OMH's Performance Improvement & Management System (PIMS):

A Model for Generating Evidence of Intervention Effectiveness & Best Practices in Programs Addressing Minority Health & Health Disparities

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Framing the Problem:

The Case for Performance Improvement in Addressing Minority Health & Health Disparities

Objectives:

- Describe OMH's rationale for establishing its performance improvement and management system (PIMS), and how such a system may benefit one's own organization, agency, or institution;
- Identify the major components of the PIMS and the rationale for the design, structure, and substance of such a system.

HHS Office of Minority Health (OMH)

Office of the Secretary
Staff Divisions

Office of the Assistant Secretary for Health (OASH)

- OFFICE OF MINORITY HEALTH (reauthorized under the ACA)
- Office on Women's Health
- Office of Disease Prevention and Health Promotion
- Office of the Surgeon General
- Office of Population Affairs
- Office of Adolescent Health
- Office of Healthcare Quality
- National Vaccine Program Office
- Office for Human Research Protections
- Office of Research Integrity
- President's Council on Fitness, Sports, and Nutrition

Operating Divisions: AOA, ACF, AHRQ*, ATSDR, CDC*, CMS*, FDA*, HRSA*, IHS, NIH (NIMHD), SAMHSA*

^{*}Agencies with established Offices of Minority Health/Health Equity under the Affordable Care Act (ACA).

Our (Collective) Mission

To improve the health of racial & ethnic (r/e) minority populations through the development of health policies & programs that will help eliminate health disparities.

Demonstration Grants & Cooperative Agreement Programs

National Umbrella Cooperative Agreements (11)

Demonstration Grant Programs

- AI/AN Health Disparities Program (6)
- State Partnership Program to Improve Minority Health (44)
- Partners Active in Communities to Achieve Health Equity (9)
- Youth Empowerment Program (17)
- Delta Region Initiative (1)
- Hispanic Physicians Leadership Development Initiative (1)
- HIV/AIDS-rélated community-based programs focused on partnerships & collaborations
 - Curbing HIV/AIDS Transmission among High-Risk Minority Youth and Adolescents (10)
 - HIV/AIDS Collaborative Technical Assistance and Capacity Development Program (13)
 - HIV/AIDS Health Improvement for Re-entering Ex-Offenders Initiative (8)
 - Linkage to Life Program: Rebuilding Broken Bridges for Minority Families Impacted by HIV/AIDS (6)
 - Minority Community HIV/AIDS Partnerships (4)

Total in FY 2011: 130 grantees

Other Key OMH-Led/-Funded Programmatic Efforts

OMH Resource Center

Infant Mortality "Healthy Baby Begins With You" & "Healthy Indian Baby" Campaigns

Center for Linguistic & Cultural Competence in Health Care

- CLAS Standards Enhancement Initiative
- Cultural Competency Curricula for Physicians, Nursing Professionals, & Emergency Responders

Selected Other Special Initiatives

- White House Minority Health Initiatives
- Eliminating Disparities in Lupus through Education and Training for Health Professionals
- Minority Youth Tobacco Elimination Project
- HHS Oral Health Initiative
- Behavioral Health Initiative for R/E Minority Populations
- National Promotores de Salud Initiative
- National Hepatitis B Initiative for AA/NHOPIs Initiative
- HIV/AIDS Initiatives (Pacific Jurisdictions, African Immigrants, Latino Training & Mentorship)
- National Minority Youth Initiatives (African American, Hispanic, Native American)

The Government Performance & Results Act (GPRA) of 1993

Purpose

- Improve public confidence in Federal government thru agency accountability for program results
- Improve program effectiveness & accountability by focusing on results, service quality, and customer satisfaction
- Improve Federal management of programs by requiring fulfillment of program objectives & by providing information about program results & service quality
- Improve Congressional decision-making by providing more objective information on the relative effectiveness & efficiency of Federal programs & spending
- Improve internal management of the Federal Government

The GPRA Modernization Act of 2010

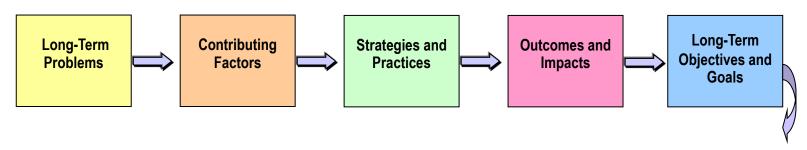
- Reinforces & 'modernizes' previous legislation
- Requires...
 - Creation of chief operating officers, program improvement officers, gov't-wide performance improvement councils, & a gov't-wide performance website
 - Establishment of government-wide & agency-level priorities & identification of high- vs low-priority activities
 - Cross-agency, cross-entity consultation & collaboration
 - More frequent (quarterly rather than annual) reviews & reports
 - Tracking of progress through reviews of goals, targets, & milestones and more frequent updates of actual results
 - Transparency through posting of performance information on public websites, including Performance.gov
 - Accountability through the identification of goal leaders
 - OMB assessments of agency performance
- Will likely take several years to implement

OMB's Assessment of the OMH 'Program': Selected Findings

- Logic or rationale to what we are doing/need to be doing individually or collectively -- relative to the mission not apparent
- Efforts appear fragmented, duplicative, redundant
- Right direction unclear; chance rather than design?
- Unique and common contributions also unclear
- Achievements are more activity-, output-, or processoriented, rather than outcome-/impact- (results)-oriented
- Little or no clear progress by OMH, grantees, contractors, and other partners towards individual or collective objectives and goals – and OMH's overall mission

Steps in Developing & Implementing the Strategic Framework: Using a Logic Model Approach

OMH's Logic Model Approach



- Begin with long-term problem(s)
- Address contributing/causal factors
- Support effective strategies & practices
- Measure intended outcomes/impacts (results)
- Achieve Long-term Objectives & Goals

A STRATEGIC FRAMEWORK FOR IMPROVING RACIAL/ETHNIC (R/E) MINORITY HEALTH & ELIMINATING R/E HEALTH **DISPARITIES**

Long -Term Long-Term Contributing Strategies and **Outcomes and Objectives and Problems Factors Practices Impacts** Goals

1. Individual Level:

- Knowledge
- Attitudes
- Skills
- Behaviors
- · Biological/Genetic Risks

2. Environmental/ **Community Level:**

- Physical Environment
- Social Environment
 - Community Values
 - Community Assets
 - Community Involvement
- Economic Barriers

3. Systems Level:

- Components and
- Resources
- Coordination and Collaboration
- · Leadership and Commitment
- User-Centered Design
- Science and Knowledge

1. Individual Level:

- •Efforts to Increase Knowledge
- •Efforts to Promote Attitudes Conducive to Good Health
- •Efforts to Build Skills
- Efforts to Promote Healthy Behaviors
- Efforts to Address Biological or Genetic Risks

2. Environmental/Community Level:

- •Efforts to Promote a Healthy Physical Environment
- Efforts Aimed at the Social Environment
- Efforts to Address Economic Barriers

3. Systems Level:

- •Efforts to Strengthen Components and Resources
- Efforts to Promote Coordination and Collaboration
- •Efforts to Foster Leadership and Commitment
- •Efforts to Promote User-Centered Design to Address R/E Minority Needs Through -
 - •R/E Minority Participation
 - •Health Care Access/Coverage
 - · Culturally and Linguistically Appropriate Service
 - Workforce Diversity
 - •Racial/Ethnic Data Collection
- •Efforts to Improve Science and Knowledge

1. Individual Level: E.g.,

- Increased awareness/knowledge about disease prevention or risk reduction
- Increased health care provider skills in providing culturally & linguistically appropriate services
- Increased patient adherence to prescribed treatment regimens
- Reduced morbidity & mortality

2. Environmental/Community Level: E.g.,

- Decreased exposure to risks in the physical environment
- Increased public awareness about racial/ethnic health disparities
- Increased health care access & appropriate utilization
- Increased plans & policies that promote health & wellbeing at the local, State, & national levels
- · Reduced morbidity & mortality

3. Systems Level: E.g.,

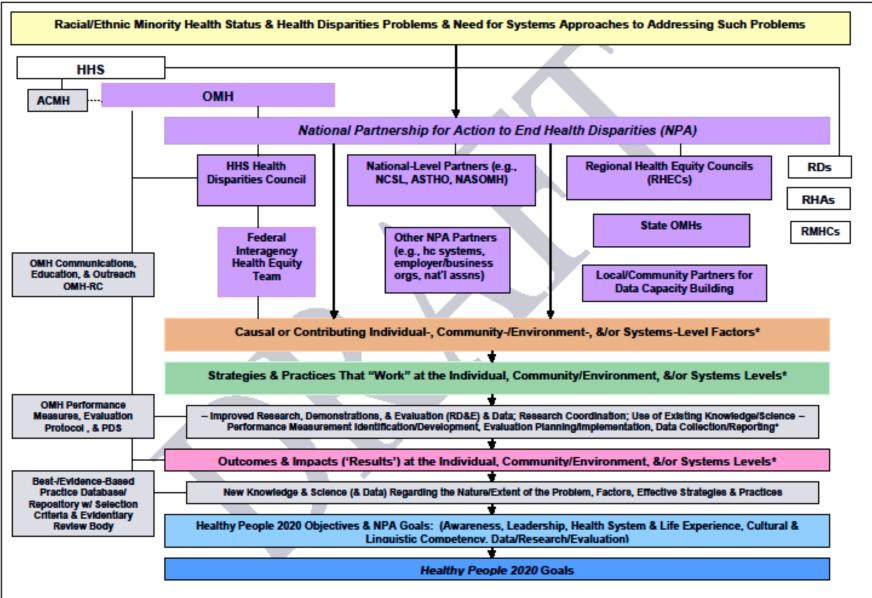
- Increased inputs & other resources for racial/ ethnic minority health-/health disparities-related priorities
- Increased partnerships & collaborations for greater effectiveness & efficiency
- Increased strategic planning, with goals & objectives, evaluation, & performance monitoring
- Increased system design characteristics to minimize barriers for minority users
- Increased knowledge development/science base about "what works"

- 1. Racial/Ethnic Minority Health Status Issues (i.e., preventable morbidity & premature mortality)
- 2. Racial/Ethnic Health Disparities
- 3. Need for a Systems Approach

- 1. Increased quality and years of healthy life for racial/ethnic minorities
- 2. Reduced and, ultimately, eliminated racial/ethnic health disparities
- 3. Systems approach to racial/ethnic minority health improvement and health disparities reduction

(Source: Office of Minority Health, U.S. Department of Health and Human Services, January 2008.)

A STRATEGIC FRAMEWORK FOR IMPROVING RACIAL & ETHNIC MINORITY HEALTH & ELIMINATING HEALTH DISPARITIES



"Under this Framework, OMH, its grantees, and other partners/stakeholders work together as part of a "system." Each entity focuses on those factors, strategies & practices, and outcomes or impacts most relevant to its particular strengths & talents, while coordinating and leveraging its assets with others in more systematic and strategic ways to optimize efficiency, effectiveness, & results.

Graphic Depiction of OMH's Performance Improvement & Management System (PIMS)

OMH Leadership & Direction for Systematic Program Evaluation, Data, & Research for Performance Improvement

The Strategic Framework

To guide the systematic planning, implementation, & evaluation of efforts aimed at improving racial/ethnic minority health, reducing &, ultimately, eliminating racial/ethnic health disparities, & effecting systems approaches to addressing racial/ethnic minority health problems.

Performance Measurement (PM) Inventory & Resources

- •PM 'Inventory" (based on selection & integration of 8 PM data sets in a sortable Excel format)
- •Environmental scans/lit. reviews for environmental-/community- & systems-level measures to address weaknesses & gaps in PMs
- •I.D. of additional, existing PM resources & data integration tools/ resources
- •Links to other HHS efforts to develop data integration tools & resources (e.g., CHDI/Health Indicators Warehouse)

Performance Data Collection (via the Performance Data System)

- •Training & TA on performance reporting via the PDS
- •Grantee/partner(s) organizational & resource data
- •Project data collection (e.g., strategies/practices, expected results, related indicators/measures, participant #s, demographics, etc.)
- •Performance data linked to OMH 'core' measures (OMB requirements, OASH GPRA measures, NPA goals, *HP2020* objectives)
- •Performance data analysis & report generation

Evaluation Planning Guidelines & Protocols

- •OMH Evaluation Planning Guidelines for grant applicants
- •OMH's Evaluation Protocol for all partners & general users
- Logic model diagrams for all OMH grant programs and other OMH programmatic efforts
- •Other performance improvement & evaluation tools and resources

Evaluation Technical Assistance Center (ETAC)

- •Initial project profiles (for OMH-funded grants & cooperative agreements, other programmatic & partnership efforts) with descriptions of proposed interventions, approach to evaluation, & expected results
- •Training & TA on performance measurement, data collection, evaluation planning & implementation
- •Systematic monitoring of project planning/dev't, data collection/ analysis, & evaluation of intervention effectiveness efforts
- •Systematic I.D. of 'promising approaches' or 'best' practices in evaluation *planning* & implementation (evidence of effectiveness)
- •Revised/final grantee project profiles with actual methodology, findings/results, recommendations, & next steps

Cross-site Evaluations to Assess Program Effectiveness

Reports, Publications, & Presentations of Results; OMH Minority Health/Health Disparities Best Practices

- Grantees in the News: 'Spotlights' on 'promising approaches' & 'best practices' in evaluation planning & implementation
- Oral reports & presentations on 'promising approaches' & 'best practices' at professional & scientific conferences
 - Preparation & submission of manuscripts/articles on results of OMH-funded efforts for publication in peer-reviewed journals & other venues

Final reports & compendia of results from grantee demonstration projects

- Final reports of results of program-wide cross-site evaluations
- Final reports of all OMH-funded policy-relevant studies & evaluations to HHS/ASPE Policy Information Center database
- Systematic promotion of research, demos, & evaluation via OMH-led/-funded advisory & coordinative bodies
- Review & selection for OMH inclusion in & dissemination via eventual 'promising' or 'best' practices database

PIMS Online

OMH-RC Website

http://www.minorityhealth.hhs.gov/

Performance/Evaluation Nav Bar

http://www.minorityhealth.hhs.gov/templates/browse.aspx? | | v|=1&|v||D=44

The Strategic Framework

http://www.minorityhealth.hhs.gov/images/78/PrintFramework.htm