Quality Improvement Initiative: Grants Process Committee

Kentucky Public Health
Prevent. Promote. Protect.

TEAM MEMBERS
Division of Administration and Financial Management: Martie Kupchinsky (State Budget)
Division of Epidemiology and Health Planning: Medina Tipton (HIV/ADIS), Peggy Ellis (Reportable Diseases), Jim House (Preparedness)
Division of Laboratory Services: Laura Iwig (Epidemiologist)
Division of Maternal and Child Health: Irene Centers (Tobacco)
Division of Prevention and Quality Improvement: Bonita Bobo (Heart Disease and Stroke), Theresa Renn (Diabetes)
Division of Public Health Protection and Safety/Environmental: Matt McKinley (Radiation Health Branch)
Division of Women's Health: Rebel Baker (Assistant Director)
Commissioner's Office: Rona Dawson (State Accreditation Coordinator), Tricia Okeson (Staff Assistant to Commissioner), Janie Cambron (Performance Improvement Manager)

PLAN

Problem Statement

With the current grant process, employees spend time looking for documents which may be outdated, waiting for signatures, and trying to figure out the process as a whole, as they may not have been adequately trained. This causes a lag in time and thus results in last minute submissions and can cause stress on the employee.
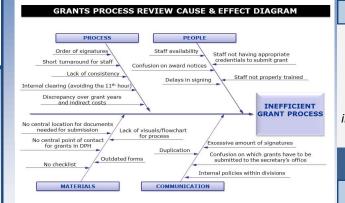
Aim Statement

An opportunity exists to improve the Grants process for the Kentucky Department for Public Health (KDPH) Employees beginning with identification of the current process and necessary documents and ending with a streamlined process that is user friendly, centrally located, and timely.

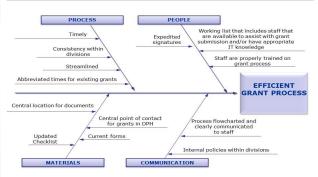### Process Outline & Relevant Data

The current process is not streamlined. A pre-test survey was completed with KDPH employees in regards to the current grant process and results were better gauge what to focus on in the future. We will utilize survey monkey for the pre-survey.

Identify Potential Causes

GRANTS PROCESS REVIEW CAUSE & EFFECT DIAGRAM

Identify Potential Solutions

GRANTS PROCESS REVIEW SOLUTION & EFFECT DIAGRAM

Improvement Theory

By having the process streamlined, employees can spend more time focusing on grant content and have necessary information they need centrally located, such as the KDPH intranet site. Employees can feel confident that they have the most current documents required. This will reduce stress on the employees by giving him or her the tools they need to complete the grant and a more streamlined process to work through the system, hopefully all the while having a decrease in time from start to finish. This will also be better for grant approval staff in that they will not be receiving documents to review last minute before signatures are required.

DO
Test the Theory

A pre-test was conducted within the department to gauge what issues current users were experiencing as well as what would be beneficial to them in the future. A workgroup was formed to collect the necessary documents and to create a webpage on the KDPH intranet website. The website went live in January 2013 with a notification email to staff of the new resource.

CHECK
Study the Results

KDPH will send out a post test in the Summer of 2013. This will be used to compare pre and post test results and to see if improvements have been made. Results will be shared with senior leadership as well as with all KDPH staff. Communication of results and moving forward with recommendations for change are both equally important.

ACT
Standardize or Develop New Theory

Based on the results from the post Summer 2013 survey, we will adopt this or adapt and revisit based on the needs of KDPH staff. We have already received great feedback from staff regarding the utilization of the intranet site. We have also identified other documents through this process that would be beneficial to add to the intranet site from the pre-test that was administered.

Future Plans

KDPH has an annual update planned for the documents on the intranet site. Based on positive feedback from staff, we feel confident that we will keep the intranet site and update as required based on staff needs. This was a short cycle PDSA QI project that gave the staff encouragement that by using evaluation and data with a structured process, improvements are possible.