**Community of Practice for Public Health Improvement (COPPHI)**

**Quality Improvement Award Program**

**Quality Improvement Background**

Fillmore County Public Health (FCPH) provides public health services to the 20,866 residents of Fillmore County. The six areas of public health responsibility in Minnesota are to: assure adequate public health infrastructure, promote healthy communities and behaviors, prevent infectious disease, prepare for and respond to disasters and assist communities in recovery, assure the quality and accessibility of health services, and protect against environmental health hazards.

Fillmore County Public Health is an advocate for the Quality Improvement (QI) process. During 2011, Fillmore County participated in Quality Improvement Leadership Collaborative through the Minnesota Department of Health. Participation within the Quality Improvement Leadership Collaborative provided staff with the training, tools, and impetus for establishing a Quality Improvement Council along with Houston County Public Health. From July to December 2011, Fillmore and Houston County Public Health worked together to develop, approve, and utilize a Plan, Charter, Organizational Structure, Calendar, Project Log, Project Proposal Form, Project Evaluation Form, and Staff Training Log for quality improvement. These resources have since been deployed for use by each individual county and QI projects have started to be implemented. Local QI efforts have resulted in completion of Domain 9 of the PHAB Standards and Measures.

FCPH Health is also participating in Local Public Health Assessment and Planning Process through the Office of Performance Improvement at the Minnesota Department of Health. This process consists of an organizational self-assessment and community health assessment as part of a strategic planning process. The outcomes of the Local Public Health Assessment and Planning Process are a Quality Improvement Plan, Strategic Plan, and Community Health Improvement Plan.

**Quality Improvement Issue Identification**

Fillmore County has no formal environmental health services or fully adopted building code. Multiple county and state departments are responsible for responding to various health problems and environmental health hazards which makes investigations complex, response time delayed, and health consequences high. Protocols exist for issues such as meth lab cleanup and septic system failure but not for issues such as mold exposure or silica sand mining. Fillmore County Public Health does not currently have a uniform system in place to respond to public health issues and environmental health hazards or refer them to the appropriate response agency within a specifically allotted time frame. The need for such a system is warranted in order to provide safe protection for all Fillmore County residents from health problems and environmental health hazards while improving the efficiency and effectiveness of FCPH. This need is also corroborated by a recent assessment process conducted by FCPH.

In July 2011, an organizational self-assessment was completed by Fillmore County Public Health utilizing the Tracking Tool for Standards Self-Assessment. This tool assesses the level at which each PHAB Domain has been demonstrated by the local health department. The top three standards most in need of improvement were: Developing and Implementing a Strategic Plan (Standard 5.3), Identifying and Implementing Strategies to Improve Access to Health Care Services (Standard 7.2), and Conducting Timely Investigations of Health Problems and Environmental Public Health Hazards (Standard 2.1). Standard 5.3 and 7.2 will be addressed as part of the Local Public Health Assessment and Planning Process.

For the purposes of this project, measures within Standard 2.1 will be addressed due to identification through the self-assessment process and the increased need to address health problems and environmental public health hazards through systematic means with no formal environmental services. The Rapid Cycle Improvement Process (PDCA/PDSA) will be utilized to improve processes that will reduce response time, improve partnership collaborations, and reduce negative outcomes associated with health hazards.

**Aim Statement**

By November 2012, 90% of health and environmental health hazards will be investigated within twenty-four hours after initial notification to Fillmore County Public Health or referred to appropriate partnering agencies.

**Quality Improvement Work Plan and Evaluation**

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| **Aim Statement:** By November 2012, 90% of health problems and environmental health hazards will be investigated within twenty-four hours after initial notification to Fillmore County Public Health or referred to appropriate partnering agencies. | | | |
| **Activities** | **Timeline** | **Outcome**  **Evaluation** | **PHAB Measure** |
| Collaborate with local and state partners to develop a flow chart delineating roles and coordinating standard operating procedures for health problems and environmental health hazards in Fillmore County. | 4/1/2012  to 6/30/2012 | Completion of flow chart. | 2.1.A - Maintain protocols for investigation process. |
| Condense partner agreements, applicable legal references, and incident management guidelines into a single reference for health problems and environmental health hazards. | 4/1/2012  to 6/30/2012 | Completion of reference guide. | 2.1.4A - Work collaboratively through established governmental and community partnerships on investigations of reportable/disease outbreaks and environmental public health issues. |
| **Activities** | **Timeline** | **Outcome**  **Evaluation** | **PHAB Measure** |
| Develop a tracking system for recording laboratory reports, investigation results, and referral outcomes for health problems and environmental health hazards. | 7/31/2012 | Completion of  tracking system. | 2.1.5A - Monitor timely reporting of notifiable/reportable diseases, lab test results, and investigation results. |
| Implement newly developed standard operating procedures for health problems and environmental health hazards to infectious or communicable disease cases and track results. | 8/1/2012  to 11/30/2012 | Audit timeliness of response to cases and changes in detrimental health outcomes. | 2.1.2 T/L -Demonstrate capacity to conduct an investigation of an infectious or communicable disease. |
| Apply newly developed standard operating procedures for health problems and environmental health hazards to non-infectious health problems, environmental, and/or occupation public health hazards and track results. | 8/1/2012  to 11/30/2012 | Audit timeliness of response to cases and changes in detrimental health outcomes. | 2.1.3A - Demonstrate capacity to conduct investigations of non-infectious health problems, environmental, and/or occupational health problems. |

**Budget Justification**

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| **Salaries and Fringe**  QI Project Coordinator  110 Hours X $42.09/Hour = $4,629.90 | $4,629.90 |
| **Travel**  150 Miles X $0.555/Mile = $83.25 | $83.25 |
| **Supplies**  Supplies for Partner Meetings = $86.85 | $86.85 |
| **Other**  Online Evaluation and Tracking Tool = $200.00 | $200.00 |
| **TOTAL** | **$5,000.00** |