



*Wayne State University*  
*Institute for Learning and Performance Improvement*  
*January 24, 2002*

*Success Stories*  
*in*  
*Human Capital Management*

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# Focus e-Learning for Return on Investment

*Judy Avie*

*Trinity Health*

*Organization Effectiveness & Learning  
Learning Network*

# *Trinity Health*

- Third largest Catholic Health System in US
- Largest in Michigan
- 50,000 employees
- 10,000 physicians
- 45 Hospitals
- 342 clinics, long term care, senior housing
- Revenue 4.2 billion
- Seven states

# E-Learning fit with Trinity Health Strategic Plan

- F2: Develop and Maintain an Outstanding Workforce
  - S6 Enhance Employee Recruitment, Retention, and Development
  - A8 Develop innovative approaches to address the nursing shortage
  - A10 Pilot Trinity Health manager learning system

# Learning System

- **Education & Reference:**

Intranet site that links Trinity Health employees to learning options

- **Learning Network:**

Software Application for  
competency assessment

learning plan development & tracking  
learning library of learning options

2001-2002 learning system pilot for managers

Ann Arbor, Muskegon, Battle Creek

# Education & Reference



As this site develops, you'll find resources for personal development. This is your portal to web-based learning. Be sure to check back often.

## Training

- [LAN & Desktop Services](#)
- [\(LDS\) Training Center](#)

## Reference

- [Customer Knowledge Central](#)
- [HealthGate Health Information](#)
- [InfoNet Library Page - Saint Joseph Mercy](#)
- [Health System, Ann Arbor](#)
- [JCAHO](#)
- [Spectrum](#)
- [Trinity Health Logos](#)
- [Trinity Health Stylebook](#)
- [HIPAA](#)

### Management Resource Guide

Provides an orientation and access to corporate Human Resource information and other information.

### Management Skill Builder

Provides resources to refresh or build management skill in key areas.

### Learning Network

Pilot project on Leadership competency assessment and development (2001 - 2002)

### Conference Information

Will provide information on Trinity Health Conferences

### Health Stream

Will provide JCAHO, OSHA and other required training to licensed member organizations. Rollout planned for early 2002.

### Web based Learning

Will provide Trinity Health web courses to support critical programs and strategic initiatives. (First course early 2002).

# LEARNING NETWORK

..... Growing together in body, mind, and spirit.

INTRODUCTION

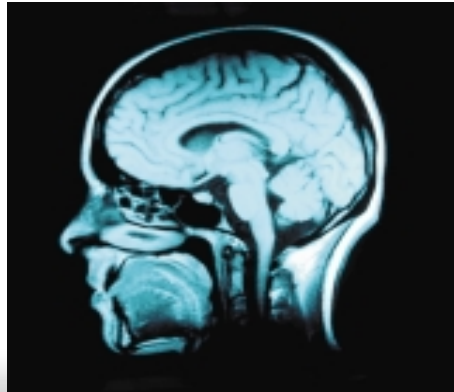
PERSONAL  
PROFILE

COMPETENCY  
ASSESSMENT

LEARNING  
PLANS

LEARNING  
LIBRARY

G R O W T H



L E A R N I N G

KNOWLEDGE

<http://nexus.sb.trinity-health.org>

Version 2.0

# Blended Learning Options



## *The Need*

- Organizations that excel in customer service continuously invest in the growth and development of their people
- JCAHO
  - HR.3.1 “The hospital encourages and supports self-development and learning for all staff.”
  - HR.4.3 “The hospital regularly collects aggregate data on competence patterns and trends to identify and respond to the staff’s learning needs.”

## *The Need (continued)*

- Gallup - Managers are key to engaged employees  
Engaged employees are key to customer satisfaction, loyalty, organization profitability, productivity, safety and retention
- CEO's state their managers were clinical experts but lacked management skills
- Nursing Shortage -- nurses work for their manager not the institution
- Employees today are "free agents."



## *Traditional Development Approach*

- Identify problem or issue
- Identify managers or other experts to train or hire outside consultant to train
- Gather all “trainers” together in a classroom to train them in content
- Schedule “trainers” to train others on specific dates and times

# *Challenges with Traditional Approach*

- # of Managers/experts have been reduced
- Managers remaining are “stretched too thin”
- Employee time away from jobs and cost of replacement
- Length of time to train all staff (months)
- Inconsistency of training over time
- Cost of materials
- Assumes everyone needs the same information
- Expensive -Total cost of training over the life of the course



## *Benefits of “E”-Learning*

- Deliver system automated
- Minimizes time away from job
- Decrease total training time
- Increases learner controlled
  - needs driven
  - individual learning experience
  - repeat course until mastery
- Consistent documented content delivery
- Delivery is faster
- Revisions easier
- Cost less (travel, time, resources)

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## *Benefits of “E”-Learning (continued)*

- Accessible 24/7/365
- Scalable -- to reach many people
- Increased retain 20-40% more than classroom
- New generation expects it
- Lower total cost of training over course life

## *Case Study - SCT (a technology company)*

	<u>1998</u>	<u>1999</u>
Total Training Costs	\$700,000	\$700,000
Total Trained	350	25,326
Global Access	0%	100%
Turnover	13.4%	11.4%
Cost/Learner	\$1902.85	\$27.64

87% of employees registered for an average of 5.8 courses.

2487 registered for non-mandatory courses.

# Calculating Return on Investment

Actual value developed by comparing program costs to benefits

- Ratio

Benefits/Costs = ratio

- Percentage

Benefits/costs x 100 = %

Handbook of Training Evaluation and Measurement Methods  
Jack Phillips 1997 Gulf Publishing

# Focus for ROI

- Relate the project to system wide strategies, initiatives and goals that already have a value equation
- Gain commitment & support from the top
- Everyone understands their role in achieving results
- Follow a comprehensive evaluation plan that captures early successes

# *Integrating* *into the Human Resource Process*

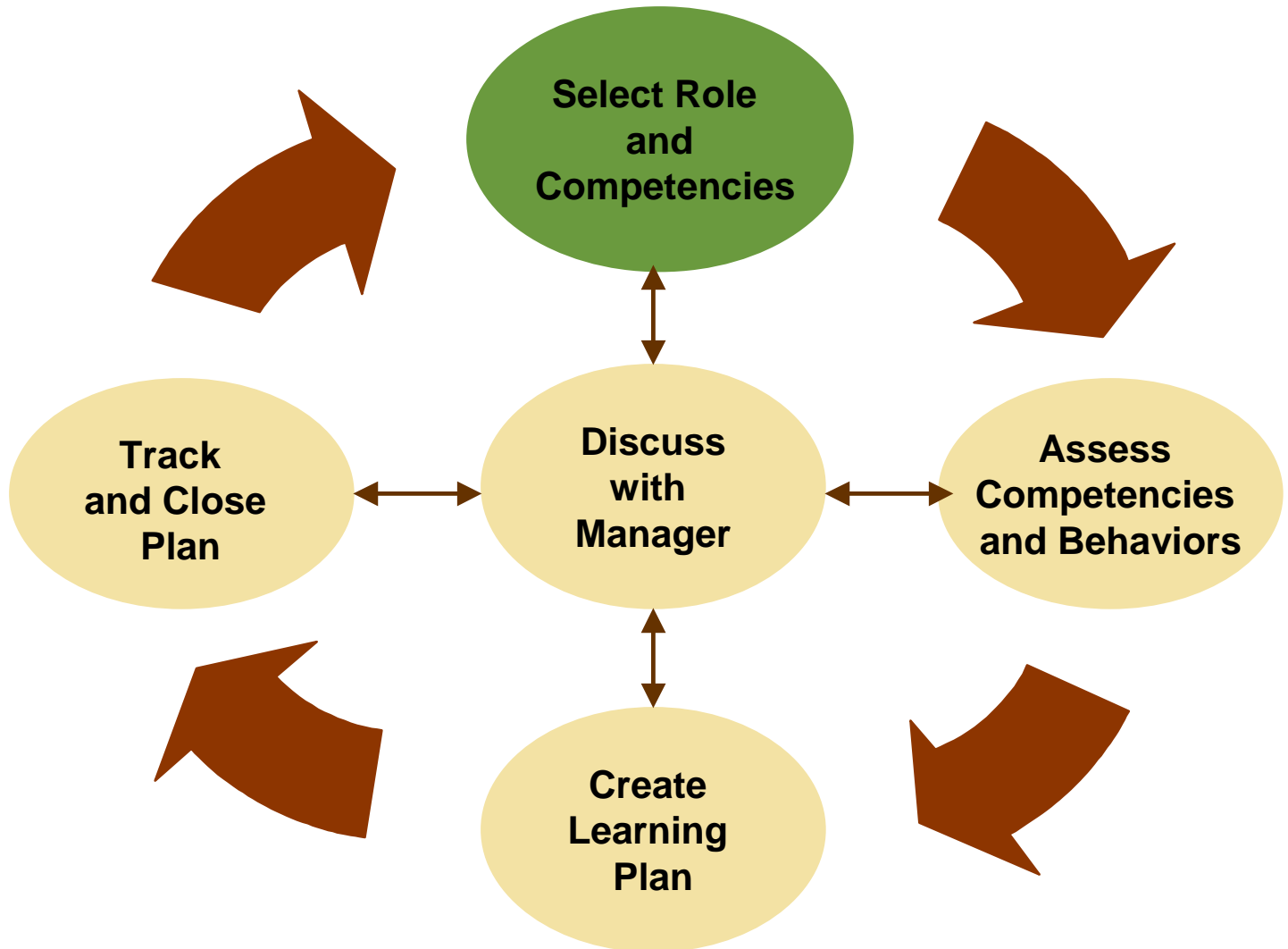


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# *Integrating into the Human Resource Process*

- Job Families
- Roles
- Competencies and Behaviors  
observable and measurable behaviors and  
outcomes that drive performance
  - skills, knowledge and attitudes

# *Development Process*



# *Progress to Date*

- Well defined strategic plan linked to outcomes
- Defined job families
- Defined five leadership roles
- Defined competencies and behaviors for each role
- Identified “core” vs “role-specific” competencies
- Developed software to support assessment & learning planning
- Purchased off-the-shelf courses that support competencies
- Authoring courses not available
- Initiated pilot in March 2001 end May 2002
- Leaders have completed 360 assessment process
- Leaders have completed Learning Plan using learning options
- Initiated a four level evaluation

## *What have we gained?*

- Aligned Trinity Health vision, mission, values and strategic plan with roles, competencies and behaviors of leaders
- Leader roles & competencies have been used for selection
- Learning on key strategies and documented need
- Reduced costs, increased access and speed for learner controlled learning
- Increased user satisfaction with assessment and learning
- Increase customer satisfaction with staff behavior
- Documenting organizational impact

# “Let’s Talk About It”



# *Trinity Health Leadership Roles*

Five Leader Roles; old job titles

## Service Delivery Leader

- Manager, Clinical Nursing
- Manager, Food & Environmental Services

## Organizational Leader

- Chief Executive Officer
- Chief Financial Officer

## System Integration Leader

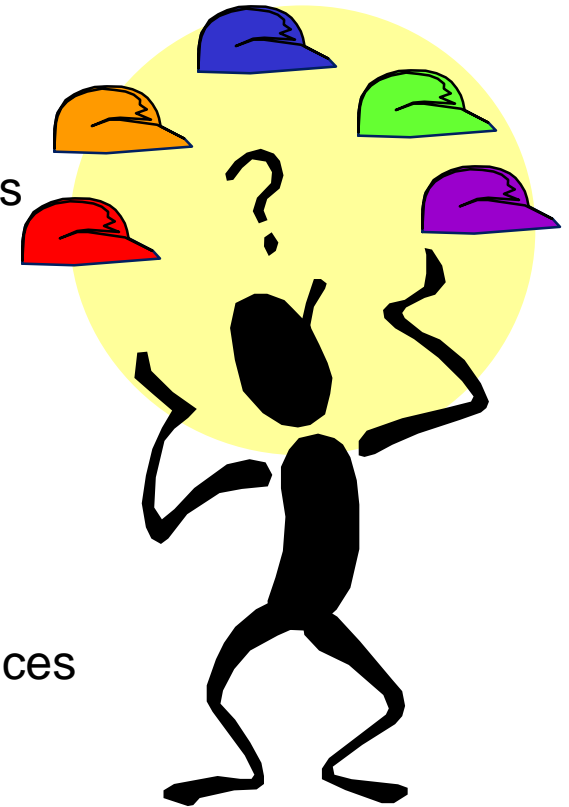
- Director of Clinical Information Services
- Director of Planning

## Line of Business Leader

- Program Director, Women's Health Services
- Director, Oncology

## Project Leader

- Project Manager

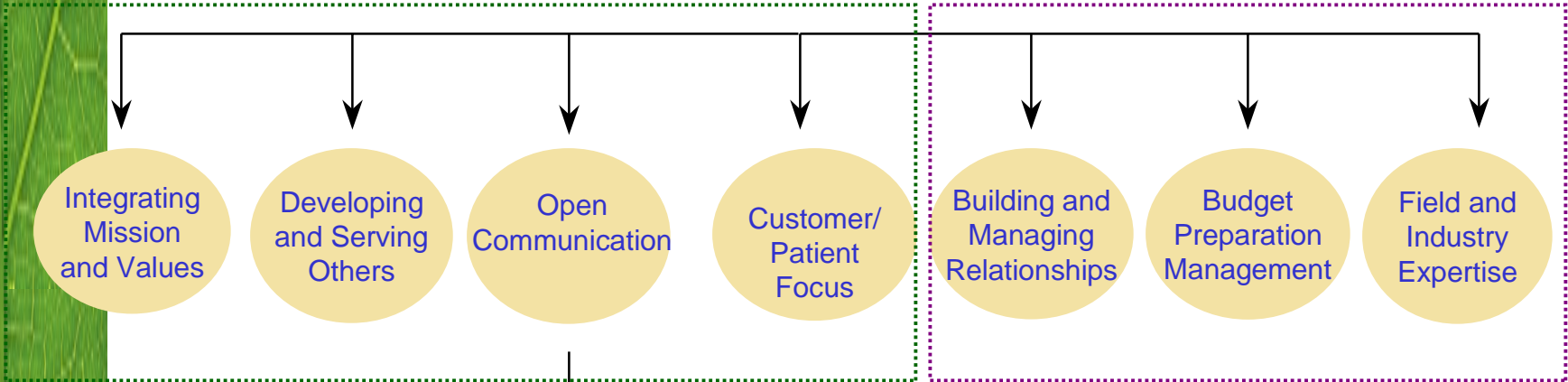


# Service Delivery Leader



Core

Role-Specific



## *Behaviors*

Answers staff questions  
Achieves positive outcomes even with hostile audiences

Seeks information regarding audience needs and incorporates that knowledge into communication method & approach

Mentor new manager in effective communication methods