

## 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 Toledo-Lucas County Health Department is located in Toledo, Ohio. The total county population served by the department's jurisdictional area stands at approximately 440,000. The city of Toledo houses a little more than half the county's population with approximately 280,000 residents. The population served is a mix of urban and suburban residents. The health department is governed by a Board of Health and has three primary divisions: Administration, Community Services & Environmental Health, and Health Services.

#### 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.*

NACCHO's ASI grant has allowed the Toledo-Lucas County Health Department (TLCHD) to develop the agency's first Quality Improvement Plan. The QI Plan has incorporated all requirements for accreditation and has helped the department to meet PHAB measure 9.2.1A. The department convened a QI Plan Team that completed NACCHO's Self-Assessment Tool (S.A.T.) to rigorously determine the state of our agency's culture of quality improvement. This led to a thorough gap analysis of our agency's "current" vs. "desired" state and the development of transitional strategies to bring us to our desired state over time. Our QI Plan was approved by our Board of Health on May 22<sup>nd</sup>, and our agency is now pursuing the formation of a QI Council as outlined in our plan to guide all quality improvement efforts the agency undertakes.

Additionally our agency provided training in the fundamentals of quality improvement to all staff. Four trainings were held in April and facilitated by Joanne Pearsol from the Center for Public Health Practice at The Ohio State University. Over 87% of all staff attended the in-person trainings with the remaining 13% of staff completing the series of quality improvement modules the training were designed from on their own. Staff were encouraged to submit QI project ideas during the trainings and were provided with additional tools to utilize during QI project completion.

#### 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 biggest challenge faced throughout this grant was staff buy-in. A small percentage of staff felt QI had little relation to their daily activities and many others were uncertain if QI could benefit their daily work responsibilities.

#### 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.*

Using a contractor to hold in-person and agency-wide staff trainings greatly reduced staff-resistance to quality improvement initiatives. The three latter sessions were modified according to feedback from those in the first training and many staff in the latter sessions expressed surprise at the depth of information and how well the materials were presented.

Frequent communication with staff on the progress of our QI journey has also greatly increased staff engagement and decreased overall resistance.

#### 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.*

One of our lessons learned throughout the grant period is to have patience and to allocate sufficient time to the QI development process. Due to the nature of stringent grant deadlines, several deliverables were condensed into a shorter than ideal time-frame. While the quality of these deliverables is very high, the staff participating in the development of the QI Plan, for instance, have indicated that more meetings of a shorter duration would have been ideal as there would have been time for more detailed discussion of QI objectives and plan design.

#### 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 provided by this grant helped move a process that would have been glacially slow without NACCHO's assistance to a 5 month period in which all staff have now been trained in the fundamentals of Quality Improvement and the agency has a Board of Health approved Quality Improvement Plan to guide all quality improvement efforts into the future.

## 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?*

Within the next 12-24 months our agency plans to submit its Statement of Intent to the PHAB board.

The work completed as part of the ASI grant will be sustained in several ways: our agency built sustainability into our training program from the start of the grant. All new hires will complete the online version of our Quality Improvement training within 90 days of their hire-date and be exposed to QI as they are brought into the organization.

Additionally our Quality Improvement Council will guide all quality improvement projects and initiatives and review the QI Plan annually to assess if we are meeting the goals laid out in the plan. The QI Council will aid in the selection of QI projects and guide team formation to see those projects to completion.