

The logo features the letters 'CQI' in a bold, red, sans-serif font. The 'C' and 'I' are partially enclosed by two grey, curved arrows that form a circular path around the 'Q'.

# **CQI EVALUATION**

## **Ohio Voluntary Accreditation Team Demonstration Project**

**Session 1C, April 8, 2009, 9:00 - 10:00  
2009 PHSSR Keeneland Conference  
Lexington, Kentucky**



# Project Overview & Objectives

- Association of Ohio Health Commissioners Grant
- 4 demonstration sites (4 mentor sites)
- Training, Consulting, Data Analysis Support
- Build awareness/linkage [CQI & accreditation]
- Determine how to infuse CQI culture in Ohio
- Advance CQI capacity in Ohio
- Inform role-appropriate metrics

# Methodology & Evaluation

## Action Research

- Training
- Appreciative Inquiry
- Discovery Interviews
- Team-ID Priorities
- Finding Voice
- Social Networking
- Mentoring

## Process Evaluation

- Natural fit CQI cycle  
Plan-Do-Study-Act
- Consultant Observations
- Data analysis

# Training Evaluating

## Audience Polling

### Clickers

18 questions

**results in  
real time**



I can list at least  
one of the four  
principles of CQI



(pre) Agree 45%  
Disagree 55%  
(post) Agree 100%

# Rate how useful the (CQI Tool) was for you

|                  | <b>Flow Chart</b> | <b>Fishbone Diagram</b> | <b>Pareto Chart</b> |
|------------------|-------------------|-------------------------|---------------------|
| <b>Excellent</b> | 5%                | 22%                     | 13%                 |
| <b>Very Good</b> | 55%               | 52%                     | 29%                 |
| <b>Good</b>      | 32%               | 22%                     | 42%                 |
| <b>Fair</b>      | 4%                | 4%                      | <b>17%</b>          |
| <b>Poor</b>      | 4%                | 0%                      | 0%                  |

Post– tools accessed more ... **correlation?**

# Training Data

Rate how this training raised your interest in Voluntary Accreditation.

|             |            |
|-------------|------------|
| Excellent   | 17%        |
| Very Good   | 26%        |
| Good        | 17%        |
| <b>Fair</b> | <b>35%</b> |
| Poor        | 4%         |

## Kirkpatrick's Four-Level Evaluation

- **KP1** Reaction
- **KP2** Learning
- **KP3** Transfer
- **KP4** Results

# Appreciative Inquiry Interviews

**Discovery**  
*n = 20*

- Past peak experiences
- Current functionality status
- Future aspirations

**Internal** discovery, insight, motivational

**External** build mentor base, Peer-to-Peer  
informs role-specific metrics

# Past Peak Experiences

## Q #1

### First Impressions

|                            |            |
|----------------------------|------------|
| <b>Staff Relationships</b> | <b>40%</b> |
| <b>Community</b>           | <b>30%</b> |
| <b>Services</b>            | <b>20%</b> |
| <b>Mission/Purpose</b>     | <b>10%</b> |

## Q #2

### Organizational Collaboration

|   |            |
|---|------------|
| <b>Teamwork, pitching-in across dept.</b> | <b>47%</b> |
| <b>Relationships</b>                      | <b>42%</b> |
| <b>Common Goal</b>                        | <b>19%</b> |

# Present Functionality

|                                      |     |
|--------------------------------------|-----|
| <b>Q #3</b><br><b>CQI Experience</b> |     |
| Organizationally Based               | 33% |
| Emotionally Based                    | 33% |
| Just described CQI process           | 17% |
| Not yet started CQI process          | 17% |

|   |     |
|---|-----|
| <b>Q #4</b><br><b>Value inclusive decision making</b> |     |
| Open exchange of ideas, staff buy-in                  | 56% |
| Personal Growth                                       | 28% |
| Tangible finished product                             | 19% |

# Future Aspirations

| <b>Q #5 Opportunities Associated with Accreditation</b> |            |
|---|------------|
| ▪ Policies/Practices                                    | <b>26%</b> |
| ▪ Agency Image  | <b>23%</b> |
| ▪ Funding   | <b>18%</b> |
| ▪ Team Building   | <b>18%</b> |
| ▪ Services  | <b>15%</b> |

|  |            |
|--|------------|
| <b>Q#6)</b><br><b>2013 Accreditation News Headline</b> |            |
| ▪ <b>Agency Status</b>                                 | <b>50%</b> |
| ▪ <b>Improved Service Delivery</b>                     | <b>28%</b> |
| ▪ <b>Direct benefits to community</b>                  | <b>22%</b> |

# Consultant Observations & Field Notes

- **Use of CQI Tools**
- **Team Functionality**
- **Progress toward Priority Issue**
- **Challenges Discussed**
- **Solutions Explored**

# Preliminary Findings Summary

- **Training alone not enough**
- **Field consultant is supportive**
- **Social networking has potential**
- **Mentoring helpful**
- **AI/Storytelling will likely infuse CQI culture**

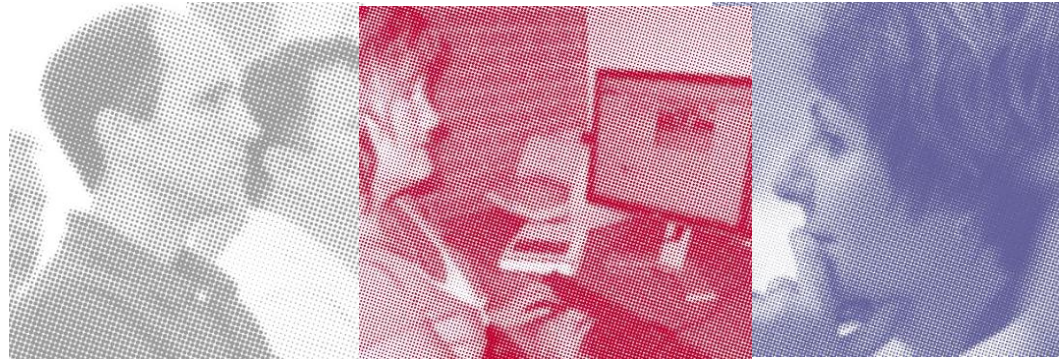
# Next Steps

- **Present** team storyboards at state conference
- **Convene** OVAT evaluation sub-committee
- **Mentor** – current 4 teams with future teams
- **Encourage** access to archived CQI tools webinars
- **Publish** promising practices and lessons learned

# We appreciate your participation...

If you have any questions please visit our website:

<http://cph.osu.edu/publichealth/index.cfm>



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