Quality Improvement Trends in Public Health Practice

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Abstract

Background: The Public Health Quality Improvement Exchange (PHQIX) has been used since 2012 to collect information about quality improvement (QI) in public health. This initiative was launched by the Maternal and Child Health Bureau at the Health Resources and Services Administration, as well as the Office of the Assistant Secretary for Planning and Evaluation (ASPE) at the U.S. Department of Health and Human Services. Our objective was to publish QI initiatives performed by public health practitioners through the PHQIX, and to present descriptive statistics of QI methods, tools, and attributes. The goal was to facilitate learning about the diverse range of QI activities performed in response to varied needs and to inform future research about QI performance.

Research Objective: To review and analyze existing data set, to describe trends in QI initiatives, and to provide information about the health department and the capacity of that health department or the health department and the population it serves, tools and methods used, project duration, and the organization’s self-reported QI level.

Principal Findings: A total of 110 QI initiatives and 12 different clusters are featured as they are published on the PHQIX website. The analysis of these initiatives was performed by the Public Health Quality Improvement Trends in Public Health Practice (PHQIX) research team. The total number of QI initiatives submitted is 110. The majority of QI initiatives are submitted by state health departments (42%) and local health departments (39%). The most frequently used QI tools are brainstorming (67%), fishbone and Lean/Six Sigma (12%) are also employed. The most commonly used QI method or approach is process improvement (27%). Multi-city HD (36%) and Multi-county HD (29%) health departments are the most common submitting organization type. In addition, the analysis of the attributes and project duration of the QI initiatives revealed that more than half of the QI initiatives have a duration of less than 24 months. These initiatives focus on many different attributes and tools, such as environmental health, communications, and bilingualimaternal and child health home visits. The most common submitting organization type was county health departments (39%). The self-reported level of QI activity at the submitting organization may be associated with the number of QI initiatives. The Public Health Quality Improvement Exchange (PHQIX) could be used to facilitate learning about the diverse range of QI activities performed in response to varied needs. The goal was to inform future research about QI performance.

References


