Plan

Identify an opportunity and Plan for Improvement

1. Getting Started
The area for improvement was identified during the self-assessment process. Standard 88 was chosen as the project’s focus area. Staff issues with continuing education, training, and leadership development activities had previously been identified by a Dimensions of the Learning Organization (DLOQ) survey.

2. Assemble the Team
Project team members were chosen so that the team would have representatives from each division in the Health Department: Environmental Health, Personal Health, Community Health, and Central Services

Original Aim Statement
We will maintain a competent public health workforce by evaluating LHD staff members public health competencies, and address deficiencies through continuing education, training, and leadership development activities. This will be done by documenting 100% of future trainings in a central/common database, increasing the number of notifications across divisions of appropriate training to staff by 50%, and linking 100% of all trainings attended to public health core competencies by November 30, 2008.

3. Examine the Current Approach
The team could not reach consensus about how training was being documented. The team developed a plan to determine the cause of the problems. The plan included:
- Interview Management Team
- Create a process map
- Review training documentation
- Gather data (check sheet)
- Survey staff

Revised Aim Statement
By November 30, 2008, to begin the development of and maintenance for a competent public health workforce, the Genesee County Health Department (GCHD) will focus on continuing education, training, and leadership development activities. GCHD staff will increase the number of trainings documented by 50% and ensure that 100% of all trainings documented have 100% of fields completed in the central training database.

4. Identify Potential Solutions
Potential solutions included:
- Develop an “official” definition of what is training.
- Educational e-mails to Management Team and staff
- Weekly screensavers
- Educational articles in the staff newsletter
- Simplify training report form

5. Develop an Improvement Theory
An “if then...than...” approach was used to describe our theories.
- If we define what training should be documented, the number of report forms completed will increase.
- If we educate staff about the need for documenting training in a central location, the number of report forms completed will increase and the completeness of documentation will increase.
- If we educate staff about the need for documenting training, the completeness of documentation will increase.
- If we simplify the report form, the number of report forms completed will increase.

DO

Test the Theory for Improvement

6. Test the Theory
Staff were surveyed about the number of trainings they were attending and how they were documenting their trainings.

Team members developed, reviewed, and approved the official definition of training. Starting in September weekly training reminder e-mails were sent to Management Staff. A screensaver was created remind staff to document their training. The team also drafted an article for the staff newsletter.

PRE and post intervention data was collected to look for any changes.

CHECK

Use Data to Study Results of the Test

7. Check the Results
There should be approximately 57.9 trainings recorded every month in the central database. For the month of October, 2008, there were 47 training entries into the documentation system (as of 12/1/08), which is an increase from the previous October and is an increase over the average baseline. Additionally, the number of incomplete entries was 0. While we have not yet reached the average of 57.9 trainings, we have surpassed both what should have been entered before the intervention and what was actually being entered before the intervention.

Training entries for mandatory and in-house trainings are now being documented. These trainings had not previously been entered into the central training documentation database.

ACT

Standardize the Improvement and Establish Future Plans

8. Standardize the Improvement or Develop New Theory
The types of training that needed to be documented and the process for doing this have been clearly defined. If future tests continue to show improvement in documentation rates, then this definition and process will be institutionalized in a policy revision.

It will take several months to have complete post-intervention data and to be able to determine if our interventions did work.
- Staff will continue to submit a report form for each training attended.
- The CQI team will continue to monitor the monthly entries for completeness and total number submitted.
- The team has begun simplifying the reporting form used to document training.
- The team is planning a follow-up staff training survey in six months time. We hope to see what staff are reporting is reflected by the central training database.

9. Establish Future Plans
The next steps for improvement include:
- Decrease time from the completion of a training report form to the entry of the data into the training database.
- Improve staff satisfaction with the report form.
- Improve the data collected so that only the data that is needed is collected.
- Link the staff training information collected with public health competencies.
- Improve the feedback to staff about their training documentation.