Community Balanced Scorecards for Leading Collaborative Strategies to Achieve Community Health Outcomes

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Presenter Disclosures

Paul David Epstein

(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

"No relationships to disclose, other than the obvious relationship with my own consulting firm that does paid work of the type I am presenting."



Results That Matter Team www.RTMteam.net

- Measuring & improving performance since 1985, mostly as Epstein & Fass Associates
- Use of RTM Team's Community Balanced Scorecard (CBSC) tools for collaborative health improvement planning & implementation, strategic planning, & accreditation preparation
- Work with ASTHO, NACCHO, Public Health Foundation, & directly for PH organizations, hospitals, partnerships, others
- QI &Evaluation Coaching for LHDs across the U.S. (NACCHO)
- 3 chapters in The Public Health Quality Improvement Handbook, including one on Community Balanced Scorecards
- Working with FORMATION Inc. whose InsightVision software powers scaling-up the use of CBSC & collaborative implementation



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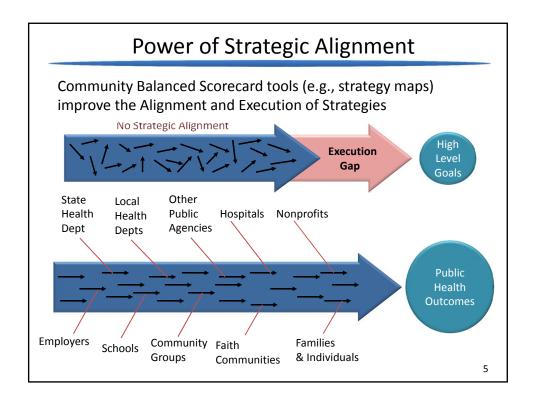
CBSC Tools: From a Promising to a Best Practice

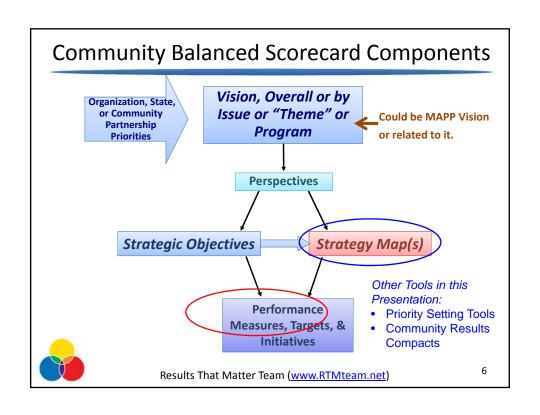
- Used by state & local health departments & HD-led, nonprofit-led, & hospital-led community health partnerships for strategic planning & health improvement planning for many issues, e.g.:
 - Healthy eating & active living*/wellness/obesity reduction
 - Health disparities/determinants of health
 - Social support networks
 - Access to: health care/dental care/mental health care
 - Behavioral health*/substance abuse/suicide prevention
 - Integration of community health & clinical practice
 - Breastfeeding*
 - Low birth weight rate reduction
 - Cancer morbidity & mortality reduction
 - Public health information management
 - Public health preparedness
 - Healthy housing*

*Examples in this presentation



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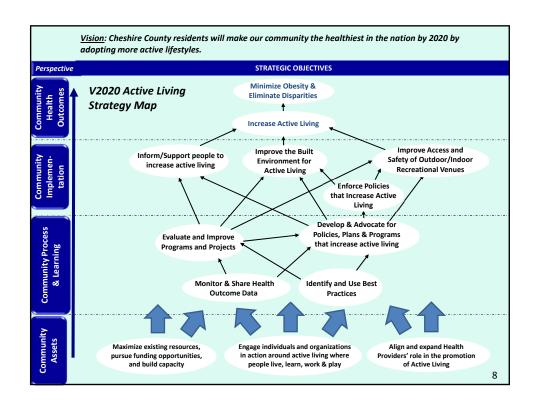


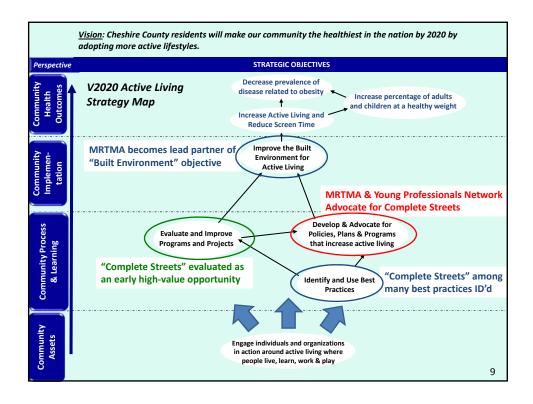


Approach to Collaborative Action

- Develop strategy maps with vision and indicators (CBSC approach)
- 2. Align community partners with each strategy
- Develop action plans with strategies, measures, key partners
- Leverage assets from all sectors of community
- 5. Implement strategies

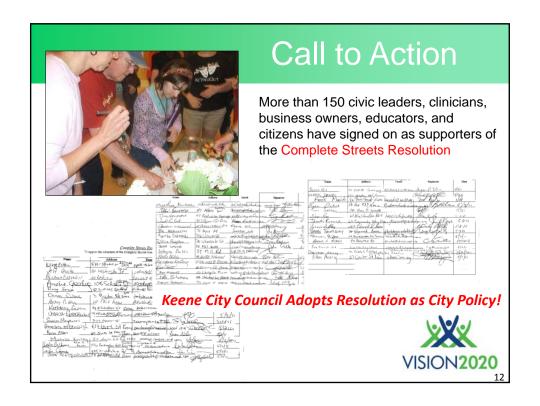


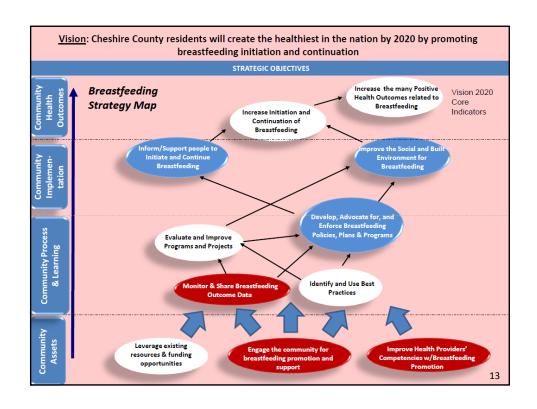


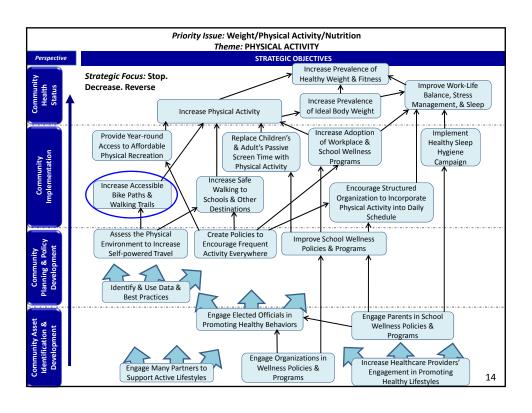


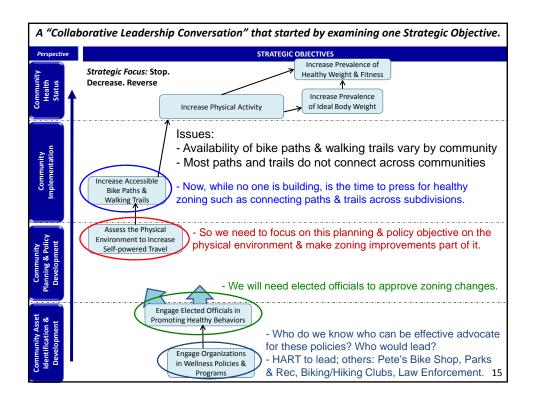














Lagging & Leading Indicators



Population & place outcomes tend to "lag" ...



So you need **performance drivers** that "lead" to enable midcourse corrections to your strategy.

Some performance drivers are participant outcomes



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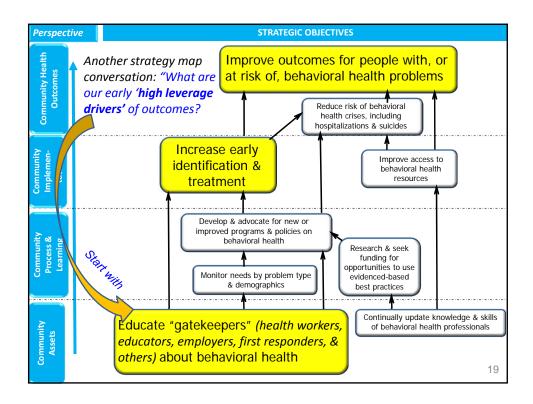
Performance Drivers to Outcomes

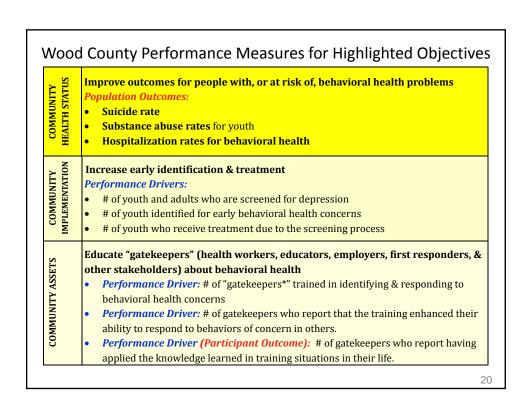


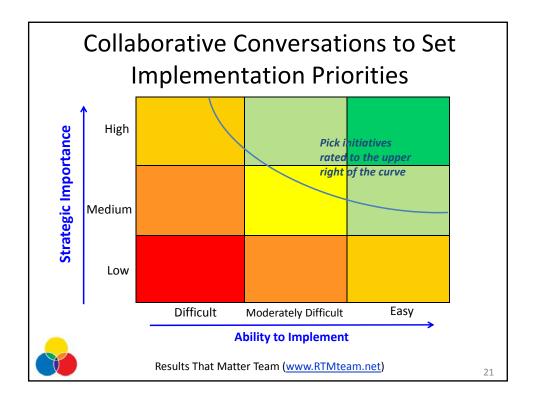
Chains of Success in a CBSC

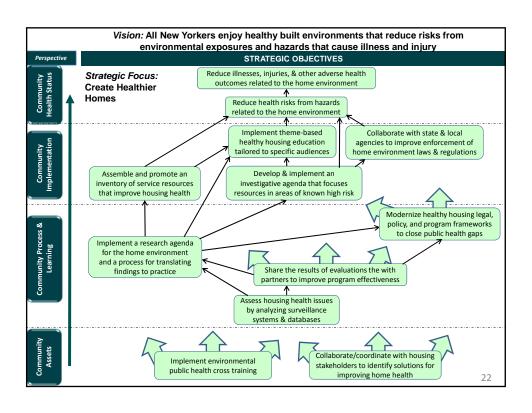


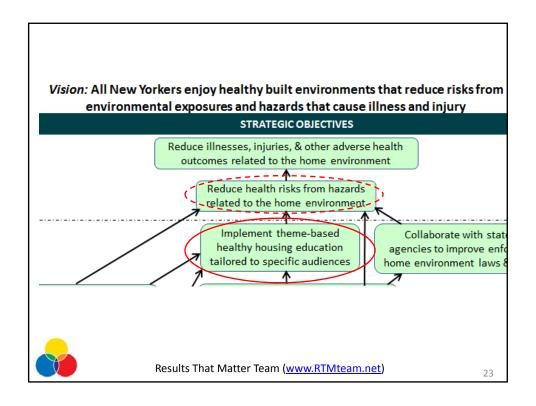
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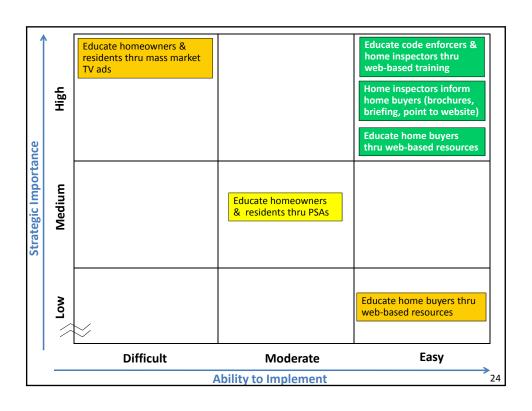












Collaborative Criteria Development for Priorities: Example

Strategic Importance

- Likelihood to "move the needle" on performance measures for this objective
- Likelihood to drive performance of other objective(s) on strategy map
- Urgency: Important to implement soon, e.g.,
 - Other things depend on it, enables things to happen
 - Will lose an opportunity if not done soon
- Implementation will be noticed; generate visibility to increase support
- Severity of problem (no. people affected, severity for those affected)
- Number of people who will benefit from the initiative
- Strength of data supporting strategic importance

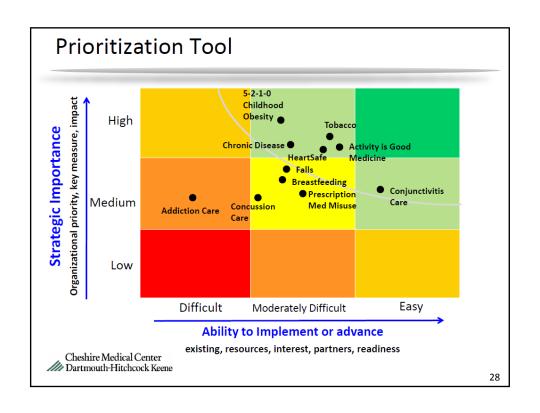


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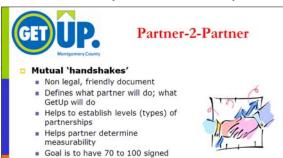
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Clinical Practice-Community Health Integration Criteria Integration Continuum Integration efforts are propelled along a multi-dimensional continuum accelerated by defined facilitators · Formal commitment to Activity is Good Medicine Shared Accountability 5-2-1-0 Collaboration Full Integration Heart Safe Informal agreement on common project Involvement Breastfeeding Prescription med Coordinate resource toward common goal Alignment Tobacco Agree on population, goals, outcome Shared Vision Facilitators **Conjunctivitis Care Falls Prevention** Foundation **Chronic Disease Concussion Care** Cheshire Medical Center **Addiction Treatment ////** Dartmouth-Hitchcock Keene 26

Criteria on Priority Setting Worksheet **Strategic Importance** $\label{prioritize} Prioritize the \ Strategic \ Importance for \ CMC/DHK \ considering \ the \ following \ factors:$ Issue is Need to move Impact is Medium High Low important and quality/clinical substantial and Importance Importance Importance metrics in this population organizational priority level **Ability to Implement** Prioritize the ability for CMC/DHK to Implement or Advance considering the following factors: There is internal Activity There are Difficult to Moderately Easy to integration existing and external Implement Difficult Implement efforts show interest, or Advance of Advance promise and and capacity readiness, and partners can be extended



Community Results Compacts



• **250 partners with agreements** by "sector," e.g., Schools (16 districts), Early Childhood, After School, Health Care Professionals (incl. hospital systems), community (city governments, nonprofits, faith-based, etc.)

'handshakes' by early November

 Provide partners with best practice lists from their sectors to choose what they'll do



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Effective Way to Use Results Compacts

- Collaboratively identify among partners:
 - Issue to be addressed by compact
 - Community outcomes to improve (lagging indicators)
 - Specific actions each partner will take to drive outcomes, and results they can target achieving (leading indicators)
- Each partner is accountable for meeting their own performance driver targets
- Collectively, all partners are mutually accountable for improving community outcomes



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More on Community Balanced Scorecards (CBSCs) at RTMteam.net

Or contact Paul Epstein at paul@RTMteam.net or 212-349-1719

"Quick Guides" & briefing paper relating CBSCs & MAPP at RTMteam.net



Sampling of other website resources:

- "CBSCs to Mesh Strategic Planning, Health Improvement Planning & Accreditation": 2011 APHA Presentation
- Free Webinar "CBSCs to Meet Public Health Challenges"
- "Community Health Strategy Management: Adding Value One Step at a Time": CBSC tools on a limited budget



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