

# The Higher Learning Commission Action Project Directory

## Central Arizona College

Project Details		
<b>Title</b>	Develop a College Culture Focused on Quality	<b>Status</b> ACTIVE
<b>Category</b>	8-Planning Continuous Improvement	<b>Updated</b> 09-08-2010
<b>Timeline</b>		<b>Reviewed</b> 09-17-2010
<b>Planned Project Kickoff</b>	02-01-2010	<b>Created</b> 02-01-2010
<b>Target Completion</b>	03-01-2011	<b>Version</b> 1 of 2

### 1: Project Goal

**A:** The goal of this project is to promote a culture of quality by embedding practices of quality improvement in existing institutional planning processes. In particular, we plan to utilize the current evaluation instruments and train the employees in the application of fundamental principles of Continuous Quality Improvement (CQI) and to follow the cycle of Plan, Do, Study, Act (PDSA) to document how they set targets and use data to drive the process of decision-making to continuously improve the quality of their work.

### 2: Reasons For Project

**A:** The institution administered two district-wide surveys in 2009, the Learning College Survey in Spring 2009 and the Quality Program Questionnaire in Fall 2009. An in-depth analysis of the results revealed that the level of awareness and understanding of quality-related initiatives among the employees was below expectation. Furthermore, it was evident from the responses that there is a need to establish a comprehensive, broad-based quality improvement framework in order to better promote an institutional culture of quality. Finally, the findings from the 2009 surveys are consistent with the feedback we received on the Systems Portfolio. The Systems Appraisal sparked a sense of urgency among the institutional leadership that we must immediately focus our attention on developing a systematic process conducive to continuous quality improvement.

### 3: Organizational Areas Affected

**A:** This Action Project intends to develop an institutional culture that promotes quality and quality improvement. Therefore, as the implementation is rolled out, all internal stakeholders, namely administration, faculty, support staff, and technical and managerial, will feel the impact.

### 4: Key Organizational Process(es)

**A:** This Action Project will reexamine and reestablish the effectiveness of the annual operational planning processes used by the academic and non-academic departments. The operational plan is a self-study assessment that each department, receiving a budget, must undertake annually. Currently the processes place greatest emphasis on planning and goal-setting. However, we realize that in the current state, we are not able to complete the quality improvement cycle of Plan-Do-Study-Act (PDSA) nor can we extract useful lessons to help with future improvements. Upon completion and full implementation of this action project district-wide, employees will be able to incorporate all critical components of PDSA and utilize basic quality principles to strengthen the effectiveness of the operational plan. Ultimately, it is our hope that every employee will have a better understanding of the importance of quality, as well as the role individuals can play, to advance quality within the institution.

### 5: Project Time Frame Rationale

**A:** We intend to complete this Action Project in approximately one year. The project is considered complete when the following milestones are reached:

1. An in-house expert is identified. (December 2009)
2. A curriculum for CQI principles is developed. (January 2010)
3. Training is provided for at least 2 staff members from each piloting department. (No later than middle of April 2010)
4. Each piloting department is set in QI motion by declaring their intent and working toward the improvement of 1 issue identified in their Operational Plan. (April 2010)
5. Each piloting department understands the importance of data-based decisions and can demonstrate the proper usage of data/evidence in their future QI endeavors. (December 2010)
6. Projects undertaken by the departments can clearly show documented processes. (March 2011)

## 6: Project Success Monitoring

- A:**
1. Track workshop attendance
  2. Each piloting department will formally declare a Quality Initiative project and provide periodic progress reports to their dean and the Action Project Leader.
  3. Deans will evaluate and provide feedback to their departments. Each dean then submits a most-improved project to the Quality Council for further review.
  4. A project that exemplifies "best of the bests" is chosen by the Quality Council and forwarded to the Executive Council.
  5. The winning department receives recognition in all forms of intercampus communication.
  6. Conduct a survey at the completion of this Action Project.

## 7: Project Outcome Measures

- A:**
1. Measures of the degrees of staff's awareness and understanding of quality related initiatives as evidenced in the results of Quality Program Questionnaire
  2. The Quality training fully embedded within the institutions professional development training series.
  3. Measures of the percentage of selected employees who completed all phases of the Quality training program.
  4. Measures of the number of Action Project phases completed by the intended timeline.

## Project Update

### 1: Project Accomplishments and Status

**A:** Central Arizona College's Action Project "Develop a College Culture Focused on Quality" commenced in February 2010 with the appointment of an Action Project Leader. Understanding that the success of this endeavor can positively impact the outcomes of future strategic planning processes as well as improve the quality of work performance throughout the institution, the College dedicated a faculty member on full release to lead the project.

Below is a summary of the key milestones reached this past semester:

- **Announcement.** A formal letter from CAC's President was sent to all employees to communicate the rationale and objectives of the Action Project. In addition, the President also introduced the leadership of the project, which consists of the Project Leader as well as two Deans serving as Sponsors.
- **Reaffirmation of the Operational Planning Cycle (OPC).** Although the original intent of the Action Project was to focus greater energy on the operational planning process at the department/division level, it is understood that all planning processes still need to be in sync in order to achieve the maximum result. Therefore, every step within the OPC was examined and mapped by Executive Council (five vice presidents) by paying special attention to whether or not accountability, evidence, and transparency can be demonstrated as the process rolls from the base of the institution all the way up to the Executive Council.
- **Development of CQI curriculum.** The Project Leader designed a training workshop that is based on the principles of the continuous quality improvement model Plan-Do-Study-Act. The curriculum also touches briefly on concepts used in Lean Six Sigma, which stress the importance of selecting measurable and

achievable goals based on the voice of the customer and historical data.

- VPs and Deans' Training. All Vice Presidents and Deans of the College underwent a 5-hour training on CQI Plan-Do-Study-Act (PDSA). The training session gave the upper management an opportunity to preview the workshop curriculum that will be used for department chair/director training purposes while providing a forum where the College Leadership was able to come together to revisit the institutional philosophy on Operational Planning and discuss how it was being implemented in different areas. In the end, the participants were able to reach a consensus on process expectations, due dates, and reporting format.
- Development of an OPC Standard Reporting Template. In order to track the effectiveness of operational planning, an Excel template was created to allow managers to report on the progress made by their department.
- Pilot Program. Nine departments across the college representing academic and non-academic areas were selected to participate in the initial training and piloting of the Action Project. Each Chair/Director, along with another member of their department, were required to receive the training in PDSA because they provide leadership in the area of their responsibility and thus are ultimately responsible for the outcomes of their operational plan. This fall, these participants will take the information back to their departments and take the lead in the implementation of their operation plans using PDSA and the quality principles learned in the training. For this pilot, departments are asked to thoroughly develop, implement, track, and analyze only one goal listed in their annual operational plan. The emphasis is on total quality, where the unfolding of a process, as well as the outcomes achieved, will both need to be documented and evaluated.

## 2: Institution Involvement

**A:** In the planning phase of the project, administrators provided input on the necessary elements of an ideal annual operational planning process for CAC. Also, their participation in the preview of the training curriculum ensures familiarity with the information and expectations communicated in the Quality training.

Currently the Quality training is primarily open to department leadership (Chairs and Directors) representing nine areas; however, the collaborative nature of operational planning requires teamwork in order to succeed. Therefore, once trained, Chairs and Directors are expected to return to their areas and relay the information back to their faculty and staff so everyone in the department can be equipped to assist with the implementation of their operational plan.

## 3: Next Steps

- A:**
- Application of PDSA. Participating departments in the pilot program (nine areas) will be working on their operational plans using the concepts and ideas discussed in the training.
  - Quality Training. Training workshops will continue to be offered in fall 2010, first open to program managers, then interested employees.
  - Data Collection and Analysis. Departments in the pilot programs will submit periodic progress reports documenting the processes they employ in their selection of an improvement goal, solution strategy, planned activities, and resource utilization. A summary report on the outcomes of the improvement is expected from each department by January 2011.

## 4: Resulting Effective Practices

**A:** The support of the Executive Council and Deans has made a tremendous difference in the implementation of this Action Project. They have made this an institutional priority and promoted the awareness and benefits of the project in various forums.

## 5: Project Challenges

**A:** Operational planning has always been an important component of the institutional strategic planning at CAC. However, several modifications have been made in the past few years that include a 2-year trial with a planning-and-tracking database system as well as revisions in policies and procedures. Therefore, it has become a challenge at times to convince program managers that the necessity of developing a quality culture is real and that this is not just another pet project of the administration. It is our hope that with the support of the Executive Council and careful planning, the pilot program will be able to produce genuine, lasting improvements in department operations, which in turn should help to restore faith and confidence in this and future projects.

Additionally, CAC may face some challenges with the institutionalization of the practices that are temporarily in place for the duration of the Action Project. For example, it is unknown at this time which office/personnel will be responsible for the systematic collection, compilation and analysis of the data and results that are generated by the operational plans. CAC understands the importance of aligning operational results with institutional priorities for process evaluation and planning purposes; however, issues related to data management come at an inopportune time when the institution is experiencing reduced funding and offices are understaffed. Also, training in PDSA and Lean Six Sigma is currently provided by the Action Project Leader. However, the institution has been unable to identify an appropriate office or personnel willing, and has the expertise, to assume this responsibility when the project retires and the Action Project Leader returns to the classroom fulltime.

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## Update Review

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### 1: Project Accomplishments and Status

**A:** The Institution has successfully reached their first four key project milestones as outlined in the projects original Project Declaration, and appear to be on track to complete their project as scheduled. The milestones noted on the original Project Declaration, which have been achieved include: 1) Identification of an in-house expert, 2) Development of a CQI curriculum, 3) Completion of training program for a minimum of two staff members in each participating department, and 4) Initialization of the pilot program across the key stakeholder groups. Through a **collaborative** process, and the **engagement** of the Institution's executive **leadership** (i.e., President, Deans/VPs, and Executive Council) to **support institutional operations**, it is apparent that the Institution is serious about this project and its goals. Executive sponsorship will be one significant element in terms of supporting the long-term sustainability of this initiative. The Institution has also taken the initiative to develop a tool, which may be used to support the project goals.

### 2: Institution Involvement

**A:** The Institution should be commended as they have exceeded expectation with respect to planning and the deployment of the CQI training. While their original objective was to ensure that a minimum of 2 staff members from each of the participating departments completed the training, the Institution's executive **leadership** (VPs and Deans) also completed the training, which suggests a well deployed process and alignment with the AQIP principles and categories of collaboration, leading & communication, and involvement. The Institution has stated that in the promotion of a culture of quality and the imbedding of quality principles and practices in the Institution's planning process; they hope to, "...improve staff ability to apply the fundamental principles of CQI with additional emphasis on the 'Do-Plan-Act' elements of PDSA". In the Fall when the department administrators take the information acquired in training back to their staff, there will be a wonderful opportunity to fully deploy the critical components of PDSA and the basic quality principles across all employees. Additionally, the Institution may consider **collaboration** with, and/or input from, additional key stakeholders (e.g., students, faculty, parents, publishers, etc.) outside of the Institution's administrative units, as appropriate. While these stakeholders may not be directly impacted by the Institution's OPC, they may have some stake in the

outcomes.

### 3: Next Steps

**A:** The Institution's 'next steps' align nicely with many of the remaining milestones noted on the original Project Declaration. Specifically, there is a clear intent to apply the principles of PDSA in the operational planning process and to continue the deployment of the quality training, which will serve to support the integration of the quality principles and practices in the Institution's planning process.

One observation is that it appears that the quality training will be available for 'interested' employees, which suggests that it is optional. This may impact **involvement** and influence the extent of deployment and the degree to which the Institution's stated goals and objectives are achieved. However, this matter can be mitigated to some extent through other strategies such as employee recognition, incentives, etc.

### 4: Resulting Effective Practices

**A:** **Leadership**, as demonstrated through the engagement and commitment of the Institution's executive administration, is a clear strength of this project. The Institution, and the success of this CQI initiative, may very well rely heavily upon the sustainability of that level of leadership beyond the conclusion of this project.

In regard to next steps and resulting effective practices, the Institution also plans to institute control mechanisms, such as progress reports, designed to **measure effectiveness**. These progress reports will culminate in a report that will summarize pilot test outcomes for each department. This summary report will be a useful tool for facilitating **institutional learning** and informing improvement strategies.

### 5: Project Challenges

**A:** The Institution's assessment with regard to project challenges is certainly fair and very much common across the academy and industry. According to a well known and widely referenced change model (Lewin, 1947), it is essential that the key stakeholders understand the institutional need for the change, as well as how it will affect them on an individual staff basis. Further, while the Institution has effectively communicated these needs through the initial dissemination of a formal letter from the President, institutionalization of the change will necessitate adequate time and management reinforcement through on-going, and periodic communication. By suggesting that a dedicated process owner and adequate resources will be necessary to support a sustainable CQI culture, the Institution has also demonstrated clear **foresight** as to another possible project challenge.