



OhioHealth's Evaluation Framework Proves Value of Learning and Its ROI

OhioHealth
Best Advance in Learning Measurement
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Company Background



Company-at-a-Glance	
Headquarters	Columbus, Ohio, USA
Year Founded	1891
Revenue	\$3.59 Billion
Employees	29,000
Global Scale	State of Ohio
Customers/Output, etc.	OhioHealth is a not-for-profit, faith-based system of hospitals and healthcare providers serving patients in 47 Ohio counties.
Industry	Healthcare
Website	https://www.ohiohealth.com

Budget and Timeframe

Overall budget	\$7,000, which represents 1-month salary of the assessment consultant at time of implementation of the workshop.
Number of (HR, Learning, Talent) employees involved with the implementation?	5
Number of Operations or Subject Matter Expert employees involved with the implementation?	1
Timeframe to implement	1 month
Start date of the program	May 15, 2017

Business Conditions and Business Needs

The purpose of this program was to implement an evidence-based evaluation framework, the ROI Methodology, to help associates in the learning department at OhioHealth (OH) demonstrate the value of their learning programs. OhioHealth Learning (OHL) provides training and orientation support for OH, a hospital system of 11 hospitals, 200+ ambulatory sites and 29,000 physicians, staff and volunteers.

Over the past few years, the volume-to-value revolution has put pressure on OH and many healthcare organizations across the United States to deliver high-quality care at the lowest-possible cost. Learning professionals at OHL also feel the pressure as they are expected to deliver high-quality learning coupled with savings. Just as it is no longer enough for healthcare providers to report the number of patients served or procedures performed, it is no longer enough for learning professionals to report the number of employees trained, equipment utilized or technology adopted. Learning professionals at OH are expected to show the value of major learning and development programs, projects and initiatives.

“Teach them – they need to learn how to do it!” is a common response when there is a problem in any organization, inferring that learning is often the go-to solution. However, during times of economic uncertainty, learning budgets are often the first to be placed on the chopping block. If learning is the go-to solution, why is it the first to be cut? Possible explanations are that learning often is viewed as a cost rather than an investment and that the learning outcomes desired by stakeholders are rarely measured. For example, a 2010 report published by the ROI Institute and Association for Talent Development (ATD) revealed that executives were seeing measures at the input, reaction, and learning levels but really wanted to see outcomes at the application,



business impact and ROI levels. Sixty-one percent of executives wanted to see learning connected to application, but only 11% reported that application was being measured; 96% wanted to see learning connected to the business, but only 8% reported that business impact was being evaluated; 74% wanted to see learning connected to ROI, but only 4% reported that ROI was being calculated.

At OH, recent observations of learning and development programs offered by OHL revealed similar results. The success of learning programs was defined by participants' reaction and learning, and there was limited evidence to show learning connected to application, business impact or ROI. It is intuitive that learning is a valuable component at any organization, but the challenge for learning professionals at OHL is to demonstrate the value of that learning to the organization.

An evidence-based evaluation strategy, the ROI Methodology, was implemented to help OHL associates demonstrate the value of their learning programs. ROI Methodology was chosen because it has proven to be a credible process for evaluating learning and development programs. Furthermore, organizations that have implemented ROI Methodology have reported a number of benefits, including helping organizations align programs to business needs, show contributions of programs beyond reaction and learning, and improve the design and implementation process to focus on outcome rather than activity.

Overview

Briefly, the ROI Methodology is a systematic approach to measuring and evaluating programs, projects and initiatives. ROI Methodology had its beginnings in the early 1970s when Jack Phillip, PhD, conducted the first ROI study to evaluate learning and development at a global security and aerospace company. Today, ROI Methodology has been implemented in 65 countries and by more than 5,000 organizations. Furthermore, it has been implemented in different areas of an organization, including learning, training and development.

At the heart of ROI Methodology is the evaluation framework that guides the collection of six types of data categorized by levels.

- **Level 0 – input.** Measures input into the program.
- **Level 1 – reaction.** Measures participants' reactions toward the overall program and toward specific components of the program.
- **Level 2 – learning.** Measures whether there's a change in participants' knowledge, skills or attitudes as a result of participating in the program.



- **Level 3 – application.** Measures whether there is change to participants’ on-the-job-behavior as a result of having participated in the program.
- **Level 4 – impact.** Measures changes in business outcomes as a result of changes in participants’ behavior;
- **Level 5 – ROI.** Compares the monetary benefits of a program to the program’s cost.⁵

In addition to a stepwise process that allows users to capture six types of data, ROI Methodology includes recommendations as to how many programs should be measured at each level (Table 1).⁶ Currently, the majority of programs at OHL capture participants’ reaction and learning, but there’s limited evidence of programs measuring application, business impact or ROI. The long-term goal for OHL is to achieve the recommended evaluation targets of 30% application, 10 – 20% impact, and 5 – 10% ROI established by the ROI Institute. Reaching those targets will help OHL show the value of learning to executives and key stakeholders at OH. However, prior to attempting to reach the targets, learning associates must have sufficient understanding of ROI Methodology. This challenge was addressed via the ROL workshop, which was developed to provide associates with the knowledge, skills and resources needed to effectively utilize the ROI Methodology.

Figure 1: Current status of OHL programs and the ROI institute’s recommended targets

Levels	Recommendations ⁶	Current Status at OHL
0. Inputs & indicators	100%	0
1. Reaction	90 – 100%	~100%
2. Learning	60 – 80%	~100%
3. Application	30%	0
4. Impact	10 – 20%	0
5. ROI	5 – 10%	0

Source: OhioHealth

The training team hypothesized that learners will have a positive reaction to the ROL workshop (Level 1 – reaction) and that the workshop will help them acquire new knowledge or clarify existing knowledge (Level 2 – learning). Furthermore, it was hypothesized that learners will apply the newly-acquired knowledge and skills to their jobs (Level 3 – application) and that application of new knowledge and skills will help enhance OHL’s design and implementation process, show contributions to selected programs beyond reaction and learning, and align programs to business needs (Level 4 – impact).

As hypothesized, learners had a positive reaction to the ROL workshop (Level 1 – reaction) and agreed that they learned new knowledge and skills from the workshop (Level 2 – learning). The

majority of participants applied at least one concept or technique that they learned from the workshop (Level 3 – application). The three frequently reported measures impacted by the ROL workshops were business alignment, process improvement and quality of work (Level 4 – impact).

The ROL workshop was offered to all associates in OHL as well as selected associates across the hospital system involved in developing, implementing and/or evaluating learning and development programs. Although the workshop was not offered to the entire organization, a 1.5 hour ‘kick-off’ event was organized to introduce ROI Methodology to selected leaders and associates across the OH system as outlined in the “Change Management” section.

Just as healthcare providers at OH are tasked with demonstrating the value of care, learning professionals at OH are tasked with demonstrating the value of learning. Unfortunately, there is currently no standard evaluation strategy to help learning associates measure and show the value of their learning programs. This new initiative ties into OhioHealth’s overall-strategic plan to shift the focus of the organization from volume to value. It provides a credible process for associates to design, implement, analyze and report learning outcomes that are desired by different stakeholders at the organization. It also helps to align learning to the business by providing a strategic way to ensure learning programs are effectively designed and implemented to improve important OH business measures, including patient safety, quality of care, staff retention/turnover and productivity.

Design of the Program

This ROI process model was used to guide evaluation planning, data collection, data analysis, and reporting for this Level – 4 program. Although this was a Level – 4 program, evaluation also was planned for the lower levels. Evaluation was guided by the objectives listed in Table 2.

Figure 2: Objectives for ROL Workshop

Levels	Objectives
1. Reaction	Provide participants with the knowledge and skills that are relevant to their job, important to their current job success, and immediately applicable.
2. Learning	Enable participants to describe the five levels of evaluation, the six types of data in the chain of impact, and six steps to writing SMART objectives. Enable participants to plan and communicate an evaluation project.

3. Application	Support participants as they change the way they propose, implement, and evaluate programs, process and initiatives using the tools and techniques provided.
4. Impact	Enable participants to realize positive consequences as a result of applying what they learned to such areas as business alignment, design and implementation process, and contribution of programs beyond reaction and learning.

Source: OhioHealth

- **Learning solution.** The learning solution chosen for this Level – 4 program was the Return on Learning (ROL) workshop, a 1.5-day (12 hours) instructor-led course surrounding ROI Methodology. The workshop was divided into three sections: introduction to ROI Methodology, writing SMART objectives, and evaluation.
- **Participants.** All associates in the OHL (n = 60) as well as selected associates in Talent Acquisition, Talent Management & Organizational Effectiveness and Nursing (n = 9) who were actively involved in designing, implementing and/or evaluating learning programs were invited to participate in the ROL workshop.
- **Evaluation methods.** Two questionnaires were used to determine reaction, learning, application and impact. Both questionnaires were modified versions of the ROI Institute’s End-of-Course Comprehensive Questionnaire.⁷ Both questionnaires were administered to workshop participants, who are considered the most credible sources for accurate data.

Questionnaire #1 consisted of 16 items used to establish Level 1 – reaction and Level 2 – learning.

- 10 of the items were Likert-type scale questions used to capture participants’ reactions toward the overall workshop as well as towards specific workshop components, such as the content, facilitator, and learning environment.
- 3 of the items were multiple-choice questions used to understand the relationship between the workshop’s content and the participants’ job.
- 3 items were open-ended questions to determine the actions participants plan to take as a result of participating in the workshop and uncover potential barriers of application.

Questionnaire #2 consisted of six items: 1 Likert-type scale question and 5 multiple-choice questions:

- The Likert-type scale question was used to determine if participants applied at least one concept or technique from the ROL workshop.
- Multiple choice questions were used to determine:
 - Percentage of work time requiring the knowledge and skills covered at the workshop.
 - Barriers and enablers of implementation.
 - Impact the ROL workshop had on various business measures.

Delivery of the Program

After confirming that OHL was ready to implement ROI Methodology and establishing that leaders and associates at OH see the value of the methodology, four separate ROL workshops were offered May 15 – June 02, 2017 to help associates gain the knowledge and skills to plan, collect and report results at each level of evaluation. The content of the ROL workshop was delivered using various instructional methodologies, including PowerPoint, case-study discussions and workshop exercises. On the second day, each participant presented an evaluation project using the knowledge, skills and resources they acquired from the previous day.

Immediately after each workshop, participants were invited to complete a 16-item questionnaire to establish Level 1 – reaction and Level 2 – learning. Approximately three weeks after the workshop, participants were invited to complete a second questionnaire to determine Level 3 – application and Level 4 – impact. Both questionnaires were administered using Research Electronic Data Capture (REDCap), a secure data-collection tool developed by researchers at Vanderbilt University. The data acquired was analyzed using IBM SPSS Statistics software, Version 23.

Several strategies were applied prior to launching the questionnaires, during the evaluation period, and after evaluation to ensure high response rates. The strategies utilized were:

- Prior to launching questionnaires, facilitators introduced them at the beginning of each workshop, communicated the approximate time to complete them, and explained that they were designed for easy response.
- During the evaluation period, participants' responses were kept confidential, updates and follow-up reminders were provided to create pressure to respond.
- After evaluation, results were sent to respondents and reported to stakeholders involved in change management efforts.



In general, the four most common barriers of program implementation are timing (We don't have the time for additional measurement and evaluation.), support (Our manager will not support this process.), resources (Our budget will not allow for additional measurement and evaluation.) and communication (We did not have input on this process.). Thus, these potential barriers were addressed prior to implementation of the ROI workshops via a needs assessment, ROI roadshow, kick-off event, and the use of internal resources to train OH learning associates.

- Needs assessment.** The ROI readiness survey⁵ was administered in October 2016 (six months prior to implementation of the ROI workshops) to assess OHL's readiness for implementation of the ROI Methodology and to understand associates' perceptions and mindsets about OHL as the training and performance improvement function of the organization. The survey consists of 15 statements and OHL associates were asked to rate their agreement with each statement on a five-point scale with 1=disagree and 5=agree. Associates' mean survey score was computed and the ROI scoring rubric was used to interpret the results (Table 3).

Figure 3: ROI Scoring Rubric

Score	Scoring rubric
15 – 30	You are not yet a candidate for ROI.
31 – 45	You are not a strong candidate for ROI, however, it is time to start pursuing some type of measurement process.
46 – 60	You are a candidate for building skills to implement the ROI process. At this point there is no real pressure to show the ROI, which is the perfect opportunity to perfect the process within the organization.
61 – 75	You should already be implementing a comprehensive measurement and evaluation process, including ROI.

Source: OhioHealth

Of the 60 OHL associates invited to participate, 57 completed the survey resulting in a 95% response rate. Associates' mean survey score was 54.18 ± 4.87 , indicating that OHL was ready for implementation of the ROI Methodology. The data was shared with managers and associates in OHL to gain their support for the ROI Methodology and to help them understand that it was right time to implement and perfect the ROI process as there was no real pressure to show ROI at OH.

- ROI roadshow.** In addition to gaining the support of OHL managers and associates, the support of top executives at OH was also needed. In January and February 2017 (~ four months prior to implementation of the ROI workshops), the Learning Measurement and Assessment Consultant at OHL along with the Director of OHL met with selected leaders at OH to introduce them to ROI



Methodology and gain their support to implement it. These leaders included the Senior VP and Chief Human Resource Officer, System VP of Academic Affairs and Chief Academic Officer, System VP of Talent Management and Organizational Effectiveness, Senior VP and Chief Nursing Officer, VP of Human Resources, Chief Diversity and Inclusion Officer, and System Director of Nursing.

- **ROI kick-off event.** After obtaining support from OHL associates and managers and top OH executives, a 1.5-hour kick-off titled “Show Me the Value: Shifting Learning from Activity to Outcomes” was organized to provide selected leaders and associates a “taste” of ROI Methodology. The event occurred on March 23, 2017, ~two months prior to implementation of the ROL workshop. The keynote speaker was Dr. Jack Phillips, developer of the ROI Methodology and Chairman of the ROI Institute.

Immediately after the keynote presentation, participants were invited to complete a seven-item questionnaire designed to capture their reaction towards the overall event and attitudes toward specific components, such as the guest speaker and learning environment. For each item, participants were asked to rate their agreement on a five-point scale with 1=strongly disagree, 3=neutral and 5=strongly agree. The questionnaire was scored out of 35, and a minimum score of 28 out of 35 (80%) was chosen to indicate that participants had a positive reaction to the event.

Of the 96 individuals who participated in the event, 60 (63%) completed the questionnaire. The overall mean score was 30.47, suggesting that participants had a positive reaction to the event. Participants consistently agreed that the kick-off event was relevant to their work and provided them with new information or clarified existing information. Participants’ responses to the open-ended item on the questionnaire suggested that they wanted more information on ROL Methodology, which provided justification for implementation of the ROL workshops on how to utilize ROI Methodology

- **Using internal resources for ROL workshops.** The ROI Institute offers a five-day certification course to train participants to use ROI Methodology. The cost of the face-to-face course is \$4,000/person, not including accommodations and travel expenses. However, rather than hiring an external contractor to provide the training, the Learning Measurement and Assessment Consultant at OHL who previously completed the ROI certification course developed the workshop materials and provided the training to 49 OH associates. This approach saved OH a minimum of \$196,000 (\$4,000 x 49 associates).

Measurable Benefits

Of the 49 associates who participated in the workshop, 45 (92%) completed the first questionnaire and 35 (71%) completed the second questionnaire.

Level 1 – Reaction

The mean score (out a high of 5) and standard deviation for the 10 Likert-scale type items on questionnaire #1 are presented in Table 4. To facilitate interpretation of results, a minimum mean score of 4 out of 5 (80%) for each item on the questionnaire was used to indicate consistent agreement.

Figure 4: Mean Scores and Standard Deviation for Survey

Survey item	Mean score \pm Std
1. The content was relevant to my work.	4.53 \pm 0.70*
2. The workshop provided me with new information (or clarified existing information).	4.67 \pm 0.56*
3. The exercises and examples help me understand the material.	4.58 \pm 0.72*
4. The facilitator was knowledgeable about the subject.	4.98 \pm 0.15*
5. The facilitator was effective in helping me learn new information (or clarified existing information).	4.73 \pm 0.50*
6. The facilitator was responsive to participants' needs and questions.	4.91 \pm 0.29*
7. The learning environment was conducive to learning.	4.47 \pm 0.69*
8. I learned new knowledge and skills from this workshop.	4.69 \pm 0.47*
9. I am confident that I can effectively apply the skills learned in the workshop.	4.07 \pm 0.78*
10. I intend to use what I learned from this workshop.	4.58 \pm 0.58*
Overall	4.62 \pm 0.36*

* > 4.0

Source: OhioHealth 2018

The overall mean score was 4.62 \pm 0.36, suggesting that participants had a positive reaction to the ROL workshop. Participants consistently agreed that the content of the workshop was relevant to their work (item 1) and that it provided them with new information or clarified existing information (item 2). They felt that the exercises and examples helped them understand the material (item 3), and that the facilitator was knowledgeable (item 4), effective in helping them learn (item 5), and responsive to their needs and questions (item 6). Overall, participants agreed that the environment was conducive to learning (item 7).

Level 2 – Learning

Participants consistently agreed they learned new knowledge and skills during the workshop, are confident they can effectively apply the skills learned, and intend to use what they learned from the workshop. Specifically, they plan to:

- Use the evaluation framework to guide the design, implementation and evaluation of learning and development projects.
“I will use the Evaluation Frame work to evaluate Learning Requests” – Participant #20
“I will utilize the framework and tools on learning projects to which I am assigned. I will work to implement a strategy to incorporate the framework and tools into our work process in OHL.” – Participant #17
- Use the tools and templates to plan educational activities, particularly the objective map to create SMART objectives and data-collection plans to develop evaluations.
“I will implement the use of objective-map template and data collection plan.” – Participant #4
“Practice creating data collection map and SMART goals.” – Participant #9
- Complete the evaluation project they presented during the workshop.
“I will follow through with the project I shared during the presentation.” – Participant #11
“I will follow through with my planned level 3 project with charge nurses. I may be able to take it to level 4.” – Participant #5

Level 3 – Application

Sixty percent (21/35) of participants agreed that they’ve applied at least one concept or technique, 11% (4/35) disagreed and 29% (10/35) were neutral. Those who have applied at least one concept reported that they’ve been using the ROI Methodology framework to help plan current and future learning and development initiatives, the objective map to create SMART objectives, and the data-collection plan to develop evaluation plans.

“Incorporated data collection mechanism and creation of smart objectives into planning process for director core.” – Participant #15

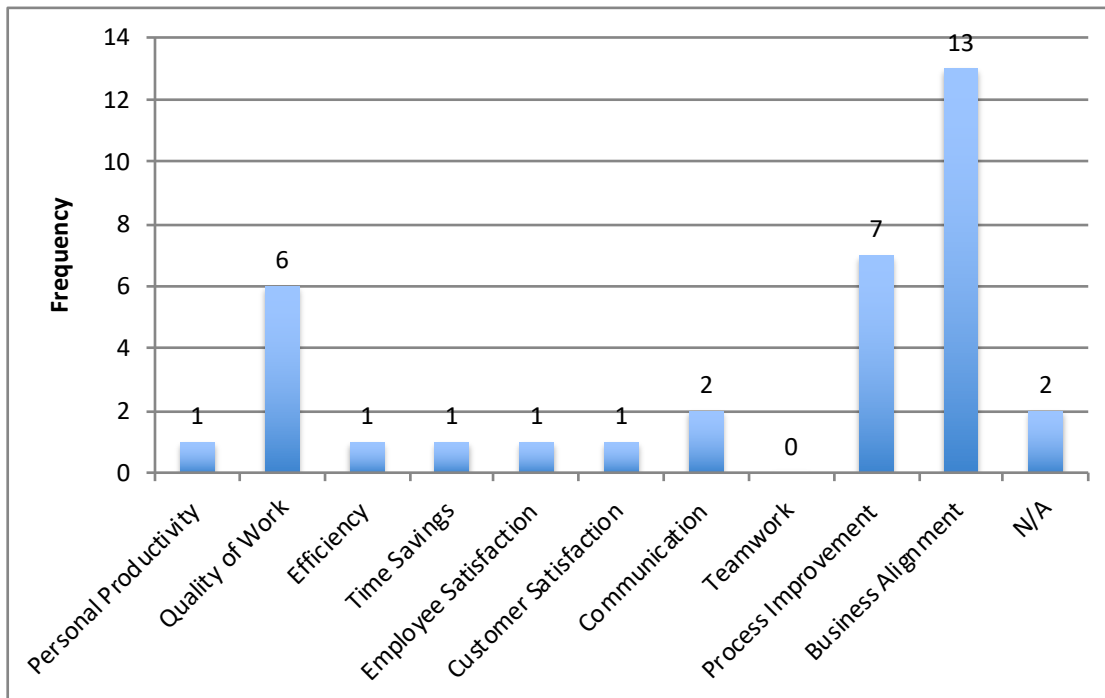
“The structure behind laying out new ideas for projects and how to tell 'my story' using the tools provided.” – Participant #28

According to participants, the top enablers of implementation were the tools and templates provided (24/35 or 69%) and the confidence to apply the concepts and materials learned (21/35 or 60%). The top two barriers of implementation were lack of time (11/35 or 31%) and opportunity (16/35 or 46%) to apply the learning.

Level 4 – Impact

Figure 1 shows the frequency of participants’ responses to the question on which one of the listed areas are mostly linked to the ROL workshop. According to participants, the top three business measures impacted by the ROL workshop were business alignment, process improvement and quality of work.

Figure 5: Responses on Which One Area Is Mostly Linked to ROL Workshop



Source: OhioHealth

Overall

The purpose of this initiative was to implement ROI Methodology via the ROL workshop at OHL to help learning associates demonstrate the value of learning programs. As hypothesized, participants had a positive reaction to the ROL workshop (Level 1 – reaction) and agreed that they learned new knowledge and skills from the workshop (Level 2 – learning). The majority of participants applied at least one concept or technique that they learned from the workshop (Level 3 – application). The three most-frequently reported measures impacted by the ROL

workshop were business alignment, process improvement and quality of work (Level 4 – impact). The outcomes for Level 4 were consistent with results from other organizations showing that implementation of ROL Methodology helps align programs to business needs, enhance the design and implementation process to focus on outcome rather than activity, and show contributions of selected programs beyond reaction and learning.

Lessons Learned

The response rates on the first and second questionnaires were 92% (45/49) and 71% (35/49), respectively. Although several strategies were applied to increase response rates, other strategies are being incorporated to increase them in future ROL workshop sessions, such as using incentives and having executives introduce the evaluations.

As previously mentioned, the two frequently reported barriers of implementation were lack of time and opportunity to use the tools and techniques. Since completion of ROL workshops, multiple opportunities have been offered to program participants to address those barriers.

- Offering associates the opportunity to serve on the OHL assessment team to help integrate the ROI Methodology at OHL.
- Offering associates the opportunity to present their evaluation projects and receive constructive feedback via 1-on-1 mentorship sessions with an assessment expert.
- Implementation of a standard Level 1 evaluation tool that associates can use to assess participants' reaction at the end of every learning program at OHL.

Since the ROL workshops in May and June 2017, the assessment team has grown from six to 12 members, associates in OHL are continuing to use the 1-on-1 mentorship sessions, and more than 250 clinical and non-clinical programs have integrated the standard Level-1 evaluation tool.

Future Direction

Now that learning associates have the knowledge, skills and resources to plan, design, collect and report data at different levels of evaluation, the next step is to continue to support associates as they apply what they learned to their jobs. The following initiatives are in place to further support the use of ROI Methodology at OHL:

- Implement monthly group-mentorship sessions where associates can present their evaluation projects and receive constructive feedback from an assessment expert as well as their peers.
- Review the current process used to track learning and development initiatives to ensure that the acquired data is both accurate and useful.



- Collaborate with associates from the OH Research Institute to support dissemination of results (via manuscript publication and/or conference presentation) for Levels 3, 4, and 5 initiatives as well as selected initiatives at Level 2.
- Explore innovative methods to deliver assessments to improve ease of delivery and ensure high-response rate and confidentiality of information.
- Create a team of evaluation experts via the ROI Certification program who can lead implementation of ROI Methodology in their own functional areas of the organization.
- Design learning scorecards to report the value of learning and development initiatives to executives and key stakeholders at OH.

Conclusion

Currently, the success of learning and development programs at OHL are defined by participants' reaction and learning. It is predicted that implementation of ROI Methodology and initiatives listed above will help OHL reach the recommended-evaluation targets of 30% application, 10 – 20% impact and 5 – 10% ROI established by the ROI Institute. Reaching these targets will provide the objective evidence needed to show the value of learning to different OH stakeholders.



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