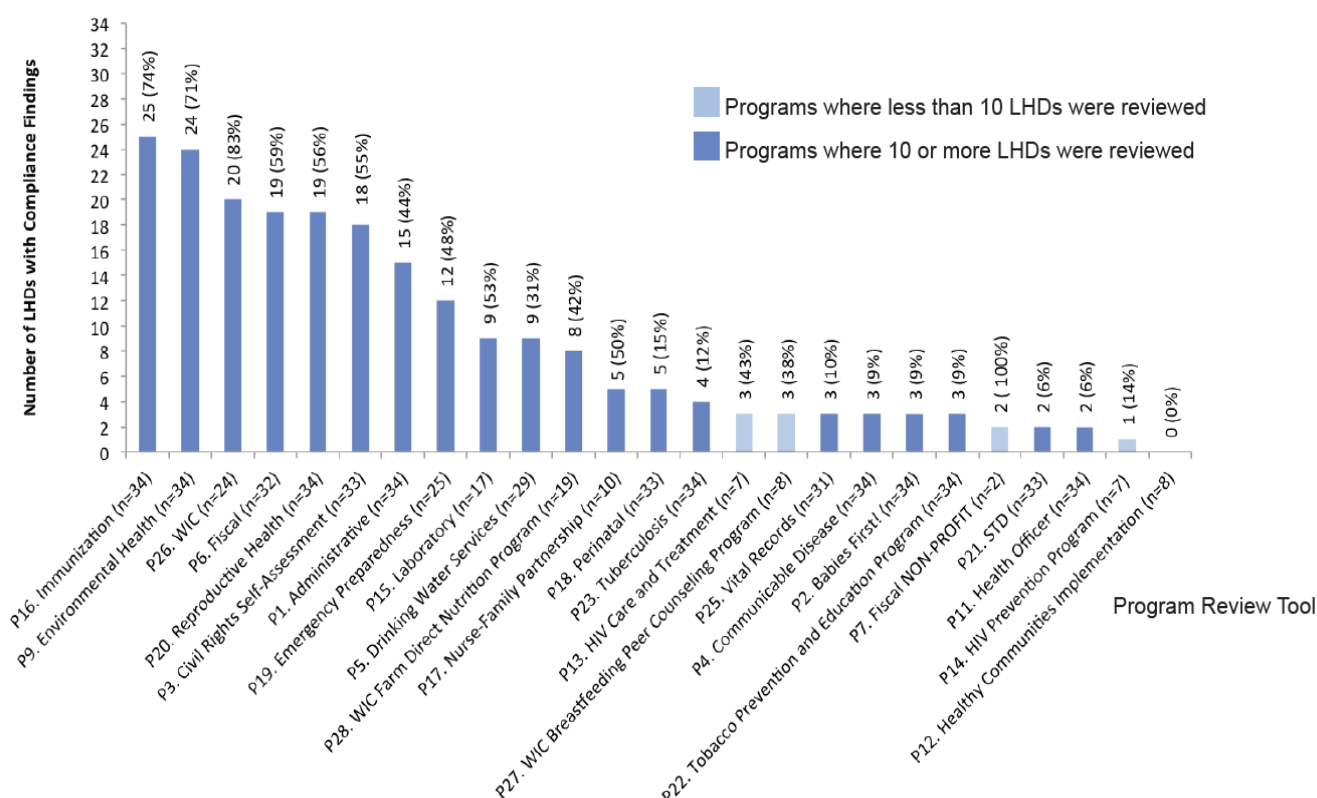**Improving the Triennial Review process**

Background:

The triennial review is a three-year review cycle during which each of Oregon's 34 Local Public Health Authorities (LPHAs) is reviewed by the Oregon Health Authority, Public Health Division (OHA, PHD) to assess compliance with state, federal and other contract requirements for providing public health services.

In 2014, the Office of the State Public Health Director (OSPHD,) in consultation with the Conference of Local Health Officials (CLHO), undertook a quality improvement project for triennial review. Many improvements/recommendations have been implemented since the project ended in June 2015, such as the regional triennial review schedule.

The Triennial Review Evaluation study examined compliance findings from a three-year cycle (2014-2016) of triennial reviews to identify common trends among the findings and to identify specific barriers and challenges to achieving compliance, as well as training and technical assistance needs to support greater success in meeting compliance requirements. The evaluation is also a change agent tool for public health modernization as the program review tools used in the triennial review process were analyzed to determine the extent to which they align with the 4 public health modernization foundational programs (communicable disease control, environmental health, access to clinical preventive services, and health promotion and disease and injury prevention) and one of seven foundational capabilities (emergency preparedness and response).

Results

Number of LHDs with Compliance Findings by Program Review Tool

LHD Interviews Yes/No Response: Top 3-4 self-reported contributing factors for LHDs with Compliance Findings

Factor	Program				
	Communicable Disease	Fiscal	Immunization	Reproductive Health	WIC
Did not understand requirements			✔	✔	
External factors		✔	✔	✔	
Lack of clarity from OHA on requirement	✔				
Lack of qualified staff available	✔		✔		
Lack of resources	✔				✔
Lack of staff training	✔	✔		✔	
Not aware of requirements		✔			✔
Poor record keeping		✔			✔
Staff turnover			✔	✔	

Recommendations:

- Recommendations from TR Evaluation (2017): Review Tools and Review Process
    - Align review tools with state and federal regulations
    - Standardize the application of review tools among reviewers
    - Frame the triennial review as a more proactive, collaborative, quality improvement process
    - Clarify and communicate changes in review tools and requirements well in advance of the process

- Recommendations from TR Evaluation (2017): Organizational Factors and Collaboration
    - Improve training opportunities:
        – Onboarding of new staff, and skill refreshers
        – Understanding of review process and requirements
        – Sample protocols
        – Information and exchange among LHDs
            - Promote leadership and management role in review process
    - Support staff time efficiency by integrating review requirements into existing centralized record keeping systems trainings, such as integrating quality assurance requirement information into ORPHEUS and other support for front-line LHD staff (e.g. improve data retrieval functionality for the review process).

- Recommendations from Process Improvement Project (2014)
    - Reduce duplication across program review tools (**Ongoing**)
    - Reduce multiple asks to counties for documents used by multiple programs. (**Ongoing**)
    - Make the overarching in-person exit interview with Boards of Health (often Commissioners) optional for LHDs. **(Completed)**
    - Review certain areas of tools that may be unnecessary and review clarity and consistency of review requirements **(Ongoing)**
    - Maintain review process on 3-year timeline but prioritize regional scheduling. **(Completed).**

Next Steps:

Improving the Triennial Review process

Operational fixes OSPHD is considering:

1. Updates review tools to:

   ✓ Adapt the review tool to differences in public health service delivery
   ✓ Address duplication of components across tools, where possible
   ✓ Eliminate components that might not be necessary
   ✓ Correctly cite all applicable rules and statutes
   ✓ Align the review tools with PH Modernization programs and capabilities.

2. Develop SOPs to improve standardization and inter-rater reliability between and across reviews.

Macro/organizational OSPHD is considering:

1. Engage in larger system training conversation through CLHO Systems and Innovation Committee and CLHO to discuss overall training needs, venues, frequency, available resources, etc.
2. Develop an annual program update training plan for locals and PHD Reviewers. The training will focus on Program Element and Triennial Review tool changes, how to be successful with program implementation and the triennial review process. This could reduce and streamline requests for training and technical assistance and ultimately improve performance.

Documents Relied Upon:

Triennial Review Evaluation Final Report:

http://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/LOCALHEALTHDEPARTMENTRESOURCES/Documents/triennial-review-evaluation-report.pdf

Triennial Review Executive Summary:

http://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/LOCALHEALTHDEPARTMENTRESOURCES/Documents/triennial-review-evaluation-report-executive-summary.pdf

Triennial Review Improvement Process:

http://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/LOCALHEALTHDEPARTMENTRESOURCES/Documents/Triennial%20Review%20Tools/triennial-review-survey-report2015.pdf