QUALITY IMPROVEMENT AND PUBLIC HEALTH

Unlike other industries, such as engineering, manufacturing and other health care sectors, public health departments do not have national accreditation standards by which they measure the quality of the services they provide.

There is a movement to implement a national program that public health systems could use, voluntarily, to assure their users and communities that they provide a certain level of services.

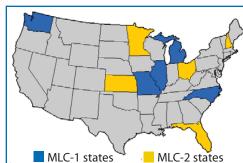
An important component of these standards involves Quality Improvement (QI), a process where the departments could implement a set of standards and goals, and maintain a commitment to measuring their progress to meet those goals.

"What was so helpful for our region was that the administrators committed to bringing their entire staffs to the Quality Improvement (QI) training held for our region. Their commitment contributed to the buy-in of the concept."

— Cindy Mullen, West Central regional coordinator

In this process, public health departments would be able to show that they have the capacity to properly deliver a set of quality, essential services — from immunizations and infectious disease surveillance to prenatal care for pregnant women.

But there are no standards that are nationally agreed upon to measure that performance. And, public health departments aren't organized the same way in all states. Some states provide public health services for their residents. Others, such as Kansas, have a decentralized public health system, where local governments are in charge of public health services.



Standards that can accurately measure the performance of public health departments are being debated in several forums today. National experts expect an accreditation system to be in place by 2011.

One group that is looking at a national system is the Multi-State Learning Collaborative program, or MLC, which provides grants sponsored by the Robert Wood Johnson Foundation to help states compare and contrast their public health systems in order to prepare for national accreditation.

The program now includes 10 states. The first group of states, chosen in 2006, includes Illinois, Michigan, Missouri, North Carolina and Washington. Kansas, along with Florida, Minnesota, New Hampshire and Ohio, was chosen in the second round, known as MLC-2. States are now in the process of applying for grants in the third year of the project, MLC-3. Five more states will be chosen in the third round of funding.

The MLC project in Kansas addresses public health challenges by focusing on improving performance management through Quality Improvement. The grant is managed through a partnership of the Kansas Health Institute, the Kansas Association of Local Health Departments and the Kansas Department of Health and Environment.





