Performance Management Model

**National**
- HP 2020
- PHAB
- Foundational Public Health Services
- Other national standards

**State**
- SHA
- SHIP
- Strategic Plan
- Pillars

**Office / Bureau**
- Priorities
- SHIP Action Plans
- Performance Measures

**Employee**
- Individual contribution toward creating culture of quality

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**Quality Improvement**

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**Culture of Quality**

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Source: Public Health Foundation
ODH & PERFORMANCE MANAGEMENT

PERFORMANCE MANAGEMENT IN ACTION – WHAT IS AND HOW DO WE DO IT?
PERFORMANCE MANAGEMENT SYSTEM

WHAT IS IT?

An effective performance management system gives you useful, credible information for assessing:

- Agency’s capacity to undertake work
- Quality of effort
- Outcome of effort
PERFORMANCE MANAGEMENT SYSTEM

WHY WE MEASURE?

- Transparency
- Prioritization
- Decision-making
- Accountability
- Alignment
Attributes of a Performance Management System

PM is the creation of an infrastructure for systemic and continuous improvement.

**Performance Standards**
- Identify relevant standards
- Select indicators
- Set goals and targets
- Communicate expectations

**Performance Measurement**
- Refine indicators and define measures
- Develop data systems
- Collect data

**Quality Improvement Process**
- Use data for decisions to improve policies, programs and outcomes
- Manage changes
- Create a learning organization

**Reporting of Progress**
- Analyze data
- Feed data back to managers, staff, policy makers, constituents
- Develop a regular reporting cycle
Perfomance Management System

Goals

- Designed to allow agencies to monitor progress toward goals throughout the year and make changes when necessary.

- Focuses on actionable information
  - Statewide plans are more outcome focused
  - Measures and objectives in a performance management system are often more output/process focused

- Overall goals need to be meaningful to each program/area and impact population health outcomes and demonstrate agency value
WHAT IS THE DIFFERENCE?

Performance Measurement vs. Performance Management

- The regular collection and reporting of data to track work produced and results achieved
- What you do with the information you’ve developed from measuring performance
Assess the achievement of standards

Those selected should demonstrate how the program contributes to impacting population health

Don’t rely on just your funding stream… it doesn’t tell the story of your programs overall contribution impacting health outcomes

Should be those that we have control over and can measure more frequently than annually.
You should view your goals, objectives, and measures as your operating plan.
NEXT STEPS

- Meet with identified Office/Bureaus to identify performance measures
  - Training and guidance on performance measures provided
  - Tools to help identify 2 – 3 Goals and 2 -3 measures for each
- Performance Management training for all ODH
- Performance Measures for remaining Office/Bureaus
- Monitoring of performance measures
- Sharing of results using scorecards
SCORECARD EXAMPLE
### INITIAL AREAS OF FOCUS

<table>
<thead>
<tr>
<th>Program</th>
<th>Focus Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>BMCFH</td>
<td>Infant Mortality, Home Visiting, Tobacco</td>
</tr>
<tr>
<td>OHIW</td>
<td>Injury – Drug Overdose, Chronic Disease</td>
</tr>
<tr>
<td>BEHRP</td>
<td>Lead, One other program area TBD</td>
</tr>
</tbody>
</table>
NEXT STEPS

- Identify staff that will participate in the identification of performance measures for your areas
- Meetings will be set-up with these teams in the next two weeks
- Recurring meetings will occur until measures are identified
- All areas in this pilot will have performance measures identified by April 13th
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PERFORMANCE MANAGEMENT SYSTEM

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01  Transparency
02  Prioritization
03  Decision-making
04  Accountability
05  Alignment
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## Scorecard Example

### Smoke-free Policies

<table>
<thead>
<tr>
<th>Policy</th>
<th>Description</th>
<th>Time Period</th>
<th>Actual Value</th>
<th>Current Trend</th>
<th>Baseline % Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>P</td>
<td>Smoke-free policies for cessation and family health: including full smoking bans in work sites, mass reach media campaigns, expanded Medicaid tobacco-cessation coverage, tobacco taxes. Also includes counseling by healthcare providers, quitlines, and nicotine replacement therapy.</td>
<td>2012</td>
<td>29%</td>
<td>-9%</td>
<td></td>
</tr>
<tr>
<td>PM</td>
<td>Reduced youth exposure to secondhand smoke</td>
<td>2012</td>
<td>33%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>PM</td>
<td>Percent of youth that report exposure to secondhand smoke while at home within the past 7 days</td>
<td>2015</td>
<td>25.1%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Initial Areas of Focus</td>
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<tr>
<td>---------------------------------------------</td>
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<tr>
<td><strong>BMCFH</strong></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>One other program area TBD</td>
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LEARNING OBJECTIVES

- Developing Performance Measures
  - Types of Performance measures
  - Identification of a ‘good’ measure

- Monitoring Performance Measures
State-wide or Agency goals are often outcome focused
- Strategic Plan, SHIP, or other plans
  - SHIP: Prevent and reduce the burden of chronic disease for all Ohioans

Performance Management System focuses on actionable information
- Office/Bureau objectives more output focused
  - Increase the number of complete street workshops conducted by June 30, 2018
An issue-oriented statement of your desired future direction or desired end state.

Guide your effort

Articulate overall expectations and intentions

Can be long-term or short-term

Have to be measurable

Goals that are not measurable are just a slogan
GOALS

Provided the current SHIP, Strategic Plan, or other priorities in your area what are meaningful goals (2-3) that will impact population health outcomes or support the overall agency direction for your area?

### STRATEGIC PLAN
- One Mission, One Voice
- System Alignment
- Data-Driven Performance
- Workforce Development

### SHIP
- Mental Health & Addiction
  - Depression, Suicide, Drug Dependence & Overdose
- Chronic Disease
  - Heart Disease, Diabetes, Childhood Asthma
- Maternal & Infant Health
  - Preterm Birth, Low Birth Weight, Infant Mortality
GOAL EXAMPLES

Remember goals in a performance management system focus on actionable information – program and organizational goals often become more output or process focused than statewide or community goals which are outcome focused.

Staff working on supporting the statewide goal of reducing the number of smokers by 20,000 may have program goals like these:

- Hold 12 smoking clinics by the end of calendar year.
- Increase the smoking cessation hotline caller rate.

*Goals should still impact population health outcomes and demonstrate agency value.*
PERFORMANCE MEASURES WORKSHEET #1

DIVISION: _____________________________  BUREAU: _____________________________

PROGRAM: _____________________________

Programs should use a separate worksheet for each Goal.

Step 1: What is a goal your area would like to accomplish to impact health outcomes, or the level of customer service you provide?

GOAL:

BRAINSTORMING GOALS
OBJECTIVES

- Steps to get to your goal
- A measurable target that describes specific end results expected within a time period
- Must be S.M.A.R.T (specific, measurable, achievable, realistic, and time bound) and align to support the goal
- Need to identify a target and establish a baseline
- Targets should be based on a benchmark
Decrease the percent of Ohio youth who are overweight or obese from 27% to 25% by 2016.
Step 2: What is an objective that you would like/need to accomplish to help you meet your overall goals?

Objective 1:
PERFORMANCE MEASURES

- Measures can be any type as long as improvement contributes to improving outcomes.

- Choose measures the agency has control over.

- Choose measures where data is available.

- Measures must be available quarterly or at least bi-annually. Do NOT select measures that are only available annually.
<table>
<thead>
<tr>
<th>Attribute</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Meaningful</strong></td>
<td><strong>Understandable</strong></td>
</tr>
<tr>
<td></td>
<td>• Clear</td>
</tr>
<tr>
<td></td>
<td>• Context</td>
</tr>
<tr>
<td></td>
<td>• Concrete</td>
</tr>
<tr>
<td></td>
<td>• Lack of ambiguity in direction</td>
</tr>
<tr>
<td><strong>Relevant</strong></td>
<td><strong>Relates to objectives</strong></td>
</tr>
<tr>
<td></td>
<td>• Significant and use for users</td>
</tr>
<tr>
<td></td>
<td>• Attributable to activities</td>
</tr>
<tr>
<td><strong>Comparable</strong></td>
<td><strong>Allows comparison over time or with other organizations, activities or standards</strong></td>
</tr>
<tr>
<td><strong>Reliable</strong></td>
<td>• Accurately represents what is being measured</td>
</tr>
<tr>
<td></td>
<td>• Verifiable data</td>
</tr>
<tr>
<td></td>
<td>• Data and analysis are free from error</td>
</tr>
<tr>
<td></td>
<td>• Not susceptible to manipulation</td>
</tr>
<tr>
<td></td>
<td>• Balances other measures</td>
</tr>
<tr>
<td><strong>Practical</strong></td>
<td>• Feasible financially</td>
</tr>
<tr>
<td></td>
<td>• Feasible to get timely data</td>
</tr>
</tbody>
</table>
WHAT MAKES A GOOD PERFORMANCE MEASURE?

Good measures can let you know:
- How well you are doing
- If you are meeting your goals
- If your processes are stable
- Customer satisfaction, and
- If improvements are necessary
WHAT MAKES A POOR PERFORMANCE MEASURE?

- Measures that are events, milestones, or infrequently calculated
- Measures that monitor the ‘means’ not the ‘end’
- Measures that are actually data not information
PERFORMANCE MEASURE

Establish Targets or Benchmarks

- Use a reliable method to identify and establish thresholds for performance
  - Industry benchmarks – Healthy People 2020, County Health Rankings
  - Regulator targets
  - Past Performance
SELECTING PERFORMANCE MEASURE

- Keep the number of measures at a minimum
- Try to avoid directional terms in the performance measures
- Develop measures that tell us if we are making progress toward stated goals and objectives
- Match data and information to existing data sources
**Step 3:** What are 2-3 measures to demonstrate whether or not you are meeting your desired objective? Something that can be measured monthly, quarterly, or bi-annually.

<table>
<thead>
<tr>
<th>Measure 1:</th>
</tr>
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<tbody>
<tr>
<td>Measure 2:</td>
</tr>
<tr>
<td>Measure 3:</td>
</tr>
</tbody>
</table>
REPORTING

- Programs will be responsible for reporting in Clear Impact
- Training will be provided once all Performance Measures are identified
MONITORING / QUALITY IMPROVEMENT

- Monitoring data for potential QI project
- Data not meeting target/benchmarks
NEXT STEPS

- Identify 2 – 3 Goals for your area each with 2 – 3 objectives and supporting Performance Measures by April 13th.
- Set additional follow-up meetings with the team to work through the remainder of the goals, objectives and performance measures.
- Identify frequency of performance measures
- Identify the responsible party for reporting
- Begin reporting after July 1
- Request feedback on this process in June
- Other programs will begin this process in June
**Step 1:** What is a goal your area would like to accomplish to impact health outcomes, or the level of customer service you provide?

<table>
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**YOUR TURN**