



# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

<b>Policy Name:</b>	Performance Management/Dashboard	<b>Number:</b>	PHSI-02-000
<b>Procedure:</b>	<a href="#">Page 3</a>		
<b>Applies to:</b>	All DPH Employees		
<b>Position Responsible:</b>	Performance Improvement Manager, Public Health Systems Improvement		
<b>Effective Date:</b>	06/01/2016	<b>Last Reviewed:</b>	06/01/2016
<b>Approved:</b>	<i>R. Angelo</i>	<b>Date:</b>	<i>06/14/16</i>

**PURPOSE:**

This policy and procedures standardize the way performance is managed at the Connecticut Department of Public Health (DPH) and how the Performance Dashboard is utilized. The Dashboard also provides transparency and accountability to our partners and the public we serve.

**SCOPE:**

This policy is applicable to all DPH employees as monitoring agency performance and making continuous improvements is an agency-wide responsibility.

**DEFINITIONS:**

Performance Management - The continuous use of performance standards, performance measures, reporting of progress, and quality improvement so that they are integrated into agency’s core operations. DPH’s approach to performance management is detailed in the CT [DPH Quality Plan](#).

Performance Dashboard – DPH’s performance management platform and commonly referred to as the “Dashboard”. There are two Dashboards that represent DPH’s work. The external, [Healthy CT 2020 Performance Dashboard](#) displays in a simple visual format how the residents of Connecticut are faring in health improvement target areas identified in [Healthy Connecticut 2020 State Health Improvement Plan](#) (SHIP). It also shows CT DPH program measures related to these target areas. The internal [CT DPH Performance Dashboard](#) displays in the same format how the DPH is performing in health program and administrative areas that are not directly linked with the SHIP. Its’ primary use is for DPH staff to monitor program performance.

Results Based Accountability (RBA) - RBA is the conceptual framework and software behind the Performance Dashboard. Results-Based Accountability™ (also known as RBA) is a disciplined way of thinking and taking action that communities can use to improve the lives of children, youth, families, adults and the community as a whole. RBA is also used by organizations to improve the performance of their programs.

Result Statement- A statement that displays the overarching goal of the program and/or objectives. The results statement consists of the geography, population, and the condition of well-being or desired outcome.

Population Indicator- This is the population accountability measure that identifies the health status of Connecticut residents for which CT DPH, other state and local agencies, and community partners all share responsibility. (i.e. for communities, cities, counties, states, and nations).

Performance Measure- This is the performance accountability measure that identifies the well-being of client populations served by DPH. (i.e. for programs, agencies, and service systems). Performance measures tell us whether DPH program interventions that affect population indicators, are achieving objectives, and if our agency's actions are helping to improve health. Performance measures typically measure how much we are doing, how well we are doing it and if anyone is better off.

Program- A program is a collection of resources in an organization and is geared to accomplish a certain goal, objective or set of goals and objectives

Quality Improvement (QI) - is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act, that focuses on activities that address community needs and population health improvement. Quality improvement refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes and other indicators of quality in services or processes which achieve equity and improve the health of the community

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

PHAB Standards and Measures: These are the official standards, measures, and required documentation for PHAB national public health department accreditation.

## **POLICY:**

DPH engages in performance management at all levels of DPH (agency, department, and program) as all DPH employees have a role in performance management. This includes identifying and making continuous improvements that allow DPH to effectively fulfill its mission and vision.

The Performance Dashboard provides a platform to manage performance. Every program and administrative section, with some rare exceptions, must have performance measures in the dashboard, whether on the internet or intranet as appropriate. Program performance measures are reviewed quarterly by program staff with supervisors, managers, branch and section chiefs to identify successes and opportunities for improvement. Such discussions should be documented at least annually using the [Dashboard Discussion Form](#) and submitted to [U:\SHARED\DOC\DASHBOARD REVIEWS](#) for documentation of the implementation of a performance management system as required by PHAB standards under Domain 9: Continuous Improvement. Further, if performance measure targets are not met, it is expected that improvements will be made and, if needed, that quality improvement or Lean initiatives will be undertaken in an effort to reach performance targets. Performance measures or key

performance indicators developed as a result of these quality improvement or Lean projects shall be entered into the Performance Dashboard within 30 days of project initiation.

**PROCEDURES:**

The expectations of all DPH employees are listed in the following table as role and responsibilities for initial Dashboard development, quarterly updates (where applicable based on data reporting frequency or changes in data), review, management and quality improvement. Some indicator data are available annually and therefore reported on once a year. However, performance measure data may be collected more frequently and should be reported on and reviewed when available. Please note: One or more staff members may be responsible for filling these roles outlined below.

Who	What & When	
	Initially	Quarterly (or based on data reporting frequency)
<b>Program Staff</b>	<ul style="list-style-type: none"> <li>• Attend training on using the dashboard</li> <li>• Obtain necessary data from epidemiologists or other sources</li> <li>• Complete the Dashboard template following the <i>Guidelines for Completing the CT DPH Performance Dashboard and Writing the Story Behind the Curve</i></li> <li>• Check for completeness</li> <li>• Receive approval as required in your section</li> <li>• Provide all needed information to license holder for inputting into the dashboard within 30 days of Quarterly Training and Working session.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide any needed updates (data, performance measures, narrative) to license holders</li> <li>• Review and document program performance with program supervisor/program manager using the CT DPH Performance Dashboard Discussion Form and following the CT DPH Performance Dashboard Discussion and Review Guidance</li> <li>• Conduct quality improvement projects if needed to meet performance targets</li> <li>• Enter performance measures or key performance indicators from quality improvement or Lean projects into the dashboard within 30 days of project initiation.</li> </ul>
<b>Epidemiologists</b>	<ul style="list-style-type: none"> <li>• Provide requested indicator data and/or program performance measure data to program staff</li> <li>• Assist in writing the Story Behind the Curve for indicator data following the <i>Guidelines for Completing the CT DPH Performance Dashboard and Writing the Story Behind the Curve</i></li> </ul>	<ul style="list-style-type: none"> <li>• Provide data updates on indicators and/or program performance measures to program staff</li> <li>• Assist in writing any updated narrative for the Story Behind the Curve if needed</li> </ul>
<b>Software License Holder</b>	<ul style="list-style-type: none"> <li>• Attend training for using the Results Based Leadership scorecard software – or complete via TRAIN course # 1058140.</li> <li>• Obtain necessary information from program staff to complete the</li> </ul>	<ul style="list-style-type: none"> <li>• Obtain and enter information for quarterly updates</li> </ul>

	<p>dashboard</p> <ul style="list-style-type: none"> <li>• Enter all components for assigned dashboard</li> <li>• Post dashboards on the intra or internet as appropriate</li> </ul>	
<b>Supervisors and Managers</b>	<ul style="list-style-type: none"> <li>• Determine which program staff, epidemiologist and license holder is assigned to which programs</li> <li>• Determine who signs off on each dashboard or provide sign off</li> <li>• Use Completion and <i>Review Guidelines for Managers for the CT DPH Performance Dashboard</i> to sign off on the initial scorecard</li> </ul>	<ul style="list-style-type: none"> <li>• Meet with programs to review scorecard performance</li> <li>• Meet with Branch and Section Chiefs to review dashboard performance – see review guidance</li> <li>• Support/sponsor quality improvement/Lean projects as needed</li> </ul>
<b>Who</b>	<b>What &amp; When</b>	
	<b>Quarterly</b>	
<b>Branch and Section Chiefs</b>	<ul style="list-style-type: none"> <li>• Meet with Supervisors and Managers to review highlights of dashboard performance (those doing really well or those in need of performance improvement - see review guidance</li> </ul>	
<b>Commissioner and Deputies</b>	<ul style="list-style-type: none"> <li>• Meet with Branch and Section Chiefs to review highlights of dashboard performance (those doing really well or those in need of performance improvement</li> <li>• Highlight dashboard at Branch Chiefs meeting (those doing really well or those in need of performance improvement ) - see review guidance TBD</li> </ul>	
<b>Who</b>	<b>What &amp; When</b>	
	<b>Ongoing</b>	<b>Quarterly</b>
<b>Public Health Systems Improvement Staff</b>	<ul style="list-style-type: none"> <li>• Provide technical assistance to staff completing dashboards</li> <li>• Provide technical assistance in reviewing scorecards</li> <li>• Conduct dashboard monitoring for quality</li> <li>• Carry out administrative components of dashboard</li> <li>• Develop methods for sharing successes internally and externally</li> </ul>	<ul style="list-style-type: none"> <li>• Provide training to all staff working with the dashboard</li> <li>• Send out quarterly reminders for updates</li> <li>• Provide training, technical assistance and coordination for quality improvement/Lean initiatives.</li> </ul>

**PROCESS:**

**Figure 1:** Dashboard Process Flowchart

