

# Performance Excellence\*

Performance excellence refers to an <u>integrated approach</u> to organizational performance management that <u>results</u> in

- Delivery of ever-improving <u>value to customers</u> and <u>stakeholders</u>, contributing to <u>organizational sustainability</u>
- <u>Improve</u>ment of overall organizational <u>effectiveness</u> and <u>capabilities</u>
- Organizational and personal <u>learning</u>

\* Retrieved from https://www.nist.gov/baldrige/what-performance-excellence Oct. 30, 2017

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National Association of State Directors of Developmental Disabilities Service

## Pursuing Performance Excellence ~ Quality's Contribution

## The Gurus:

- Crosby: Marketer "Quality is Free", Quality is Conformance to Requirements, Cost of Non-Conformance
- Deming: Philosopher Statistical Process Control, 14 Points
- <u>Juran</u>: Management Consultant Quality is Fitness for Use, Quality Trilogy, Resistance to Change
- Fiegenbaum: Total Quality Control (TQC/TQM)

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## Crosby: Quality Costs

Prevention - cost of quality planning activities

<u>Appraisal\*</u> - cost to inspect & test process output

<u>Internal Failure\*</u> - costs associated with all process and product failures that are caught before reaching the market

External Failure\* - costs associated with process and product failures which reach customers

\* Costs of Poor Quality (COPQ)

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## Dr. Juran's Quality Trilogy

- 1. Quality <u>Planning</u> all activities that enable new products and services to meet internal standards & requirements and customer requirements at launch.
- 2. Quality <u>Control</u> comparing process output to standards identifying any variance, and acting on the difference.
- 3. Quality *Improvement* the systematic identification and reduction of chronic waste (cost of poor quality) within any process or system which results in unprecedented quality levels (breakthrough)

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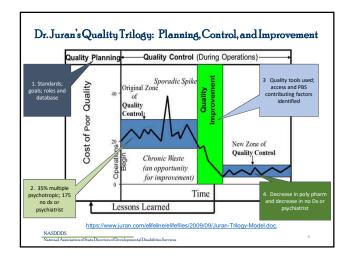
## Covering Both Aspects of Quality

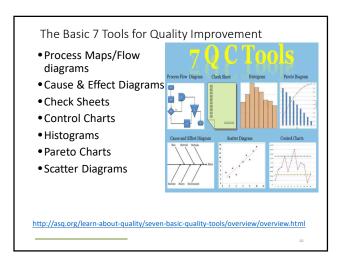
## Quality is...

- Conformance to Requirements (Philip Crosby)
- -Who determines this? Regulators or payers -Objective
- Fitness for Use (Dr. Joseph Juran)
  - –Who determines this? <u>Customers</u>
  - -Subjective
- A comprehensive approach to quality requires

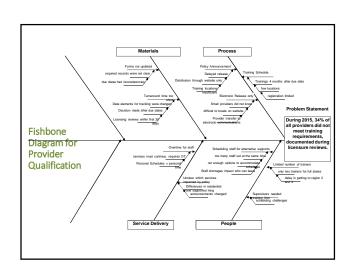
**BOTH** compliance with requirements **AND** customer satisfaction

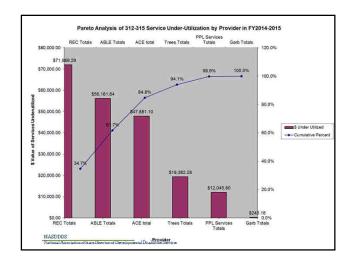
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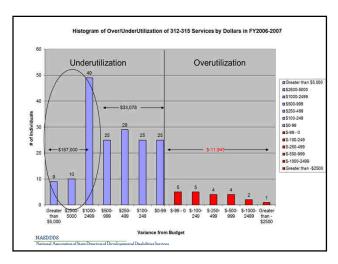




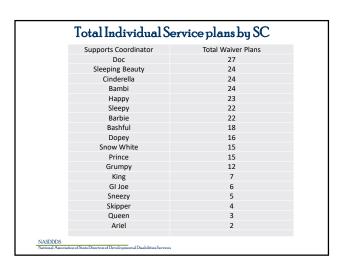
# Example Quality Improvement Project: State Assures Capacity through Qualified Providers Qualified Providers: Sub-assurance iii: The state implements policies and procedures for verifying provider training is conducted in accordance with state requirements and the approved waiver. (Design) Performance Measure: Number and percent of providers reviewed who meet or exceed all training requirements as published in state administrative rules. (Discovery) Actual Data: 235 of 310 (76%) of providers reviewed during annual recertification, met all training requirements. Review of this measure revealed less than the 86% expectation. (Remediation) Quality Improvement Project: Operating Agency initiated steps to improve. In year 3 of the approved waiver, OA Waiver Coordinator instituted a 6 month QI project involving key provider associations and families. During this time, Root Cause Analysis using Fishbone Diagrams, Affinity Diagrams and Check sheets revealed incomplete deployment of 2012 policy changes on provider training in two areas. OA renewed efforts to announce and clarify training requirements through regional meetings with provider Executive staff, reissued the Administrative Rule, and instituted webinars and more frequent training in these key areas within all regions of the state. Improvement: Follow up licensure reviews one year later showed improvement to 298 of 310 providers met all training requirements. (96%)

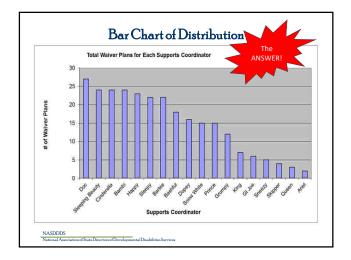


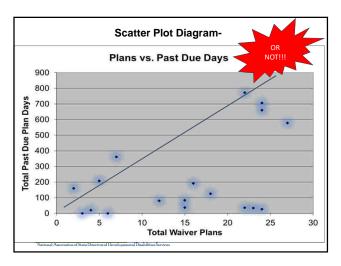


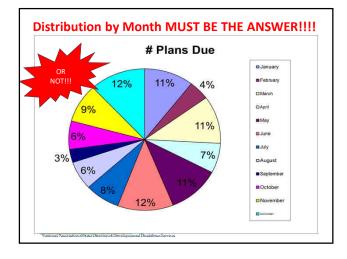


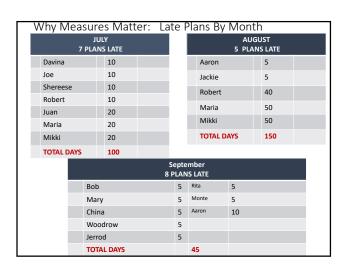


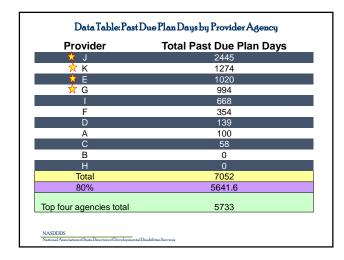


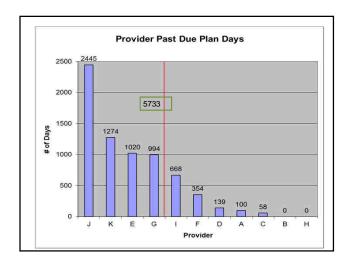


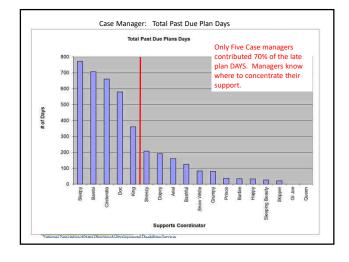


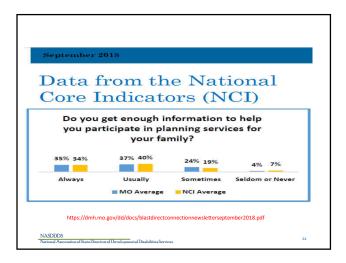












## Quality by Perception and Quality by Fact

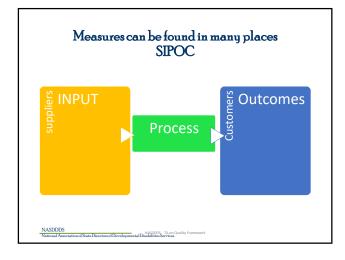
- Perception of individuals who use, access or benefit from the service systempeople who are eligible and their family members for example.
- Fact based information from records
- •It is best to have a way to combine both
- National Core Indicators provides both perception (peoples views) and fact (actual services, dx, dates, etc.)

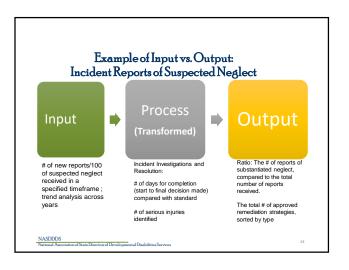
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## Types of Data in Quality Improvement

- Attribute Data: information that can be counted for recording/analysis of the presence or absence of an attribute:
  - -Yes/No; Pass/Fail; Present or Absent
- <u>Variable Data</u>: measures that reveal what appears to be random and/or inconsistent results. The degree of difference in measures show values that can be analyzed. The degree of presence or absence, for example.
  - -How much? How long?

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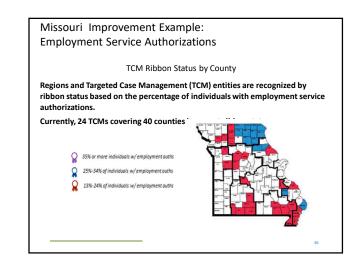


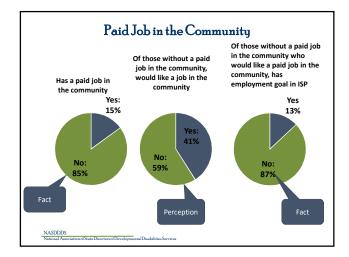
## What are benchmarks, and why do they matter?

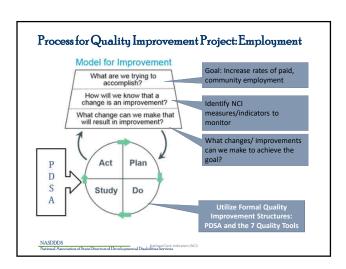
- Valid and reliable comparisons from the same field of study or industry, on the same data points, between separate organizations
- To provide context and inform performance
- Striving for the "best" requires that you know who/what is the best
- Comparing to internal performance year to year

   could create a blind spot and convince an
   organization that better performance is not
   possible

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# Using the Quality Tools

- Fishbone Diagrams--- identify the contributing factors
- Affinity charts---- collect all ideas
- Checklist or Histogram---- test to see which occur most
- Pareto Chart---- identify the factors that will gain the most improvement (least number of variable contribute the highest impact)

### • RESULTS:

Goals are not in plans because employment /job is not discussed as part of service plan meeting

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