

Performance Review Protocol

Introduction

The Health Resources and Services Administration (HRSA) is the principal Federal agency within the Department of Health and Human Services (DHHS) charged with increasing access to basic health services for the nation's underserved, vulnerable and special needs populations. With a budget of over \$6 billion, HRSA provides direct financial assistance, in the form of grants or cooperative agreements, to over 3,000 organizations (i.e., grantees) for the purpose of carrying out 80 different programs that improve and expand access to quality health care and reduce disparities in health status.

To assure that all HRSA funded programs are accomplishing their intended purposes, HRSA continuously tracks and analyzes the performance of its grantees. In 1993, the Government Performance and Results Act (GPRA) reinforced these agency-wide efforts by requiring all Federal agencies to submit annual reports on program performance. Agency program performance reports describe the actual program performance achieved, compared with the performance goals expressed in the agency's performance plan.

For HRSA, seven strategic goals serve as the organizing framework for the agency's program performance measures:

1. Improve Access to Health Care
2. Improve Health Outcomes
3. Improve the Quality of Health Care
4. Eliminate Health Disparities
5. Improve the Public Health and Health Care Systems
6. Enhance the Ability of the Health Care System to Respond to Public Health Emergencies
7. Achieve Excellence in Management Practices

Role of the Office of Performance Review

The Office of Performance Review (OPR) plays a central role in achieving the HRSA mission and its program performance goals. With a headquarters office in Rockville, Maryland, and ten regional divisions in Boston, New York, Philadelphia, Atlanta, Chicago, Dallas, Kansas City, Denver, San Francisco, Seattle, as well as a sub-regional division in Puerto Rico, OPR serves as the agency's focal point for reviewing and enhancing the performance of HRSA funded programs within communities and States. On a regularly scheduled basis, HRSA grantees are comprehensively reviewed by a review team from one of the ten OPR regional divisions.

Purpose of Performance Reviews

The purpose of performance reviews is to improve the performance of HRSA funded programs. Through systematic pre-site and on-site analysis using the Performance Review Protocol, OPR works collaboratively with grantees and HRSA Bureaus/Offices to measure program performance, analyze the factors impacting performance, and identify effective strategies and partnerships to improve program performance, with a particular focus on outcomes. Performance reviews also provide direct feedback to the agency about the impact of HRSA policies on program implementation and performance within communities and States. From this analysis and feedback, OPR tracks key program performance issues, identifies effective practices and outstanding program outcomes, provides technical assistance, and, when appropriate, develops recommendations for changes to HRSA policies to further enhance the performance of HRSA funded programs.

Performance Review Protocol

The Performance Review Protocol is a performance improvement tool used with each grantee to review its HRSA funded programs. When a grantee receives more than one HRSA grant, the grantee's HRSA funded programs are reviewed during the same performance review.

The four primary components of the Performance Review Protocol are: Performance Review Measures; Performance Analysis; Performance Report; and Action Plan.

I. Performance Review Measures

Effective performance measures describe the population served by each program, the level and scope of program services or resources provided to this population, how well the program is providing those services or resources, and the impact of the services or resources on the population served. The most important types of performance measures for a program or set of programs are: (1) outcome measures (i.e., measures that track the impact or effectiveness of a program or set of programs); and (2) effort measures (i.e., measures that assess the grantee's efforts to implement a program or set of programs).

Performance reviews begin with a pre-site visit review of established program performance measures [i.e., HRSA GPRA measures <http://www.hrsa.gov/perplan>, and HRSA program performance reporting requirements] and the grantee's program goals and objectives as identified in their grant application(s). From this pool of established measures, the review team, in collaboration with the grantee and through consultation with the HRSA project officer(s) and other appropriate HRSA staff, selects a set of Performance Review Measures for each funded program. These measures define the scope and focus of the performance review.

Selection of Performance Review Measures

For each funded program:

- Who is the population served (e.g., patients, students, customers)?
- What are the specific services or resources provided to this population?
- From the pool of measures, what are the key outcome and effort measures?
- Are these measures of outcomes and efforts communicated easily?
- Do they measure the most important outcomes and efforts?
- Are the data available and credible?

Once the Performance Review Measures are selected for each funded program, the review team, in collaboration with the grantee and through consultation with the HRSA project officer(s) and other appropriate HRSA staff, determines actual program performance achieved on each measure. Progress is assessed by comparing actual performance with established HRSA program/grantee performance goals.

Progress on Performance Review Measures

- How is the grantee performing on each Performance Review Measure?
- What are the grantee's performance trends for each measure?
- What is the gap from current to desired performance on each measure?

II. Performance Analysis

After the Performance Review Measures have been selected and program progress has been reviewed, the Performance Analysis portion of the review involves examining the factors contributing to and restricting the grantee's performance on the selected measures. Performance Analysis for a funded program includes reviewing the grantee's internal systems and processes, external issues (including HRSA policies) that may contribute to or restrict the grantee's performance on each Performance Review Measure, and the grantee's successes or challenges in forming and sustaining successful performance partnerships.

Starting with a pre-site visit review of the grantee's program applications, progress reports, and applicable HRSA program guidance/expectations ([links to HRSA current FY Application Guidances](#)), the review team, in collaboration with the grantee and through consultation with the HRSA project officer(s) and other appropriate HRSA staff, analyzes the following performance factors through its pre-site and on-site work.

Performance Analysis

- What are the key factors behind the grantee's performance on each selected Performance Review Measure?
 - How do the grantee's internal systems and processes contribute to or restrict the grantee's performance on each measure? ([See Appendix A](#))
 - What external issues, including HRSA policies, are influencing the grantee's performance on each measure?
 - What are the grantee's successes and challenges in forming and sustaining partnerships that support its performance on each measure?
- What is the order of priority among the factors examined – which are the most important to address to improve the grantee's performance on each measure?

III. Performance Report

Upon completing the analysis of the factors impacting the grantee's performance on each Performance Review Measure, the review team, working on-site with the grantee, develops a preliminary set of Performance Improvement Options that the grantee can implement to improve performance on each measure. The review team assists the grantee in identifying evidence-based strategies, no-cost/low-cost options, as well as partners who may have a role to play in improving the grantee's program performance.

After the on-site portion of the performance review is completed, the review team presents its findings, including any identified Program Requirement issues, in a draft Performance Report and requests feedback on the report from the grantee, HRSA project officer(s) and other appropriate HRSA staff. The review team reviews the feedback received and develops the final Performance Report.

Performance Report

- Program Summary, describes the population served and the services/ resources provided by each HRSA funded program.
- Performance Review Measures, presents performance trend data on each selected Performance Review Measure.
- Performance Analysis, summarizes the factors (including HRSA policies) contributing to and restricting the grantee's performance with respect to each measure.
- Performance Improvement Options, provides options to improve performance with respect to each measure, and, when necessary, identifies technical assistance needs. Options include: evidence-based strategies; no-cost/low-cost options; as well as forming partnerships with those who may have a role to play in improving program performance.
- Program Requirement, identifies, when necessary, a requirement of applicable program statutes, regulations and/or grant award conditions.

IV. Action Plan

Upon receipt of the final Performance Report, the grantee is asked to respond in the form of an Action Plan. The Action Plan provides an opportunity for the grantee to reflect upon the

Performance Report, including the Performance Improvement Options, and describe its Performance Improvement Actions. Within the Performance Improvement Actions section, the grantee is asked to describe the specific actions to be completed for each Performance Review Measure, and when necessary, in the Program Requirement Actions section, describe the specific actions to be completed to address any identified Program Requirement issues.

Action Plan

- **Performance Improvement Actions**, describes the actions to be completed by the grantee on each Performance Review Measure; specifying where, how, who and by when each action will be accomplished.
- **Program Requirement Actions**, describes, when necessary, the actions to be completed to address each identified Program Requirement issue; specifying where, how, who and by when each action will be accomplished.

After receipt of the Action Plan, the review team reviews the Performance Improvement Actions (including any Program Requirement Actions), provides feedback on the alignment, specificity, feasibility and potential impact of the actions, and offers recommendations on any follow up assistance that may be appropriate. The performance review concludes with the adoption of an agreed upon Action Plan to be implemented and reviewed over time, as appropriate.

V. Sample Performance Review Timeline

Week 1-4 Pre-Site Visit Review of Key Grantee Materials (i.e., grant application(s); progress reports; program guidance/expectations; performance data submissions; etc.) and Pre-Site Consultation with Grantee, HRSA Project Officer(s) and Other Appropriate HRSA Staff

Week 5 Site Visit (scheduled with the Grantee at least 12 weeks in advance.)

Week 9 Draft Performance Report Developed with Request for Feedback from Grantee, HRSA Project Officer(s) and Other Appropriate HRSA Staff

Week 11 Receive Feedback on Draft Performance Report

Week 12 Revise Performance Report and Request Action Plan from Grantee

Week 16 Action Plan Submission Due

Week 17 Final Performance Report, Action Plan and Action Plan Feedback Report Distributed within HRSA for Follow-up Actions/Technical Assistance with Grantee

APPENDIX A – Internal Grantee Systems and Processes

To assist in the review of how the grantee's internal systems and processes contribute to and restrict the grantee's performance on each Performance Review Measure, a series of prompting questions around four primary performance capacities ([Capacity and Systems](#) | [Outreach and Consumer Feedback](#) | [Business and Financial Management](#) | [Leadership and Staffing](#)) are provided below:

Capacity and Systems

Structure, Function and Capacity

- How does the grantee's structure and capacity support the HRSA funded program, including subcontractor performance and financial arrangements?
- Is the management structure appropriate for program implementation and performance, including any governing board or planning coalitions?
- How does management assure that the program is implemented in accordance with stated program requirements, including any grant award conditions?
- Is there integration and coordination of programs across the grantee?
- Are there any emerging issues that could impact on the grantee's capacity and/or structure?

Internal Quality Improvement (QI) Program

- Has the grantee implemented a QI program? Throughout the organization?
- How has the grantee used this QI program to improve performance?
- How does the QI program identify new and emerging issues that need to be addressed?
- How is consumer input and satisfaction incorporated into the QI program?
- Has the grantee undergone outside, independent QI reviews (e.g., accreditation)? How have the results of these outside QI reviews been addressed?

Staff Performance Systems

- How is staff performance and productivity reviewed?
- What efforts are made to bring out the best in staff to achieve the program goals and objectives (e.g., training in cultural competency, etc.)?
- How is staff orientation and training assessed?

Data Capacity and Systems

- How does the grantee collect and analyze data for tracking program performance (including subcontractor performance)?
- How does the grantee use their data and information to support program decision-making and innovation?
- How does the grantee's data capacity support the timely submission of reports required by HRSA and the grantee?
- Has the grantee invested in quality hardware and software as well as staff to meet their data needs?

Clinical Systems (For Grantees Involved in Patient Care)

- Does the grantee provide the required and additional services necessary (including referral arrangements and after hours/weekend coverage) to achieve program goals and objectives?
- How does the grantee assure that required and emerging clinical care guidelines are followed, including patient confidentiality, informed consent, and Human Subjects/IRB protections where research is conducted?
- What quality assurance systems are in place? Does the grantee have clinical tracking capability? How has the grantee implemented HIPAA requirements?
- Are patient records signed and dated with progress notes from all providers who see the patient? Are patient records maintained with the ongoing listing of medications in an orderly chart, which indicates the name of the medication,

- dose, and date prescribed, and if applicable, date ended, for all medications?
- What are the grantee's efforts around risk management? Does the grantee have written policies and procedures for risk management (e.g., security of medical records, pharmaceuticals and bio-hazardous materials)? How is staff informed of these policies and procedures as well as the potential risks? How are the grantee and staff implementing risk management procedures and policies?
- Has the grantee evaluated their MIS capacity for automated billing, scheduling, and recall to produce data for program analysis purposes?

Program Location and Facility

- Does the location and equipment support the implementation and performance of the intended program?
- If applicable, is the facility accessible to the population targeted for services?
- For programs that provide services of a sensitive nature, such as HIV/AIDs, STIs, etc., is patient confidentiality maintained internally by not indicating the services provided in signs or other information posted outside of the building?
- Does the facility location impact other entities serving similar populations?

Outreach and Consumer Feedback

Reaching the Target Population

- How does the grantee identify the need for the program and the needs of its target population?
- How does the grantee articulate program benefits to the target population?
- How does the grantee identify barriers to program services/resources and reduce/remove these barriers for the target population, including barriers for persons with disabilities, language and/or cultural differences?
- How does the grantee use information and data to track changes in the persons/populations being served by the program?
- Does the grantee have on staff, as paid workers or as volunteers, individuals who are consumers or would represent the consumer's interest?
- How does the grantee assess and track changes in health care environment and marketplace? What approaches are used to address these changes?

Use of Feedback

- How has the grantee demonstrated that they successfully implement programs that respond to the identified needs of the population served?
- How does the grantee solicit feedback (e.g., consumer satisfaction surveys) from those served by the program?
- How does the grantee use this feedback within its program?
- What is the "feedback loop" between the grantee and those being served as well as the larger community/population groups targeted for services?

Business and Financial Management

Program Budget Aligned with Goals and Objectives

- Does the budget reflect the priority program goals and objectives?
- Is the budget well justified, including any maintenance of effort and/or Federal

- matching fund requirements?
- How does the grantee demonstrate that fiscal resources are allocated properly to complete the program goals and objectives?
- Do expenses follow the program purpose and priorities?

Financial Management

- Does the grantee have an adequate plan for the use of HRSA funds, including systems in place to reduce erroneous or improper payments?
- Does the grantee draw down HRSA funds from the Payment Management System (PMS) using a reasonably apportioned rate?
- How has the grantee performed in the oversight of funds and contracted services and in its overall fiduciary responsibilities? Are funds disbursed in a timely manner?
- Does the grantee have incentives and procedures to measure and achieve efficiencies and cost effectiveness in program execution? What results has the grantee achieved in effecting economies of scale and cost efficiencies in administrative functions?
- Does the grantee use strong financial management practices? Are financial systems maintained which provide internal controls (i.e., no co-mingling of funds), safeguard assets, maintain adequate cash flow, and maximize revenue from all sources? Are required audits conducted in a timely manner? Are employee payroll taxes paid on a timely basis?
- Has the grantee taken meaningful steps to address its identified financial management deficiencies, including any audit findings?

Reimbursement for Patient Services (For Grantees Involved in Patient Care)

- What steps is the grantee taking to maximize available third party reimbursement? Is there a system in place for timely third-party billing?
- How does the grantee enroll patients in applicable insurance programs?
- Does the grantee provide Medicaid/Medicare reimbursable services? Is the grantee a certified Medicaid/Medicare provider? Does the grantee appropriately negotiate with, bill and collect funds from Medicaid/Medicare?
- Does the grantee have an established billing system in place, including a schedule of charges (caps) and sliding fee scale (discounts), where appropriate?
- How often does the grantee provide in-service training for employees with responsibility for coding and billing - to assure that the latest information is appropriately utilized? Does the grantee have a system in place to "spot check" their coding efforts?
- Does the organization have adequate systems in place to operate effectively under managed care?
- How are other funding sources coordinated with the HRSA program, including participation in the Section 340B Drug Pricing Program?

Leadership and Staffing

Leadership and Strategic Priorities

- How does the grantee leadership team promote the vision, mission, values and strategic priorities of the program internally and externally? Are other HRSA funded programs aware of the grantee's mission and strategic priorities?

- How do consumers and employees provide input to the strategic program priorities?
- How does leadership address internal and external forces (market, community and State) that may impact on performance?
- How does the grantee assure that strategic program priorities and emerging issues are addressed?
- What does the leadership see as their most effective practices and outstanding program outcomes? How do these practices/program outcomes compare to other like organizations and are they worthy of replication?

Staff Qualifications, Characteristics, and Skills

- How does the grantee assure that staff possesses the appropriate skill sets, competencies, and credentials required to perform their assigned duties?
- What commitment has the grantee made to improving staff skills and competencies?
- How does the grantee assure that the staff is culturally competent and responsive to the needs of the population being served?
- Does the staff reflect the diversity (in terms of culture, race, ethnicity and language spoken) of the population served?
- Is there sufficient staff in place, with appropriate training and credentials, to effectively provide the services the grantee has been funded to provide?

Workforce Stability

- Has the grantee achieved stability in key management and leadership positions?
- Has there been frequent turnover in program leadership?
- What are the staff turnover patterns? Does the grantee consistently and quickly fill vacant positions?
- How is staff turnover tracked and analyzed?