

Developing a Performance Excellence Council

From Silos to Systems

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Ventura County Public Health
A Division of the Ventura County Health Care Agency

Presenter Disclosures

Daniel Jordan, PhD, ABPP

(1)The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose

Stimuli

- We had a long-standing Continuous Quality Improvement Committee
 - Functioned at a program level
 - Independent (siloed)
 - Projects designed and implemented by line managers and staff with little or no research and evaluation experience
- APHA Domain 9 required an integrated Performance Management System

Barriers

- Turning Point Foundation identified four major barriers to reducing silos and creating integrated performance management
 - **Vision Barrier:** Only 5% of the workforce understands the strategy
 - **People Barrier:** Only 25% of managers have incentives linked to strategy
 - **Management Barrier:** 85% of executive teams spend <1 hour per month discussing strategy
 - **Resource Barrier:** 60% of organizations don't link budgets to strategy

Source:
Balance Scorecard Collaborative, www.bscol.com

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More Barriers

- Categorical funding forces siloing:
 - Federal
 - State
 - Grant
 - Local support (e.g., County General fund)

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More Barriers

- Changes in philosophy are building silos between agencies and communities:
 - Inform, educate, empower, mobilize
becomes
 - Inform, educate and engage

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Irony

- We're all supposed to know and function out of a set of "Essential Services" that conceptually integrate public health philosophy, vision, mission, goals
- These essential services are to create a partnership with the communities we serve

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Need

- A coordinated approach to managing an entire operation
- Development of skills and knowledge about each of the Essential Services
- Shift from measurement to a balanced and cohesive management model
- Shift from categorical to a systems-wide scope targeting capacity, process and outcomes

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Strategy

- Create an integrated approach, vertical and horizontal, to managing public health services
- Cross-develop public health skill sets by assigning staff to domains “outside their comfort zones
- Identify and train in a universal skill set

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This Performance Management System model from the Public Health Foundation (Turning Point)

Performance Standards —establish organizational or system performance standards, targets, [priorities,] and goals to improve public health practices.

Performance Measures —develop, apply, and use performance measures to assess achievement of such standards.

Reporting of Progress —document and report on progress in meeting standards and targets and sharing of such information through feedback.

Quality Improvement Action — establish a program or process to manage change and achieve quality improvement in . . . policies, programs or infrastructure based on performance standards, measurements, and reports.”



Source: http://www.turningpointprogram.org/toolkit/pdf/Silos_to_Sytems.pdf

Note: Distinctions between performance management, performance improvement, quality improvement, and similar phrases varies across authors and sources. The four categories used here are established as four components in a cycle of a comprehensive performance management system.

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Siloed Plans and Processes



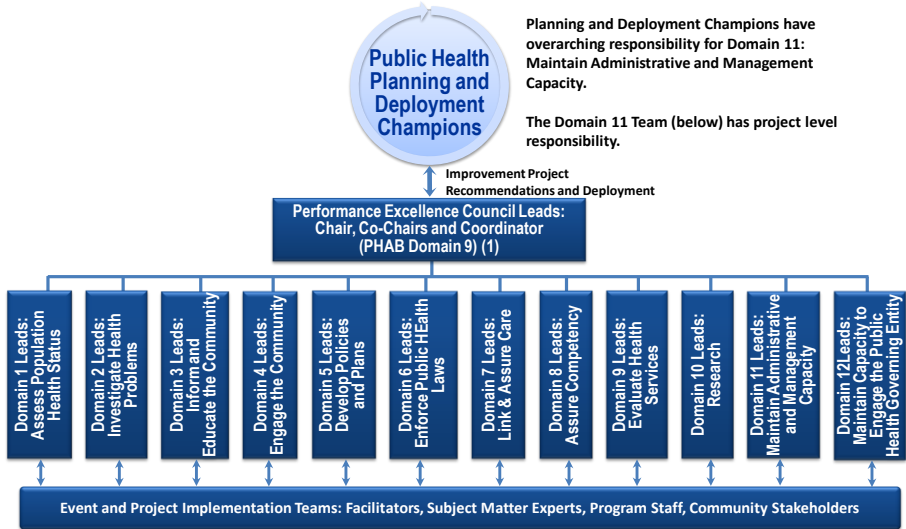
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Integrate Component Activities



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Ventura County Performance Management System Performance Excellence Council Structure

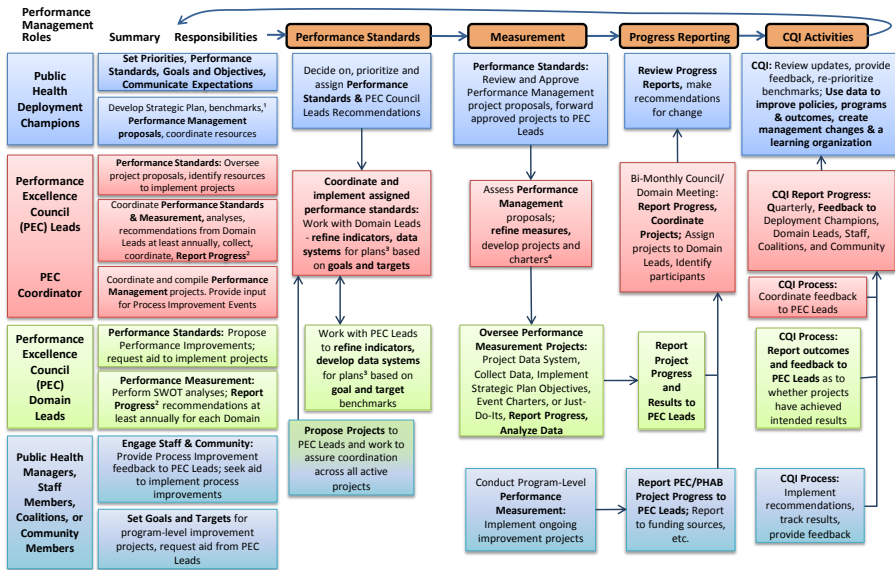


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Basic Structure and Process

Public Health Foundation PM System Stages	Performance Standards	Performance Measures	Reporting of Progress	Quality Improvement
Deployment Champions				
Performance Excellence Council Leads				
Domain Leads				
Project Participants: Staff, Stakeholders, Community Members				

Ventura County Public Health Performance Management System "Performance Excellence Council" (PHAB Domain 9)



Performance Management System and Quality Improvement Procedures: Submit questions and proposals to PEC@ventura.org
 1. Benchmarks may be set based upon Healthy People 2020, County Health Rankings, County and State indicators, Census products, syndromic surveillance, data from county programs, budgeting, etc.
 2. This applies to the Strategic Plan, Business Plan, Community Health Improvement Plan, COOP, etc. The PHAB/PEC Coordinator focuses on PHAB-related issues to assure accreditation compliance.
 3. PEC Leads assure Performance Measurement charters are developed from priorities set by the Deployment Champions. They assign projects to PEC Domain Leads, PH Managers or Staff Members as appropriate. This includes refining proposed projects, indicators and measures and collecting data.
 4. This structure and process is based on: http://www.lurningspointprogram.org/toolkit/pdf/Silos_to_Systems.pdf
 For more information, contact Daniel Jordan, PhD, ABPP, Research Psychologist, at dan.jordan@ventura.org or by phone at 805-981-5258.



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Results to Date

- This structure was used to develop the PHAB accreditation proposal (submitted October 30, 2013)
- Participating managers and staff members have become much more well versed in public health essential services, and have more ability to talk about the range of public health services

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Results to Date

- The PEC structure and process is being used to deploy improvement projects that have been identified through the PHAB accreditation process
- Performance management projects identified through regular procedures are also being deployed