

CIASTD 2010 Crossroads Regional Conference

Being Stuck at Level 2 is Like Kissing Frogs!



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November 15, 2010

Being Stuck at Level 2 is Like Kissing Frogs!

Kirkpatrick Four Levels Refresh

Level 4: _____

Level 3: _____

Level 2: _____

Level 1: _____

Working Hard at Kissing Frogs: Early Lessons Learned

- **Goldilocks Principle**

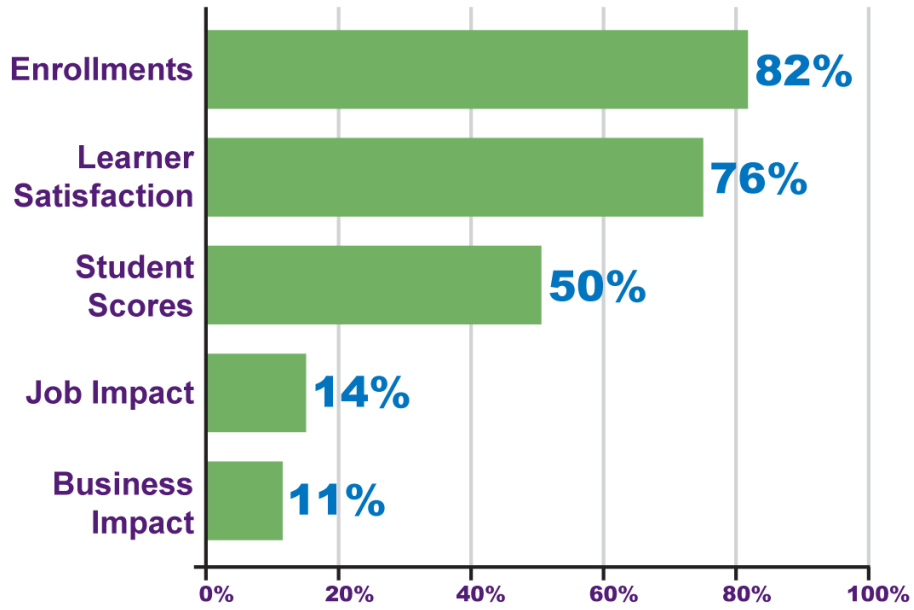


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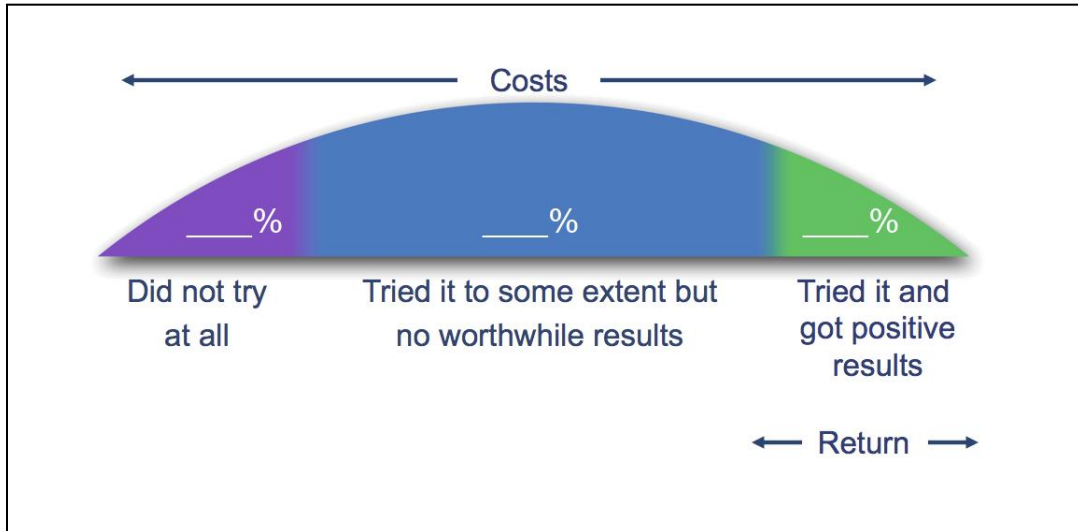


Knowledge: How to obtain the crown

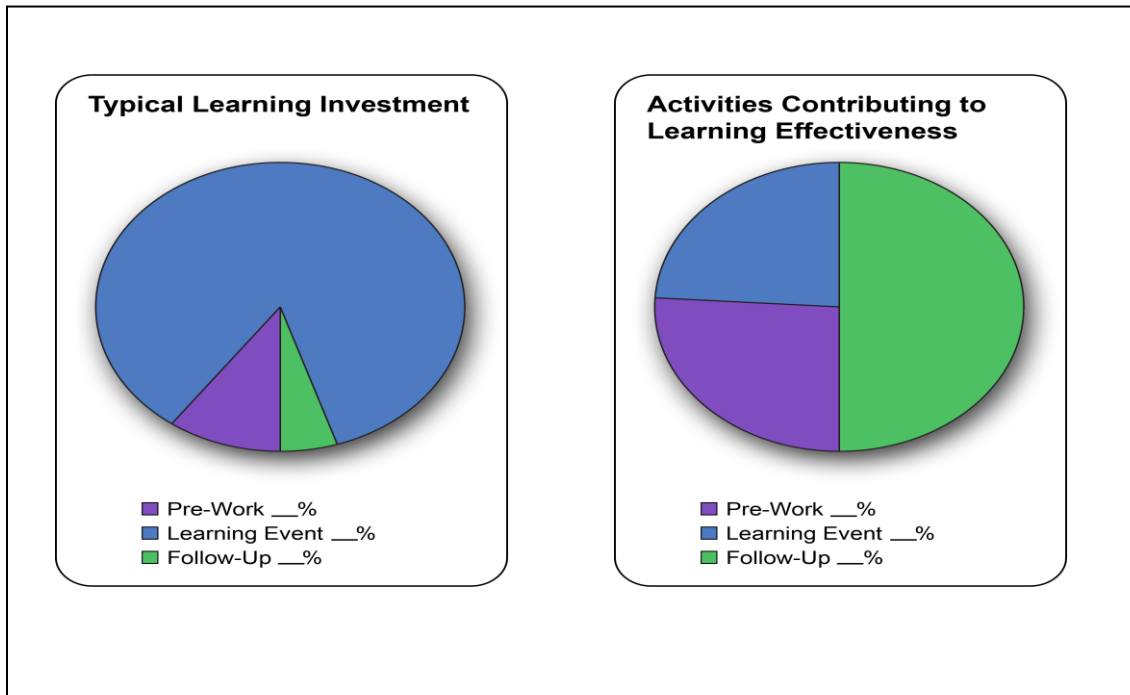
Training Information Routinely Tracked



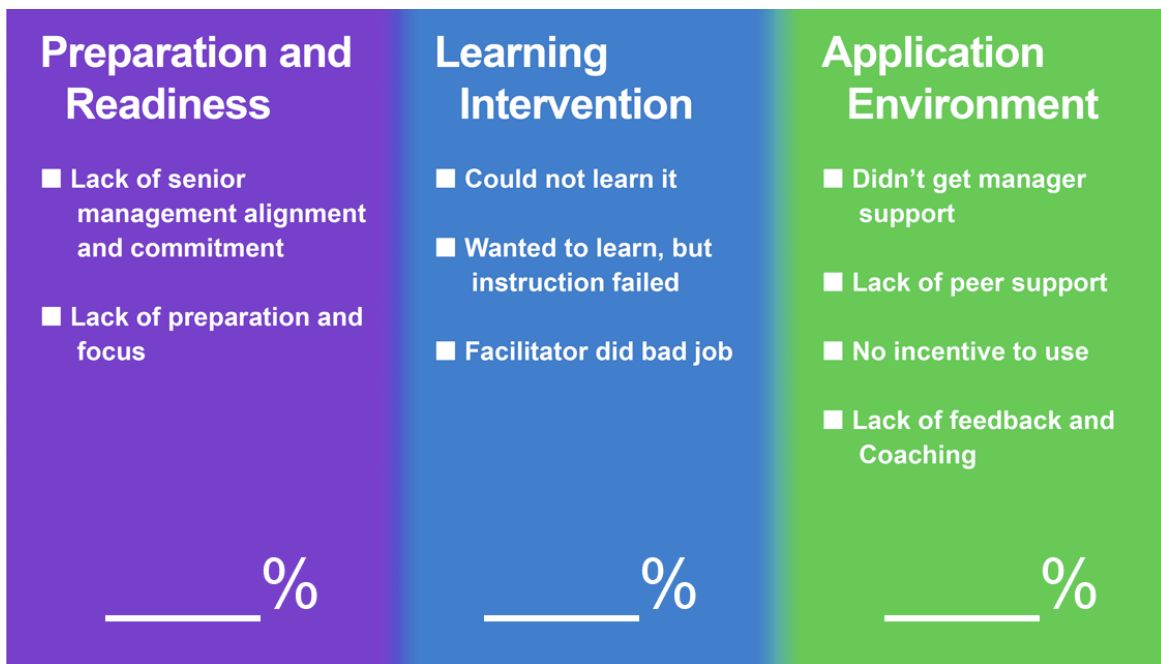
Predictable Training Impact



How do we get learning to stick?



Principle Reasons for Failure



Additional Lessons Learned:

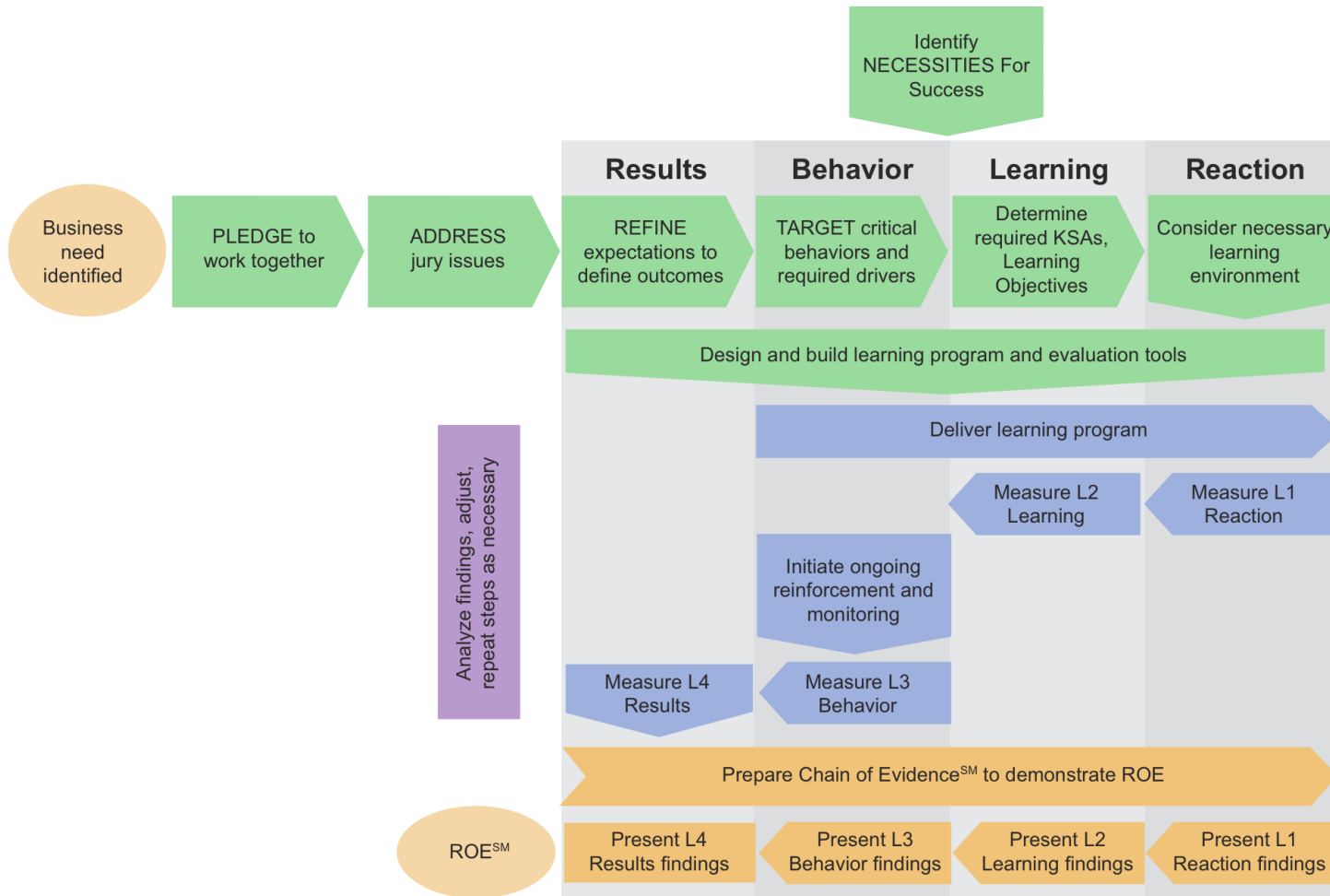
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Preparing Learners





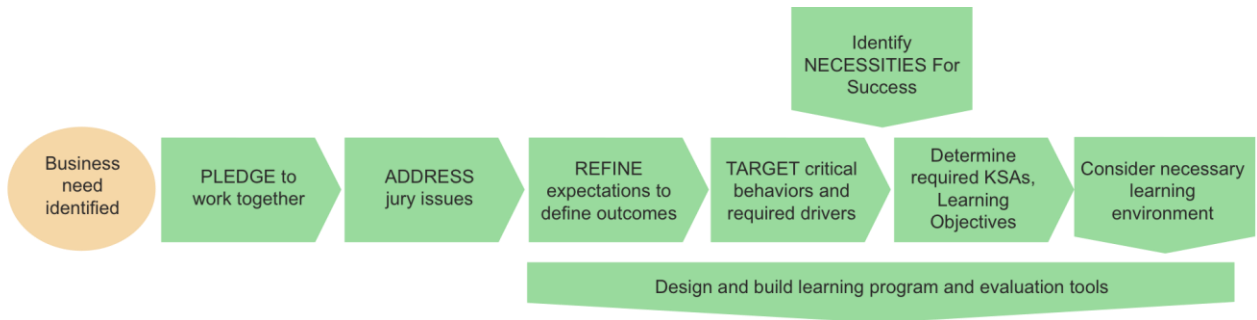
Kirkpatrick Business Partnership Model



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Frog to Crown: Preparation Phase



- Business need identified/Pledge to work together

- Address jury issues

- Results: Refine expectations to define outcomes



- Behavior: Target critical behaviors and required drivers (The few, key behaviors that employees will have to consistently perform in order to bring about the targeted outcomes.

- Identify Necessities for Success

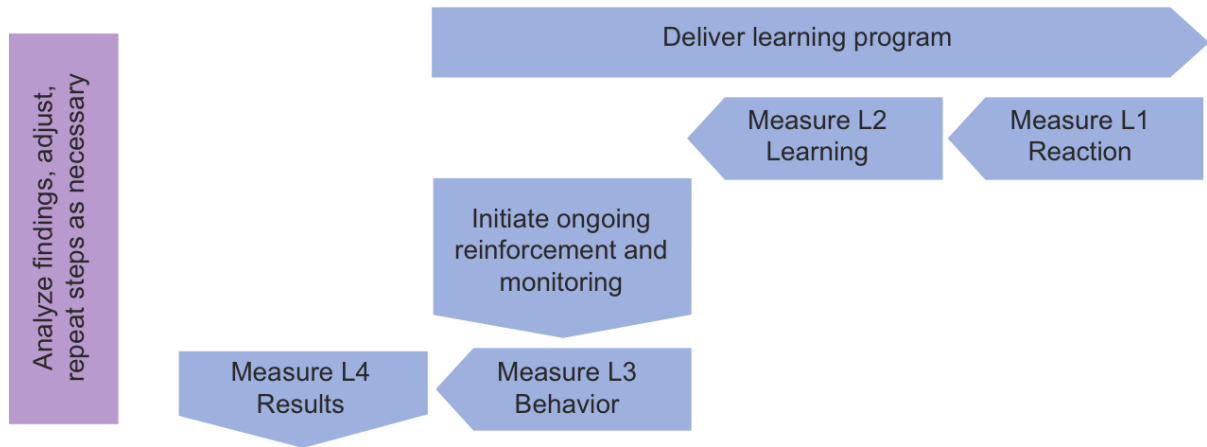
- Learning: Determine required knowledge, skills and attitudes together with learning objectives

- Reaction: Consider necessary learning environment

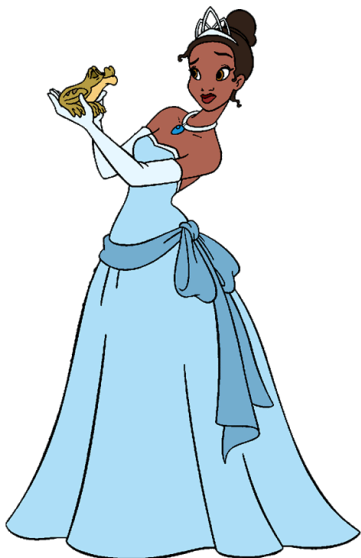
- Design & build learning program and evaluation tools



Frog to Crown: Measurement Phase



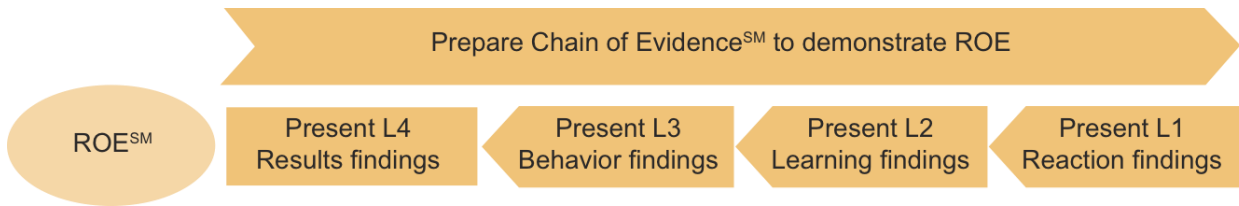
Management issue?



Kiss the frog . . . again!



Reflection in the Mirror: Evidence Stage



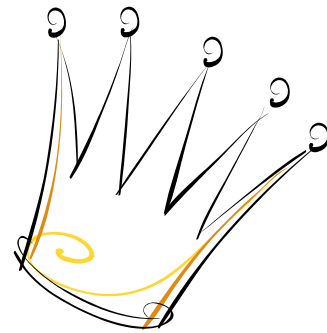
Level 1 Reaction:	<ul style="list-style-type: none"> We were able to obtain level one evaluation from 467 out of 480 students. The instructors/ classroom event averaged 3.93 on a 4 point scale. Learners loved the activities and scenarios.
Level 1 Follow-Up	<ul style="list-style-type: none"> The more engaging instructors earned higher satisfaction scores. We were able to work with lower scoring instructors to improve scores based on early findings.
Level 2 Learning:	<ul style="list-style-type: none"> Our goal was for every student to pass the assessment with 100%. (If it was not required knowledge, it would not be on the assessment.) Out of 480 students, 46 students were not able to pass with 100% and required follow-up remediation or attended another class.
Level 2 Follow-Up	<ul style="list-style-type: none"> Not all our attendees obtained a 100% or better on their assessment. By completing the evaluation, we were able to immediately remediate. In addition, our early performance based assessment showed a good portion of our audience did not understand a particular task. This allowed us to adjust classroom presentation and scenarios which led to better performance on the remaining assessments. Our goal was to re-assess 90% of classroom participants on the units one to three weeks after the classroom event. We were able to reach 445 of 480 students which is almost 93%. Of the 445 assessed, 153 or 34% did not pass the assessment and required remediation.
Level 3: Behavior	<ul style="list-style-type: none"> After implementation, we ran a report showing compliance by unit. To meet our stakeholders' expectations, we needed to reach 90%. At our dismay, not one unit reached our 90% goal. Our average was 71.5%.
Level 3: Behavior Follow-up:	<ul style="list-style-type: none"> After partnering with the unit leadership and providing them with accountability reports, the scores went up. All but 2 units had exceeded our 90% compliance goal with the overall average reaching 93%!!



Level 4: Results	<ul style="list-style-type: none"> Comments from nurses on the units that the system was catching possible errors in medication dosages, limits and discontinued orders served as early indicators that the system was contributing to reduced medication errors.
Level 4: Follow-up:	<ul style="list-style-type: none"> As a system we saw medication errors with a severity level E or higher drop from approximately 1.5 defects per unit to .5 over a three-year period. Bottom line: Patient safety was increased and healthcare costs were reduced by eliminating medical complications from medication errors and potential medical malpractice claims. We had proven more than compliance!

Note: Under statute, each health care facility has a maximum liability of \$250,000 for each incidence. The total award including what comes from the state compensation fund can be \$1.25M which includes the facility \$250,000.

Wearing the Crown



Note: For more information on the Kirkpatrick Business Partnership ModelSM certification course, visit www.kirkpatrickpartners.co

References

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- American Society for Training and Development (ASTD) (2006). *State of the Industry Report 2006.* Alexandria, VA: ASTD publishing.
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