

Integrated Management Report

Cerro Gordo County Department of Public Health

This report is the second quarterly report covering July - September 2016

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Cerro Gordo County Department of Public Health

Introduction

The Cerro Gordo County Department of Public Health pushes their performance to positively impact the health of Cerro Gordo County residents. Since April of 2016, the Department has had an integrated management plan and objectives to be tracked. Measures were selected by all staff during division meetings as those that represent the Department well. Monitoring of and improving on the integrated management objectives will help the Department improve overall functioning, demonstrate accountability and achieve strategic goals. This report is split into divisions with goals, annual measures and quarterly data for each.

Division 1: Acute Infectious Disease, Epidemiology & Preparedness

There are two goals that drive performance measures in this division:

1. Decrease prevalence of vaccine preventable acute diseases
2. Prevent the spread of communicable disease

Three measures feed into the goals. The first measure is the percent of IRIS records that are inaccurate for Cerro Gordo County Department of Public Health 11-15 year olds. IRIS is a database used across the state of Iowa to track vaccinations. Any provider, from medical staff to

Cerro Gordo County Guiding Statements

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pharmacies and public health, has access to and many use IRIS. When IRIS users enter data, it often is inaccurate. This measure ensures that the agency records, those attributed to the Cerro Gordo county Department of Public Health, are accurate. The goal is to not exceed a 25% inaccuracy rate as measured quarterly.

Quarter one data shows an average of 22%.

Quarter two data shows an average of 6.8%

The next measure is the percent of schools who participate in providing weekly reports regarding the type of illness keeping the child out of school (fourteen schools are included in this measure). The goal for success is that the Department will be successful in obtaining information from 50% or 7 of the 14 schools. This data was not collected in the first quarter and it was intended to begin in August when school resumed; however no data was captured in quarter two either.

Quarter one data - none gathered

Quarter two data - none gathered

The last measure is the number of new services added to the repertoire of billable services at the Health Department for in-or out-of-county residents. The goal is to expand services by one service and maintenance of all current services provided. There has been no progress first nor second quarter.

Division 2: Chronic Disease Prevention & Health Promotion

Two goals lead the measures:

1. Improve community health
2. Deliver high quality, consistent and efficient chronic disease prevention & health promotion services

The three measures are described as follows. First is a measure that addresses the County employee wellness program. The measure is the percent of STRIDE participants who have two or fewer risk factors. STRIDE, a voluntary wellness program, strives to make employees healthier. This measure focuses on elevating staff health to reach their goal of 80% of stride participants will have 2 or fewer risk factors. Those factors are elevated LDL cholesterol, triglycerides, blood sugar or blood pressure, low HDL cholesterol, tobacco use and unhealthy weight or body mass.

Quarter one results show 69% of participants reached that metric.

Quarter two results show that 88% of participants reached that metric

The second measure is the percent of diabetes prevention program participants who complete the full program. Like other locations across the state and nation, Cerro Gordo County is seeing a drastic increase in type two diabetes. This program is an evidence-based program proven to decrease risk of diabetes development. The goal is that 75% of DPP participants will complete the full program which consists of 6 months of weekly core classes and 6 months of monthly classes.

Quarter one data indicates an 80.4% completion rate.

Quarter two data - none gathered due to the timeframe of the class & the quarter.

The last measure is the number of chronic disease prevention and Health promotion staff who are cross-trained. The goal is for 100% of staff to have at least one back-up for each position.

Quarter one data indicates 0 of 5 staff are cross trained.

Quarter two data indicates that 0 of 5 staff are cross trained.

Division 3: Environmental Health

Environmental health measures focused on two goals:

1. Ensure safe food is served in Cerro Gordo County
2. Increase access for the public to visualize environmental health data

This division also has three annual measures. The first is the percent of overdue food inspections. Per contractual agreement, food service inspections must be completed on a certain schedule. Overdue is defined as past due by 30 days. The goal is to not exceed 10% of total inspections due as measured quarterly.

Quarter one data indicates an average of 1.3%.

Quarter two data indicates an average of 0%.

The second measure is that the food regulatory program will achieve and maintain $\geq 80\%$ of the Voluntary National Retail Food Standards, a national initiative that defines what constitutes a highly effective and responsive program for food service regulation.

Quarter one data indicates that the Department has met 44% of the standards.

Quarter two data indicates that the Department has met 56% of the standards.

The last measure is the number of layers of data available for GIS mapping visualization and public access. The goal is to increase layers by at least 2.

Quarter one data shows that one layer was added.

Quarter two data indicates that zero layers were added.

Division 4: Family & Community Health

Two similar goals guide these measures; they are to:

1. Deliver high quality, consistent and efficient Home Care Aide services
2. Deliver high quality, consistent and efficient Public Health Nursing services

Five measures were selected to follow; many of the measurements are to ensure that the Centers for Medicaid and Medicare Services Standards are met. The first measure is the percent of client charts will be chronologically charted and complete. The goal is to reach 100%.

Quarter one data - 100%

Quarter two data - 100%

The second measure is the percent of home care aides who maintain at least 12 continuing education units annually. The goal is for 100% to achieve 12 at a minimum.

Quarter one data indicates that 100% of staff has attended the monthly training requirements.

Quarter two data indicates that 100% of staff has attended the monthly training requirements

Third is a measure for the nurses. It is the percent of Face-to-Face documentation forms will be completed and the goal is to hit 100%.

Quarter one average - 100%

Quarter two average - 98%

The fourth measure is the percent of nursing visits documented in audited charts will be completed within two business days (except admissions). The goal is to have 100% complete.

Quarter one data indicates that 94% of audited charges were completed within two business days.

Quarter two data indicates that 98% of audited charges were completed within two business days

The final measure is the number of visits per nurse per day. The goal is that 100% of nurses will have an average of 5-6 daily visits.

Quarter one data shows that the average number of visits is 5.4 per day.

Quarter two data shows that the average number of visits is 5.45 per day.

Division 5: Finance & Administration

Two goals lead this division, they are to:

1. Assure information technology conditions for staff to perform job duties
2. Maintain financial stability for the Department

Two measures are included. The first is the % of time computer systems will be available based on a 24-7 module. The goal is to maintain that at 99% or higher.

Quarter one data indicates that the quarterly average was at 99.97%.

Quarter two data indicates that the quarterly average was at 99.74%

The second measure is the percent of past-due accounts and/or billing and the goal is that it does not exceed 10%.

Quarter one data shows that the average is 6.1%.

Quarter two data shows that the average is 9.97%.

Division 6: Marketing & Public Information

One goal drives performance:

1. Improve community health through provision of information and education.

There are four measures in this division. The first is the percent of survey respondents who recognize our logo; the annual goal is to stay at 60% or higher.

Quarter one data indicates an average of 50.64%.

Quarter two - no data gathered

The second measure is the number of media mentions and interviews. The goal is to stay at 30 or higher quarterly.

Quarter one data shows that total mentions for the quarter equal 38.

Quarter two data shows that total mentions for the quarter equal 52.

The third measure is the number of website page views and the goal is to stay at 1,700 or higher per month.

The quarter one average is about 1,426.

The quarter two average is about 1,539.

The final measure is for the number of Facebook likes and Twitter followers. The goals are that Facebook likes will remain at 1,700 or higher and Twitter followers will be maintained at 415 or higher.

Quarter one data shows that Facebook likes averaged 1,816 and Twitter followers averaged 619.

Quarter two data shows that Facebook likes averaged 1,921 and Twitter followers averaged 652.

Division 7: Organizational Development & Research

Two goals drive performance:

1. Improve community health through provision of innovative, sustainable programs
2. Build a culture of quality improvement

There are four measures in this division. The first is the % of health improvement plan outcome measures reported on time in reports. The goal is that delinquent reporting not exceed 15%.

Quarter one- there is no data available for the first quarter as the health improvement plan was adopted in the spring.

Quarter two - no data gathered

The second measure is the % change in grant funding received for existing programming. The goal is that grant funding will not exceed a 20% deficit in comparison to last fiscal year's associated quarter.

Quarter one data indicates a 12% deficit.

Quarter two data indicated a 129% increase.

The third measure is the % of grants that are on track financially and with outcomes. The goal is that 60% or more of the grants will meet financial and outcome benchmarks.

There is no data available in the first quarter.

Second quarter data indicated 75%.

The fourth measure is the percent of service sections completing a QI project annually; the goal is that 100% of service sections will complete a quality improvement project within the fiscal year.

Quarter one data shows 50% of service sections completed a project.

Quarter two data shows that 83% have completed a project.

This information in narrative above and in table format in Appendix A is analyzed quarterly by the Integrated Management Council to determine opportunities for improvement. During the second quarter, several objectives that have no associated data were examined to determine if these would be good measures to continue to collect data on. Measures that are underperforming will be examined closely by team members and will have quality improvement tools utilized to improve them.

Cerro Gordo County Department of Public Health Performance Management Tracking & Dashboard

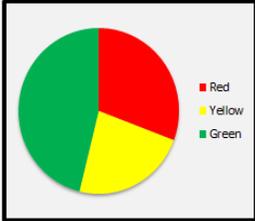


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Health Department Divisions	Programs/Topic Areas	Performance Measures On:			Cerro Gordo County Department of Public Health Current Status
		Red	Yellow	Green	
Acute Infectious Disease, Epidemiology & Preparedness	Decrease prevalence of vaccine preventable acute diseases			1	<p>Current Quarter Status</p> <p>Key: Red = behind; Yellow = Borderline; Green: On track</p>
	Prevent the spread of communicable disease	1			
Chronic Disease Prevention & Health Promotion	Improve community health		1		
	Deliver high quality, consistent & efficient CDP&HP services	1			
Environmental Health	Ensure safe food is served in Cerro Gordo County		1		
	Increase access for the public to visualize EH data			1	
Family & Community Health	Deliver high quality consistent & efficient home care aide services			1	
	Deliver high quality, consistent & efficient public health nursing		1		
Finance & Administration	Assure IT conditions for staff to perform job duties			1	
	To maintain financial sustainability for the health			1	
Marketing & Public Information	Improve community health through provision of information		1		
Organizational Development & Research	Improve community health through the provision of innovative, sustainable programs	1			
	Build a culture of quality improvement		1		
Totals		3	5	5	

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	Increase access for the public to visualize EH data			1	
Family & Community Health	Deliver high quality consistent & efficient home care aide services			1	
	Deliver high quality, consistent & efficient public health nursing	1			
Finance & Administration	Assure IT conditions for staff to perform job duties			1	
	To maintain financial sustainability for the health department			1	
Marketing & Public Information	Improve community health through provision of information & education			1	
Organizational Development & Research	Improve community health through the provision of innovative, sustainable programs	1			
	Build a culture of quality improvement		1		
Totals		4	3	6	