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

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Project funded by:
New Zealand Ministry of Health

Public health care

* 20 District Health Boards (DHBs)
* 27 hospitals

Ministry of Health
A comprehensive, systems approach...

VIP
violence intervention programme

- Monitoring and Evaluation
- Standardised National Training
- Technical Advice & National Networking
- District Health Board Family Violence Intervention Coordinator
- Family Violence Intervention Guidelines
- 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

<table>
<thead>
<tr>
<th>Evaluation Domain</th>
<th>PA</th>
<th>CAN*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policies and Procedures</td>
<td>1.16</td>
<td>1.21</td>
</tr>
<tr>
<td>Physical Environment</td>
<td>0.86</td>
<td>0.95</td>
</tr>
<tr>
<td>Institutional Culture</td>
<td>1.19</td>
<td>1.16</td>
</tr>
<tr>
<td>Training of staff</td>
<td>1.15</td>
<td>1.16</td>
</tr>
<tr>
<td>Screening &amp; Safety Assessment</td>
<td>1.22</td>
<td>N/A</td>
</tr>
<tr>
<td>Documentation</td>
<td>0.95</td>
<td>1.05</td>
</tr>
<tr>
<td>Intervention Services</td>
<td>1.29</td>
<td>1.09</td>
</tr>
<tr>
<td>Evaluation Activities</td>
<td>1.14</td>
<td>1.01</td>
</tr>
<tr>
<td>Collaboration</td>
<td>1.04</td>
<td>1.17</td>
</tr>
<tr>
<td>Safety &amp; Security</td>
<td>N/A</td>
<td>1.20</td>
</tr>
<tr>
<td>Total Indicators</td>
<td>127</td>
<td>64</td>
</tr>
</tbody>
</table>

* Revised 2007, applied at 60, 80 and 84 month follow-up audits
**After 5 audit rounds...**  
Median Hospital VIP Scores (2003/4 to 2009/10)

![Graph showing median Hospital VIP Scores over time](image)

**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.
  - Support and technical advice provided by external evaluator team member
  - One quality check and follow-up
  - External auditor blinded to self-audit submission

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

### Self Audit (SA) Results

<table>
<thead>
<tr>
<th></th>
<th>PA</th>
<th>CAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitted (no. hospitals)</td>
<td>26 (96%)</td>
<td>26 (96%)</td>
</tr>
<tr>
<td>Complete submissions (no missing items; no. hospitals)</td>
<td>21</td>
<td>17</td>
</tr>
<tr>
<td>Missing items (out of 127)</td>
<td>1%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Overall Median Score</td>
<td>84</td>
<td>92</td>
</tr>
<tr>
<td>Overall Score Range</td>
<td>54 - 100</td>
<td>50 - 99</td>
</tr>
</tbody>
</table>
Partner Abuse Programme (n=26)

Two hospitals with >8% missing items (outliers)

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

Partner Abuse Programme (n=24)

<table>
<thead>
<tr>
<th>Domain</th>
<th>ICC</th>
<th>Strength of Agreement*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation Activities</td>
<td>.75</td>
<td>Substantial</td>
</tr>
<tr>
<td>Screening and Safety Assessment</td>
<td>.74</td>
<td>Substantial</td>
</tr>
<tr>
<td>Physical Environment</td>
<td>.72</td>
<td>Substantial</td>
</tr>
<tr>
<td>Policies and Procedures</td>
<td>.61</td>
<td>Substantial</td>
</tr>
<tr>
<td>Intervention Services</td>
<td>.60</td>
<td>Substantial</td>
</tr>
<tr>
<td>Documentation</td>
<td>.56</td>
<td>Moderate</td>
</tr>
<tr>
<td>Collaboration</td>
<td>.45</td>
<td>Moderate</td>
</tr>
<tr>
<td>Training of Providers</td>
<td>.38</td>
<td>Fair</td>
</tr>
<tr>
<td>Institutional Culture</td>
<td>.33</td>
<td>Fair</td>
</tr>
<tr>
<td>Overall Score</td>
<td>.93</td>
<td>Almost Perfect</td>
</tr>
</tbody>
</table>

* Landis & Koch (1977)

Child Abuse & Neglect Programme (n=26)

Two hospitals with >8% missing items (outliers)

External - Self Score Difference
Mean difference = -3
Range +16 (SA underestimate) to -11 (overestimate)
### Child Abuse & Neglect Programme (n=24)

<table>
<thead>
<tr>
<th>Domain</th>
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<th>Strength of Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention Services</td>
<td>.56</td>
<td>Moderate</td>
</tr>
<tr>
<td>Collaboration</td>
<td>.56</td>
<td>Moderate</td>
</tr>
<tr>
<td>Institutional Culture</td>
<td>.48</td>
<td>Moderate</td>
</tr>
<tr>
<td>Policies and Procedures</td>
<td>.48</td>
<td>Moderate</td>
</tr>
<tr>
<td>Evaluation Activities</td>
<td>.43</td>
<td>Moderate</td>
</tr>
<tr>
<td>Documentation</td>
<td>.31</td>
<td>Fair</td>
</tr>
<tr>
<td>Training of Providers</td>
<td>.23</td>
<td>Fair</td>
</tr>
<tr>
<td>Safety &amp; Security</td>
<td>.23</td>
<td>Fair</td>
</tr>
<tr>
<td>Physical Environment</td>
<td>.04</td>
<td>Slight</td>
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<tr>
<td>Overall Score</td>
<td>.49</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td>(.09, .75)</td>
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</tr>
</tbody>
</table>

### 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, measures (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