

Assessing and Improving the Quality of Our Work... What I've Learned over 10 Years

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2019 LADPH Quality Improvement Summit





Some history about me...

- Had no prior quality improvement (QI) experience or training
- Chaired Alameda County Public Health Department's (ACPHD) "Measuring Success" Workgroup

"Workgroup Objective"

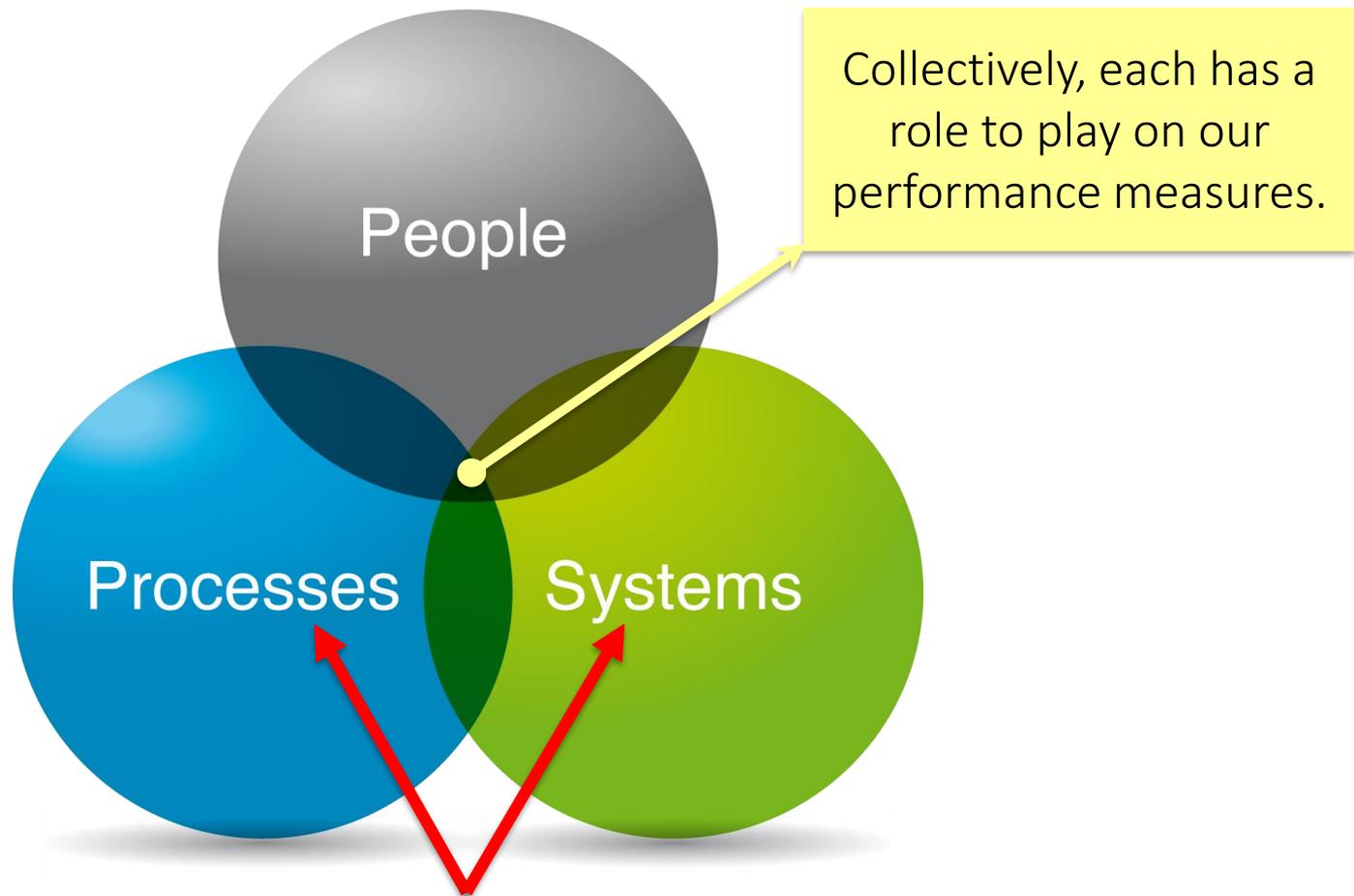
Focus the work of all programs using appropriate and objective measures to assess progress towards health equity.

- Became a Results-Based Accountability (RBA) trainer
- Lead the implementation of the ACPHD performance management system
- Failed multiple times

The culture of an organization is expressed through its daily operations, an embodiment of its...



The culture and outcomes of our daily operations are shaped by...



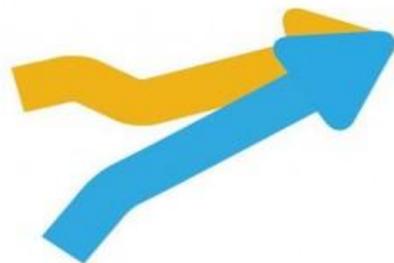
MUST CONTINUOUSLY IMPROVE

What should you expect to see if we had a Culture of Quality Improvement (CQI) within DPH?

Improved Work Environment



Improved Work Outcomes



*“Closing the gaps”, while
improving health for all*



Committing to a Culture of QI means...

- Using data to analyze problems and make decisions

The alternative to using data for decision-making and to get desired outcomes...



Committing to a Culture of QI means...

- Using data to analyze problems and make decisions
- Engaging staff and clients in planning and project design
- Understanding what's impacting outcomes for your service population
- Focusing on improving the impact of the services provided
- Empowering staff to do QI projects and make decisions
- Continually making improvements over time



Think about the department. In what “Phase of a Culture of QI” do you think we are?

Phase 1	No Knowledge of QI
Phase 2	Not Involved with QI Activities
Phase 3	Informal or Ad Hoc QI
Phase 4	Formal QI Implemented in Specific Areas
Phase 5	Formal Agency-Wide QI
Phase 6	QI Culture

Source: NACCHO’s “Roadmap to a Culture of Quality Improvement”, <http://qiroadmap.org/>



Some lessons I have learned about implementing continuous quality improvement within organizations.



Change is a process
not an event.

Barbara Johnson



Some lessons I have learned about implementing continuous quality improvement within organizations.

- Use a structured process and Train everyone to use it
- Process must
 - a) engage the team, especially frontline workers, and
 - b) help to identify both:
 1. Program *performance (process) measures* and
 2. Program *impact (client outcome) measures*
- Use QI tools, e.g. the PDSA, or Plan-Do-Study-Act, iterative problem-solving model, to test ideas about/changes in processes
- Provide “hands-on” QI support
- “Tweak the environment” to change behavior

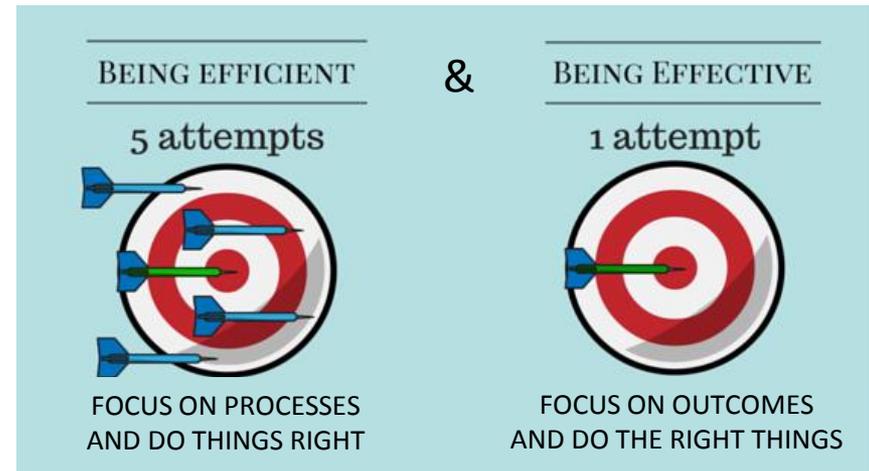
Results Based Accountability (RBA)TM is a structured process to guide thinking and taking action...

–To make outcomes and the conditions of well-being more equitable for children, youth, families and the whole community, AND



Photo from EBALDC Strategic Plan 2017-2019

–To improve the efficiency and effectiveness of programs, agencies, policies and service systems for its service population.





Two Key Principles for Achieving Measurable Community Results

1. Start with the ends, work backwards to means
2. Data-driven, transparent Decision Making



**If you can remember “2-3-7”,
you can remember RBA™ in a nutshell.**

2 - Kinds of accountability plus language discipline

Population accountability — Outcomes & Indicators

Performance accountability — Performance measures

3 - Kinds of performance measures

How much did we do?

How well did we do it?

Is anyone better off? (Customer outcomes)

**7 - Questions from ends (outcomes) to means (actions)
in less than an hour**

Results Based Accountability (RBA) is made up of two parts:

Population Accountability
about the well-being of
WHOLE POPULATIONS

For Communities – Cities – Counties – States - Nations

Performance Accountability
about the well-being of
CUSTOMER POPULATIONS

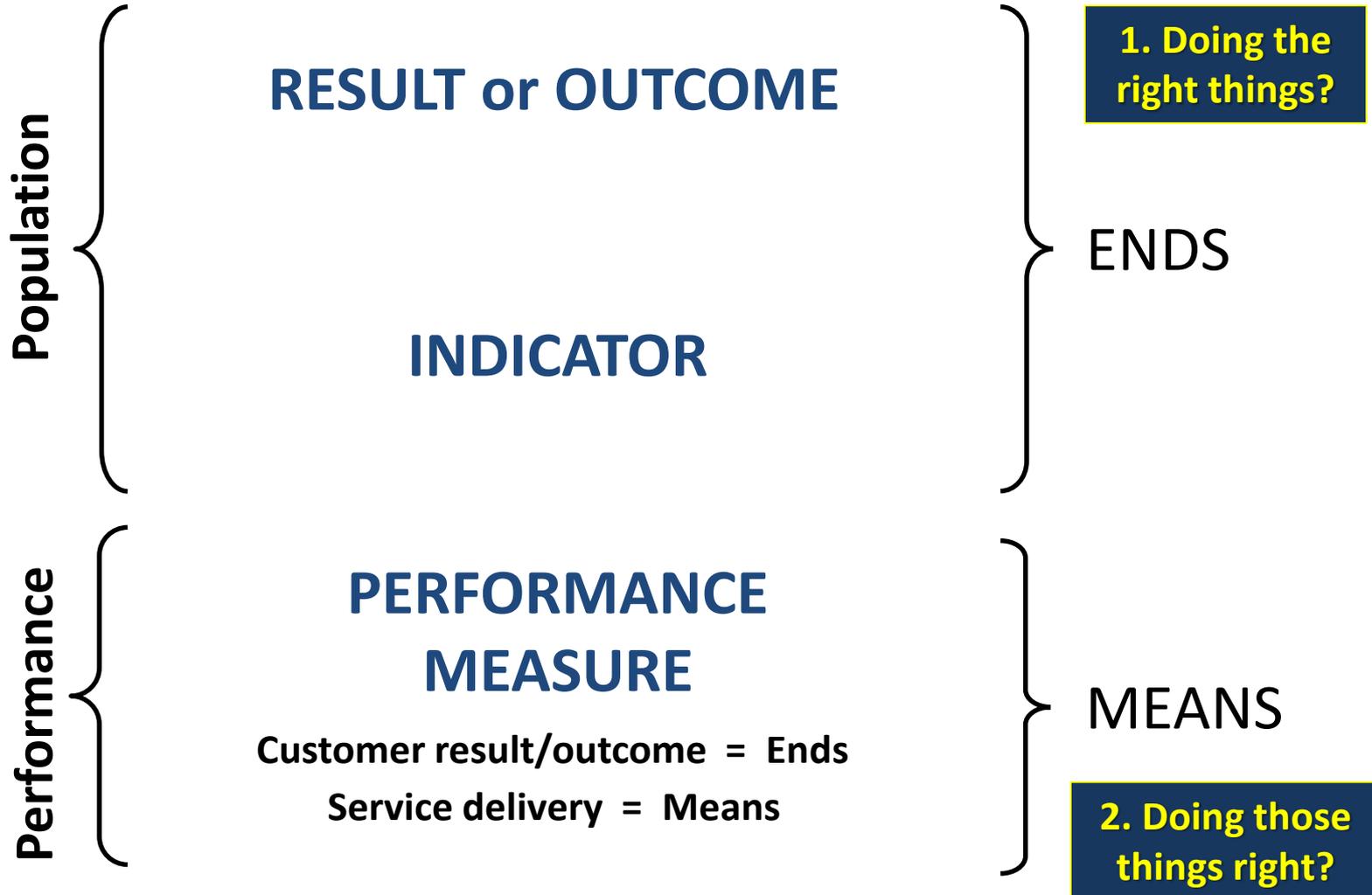
For Programs – Agencies – Service Systems

Contributes to





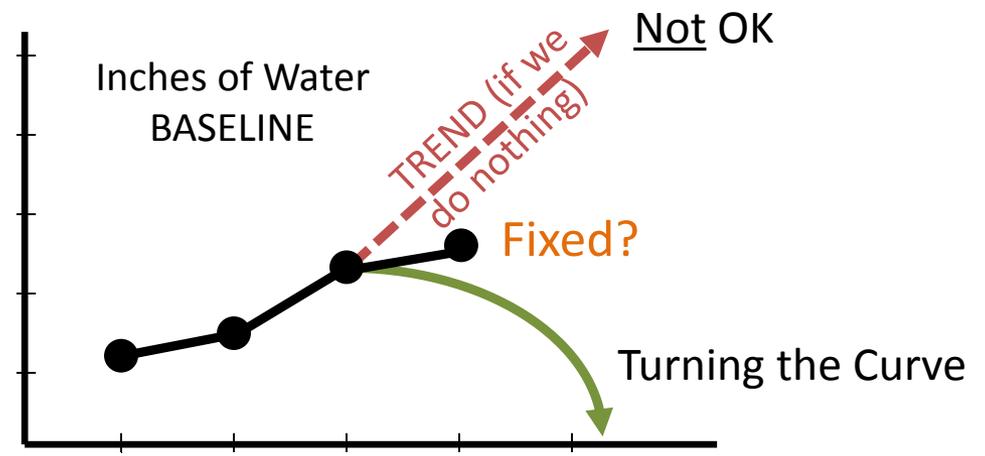
From Ends to Means, From Talk to Action



Leaking Roof

(Results thinking in everyday life)

- ➔ Desired Outcome
- ➔ Indicator/Measure
- ➔ Story behind the baseline (causes)
- ➔ Partners
- ➔ What Works
- ➔ Action Plan #2



Are Results-Based Accountability (RBA) and Quality Improvement (QI) different?

Yes, RBA helps to clarify your desired program outcomes and identify measures to assess results.

QI activities improve the efficiency and effectiveness of your work to achieve the results.



QI tools help identify where improvements can be made to improve outcomes. Each has a specific purpose.

Assess a Situation

- Fishbone Diagram

Make a Decision

- Flowchart

Plan a Project

- PDSA: Plan-Do-Study-Act

Purpose of the Tool

- Cause & Effect Diagram

- Identify process steps

- Improve/carry out change

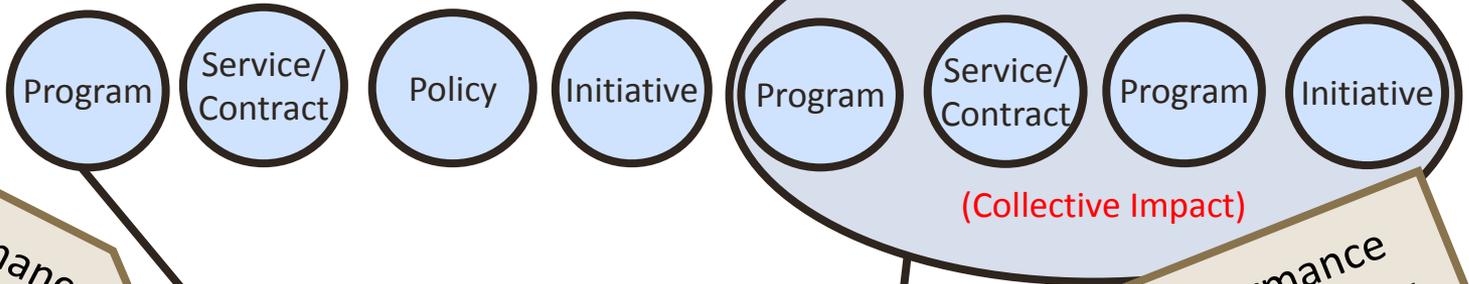
Outcome: All children have optimal health.

Indicator: Obesity Rate



Population
Accountability

Collective Strategies by Partners



Performance
Accountability



After School Program's
Performance Measures



Agency/Department's
Performance Measures

Performance
Accountability

END

MEANS

Recommended Presentation Format

Every time you make a presentation, use a two-part approach.

NOTE: Best used after going through the RBA™ Turn-the-Curve exercises for both Population Accountability and Performance Accountability.

Population Accountability

Outcome (to which you contribute to most directly)

Indicator(s) (to which you contribute to most directly)



Story (behind the indicators)

Partners (with a role to play on the indicators)

What would it take to improve?

Your Role (as part of a larger strategy)

Performance Accountability

Your Program

Performance Measures



Story (behind your performance measures)

Partners (with a role to play on your performance measures)

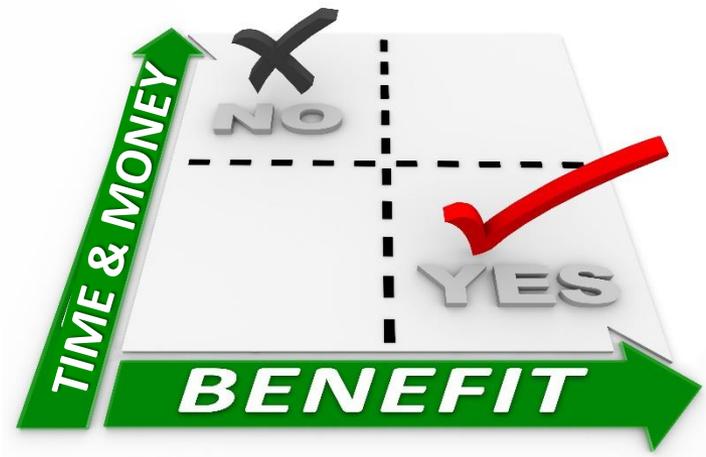
Actions for your program to get better

Remember, we should see three outcomes if we successfully “build a Culture of QI” here at DPH.

Improved Work Environment



Improved Work Outcomes



“Closing the gaps”, while improving health for all

Thank you for your time and attention...

Any questions?





The RBA Turn-the-Curve Exercise will help us develop insights and action plans for improving population outcomes.

1. What are the quality of life conditions we want for the children, adults, and families in our community?
2. What would these conditions look like if we could see them?
3. How can we measure these conditions?
4. How are we doing on the most important of these measures?
5. Who are the partners that have a role to play in doing better?
6. What works to do better, including no-cost and low-cost ideas?
7. What do we propose to do?





Turn the Curve on our Performance : **7 Effective Questions to Get from Talk to Action**

1. Who are your clients? Are they your target population?
2. How can you measure if your clients are better off?
3. How can you measure the quality of service, policy, or initiative you provide (data/performance measure)?
4. How are you doing on these measures (story behind the baseline)?
5. Who are the partners with a role to play? What is their role?
6. What works (practices, processes, and/or policies) to turn the curve of the baseline?
7. What do you propose to do, in what timeline and in what budget? (Use RBA Sorting Criteria.)