

## **ON THE ROAD WITH THE MLC**

### ***Leading the Way in Quality Improvement and Accreditation***



Greetings from the **Multi-State Learning Collaborative: Lead States in Public Health Quality Improvement**. In our fourth publication of “*On the Road with the MLC*,” we share the innovative work that Montana, Kansas, Missouri and Washington are doing in preparing for voluntary national accreditation and helping infuse quality improvement into the culture of public health. These four states demonstrated extraordinary work and gracious hospitality when hosting staff from the National Network of Public Health Institutes, the Robert Wood Johnson Foundation, visitors from peer MLC states, and representatives from several partnering organizations during their MLC site visits. Partners attending site visits in 2009 include ASTHO, CDC, Muskie School of Public Service, NACCHO, PHF, PHII and PHAB.

To learn more about the Multi-State Learning Collaborative: Lead States in Public Health Quality Improvement and to access the first two publications of “*On the Road with the MLC*,” please contact the [National Network of Public Health Institutes](#).

Warm regards,  
Lee Thielen, MPA  
Chair,  
Multi-State Learning Collaborative: Lead States in Public Health Quality Improvement



## **Montana Implements the LEAN Quality Improvement Tool**

During the Montana site visit, which took place May 11-12, 2009 in Helena, the Montana MLC team demonstrated a variety of efforts it is employing to prepare for national accreditation and implement quality improvement initiatives. The Montana team shared with visitors an overview of the “Public Health System Improvement Task Force.” Since publishing the *Strategic Plan for Public Health Improvement* in 2000, the Task Force has and continues to provide leadership by assessing Montana’s progress in implementing the goals and objectives of the strategic plan, providing updated actions plans, providing policy recommendations to state and local agencies and advocating for statewide public health system improvement efforts. The Montana team has provided extensive training to Local Boards of Health in which public health law, county-specific information and voluntary national accreditation were key components. Additionally, the Montana team partnered with the University of Montana School of Public and Community Health Services to evaluate the training and found that 97% of survey respondents found the training helpful and 91% of respondents indicated they would like further training. The Montana team provided visitors with an introduction of the LEAN quality improvement tool and examples of employing the LEAN model in their collaboratives. Montana also plans to explore regionalization as a mechanism to prepare for and meet the national accreditation standards.

## **Kansas Develops Regional Cooperation**

Kansas hosted its MLC site visit on May 20, 2009 in Topeka. During the site visit, Kansas representatives provided valuable insight into their development of regional cooperation as a method to improve preparedness in a strong “home-rule” state with a decentralized public health system and that leads the nation in the number of counties with fewer than 5,000 citizens. In implementing regional cooperation, inter-local agreements were approved by all county commissions in a respective region and each region met a critical mass population of at least 50,000. Additionally, business practices became standardized and a tracking system was developed. Kansas is now exploring the application of this model to improve other services including preparation for national accreditation. The Kansas MLC team is also reaching out to a variety of key stakeholders within the state. A “Regionalization Summit” and a “New Commissioner Training” were held for Local Boards of Health. Additionally, the Kansas Health Institute hosts a Legislative Luncheon and the state Senate Health and Welfare Committee held a hearing on public health in Kansas.

## **Missouri Focuses on Local Level Improvements**

Missouri held its MLC site visit on May 21, 2009 in Jefferson City. Representatives from Missouri demonstrated a wealth of expertise in public health quality improvement and accreditation. The Advisory Committee and Board of the Missouri Institute for Community Health (MICH) displayed genuine enthusiasm and commitment to the MLC efforts. With the advantage of a state level accreditation program already in place, Missouri was able to provide thoughtful vetting for the PHAB standards and has contributed to collaborative regional planning. Additionally, Missouri has focused on identifying issues of significance at the local level that could benefit from the implementation of quality improvement tools. The Missouri team is working directly with local health departments and broadly encouraging the application of quality improvement processes to public health practice. The involvement of Missouri's smaller agencies in the quality improvement process can serve as an example that successful quality improvement outcomes might be independent of agency size or the scope of a project.

## **Washington Expands Quality Improvement and Connects Accreditation to Performance Management**

The Washington site visit was held August 27-28, 2009 in Vancouver. During the Learning Congress, held on the first day, Washington provided visitors with rich examples from nine local health departments creatively addressing immunization rates, physical activity, and prenatal care. Additional presenters at the Learning Congress provided suggestions for infusing quality improvement in the public health culture, ranging from better engaging local boards of health to encouraging state and local health departments to promote broad participation by numerous employees. During the site visit, held on the second day, the Washington team discussed the connections between accreditation preparation and performance management. The team presented examples of tools used in its state accreditation work and how the state health department prepares for a standards review of a local health jurisdiction. Local health jurisdictions are deepening their commitment to quality improvement by focusing on policy development and community outcomes. Washington is also working to align its state standards with PHAB's standards.

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