Meeker-McLeod-Sibley Community Health Services
Performance Management Policy and Procedure

Purpose
This policy establishes the framework for Meeker-McLeod-Sibley Community Health Services (MMS CHS) Performance Management System to guide all planning and performance management work. The goal of the Performance Management System is to use continuous improvement to carry out the mission, vision and values of MMS CHS through consistent assessment, planning, implementation and evaluation at all levels of MMS CHS.

Rationale
The use of performance management facilitates the achievement of improved community health outcomes and also builds accountability and transparency into MMS CHS operations. MMS CHS will use population indicators and performance measures to drive improvements. Benefits of performance management include:
- Organizational alignment and the ability to identify, examine and address issues with CHS-wide implications;
- Increased ability to use data to communicate successes and tell our story;
- Specific improvement projects resulting in increased efficiencies;
- Increased customer satisfaction.
Consistent with organizational best practices, MMS CHS engages in performance management at all levels: community (population based), agency, and program level.

Policy
Performance management at MMS CHS is the practice of using data for decision-making by establishing results and standards; measuring, monitoring and communicating progress toward those results; and engaging in quality improvement activities when desired progress is not being made. Performance management includes the following components:

Results/Objectives – Where do we want to be?
Measurement – How will we know?
Monitoring and Communication Progress – How well are we doing?
Quality improvement – How will we improve?
Performance Excellence Team Expectations
The PET consists of the Public Health Directors from each of the counties including the MMS CHS Director and staff from each of the counties. Staff were identified by each of the public health directors based on specific criteria for the nature of this work and staff interest in quality improvement and data monitoring. PET will have scheduled meeting dates on a regular basis (minimum of quarterly). PET members will make every effort to come to consensus on issues requiring a decision. However, if consensus cannot be reached, the team will make decisions by a majority vote. Final decision regarding any processes voted on will be made by the CHS Management Team which includes each of the counties Director/Supervisor and the MMS CHS Director. PET will provide overall oversight and accountability on all performance measures; community, agency, and program level.

- At a minimum PET review community level performance measures at least biannually.
- PET will complete annual agency performance management assessment
- At a minimum, progress on key agency performance measures will be reviewed biannually and opportunities for improvement identified.
- PET members will review annual performance measures submitted by program areas.
- PET will provide accountability for monitoring and reporting of performance measures by program area, by inviting teams to attend PET, or attendance at team meeting, emails, or other forms of communication
- PET is tasked with oversight of the MMS CHS Quality Improvement plan. At least annually, PET will provide a report of the QI progress to the MMS Community Health Board.
- PET is tasked with development, implementation and monitoring of the MMS CHS strategic plan
- PET members will be identified as local technical assistance (TA) advisors at the individual county level.
- Appropriate training will be provided in order for PET member to be comfortable as TA advisors
- MMS CHS key agency performance measures and the results of the biannual review will be communicated to employees.
- Identified opportunities for improvement will be referred will be prioritized and acted upon as outlined in MMS CHS Quality Improvement Plan.
- PET members will participate in the annual review and revision this policy.

Program Performance
- Each team will be responsible for identifying at least one performance measure and submit to PET on an annual basis.
- Team members will be expected to monitor and report to PET at least biannually.
- When selecting performance measures, customer satisfaction should be strongly considered
- Team members are expected to identify and submit opportunities for improvement.
- Appropriate training will be provided at least annually.

Staff Expectations
- It is expected that staff at all levels are engaged in the development and monitoring of performance measures.

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Review/Revision dates:
• Staff identifying possible opportunities for improvement will submit information to PET.

Definitions

Result: A condition of well-being for children, adults, families or communities.

Indicator: A measure which helps quantify the achievement of a result.

Performance Measure: A measure of how well a program, agency or service system is working. Performance measures can be categorized into three main categories:
  • How much did we do?
  • How well did we do it?
  • Is anyone (the customer) better off?

Quality Improvement: The use of a deliberate and defined improvement process & the continuous and ongoing effort to achieve measurable improvements. MDH has adopted the following principles of continuous quality improvement:
  • Intentionally and continually looking for ways to do our work better and adapt to change
  • Meeting the needs of our customers
  • Empowering employees to identify and make improvements
  • Using data and information for decision-making

Public Health Accreditation Board (PHAB): PHAB is a non-profit entity which was formed in 2007 to oversee national public health department accreditation.

Procedure

1. The MMS CHS Directors and Public Health Directors will establish the process and set expectations for implementation of the performance management system. Including performance measures development, data collection, monitoring, and identification of opportunities for improvement.
2. The Performance Excellence Team oversees implementation, revisions, monitoring, evaluation and reporting of the performance management system.
3. All key performance activities will be documented within appropriate action plans and meeting minutes and reported at least bi-annually to the MMS Community Health Board.

REVIEWED and APPROVED:

[Signature]

MMS CHB Chair

7-13-17

Date

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Review/Revision dates: