

Public Health Futures

Quality Indicators Workgroup

Meeting Summary

September 6, 2013

Agenda

Attendance:

Will McHugh, ODH; Joe Mazzola, ODH; Nicole Brennan, ODH; Steve Wagner, ODH; Kelly Friary, ODH; Kate Philips, ODH; Mahjabeen Qadir, ODH

Terry Allan, CCBH; Claire Boettler, CCBH; Corey Hamilton, ZMCHD; Jason Orcena, UCHD; Ron Graham, LCGHD; Beth Bickford, AOHC;

ODH started the meeting off asking everyone's opinions on the proposed quality indicator template. Overall responses regarding spreadsheet were good. Some of the comments are bulleted below:

- List is a good start on what indicators should be present
- The approach makes sense and is a good way to prioritize programs and look at areas we can look at more closely.

ODH outlined the chart and what some of the definitions mean in the cross walk. For example the definition of integrity came up is the indicator have medium to low integrity, another one we discussed was control. What is the difference between control and influence? Do they go together? An example that was discussed at the meeting to help define control and influence was immunization and food services. Also discussed was the definition of purpose and data we can stand by more efficiently with data lag. One indicator that was deleted was to remove sleep related death. Data collected by the Child Fatality Review (CFR) are collected different by each county and data is fuzzy.

Formatting to PHAB standards was discussed. ODH agreed we will get there but we have to look at the big picture in order to help fine tune our areas of concentration.

National database was brought up and the question was asked if ODH has access. If it is yes is there anything we can do with it? We can go through it and see if there are indicators. ODH mentioned one assignment he would like everyone to continue is finding indicators even if they are good or bad and send them to ODH. We can discuss at the next meeting. ODH mentioned we need our indicators looking strong by end of October, and at that point we can compare with PHAB standards. Wherever we can double dip to make the PHAB domain simple we are all for.

ODH mentioned to everyone that if we prioritize correctly we can see where everyone is at so we can have a benchmark and can always get more complex.

When we report this out in 2 years here are considerations we need to look at:

- Where are they with accreditation and with indicators?
- Pick indicators that are population based
- What is the cost per unit of service?
- And how are they measured?

Next Steps:

ODH gave suggestions regarding possible indicators:

- If you know of other national and regional data where we can borrow indicators please let ODH know. We are happy to make these inquiries and put them on the table.
- Please send back comments, request, or concerns on data that you thought was not reliable or we should look into more.
- There is benefit to go out to sites and look at some of these indicators. Maybe team up with some members and seek out some sites.

We are going to cross walk the State Health Assessment and the State Health Improvement Plan. ODH is going to look at indicators that will get us to health jurisdiction level. ODH will review and send out feedback.

Dr. Wapner and an HPIO representative will be attending the next meeting to discuss similar efforts regarding indicators.

Dates for next meeting(s):

September 16th 1pm to 3pm

October 2nd 1pm

October 9th 1pm

October 23rd 1pm