COLMRConnections

INSIDE

Get To Know COLMR

Welcome to the first issue of *COLMR Connections*. We plan to publish bi-annually and hope to use the newsletter as an opportunity to spread the word about our center and its research projects.

In 2004, COLMR became a VA HSR&D Center of Excellence and we are proud of this distinction. Many COLMR investigators were previously part of the Management Decision and Research Center (MDRC), which was established as a resource center to bridge research and practice in 1992. While we continue to contribute nationally to VA management, our mission has changed to focus on the study of health care management and organization and their effects on clinical outcomes and organization change.

Our goal is to develop and apply knowledge of innovative management practices to improve the effectiveness and efficiency of health care services. This includes researching management practices that result in higher quality, lower costs, and greater access to health care services, as well as examining those that promote successful organizational change for long-term performance improvement. As a special focus, we address organization change that includes implementation of evidence-based practice.

To meet these research goals, COLMR has partnered with four VA networks—VA New England Healthcare Network (VISN 1), VA Ohio Healthcare Network (VISN 10), VA Desert Pacific Healthcare Network (VISN 22) and VA Midwest Health Care Network (VISN 23)—and The Management Support Office (MSO) and the National Center for Organization Development (NCOD). Through our Collaborative Partners Council, they help set our research agenda. They serve as research sites for projects, and also benefit from our findings and literature surveillance.

Understanding organizational factors is a unique endeavor that frequently requires extended observation, often through longitudinal studies. For example, COLMR researchers have worked on the Pursuing Perfection project for over four years. They need to follow organizational factors and behaviors over time to see how they unfold, rather than just taking a snapshot to determine change.

Through *COLMR Connections* we hope to highlight several of our ongoing research projects and other COLMR news. We look forward to another productive year!

Martin P. Charns, DBA
Director, COLMR

Recent Findings: Civility's Impact on Patients

In each issue of COLMR Connections*, we will report on recent findings from our research. In this issue, we are reporting on the relationship between civility in the work-place and patient satisfaction.*

Within the past five years, the issue of civility in the workplace and its effect on employee satisfaction, retention, and overall organization performance has received increasing attention in research literature, the popular press, and in VA itself. The VA All Employee Survey (AES) Team therefore sought to determine whether items currently included in the AES could be used to measure this important construct in a psychometrically sound manner. It then also sought to explore the relationship between employee civility and organization performance as measured by patient satisfaction.

Using data from the 2004 administration of the AES, the team applied exploratory factor analysis (EFA) to 26 items from the section of the questionnaire focusing on experiences in the respondents' workgroup. This was done using a randomly selected half of the 110,664 respondents. The results suggested four constructs, one of which appeared to represent civility and included eight items such as:

- "People treat each other with respect"
- "A spirit of cooperation and teamwork exists"
- "The people I work with can be relied on when I need help"

The reliability and validity of the four scales suggested by the EFA were then tested by applying multi-trait analysis (MTA) in the remaining half of the 2004 AES data, and the results were very favorable. In addition to civility, the three other scales represented management for achievement, adequacy of resources, and a single-item measure of the pace of work.

Given this empirical support, the team then computed a civility score for each respondent, and the scores for all respondents in a given workgroup were averaged to

obtain a civility score for that workgroup. There were 4,204 workgroups with 10 or more respondents, and the degree of workgroup civility varied widely, ranging from 1.91 to 4.98 on a five-point, agree/disagree scale.

The team then examined the correlations between the AES scales and patient satisfaction as measured by the Survey of Healthcare Experiences of Patients (SHEP) conducted by the VA Office of Quality and Performance (OQP). It used the patient satisfaction data obtained during the same quarter in 2004 during which the AES had been administered. The results were quite striking. Of 12 dimensions of outpatient care measured by the SHEP, six

> *COLMR researchers found that civility can be reliably and validly measured using the AES, and also that civility among employees is positively associated with patient satisfaction.*

exhibited strong correlations with the civility scale whereas only one correlation of that magnitude was observed with the management for achievement scale, and none with resources or pace of work. Of 10 dimensions of inpatient care measured by SHEP, nine exhibited strong correlations with pace of work, eight with civility, one with resources and none with management for achievement.

COLMR researchers found that civility can be reliably and validly measured using the AES, and also that civility among employees is positively associated with patient satisfaction.

COLMR investigators Martin Charns, DBA, Mark Meterko, PhD, David Mohr, PhD, and Marjorie Nealon Seibert, MBA are members of the AES team, which has developed and administers the national VA AES.

Research Highlight: Rewarding Results Evaluation

Investigators at COLMR, in collaboration with researchers at the Center for Heath Quality, Outcomes, and Economics Research (CHQOER), are conducting a national evaluation of the Rewarding Results program. Rewarding Results is an $8.8 million national initiative created to help purchasers and health plans align incentives for high-quality health care. The program is supported by the Robert Wood Johnson Foundation, the California HealthCare Foundation, and the Commonwealth Fund. Seven demonstration projects were funded in 2002 that have developed and implemented a variety of innovative programs aligning both payment systems and non-financial incentives with quality improvement.

The COLMR-based evaluation has several components:

(1) developing a conceptual framework,

(2) surveying providers participating in Rewarding Results demonstration projects regarding their attitudes and perceptions of quality incentive programs,

(3) conducting interviews with key informants involved in the design and implementation of these projects, and

(4) analyzing demonstration project-provided secondary data to evaluate the effect of individual programs on achieving quality goals.

Finally, the evaluation team is in the process of determining the extent to which and the ways in which the initial successes achieved through Rewarding Results can be diffused beyond the demonstration setting.

The evaluation team is in the process of disseminating the results of their evaluation, and to date has published two articles in peer-reviewed journals:

- The evaluation team developed a conceptual framework to assist health care professionals in designing, implementing and evaluating pay-for-quality programs. This framework appears in the *American Journal of Medical Quality* (Young et al. 2005; Vol. 20: pp. 144–150). Visit **http://ajm.sagepub.com** to access the abstract or full text of the article.

- An article describing practice executives' perceptions of incentive programs targeted at physician groups will be published in *Medical Care Research and Review* (Bokhour et al. 2006; in press).

Another article reporting the results of the team's assessment of the reliability and validity of their survey instrument was also recently accepted for publication in *Health Services Research*. In addition, members of the evaluation team have given numerous presentations and posters, both by invitation and in peer-reviewed forums. Results of the Rewarding Results national evaluation have been reported at events sponsored by AcademyHealth, the Centers for Medicare and Medicaid Services, America's Health Insurance Plans, and the Center for Health Care Management.

The national Rewarding Results evaluation is jointly funded by the Robert Wood Johnson Foundation and the Agency for Healthcare Research and Quality. Gary Young, JD, PhD, is the principal investigator, and the research team includes the following COLMR-affiliated investigators: James Burgess, PhD, Mark Meterko, PhD, Bert White, DMin, MBA, and Karen Sautter, MPH CHQOER investigators are Dan Berlowitz, MD, and Barbara Bokhour, PhD.

COLMR Associate Director Search

COLMR is currently recruiting for a physician Associate Director who will be responsible for helping to develop and carry out the center's research agenda and for providing guidance and mentoring to center investigators and fellows. The individual will also be expected to conduct his/her own research. Qualified applicants will be experienced physician health services researchers, with interests in organization, management and quality of care, and with a strong track record of grant funding and publications. The position includes some clinical responsibilities at VA and an academic appointment at Boston University.

We offer a full benefits package and competitive salary. U.S. citizenship required. Interested individuals should email their resumes to Michael.Gormley@va.gov.

COLMR Welcomes Its First Fellow

Last October, Amy Smalarz, PhD, joined COLMR as its first post-doctoral fellow. She received her doctorate from Brandeis University in health services research and social policy before coming onboard at the center, and will continue her research through this year-long position as a health science specialist.

After presenting an abstract on her dissertation at a 2004 Academy Health conference, Smalarz met COLMR Associate Director Gary Young and learned about the fellowship. The center seemed like a good match. "COLMR is focused on organizational characteristics that can help or hinder the care that's provided, and I'm finding that's my niche as well," says Smalarz. "My interests overlap with a lot of the interests here."

> *"I'm looking forward to working with and learning from well-known experts in my field while at COLMR."*

She also was drawn to the VA because of the research experience it would allow her to obtain. "The VA has a lot of data," says Smalarz. "It's a great venue to collect and disseminate information. I'm looking forward to working with and learning from well-known experts in my field while at COLMR."

Smalarz will use her time to work on center projects and also publish her dissertation on group culture and its effect on quality performance. Her research measured the culture of physician groups and its effects on patient outcomes. Through a random survey of Massachusetts physician groups and quality data collection, she found that culture was a significant factor that explained variations of care. She also found two governing models physician groups can use to help them provide the best quality of care for patients.

In addition to Smalarz's fellowship, COLMR is recruiting candidates for a second post-doctoral fellowship to begin October 1. The deadline for consideration is March 1. COLMR is also currently recruiting for a new MD post-residency fellowship to begin July 1. For additional information or to apply, please contact Vicky Parker at victoria.parker@va.gov or (857) 364-2304.

Organizational Database in the Works

The Veterans Health Administration (VHA) has excellent clinical databases, but nothing comparable for organizational characteristics. Recognizing this gap, COLMR is working with its Collaborating Partners Council (CPC) to compile a systematic organizational database for VHA. The CPC includes network leaders from VISNs 1, 10, 22 and 23 and leaders of the Management Support Office and National Center for Organization Development.

To create the organizational database, COLMR is drawing data from existing sources wherever possible. For some key characteristics, however, no systematic data are available. To obtain this data, COLMR and the CPC conducted an inventory of VISNs and medical centers called the Inventory of VHA Organizational Characteristics. It was designed to collect data on a range of structural and process characteristics, both administrative and clinical, that are expected to affect clinical practice and care to veterans.

Data for the Inventory were collected through a web-based survey sent to VISN and medical center directors in the late summer and fall of 2005. One Inventory was submitted per organization. All VISNs and 98% of medical centers completed it.

With data from every network and virtually every medical center, managers and researchers will be able to compare existing structures, processes, and features across the system, and address a variety of management-relevant questions by linking network and facility characteristics to organizational performance.

Organizational Database in the Works

To illustrate the information that will be available, the inventory indicates that there is variation in the centralization of decision-making within VISNs, and that the extent of centralization differs by type of decision. For example,

- 45% of medical center directors report that decisions about what services a campus will provide are made by the network director,
- 53% report that those decisions are made by the medical center director.
- 27% of medical center directors report that decisions about where patients will receive open heart surgery are made by the network director,
- 23% report those decisions are made by the medical center director, and
- 32% report those decisions are made by the service chief or service line director.

COLMR's Steering Committee

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Boston University School of Public Health

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Michael Lawson
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Irene Fraser, PhD
Director, Center for Delivery, Organization, and
Markets
Agency for Healthcare Research and Quality

COLMR's expectation, based on literature on organizational design, is that the extent of centralization is associated with organizational effectiveness. It will test that expectation by linking centralization variables from the inventory with performance data on a variety of clinical and administrative dimensions.

Investigators will distribute descriptive reports of the inventory results for both VISNs and medical centers to the field in the next few months. Following completion of those reports, COLMR will make the inventory data available to managers and researchers across VHA, and begin analyzing the relationship between organizational characteristics and a range of performance variables.

Ongoing COLMR Research Projects

COLMR's mission is to develop and apply knowledge of innovative management practices to improve the effectiveness and efficiency of health care services for our nation's veterans and the larger health care community. In addition to the Rewarding Results project and the civility study, which are highlighted in this issue, COLMR research projects include:

Pursuing Perfection
This project's major goal is to evaluate the success of the Pursuing Perfection program as it is implemented in seven demonstration sites throughout the United States. The project has its origins in the Institute of Medicine's (IOM) work on health care quality.

Researchers are evaluating the extent to which participating organizations attain their goals of perfect health care, addressing the IOM's six aims: effectiveness, efficiency, timeliness, patient centeredness, equity, and safety; and examine changes in organizational culture, systems, structure, and processes to support perfect care.

Many health care organizations can effectively manage individual improvement projects, but few have been able

to sustain the gains that require ongoing cultural and infrastructural change. COLMR investigators are working to identify factors that allow some organizations to make permanent positive changes and build systems that become the basis for routine practice. Specific goals include determining the extent to which an organization succeeds in achieving the improvement goals articulated in its plan, and identifying factors that contribute to an organization's successes or failures.

The Pursuing Perfection project is being funded by the Robert Wood Johnson Foundation. Martin Charns, DBA, is the principal investigator, and the research team includes the following COLMR investigators and staff: Alan Cohen, ScD, Irene Cramer, PhD, LICSW, Sally Holmes, MBA, Barbara Lerner, MS, Joseph D. Restuccia, MPH, DrPH, Michael Shwartz, PhD, and Carol VanDeusen Lukas, EdD.

Early findings from this project have been incorporated into two other ongoing COLMR projects—Dissemination and Implementation of Supported Employment in VHA, and Strengthening Organization to Implement Evidence-Based Clinical Practice, as well as the proposed Dissemination of Evidence Based PTSD Treatment in VISN 1.

Evaluation of Parkinson's Disease Research, Education and Clinical Centers (PADRECC)

The five-year, multi-method, quasi-experimental study is examining the extent to which PADRECCs (Parkinson's Disease Research, Education and Clinical Centers) affect utilization, processes, and outcomes of clinical care, research, education, and the diffusion of state of the art knowledge about Parkinson's disease (PD). Previous researchers have noted that PD is the second most common neurodegenerative disease affecting older persons in the United States and that the costs for people with PD have been reported to be twice as high as for non-PD control subjects matched for age, urban v. rural living setting, and comorbid conditions. Recent analyses indicate a sizeable population of people with PD in VA, which treated over 63,000 patients with any PD diagnosis between 1997 and 1999. In response, VA has implemented six specialized PADRECCs across the country.

The study is also investigating whether the "mini-network" PADRECC organization being implemented in the Southwest PADRECC, and the formal collaboration between two medical centers being implemented in the Northwest PADRECC, differ from the other PADRECCs in processes or outcomes. The research builds on previous work in areas including organizational theory, network theory, management of chronic illness, measurement of patient outcomes, and information dissemination.

Strengthening Organization to Implement Evidence-Based Clinical Practice

Evidence-based clinical practices (EBCPs) are often not widely adopted, despite extensive efforts to influence individual practitioners to use them. Targeting diffusion efforts only to individuals generally fails because providers do not act in isolation. They are part of health care organizations that affect their behavior and that facilitate or impede EBCPs. Therefore, to increase the diffusion of EBCPs, we need to develop organizations with structures, processes and cultures that support the use of EBCPs in their daily operations.

To create such organizations and test their effectiveness, COLMR investigators are collaborating with the leadership of VISNs 1, 10 and 23 in a three-year study. VISN 23 and its medical centers will implement an organizational model built on findings from the Pursuing Perfection project and supported by published evidence on organizational design and change. The organizational model has three components: active top leadership commitment to improving quality; multi-disciplinary evidence-based clinical process redesign; and links to senior management structures and processes to provide management support. VISNs 1 and 10 will implement a more focused strategy limited to performance data feedback. The clinical focus in all three networks is on improving compliance with hand-hygiene guidelines, a focus of high priority for improvement in VA.

Ongoing COLMR Research Projects

This project is being funded by HSR&D IMV 04-055 and the principal investigator is Carol VanDeusen Lukas, EdD. COLMR investigators working on the project also include: Martin Charns, DBA, Ryann Engle, MPH, Sally Holmes, MBA, Mark Meterko, PhD, Marjorie Nealon Seibert, MBA, Jennifer Nguyen, Victoria Parker, DBA, Michael Shwartz, PhD, Jennifer Sullivan, MS, and Bert White, MBA, DMin. Network directors and chief medical officers who serve as investigators include: Jeannette Chirico-Post, MD, Sheila Gelman, MD, MS, Barry Graham, MD, Michael Miller, MD, PhD, Clyde Parkis, and Robert Petzel, MD. Rita Kowalski of NCOD supports the project by providing process consultation to the study sites.

Dissemination and Implementation of Supported Employment in VHA
This project addresses the implementation of supported employment (SE), an evidence-based practice for people with serious mental illness. Investigators are seeking to identify factors that influence successful implementation of SE, defined by fidelity of the SE program to the evidence-based SE model as measured on a standardized instrument, and effectiveness as measured by the proportion of veterans who enter competitive employment. Quantitative and qualitative methodologies are being used to address the objectives. Researchers on this project are pursuing goals similar to HSR&D's Quality Enhancement Research Initiative (QUERI) program to identify factors related to effective implementation of evidence-based clinical practice.

This project is funded by HSR&D MNT 05-098. Sandra G. Resnick, PhD, with the VA Connecticut Health Care System is the principal investigator, and COLMR's Irene Cramer, PhD, MSSA, LICSW is leading the investigation of the implementation.

Organizational Cultural Competence Assessment: An Intervention and Evaluation
This project is examining the influence of an organizationally-based cultural competence assessment and intervention project on the job experiences and satisfaction of front-line nursing care workers in long-term care facilities. It is assessing cross-cultural relations within 10 nursing facilities in eastern Massachusetts that are working with specially trained diversity consultants. Their goal is to develop site-specific cultural competency interventions to improve communication, teamwork and resident care. Results will be used to recommend how organizational self-assessments can help promote cultural competence among long-term care staff.

The primary analysis will compare job characteristics, motivation, and satisfaction of nursing assistants both before and after an organizational cultural competence intervention. Researchers are also analyzing focus group, survey, and observational data regarding the intervention.

The Robert Wood Johnson Foundation and Atlantic Philanthropies are funding this project. Victoria Parker, DBA is the principal investigator, and the COLMR research team includes Ryann Engle, MPH and Ledia Tabor.
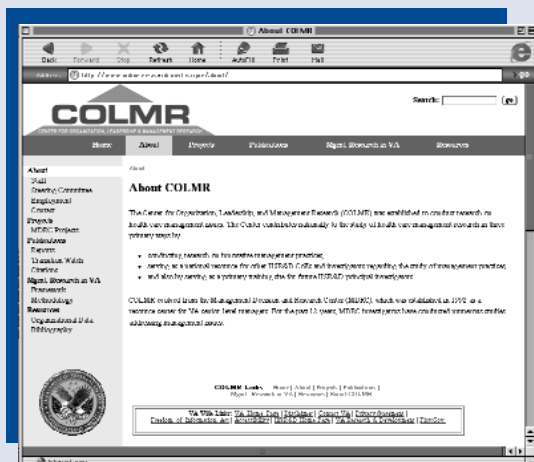
Updated Website Ready for Visitors

COLMR's website has recently been redesigned and updated with current information regarding the center's research projects. It also contains information about employment, training, and resources. Visit **www.colmr.research.va.gov** to take a look.

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