A Persistence of Quality:
San Mateo's Quality Improvement Journey and Lessons for Sonoma County

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EXECUTIVE SUMMARY

Since its inception in 1992, the County of San Mateo Human Service Agency (HSA) has persistently built quality improvement into its culture. Its efforts over twenty-one years have culminated in a formalized quality improvement program, a strategy that allows the agency to continuously improve services, collect feedback, and use evidence-based decision making. Both the journey San Mateo County took to its current program and the quality improvement program itself have lessons for the Sonoma County Human Service Department (HSD) and the ways it approaches providing quality services, including:

1. Persistence is essential to developing a culture of quality. Over many years, San Mateo County leadership prioritized resources to improve quality.
2. Every part of the organization, from staff to leadership, must be committed, coordinated, and participate in the effort.
3. An organization must communicate the quality improvement message in a multi-layered way.
4. Quality improvement must be viewed as a process and not a project.

The breadth and scope of the quality improvement program makes implementation of the entire program in Sonoma County challenging; however, there are three components of the program that could serve as interim steps in developing a quality improvement program for HSD:

1. Explicitly link the goals of the county, department, divisions, and programs.
2. Formalize the data and reporting process across the department.
3. Create quarterly meetings with representation from all supportive services and the program divisions.

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Introduction

In Sonoma County, there is a drive from within county government and the communities it serves to maximize resources by making evidence-based decisions to improve services. Over the last several years, HSD has made steps to become more evidence-based by creating a Planning, Research, and Evaluation Division, and sponsoring the Upstream Investments Program; however, the department is always exploring ways to provide better quality services. San Mateo HSA's Quality Improvement Program is a system that "engages staff at all levels in using data to identify areas of needed improvement and implement improvement plans in support of achieving performance targets, program goals, client satisfaction, employee satisfaction, and positive client outcomes."[1]

The program has been implemented and studied for several years, making it an ideal program to study for methods to improve quality. The first part of this case study examines the history of quality improvement in San Mateo and how the agency arrived at its current Quality Improvement Program, detailing the lessons learned for Sonoma County. The second part of this case study explores components of the Quality Improvement Program that could be implemented in Sonoma County.

San Mateo HSA's Quality Improvement Journey

In 1992, San Mateo integrated several services and departments, forming the current HSA. In 1993, shortly after the creation of the agency, work teams from every division were formed to define how success would be measured. These work teams examined how to improve client and community outcomes, address reduced funding, approach increased demand for services, and changing legislation. In 1995, the community was engaged to define what success looked like for the agency and the community, building evidence into the planning. One of the keys to these processes was the "compilation and use of data and statistics to improve and strengthen arguments for change."[2] Underscoring these processes was an understanding that staff needed to be involved in building this culture of quality and owning the results of this process. Part of this importance was a belief that the "development and use of performance measures should be integral to the agency's planning, budgeting and reporting processes."[3]

In 2000, a countywide initiative, Outcome-Based Management (OBM), impacted HSA's quality improvement efforts. The County of San Mateo Board of Supervisors began a process to link performance measures with budget decisions. This program was incorporated into the agency's efforts at developing quality in its culture. OBM provided opportunities to refine the organization's goals, particularly around utilizing limited resources to provide the biggest benefit and impact on it clients.[4] OBM also gave the agency the platform to communicate the organization's vision, goals, and progress to its staff and the community it served.[5] Another important aspect of this process was the opportunity to align the goals set by the Board of Supervisors and HSA.

Coinciding with the implementation of OBM, HSA formed a Planning and Development unit

responsible for customer service, OBM, strategic planning, and human resources policy. The creation of this unit was a direct result of seeing the need for dedicated staff to help improve HSA's service quality and effectiveness, while doing so in a strategic and sustainable manner.[6] Creation of this unit helped to institutionalize the agency's efforts to foster quality, and brought in multiple disciplines to make sure that improvement was sought from different directions and at different levels of the organization while still remaining coordinated.

Starting in 2002, HSA began exploring the accreditation process through the Council on Accreditation (COA). In 2003, HSA created a Continuous Quality Improvement (CQI) Program guided by COA standards. Over several years, this program was implemented and CQI plans were developed by programs, synthesized by the Research and Planning Unit, and reviewed by HSA's executive team. This process evolved to include all programs at the agency, and involved staff at every level in the organization.[7]

The contract with COA coincided with a change in the agency's director. The new agency director, Beverly Beasley Johnson, took this project as an opportunity to further build a culture of quality. To her, it was important that accreditation be a sustainable process that was built into the culture of the organization and not just a project that had an end date.[8] Implementing the COA standards was a multi-year process that was intended to be sustainable. This process occurred during the recession from 2007 to 2009, which made the transition particularly difficult given the amount of staffing layoffs and turnover as the result of budget reductions. Even though budget shortfalls threatened quality improvement programs in San Mateo, HSA leadership chose to fund the quality improvement program staff, and keep quality improvement initiatives a priority by dedicating staff time throughout the organization while ensuring client services would not be impacted. These decisions helped show staff that quality improvement mattered even during times of scarce resources. The efforts of hundreds of staff and a multitude of

committees meant that HSA was fully accredited in 2008, and reaccredited in 2012. The processes and programs put in place through the accreditation process fall under the general umbrella of HSA's.

Quality Improvement Program.[9]

San Mateo's Quality Improvement Program is a multi-strategy effort to support "an ongoing culture of excellence." Part of this effort is to foster a culture that "values service quality and continual efforts to achieve strong performance, program goals, and positive results for clients." To make this a reality, "the continuous improvement process is embedded in every aspect of the San Mateo Human Services Agency, which provides opportunities for employees at every level to participate in the process."[10] HSA's executive team, managers, supervisors, and staff have been steeped in quality improvement, which is integrated into their executive, division, program, and staff level planning. One of the most visible parts of this effort is the alignment between the goals of San Mateo County, HSA, and HSA Divisions.[11]

This philosophy shines through in both the everyday work of the agency, and in broader initiatives. Like Sonoma County, San Mateo runs an emergency residential care facility for children. Through a quality improvement case review process, staff review case files and identify ways to improve service to clients. Not only are staff involved in the review, but they are able to see how the quality improvement process directly improves service their clients receive. On a broader scale, HSA's Economic Self Sufficiency Division recently went through a service delivery remodel. The way HSA delivers services has moved from being case-based to being task-based. This effort was made following the tenets of the Quality Improvement Program:

- Engaging and empowering all staff to improve services and their working environment
- Aligning services, policies, and procedures with best practices
- Using data and information for decision-making, learning, and problem-solving

▪ Seeking feedback for clients, staff, and stakeholders, and openly communicating decisions, plans, recommendations, and progress[12]

Underlying the quality improvement program is the creation of ways for the organization to communicate with itself. HSA utilizes a variety of methods that have included reports, performance and quality improvement plans, quality improvement operations manuals, newsletters, staff meetings, staff satisfaction surveys, and the agency director coming to unit meetings.[13] All of these communication avenues help the organization stay on the same page and push the idea that the quality improvement program is a group effort.

Both the previous quality improvement efforts and the current Quality Improvement Program provide several lessons for Sonoma County. San Mateo's efforts have spanned decades, and have consistently prioritized significant resources into creating a culture of quality. HSA has built an organization, from its leadership to line staff, which is committed, coordinated, and participating in quality improvement. The quality improvement message is multi-layered and is communicated consistently through formal and informal methods. Most importantly, San Mateo has made quality improvement a process and not a project.

Recommendations for Sonoma County

Trying to implement a formal Quality Improvement Program in Sonoma County at HSA's level would be challenging, however, three aspects of the Quality Improvement Program would help HSD begin to implement a quality improvement program:
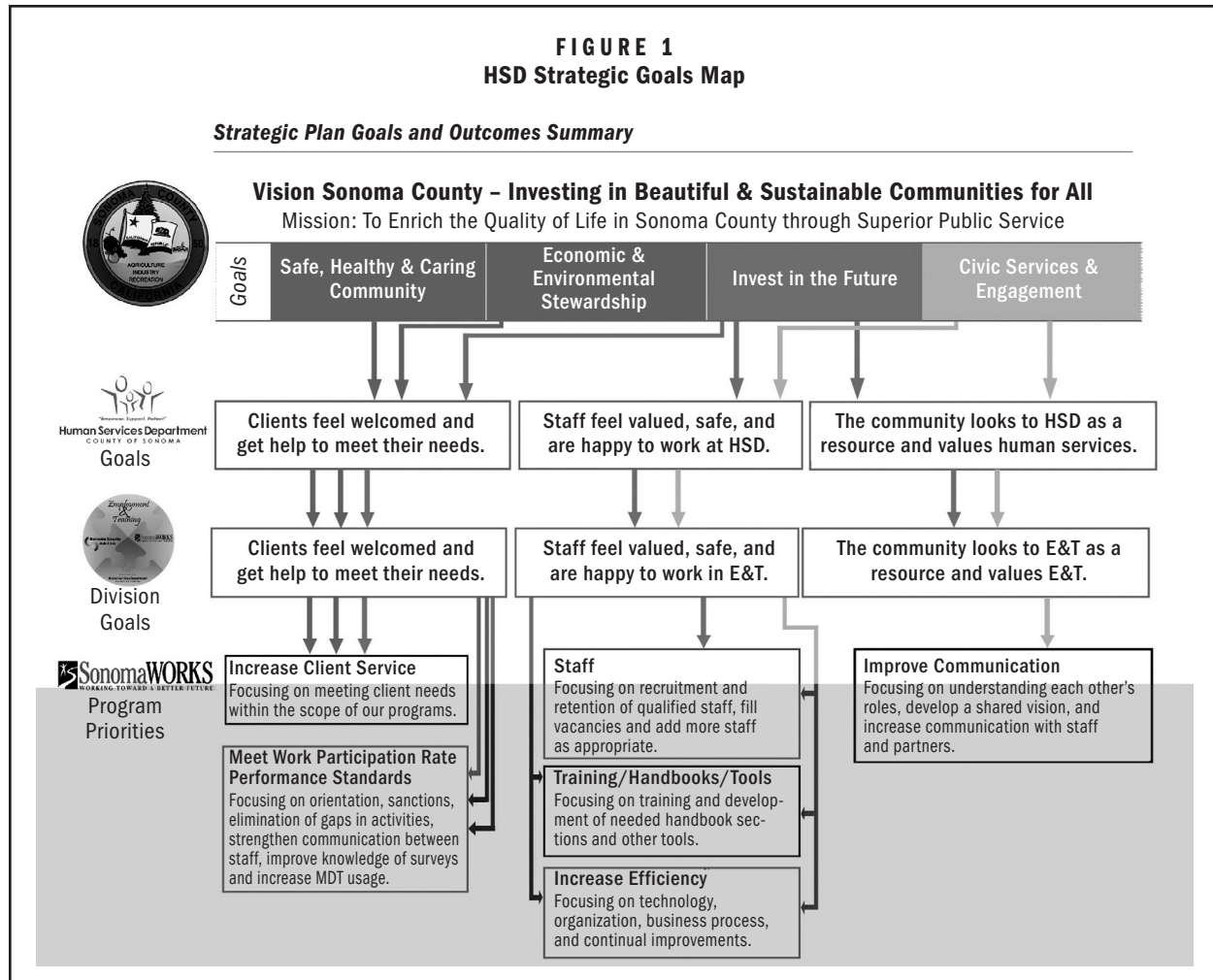
1. Explicitly link the goals of the county, department, divisions, and programs
2. Formalize the data and reporting process across the department through Data, Analysis, and Reporting Teams (DART)
3. Create quarterly meetings with representation from all supportive services and the program divisions

Explicitly linking the goals of the county, department, divisions, and programs would be a first step to implementing a quality improvement program, and would provide several additional benefits. San Mateo County has worked extensively on the visibility and creation of goals with the result of the community, Board of Supervisors (BOS), HSA, and clients having a clear understanding of HSA's goals and the progress toward reaching them. This has helped HSA work more efficiently with their Board of Supervisors and community advocates. It has also helped the agency create strategic plans.[14] In Sonoma County, the Board of Supervisors set forth several goals in the last strategic plan. HSD does link to the BOS strategic goals in board items and within the annual budget narrative; however, explicit links are rarely made outside those two instances. San Mateo's experience suggests that codifying the links between county, HSD, division, and program goals is a step toward unifying the organization into a shared vision and communicating that vision to stakeholders. It also allows staff to know how their job in the organization fits into the larger mission, increasing their organizational commitment.

HSD and its divisions have many goals that interconnect; however, their relationships could be documented and used more effectively to communicate HSD strategies, projects, and initiatives. Additionally, documenting these goals would assist in the creation of new strategies, projects, and initiatives because they could be integrated into existing goals.

Figure 1 is a draft of a possible Goal Map.

In order to link goals, HSD would need to devote significant staff time to this recommendation. The first step would be to secure executive team approval and to create a project charter. The workgroup that forms from this charter would need representation from every division, and would likely consist of 10-15 people. Their initial task would be to document current county, department, division, and program goals. After this task is completed, the committee would coordinate with divisions and programs to change or update goals with an eye for ways to track

FIGURE 1
HSD Strategic Goals Map

Strategic Plan Goals and Outcomes Summary

Vision Sonoma County – Investing in Beautiful & Sustainable Communities for All
Mission: To Enrich the Quality of Life in Sonoma County through Superior Public Service

Goals: Safe, Healthy & Caring Community | Economic & Environmental Stewardship | Invest in the Future | Civic Services & Engagement

Goals
Clients feel welcomed and get help to meet their needs.
Staff feel valued, safe, and are happy to work at HSD.
The community looks to HSD as a resource and values human services.

Division Goals
Clients feel welcomed and get help to meet their needs.
Staff feel valued, safe, and are happy to work in E&T.
The community looks to E&T as a resource and values E&T.

Program Priorities

Increase Client Service
Focusing on meeting client needs within the scope of our programs.

Meet Work Participation Rate Performance Standards
Focusing on orientation, sanctions, elimination of gaps in activities, strengthen communication between staff, improve knowledge of surveys and increase MDT usage.

Staff
Focusing on recruitment and retention of qualified staff, fill vacancies and add more staff as appropriate.

Training/Handbooks/Tools
Focusing on training and development of needed handbook sections and other tools.

Increase Efficiency
Focusing on technology, organization, business process, and continual improvements.

Improve Communication
Focusing on understanding each other's roles, develop a shared vision, and increase communication with staff and partners.
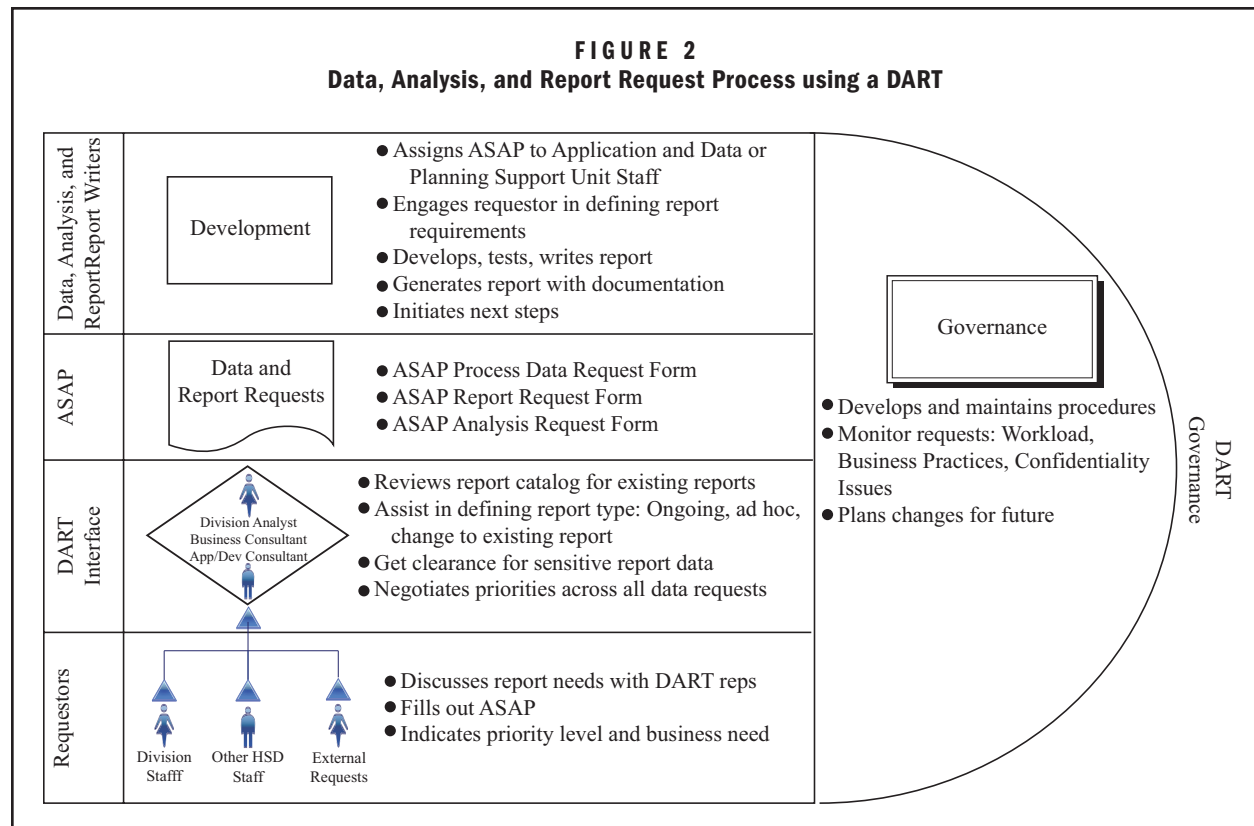
goals, align goals department wide, and explore ways to get buy-in for the goals from staff.

The second recommendation is to formalize the data and reporting process through the creation of division level Data, Analysis, and Reporting Teams (DART). This would help coordinate HSD's data gathering process by allowing divisions to more easily prioritize and direct data, analysis, and reporting requests. In response to a proliferation of data requests, San Mateo's Economic Self Sufficiency (ESS) Division created a DART. The purpose of the DART is to provide governance for data and report requests by:

▪ 1. Defining a process for submitting data requests; screening requests; and approving requests

2. Monitoring the levels of activities, and determining if project deliverables are met and if deadlines are exceeded

3. Minimizing duplication of requests by cataloging reports[15]

In San Mateo, the DART team is composed of the Program Manager, Management Analysts, Program Analyst, and Reporting Analysts, and is therefore a high-level group.[16] In Sonoma County, creating a DART for each division would allow divisions to oversee and prioritize their data and reporting requests while creating visibility for the end products. It would also allow divisions to more easily incorporate division goals into their data and reporting requests, and therefore monitor how and if goals were being achieved. The workflow for requests using the DART process might look like *Figure 2*.

FIGURE 2
Data, Analysis, and Report Request Process using a DART

Data, Analysis, and Report/Report Writers	**Development**	• Assigns ASAP to Application and Data or Planning Support Unit Staff • Engages requestor in defining report requirements • Develops, tests, writes report • Generates report with documentation • Initiates next steps
ASAP	**Data and Report Requests**	• ASAP Process Data Request Form • ASAP Report Request Form • ASAP Analysis Request Form
DART Interface	Division Analyst Business Consultant App/Dev Consultant	• Reviews report catalog for existing reports • Assist in defining report type: Ongoing, ad hoc, change to existing report • Get clearance for sensitive report data • Negotiates priorities across all data requests
Requestors	Division Staff Other HSD Staff External Requests	• Discusses report needs with DART reps • Fills out ASAP • Indicates priority level and business need

Governance
• Develops and maintains procedures
• Monitor requests: Workload, Business Practices, Confidentiality Issues
• Plans changes for future

DART Governance

Implementing this recommendation would require both staff time and changing work processes. A close collaboration between the IT and the analytic staff would be needed to create a framework to process, assign, and track requests. Additional staff time would need to be dedicated to the governance aspect of this proposal, and DART governance teams would need to be developed by each division. These teams would likely consist of the division director (or designee) and program division analysts, as well as IT and analytic staff, and would meet monthly or quarterly.

The third recommendation is to hold quarterly meetings with representation from all supportive services and the program divisions. In San Mateo, weekly meetings are held with representation from program divisions and the Administrative and Information Services Division, which includes fiscal, training, IT, facilities, and quality management staff. These meetings ensure that the organization's support staff have the best information to assist the program divisions' goals, day-to-day operations, and larger projects. Simply having everyone in the same room helps open communication and improves coordination, especially on big projects.

In Sonoma County, weekly meetings would be difficult to coordinate and sustain. Initially, quarterly meetings could be scheduled between the program divisions and the support divisions. These meetings could be a part of regularly scheduled division management meetings, or scheduled separately. Currently, almost all of the support divisions and their units have a staff member assigned to support specific program divisions. Those who do not could assign a representative for the meeting. Although it would be ideal for each support unit to have representation at the meeting, support divisions could consolidate their representation. These meetings could assist divisions in finding the resources they need to meet their program goals. *Figure 3* displays what representation at the meetings could include.

Implementing this recommendation would require coordinating staff time so that everyone could be in the same room, and the commitment to
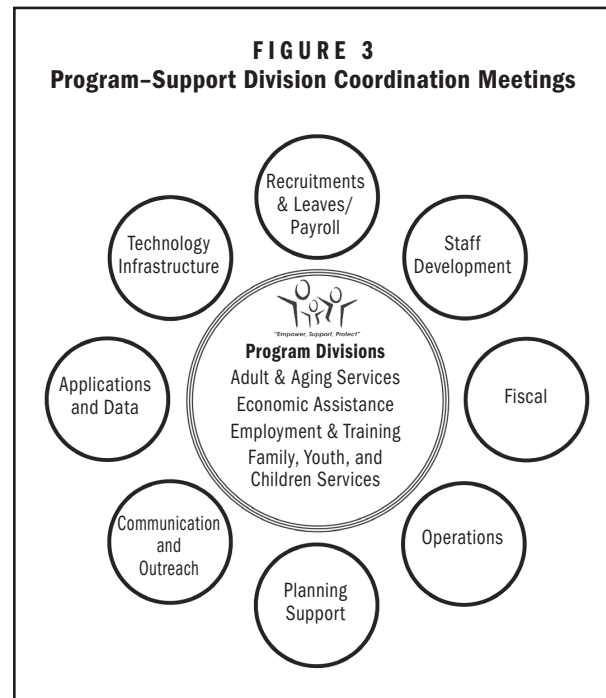
have representation at every meeting. Fortunately, since many support divisions have staff regularly attending program division meetings, it is likely that implementation of this recommendation would not add an additional workload to most staff, but would rather involve a rearrangement of current meeting time.

Conclusion

San Mateo County's experience with quality improvement underscores that any effort in Sonoma County must be focused on making quality improvement a process rather than an outcome. Although implementing a quality improvement program on the scale of San Mateo is challenging, Sonoma County can begin a quality improvement journey by explicitly linking goals, creating forums for support and program divisions to collaborate more effectively around goals, and formalizing how data and report requests are made to track goals.

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FIGURE 3
Program–Support Division Coordination Meetings

Recruitments & Leaves/ Payroll · Technology Infrastructure · Staff Development · Applications and Data · Fiscal · Communication and Outreach · Operations · Planning Support

"Empower, Support, Protect."
Program Divisions
Adult & Aging Services
Economic Assistance
Employment & Training
Family, Youth, and
Children Services

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