

2013-2014 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.

The Kanabec/Pine Community Health Services Agency encompasses two rural counties in east central Minnesota. The total population of the two counties is just over 44,000 people and covers over 1,900 square miles. Since 1991, Kanabec/Pine Community Health Services (SHS) has been governed by a joint powers agreement that delegates local health responsibilities back to each respective County Board Of Commissioners. The Minnesota Department of health contracts with the CHS Board to deliver local public health across both counties and requires the counties to meet performance measures across both jurisdictions. The Kanabec/Pine CHS has a history of assessment and community planning on behalf of Kanabec/Pine community residents. Both counties have provided similar programs to area residents and have addressed similar goals, objectives and methods to meet the community plan of action. Kanabec and Pine Counties have shared programs over the years and have worked collaboratively to deliver these programs.

2. **Project Overview**

Provide an overview of the work your agency conducted with or because of this funding, including the significant accomplishments/deliverables completed between January 2014-May 2014 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.

Kanabec/Pine Community Health Services completed an Agency Strategic Plan including all required components: Mission, Vision, Values, Strategic Priorities, measurable and time-framed goals and objectives, a S.W.O.T. analysis, key LHD support functions and capacity required for efficiency and effectiveness considered, and determined how to link strategic plan to CHIP and QI Plan

A key staff person from both Kanabec and Pine counties was identified to work on the project. The staff researched the strategic planning process and used a couple of tools to assist in their planning. These tools included the NACCHO guide as well as some tools from the MN Department of Health. A consultant from the MN Department of Health was identified and contacted. The key

staff, with the assistance of Administrative staff, identified other staff to recruit to form a Strategic Planning Team.

The consultant held a conference call with the key staff and assisted in the planning of the initial staff all retreat. The first all staff retreat was held and accomplished the development of a draft Mission Statement, Values and Vision elements. Key staff facilitated the sessions using detailed guidance from the consultant and NACCHO guide. Methods used were 'Brainstorming with Guided Questions' and 'Affinity Diagramming'.

After the first all staff retreat, the Strategic Planning Team met with the state health department consultant, to develop the Mission Statement and Vision elements further. At the conclusion of this meeting, it was determined that more descriptive work needed to be done on the Vision elements, so the Team divided into the Pine Branch and the Kanabec Branch of the Strategic Planning Team, and each worked on the development of vision elements in separate meetings to complete a draft of this portion of the plan. The product developed thus far was emailed to all staff for feedback, and this feedback was brought to the next SPT meeting for consideration.

The full SPT met for a second time with the goal of identifying strategic priorities, goals and objectives and was facilitated by the consultant. Guided brainstorming and affinity diagramming were again used to accomplish this. The two strategic priorities voted most important were developed further and then assigned to the two branches to complete at subsequent meetings.

A second all staff retreat was held. The Summary of the Strategic Plan was provided to all staff, reviewed and agreed upon. The Strategic Planning Team felt that it would be important for all staff to go through each Vision Element and answer the following questions: 1.) What does the Vision Element mean to you? 2.) What does it look like incorporated into what we do? 3.) How will you put it into action? A liberating structure format was used for the Vision Element discussion. An introduction to Quality Improvement was provided and staff completed an Organizational Quality Improvement Maturity Survey at the retreat as well.

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.

The key staff person for Kanabec County left employment of the county in early April. This meant that another staff person needed to step in and assist with completing the deliverables of the grant and facilitating the second all staff retreat.

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.

The fact that there were two key staff people, one from each county, helped to complete the work and involve both counties equally. The assistance of the consultant from the MN Department of Health was invaluable.

5. **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.

Kanabec/Pine CHS found the tools from NACCHO to be very helpful in the strategic planning process. The PHIT training was also very helpful but it occurred a little late in the grant cycle. It would have been more beneficial to be able to attend the PHIT training early on to better incorporate ideas learned.

The number of deliverables chosen may have been a bit much to accomplish in the short time frame of the grant. If we could repeat the process, we may not have chosen so many to do.

6. **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?

The funding was critical in advancing Kanabec/Pine Community Health Services accreditation readiness. Without the funds Kanabec/Pine CHS found it difficult to get the process started, the grant provided the spark. Kanabec/Pine CHS had begun the other two prerequisites for accreditation and now has the third completed moving the Agency closer to applying for accreditation.

7. 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?

Accreditation Team meetings have been planned and one of the Strategic Priorities determined in the Strategic Planning Process was to "continually improve quality". By working through the measurable goals and objectives of this strategic priority, Kanabec/Pine CHS will provide quality improvement training to staff and develop a foundation for the quality improvement process.

There are PHAB Coordinators assigned in each of the two counties and they will work together with Administration and the Quality Manager to move the Kanabec/Pine CHS through the accreditation process.