## Monitoring health system response to family violence: External or self audit?

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Interdisciplinary Trauma Research Centre

AUT UNIVERSITY

Te wairere au noa

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Public health care

* 20 District Health Boards (DHBs)
* 27 hospitals

Northland
Waitemata   Auckland
Counties Manukau
Bay of Plenty
Waikato   Lakes   Tairawhiti
Taranaki   Hawke's Bay
Whanganui
Capital and Coast   MidCentral
Hutt   Wairarapa
Nelson Marlborough
West Coast
Canterbury
South Canterbury
Southern

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VIP
violence intervention programme

Ministry of Health
A comprehensive, systems approach...

Monitoring and Evaluation

District Health Board Family Violence Intervention Coordinators

Standardised National Training

Family Violence Intervention Guidelines

Technical Advice & National Networking

Resources

to reduce and prevent health impacts of violence and abuse through early identification, assessment and referral of victims presenting to health services.

## Monitoring & Evaluation

Key Evaluation Questions in 2003:

> 1. How are District Health Boards performing in providing a systems approach to responding to family violence?
>
> 2. Is institutional change sustained over time?

## Evaluation work: External Audit of DHB system response development

- Philosophy to collaboratively support DHB programmes through building a culture of improvement.
- Based on a systems approach: planning, resourcing, data collection and reporting.
- 1 day site visits at 20 DHBs (27 hospitals)
- Using modified Delphi tool (Coben et al).

## Delphi Evaluation Tools : interactive excel tools available since 2007

| Evaluation Domain Weights | PA | CAN* |
|---|---|---|
| Policies and Procedures | 1.16 | 1.21 |
| Physical Environment | 0.86 | .95 |
| Institutional Culture | 1.19 | 1.16 |
| Training of staff | 1.15 | 1.16 |
| Screening & Safety Assessment | 1.22 | N/A |
| Documentation | 0.95 | 1.05 |
| Intervention Services | 1.29 | 1.09 |
| Evaluation Activities | 1.14 | 1.01 |
| Collaboration | 1.04 | 1.17 |
| Safety & Security | N/A | 1.20 |
| **Total Indicators** | **127** | **64** |

* Revised 2007, applied at 48, 60 and 84 month follow-up audits

## After 5 audit rounds…
Median Hospital VIP Scores (2003/4 to 2009/10)



Bars: PA — 20, 28, 49, 67, 74; CAN — 37, 51, 59, 75, 81

Legend:
- Baseline (2004)
- 12 Month FU (2006)
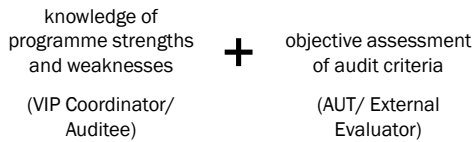- 30 Month FU (2007)
- 48 Month FU (2008)
- 60 Month FU (2009)
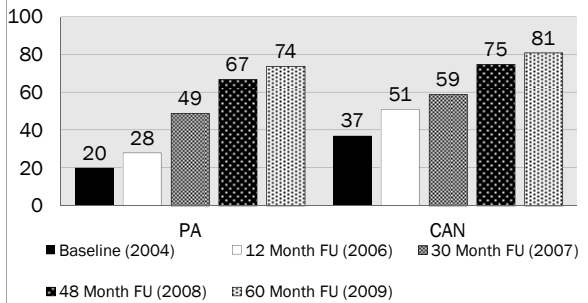
## 2010/2011 (84 Mo FU) round:
## Combine External and Self Audit

- A unique opportunity to evaluate and improve performance.
- Create a "sense of co-responsibility in the achievement of total quality" (Tiemeyer, 1997 as cited in Karapetrovic, 2002).

knowledge of programme strengths and weaknesses **+** objective assessment of audit criteria

(VIP Coordinator/ Auditee)    (AUT/ External Evaluator)

## Self Audit Enables…(Karapetrovic & Willborn 2001, 2002)

- Identification of strengths, weaknesses and opportunities for improvement
- Prevention of problems
- A meaningful and effective audit
- Auditor empowerment and motivation
- Auditor interest and initiative for real opportunities for performance improvement (not just compliance)
- Development of audit feedback and strategies that work locally
- Incorporation of findings into strategic planning
- A culture of continuous improvement.

## Process

- Education session
  - Purpose, procedures, best practice
  - Using the audit tools
  - Instructions, resources and technical advice
- Self audit due two weeks in advance of external audit site visit.
- Self audit support and technical advice provided by external evaluator team member
- One quality check and follow-up
- External auditor blinded to self-audit submission

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**Do self audit scores accurately represent programme system development?**

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## Self Audit (SA) Results

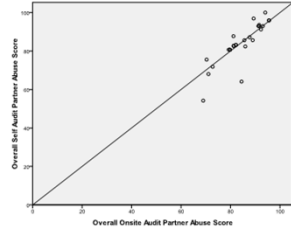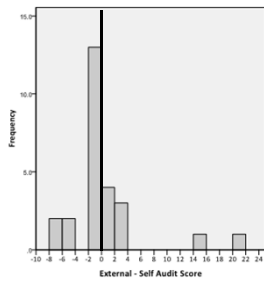|  | PA | CAN |
|---|---|---|
| Submitted (no. hospitals) | 26 (96%) | 26 (96%) |
| Complete submissions (no missing items; no. hospitals) | 21 | 17 |
| Missing items (out of 127) | 1% | 1.7% |
| Overall Median Score | 84 | 92 |
| Overall Score Range | 54 - 100 | 50 - 99 |

## Partner Abuse Programme (n=26)



External – Self Score Difference
Mean difference = .32
Range +20 (SA underestimate) to
-8 (overestimate)

Two hospitals with >8%
missing items (outliers)

## Partner Abuse Programme (n=24)

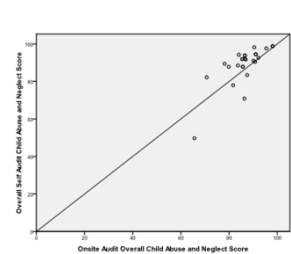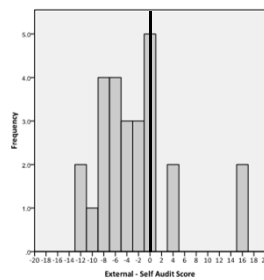| Domain | ICC | Strength of Agreement* |
|---|---|---|
| Evaluation Activities | .75 | Substantial |
| Screening and Safety Assessment | .74 | Substantial |
| Physical Environment | .72 | Substantial |
| Policies and Procedures | .61 | Substantial |
| Intervention Services | .60 | Substantial |
| Documentation | .56 | Moderate |
| Collaboration | .45 | Moderate |
| Training of Providers | .38 | Fair |
| Institutional Culture | .33 | Fair |
| **Overall Score** | .93 (.83, .97) | Almost Perfect |

* Landis & Koch (1977)

## Child Abuse & Neglect Programme (n=26)



External – Self Score Difference
Mean difference = -3
Range +16 (SA underestimate) to
-11 (overestimate)

Two hospitals with >8% missing
items (outliers)

## Child Abuse & Neglect Programme (n=24)

| Domain | ICC | Strength of Agreement |
|---|---|---|
| Intervention Services | .56 | Moderate |
| Collaboration | .56 | Moderate |
| Institutional Culture | .48 | Moderate |
| Policies and Procedures | .48 | Moderate |
| Evaluation Activities | .43 | Moderate |
| Documentation | .31 | Fair |
| Training of Providers | .23 | Fair |
| Safety & Security | .23 | Fair |
| Physical Environment | .04 | Slight |
| Overall Score | .49 | Moderate |
| | (.09, .75) | |

## Anecdotally

- 'Self audit plan' (with allocated timeline and resources) rare – self-audit often done within 2 weeks (or less).
- Lack of knowledge and understanding of audit criteria.
- Lack of IT literacy (excel file, 'enable macros', file versions...)
- Frustration at the extra workload created by the self audit process
- On the other hand:
  - 'very useful'
  - 'I got to know the programme much better'
  - 'should be part of orientation for all new FV coordinators'

## Improvement needed: Actions

- Continued education sessions (measurement notes; technology)

- Self audit resources
  - Self Audit and Action Plan templates
  - Self Audit Report template
  - Physical Environment checklist

- Encourage 'self audit plan' within a 'Plan, Do, Check, Act' framework

- Build upon previous self audit

**PLAN** Identify an audit team, resources (e.g. time), method, focus areas, analysis, dissemination of findings and essentially, formal senior management support.

**DO** Communicate the self audit plan to team members, complete audit procedure requirements and refine the Plan as required.

**CHECK** Review self audit findings, identify strengths and real opportunities for improvement, prioritize follow-up actions in collaboration with the self audit team, establish action plan with senior management support.

**ACT** Review follow-up actions for effectiveness and efficiency, amend action and self audit plans as necessary, and prepare for next self audit.

## Current audit round
## (2011/2012; 96 Month FU)

### Supported Self Audit

Achieved 70 in both PA & CAN
- Self Audit Only – report to external evaluator for comment (n=10 DHBs)

Achieved 70 but lag in other programme criteria
- Self Audit & choice to have External Audit (n=7; 5 DHBs requested an external audit).

Not yet achieving 70
- Self Audit & External Audit (n=3)

## Moving forward

- Periodic external evaluator assessment (spot check 10%) to verify self audit results, support self audit processes and overall programme sustainability.
- Risk programmes will be under-resourced and downsized without focus of external evaluation (creates a 'sense of urgency', publication of league tables).
- Revisit goals: continue programme performance improvements, increase sustainability and accountability.

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**www.trauma-research.info
www.aut.ac.nz/vipevaluation**