

Assessing Organizational QI Culture in Minnesota

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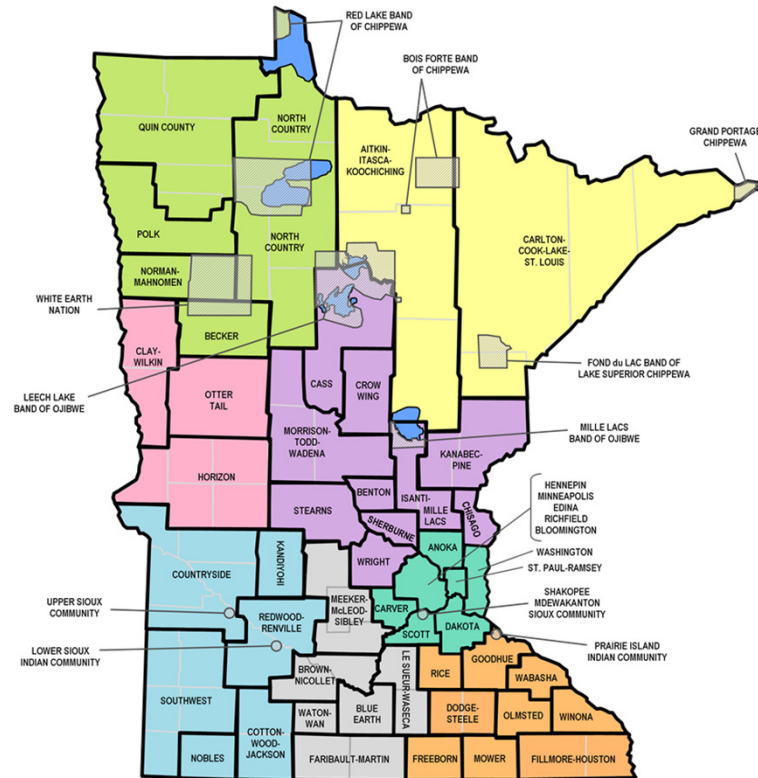
National Public Health Improvement Initiative
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A little bit about MN...

- MN is a decentralized state with a strong state-local public health partnership
- The Office of Performance Improvement (OPI) has a long-standing role and relationship with local public health
 - Building QI capacity since 2007 through MLC
- OPI began working to build QI capacity within MDH through NPHII



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MN's Improvement Activities

- State health department accreditation preparation
 - Prerequisite completion
 - Documentation collection
- Local accreditation readiness
 - Strategic planning facilitation
 - Alignment of local assessment and planning process with national standards
 - Training and technical assistance
- Building a culture of quality at MDH
 - Quality council and plan
 - Performance management
- Building a statewide performance management system
- Health information exchange



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MLC QI Maturity Tool

- QI Maturity Tool as part of the Multi-State Learning Collaborative (MLC)
- Survey administered in 16 states from 2009-2011 by the University of Southern Maine (USM)
- Organizational self-assessment completed by agency “top official” (administrator, director, etc.)
- Survey includes more than 70 items related to accreditation readiness and intent, and 3 dimensions of QI
 - Capacity and competency
 - Organizational culture
 - Alignment and spread
- Responded by level of agreement (strongly agree, agree, neutral, disagree, strongly disagree, I don’t know)



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MLC QI Maturity Tool in MN

- Broaden administration of the *QI Maturity Tool* beyond the top executive to include all staff
- Establish baseline levels of QI maturity for LHDs and MDH



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Local Administration

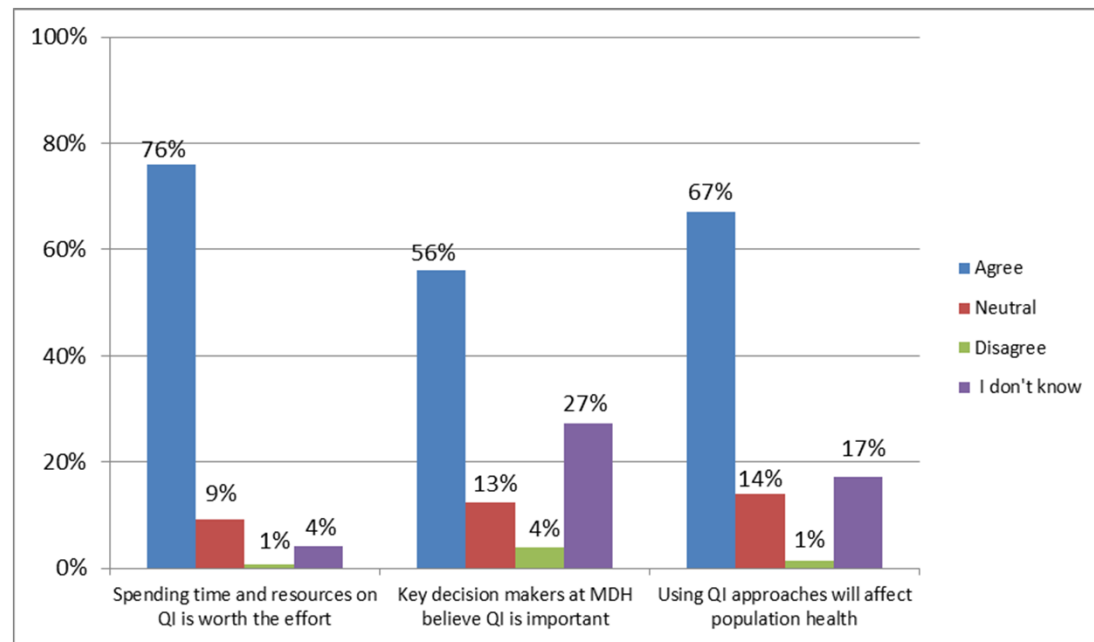
- In 2011 worked with USM to obtain local data
- Aggressively promoted survey
- 78% response rate
- Got permission to obtain data
 - Of respondents, only 1 didn't give permission
- Assessment of organizational QI Culture was a deliverable of a Quality Improvement Leadership Collaborative
- Teams used assessment data in developing their organization's QI Plan



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State Health Department Administration

- In June 2011, administered to all 1,537 MDH employees
- 73% response rate
- Department results summarized and provided to agency leadership and quality council
- Division results summarized and provided to division leadership



QI Maturity Score

- Want a summary QI maturity score calculated from a select list of questions that could be administered at regular intervals
- First step was reviewing factor analysis results performed by USM
- Identified 3-4 questions for each domain that had high factor-loading scores
- University of MN and USM QI experts consulted with MDH on selection of questions, with the aim of identifying questions with high factor loading scores that were actionable and might reflect change over time
- Question options presented to the MN practice-based research network for final selection and approval

QI Maturity Score Questions

Organizational Culture

Key decision makers believe QI is important

Staff are routinely asked to contribute to decisions

Staff has the authority to make change

My agency currently has a pervasive culture that focuses on continuous QI

Capacity/Competency

My agency has a QI plan

Leaders are trained in basic methods for improving quality

My agency has a high level of capacity to engage in QI efforts

Alignment and Spread

Job descriptions for many individuals include QI responsibilities

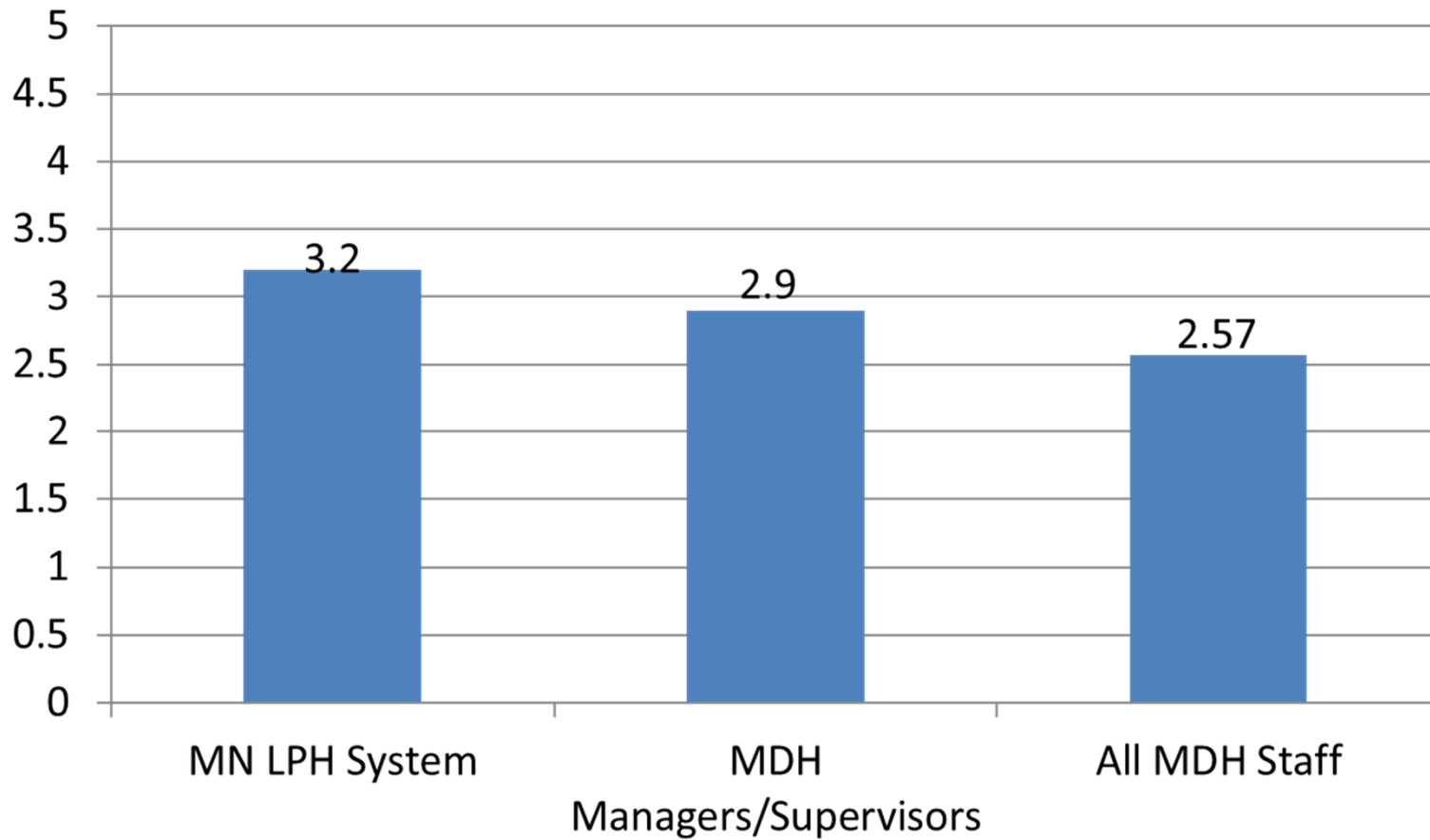
Customer satisfaction information is routinely used

My agency currently has aligned our commitment to quality with most of our efforts, policies and plans.



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Median QI Score: LPH and MDH



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Preliminary QI Score: LPH System

LPH System Median=3.22

Level 1 (No QI or low knowledge): 2%

Level 2 (Starting to get involved): 33%

Level 3 (Ad hoc QI, Borderline Formal QI): 49%

Level 4 (Formal QI, QI Culture): 16%



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Next Steps

- Incorporate the ten questions identified for QI maturity score into annual LPH reporting
- Track progress on promoting QI maturity over time using the score (2011 is baseline)
- MDH Quality Council
 - Use baseline data to identify priority areas and set objectives
 - Administer on an annual basis to track progress
- Offer tool to local health departments in obtaining baseline data, setting objectives and tracking progress
- Continue to test and refine score in partnership with USM and the U of MN

Challenges along the way...

- Changing leadership
- Waiting for the “right” time
- Helping busy people see how all the pieces fit (or don’t fit) together
- Building the plane while flying it
- At times, more than QI is needed
- Moving from QI 101 to 201

A piece (or two) of advice...

- Be patient and poised for action
- Use agency culture to determine strategy
- Measurement can be motivating
- Assessment scores may initially go down as understanding goes up
- Assess at different organizational levels
- Leverage personal contacts to increase survey responses

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Questions?

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