Creating Learning Circles in Public Health:
practice-based, online, quality improvement training
for local health departments in rural settings

Ruth E. Wetta, RN, PhD, MPH, MSN
Lisette T. Jacobson, PhD, MPA, MA
Virginia Elliott, United Methodist Health Ministry Fund

American Public Health Association Conference
November 4, 2013

Presenter Disclosure

Ruth E. Wetta

• This project was funded by the
  United Methodist Health Ministry
  Fund in Hutchinson, Kansas

Today’s Learning Objectives

• Discuss long-term online, “just-in-time”
  quality improvement training for local
  health department staff in rural
  communities using adult experiential
  education methods.
• Differentiate the pros, cons, benefits and
  barriers to long-term, online just-in-time
  training for local health departments.
Training Program Goals

Each local health department (LHD) will develop the capacity to:

– collect, manage, and analyze their own data
– understand program outcomes
– use their data to improve delivery of their program

Collateral benefits include:

– enhanced collaboration among participating LHDs
– strengthening LHD quality improvement efforts
– progress toward meeting accreditation standards.

Model for Data-Driven Decision-Making

External focus

Community health improvement
Community health planning
Community health assessment

Internal focus

Program evaluation
Quality Improvement
Strategic planning

Long-Term Outcomes
Short-Term Outcomes
Outputs
Processes
Inputs

CQI PROCESS

1. Mission Statement
2. Document the Process
3. Identify customers & expectations
4. Identify KPP & HQF to measure
5. Stabilize the process
6. Improve the Process

- Identify variation
- Eliminate inappropriate variation
**Learning Plan and Methods**

<table>
<thead>
<tr>
<th>Content</th>
<th>Weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. QI concepts</td>
<td>Planned 1-6</td>
</tr>
<tr>
<td>2. Data collection and management</td>
<td>7-14</td>
</tr>
<tr>
<td>3. Data entry and management</td>
<td>15 - 20</td>
</tr>
<tr>
<td>4. Interpretation and synthesis</td>
<td>21 - 28</td>
</tr>
<tr>
<td>5. Reporting and presentations</td>
<td>28 - 36</td>
</tr>
<tr>
<td>6. Technical assistance</td>
<td>45-60</td>
</tr>
</tbody>
</table>

- Align QI efforts with Core Public Health Functions
- Experiential adult learning methods
- "Just-in-time" training
- Long-term technical assistance

**Training Sessions and Average Participation by Month**

![Training Session Graph]

Includes group and individual sessions

**Examples of Best Practice**

Labette County BEST Program  
*Breastfeeding Education by Supportive Trainers*  
Lisa Goins, RN and Debbi Baugher, RN

Neosho County’s Project TIME  
*Teach, Implement, Mentor, Evaluate*  
Stephanie Henry, MT(ASCP), CBE, IBCLC

Lyon County Treasure Chest  
Janine Messersmith, RD, LD, IBCLC  
Bevin Neeley, IBCLC, CBE
Example of Key Process Measures

- Receiving IBCLC visit within 7 days: 50%
- Using pump: 48%
- Babies weighed at clinic or home visit: 56%
- Breastfeeding at discharge: 50%

Example of Survey Designed by Participant:
Clients’ response to desired services

- Insurance to cover services for nutritional/meeting needs?
- Drinking extra fluids while breastfeeding?
- Nutritional information for the mother?
- Nutritional information for the baby?
- Insurance cover costs of pump?
- Pump available if needed?
- Receive WIC services?
- Attend a BF Peer Support Group?
- Receive a visit from the Lactation Consultant?
- Like a follow-up call (baby weight check)?
- Receive WIC services?
- Pump available if needed?
- Insurance cover costs of pump?
- Nutritional information for the baby?
- Nutritional information for the mother?
- Drinking extra fluids while breastfeeding?
- Insurance to cover services for nutritional/meeting needs?
- Receive WIC services?
- Like a follow-up call (baby weight check)?
- Pump available if needed?
- Insurance cover costs of pump?
- Nutritional information for the baby?
- Nutritional information for the mother?
- Drinking extra fluids while breastfeeding?
- Insurance to cover services for nutritional/meeting needs?
- Receive WIC services?
- Like a follow-up call (baby weight check)?
- Pump available if needed?
- Insurance cover costs of pump?
- Nutritional information for the baby?
- Nutritional information for the mother?
- Drinking extra fluids while breastfeeding?
- Insurance to cover services for nutritional/meeting needs?
- Receive WIC services?
- Like a follow-up call (baby weight check)?
- Pump available if needed?
- Insurance cover costs of pump?
- Nutritional information for the baby?
- Nutritional information for the mother?
- Drinking extra fluids while breastfeeding?
- Insurance to cover services for nutritional/meeting needs?
- Receive WIC services?
- Like a follow-up call (baby weight check)?
- Pump available if needed?
- Insurance cover costs of pump?
- Nutritional information for the baby?
- Nutritional information for the mother?
- Drinking extra fluids while breastfeeding?
- Insurance to cover services for nutritional/meeting needs?
- Receive WIC services?
- Like a follow-up call (baby weight check)?
- Pump available if needed?
- Insurance cover costs of pump?
- Nutritional information for the baby?
- Nutritional information for the mother?
- Drinking extra fluids while breastfeeding?
- Insurance to cover services for nutritional/meeting needs?
- Receive WIC services?
Neosho County TIME Spreadsheet

Neosho County WIC Client Satisfaction

Neosho County Breastfeeding Rates by Quarter, 2011-2013
Lyon County Breastfeeding Duration in 2012-2013

Treasure Chest Cost Calculations

Course Evaluation: Participant Characteristics

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>N</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>female</td>
<td>8</td>
<td>100</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31-40</td>
<td>2</td>
<td>25.0%</td>
</tr>
<tr>
<td>41-50</td>
<td>4</td>
<td>50.0%</td>
</tr>
<tr>
<td>51-60</td>
<td>2</td>
<td>25.0%</td>
</tr>
<tr>
<td>Region</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Central</td>
<td>1</td>
<td>12.5%</td>
</tr>
<tr>
<td>Southwest Kansas</td>
<td>1</td>
<td>12.5%</td>
</tr>
<tr>
<td>Wildcat</td>
<td>1</td>
<td>12.5%</td>
</tr>
<tr>
<td>East Central</td>
<td>2</td>
<td>25.0%</td>
</tr>
<tr>
<td>Lower 8</td>
<td>2</td>
<td>25.0%</td>
</tr>
<tr>
<td>KC Metro</td>
<td>1</td>
<td>12.5%</td>
</tr>
</tbody>
</table>
Participant Confidence in QI Skills Post Course Completion

- not all
- somewhat
- confident
- very

- help another co-worker to understand QI
- maintain QI process
- implement interventions to improve...
- present my analysis to my supervisor(s)
- interpret the graphs I create
- create basic graphs in Microsoft Excel
- use basic formulas in Microsoft Excel
- apply a logic model to my work
- work as a team member to improve service
- understand PH standards
- apply quality improvement concepts

Conclusions and Implications

- Just-in-time education: focus teaching to what participants are ready to apply
- One size does not fit all: Be sensitive (and flexible) to individual learning needs
- Release time to attend sessions and apply concepts to their work
- Agreement from administration to support employee learning
- Great potential for this model to be sustained
  - Online software improving and distance collaboration possible
- Program appears to be an effective and efficient method to increase the capacities of LHD staff
- Potential to serve as a national model for workforce development, particularly in rural states

References

Contact information

- Ruth Wetta  (316) 293-2627  Rwettaha@kumc.edu
- Stephanie Henry  breastfeeding@cableone.net
- Lisa Goins  lgoins@labettecounty.com
- Bevin Neeley  BNeeley@flinthillshealth.org
- Janine Messersmith  JMessersmith@flinthillshealth.org