

ast

Peer Reviewer Guide for Public Health Professionals

Draft for Preview July 2023



About ASTHO

Incorporated in 1942, the Association of State and Territorial Health Officials (ASTHO) is the only national, nonprofit organization representing the nation's state and territorial public health officials and the agencies they lead. ASTHO is committed to supporting the work of state and territorial public health officials and furthering the development and excellence of public health policy nationwide. Membership is comprised of 59 chief health officials from each of the 50 states, Washington, D.C., five U.S. territories, and three Freely Associated States. ASTHO also supports peer communities of state and territorial health leaders and senior executives in health departments who work with the over 100,000 public health professionals employed at state and territorial public health agencies. ASTHO's primary functions are to develop strong and effective public health leaders, improve public health through capacity building, technical assistance, and thought leadership, and advocate for resources and policies that improve the public's health and well-being while aiming to promote the advancement of equity and optimal health for all.

About STAR Center for Administrative and Organizational Excellence

The <u>ASTHO STAR Center</u> is created to provide technical assistance to improve public health agency administrative readiness using evidence-informed capacity indicators and best practices for managing organizational change. For purposes of this work, administrative readiness is defined as the ability to apply fiscal, legal, and administrative authorities and practices that govern funding, procurement, contracting, and hiring efficiently and effectively to respond to both population health improvement needs and address emerging public health threats. Deficiencies can delay the acquisition of goods and services, the hiring or assignment of response personnel, the disposition of funding, and legal determinations needed to implement protective health measures. The goal of the STAR Center is to connect health officials and their leadership team with peers, subject matter experts, and consultants and provide in-depth technical assistance, skill-building, and business process improvement using strategies and approaches that focus on modernizing and strengthening administrative and organizational infrastructure. In providing services, the ASTHO STAR Center uses a structured process that consists of five phases designed to support and strengthen an organization's culture, systems and operations.

- 1. Vision Setting: Establishing a vision for success
- 2. Engagement: Invest leaders and generate stakeholder support
- 3. Assessment: Assess current system and identify areas of improvement
- 4. Planning: Develop and implement a change plan
- 5. Evaluation: Evaluate and iterate

Questions about the ASTHO STAR Center should be directed to performanceimprovement@astho.org.

Acknowledgements

The development of this guide was supported by the Centers for Disease Control and Prevention under Cooperative Agreement OT18-1802 Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health. ASTHO would also like to acknowledge Safe States Alliance who shared experience and resources from the State Technical Assistance Assessment Team Program (STAT) used to inform this program, as well as members of the ASTHO STAR Center Advisory Committee comprised of representatives from state public health agencies in Alabama, Arkansas, Kentucky and Oregon, representatives from public health academic programs in Arizona and Indiana, the National Association of County and City Health Officials, and the Public Health Accreditation Board, who provided feedback and input to help ensure the program meets public health agency needs and practice standards.

Table of Contents

Purpose of the Guide	ŀ
Peer Assessment Program Overview	┝
Administrative and Organizational Capacity Indicators	ł
Assessing Capacity and Use of Capacity Indicators	ł
Annual Program Timeline	,
Importance of the Peer Reviewer Role	,
Benefits of Becoming a Peer Reviewer6	;
Peer Reviewers, Application, and Team Selection6)
Peer Reviewer and Team Roles and Responsibilities6)
Team Lead Roles and Responsibilities	1
Team Member Roles and Responsibilities	,
ASTHO Coordinator	,
Team Conduct and Confidentiality	}
Site Visit Process)
Purpose	3
Pre Site Visit Review and Coordination)
Site Visit Scheduling and Coordination)
Conducting the Site Visit)
Sample Agenda10)
Site Visit Kick-off Meeting)
Interviews	-
Report Drafting	;
Report Out of Findings and Recommendations13	;
Expected Outcomes and Next Steps	;
Reimbursement of Expenses14	F
Application Procedure14	ŀ
Contact Us14	ŀ
Appendix14	ŀ
Guidance for Opening the Site Visit Kick-Off Meeting (Team Lead)	ł
Guidance for Interview Format and Questions15	,
Guidance for Opening the Report Out Session (Team Lead)16	;

Purpose of the Guide

The Peer Reviewer Guide provides information and guidance on being part of a peer review team that assesses a public health agency against evidence-informed administrative capacity indicators and provides recommendations for improvement. The Guide is designed for use by public health professionals serving on a Peer Review Team and preparing to be part of a site visit. The Guide is also available to others interested in serving on future peer review teams.

Peer Assessment Program Overview

The ASTHO STAR Peer Assessment Program is a voluntary assessment process and a service provided through the <u>ASTHO STAR Center for Administrative and Organizational Excellence</u>. The Peer Assessment Program utilizes the STAR Center's five phase approach (vision setting, engagement, assessment, planning, evaluation) beginning with visioning and engagement in the initial application and assessment process. After the site visit, technical assistance with action planning and an evaluation is conducted. The assessment is conducted by a Peer Review team trained by ASTHO to use their public health experience and expertise to conduct the assessment and make recommendations for performance improvement based on evidence and best practices. It is designed to be a point in time assessment of a public health agency's administrative and operational capacity against evidenceinformed indicators. Engagement of peers in the assessment process allows for mutual benefits of sharing valuable insights and building new collaborations to improve administrative readiness across all public health agencies. This program does not confer a certification or accreditation designation. For purposes of this program, *administrative and organizational capacity* refers to a health department's ability to marshal, develop, direct, and control its financial, human, physical and information resources to fulfil its mission.

Administrative and Organizational Capacity Indicators

The Peer Assessment Program utilizes a core group of capacity indicators to define public health agency administrative and organizational capacity. The capacity indicators are used to assess and improve the core administrative processes needed most to support delivery of the 10 Essential Public Health Services. The capacity indicators are organized into ten (10) themes identified below:

- 1. Human Resources Management
- 2. Workforce Development
- 3. Information System Management
- 4. Facilities Management
- 5. Accounting, Budgeting and Audit
- 6. Procurement of Equipment, Supplies, and Services
- 7. Administrative Policy and Planning
- 8. Communications
- 9. Performance Management/Quality Improvement and Evaluation
- 10. Learning Organizational Efforts and Innovations

Each area has corresponding capacity indicators that are used by the public health agency and peer reviewers to help assess and quantitatively define current administrative and organizational capacity. The indicators are used as a foundation for collaborative discussion about what is working well and areas that require improvement to modernize the agency's administrative infrastructure and operations. Public health agencies interested in applying for a Peer Assessment of their agency's administrative capacity will have the opportunity to review the capacity indicators and program requirements prior to submitting a formal application.

Assessing Capacity and Use of Capacity Indicators

Peer reviewers will be asked to complete peer reviewer training as part of their onboarding process. This will help them interpret public health agency information, conduct interviews during the site visit, and report findings and recommendations. The public health agency application requires the public health agency to

conduct a SWOT analysis and prioritize areas of focus. Therefore, Peer Reviewers should be aware of the following public health agency assessment process:

- Public health agencies will conduct an overall SWOT on all 10 themes or areas. The SWOT must be completed by the agency's executive team and State Health Official at a minimum, and participation by public health agency subject matter employees is encouraged. From the SWOT, the public health agency will identify 1 to 2 priority areas.
- Once the public health agency is selected for inclusion in the Assessment Program by ASTHO, they will be required to complete a second SWOT specific to their priority areas and collect data and information in the corresponding capacity indicators. The SWOT, data, and information will be submitted to ASTHO as part of program review materials that Peer Reviewers will utilize to focus their assessment and findings.
- Peer Reviewers will assess whether the public health agency has a system for capturing data, whether the public health agency can measure the indicators, and whether the public health agency can provide meaning (e.g., what indicator results are high or low? Which indicator results are of most concern in terms of administrative and organizational capacity and why)?
- During the Site Visit Kick-off meeting, time is set aside for the public health agency to share their perspective of the agency's administrative capacity including a summary of their program review materials, any updates or changes since the document was submitted, and any pertinent information that was not captured in the application or surfaced in the pre-site visit preparation process.

Annual Program Timeline

The Peer Assessment Program is conducted annually according to the general timeline. The number of public health agencies that participate in the Assessment is dependent upon funding. A Peer Reviewer will be assigned to no more than one Assessment during this timeframe.

Program Milestone	Timeline
Public Health Agency Application Deadline	6 weeks after Program Announcement
Public Health Agency Selection	4 weeks after Application Deadline
Peer Review Team Selected	3 weeks after Public Health Agency Selection
Peer Review Team Trained and Onboarded	3 weeks after Peer Review Team Selected
Program Review Materials Submitted to ASTHO	4 weeks after Peer Review Team Trained and Onboarded
Planning meetings (2) and virtual calls (3) between	From 2 weeks after Program Review Materials
Peer Review Team and public health agency team	Submitted to ASTHO to 2 weeks prior to the Site Visit
Site Visit	21 weeks after Public Health Agency Selection

Importance of the Peer Reviewer Role

Organizational assessment plays a vital role in the improvement of public health practice. When a public health agency completes the assessment process, the agency will have a pathway to improve administrative readiness including the ability to efficiently take in and deploy funds for population health needs and emerging public health threats. By serving in this role, Peer Reviewers use their experience and expertise for the greater good of the public health profession, specifically advancing knowledge and understanding of administrative readiness, and public health agency organizational and administrative capacity to effectively and efficiently take-in, deploy and manage funding that addresses critical population health needs and emerging public health threats.

Benefits of Becoming a Peer Reviewer

There are several benefits to being a volunteer peer reviewer. Reviewers develop an in-depth understanding of the ASTHO STAR Center capacity indicators, gain insight on improving administrative readiness and organizational capacity, learn about innovative and promising administrative practices, identify resources and expert technical assistance, network with other leaders in public health, and contribute to the improvement of administrative readiness at state or territorial health agencies. Serving as a volunteer peer reviewer is a source of job enrichment providing an opportunity to build skills and leadership. The public health agency benefits from enhanced individual job performance as the learning is applied in the work setting.

Peer Reviewers, Application, and Team Selection

Peer reviewers are public health professionals with experience and expertise in the administration or operations of state or territorial health departments and who volunteer to play a central role in the ASTHO STAR Peer Assessment Program. They are trained to assess an agency's current administrative and organizational capacity against capacity indicators, conduct an efficient site visit, and summarize and present findings and recommendations for improvement. A peer review team is selected by ASTHO and made up of a team leader and 2 team members. One ASTHO staff member will serve with each team and ensure logistics and coordination. Alternate team members will be added as needed.

Interested public health professionals can apply through the <u>ASTHO STAR Center webpage</u> on a rolling basis. ASTHO will also announce the opportunity for peer reviewers as needed. Applicants will receive an email from ASTHO within one week from the date of submission verifying receipt of application. ASTHO will review applications monthly and applicants accepted or declined will be notified by email within approximately 4 weeks from the date of submission.

Peer Reviewers are selected based on the following criteria:

- A completed Peer Reviewer Application submitted through an online form
- Experience working in a governmental public health agency in one or more core areas of administrative or organizational capacity (e.g., accounting/budgeting, procurement, IT, HR, Facilities Management)
- Management experience (i.e., at least five years)
- Verbal and written communication skills
- Willingness to travel
- Availability

A peer review team of up to three members from the accepted pool, including a Team Lead, will be formally selected for each public health agency assessment. As best as possible, peer reviewers will represent a diversity of experience in capacity indicator themes and be matched with a public health agency consistent with their experience in terms of agency organization and structure. Selected peer reviewers will be vetted with the public health agency in which they can accept or request a change if there are conflicts. Peer reviewers may also decline an assignment with a public health agency based on perceived conflict of interest or personal reasons and cannot serve as reviewers for their own agency.

Peer Reviewer and Team Roles and Responsibilities

The role of the Peer Reviewer is to assess information provided by the public health agency against the evidence-informed capacity indicators. The Peer Review Team will then consider the results of the point in time assessment of 1-3 capacity area priorities selected for focus by the public health agency, to develop a report of findings and recommendations for improvement. In developing the report, peer reviewers will identify and include strengths and areas for improvement based on the reviewer's expertise, experience, and through discussion with peer review team members.

Upon assignment, peer reviewers will receive training from ASTHO on the program background, conducting interviews and the site visit, drafting the report of findings and recommendations, and general expectations for confidentiality and program conduct with the public health agency. All peer reviewers will be expected to:

- Attend required training by ASTHO.
- Read all information provided by the public health agency undergoing assessment.
- Communicate regularly with ASTHO and the public health agency.
- Participate in 1 coordinating call with Peer Review Team and ASTHO
- Conduct three 1-hour pre-site visit virtual calls with public health agency staff.
- Conduct a 3.5 day in-person site visit with the public health agency.
- Contribute to report of findings and recommendations for improvement.
- Share findings and recommendations with public health agency staff at the close of the Site Visit
- Participate in process evaluation with ASTHO staff.

Team Lead Roles and Responsibilities

ASTHO will designate one member of each Peer Review Team as the Team Lead who will be responsible for leading, managing, and organizing the peer review team to complete all site visit responsibilities in a timely manner. The Team Lead facilitates group discussions and ensures group consensus. Specific responsibilities of the Team Lead include:

- Lead pre-site visit virtual calls with the public health agency.
- Work with the public health agency on the site visit agenda and schedule
- Direct team meetings, deliberations, and report writing to ensure the team is on time and task throughout the assessment and site visit process.
- Assign team members to be responsible for sections of the report.
- Support team members in finalizing interview questions as requested.
- Lead the write up of the report of findings and recommendations.
- Post site visit, work with ASTHO on corrections to the report if needed and participate in conference calls with ASTHO and public health agency as requested for action planning.

Team Member Roles and Responsibilities

Team members play a critical role in the assessment process. They are primarily responsible for reviewing and synthesizing the information provided by the public health agency in writing and verbally, writing up findings and developing consensus recommendations for improvement. Specific responsibilities of Team Members include:

- Identify information needed to complete assigned sections of the report.
- Provide input to agenda, site visit, and interviews.
- Prepare interview questions based on assigned sections of the report.
- Document interviews
- Prepare report and recommendations on assigned section and sign off on final report.
- Post site visit, participate in conference calls with ASTHO and public health agency as requested for action planning.

ASTHO Coordinator

One ASTHO staff member is assigned to each Peer Review Team and will serve as the liaison to the public health agency to support on-site logistics, schedule team meetings, support the team lead, and assist with the final report. Specific duties include:

- Coordinate and facilitate virtual meet and greet with the Peer Review Team; distribute bios and contact information.
- Schedule and participate in all calls with the Team and public health agency.
- Coordinate working lunches and dinners during the site visit.
- Provide administrative support in completing the final report (e.g., merging sections, editing as requested, distributing copies)
- Prepare presentation for report out.
- Troubleshoot problems and issues encountered onsite as needed.
- Ensure challenges experienced by the peer review team and public health agency during the site visit are captured and surfaced for ASTHO's internal use in continuous improvement of the Peer Assessment Program.
- Post site visit, participate in conference calls with the public health agency and for action planning.

Team Conduct and Confidentiality

The same expectations for daily conduct that apply to ASTHO staff are also expected of the Peer Review Team that is providing a collaborative service to ASTHO members. ASTHO staff and Peer Review Team members are expected to:

- Present themselves in a friendly, courteous, and professional manner when interacting with public health agency staff.
- Dress in business attire during the site visit
- Follow public health agency procedures for entrance and exit of the agency including sign in, wearing visitor badge, and signing out.
- Be thoroughly prepared with a list of questions during the interviews and come to interviews with an open mind.
- Keep complete notes.
- Reach consensus with team members on report findings and recommendations.

The public health agency participating in the Assessment and site visit may provide sensitive issues, concerns, or information to the peer review team. This is encouraged so that the Assessment and recommendations will be as helpful as possible. However, it also demands a trusting relationship and atmosphere. ASTHO may ask each Peer Review Team Member participating in the Assessment to sign a confidentiality form. The purpose is to ensure that peer reviewers understand that they may have access to sensitive and non-public information and therefore must treat all information obtained from pre-site visit, site visit or post-site visit as confidential. Information or documents may not be distributed, disclosed, used for any other purposes other than the Assessment, reproduced or replicated, and/or shared as experience or examples in presentations or academic research. Team members must destroy all electronic and print copies of documents, including personal notes, within 8 weeks of the site visit's completion.

Site Visit Process

Purpose

The purpose of the site visit is to verify and supplement information presented in the public health agency application. It provides an opportunity for the team to learn as much as possible about the public health agency and conduct in person interviews with internal and external partners to benefit assessment of administrative and organizational capacity.

Pre-Site Visit Review and Coordination

The pre-site visit review allows the Team Members an opportunity to learn about and develop an understanding of the public health agency's current administrative and organizational capacity. Team members will use this time to prepare for the site visit including review of all materials provided including the public health agency application and self-assessment, build a relationship with public health agency staff, and obtain clarification on application materials. They will begin to develop interview questions related to their assigned area and identify potential internal and external partners to be included for interviews during the site visit. The Peer Review Team will begin to draft assigned sections of the report with this preliminary information. The ASTHO Coordinator will schedule a series of virtual calls with the public health agency team in preparation for the site visit as identified below. The Peer Review Team may request additional meeting time without the public health agency for preparation.

Who	When	Purpose
ASTHO Coordinator* Peer Review Team Members	8 weeks prior to site visit	Team meet and greet with ASTHO. ASTHO will facilitate introductions, relationship building activities and cover team member roles, site visit process, schedule, and logistics.
ASTHO Coordinator* Peer Review Team Lead Public Health Agency Lead	8 weeks prior to site visit	Meet and greet between public health agency lead and Team Lead to build relationship. May discuss public health agency goals, review application materials, or important information or issues that should be considered in preparing for the site visit and final report.
ASTHO Coordinator Peer Review Team Lead* Public Health Agency Lead	6 weeks prior to site visit	Review and finalize interviews and agenda.
ASTHO Coordinator Peer Review Team Lead* Peer Review Team Members Public Health Agency Lead and Key Staff	4 weeks prior to site visit	Review Assessment and Site Visit process with full state team. Peer Review Team opportunity to request additional information or clarification related to priority areas and associated program review materials.
ASTHO Coordinator Peer Review Team Lead* Peer Review Team Members Public Health Agency Lead and Key Staff	3 weeks prior to site visit	Peer Review Team opportunity to request additional information or clarification related to priority areas and associated program review materials.
ASTHO Coordinator Peer Review Team Lead* Peer Review Team Members Public Health Agency Lead and Key Staff	2 weeks prior to site visit	Peer Review Team final opportunity to request additional information or clarification on the site visit process and finalize logistics.

*Will lead and facilitate the virtual call

Site Visit Scheduling and Coordination

The public health agency will provide a packet of information for travelers including places to eat, hotels, and ground transportation. Each team member should bring a laptop computer with a recent version of Microsoft Word and a flash drive. If these are not available, the team member will contact the ASTHO Coordinator for support.

Team members will make their flight arrangements by using the link <u>http://astho-atc.deem.com/</u>. ATC Travel will direct bill ASTHO for the airfare. Travelers will need to indicate the name of the meeting and provide a travel authorization code (both provided by ASTHO Coordinator) to complete the booking process. Team members must plan to arrive at the hotel by 6 pm on Monday evening. Return flights should be scheduled no sooner than 2 pm on Friday afternoon. It is highly recommended that all territorial travelers call ATC Travel via phone to make flight arrangements. **ATC Travel** can be contacted as follows: (800) 458-9383 Monday through Friday 8:30 am-7 pm ET; Email: <u>reservations@atcmeetings.com</u>. <u>Click here</u> to view a recording of the training session on meeting registration and booking travel through ATC.

Hotel reservations for each team member will be made by ASTHO. Upon check-out, your room will be billed to ASTHO directly and you will only be responsible for incidentals charged to your room. ASTHO will reimburse expenses as listed below. **Please keep all receipts over \$75.**

- Baggage (up to 1 checked bag on inbound flight and 1 checked bag on return flight)
- Ground transportation (parking, mileage to/from home airport, taxi, etc.)
- Meal per diem for the first and last travel day are reimbursed at 75% of the amount. All other travel days are reimbursed at 100% of the amount.

Conducting the Site Visit

The Peer Review Team will follow the agenda finalized prior to the site visit, and ensure timing and topics are addressed as planned. While the agenda is used to guide the site visit, the team is asked to be flexible should the public health agency need to adjust scheduled interviews due to unforeseen circumstances. ASTHO staff will provide onsite technical assistance, consultation, and logistical support during the site visit.

The public health agency will provide the Peer Review Team with a welcome packet prior to the site visit that includes travel information, restaurants, a map of the area and agency. Additionally, the public health agency will reserve dedicated meeting space for interviews as well as space to serve as the team's base to keep belongings, take breaks, and draft the report. IT support will be provided onsite for connection to the internet and printers.

Sample Agenda

The following sample agenda can be adapted for the public health agency and team lead to fit needs of the agency and partners.

Monday: Team Travels to Public Health Agency

6:00 pm: Team dinner to review agenda, interview questions, and overall process for the site visit.

Tuesday: Day 1 of Site Visit

8:30 am: Peer Review Team arrives at public health agency and prepares for the day.

9:00 am: Site Visit Kick-off meeting

12:00 pm: Lunch

1:00 pm: Interviews (up to 40 min each)

2:30 pm: Break

3:00 pm: Interviews (40 min each)

4:30 pm: Adjourn.

7:00 pm: Team debrief and preparation for Day 2 including writing assigned sections and finalizing interview questions.

Wednesday: Day 2 of Site Visit

8:30 am: Peer Review Team arrives at public health agency and prepares for the day.

9:00 am: Interviews (up to 40 min each)

10:30 am: Break

10:45 am: Interviews (up to 40 min each)

12:00 pm: Lunch

1:00 pm: Interviews (up to 40 min each)

2:30 pm: Break

3:00 pm: Finish interviews or prepare first draft of sections.

4:45 pm: Debrief with public health agency team.

5:00 pm: Adjourn.

8:00 pm: Team debrief and preparation for Day 3. First draft sections compiled by ASTHO coordinator and distributed to team.

Thursday: Day 3 of Site Visit

8:30 am: Peer Review Team arrives at public health agency and prepares for the day.

9:00 am: Peer Review Team review and comment on first draft report

10:30 am: Team makes revisions and completes second draft.

12:00 pm: ASTHO Coordinator compiles second draft

2:00 pm: Team reconvenes for final edits and revisions; reviews draft of presentation prepared by ASTHO Coordinator

7:00 pm: ASTHO Coordinator and Team Lead conduct final proof reading and finalizes slides.

8:30 pm: Final copy of report and presentation slides distributed to Peer Review Team

Friday: Report of Findings and Recommendations

8:30 am: Peer Review Team checks out of hotel and travels to public health agency.

10:00 am: Report Findings and Recommendations to public health agency team and State Health Official Question and Answers

Draft for Preview

11:30 am: Adjourn.

12:00 noon: Travel to airport

Site Visit Kick-off Meeting

The Site Visit Kick-off Meeting is held with the public health agency team on the first day of the site visit. The Peer Review Team Lead facilitates the meeting, thanks the public health agency for its hard work, dedication, and commitment to improvement, and conducts introductions of the Peer Review Team, ASTHO staff, and public health agency staff and others invited. The Team Lead will 1) cover roles of the Peer Review Team and public health agency during the site visit, 2) note the confidentiality of information shared, and 3) review the purpose of the site visit. Guidance for opening the Site Visit Kick-off Meeting is included in the Appendix.

The public health agency is invited to provide an overview of the agency and as it relates to administrative and operational capacity. This is their opportunity to tell their story and include information that was not captured through the application and summary document submission. They may also include any recent changes or developments pertinent to the assessment or capacity indicators since they submitted their summary document. They may also ask questions about the site visit, agenda, and final report and recommendations.

Interviews

The number of interviews and who is interviewed will be guided by the public health agency's priorities for the Assessment and specifically the components that are identified in the program review materials. ASTHO recommends that interviews are conducted with both internal programs that conduct work in these areas and external partners that may drive policy and procedures. Given this, it is important that the leadership team and state health official are engaged up front and understand the basis for the peer assessment is in the spirit of improvement. Together, the executive leadership team should identify the priority areas of focus and ensure staff and partner participation. Based on review of public health agency program review materials, the Peer Review Team may make suggestions to the list of interviewees.

Examples of External Interviewees	Examples of Internal Interviewees
 Governor's Office and/or State or Executive Level Budget Director State Administrative Agencies external to the Health Agency (IT, HR, or Business functions) Legislator or Legislative body that makes administrative policy decisions. Local public health agency or association Hospital or health system Other key partners that receive funds routinely for programmatic and administrative services and for emergency response 	 State Health Official Super Agency Administrative Director Members of the Executive Leadership Team including those with programmatic oversight Administrative Leaders and Directors (e.g., Chief Operating Officer, Chief Financial Officer, Human Resources Director) Performance Improvement Director Key administrative staff and subject matter experts

During the site visit, the Team Lead is responsible for facilitating interviews, ensuring time management, and that questions asked are pertinent for the report and recommendations. After introductions, the interviewees should identify their role and how they work with the public health agency. The remainder of the time is allocated for the Peer Review Team to ask questions and take notes. The peer review team member responsible for the area leads questioning and may ask other team members to take notes. Guidance for developing and examples of interview questions are included in the Appendix.

Report Drafting

The Team Lead plays a critical management role in ensuring the report is drafted and completed. Acting as facilitator, the team lead ensures time management, focusing discussions, ensuring all team members are included in discussions, resolving group conflict, and ensuring consensus. The Team Lead also ensures that the report avoids contradictory recommendations or duplicative recommendations across priority areas.

Each team member is assigned and responsible for report drafting in one of the prioritized component areas as assigned by the Team Lead. This includes assessment of information against capacity indicators, additional information gathering during site visit, and writing up findings and recommendations. In drafting the report, the team should consider the following:

- The initial application, including goals of the Assessment, and weaknesses and opportunities identified.
- Current status of the capacity areas and available resources
- How much is the agency doing? How well are they doing it? Is anyone better off? Are they moving in the right direction?
- What needed improvements emerged as part of the interviews?
- What improvements are within the health agency's control, and which may need partnerships?
- What recommendations will help the public health agency meet its goals for the Assessment process?

Each report section should include a 1-page narrative status, list of strengths, list of challenges, and list of recommendations. Recommendations should be measurable and actionable. Each team member will sign the document electronically.

The Team Lead is responsible to develop an executive summary which will also form the basis of the presentation material for the report out of findings. A report template will be provided as part of peer reviewer training.

Report Out of Findings and Recommendations

The report out to the public health agency includes presenting the executive summary and all recommendations. Attendees should include Peer Review Team members, public health agency representatives, the State Health Official, and any other invited guests or partners of the public health agency. The Team Lead will provide opening remarks and present the Executive Summary. Guidance on opening remarks is provided in the Appendix below. The Team Lead may delegate recommendations to the team members in their assigned capacity indicator areas. The public health agency will have the opportunity to ask questions about each component.

Team members are asked to stick closely to the guidance for the report out. Discussion and Q&A should not include technical assistance or options to address the recommendations.

Expected Outcomes and Next Steps

Following the Site Visit, the public health agency is left with the following:

- An electronic copy of the report and recommendations for use and distribution solely by the agency.
- Expectations to complete an initial evaluation of the site visit, and a 6-month post visit evaluation to learn about adoption of and implementation of recommendations. The post site visit evaluation will be conducted by an online survey followed by a key informant interview with the public health agency lead and sponsor.
- 30 days to review the report for factual inaccuracies (e.g., data, dates, names, etc.)
- 30 days to request a follow-up call with the team for clarification on findings and recommendations, as needed.
- 60 days to request ASTHO-supported technical assistance following the Assessment and site visit.

Draft for Preview

The Team Lead and/or other team members may be asked to participate in technical assistance following the site visit. ASTHO TA will follow the STAR Center model and include action planning (one year of quarterly calls), connecting the public health agency to resources and subject matter experts within ASTHO and external to ASTHO that can assist with implementing recommendations. The primary role of peer review team member participation is to provide clarification or discussion of findings and recommendations and to help inform development of the public health agency action plan.

Reimbursement of Expenses

At the conclusion of the site visit, the ASTHO coordinator will email expense reimbursement forms to all team members. The forms should be completed within 10 business days following the site visit. Forms will be processed within 30 days of receipt. As noted above under Site Visit Scheduling, ASTHO will reimburse the following expenses:

- Baggage (up to 1 checked bag on inbound flight and 1 checked bag on return flight)
- Ground transportation (parking, mileage to/from home airport, taxi, etc.)
- Meal per diem for the first and last travel day are reimbursed at 75% of the amount. All other travel days are reimbursed at 100% of the amount.

Receipts are required for expenses over \$75 and should be submitted with your completed and signed reimbursement form.

At this time, stipends for team members for their time and contributions are dependent upon availability of funding and not specifically included.

Application Procedure

Individuals interested in becoming a peer reviewer can submit an <u>application</u> to <u>STARPeerAssessment@astho.org</u>. Applications are accepted throughout the year on a rolling basis. ASTHO will acknowledge receipt via email within 2 business days. Applications are reviewed monthly. Applicants will receive confirmation of volunteer peer reviewer status via email within 4 weeks of receipt of application.

Contact Us

For any questions on the peer assessment program or becoming a peer reviewer, please email ASTHO staff at <u>STARPeerAssessment@astho.org</u>.

Appendix

Guidance for Opening the Site Visit Kick-Off Meeting (Team Lead)

- The purpose of the Kick-off Meeting is to establish expectations and set a collaborative tone.
- Open by thanking the public health agency for their participation in the ASTHO STAR Peer Assessment Program, their dedication to continuous improvement, and for hosting the site visit team.
- Explain that ASTHO is a national, nonprofit organization representing the nation's state and territorial public health officials and the agencies they lead. ASTHO's mission is to support, equip, and advocate for the state and territorial health officials.
- Explain that the ASTHO STAR Peer Assessment Program is designed to be a point in time assessment of a public health agency's administrative and operational capacity against evidence-informed indicators. This allows the public health agency to consider challenges and opportunities and prioritize and focus

resources to improve in those areas. The program is created to advance a public health agency's ability to modernize infrastructure and services.

- Remind them: As you go through the Peer Assessment process be sure to acknowledge and appreciate what your staff and agency already does toward building administrative and organizational capacity, and that they have taken additional initiative to advance these activities through this assessment and peer review process.
- Conduct introductions of the Peer Review Team and public health agency attendees and other invitees
- Explain the roles of the Site Visit Team
- Identify the confidentiality policy.
- Review the purpose of the site visit: to verify and/or supplement information presented in the public health agency application and to provide an opportunity for the team to learn as much as possible about the public health agency through in person interviews with internal and external partners with respect to assessment of administrative and organizational capacity.
- Review the process to develop the report of findings and recommendations including that comments will be summarized and not attributed to a participant.
- Provide an opportunity for the public health agency to ask questions about the site visit and/or process.
- Invite the public health agency to provide an overview of the agency, its application and program review materials, and any changes or developments since submission.
- If Facilities Management is selected as a priority, the public health agency should guide the Peer Review Team in a walk-through of the main Facility.

Guidance for Interview Format and Questions

- Introduce the team.
- Provide a brief overview of the priority areas to be covered during the interview session.
- Ask Interviewees to introduce themselves, describe what they do and their relationship to the public health agency.
- Sample Interview Questions:
 - What are the public health agency's strengths and challenges with respect to the priority areas and related capacity indicators? Did you learn anything new since submitting Program Review Materials?
 - What might be your priorities for quality improvement in this context?
 - To what extent is the agency utilizing evidence-based or promising practices in your priority areas? For administrative readiness overall?
 - Are lead staff in the priority area part of the ICS structure? (e.g., Finance Section Chief role conducting emergency response procurement). Are there obstacles and barriers in emergency response versus normal response? Are they similar or different?
 - o What opportunities exist for innovation, large and small?
 - o What can be done differently to be more administratively effective in priority areas?
 - Are there opportunities or challenges to strengthen internal collaboration? How?
 - o What external partners should be engaged to help overcome challenges?
 - What systems are needed or should be leveraged to enhance administrative readiness and/or reach your organizational and capacity goals?
 - Do current policies and procedures and agency actions adequately support administrative needs and readiness? Are legislative or regulatory changes needed?
 - Are there opportunities to engage staff (internal customers) across your agency in seeking solutions to gaps and challenges?

Draft for Preview

- How are you monitoring and/or measuring performance? Are there opportunities to evaluate new administrative processes for effectiveness?
- Are there opportunities to automate processes? Which ones?
- Thank all participants at the end of the interview session.

Guidance for Opening the Report Out Session (Team Lead)

- Acknowledge and thank the public health agency for their hard work in completing the Site Visit and commendable efforts to improve.
- If there are any new attendees (as invited by the public health agency) in the room for the report out, introduce the team and provide a brief description of the ASTHO STAR Peer Assessment Program.
- In creating this report, the team has looked at the information provided in each of the priority areas in writing and through interviews. Feedback and recommendations as part of this report are provided for consideration and future improvement. As a point in time assessment, no other information is considered other than what the public health agency and interviewees provided to the team during the assessment process.
- Provide overall findings on strengths, areas to consider for improvement, and recommendations.
- Review next steps with the public health agency:
 - o 30 days to notify ASTHO of factual errors for which ASTHO will send an updated report.
 - o 60 days to request technical assistance with action planning to implement recommendations.
- Thank the public health agency for their time, effort, and exit.