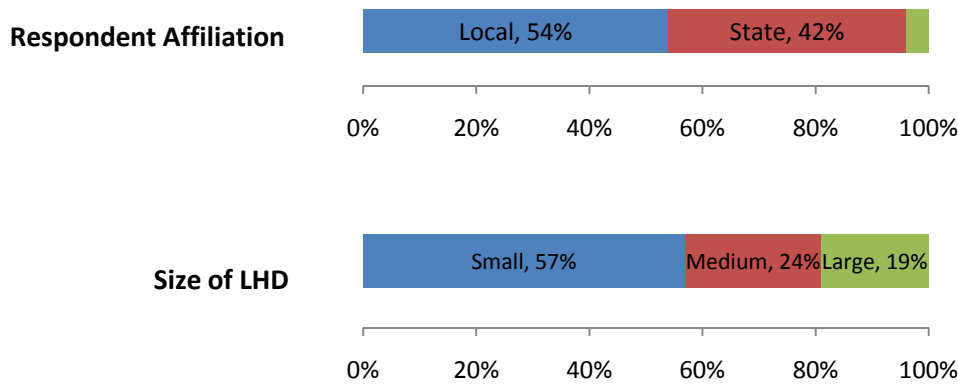


**Respondent Affiliation and Role**

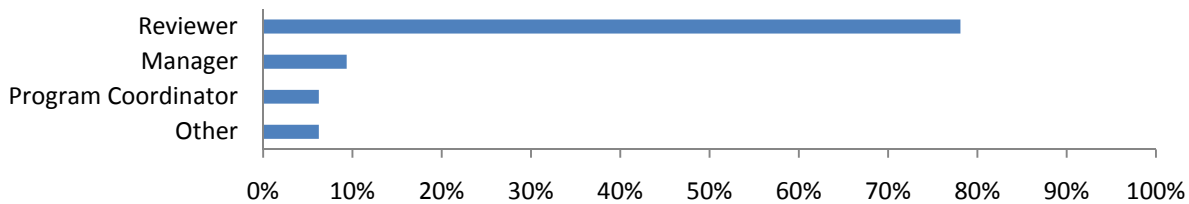
**Summary:** The survey respondents were well distributed among state and local staff. They represent a wide range of roles and programs.

The survey was distributed to both state and local public health staff during January 2015. It was completed by 77 respondents. Of these respondents, 54% (n=42) represent local health departments and 42% (n=32) represent the Oregon Public Health Division. The remaining 4% of respondents (n=3) did not provide their affiliation. Of the 42 Local Health Department (LHD) respondents, 57% (n=24) represent small departments, 24% (n=10) represent medium departments, and 19% (n=8) represent large departments.

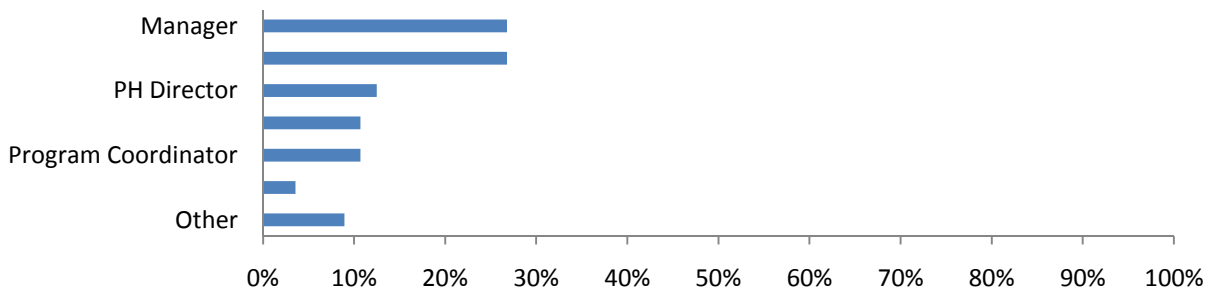


The survey respondents represent a wide range of roles and programs. The most common state staff role is reviewer, as seen in the graphs below, and the most common local role was manager and administrator. Respondents could choose more than one role.

**State Staff Roles**

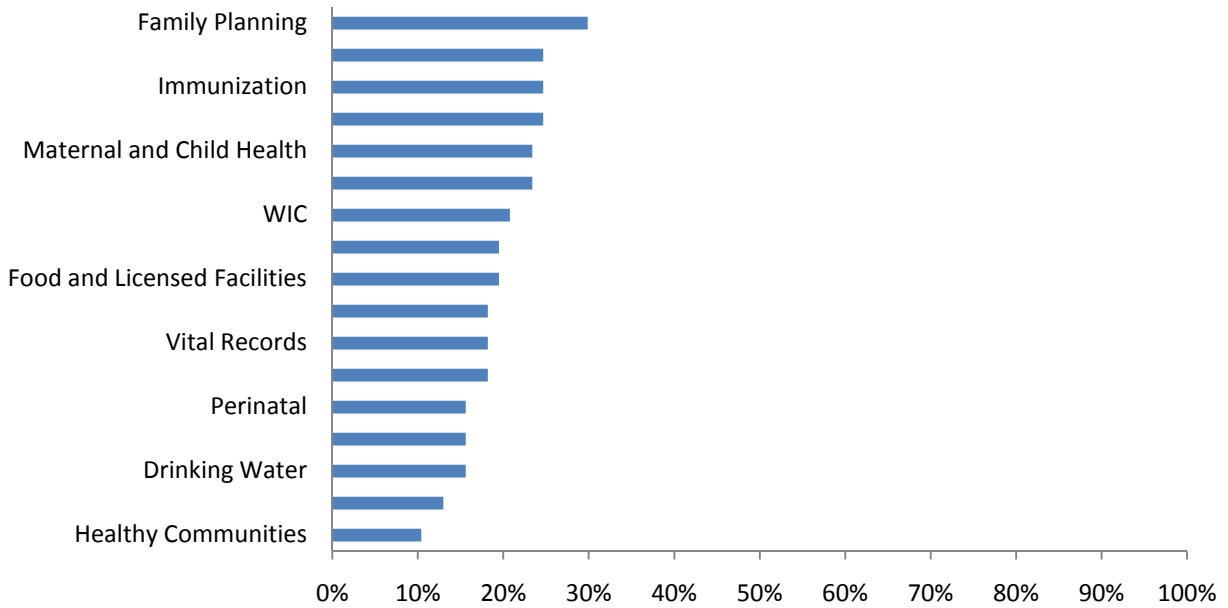


**Local Staff Roles**



Triennial Review Survey: January 2015

Programs were well-represented within the survey, as seen in the following graph. All programs were represented by between 10-30% of respondents.

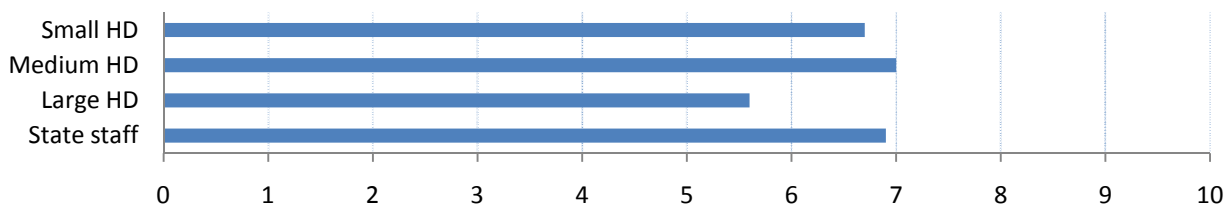


**Overall Satisfaction with Triennial Review**

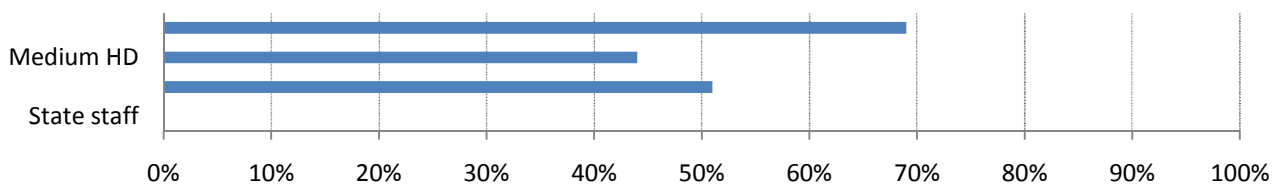
**Summary:** Overall satisfaction has room for improvement. Large Health Department staff are the least satisfied.

Respondents were asked to rate their overall satisfaction with the triennial review process, on a scale from 1-10, with 10 being the best. Average ratings were similar between staff and local staff at small and medium health departments. Large health department staff rated the overall process the lowest.

**Average Rating of Triennial Review Process**



**% Agree "The Triennial Review Plays an Important Role in Improving the Work of the Local Health Department"**



**Goals of Triennial Review**

**Summary:** Respondents generally agree that contract compliance is one of the most important goals of the process. While the majority of respondents overall agree that the current process is the best way, state staff are the least likely to agree.

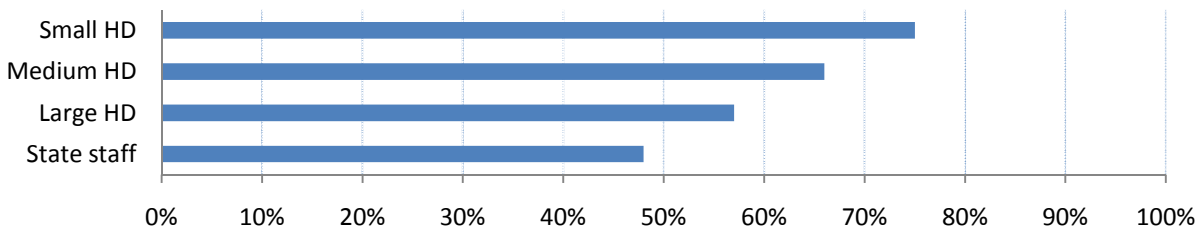
State and local staff were asked to rank the goals of the triennial review process in order of importance. As seen in the following table, contract compliance was ranked either #1 or #2 overall for all respondent groups. Program improvements were ranked #1 or #2 for all local staff respondent groups. Relationship building was ranked #2 by state staff but lower (#4 and #5) by local respondent groups. Risk management and visibility with the Oregon Public Health Division were ranked lowest by all respondent groups.

Table 1. Rankings of Triennial Review Goals

	Small HD	Medium HD	Large HD	State Staff
Contract compliance	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>
Program improvements	<b>1</b>	<b>2</b>	<b>2</b>	4
Technical assistance	3	4	3	3
Relationship building	4	5	4	<b>2</b>
Accountability with Board of County Commissioners	5	3	7	5
Risk management	6	6	6	6
Visibility with the Oregon Public Health Division	7	7	6	7

Respondents were asked if they feel that the current process is the best way to ensure contract compliance. The majority of respondents (61%) answered yes. This number varied by respondent group, as seen in the graph below. State staff were the least likely to agree that the current process is the best way to ensure contract compliance.

**% of Respondents Who Agree That the Current Process is the Best Way to Ensure Contract Compliance**

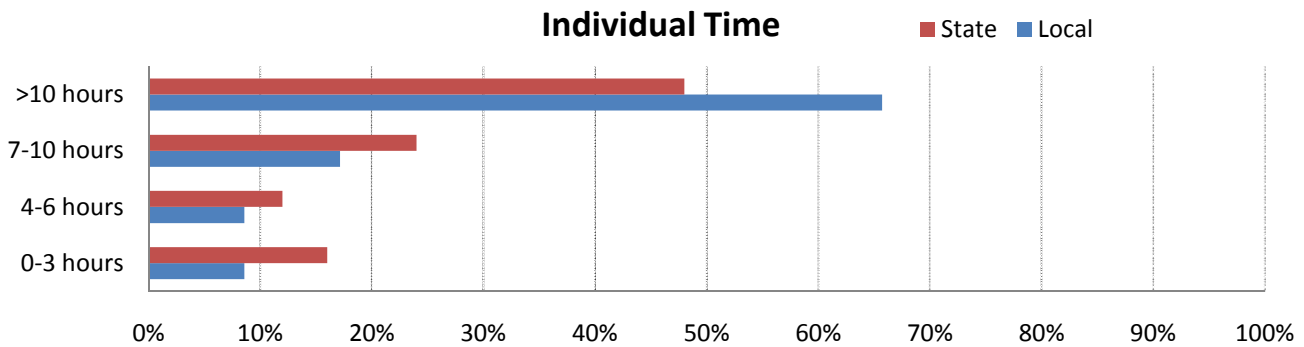


The respondents were also asked to comment if the current process is the best way to achieve contract compliance. The majority of state staff comments (57%) were related to the frequency of review, e.g. changing the review to a more frequency and/or more streamlined process. An additional 14% of state comments emphasized the importance of on-site visits, and 24% of state commenters had no specific recommendations for another way to ensure contract compliance. The majority of local commenters (70%) had no specific suggestions for another way to ensure contract compliance, with the remaining 30% of comments related to streamlining the process and/or changing the frequency of reviews.

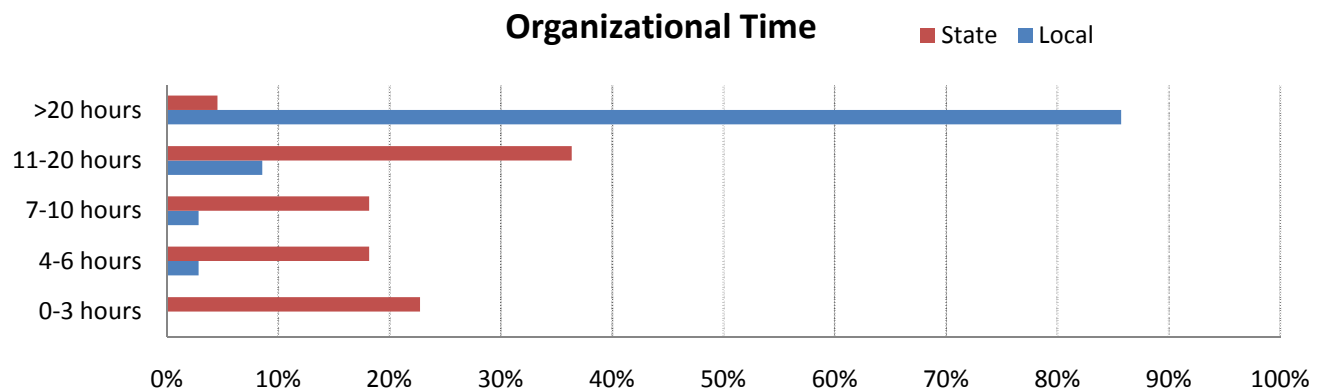
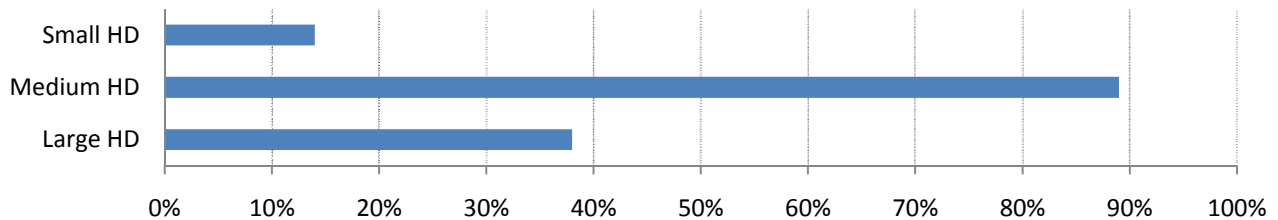
**Time Spent on Triennial Review**

**Summary:** Local staff spend significantly more time than state staff in the triennial review process. Small health departments spend the most organizational time, but they are the most likely to agree that it is time well spent.

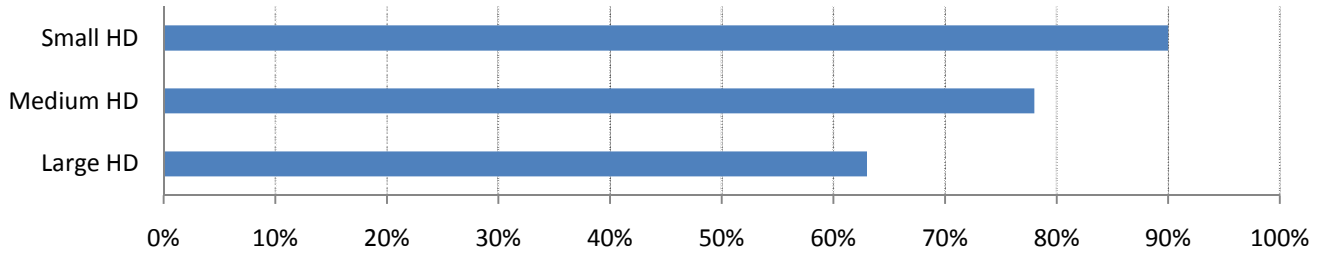
The time spent preparing for and participating in a triennial review varied between state and local staff, as seen in the following graphs and comments. Local staff were much more likely to select the highest time option for both individual and organizational time spent in preparation, as seen in the graph below. Staff at small health departments were the most likely to have more than 20 hours of organizational preparation, but they were also the most likely to agree that the time is well spent. The majority of state staff comments related to time (58%) indicated that travel time is a factor that can vary widely based on the county. Almost one third (29%) of local comments indicated that the time spent is more than the item scale indicated, and another 29% of comments indicated that preparation for the review is an ongoing activity.



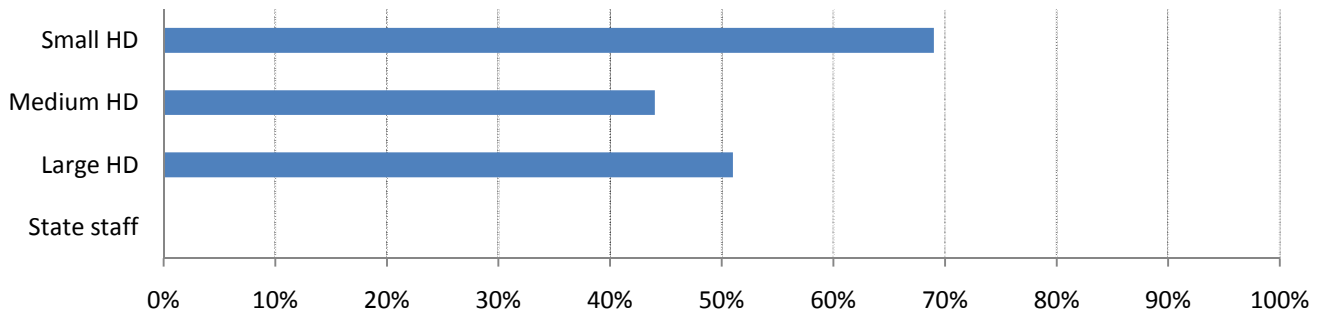
**Individual Time by Local HD: % Spending More than 10 Hours**



**Organizational Time by Local HD: % Spending More than 10 Hours**



**% Agree "The Time I Spent on the Triennial Review is Time Well Spent"**

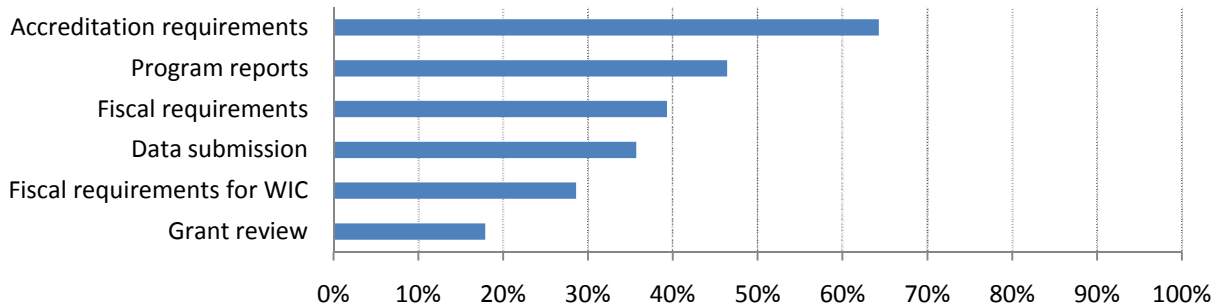


**Triennial Review Duplication**

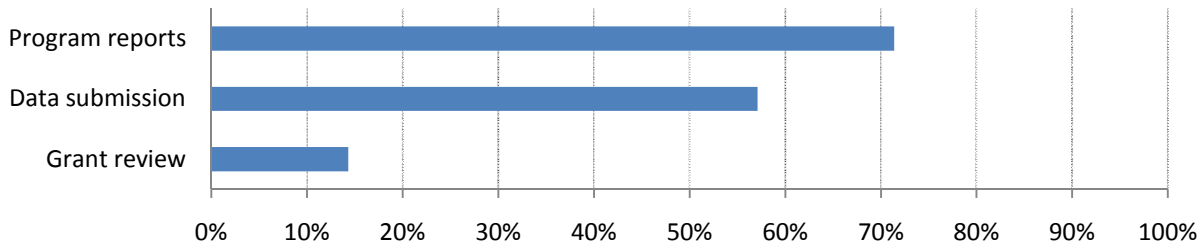
**Summary:** Duplication is commonly reported. The most common areas of duplication are with accreditation requirements (local staff) and program reports/reviews/data submissions (state staff).

Respondents were asked, "Is the current triennial review process duplicative of other work you are already doing? If so, please check all that apply." The results varied by type of respondent, which was mirrored in the open-ended responses about this topic. Only about half of respondents answered this question, which limits the analysis. The most common type of duplication seen by local staff was with accreditation requirements. The most common types of duplication seen by state staff were program reports and data submission.

**Local Staff: Types of Duplication**



### State Staff: Types of Duplication



State and local staff comments about duplication varied widely. The majority (63%) of state staff comments indicated that they found limited duplication within the triennial review process. One third (32%) of state staff comments indicated that they see duplication with other program reports, reviews, and/or data that is submitted to the state.

Local staff comments were more split, with 38% of comments indicating limited duplication and 38% of comments indicating duplication with other program reports, reviews, and/or data that is submitted to the state. Sixteen percent (16%) of comments were related to duplication between reviewer requests, and 9% of comments were related to duplication with accreditation.

### Improvements to the Triennial Review Process

**Summary:** Many respondents suggested improvements. Local staff improvements centered around improving document sharing, documentation, and aligning processes. State staff improvements centered around aligning protocols, review timing, and travel logistics.

Respondents were asked, “If you could make one to three improvements to the current triennial review process, what would they be?” Comments and suggestions varied, but several themes emerged.

**Local themes.** The most common theme of local comments, with 38% of comments, was improving electronic documentation and/or document sharing/template options. Comments mentioned increasing access to templates and example documents, and having the option to submit documents electronically. An additional 18% of comments suggested aligning the review process with accreditation, 16% of comments suggested aligning requests across reviewers, and 9% of comments were related to the timing of the review (e.g. coordinating the scheduling, having more scheduling flexibility).

A related question asked what would help improve satisfaction with the review process. Local responses were consistent with the improvement suggestions, with 52% of comments related to streamlining the process and/or removing duplication.

**State themes.** State staff suggestions for improvement can be organized into several categories. The most common them among state staff, with about one third (34%) of comments, was related to reviewing/aligning protocols and/or the program elements. Comments mentioned tools that could be streamlined and questions that are asked more than once. An additional 21% of comments suggested re-organizing travel logistics and/or the review timing. Comments mentioned aligning remote sites and changing the process to something annual. Seventeen percent (17%) of comments were related to how the review information gets back to Local Public Health Authorities, and 14% of comments suggested increasing reviewer training.

A related question asked what would help improve satisfaction with the review process. State responses were consistent with the improvement suggestions, with 70% of comments related to streamlining the review process and/or its travel logistics.

### **Least and Most Valuable Part of Triennial Review**

***Summary:** The process time and pressure (local staff) and the review tool (state staff) were commonly mentioned as the least valuable part of the triennial review. Technical assistance/support (local staff) and relationship building (state staff) were commonly noted as the most valuable parts of the process.*

Respondents were asked to comment on the least and most valuable part of their last triennial review.

**Least valuable.** Local staff mentioned the time/stress/pressure of the process (24%), the duplicate work involved (12%), and the Health Officer review (12%) as the least valuable pieces of the review. The remaining comments varied widely. State staff mentioned the review tool (33%), duplicative work (25%) specifically in their comments as the least valuable part.

**Most valuable.** Local staff indicated that the technical assistance/support provided (57%), relationship building (13%), the exit interview (10%), and ensuring contract compliance (10%) as the most valuable pieces. State staff comments noted relationship building (45%) and identifying and/or providing technical assistance (41%) as the most valuable parts of their last triennial review.