



Results That Matter Team

Managing Complexity: Community Balanced Scorecards for Public Health
APHA Presentation, November 2009

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Background

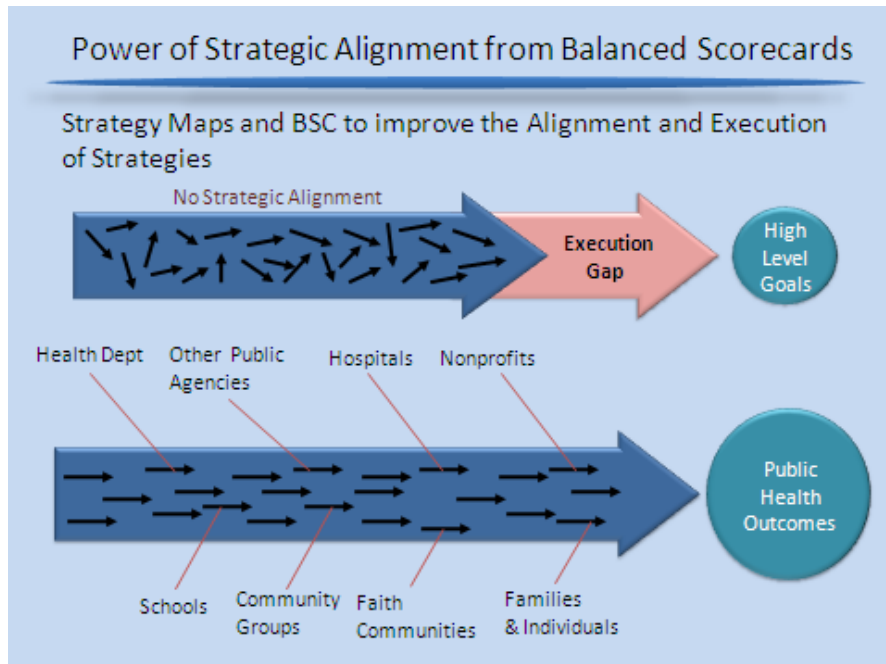
- Our firm has been measuring and improving public and nonprofit performance since 1985
- Paul received ASPA's "Harry Hatry Performance Measurement Practice Award" for Lifetime Achievement
- The Results That Matter Team is on the Public Health Foundation (PHF) Consulting Team
- We have Community Balanced Scorecard Projects with 5 community public health partnerships in 3 states
- We're featured in *The Public Health Quality Improvement Handbook* (PHF-American Society for Quality, 2009)

Agenda

- Challenges of Public Health Organizations
- New Community Balanced Scorecard (CBSC) Tools and Early Experiences Using Them in Public Health
- Where Does CBSC Go from Here? New Opportunities

Challenges of Public Health Organizations

- Need to effectively collaborate with multiple organizations to improve public health outcomes
- Managing the on-going implementation of a collaborative strategy can be overwhelming
- Current tools (MAPP, standards-based assessments, QI) and coming accreditation are useful, but:
 - Identify more opportunities for improvement than can be addressed with current resources.
 - Use of the Tools tends to be fragmented
- Grant programs often emphasize partnerships across communities working together, and accountability for results (e.g., the new \$373 million CDC "Communities Putting Prevention to Work" grant program)



Key Questions:



- How to choose where to focus improvement efforts?
- How to pick changes that reinforce each other?
- How to manage the complexity of these challenges to improve public health outcomes?
- How do you demonstrate advanced levels of collaboration?

New Solution: Community Balanced Scorecards

- Focus and manage strategic efforts to improve quality, outcomes, and public health systems
- Clearly communicate strategy to recruit partners and clarify roles
- Engage community partners in a common strategy to improve PH outcomes
- Technology available for scaling-up use of the strategy (e.g., more partners, scorecards, issues)

The Balanced Scorecard (BSC) ...

- Is an integrated *strategic planning and management system* traditionally focused on one organization
- *Communicates* vision, mission, and strategy to stakeholders and employees
- *Maps strategies* based on *cause & effect assumptions* across *different perspectives* or "views."
- *Aligns* day-to-day work to the strategy
- Provides a disciplined framework for *measuring strategic performance* as viewed from those different perspectives.

A nice fit with QI ...

Balanced Scorecards and Quality Improvement (QI)



The Balanced Scorecard is a telescope.

QI is a microscope.



We use the telescope to tell us where to focus the microscope.

-- Chief Medical Director, Duke Children's Hospital



Community Balanced Scorecard (CBSC)

- Combines the community building power of effective collaborations with the strategy alignment of balanced scorecards
 - Pulls the community together around common outcomes
 - Leverages assets from all sectors
 - Aligns key community collaborators behind a common strategy for faster, measurable results
 - Creates mutual accountability for results
- *Intended for the many important issues in communities a regions that cannot be resolved by one organization or sector.*

A nice fit with several Public Health Improvement trends ...

Improved Public Health Outcomes



Information & Collaborative Relationships Based on, e.g.: MAPP, Standards-based Assessments (e.g., Accreditation)

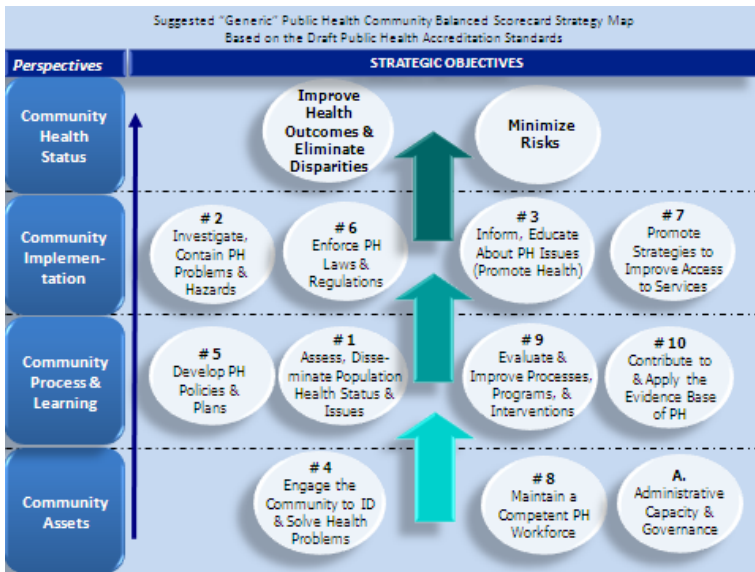
Community Balanced Scorecard Components



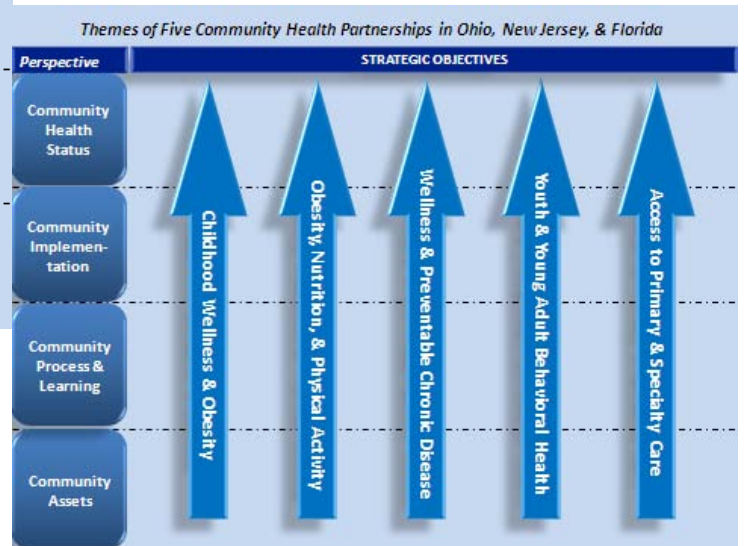
Suggested Perspectives for Public Health Community Balanced Scorecards



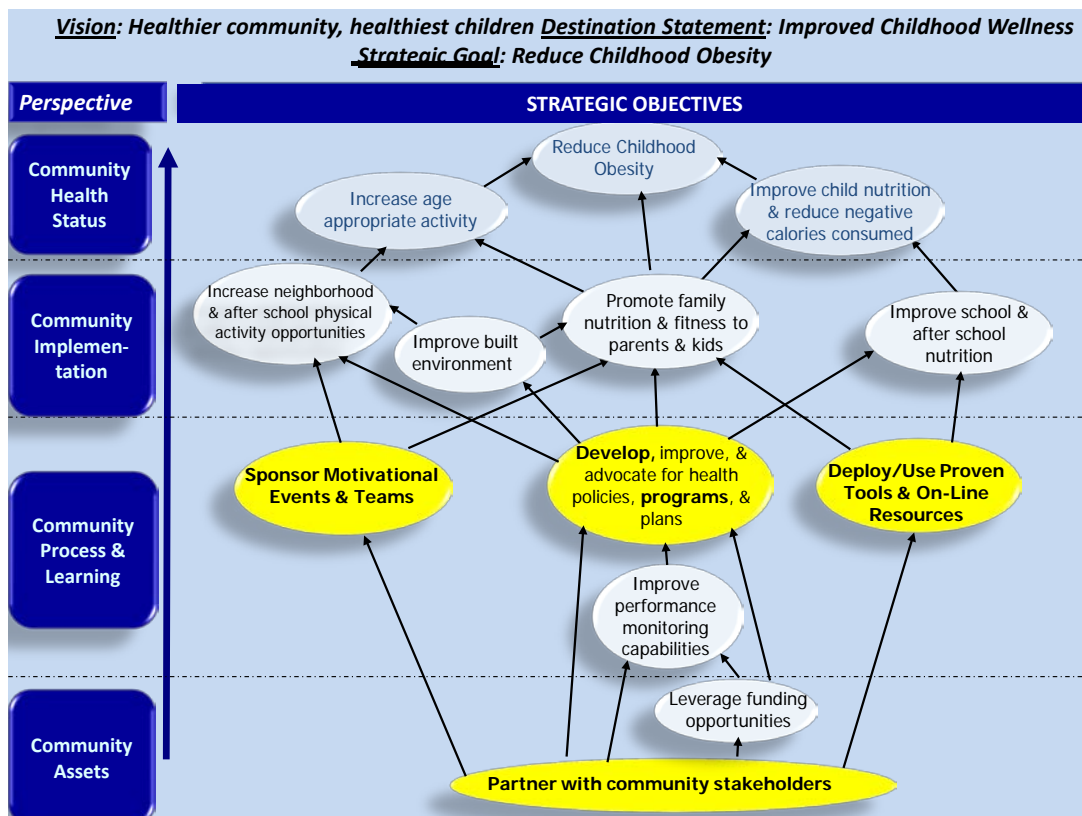
Why the suggested perspectives work well for public health ...



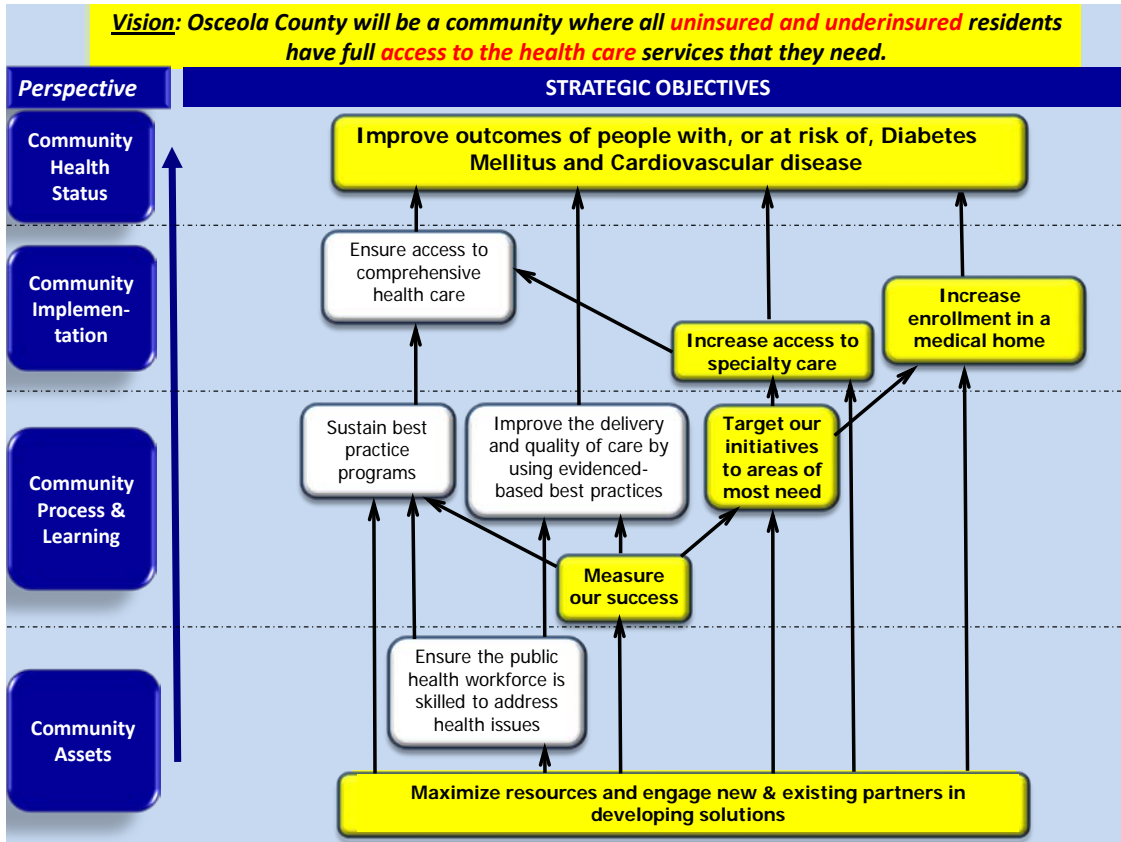
Strategy execution usually occurs for more specific issues or "themes" ...



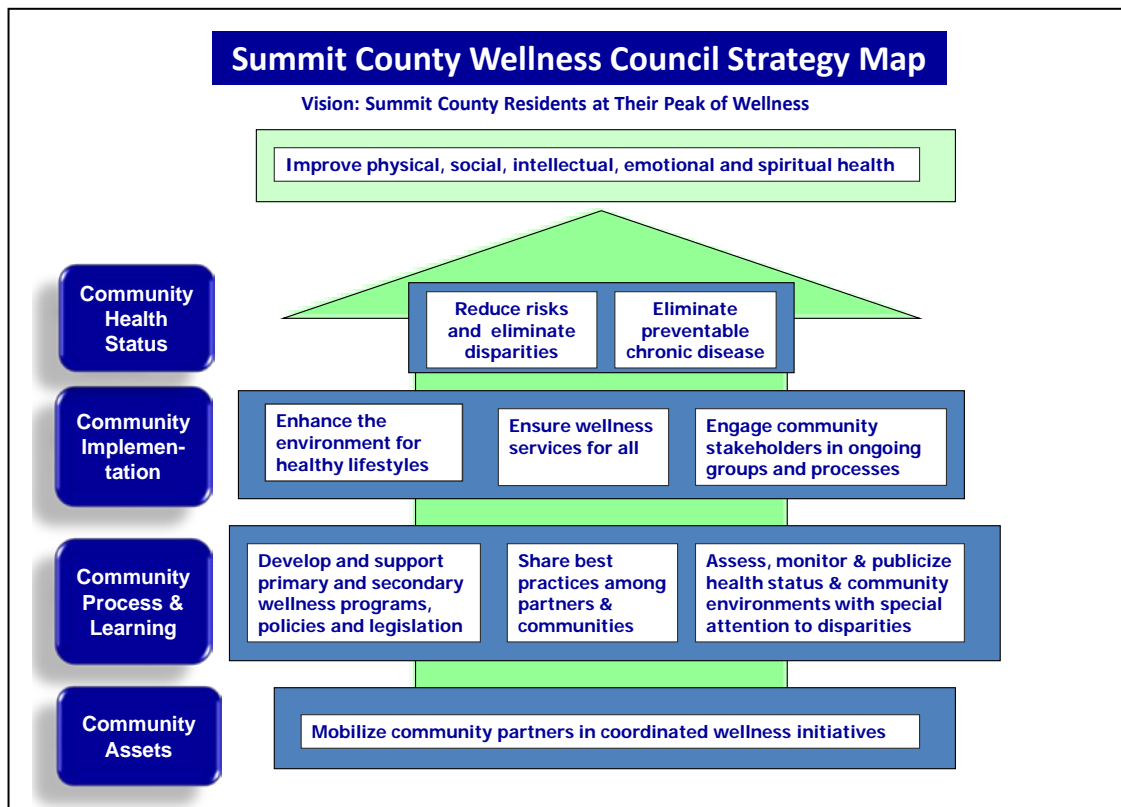
Actual Strategy Maps Developed by Community Health Partnerships



A Strategy Map to Address a **Systemic Issue**



A Simplified Strategy Map for External Use (e.g., Recruit New Partners)



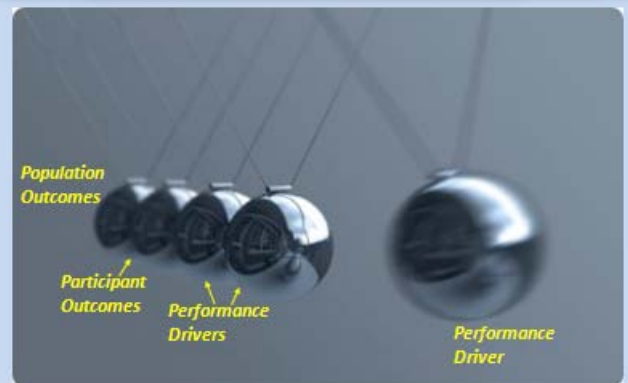
Community Balanced Scorecard Performance Measurement

Population & Participant Outcomes

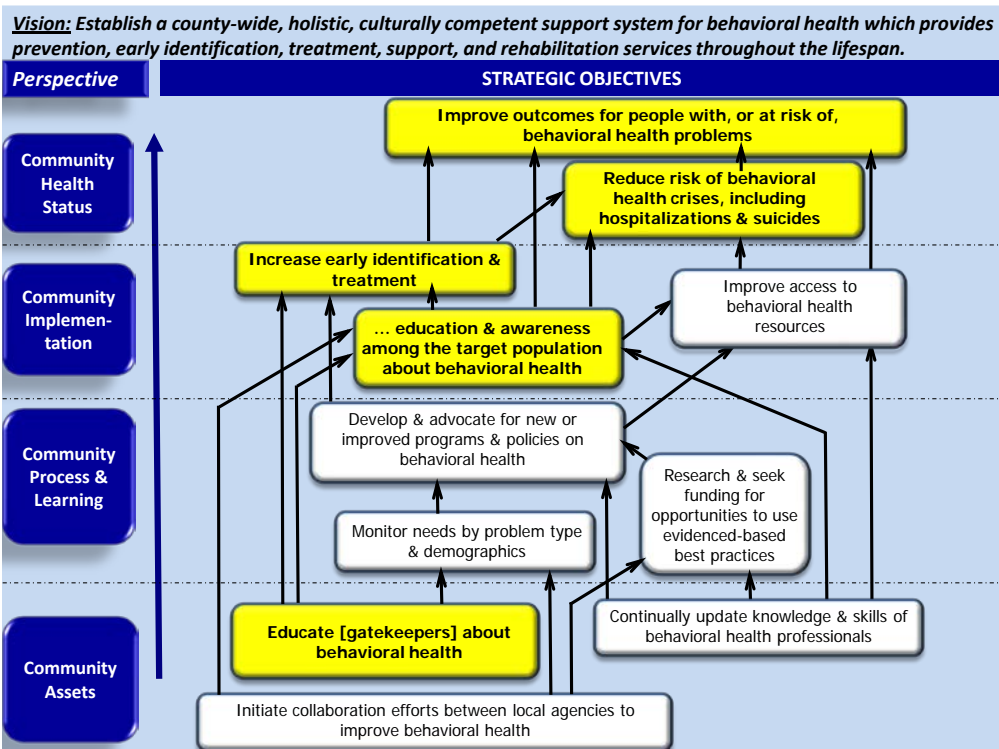


Performance drivers are NOT standardized. They can be any measures that DRIVE achievement of other measures, and ultimately of outcomes, no matter what types of measures they happen to be.

Outcomes & Performance Drivers



An example based on this strategy map from another community partnership ...



Selected Performance Measures: All are “Performance Drivers” Except Where Indicated

COMMUNITY HEALTH STATUS	<p>1. Improve outcomes for people with, or at risk of, behavioral health problems <i>Population Outcomes:</i></p> <ul style="list-style-type: none"> • Suicide rate: Compare changes in county rate vs. changes in Ohio statewide suicide • Substance abuse rates for youth • Hospitalization rates for behavioral health <p>2. Reduce risk of behavioral health crises, including hospitalizations & suicides</p> <ul style="list-style-type: none"> • No. of people in target population receiving treatment (outpatient)
COMMUNITY IMPLEMENTATION	<p>3. Increase early identification & treatment</p> <ul style="list-style-type: none"> • No. of youth and adults who are screened for depression • No. of youth identified for early behavioral health concerns • No. of youth who receive treatment due to the screening process <p>5. Facilitate education & awareness among target population about behavioral health</p> <ul style="list-style-type: none"> • No. of students who receive the info • No. of youth who can apply the knowledge & skills to their own life • <i>Participant Outcome:</i> No. of youth who change behavior based on program, e.g., reduced substance abuse, reduced absenteeism, improved conflict resolution
COMMUNITY ASSETS	<p>9. Educate health workers, educators, employers, first responders, & other stakeholders about behavioral health</p> <ul style="list-style-type: none"> • No. “gatekeepers*” trained in identifying & responding to behavioral health concerns • No. gatekeepers who report that the training enhanced their ability to respond to behaviors of concern in others. • <i>Participant Outcome; also a “Driver” of Measures for Objective 3:</i> No. gatekeepers who report having applied the knowledge learned in training situations in their life. <p><i>**Gatekeepers” are people who observe members of the target population in various settings, such as school teachers, parents, employers, college faculty and graduate assistants, law enforcement staff, other first responders.</i></p>

Capturing Intended “Partner Contributions to Objectives” for Accountability

Objective: 9. Educate health workers, educators, employers, first responders, & other stakeholders about behavioral health	
Initiative: Wood County Schools Suicide Prevention Intervention Protocol	
Partners: Public schools, counselors, teachers, ADAMHS Board, Wood County Educational Service Center	
Owner for initiative: Ann Huss, Noelle Duvall, Bill Donnelly, CRC	
Desired Change	
From: No suicide prevention intervention plan to aid school personnel to provide a safe and supportive environment for all students.	To: School employees well-trained to recognize and address students who are exhibiting warning signs, verbalizing, or acting out suicidal behaviors during the school day.
Actions: Provide train-the-trainer course for the Critical Incident Response Core Team in each school district.	
Performance Measures for Initiative:	Targets:
No. of school districts who receive “train-the-trainer”	Increase the number of school districts from 0 to 10
No. of school districts who train their school employees	Increase the number of school districts who train their employees from 0 to 8

Note the above measures do not match the measures in Objective 9, but they contribute to improving results for those measures. There are currently also separate “Partner Contribution Sheets” for Objective 9 with measures for parents, college faculty & staff, and college graduate assistants.

Taking Partner Contributions a Step Further to ...

Community Results Compacts



Partner-2-Partner

- **Mutual 'handshakes'**
 - Non legal, friendly document
 - Defines what partner will do; what GetUp will do
 - Helps to establish levels (types) of partnerships
 - Helps partner determine measurability
 - Goal is to have 70 to 100 signed 'handshakes' by early November



Looking Ahead ...

Where Does CBSC Go from Here?

- Current pilot communities
 - Deploying their strategies, expanding partnerships
 - Defining measures, obtaining baselines, beginning data collection
 - One is testing software: InsightVision + Wiki
- Communities including in grant applications
- State interest in state & regional groups of communities CBSC “start up projects”
- NACCHO (MAPP team) & ASTHO interest
- CBSC in strategic planning mode with PHF

Where Does CBSC Go from Here?

- More users welcome
- More partners welcome:
 - To support projects
 - To joint venture
 - To study CBSC efforts

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Also see our presentation on CBSC at the APHA Expo Theatre, Tuesday, November 10, 2009, at 4:00 PM

Citations and Webinars:

Epstein, Paul D., Alina Simone, and Lyle D. Wray (2009). "Community Balanced Scorecards for Strategic Public Health improvement," Chapter 18 in Bialek, Ron, Grace L. Duffy, and John W. Moran, eds., *The Public Health Quality Improvement Handbook* (Milwaukee: ASQ Quality Press).

Simone, Alina and Paul D. Epstein (2009). "Leading and Lagging Indicators of Public Health and Public Health Assessment and Accreditation," Chapter 7 of Bialek, Duffy, and Moran.

For our latest webinars (live and recorded) on Community Balanced Scorecards, see the “Coming Events” and “What’s New” sections of our home page: www.RTMteam.net



Questions?