouraged. National public health accreditation should validate that this health department meets national standards, and that staff are accountable to the governing Board of Health, other policy makers and the community served. *"Quality improvement in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check (Study)-Act, 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."* (Accreditation Coalition Workgroup, 2009)

Policy An Accreditation Coordinator will oversee an internal Accreditation/Quality Improvement Team. All employees will be engaged in Quality Improvement according to the Plan-Do-Check (Study)-Act Model. Staff may be recruited to a Quality Improvement project team or staff may request the implementation of a Quality Improvement project based on the Public Health Accreditation Board standards/measures, quality assurance assessments, program goals and objectives or health indicator goals and objectives. Quality Improvement project teams will share their progress and results at all staff meetings and at least quarterly with the Board of Health, for additional feedback and guidance.

2/15/2012

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Criteria / Criteria	**Time** Criteria 1	**Improved Quality** Criteria 2	**Probability of Success** Criteria 3	**Lower Costs** Criteria 4	Row Total	Relative Decimal Value
Time Criteria 1		**1**	**5**	**5**	**11**	**.509**
Improved Quality Criteria 2	**1/1**		**5**	**1**	**7**	**.324**
Probability of Success Criteria 3	**1/5**	**1/5**		**1**	**1.4**	**.065**
Lower Costs Criteria 4	**1/5**	**1/1**	**1/1**		**2.2**	**.102**
					Grand Total: **21.6**	

Time	Log of Repairs	Checking Qualifications of Employees	Document Training Activities	Log of Hardware	Row Total	Relative Decimal Value
Log of Repairs (A1.6 B)		**10** (Log of repairs takes much less time than checking…)	**5**	**1**	**16**	**.486**
Checking Qualifications of Employees (8.1.3 B)	**1/10**		**1/5**	**1/5**	**.5**	**.015**
Document Training Activities (9.2.3 L)	**1/5**	**5**		**1/5**	**5.4**	**.164**
Log of Hardware (A1.5 B)	**1/1**	**5**	**5**		**11**	**.334**
					Grand Total: **32.9**	

Improved Quality	Log of Repairs	Checking Qualifications of Employees	Document Training Activities	Log of Hardware	Row Total	Relative Decimal Value
Log of Repairs		**1/5**	**1/5**	**1**	**1.4**	**.056**
Checking Qualifications of Employees	**5**		**1**	**5**	**11**	**.444**
Document Training Activities	**5**	**1/1**		**5**	**11**	**.444**
Log of Hardware	**1/1**	**1/5**	**1/5**		**1.4**	**.056**
					Grand Total: **24.8**	

Probability of Success	Log of Repairs	Checking Qualifications of Employees	Document Training Activities	Log of Hardware	Row Total	Relative Decimal Value
Log of Repairs		**1/5**	**1**	**1/5**	**1.4**	**.056**
Checking Qualifications of Employees	**5**		**5**	**1**	**11**	**.444**
Document Training Activities	**1/1**	**1/5**		**1/5**	**1.4**	**.056**
Log of Hardware	**5**	**1/1**	**5**		**11**	**.444**
					Grand Total: **24.8**	

Lower Costs	Log of Repairs	Checking Qualifications of Employees	Document Training Activities	Log of Hardware	Row Total	Relative Decimal Value
Log of Repairs		**5**	**5**	**1**	**11**	**.444**
Checking Qualifications of Employees	**1/5**		**1**	**1/5**	**1.4**	**.056**
Document Training Activities	**1/5**	**1/1**		**1/5**	**1.4**	**.056**
Log of Hardware	**1/1**	**5**	**5**		**11**	**.444**
					Grand Total: 24.8	

Criteria / Options	Time (.509)	Improved Quality (.324)	Probability of Success (.065)	Lower Costs (.102)	Row Total (RT)	Relative Decimal Value (RT÷ GT)
Log of Repairs	**.486 x .509 (.247)**	**.056 x .324 (.018)**	**.056 x .065 (.004)**	**.444 x .102 (.045)**	**.314**	**.314 (the highest # best meets criteria)**
Checking Qualifications of Employees	**.015 x .509 (.008)**	**.444 x .324 (.144)**	**.444 x .065 (.029)**	**.056 x .102 (.006)**	**.187**	**.187**
Document Training Activities	**.164 x .509 (.083)**	**.444 x .324 (.144)**	**.056 x .065 (.004)**	**.056 x .102 (.006)**	**.237**	**.237**
Log of Hardware	**.334 x .509 (.170)**	**.056 x .324 (.018)**	**.444 x .065 (.029)**	**.444 x .102 (.045)**	**.262**	**.262**
					Grand Total (GT): **1.0**	

Git-R-Done

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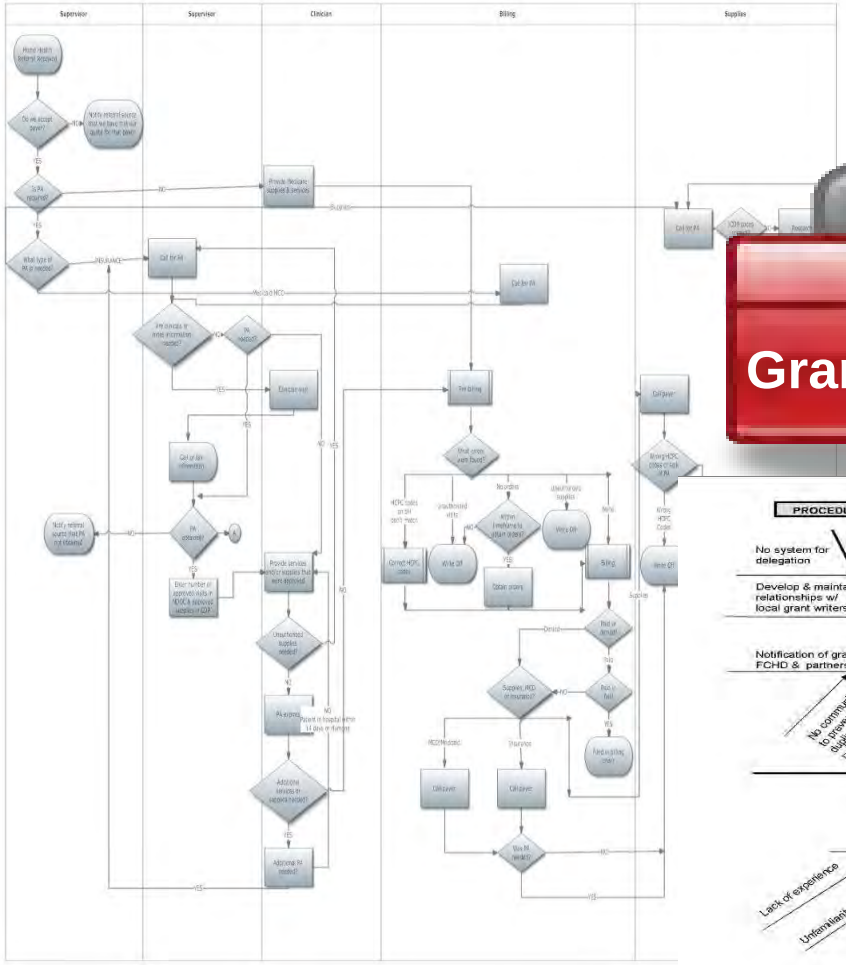
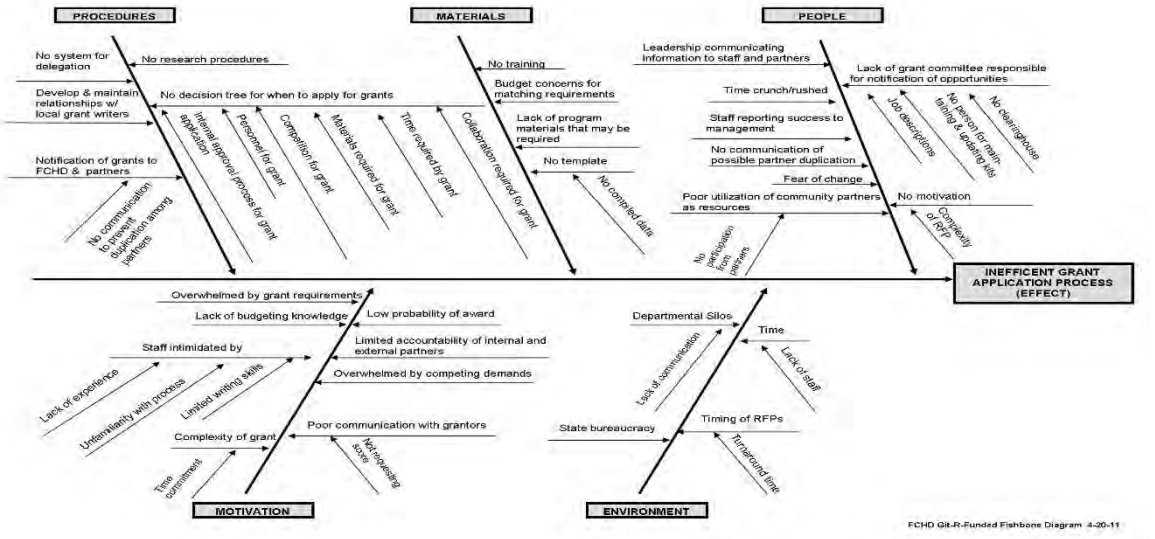
Continuous Quality Improvement

- Get ‘er Funded
- There’s No Place Like Home
- PA or Bust
- Too Legit to Quit
- Formerly Known As



Home Health Current PA Process
6-25-12

Grant Funding	Fiscal Year
$42,469.84	2010
$70,395.42	2011
$30,551.00	2012
$73,337.00	2013



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