

Goals, Objectives, & Measures for the Performance Management System

The following are the goals and objectives for the development and implementation of Jackson County Public Health's performance management system. The goals are based on the national accreditation standards set forth by PHAB in Domain 9 of *PHAB Standards and Measures version 1.5* and align with goals 6.1 and 6.2 in the JCPH Strategic Plan. Monitoring of progress toward these goals and objectives is the responsibility of the Performance & Quality Coordinator who will report to the PQ Committee on a quarterly basis. Details on activities and projects associated with each objective can be found in the PM/QI Work Plan (Appendix H).

Goal 1: Implement a performance management system to monitor achievement of organizational objectives.

Objective 1.1: By August 2017, each division program area including Administration will have at least 2 functional performance measures

Measure: % PQ Committee program areas with at least 2 functional performance measures reported each quarter

Objective 1.2: Through 2018, the PQ Committee will conduct quarterly reviews of progress against the Strategic Action Plan

Measure: # of quarterly reviews against the Strategic Action Plan conducted per year

Goal 2: Improve division capacity to engage in performance management and quality improvement efforts.

Objective 2.1: By December 2017, develop a detailed PM/QI training plan which identifies desired KSAs and outlines specific training materials to develop them

Measure: A written PM/QI training plan which meets the criteria specified in the objective

Objective 2.2: By December 2018, 30% of PQ committee members will indicate that they would be comfortable facilitating a QI project

Measure: % of P-Q Committee members indicating that they would be comfortable facilitating a QI project

Goal 3: Implement formal QI efforts at Jackson County Public Health.

Objective 3.1: By December 2018, Jackson County Public Health will have at least 2 QI projects that have completed at least 1 PDSA cycle

Measure: # of QI projects completing 1 PDSA cycle

Objective 3.2: Through 2018, all QI projects will use standard project documentation as laid out in the QI plan

Measure: % QI projects submitting all project documentation according to the specifications of the PM/QI plan

Goal 4: Advance the culture of quality within Jackson County Public Health.

Objective 4.1: By December 2018, JCPH will move from a “2” to a “3” in the foundational element of Employee Empowerment on NACCHO’s roadmap to a culture of quality

Measure: Employee Empowerment score on NACCHO’s roadmap to a culture of quality self-assessment

Objective 4.2: By December 2018, JCPH will move from a “3” to a “4” in the foundational elements of Leadership and QI Infrastructure on NACCHO’s roadmap to a culture of quality

Measure: Leadership and QI Infrastructure scores on NACCHO’s roadmap to a culture of quality self-assessment

Jackson County Public Health Performance Management & Quality Improvement Work Plan 2017-2018

Strategy #3: Develop and implement a PM/QI training plan for building appropriate levels of PM and QI KSAs for every level of staff

Supports PM/QI Plan Objectives 2.1, 2.2, 3.1, and 4.1

Action Steps	Timeframe	Responsible	Expected Outcomes	Progress Notes
1. Identify desired set(s) of core PM/QI knowledge, skills, and abilities (KSAs) for all levels of staff	July 2017	PQ Leadership Team	List of desired KSAs for various tiers of staff	List of desired KSAs for various tiers of staff developed and finalized 8-22-17. Status: Complete
2. Identify PM/QI training opportunities, materials, and methods	Aug – Sept 2017	PQ Leadership Team	List of PM/QI training opportunities and resources	Identification of training opportunities and materials initiated by PM/QI Coordinators Status: In progress
3. Assess materials and methods for use in developing desired KSAs	Sept – Nov 2017	PQ Leadership Team	An inventory of effective materials for use and methods for deployment Selection of training resources for implementation within the division for development of desired KSAs	---
4. Draft a detailed, written PM/QI training plan	Nov – Dec 2017		A written PM/QI training plan which identified desired KSAs and outlines specific training materials to develop them	---

5. Implement PM/QI training plan	Ongoing from Jan 2018	PQ Leadership Team	Development of knowledgeable QI champions that are comfortable facilitating QI projects Increased employee empowerment regarding PM & QI	---
6. Regularly assess staff knowledge to evaluate impact of training plan	Ongoing from Jan 2018	PQ Leadership Team	Regularly administered surveys to assess staff PM/QI knowledge Set of measures to evaluate the PM/QI training plan	

Strategy #4: Identify, initiate, and complete QI projects within the PQ Committee

Supports PM/QI Plan Objectives 2.2, 3.1 and 3.2

Action Steps	Timeframe	Responsible	Expected Outcome	Progress Notes
1. Explore QI projects implemented in similar agencies	July – Dec 2017	PQ Committee	Increased understanding of QI projects among PQ Committee members	List of example QI projects from other agencies has been compiled but has not yet been shared with the PQ committee
2. Develop instructional and example sheets for all QI project forms	May – July 2017	PQ Coordinator	Instructional and example sheets for all QI project forms	Not yet started, behind schedule
3. Review QI project documentation forms with PQ Committee members	July 2017	PQ Coordinator	Improved PQ Committee understanding of and comfort with QI project documentation forms	Not yet started, behind schedule

4. Identify areas for improvement based on performance data analysis	Ongoing	PQ Committee	Areas for improvement identified based on performance data	---
5. Explore options for “winnable” QI projects and encourage the planning and implementation of these projects	Jan – Mar 2018	PQ Leadership Team, PQ Committee	Increased number of QI projects proposed and conducted	---
6. Encourage staff to engage in QI projects and celebrate QI successes	Ongoing	PH division management	Increased number of QI projects proposed and conducted Employee recognition for participation in QI projects	---

Jackson County Public Health Performance Measure Report



Date: 08/23/2017

Program: Performance & Quality

Reporting Period: May – July 2017

Goal 2: Improve division capacity to engage in performance management and quality improvement efforts.

Objective 2.1: By December 2017, develop a detailed PM/QI training plan which identifies desired KSAs and outlines specific training materials to develop them

Performance Measure		
A written PM/QI training plan which meets the criteria specified in objective 2.1		
Current Value List of desired KSAs developed Written training plan yet to be completed	Target 1 written plan	Last Reported Value and date ---
Trend Summary Progress towards target	Recommended Action <input checked="" type="checkbox"/> Continue monitoring <input type="checkbox"/> QI project <input type="checkbox"/> Other:	
Notes/Comments Activities for this objective as outlined in the PM/QI Work Plan are moving forward and making progress though slightly behind schedule. A document detailing a list of desired KSAs has been finalized. Next step is to identify and evaluate training materials. Development of a training plan by December 2017/January 2018 still considered reasonable; objective on track.		

Objective 2.2: By December 2018, 30% of PQ Committee members will indicate that they would be comfortable facilitating a QI project.

Performance Measure		
% of PQ Committee members indicating that they would be comfortable facilitating a QI project		
Current Value Unknown	Target 30%	Last Reported Value and date ---
Trend Summary No progress	Recommended Action <input type="checkbox"/> Continue monitoring <input type="checkbox"/> QI project <input checked="" type="checkbox"/> Other: Develop an instrument to assess baseline value for this performance measure	

Notes/Comments

Baseline value for this measure has yet to be assessed. Recommended next step is to develop an instrument to assess a baseline value for this measure prior to implementation of PM/QI training plan in order to best assess the success of the training/training plan on improving PQ Committee member readiness to facilitate QI projects.

Goal 3: Implement formal QI efforts at Jackson County Public Health

Objective 3.1: By December 2018, Jackson County Public Health will have at least 2 QI projects that have completed at least 1 PDSA cycle.

Performance Measure		
# of QI projects completing 1 PDSA cycle		
Current Value 0	Target 2	Last Reported Value and date ---
Trend Summary No progress	Recommended Action <input checked="" type="checkbox"/> Continue monitoring <input type="checkbox"/> QI project <input type="checkbox"/> Other:	
Notes/Comments One QI project proposal was submitted to the PQ Committee at the 7-27-17 meeting though it has yet to be discussed or approved by the committee. 2-3 other QI project proposals are known to be in development but have yet to be submitted to the committee. Recommend continue monitoring at this point. If no QI projects are in progress by the end of December 2017, develop an initiative to encourage QI project proposals and/or conduct QI project to improve performance on this measure.		

Objective 3.2: Through 2018, all QI projects will use standard project documentation as laid out in the QI plan.

Performance Measure		
% QI projects submitting all project documentation according to the specifications of the PM/QI plan		
Current Value ---	Target 100%	Last Reported Value and date ---
Trend Summary No progress	Recommended Action <input checked="" type="checkbox"/> Continue monitoring <input type="checkbox"/> QI project <input checked="" type="checkbox"/> Other: Include review of QI project documentation forms in PM/QI training plan	
Notes/Comments Current value cannot be calculated as no QI projects have been completed, making the denominator zero.		