Assessing Your Performance Management System at the Program Level

Dan Ward and John W. Moran

2017

Assessing Your Performance Management System
at the Program Level[1]

Dan Ward[2] and John W. Moran[3]

Introduction

Assessing performance management at the program level is an innovative approach to tracking the organization-wide implementation of a performance management system. Adapted from the Public Health Performance Management System Framework[4] (shown in Figure 1), the goal of this approach is to capture visually the uptake of a performance management system and alignment of program strategic goals throughout an organization.
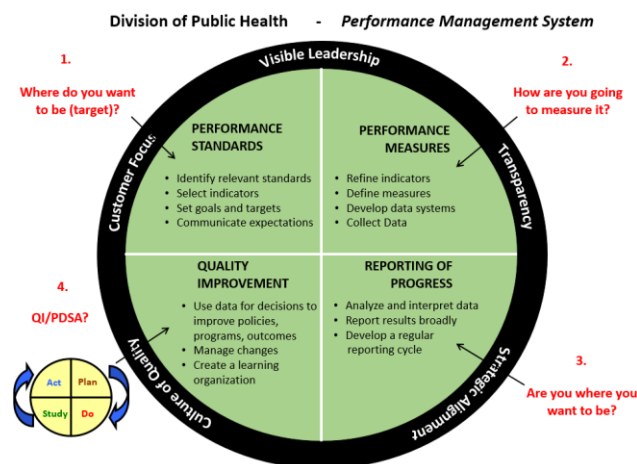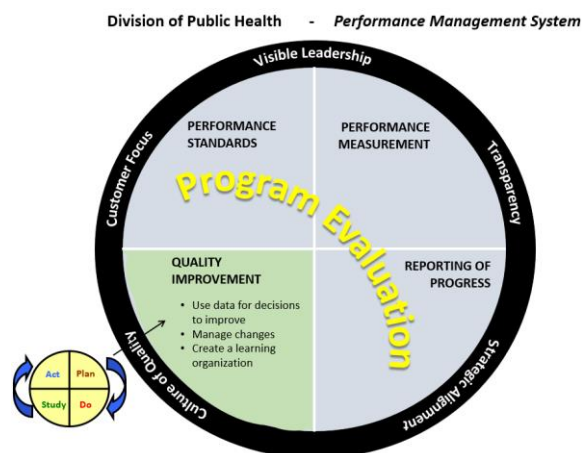

Figure 1

Figure 2

A key driver for this approach is to get program level personnel involved in understanding how the performance management system functions, focusing on targets, measures, and performance, and how this ties in with quality improvement (QI), as well as tracking how widespread the usage is of a performance management system. Together, the first three quadrants of the Public Health Performance

Management System Framework focus on program evaluation, as highlighted in Figure 2; that evaluation produces data to determine the focus for QI efforts. Thus, standards, measures, and regular reporting of progress can be used as a guide for decision makers.

While health departments often develop logic models for their grants or programs, staff may miss opportunities to align these logic models with their organization's performance management system. Measures and targets created for a logic model are often similar to those developed for a performance management system, as illustrated in Figure 3. Because of this, many programs already have some parts of a performance management system in place, though that may not be the term used.

Example Logic Model[5]

Program Goal: To improve the oral health of low-income children who receive primary care in a community health center

Resources	Activities	Outputs	Outcomes
Dental Clinic Coordinator	**Training** •Develop curriculum •Two one-hour didactic trainings to medical providers in oral health assessment •One-on-one training to medical providers on oral health	**Training** # of two-hour trainings held # of one-on-one trainings held # of medical providers trained	Medical providers demonstrate accurate oral health assessment, education and prevention activities
Community Health Director			
Staff dentist			More children receive high-quality oral health assessment, education and prevention activities during well-child visits
Staff pediatrician			
Medical providers			
Money for supplies	**Outreach** •Order dental supplies for packets •Make up packets •Distribute to parents at end of each visit	**Outreach** # of parents/children receiving packets	Parents/children are more knowledgeable about oral health and caring for children's teeth
			Reduced incidence of caries in children at the community health center

How are you going to measure it?
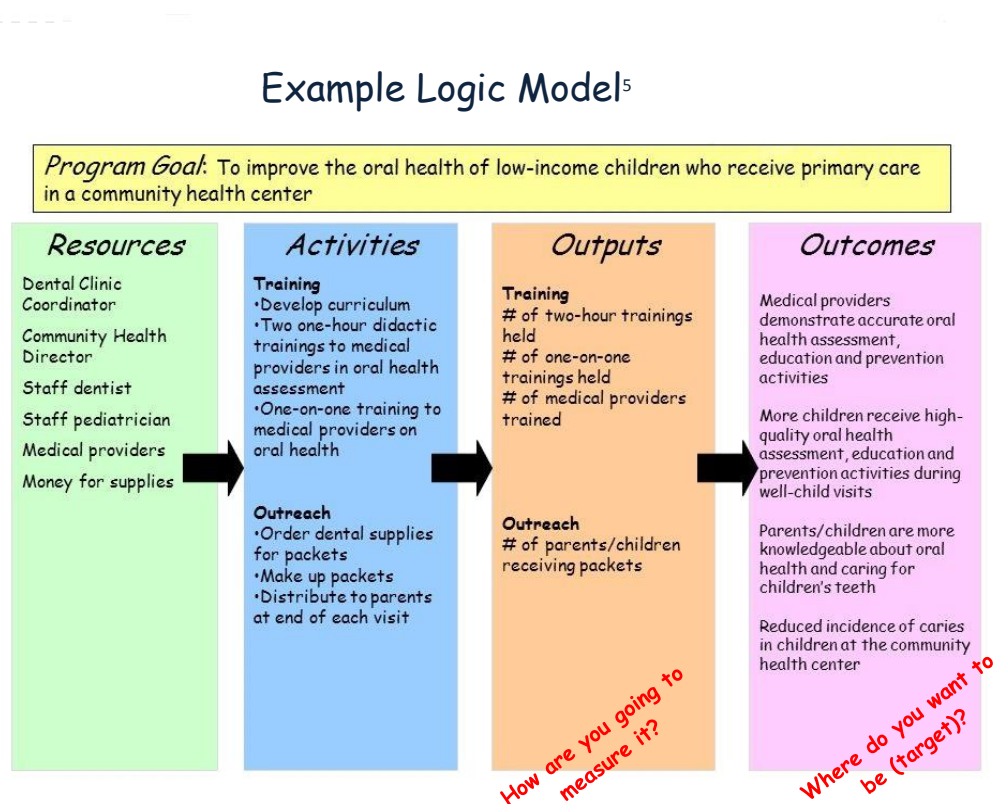
Where do you want to be (target)?

Figure 3

To build a performance management system in a program requires capturing data on progress toward implementing strategies to achieve strategic goals. Figure 4 is a sample matrix (e.g., dashboard) that illustrates where a specific program is in the process of meeting targets aligned to strategic initiatives (e.g., Strategy 1, Strategy 2, etc.), and informs opportunities for QI when targets are not met in pursuing a particular strategy.

---

[5]Image adapted from Example Logic Model by Karen Horsch, accessed on November 13, 2017 at http://slideplayer.com/slide/4351582/.

Health Priority:	TOBACCO
Five Year Goal:	Reduce tobacco use in Idaho
SMART Objective:	Increase the percentage of Idaho adult smokers that have attempted to quit smoking in the past 12 months from 61.3% to 66.3% by July 2016.

Strategy 1: Increase referrals to cessation services.				
Measure 1:	Met/Not Met	Baseline	Target	Actual
Number of women 21-64 years of age referred for QuitLine/QuitNet cessation classes	Not Met	708 (SFY2014)	825	673
Measure 2:	Met/Not Met	Baseline	Target	Actual
Number of 18-24 year olds who registered for QuitLine/QuitNet cessation services (1-call, multi-call, online)	Met	852 (SFY2015)	895	1,173
Strategy 2: Promote the use of nicotine replacement therapy (NRT) for appropriate individuals enrolled in cessation services.				
Measure 1:	Met/Not Met	Baseline	Target	Actual
Number of 18-24 year olds that were shipped 8 weeks of Nicotine Replacement Therapy	Met	281 (SFY2015)	295	801
Measure 2:	Met/Not Met	Baseline	Target	Actual
Proportion of registrants ordering Nicotine Replacement Therapy the Idaho QuitLine/ QuitNet	Met	73% (SFY2015)	75%	91%

Figure 4

Different programs can be at different stages of developing a performance management system. Figure 5 shows an example of a matrix used for tracking progress of several programs toward implementing the four components of a performance management system:

- Component 1 – Performance Standards (PS)
- Component 2 – Performance Measures (PM)
- Component 3 – Reporting of Progress (RP)
- Component 4 – Quality Improvement (QI)

Tracking by program (as in Figure 5) enables a performance improvement manager (PIM) to assess what performance management components are in place for each program. The program-level information can then be used to help identify resources needed for each program (e.g., training, QI tools, templates, etc.), and pinpoint opportunities to strengthen each program's performance management practices.

Program	Contact Person	Active Performance Management System Components				Opportunities for Improvement
1. Home Visiting	Vera	PS	PM	RP	QI	
2. Sexual Violence Prevention	Alan	PS		RP		Wants to create a logic model as a start to developing a full PM system.
3. WIC	Annette	PS	PM	RP	QI	Consider adding a logic model. QI projects are prescribed by CDC; choice in projects is limited.
4. Suicide Program	Marco	PS	PM			New program. Time and mentorship are needed to get data and proceed with QI projects.

Figure 5

Potential Uses

Performance improvement professionals (e.g., PIMs and accreditation coordinators) can use the dashboard and matrix described above to show the evolution of the performance management system in various programs. The tracking matrix shown in Figure 5 can be updated quarterly; persistent gaps can point to lack of engagement or opportunities for training to strengthen performance management at the program level and agency-wide.

The number of programs that are actively using each of the four components a performance management system can be tallied in a simple graphic, as in Figure 6. This provides "the big picture" of performance management system uptake and growth in the organization to inform recommendations for where to deploy resources to strengthen the system, effectively operationalizing the outer ring of the Performance Management System Framework (see Figure 1).

| Performance Standards 4 | Performance Measures 3 | Reporting of Progress 3 | Quality Improvement 2 |

Figure 6