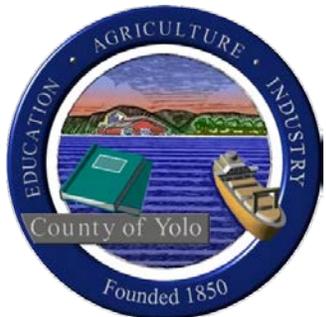


Embedding Quality Improvement into Organizational Culture:

Using Performance Improvement to Tell the Story of Public Health in Yolo
County

EMILY VADEN, MPH
ACCREDITATION COORDINATOR/QI LEAD



Objective

After the presentation, I hope you will see Performance Improvement as:

- Manageable
- Valuable
- Invigorating
- Empowering for staff

Where is Yolo County?

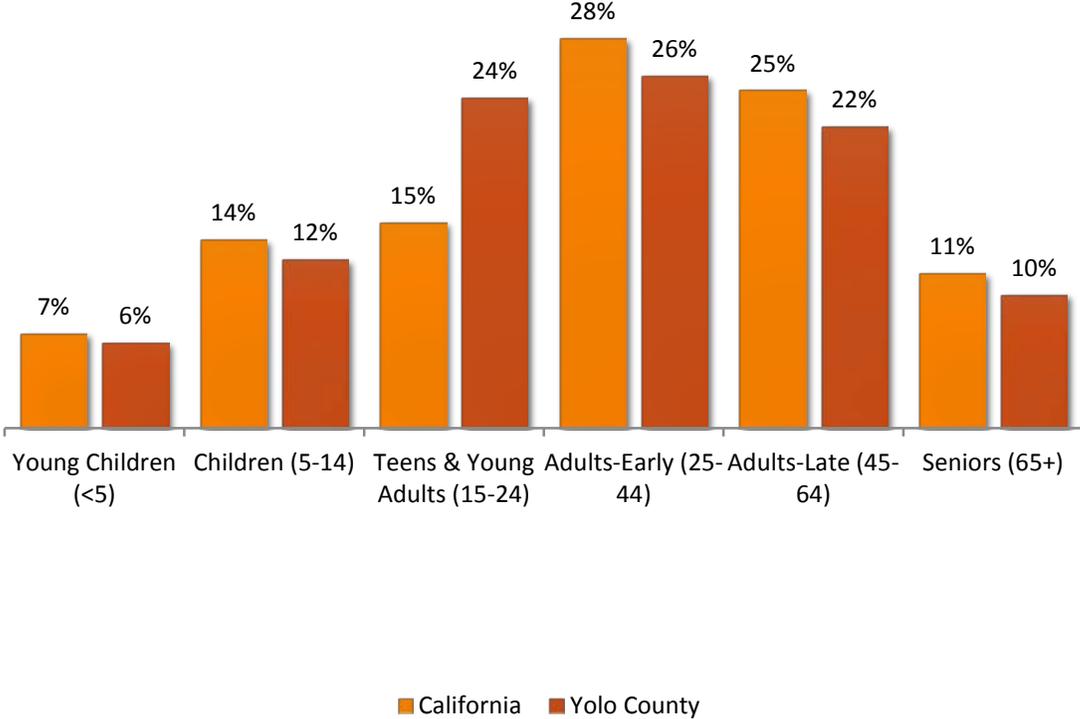


Yolo Demographics

Population: 207,000

Age Groups, Percent of Population: 2007-2011

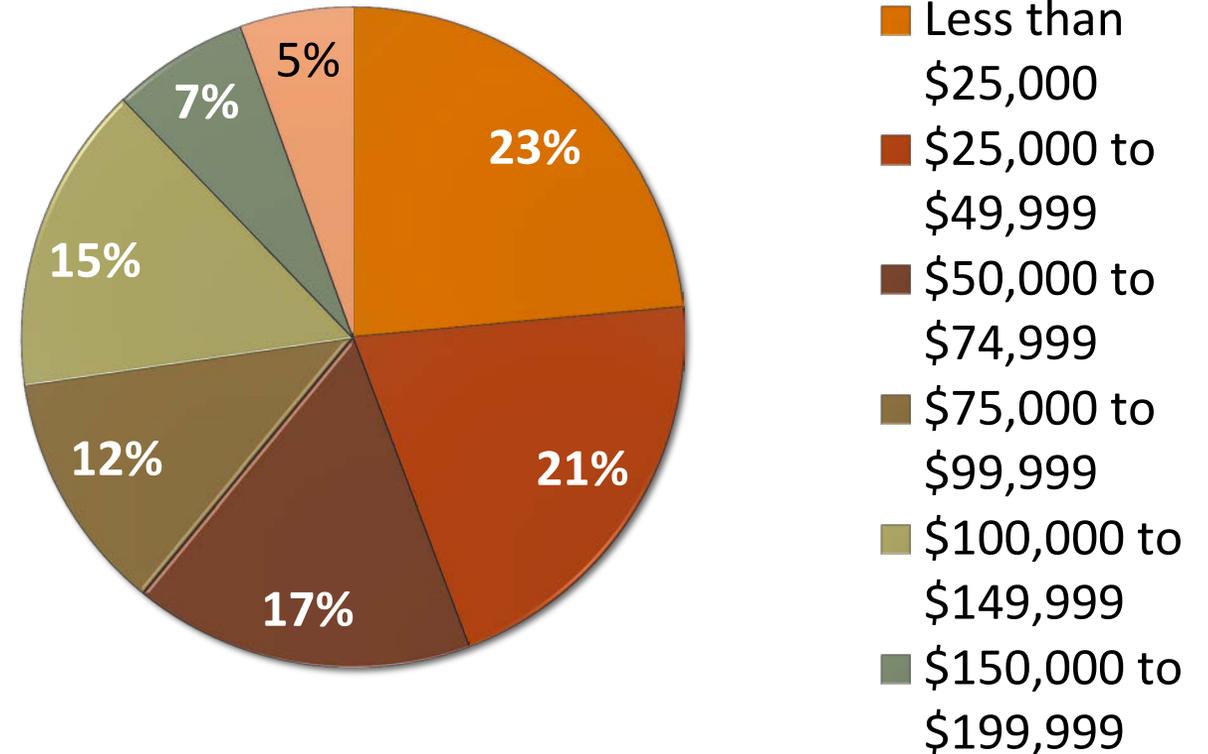
Population by Race: 2007-2011				
Race	California		Yolo County	
	Number	Percent	Number	Percent
White	22,860,341	62%	132,734	67%
Black/African American	2,252,129	6%	5,006	3%
American Indian/Alaska Native	287,712	1%	2,485	1%
Asian	4,825,271	13%	25,626	13%
Native Hawaiian/Other Pacific Islander	141,382	0.4%	1,112	1%
Some Other Race	5,142,478	14%	20,510	10%
Two or More Races	1,459,887	4%	11,416	6%



Yolo Demographics Cont.

~50,000 residents (24%)
of Yolo County residents
are enrolled in MediCal

Household Income, Yolo County: 2007-2011



Organizational Overview



Operational Excellence



Leadership Development
& QI

Strategic Planning

Feedback & Updates

Employee Satisfaction
Surveys

CQI/PDCA Training

Operational Excellence



Vision Set by Leadership

Leveraging Current State

Selection of CQI Teams

Tools and Support

Leadership Development
& QI

Strategic Planning

Feedback & Updates

Employee Satisfaction
Surveys

CQI/PDCA Training

Operational Excellence

Practical Application

Relationship Building

Eye on the Big Picture

Vision Set by Leadership

Leveraging Current State

Selection of CQI Teams

Tools and Support

Leadership Development
& QI

Strategic Planning

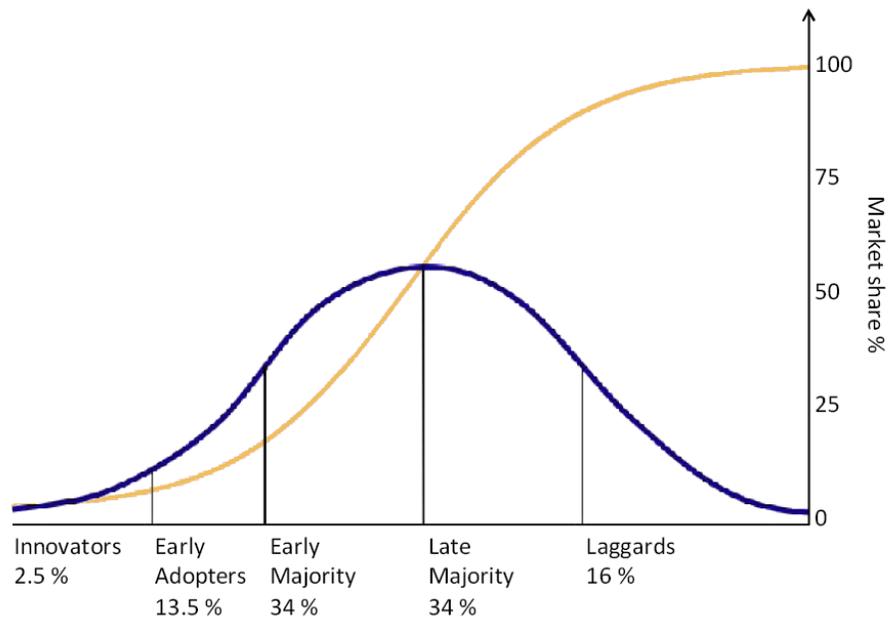
Feedback & Updates

Employee Satisfaction
Surveys

CQI/PDCA Training

Getting Staff Buy-In

DIFFUSION OF INNOVATION



KEY COMPONENTS

Modeling CQI

- Meeting evaluations
- Incorporating and reviewing those regularly

Communication

- Regular and consistent
- Accreditation/QI as standing item on all-staff meetings
- “Documentation Hall of Fame” and “Roadmap to Accreditation” posters

NACCHO QI Road Map Tool

First assessment: Oct 2014
Second assessment: June 2015

Scoring:

0 – nothing in place

1 – just getting started

2 – moving in the right direction

3 – adequate; have made good progress over the last year

4 – very good performance; plans in place to expand QI efforts throughout the organization

5 – QI is institutionalized

Foundational Element	Pre-training Average Score	Post-training Average Score
Leadership commitment	2.33	2.71
QI Infrastructure	1.50	1.79
Employee empowerment and commitment	0.58	1.54
Customer focus	2.83	2.50
Teamwork and collaboration	1.58	2.86
Continuous process improvement	0.83	1.71

Performance Measures

ALCOHOL DRUG & MENTAL HEALTH

- Average time to enter data into Avatar

CALIFORNIA CHILDREN'S SERVICES

- Percent of clients 18 & older with a transition plan

COMMUNICABLE DISEASE

- Percent of completed CD reports

NUTRITION EDUCATION AND OBESITY PREVENTION

- Percent of county residents who recognize the branding for Harvest of the Month campaign

IMMUNIZATIONS

- Percent of NHV clients who have up to date records in CAIR

WOMEN, INFANTS AND CHILDREN

- Number of WIC appointments lost to follow-up each month

OpEx Team

Monthly meeting to support QI Efforts

- Data report outs
- QI Tools
- Brainstorming new projects
- Train and get TA on new dashboard system



Operational Excellence



Lessons Learned

- 1) Change management
- 2) “Keep it Real”
- 3) Separate accreditation from performance improvement

"We are what we repeatedly do. Excellence, then, is not an act, but a habit."

~ Aristotle

