A Guide for Assessing, Planning, and Improving Organizational Effectiveness

Brent D. Ruben, Ph.D.
Introduction

The Excellence in Higher Education (EHE) framework for organizational design, assessment, planning, and improvement is a useful tool for addressing many of the challenges that face leaders in higher education and academic health and medicine. The approach is based upon the organizational excellence framework of the National Institute of Standards and Technology, Malcolm Baldrige National Quality Award Program. The EHE framework adapts the Baldrige framework to the language and culture of colleges and universities, and this version adapts the framework to the domain of academic health and medicine. EHE won the 2012 Leveraging Excellence Award from the Network for Change and Continuous Innovation in Higher Education, and was recognized by the Baldrige Foundation in 2018 with the awarding of the inaugural award for outstanding leadership in education.

EHE is designed for use in design, assessment, planning, and organizational improvement efforts in any or all areas with colleges and universities. The framework incorporates many of the dimensions typically included in assessment methodologies such as self-studies, external reviews, management audits, accreditation reviews, and strategic planning.

The framework emphasizes a broad definition of excellence which can be useful for an entire institution or specific departments, programs, centers, advisory councils, or governing groups. Furthermore, the framework is applicable to academic, student life, service, and administrative units.

The EHE framework consists of a number of questions organized into seven categories, each of which is considered to be a vital component for organizational effectiveness: (1) Leadership and Governance; (2) Purposes and Plans; (3) Beneficiary and Constituency Relationships; (4) Programs and Services; (5) Faculty, Staff and Workplace; (6) Metrics, Assessment, and Analysis; and (7) Outcomes and Achievements. The questions guide users through an assessment of each area of organizational performance, and collectively, the answers provide a broad assessment of the strengths and potential areas for improvement.


Category 6—Metrics, Assessment, and Analysis

Considers the metrics and methods used for review and analysis of the effectiveness of the program, department, school, or institution in each EHE category. Focuses on how assessment is used to identify and document accomplishments and needs for improvement, innovation, or the discontinuation of activities.

- Is there a well-defined, shared view as to what standards and methods to use in assessing the effectiveness of the organization in achieving its mission and aspirations and in living its values?
- Are standards and methods in place for assessing outcomes and accomplishments in each EHE Category: 1) leadership and governance; 2) purposes and plans; 3) beneficiary and constituency relationships, 4) mission critical and administrative/supervisory programs and services; 5) faculty, residents, fellows, staff, and other health and medical personnel, and workplace culture/climate; and 6) metrics, assessment, and analysis?
- Does the organization have and use effective measures of collaboration across disciplines, programs, and institutions?
- Are there effective approaches for sharing assessment information on outcomes and achievements?
- Is assessment information effectively used to guide organizational improvement—refinement, innovation, redesign, and/or the discontinuation of programs, services, or activities, as appropriate?
- Are rankings, reviews and other trend and comparisons relative to peers, competitors, and leaders gathered, analyzed, and used to evaluate, improve, and innovate?
- Is outcome information used for planning and priority setting, internal and external communication, resource allocation, reward, and recognition?

Category 7—Outcomes and Achievements

Focuses on documenting outcomes and achievements, progress over time relative to plans and goals, and effectiveness compared to peers, competitors, and leaders.

- What does the available evidence and outcome information indicate about the organization's success in fulfilling its mission, vision, values, plans, goals, and priorities?
- What does available evidence and outcome information indicate about the effectiveness of mission-critical programs and services?
- What does the available information indicate about performance in each EHE Category: 1) leadership and governance; 2) purposes and plans; 3) beneficiary and constituency relationships, 4) mission critical and administrative/supervisory programs and services; 5) faculty, residents, fellows, staff, and other health and medical personnel, and workplace culture/climate; and 6) metrics, assessment, and analysis?
- How does evidence and information from comparisons, including rankings, ratings, and accreditation outcomes, compare to trends with peers and aspirants?
- How is outcomes information used for continuing improvement and innovation, and for documenting and communicating with internal and external constituencies?
Categories and Key Issues

2) Administrative and Support Services
• Are the key critical administrative and support functions clearly defined, well-documented, effectively communicated, and consistently followed?
• Are regular and systematic reviews of important administrative and support services, procedures, and processes conducted to assure their quality, effectiveness, efficiency, continuing relevance, and currency? How, and how often are these reviews conducted?
• Do reviews take account of the potential need to refine, revise, or discontinue particular services, or to create new administrative programs and services?
• Are procedures in place to assure high standards in the design and implementation of new administrative and support services, and procedures?

Category 5—Faculty/Staff and Workplace
Focuses on recruiting and retaining excellent faculty, residents, fellows, staff, and other health and medical personnel; encouraging and recognizing high standards of performance; promoting professional development; and creating and maintaining effective organizational structures and a positive workplace culture and climate.

• Are qualifications well defined and expectations clear?
• Are systematic and effective procedures in place for identifying, recruiting, hiring, welcoming, and orienting new academic, professional, administrative, and other health and medical personnel?
• Are effective approaches in place for encouraging, documenting, and recognizing faculty, residents, fellows, staff, and other health and medical personnel individual and collaborative accomplishments that are consistent with the mission, aspirations, and values of the program, department, school, or institution?
• In what ways are personal, professional, and leadership development encouraged and facilitated?
• Are procedures in place for the regular review and assessment of the effectiveness and efficiency of organizational structures?
• Is there a formalized approach for regularly assessing organizational culture, workplace climate, and faculty, residents, fellows, staff, and other health and medical personnel needs, their experiences within the organization, and their sources and levels of satisfaction/dissatisfaction?
• Are procedures in place for the regular assessment of performance for all academic, professional, administrative, and other health and medical personnel?

The Review Process
The EHE process consists of a category-by-category review of each of the seven major areas. Essentially, the review “freezes” the ongoing dynamics of an organization, focusing on each component individually to provide a clear picture of the strengths and potential areas of improvement for the unit or institution in each area.

The review process for categories 1 through 6 considers approach and implementation. Approach refers to the methods and strategies used. Implementation refers to the manner and extent to which approaches are applied and enacted within an organization. Key questions for these categories therefore relate to how the department or institution approaches and implements activities in the areas of leadership, planning, relations with beneficiaries and constituencies, programs and services, faculty/staff and the workplace, and assessment. The focus of category 7 is on results, which refers to the documented evidence of outcomes, accomplishments, and achievements related to each of the previous categories.
Categories and Key Issues

Category 1—Leadership
Focuses on leadership and governance approaches, how leaders and leadership goals and practices are established, reviewed, and improved.

- Are leadership and governance structures and roles clearly defined and understood by all?
- Do current leadership practices and structures effectively advance the organization’s missions and aspirations, and promote effective planning, goal setting, and follow-through?
- Do leadership recruitment, development, assessment, and recognition practices emphasize personal, organizational, analytic, and communication competencies, as well as technical, research, clinical, and/or disciplinary expertise?
- Are clearly defined leadership goals and metrics in place?
- Do leaders and leadership practices promote active engagement in assessment, planning, and improvement by faculty, residents, fellows, staff, and other health and medical personnel?
- Are leaders actively engaged with campus, community, and professional/disciplinary groups?
- Are formal and informal leadership review and feedback methods in place and used effectively?
- Do leaders emphasize the development of future leaders throughout the organization?
- Does the leadership reward system align with and reinforce the above elements?

Category 2—Purposes and Plans
Focuses on the planning process, and how the mission, aspirations, and values are developed and communicated, how they are translated into goals and action plans and coordinated throughout the organization, and how faculty, residents, fellows, staff, and other health and medical personnel are engaged in these processes.

- Is there a formalized planning process?
- How are faculty, residents, fellows, staff, and other health and medical personnel engaged in the development and implementation of plans?
- Does an up-to-date, written plan currently exist, and is that plan accessible and understood?
- Do current planning documents and practices effectively translate the mission, vision, and values into priorities, measurable goals, and action steps with specified roles, responsibilities, deliverables, and timelines?
- Does the planning process take account of the rapidly changing healthcare environment, and the organization’s current strengths, limitations, opportunities, and challenges in responding to current and emerging realities?
- How are priorities for improvement, innovation, or elimination established?
- Does the plan consider resource needs and availabilities?
- Are the plans and goals synchronized with those of the larger organization or institution?

Category 3—Beneficiary and Constituency Relationships
Focuses on the individuals and groups inside and outside of the program, department, center, school, or institution that benefit from the organization’s programs and services, and on groups or organizations with which collaboration is necessary to your mission and aspirations. Considers the experiences and perspectives of these groups and constituencies in working with your organization, their satisfaction/dissatisfaction with the programs and services you provide, and your standing and reputation, overall.

- Is there a shared view of the relative priority of the constituencies for which your program, department, school, or institution provides programs and/or services inside and outside of the organization? Do these priorities and their implications guide decision making and resource allocation?
- Is there a systematic approach for monitoring the needs, expectations, experiences, and satisfaction/dissatisfaction levels of individuals, groups, and organizations served by your programs and services, and those with whom your organization collaborates?
- Is information about beneficiary and collaborator perspectives well-organized, analyzed, disseminated, and used for improvement throughout the organization?
- Are formal and informal mechanisms in place to ensure effective two-way communication with members of each beneficiary and collaborator group? What are these mechanisms in each case?
- Is there a broad and recognized commitment to enhancing communication and improving relationships with the groups that are critical to the fulfillment of your mission, aspirations, and goals?

Category 4—Programs and Services
Focuses on methods for assuring high standards in: 1) mission-critical programs and services; and 2) essential operational and support functions.

1) Mission-critical Programs
- Is there clarity and consensus as to the mission-critical functions of the organization—why the organization exists, what the organization does, and how these functions fit with the mission and aspirations of the institution as a whole?
- Is collaboration across disciplines and programs used to build and/or enhance approaches to instruction, research, outreach, and clinical care?
- Are procedures in place to assure quality in the design, development, and implementation of new programs and services?
- Are procedures in place for regular and systematic reviews of programs and services to assure appropriate standards of quality are maintained, and that these programs and services continue to be relevant and aligned with the mission and aspirations of the organization and with those of the institution?
- Do reviews take account of the potential need to refine, revise, or discontinue particular offerings?
- Are procedures in place to assure high standards in the design and implementation of new programs and services, and their associated processes?
- Are the key processes associated with mission-critical functions well-documented, consistently followed, and regularly reviewed?
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