Keeping Us Better Quick Teams Report

Slightly or Not Demonstrated Measures
Meeting Purpose: Determine next steps for the six slightly or not demonstrated measures

Using the Project Selection and Benefits Matrix
After 90 minutes we will:

1. Understand each measures’ level of complexity
2. Understand what we need to do to make progress on each measure
3. Consider time frame and staff capacity for current and future division planning.
3.1.2 Quick Team Members

- Martha Mallon
- Christy Vogt
- Susan Uttech
3.1.2 Health promotion strategies to mitigate preventable health conditions

Site Visit Report

An opportunity exists for DPH to:

✓ Engage directly with the targeted audience in development and implementation of health promotion strategies.

✓ Utilize these same tools and resources to conduct or increase their participation in this engagement.
3.1.2 Work Plan Objectives

1. Report on best practices for engaging directly with our target audiences while developing health promotion strategies.
2. Update State Program Plan communications guide to include strategies, tools, and special considerations that address best practices.
3. Evaluate use of the updated State Program Plan communications guide.
Project Selection and Benefits Matrix

Annual Report Section 1: Slightly and/or Not Demonstrated Measures

- **3-5+ staff**
  - Short time line
- **3-5+ staff**
  - Long time line
- **1-2 staff**
  - Short time line
  - Low hanging fruit
- **1-2 staff**
  - Long time line

3.1.2
6.3.5 Quick Team Members

- Paul Schmidt
- Shelley Bruce
- Mark Werner
Site Visit Report

An opportunity exists for DPH to:

- Strengthen protocols about **notifying the public** of enforcement activities.
- Examine its relationships with those other state agencies.
- Formalize relationships and information sharing protocols about enforcement, follow-up activities, and trends or patterns.
1. Assess coordination and collaboration between DPH, DATCP, LPH on food borne outbreak response and public notification of enforcement activities

2. Compare existing processes used for food borne outbreaks against core competencies and evidence-based requirements.

3. Identify any process changes needed to meet requirements.

4. Implement any approved changes.
Project Selection and Benefits Matrix

Annual Report Section 1: Slightly and/or Not Demonstrated Measures

Staff involvement

3-5+ staff
Short time line

3-5+ staff
Long time line

1-2 staff
Short time line

1-2 staff
Long time line

Low hanging fruit

Time line

Short

Long

6.3.5
8.2.5 Quick Team Members

- Marni Martinson
- Donna Moore
- Jeff Phillips
- Susan Uttech
Site Visit Report

An opportunity exists for DPH to:

✓ Share information/knowledge with local/tribal health on best or promising practices in building workforce capacity such as providing information on how to assess training needs, components of a workforce planning processes or sharing successful workforce policies and tools for recruitment and management.

8.2.5 Consultation and/or TA provided to Tribal and local health departments regarding evidence-based and/or promising practices in the development of workforce capacity, training, and continuing education.
1. Assess and establish the baseline of evidence-based training and technical assistance provided by DPH staff to T/LHDs.

2. Assess current training and technical assistance activities against public health core competencies.

3. Establish a policy to formalize the process for delivering and assessing training or technical assistance to T/LHDs.

4. Implement the policy.
9.2.2 Quick Team Members

- Kathleen Caron
- Christa Cupp
- Ela (Elizabeth) Rybczyk
- Susan Uttech
Site Visit Report

An opportunity exists for DPH to:

- Improve how projects are selected
- Improve use of root cause analysis tools and solution development
- Conduct continued evaluation of results and expansion of organization-wide projects. Current practices promote quality improvement projects on a program level but opportunity for additional organization-wide projects is less evident.

- Expand use of data to drive decision-making process
1. Improve use of root cause analysis tools
2. Create a systematic process for selecting and prioritizing QI projects
3. PM Council and QI Council to coordinate the identification and prioritization of division-wide QI projects.
10.2.4 Quick Team Members

- Martha Mallon
- Mary Pesik
- Tim Ringhand
- Susan Uttech
An opportunity exists for DPH to:

✓ **Document** providing technical assistance to local health departments and partners on

- employing research *and*
- modifying practices to best serve the population

10.2.4 Consultation or TA provided to Tribal and local health departments and other public health system partners in applying relevant research results, evidence-based and/or promising practices
10.2.4 Work Plan Objectives

1. Develop tracking tool to document use of new research or evidenced-based practices to modify practices.
2. Revise the Human Subject Protection Charter to include process to review and recommend use of research results, evaluations and evidence-based practices with appropriate audiences.
3. Identify and build competencies necessary for the provision of technical assistance, training, and evaluation into work force development plan.
Project Selection and Benefits Matrix

Annual Report Section 1: Slightly and/or Not Demonstrated Measures

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<thead>
<tr>
<th>Staff involvement</th>
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<tbody>
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10.2.4
12.3.2 Quick Team Members

- Donna Moore
- Jeanne Ayers
- Chuck Warzecha
- Susan Uttech
An opportunity exists for DPH to:

- Specifically identify issues, and patterns and positions taken on critical issues.
- Specifically identify where increased communication is desirable.
12.3.2 Work Plan Objectives

1. Identify the governing entity patterns for communication between division and department

2. Evaluate how the established standing meeting structure works for DPH
Standing meetings
- Strategic Conversations
- Status Updates
- Executive Management
- Meetings with Deputy Secretary
12.3.2
Discussion

What do you think?
Next Steps
Keep calm and have a nice summer