**SUSTAINING a Continuous Quality Improvement (CQI) Culture: Organizational Survey**

**2012**

**Culture of QI Workgroup**

**APHL LSIG**

**6/8/2012**

**[](http://www.aphlweb.org/aphl_departments/Operations/Communications_Media/APHL_logos/APHLLogoNameHiRes.jpg)**

**CQI Organizational Assessments on Readiness and Deployment**

The CQI Organizational assessment(s) were developed by the “Culture of Quality Improvement” workgroup (part of the Laboratory System Improvement Group). The goal of the assessment(s) is to provide a tool for laboratories to measure the culture of quality in their laboratory as well as readiness and willingness to adopt a culture of quality. It can be used as a baseline measurement of your laboratories’ quality culture and can identify “change agents” in your institution - individuals that are willing to assist in facilitating change. If used over time it will identify changes in perception of staff about quality improvement in your environment.

CQI refers to Continuous Quality Improvement, a management philosophy adopted by organizations to improve performance. Several CQI methodologies that are employed include Lean (elimination of waste, customer value), Six Sigma (reduction in defects), and Malcolm Baldrige (managing organizational systems).

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**INSTRUCTIONS:** The CQI Culture survey is designed as a template in Word. To administer the survey and collect response data, it is recommended that it be created using survey software (e.g. Survey Monkey, FormSite, Qualtrics, Google). To use this template, double click on the appropriate check-box to open the pop-up screen. Then select “Checked” under the Default Value heading.

The survey questions are for guidance only, and can be customized or tailored to meet your organization’s needs. It addresses key areas of focus that **support and sustain a CQI culture within an organization**, including level of readiness and degree of deployment. It is designed to be anonymous and to be completed by all management and staff within your organization. To identify areas of success, data can also be segmented based on job position or work unit. The survey can be repeated on a regular basis to measure your organization’s level of progress.

1. **Select the box that best describes your CURRENT position (select all that apply):**

|  |  |
| --- | --- |
|  | Technical- Laboratory Scientist |
|  | Technical- Laboratory Supervisor |
|  | QA Officer |
|  | Administration (e.g. Senior Leaders, Directors) |
|  | Administrative Support (e.g. Human Resources, Graphics, Public Information Officer) |
|  | Laboratory Support (IT, Receiving, Media Prep) |
|  | Other (describe): *insert text* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Full-time |  |  | Permanent |
|  | Part-time |  |  | Temporary |
|  |  |  |  | Student |

|  |  |
| --- | --- |
|  | New employee (within past 12 months) |

1. **Select the box that best describes your CURRENT work unit/section/department (select all that apply):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Administration |  |  | Environmental- Microbiology |
|  | Blood Lead |  |  | Environmental- Organics |
|  | Clinical- Chemistry |  |  | Environmental- Inorganics |
|  | Clinical- Microbiology (Bacteriology) |  |  | Food Testing- Chemistry |
|  | Clinical- Molecular Biology |  |  | Food Testing- Microbiology |
|  | Clinical- Mycology |  |  | Food Testing- Radiochemistry |
|  | Clinical- Parasitology |  |  | Newborn Screening |
|  | Clinical- Serology |  |  | Pre-Natal Screening |
|  | Clinical- Virology |  |  | QA |
|  | Environmental- Air Quality |  |  | Support Services |
|  | Environmental- Limnology |  |  | Other (describe): *insert text* |
|  | Environmental- Radiochemistry |  |  |  |

1. **Read the following statements and check the box the best indicates your level of agreement.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SENIOR LEADERS** | | **I don’t know**  **(0)** | **Strongly Disagree**  **(1)** | **Somewhat Disagree**  **(2)** | **Somewhat Agree**  **(4)** | **Strongly Agree**  **(5)** |
| a. | Open to new ideas to increase quality. |  |  |  |  |  |
| b. | Emphasizes quality improvement as a high priority. |  |  |  |  |  |
| c. | Emphasizes and supports a culture of change. |  |  |  |  |  |
| d. | Stresses the importance of quality in all levels of workers- from management to the bench. |  |  |  |  |  |
| e. | Consistently communicates about quality. |  |  |  |  |  |
| f. | Encourages changes to improve quality. |  |  |  |  |  |
| g. | Encourages innovation. |  |  |  |  |  |
| h. | Prioritizes critical improvement needs within the organization. |  |  |  |  |  |
| i. | Deploys plans and timelines to integrate CQI strategies within your organization. |  |  |  |  |  |
| j. | Dedicate resources to support CQI within your organization (e.g. staff, time, training, tools). |  |  |  |  |  |
| k. | Identifies staff to develop CQI expertise and ensures they receive training. |  |  |  |  |  |
| l. | Regularly sponsors process improvement events. |  |  |  |  |  |
| m. | Consistently communicates process improvement expectations. |  |  |  |  |  |
| n. | Consistently acknowledges and recognizes CQI improvement events and staff participation. |  |  |  |  |  |
| o. | Ensures rapid implementation of process improvements, including business and operational process changes. |  |  |  |  |  |
| p. | Received basic training in CQI methods (e.g. Lean, Six Sigma, Baldrige). |  |  |  |  |  |
| q. | Participated/Attended in at least one process improvement event *within the past 12 months*. |  |  |  |  |  |
| r. | Identifies performance improvement metrics for your organization. |  |  |  |  |  |
| s. | Regularly measures and evaluates performance improvement metrics. |  |  |  |  |  |
| t. | Listens to external and internal customer focus groups to identify process improvement priorities within your organization. |  |  |  |  |  |
| u. | Ensures CQI training opportunities for *all* staff. |  |  |  |  |  |

| **YOUR ORGANIZATION** | | **I don’t know**  **(0)** | **Strongly Disagree**  **(1)** | **Somewhat Disagree**  **(2)** | **Somewhat Agree**  **(4)** | **Strongly Agree**  **(5)** |
| --- | --- | --- | --- | --- | --- | --- |
| a. | Open to new ideas to increase quality. |  |  |  |  |  |
| b. | Emphasizes quality improvement as a high priority. |  |  |  |  |  |
| c. | Emphasizes and supports a culture of change. |  |  |  |  |  |
| d. | Stresses the importance of quality in all levels of workers- from management to the bench. |  |  |  |  |  |
| e. | Consistently communicates about quality. |  |  |  |  |  |
| f. | Encourages changes to improve quality. |  |  |  |  |  |
| g. | Encourages innovation. |  |  |  |  |  |
| h. | Maintains expertise in-house to support CQI initiatives (e.g. manage tools, serve as facilitators, mentors, trainers). |  |  |  |  |  |
| i. | Maintains adequate resources to dedicate to CQI initiatives (e.g. staff, time, training, tools). |  |  |  |  |  |
| j. | Maintains CQI tools and templates. |  |  |  |  |  |
| k. | Routinely conducts inter-unit or inter-departmental process improvement events. |  |  |  |  |  |
| l. | Routinely conducts process improvement events with partners outside of your organization. |  |  |  |  |  |
| m. | Routinely includes front-line staff in process improvement events. |  |  |  |  |  |
| n. | Routinely utilizes staff suggestions/recommendations for process improvement. |  |  |  |  |  |
| o. | Incorporates CQI into your Strategic Plan with goals and measureable outcomes. |  |  |  |  |  |
| p. | Maintains and regularly updates a CQI community board (upcoming events, teams, implementation plans, outcomes). |  |  |  |  |  |
| q. | Consistently celebrates CQI improvement events and outcomes. |  |  |  |  |  |
| r. | Regularly utilizes *external* customer focus groups to identify process improvement priorities within your organization. |  |  |  |  |  |
| s. | Regularly utilizes *internal* customer focus groups to identify process improvement priorities within your organization. |  |  |  |  |  |
| t. | Provides *all* staff an opportunity to receive basic CQI training (e.g. tools, techniques, hands-on) |  |  |  |  |  |
| u. | Ensures *all* staff receive CQI training on a regular basis (annual, bi-annual, etc). |  |  |  |  |  |
| v. | Ensure staff participates in a process improvement event on a regular basis (annual, bi-annual, etc). |  |  |  |  |  |
| w. | Ensure *new* staff receives CQI training as part of his/her orientation. |  |  |  |  |  |

| **YOUR UNIT/SECTION/DEPARTMENT** | | **I don’t know**  **(0)** | **Strongly Disagree**  **(1)** | **Somewhat Disagree**  **(2)** | **Somewhat Agree**  **(4)** | **Strongly Agree**  **(5)** |
| --- | --- | --- | --- | --- | --- | --- |
| a. | Open to new ideas to increase quality. |  |  |  |  |  |
| b. | Emphasizes quality improvement as a high priority. |  |  |  |  |  |
| c. | Emphasizes and supports a culture of change. |  |  |  |  |  |
| d. | Stresses the importance of quality in all levels of workers. |  |  |  |  |  |
| e. | Consistently communicates about quality. |  |  |  |  |  |
| f. | Encourages changes to improve quality. |  |  |  |  |  |
| g. | Encourages innovation. |  |  |  |  |  |
| h. | Have adequate resources to dedicate to CQI initiatives (e.g. staff, time, training, tools). |  |  |  |  |  |
| i. | Has ready access to CQI tools and templates. |  |  |  |  |  |
| j. | Has access to expertise within your organization to help with CQI improvement needs. |  |  |  |  |  |
| k. | Prioritizes critical improvement needs. |  |  |  |  |  |
| l. | Routinely conducts inter-unit or inter-departmental process improvement events. |  |  |  |  |  |
| m. | Routinely includes staff in CQI improvement activities. |  |  |  |  |  |
| n. | Routinely utilizes staff suggestions/recommendations for process improvement. |  |  |  |  |  |
| o. | Regularly shares improvements and innovations with others *outside of your unit*. |  |  |  |  |  |
| p. | Consistently celebrates CQI improvement events and outcomes. |  |  |  |  |  |
| q. | Regularly utilizes customer feedback to improve processes. |  |  |  |  |  |
| r. | Has routine reports and easy accessibility to data to collect process improvement metrics. |  |  |  |  |  |
| s. | Regularly measures and evaluates process improvement metrics. |  |  |  |  |  |
| t. | Ensures staff adequate time for CQI training and events. |  |  |  |  |  |

| **YOURSELF** | | **I don’t know**  **(0)** | **Strongly Disagree**  **(1)** | **Somewhat Disagree**  **(2)** | **Somewhat Agree**  **(4)** | **Strongly Agree**  **(5)** |
| --- | --- | --- | --- | --- | --- | --- |
| a. | Open to new ideas to increase quality. |  |  |  |  |  |
| b. | Emphasizes quality improvement as a high priority. |  |  |  |  |  |
| c. | Emphasizes and supports a culture of change. |  |  |  |  |  |
| d | Stresses the importance of quality as part of the organization. |  |  |  |  |  |
| e. | Consistently communicates about quality. |  |  |  |  |  |
| f. | Feels empowered to make changes to improve quality. |  |  |  |  |  |
| g. | Encourages innovation in others. |  |  |  |  |  |
| h. | Received basic training on CQI methods (e.g. Lean, Six Sigma). |  |  |  |  |  |
| i. | Understands basic CQI concepts. |  |  |  |  |  |
| j. | Has access to CQI tools and templates. |  |  |  |  |  |
| k. | Participated in a process improvement event *within the past 12 months*. |  |  |  |  |  |
| l. | Participated in either an external or internal customer focus group to identify process improvement priorities within your organization *within the past 12 months*. |  |  |  |  |  |
| m. | Participated in the most recent strategic planning within your organization. |  |  |  |  |  |
| n. | Received advanced training in CQI methods. |  |  |  |  |  |
| o. | Regularly offers recommendations/suggestions or innovations to improve processes *within your unit*. |  |  |  |  |  |
| p. | Regularly offers recommendations/suggestions or innovations to improve processes *outside of your unit*. |  |  |  |  |  |
| q. | Routinely uses CQI as part of your job responsibilities. |  |  |  |  |  |
| r. | Trains, facilitates, or mentors others on CQI concepts. |  |  |  |  |  |

**Additional Comments:**

*insert text here*