

Building a QI Culture at a Local Health Department

NACCHO's Accreditation Preparation & Quality Improvement (QI) Webinar Series
Wednesday, February 16, 2011 3:00PM EST

In February 2011, NACCHO hosted a webinar entitled "Building a QI Culture at a Local Health Department." This webinar featured three staff members from the Sedgwick County Health Department in Kansas: Claudia Blackburn, Health Director, Ty Kane, Community Health Analyst, and Sonja Armbruster, Community Health Assessment Coordinator. The presenters talked about the importance of building a QI culture, how to develop a QI plan, and moving from discrete QI initiatives to organization-wide QI.

The questions below were posed during the webinar.

QI Teams

What is the Q-Team?

Sedgwick County developed a Quality Council at the beginning of their QI work, and that group quickly gained the nickname "Q-Team." This team is made up of representatives from each division of the health department and most members are supervisors. The Q-Team generally meets monthly, but during the staff-training period (August through January), they did not meet so as to alleviate already taxed schedules. When QI project teams were created and began their project-area work, each member of the Q-Team was assigned to one project. This ensured that each project team have a member who has been trained on QI and is aware of the other projects.

How were the QI project teams organized?

When QI projects were chosen, teams included one member of the Q-Team, who led the efforts, relevant project staff and administrative staff, who were familiar with the process being studied.

All staff received an overall training, but only 40 participated in the 6-month long intense training.

How did you choose these 40 staff?

The staff involved in this training were program managers, supervisors, Q-Team members and the health department director.

How frequently did the project teams meet?

Teams met at their discretion, but typically once or twice per month. During busy periods, such as the implementation of a team's "improvement plan" or development of the storyboard, teams met more frequently. Each team's project manager was responsible for scheduling meetings.

What was the role of the QI Coordinator at the health department?

The QI Coordinator, Ty Kane, met with teams when they needed assistance and worked with their Q-Team leader as the project developed. He was in charge of ensuring that the team members had the resources they needed to complete their projects.

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QI Projects:

How do you choose QI Projects? What criteria were used?

Sedgwick County Health Department (SCHD) chose project topic areas prior to the staff quality improvement (QI) training. The Director, Leadership Group (5 Division Directors) and Q-Team brainstormed a list of about 20 topic areas over the months leading up to the training. The final eight were picked based on Q-Team interest and likelihood each project could be addressed within the training timeline and resources. The Q-Team had the final say on the eight projects.

What projects were ultimately selected?

Some areas chosen for QI projects included the new employee orientation process, WIC wait times, billing, lab test reporting and purchasing, among others. Storyboards from the projects can be viewed [here](#). Most of the projects were process-focused, but SCHD is open to conducting more initiatives that include service-delivery in the future.

How did the QI Teams divide workloads?

After the project focus areas were selected, teams were formed. Each team included a Q-Team member, a Project Manager and other staff related to that project area. Teams were charged with determining their own roles and identifying who would manage which parts of the project. Generally, the Project Manager delegated tasks within the group, served as the key contact and was held responsible for the timeline and final outputs.

QI Training

Did you hire a trainer? What type of training was useful?

Yes, SCHD hired a QI consultant to conduct their training, who was selected competitively through an [RFP process](#).

Trainings included an introduction to QI in public health, an overview of QI tools, and an in-depth look at the Plan-Do-Study-Act (PDSA) cycle. There was one training for all staff, and the others were conducted for the team of 40 QI leaders. Additionally, the trainer met with Sedgwick County Q-Team members who were facilitating the projects (at least) monthly and met with QI Project Managers once (via conference call) during the training period.

While each project yielded significant lessons, the most talked about project since the end of the training has been the "New Employee Orientation" team's project because the results were impressive and staff appreciated the changes. For details, you can read the team's storyboard [here](#).

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QI Resources

Are there examples of agency QI plans?

SCHD's QI Plan, QI Policy and RFP for a QI Consultant are available on NACCHO's website or by clicking [here](#). Additional examples of QI Plans are available in [NACCHO's quality improvement toolbox](#).

What additional resources did Sedgwick County Health Department use?

SCHD used the [Public Health Memory Jogger book](#) as well as tools available on NACCHO's website like previously developed QI plans and [guidance for selecting a consultant](#). The QI consultant used the [Michigan QI Guidebook](#) when training staff. Additionally, a Quality Culture Assessment was provided to Sedgwick County by the project consultant and can be found in the article co-authored by SCHD and Jack Moran (from the Jan-Feb 2010 JPHMP), [Realizing Transformational Change Through Quality Improvement in Public Health](#).

Budgeting for the QI Project

What was the budget for the project? How did you receive funding?

The most significant portion of the budget was the QI consultant fees. SCHD was able to secure a capacity building grant from the Sunflower Foundation of Kansas to cover these fees. This grant totaled about \$13,000. In addition, SCHD assigned 25-35% of a staff-member's time to the QI project. The funding for this staff position is primarily local general funds. Because this staff member will remain dedicated to agency-wide QI at this level, the project is sustainable.

Staff or management support

How can you address resistance from staff that feel they do not have time for QI?

Staff were generally appreciative of the all-staff training, although there were many concerns about "adding an extra duty" to their already-long list of job requirements. The SCHD QI Coordinator worked to ensure the project teams had support and guidance. Staff typically enjoyed using the QI tools and feeling as if they were a part of something important. Even the participants of the projects that did not achieve measurable improvements after the first PDSA cycle felt like they gained valuable insight and plan to continue to work towards their Aim statements.

The Director of SCHD is very supportive of developing a QI culture, so her attention to the project helped generate support as well. Moving forward, QI will be evaluated as part of employee evaluations so that staff can realize the importance.

What suggestions do you have for LHDs struggling to get management buy-in?

Claudia Blackburn, director of SCHD, recommended explaining the link between QI and accreditation to reluctant managers. Health departments will need to demonstrate a culture of QI to be accredited when the national accreditation program is launched. She also explained that QI is a way to demonstrate increased accountability to funders and policymakers. Another way is to convey success stories from LHDs – explaining how staff have found new and better ways to do things, innovative ways to save resources, and interesting techniques for cutting workloads. QI projects have led to increased client and staff satisfaction, so presenting this evidence to senior managers is a good strategy!

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QI Plan

How broad or detailed should a QI plan be? Should the QI plan be part of the strategic plan?

While every health department is different, SCHED recommends keeping a QI plan broad so that it can be applicable across programs or divisions. Also, keeping it broad allows staff to understand it easier and to feel included. While SCHED has not yet incorporated their QI plan into their strategic plan, they intend to do so when the strategic plan is revised this year.

Domain 9 of the Public Health Accreditation Board standards and measures has a focus on QI. Those are currently in draft form, but once finalized, can also be used as a guide to understand what the national accreditation program will expect from health departments seeking accreditation.

Some of our staff are confused about the differences between QI, Quality Assurance, Performance Management, etc... can you clarify these definitions?

The PHAB Glossary is a great resource for these definitions as accreditation-seeking LHDs will apply PHAB's definitions as they prepare for accreditation. As described in the webinar, definitions are a key component of an agency QI plan. Describing these terms for staff from the beginning is important for success. Ty Kane, SCHED's quality coordinator, found it helpful to discuss the different terms and their definitions with staff during the QI trainings and meetings. This way staff could be involved in consensus-building and feel that they are a part of the process.

How do you recommend small LHDs get started with QI?

A QI plan is a good place to start for any agency. By making the plan less comprehensive and appropriate to an agency's size, LHDs can adjust their QI workload to fit with their staff time and availability. The team from Sedgwick and the Public Health Foundation (PHF) describe the criteria for a plan in a paper that can be found [here](#).

Getting Started

What advice do you have for LHDs that are apprehensive to take on the large scale efforts described in the webinar?

Getting started was probably the biggest challenge for SCHED according to their Community Health Assessment Coordinator, Sonja Armbruster. The advice given by Sonja and Ty Kane includes taking advantage of the free QI resources available from NACCHO, PHF and other organizations. Also, ensuring the agency has someone designated to help staff as they narrow their focus. Having someone available who is able to support staff as they develop Aim statements or use the QI tools is key to success.