

## 2015-2016 Accreditation Support Initiative (ASI) for Local Health Departments

## **FINAL REPORT**

1. **Community Description:** Briefly characterize the community(ies) served by your agency (location, population served, jurisdiction type, organization structure, etc.). The purpose of this section is to provide context to a reader who may be unfamiliar with your agency.

Clark County is a rural and geographically expansive county in Wisconsin with a population of approximately 35,000. Along with a growing Hispanic community, Clark County has a significant Amish and Mennonite presence.

2. **Project Overview:** Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed during the ASI project period and the key activities engaged in to achieve these accomplishments. This should result in a narrative summary of the chart you completed in Part 1, in a format that is easily understandable by others.

From the funding provided by NACCHO, the Clark County Health Department was able to dedicate both staff time and resources to working toward accreditation. A core team of staff dedicated to QI/PM initiatives was organized. These individuals regularly educated other employees and Board of Health members on the importance of performance management. Funding provided during the ASI project period supported our agency's ability to administer the NACCHO self-assessment tool specific to PM/QI. As an outcome of this, we developed performance measures to address identified weaknesses. Both administrative and programmatic goals/objectives were developed to support opportunities for improvement. The dedicated focus on performance management helped to further institutionalize its importance in our daily operations.

3. Challenges: Describe any challenges or barriers encountered as your agency worked to complete the selected deliverables. These can be challenges your agency may have anticipated at the start of the initiative or unexpected challenges that emerged during the course of implementing your proposed activities and completing your deliverables. If challenges were noted in your interim report, please do include them here as well. Please include both tangible (e.g., natural disaster, leadership change) and intangible (e.g., lack of staff engagement) challenges.

We did not experience any significant challenges or barriers to completing selected deliverables. However, it did take a little longer than expected to land on an appropriate performance management measuring tool (NACCHO's Organizational Culture of Quality Self-Assessment Tool, PHF's Performance Management Self –Assessment Tool, & the Baldridge). We then reached out to Pooja Verma, our project mentor, who provided guidance.



4. Facilitators of Success: Describe factors or strategies that helped to facilitate completion of your agency's work. These can be conditions at your agency that contributed to your successes or specific actions you took that helped make your project successful or mitigated challenges described above. Please include both tangible (e.g., influx of funds from another source) and intangible (e.g., staff or leadership engagement) facilitators.

In addition to the support provided by NACCHO to focus on this project, a key factor to our success was organizing team meetings to introduce performance management/quality improvement and having our core QI/PM team meet routinely to assure progress was being made.

5. **Impact of ASI:** To what extent do you feel your health department was more prepared for accreditation at the end of the ASI5 project as compared to the beginning? What specifically changed during that time that made your agency more prepared for accreditation? How did the ASI5 contribute to your health department's progress?

In going through preparation for the accreditation process, CCHD staff increased their competence and capacity to fully adopt a performance management system. By engaging staff in the completion of the self-assessment, our QI/PM team was able to develop goals and objectives in both programmatic and administrative areas. From this experience, our health department staff and Board of Health have gained a greater appreciation for performance measures and quality improvement. Through this funding opportunity provided by NACCHO, our small health department was able to dedicate staff time and resources to further our pursuits of accreditation.

6. **Lessons Learned:** Please describe your agency's overall lessons learned from participating in the ASI. These can be things you might do differently if you could repeat the process and/or the kinds of advice you might give to other health departments who are pursuing similar accreditation-related funding opportunities or technical assistance activities.

Overall, it was a productive experience in terms of addressing our need to give specific attention to performance management. However, as a relatively small health department with relatively few resources, our experience may have been more productive had we pre-loaded our mentor with this information.

7. **Funding Impact:** Describe the impact that this funding has had on your agency. How has this funding advanced your agency's accreditation readiness or quality improvement efforts?

It lent specific focus to performance management & identifying performance measures. This opportunity allowed our health department to re-center our attention on the importance of quality improvement as an integral part of our daily activities and outputs.



8. **Next Steps and Sustainability:** What are your agency's general plans for the next 12-24 months in terms of accreditation preparation and quality improvement? How will the work completed as part of the ASI be sustained moving forward?

Our agency plans to continue moving forward with the PHAB agency self-assessment & through that process, identify additional QI opportunities. The work completed as part of the ASI gave our Health Department a platform to continue with the development of our performance management efforts and to help identify performance measures.