

## Process Improvement 2

### PI 2: Proportion of health department programs using a proven Quality Improvement (QI) model

**Why measure this?**

This indicator will inform health department leaders about how many of their programs are using proven quality improvement models to better their efforts which can lead to improved provision of public health services.

**Measurement specifications:** Number of health department programs utilizing a proven QI model divided by the total number of health department programs.

#### PHAB Alignment

**9.1 A:** Use a performance management system to monitor achievement of organizational objectives

**9.2 A:** Develop and implement quality improvement processes integrated into organizational practice, programs, processes, and interventions

This indicator contributes to the PHAB measures by providing health department leadership with information about how many of their programs are using proven quality improvement models to better their efforts which can lead to improved provision of public health services.

**Reporting Period:** Annually

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#### Operational Definitions

**Health department programs:** In the context of this indicator, health department programs may include a focus on: (1) prevention and health promotion (e.g., tobacco, HIV, nutrition, injury, physical activity, sexually transmitted disease counseling, diabetes, hypertension, violence, unintended pregnancy, childhood and adult immunizations, environmental epidemiology, newborn screening, and emergency preparedness); (2) clinical and diagnostic services (e.g., access to health care, screening for disease conditions, treatment for diseases, and laboratory services); (3) surveillance (epidemiology); and (4) operational and administrative programs.

**Using a proven QI model:** Quality improvement (QI) efforts consist of systematic and continuous actions that involve prospective and retrospective reviews to measure where programs currently are and how to make them better. QI efforts employ various models, or proven frameworks, to identify areas for improvement and guidance on how to approach making improvements to increase their performance. Some QI models are implemented to monitor the results of pre-identified measures. In the context of this indicator, evidence of “using” a proven QI model is demonstrated through the use of QI tools (e.g., A3 or a Story Board).

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**Annually:** This indicator should be reported during a 12-month cycle (i.e., calendar year, fiscal year, etc.).

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**Possible data sources:** Health department program quality improvement plans.