QI MATURITY AND ACCREDITATION READINESS REPORT
for Pine County Public Health Department (sample)

August | 2015 | Produced by Colorado Public Health Practice-Based Research Network

INTRODUCTION

In late 2014 and early 2015, local public health agencies (LPHAs) in Colorado were surveyed about their interest in and readiness for national, voluntary public health accreditation and about the extent to which they were using quality improvement in their work. The questions were answered by the LPHA Director and 36 LPHAs participated. The results of the survey are presented here along with the individual results from Pine.

QI MATURITY

DEFINITION OF QUALITY IMPROVEMENT MATURITY

Quality Improvement Maturity is a concept that encompasses an agency’s culture, capacity, and alignment of ongoing and systematic improvement efforts (Joly, 2013). The concept aligns with the Quality Improvement Roadmap, www.qiroadmap.org, a resource that helps guide LPHAs through creating a culture of quality improvement throughout their agency. For this report, QI Maturity is separated into three subsets: Organizational Culture, Capacity and Competence, Alignment and Spread.

OVERALL ORGANIZATIONAL QI MATURITY

Pine: Overall QI Maturity = Medium

TOTAL SCORE: Medium

SUBSET SCORE: High

SUBSET SCORE: Low

SUBSET SCORE: Medium

Data presented in this sample report are artificial and for example purposes only. Pine County does not exist in Colorado.
## QI Organizational Culture in CO LPHAs

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff members are routinely asked to contribute to decisions</td>
<td>12</td>
<td>23</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>When trying to facilitate change, staff has the authority to work within and across program boundaries</td>
<td>12</td>
<td>21</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The key decision makers believe quality improvement is very important</td>
<td>10</td>
<td>21</td>
<td>3</td>
<td>2</td>
<td>12</td>
</tr>
<tr>
<td>LPHA currently has a pervasive culture that focuses on continuous quality improvement</td>
<td>4</td>
<td>16</td>
<td>12</td>
<td>3</td>
<td>12</td>
</tr>
</tbody>
</table>

## QI Capacity and Competency in CO LPHAs

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The leaders are trained in basic methods for evaluating and improving quality, such as Plan-Do-Study-Act</td>
<td>2</td>
<td>12</td>
<td>9</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>My LPHA has a quality improvement plan</td>
<td>3</td>
<td>5</td>
<td>7</td>
<td>19</td>
<td>2</td>
</tr>
<tr>
<td>My LPHA currently has a high level of capacity to engage in quality improvement efforts</td>
<td>7</td>
<td>6</td>
<td>14</td>
<td>8</td>
<td>12</td>
</tr>
</tbody>
</table>

## QI Alignment and Spread in CO LPHAs

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job descriptions include specific responsibilities related to measuring and improving quality</td>
<td>2</td>
<td>5</td>
<td>8</td>
<td>19</td>
<td>2</td>
</tr>
<tr>
<td>Customer satisfaction information is routinely used by many individuals responsible for programs and services</td>
<td>3</td>
<td>14</td>
<td>8</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>LPHA currently has aligned our commitment to quality with most of our efforts, policies and plans</td>
<td>4</td>
<td>15</td>
<td>9</td>
<td>8</td>
<td>12</td>
</tr>
</tbody>
</table>

### Key:
- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree
- Don’t Know
- No data
COMPONENTS OF QI MATURITY: LPHAs with Jurisdiction Size of 25,000-99,999

QI ORGANIZATIONAL CULTURE IN CO LPHAS (25,000-99,999)

- Staff members are routinely asked to contribute to decisions
- When trying to facilitate change, staff has the authority to work within and across program boundaries
- The key decision makers believe quality improvement is very important
- LPHA currently has a pervasive culture that focuses on continuous quality improvement

PINE
- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

QI CAPACITY AND COMPETENCY IN CO LPHAS (25,000-99,999)

- The leaders are trained in basic methods for evaluating and improving quality, such as Plan-Do-Study-Act
- My LPHA has a quality improvement plan
- My LPHA currently has a high level of capacity to engage in quality improvement efforts

Neutral
- Disagree
- Strongly Disagree

QI ALIGNMENT AND SPREAD IN CO LPHAS (25,000-99,999)

- Job descriptions include specific responsibilities related to measuring and improving quality
- Customer satisfaction information is routinely used by many individuals responsible for programs and services
- LPHA currently has aligned our commitment to quality with most of our efforts, policies and plans

Disagree
- Neutral
- Neutral

QI MATURITY STRENGTHS AND OPPORTUNITIES

Pine is strongest in the area(s) of Organizational Culture
Pine has an opportunity to strengthen in the area(s) of Capacity and Competence
ACCREDITATION READINESS

DEFINITION OF ACCREDITATION READINESS

For the purposes of this report, Accreditation Readiness is measured in categories of Intent to Apply, Use of Standards, Completion of the Accreditation Prerequisites, Leadership Support, Technical Capacity, Partnership and Policy and Initial Steps Toward Accreditation.

COMPONENTS OF ACCREDITATION READINESS

INTENT TO APPLY: DOES YOUR AGENCY INTEND TO APPLY FOR ACCREDITATION?

COLORADO

Pine RESPONSE: No

USE OF STANDARDS: DOES YOUR AGENCY PLAN TO USE PHAB STANDARDS TO IMPROVE YOUR WORK, REGARDLESS OF YOUR INTENT TO FORMALLY SEEK ACCREDITATION?

COLORADO

Pine RESPONSE: Considering, but have not decided
ACCREDITATION PRE-REQUISITES
COLORADO

Pine RESPONSE: Agree • Agree • Disagree

LEADERSHIP SUPPORT
COLORADO

Pine RESPONSE: Don’t Know • Don’t Know • Neutral

TECHNICAL CAPACITY
COLORADO

Pine RESPONSE: Strongly Disagree • Disagree
PARTNERSHIP AND POLICY
COLORADO

LPHAs with Jurisdiction Size of 25,000-99,999

Has a process to systematically review and revise policies and procedures.

Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree | Don’t Know | No data
---|---|---|---|---|---|---
3 | 19 | 6 | 7 | 1 | 12 | 12 | 0% 25% 50% 75% 100%

Pine RESPONSE: **Disagree** • **Disagree**

INITIAL STEPS TOWARD PHAB ACCREDITATION
COLORADO

LPHAs with Jurisdiction Size of 25,000-99,999

Has completed an initial “self-study” for PHAB accreditation.

Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree | Don’t Know | No data
---|---|---|---|---|---|---
5 | 3 | 16 | 5 | 2 | 12 | 12 | 0% 25% 50% 75% 100%

Pine RESPONSE: **Disagree** • **Disagree** • **Disagree**

ACCREDITATION READINESS STRENGTHS AND OPPORTUNITIES

Pine is strongest in the area(s) of Prerequisites for Accreditation.
Pine has an opportunity to strengthen in the area(s) of in finding out more in the area of Leadership Support for Accreditation.

FOR MORE INFORMATION ABOUT THIS REPORT

This report was produced through a Public Health Services and Systems Research grant funded by The Robert Wood Johnson Foundation (#72053) and the Colorado Gaining Ground Initiative.

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