



## Member Leader Excellence Awards

Gary Nesteby (pictured right) and Lawrence Mossman (pictured far right) received the Member Leader Excellence Awards from ASQ Section 1303 Chair David Burger during a ceremony at the April dinner meeting.

Nesteby is involved with the IRPE process, greenbelt training, and his success in involving local hospitals in quality improvement initiatives.

Mossman has had long-term involvement within Section 1303 and in the Quality Audit Division at ASQ.



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## ASQ Section 1303 Key Dates:

### Monday, May 21, 2012:

"Golf Classic 2012" with ASM, International.  
Location: Pinnacle Golf and Country Club,  
Milan, Illinois

### Misc. Key Quality Dates:

### May 21 - 23, 2012:

World Conference on Quality and Improvement  
(aka ASQ Annual Conference).  
Location: Anaheim, California

**Saturday, June 2, 2012:** Exam Date for the following Exams: Calibration Technician, Pharmaceutical GMP Professional, Quality Auditor, Quality Engineer, Quality Improvement Associate, Quality Process Analyst, Six Sigma Green Belt, Software Quality Engineer

### Friday, August 17, 2012:

Application deadline for the following certification exams: Biomedical Auditor, HACCP Auditor, Manager of Quality/Organizational Excellence, Master Black Belt, Quality Inspector, Quality Technician, Reliability Engineer, Six Sigma Black Belt.

**Saturday, October 6, 2012:** Exam Date for the following Exams: Biomedical Auditor, HACCP Auditor, Manager of Quality/Organizational Excellence, Master Black Belt, Quality Inspector, Quality Technician, Reliability Engineer, Six Sigma Black Belt.

# April Dinner Meeting

Brion Hurley (right) presenting a refresher on regression analysis at the April Dinner Meeting. Regression analysis is a statistical method for modeling and analyzing several independent variables, to determine how they relate to a dependent variable. Brion is an ASQ CSSBB and is currently a Principal Lean Consultant at Rockwell Collins, Inc.



## Last Newsletter of the Program Year

As we bring to a close our program schedule for 2011-2012, this will be our last issue of the Iowa Quality Newsletter. The next issue will be published around early September along with the program schedule for 2012-2013. Our first section meeting will be held in September.

### WELCOME - WELCOME

It is our pleasure to welcome the following new members to section 1303

James Blagborne, Burlington, Iowa  
Joseph W. Richardson, Bettendorf, Iowa  
Kunal Patil, Moline, Ill.  
Polina Beauchamp, Davenport, Iowa  
John R. Moretz, Davenport, Iowa

Dan R. Harvey, East Moline, Ill.  
Bridget Berger, Moline, Ill.  
Tammy S. Johnson, Lynn Center, Ill.  
Kati R. Besler, Monticello, Iowa  
Robert W. West, Davenport, Iowa

### DOES ASQ HAVE YOUR CURRENT INFORMATION?

Recent changes to ASQ's email memberships have changed. If you are now receiving a printed copy of this newsletter instead of an electronic version, your email memberships have changed through ASQ. To receive the newsletter via email, please review your email preferences section under "My Account" and select ASQ Section Communication to receive email communication from the section.

To update your contact information, or if you have questions for ASQ, please contact ASQ's Customer Care Center using one of the methods listed below.

#### ASQ's Customer Care Center:

E-Mail: [help@asq.org](mailto:help@asq.org)  
Phone: 1-800-248-1946  
FAX: 414-272-1734

[www.asq.org](http://www.asq.org)

## Program for next year

ASQ Section 1303 is currently developing the program schedule for 2012-2013. If you have any speakers you would like to hear from, any workshops, training, or tours, please email ideas to [asq1303@gmail.com](mailto:asq1303@gmail.com)

# ASQ Section 1303 Program Schedule 2011-2012



## **Friday, September 23<sup>rd</sup>, 2011:**

Program: “The Smarts That Matter Most - Building Your EQ to Develop Positive Relationships” presented by Gale Mote.

Location: Waterloo Brown Bottle, Waterloo, Iowa

## **Thursday, October 27<sup>th</sup>, 2011:**

Program: Start with a tour of the Core Clinical Laboratory at the University of Iowa Hospital. The lab makes extensive use of statistical quality control, lean principles, and real-time throughput monitoring. Integrated, highly automated analysis equipment, decision support systems, and information management systems operated by dedicated Medical Laboratory Scientists help the laboratory provide world-class service to their customers. This will be followed afterward by a presentation from Dr. Richard LeBlond, MD, the Chief Quality Officer from the University of Iowa Health Care “Quality and Patient Safety in Health Care - The Challenges of Standardization with Non-Standard part”.

Location: Kinnick Ballroom at the Holiday Inn, Coralville, Iowa

## **Tuesday, November 15<sup>th</sup>, 2011:**

Program: ASQ Section 1303 has been invited to a social event by ASM (American Society of Materials) International in Moline, Illinois. The evening will consist of a presentation by Teresa Burnett “Isn’t Social Media just for Teenagers?”, then the QCESC annual President’s Reception, and dinner. The evening will conclude with a Social Networking opportunity while watching the Quad City Mallards Ice Hockey Team on the party deck (game starts at 7:05 p.m.). The Quad City Mallards [www.myqcmallards.com](http://www.myqcmallards.com) are a Minor League Team in the Central Hockey League (CHL).

Location: i wireless center, Moline, Illinois

## **Thursday, December 8<sup>th</sup>, 2011:**

Program: Presentation for the evening will be “The Influencer” presented by Shirley Poertner. The theme of the evening will be Leadership/Management with recognition to the past chairs of ASQ Section 1303.

Location: Iowa River Power Restaurant in Iowa City, Iowa

## **Thursday, January 19<sup>th</sup>, 2012:**

Program: Presentation from the City of Cedar Rapids Water Department on Water Treatment and Waste Water Treatment. If the event is postponed due to weather, the make up date will be Thursday, February 23<sup>rd</sup>.

Location: Marriott on Collins Road in Cedar Rapids, Iowa

## **Thursday and Friday, March 15<sup>th</sup> and 16<sup>th</sup>, 2012:**

“The Influencer” 2 day workshop instructed by Shirley Poertner. In this fast-paced and inspiring presentation based on the *New York Times* bestseller, *Influencer: The Power to Change Anything*, you will learn what it takes to create rapid and sustainable change.

Location: Room 127 at the Kirkwood Training & Outreach Service (KTOS) 3375 Armar Drive, Marion Iowa

## **Thursday, March 29<sup>th</sup>, 2012:**

“GD&T Made Easy” 4 hour workshop taught by Nobuo Suga, Mitutoyo Institute of Metrology, Mitutoyo America Corporation. Great opportunity to develop GD&T knowledge and skills for current or potential CQEs, CQTs, and CMIs. 1:00 – 5:00 p.m.

Location: Thunder Bay Grill in Davenport, Iowa

## **Thursday, April 19<sup>th</sup> 2012:**

Program: Lean/Six Sigma presented by Todd Moser from Rockwell Collins, Inc.

Location: Elm Crest Country Club, Cedar Rapids, Iowa

## **Monday, May 21<sup>st</sup>, 2012:**

Members of ASQ Section 1303 have been invited by ASM (American Society of Materials) International to participate in the annual “Golf Classic 2012”.

Location: Pinnacle Golf & Country Club, Milan, Illinois

## “GOLF CLASSIC 2012”

Grab your clubs, a few friends and join us on the course !! ASM International invites you to take part in this year's annual four-person best ball scramble at Pinnacle Golf & Country Club (*Private Club*). Proceeds raised from this event supports student scholarships & engineering educational programs.

When: Monday, May 21, 2012

Where: Pinnacle Golf & Country Club  
11928 Knoxville Road, Milan, Illinois  
(309) 787-5446

Time: Registration begins at 12:15 p.m.  
Tee Time Shotgun Start at 1 p.m.  
Dinner will begin around 6 p.m.

Cost: \$65 / person or \$250 / team to play  
(includes golf, cart, lunch, dinner, prizes & fun)  
\$20 / person for dinner only for the non-golfer

**\*\*NOT A GOLFER?** ...You can still participate:

### Sponsorship Opportunities

Sponsor a Hole’-\$100, ‘Sponsor nine’-\$150, ‘Sponsor eighteen’-\$200, ‘Classic sponsor’-\$250

We are also accepting donations (promotional products, prizes, gifts, monetary, etc.)

**To Register Online:**

<http://www.qcesc.org/GolfClassic.htm>

**To Register by Mail:**

- Make check payable to: ASM International (\$5 discount for ASM members)
- Include name, company, phone, email and society on registration info
- Mail to: Barry Murchie, QET Consultants  
ATTN: ASM  
PO Box 353  
Bettendorf, IA 52722

**\*Registration ends May 14 .... Space is limited so register early**

Questions: Email: [BTMurchieQET@yahoo.com](mailto:BTMurchieQET@yahoo.com) Phone: (563)359-7771



## Public Health's Strategic Rx: Hoshin Planning

by Janet Jacobsen

### The Story in Brief...

- To meet national accreditation requirements, Linn County Public Health (LCPH) needed to develop a strategic plan.
- LCPH contracted with the Iowa Quality Center to help prepare this plan as well as to strengthen its continuous improvement focus.
- A group exercise called a gallery walk helped leaders discern strengths and improvement opportunities.
- They used the Hoshin planning process as well as PlanBase software to create, deploy, and monitor its strategic plan.

### A Look at Linn County Public Health

Linn County Public Health (LCPH) is a local government agency that serves more than 200,000 residents in eastern Iowa. Headquartered in Cedar Rapids, LCPH is comprised of five divisions—personal health, community health, as well as environmental, laboratory, and administrative services. Within these divisions, nine branches provide a wide range of services from chronic disease management to air quality testing and from restaurant inspections to emergency preparedness programs. LCPH employs approximately 60 people and is governed by the Linn County Board of Health.

### Getting Started

With the arrival of a new director in 2009, LCPH began a thoughtful look at the accreditation process offered by the Public Health Accreditation Board (PHAB), a respected national organization. “The process, much like Baldrige or IRPE, seeks to advance quality and performance. With the PHAB process an added focus is placed on the three core functions of public health (assure, policy, and assessment) and the ten essential public health services of public health agencies,” said Jim Hodina, LCPH environmental director.

When leaders researched specific accreditation requirements, they learned that a minimum of three documents were needed to begin the process:

- A community health assessment.
- A community health improvement plan.
- An agency strategic plan.

While the first two items were already completed, LCPH did not have an updated strategic plan, so agency leaders contracted with the Iowa Quality Center (IQC), located in Marion, for assistance in developing one. Although simply creating a strategic plan and filing it away might satisfy basic accreditation requirements, LCPH leaders realized the key to sustained improvement was using the plan in a disciplined, continuous manner.

### The Approach

Upon the IQC's recommendation, the agency adopted the Hoshin planning process, sometimes known as Hoshin Kanri, strategy deployment, or policy deployment. No matter what the name, this strategy is a disciplined annual planning process that helps organizations set and achieve stretch objectives that are linked to long-term

strategic objectives or a strategic plan. Most notably, Hoshin planning calls for the organization to set goals with measurable metrics and targets and then compare actual performance against those metrics on a set schedule using a standardized process. Because a key aspect of Hoshin planning involves regular reviews of the defined plan, it doesn't work to simply stash the plan away in the back of the cabinet never to be seen again. "A strategic plan needs to be living, changeable document and that's the advantage of Hoshin planning; you aren't tied to an unchangeable plan," explains Gary Nesteby, ICQ executive director.

For LCPH, the first step was convening the LCPH management team to participate in the strategic planning process held at an off-site location for approximately 12 hours over a two-week period. The IQC-directed sessions brought together top leaders to focus on several tasks that were divided among five phases:

- Identify a framework of agency-wide objectives and strategies.
- Define branch strategies, tactics, and performance metrics under the agency approach.
- Align branch plans with the agency plan; identify key themes.
- Finalize agency tactics and performance metrics.
- Confirm ownership at branch and agency levels in the strategic plan.

### *Establishing the Framework*

A key step in this initial phase centered on identifying the strategic advantages as well as the biggest challenges facing the agency. This step was accomplished through a group activity called a gallery walk, a five-hour interactive exercise led by IQC facilitators. The gallery walk introduced LCPH leaders to a framework—the *Baldrige Criteria for Performance Excellence*—and then related this framework back to the agency. To learn more about the gallery walk exercise, see the sidebar, *Gallery Walk Pinpoints Improvement Opportunities*.

As a result of this team activity, the leadership team created a comprehensive list of 12 strengths in six process areas and 12 opportunities for improvement in six other process areas. "The challenge is never in finding opportunities," commented Hodina, a member of the leadership team involved with the strategic planning. The key, he says, is to consolidate and prioritize those opportunities. Hodina explains that the group selected two opportunities for improvement (OFIs) from each of the Baldrige criteria categories—leadership, strategic planning, customer focus, measurement and analysis, workforce, process management, and results. Next, the leadership team analyzed the relationships among the OFIs, which helped them select four drivers in which to build the strategic plan's framework. The drivers included:

- 1.1 Increase visibility and influence national, state, and local program and policy development
- 1.2 Ensure long-term sustainability
- 1.3 Collaborate and innovate with current and new partners
- 1.4 Improve Board of Health governance

### *Defining Branch Strategies, Tactic, and Metrics*

After laying the groundwork in the agency-wide session, employees in each branch looked at the framework and identified what they needed to do to support the overall agency initiatives. To accomplish this, each of the nine LCPH branches:

- Created a branch mission statement.
- Identified strategies and tactics for the branch that fit under the overall framework, including at least one strategy for increasing visibility and influence, achieving accreditation, implementing continuous quality improvement (CQI), and collaborating and innovating with current and new partners.
- Defined timelines for tactics and performance measures for the strategies created.

### *Aligning and Validating Plans*

Nesteby describes this next phase as rolling up or aligning the branch objectives into the LCPH's overall objectives. This is a key aspect of Hoshin planning—refining high-level goals through levels of management into strategies that ensure the organization is aligned and staffed to achieve overall strategic goals. The following example

highlights this alignment within LCPH agency's plan as one core objective is *to collaborate and innovate with current and new partners*. Listed below are objectives from three different branches that align with the agency-wide objective listed above:

- Develop relationships with other labs to look for new services, equipment, or partnerships in learning.
- Assign outreach coordinators to two coalitions/committees/task forces/councils.
- Provide exceptional customer service to Linn County Planning and Development staff.

As evident by this example, Hoshin planning is hierarchical in nature as each manager's strategies become their direct reports' objectives.

During this phase the branch managers presented their respective plans to the agency's strategic planning team so that this group could identify what resources were needed for implementation, detect potential obstacles, and pinpoint common themes among branch objectives. The team also identified any gaps in the plans and verified that metrics were in place and that process owners were identified correctly. Finally, this was the time when any additional strategies, such as accreditation and CQI tactics, were verified.

### Finalizing Tactics and Measures

The fourth phase involved sharing the draft strategic plan with the Board of Health. Once the board's feedback was in hand, the leadership and management teams gathered to update the plan's objectives, strategies, tactics, timelines, etc. Upon completion of this task, the plan was presented once again to the Board of Health, which approved it in late 2010.

### Confirming Process Ownership

Of course, the key to deploying a strategic plan is ownership—with all process owners on board and ready to deploy and continually monitor and improve their unique segments of the plan. Prior to creating the strategic plan, LCPH selected a software package called PlanBase, which is an online deployment and tracking program to measure progress against strategies, tactics, milestones, and performance measures. This software enables the agency to deploy and track its plan components using Hoshin review tables, each of which shows a single objective along with its supporting strategies. A review table, as shown in Figure 1, provides details such as:

- Strategy owner
- Timeframe
- Performance metrics
- Targets for each strategy as defined during the planning process
- Actual results at the time of review

Figure 1: Hoshin Planning Review Table

Agency	Function	Plan Owner	Plan Year(s)											
Linn County Public Health	Public Health	Stephanie Neff	Jul 2010 - Jun 2012											
<b>December 2011 Review 1.2.2: Achieve accreditation with public health standards.</b>														
Objective/Strategy (Owner)	Metric (Actual / Target)	Status	Reason for Difference	Corrective Action										
1.2.2.1 Select Accreditation Standard (State or National) (Stephanie Neff)	Application & Secure Accreditation by 2014. (no targets)	?	update	update										
1.2.2.2 Assign policy & procedures (Stephanie Neff)	PHAB - National Iowa Accreditation - State, September 2010. (no targets)													
1.2.2.3 Write policies (Stephanie Neff)	Policies, completely 25% quarterly until complete - June 2011. (no targets)													
1.2.2.4 Write Procedures (Stephanie Neff)	Procedures, complete 25% quarterly until complete - 2012. (no targets)													
Tactic (Owner)	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Status	Remarks
1.2.2.1 Select Accreditation Standard (State or National) (Stephanie Neff)													FT	Will align with and prepare for National Accreditation using PHAB Standards. update
1.2.2.2 Assign policy & procedures (Stephanie Neff)													FT	update
1.2.2.3 Write policies (Stephanie Neff)													FT	Priority policies necessary to meet accreditation standards identified and written. Final policies to receive approval at September BOH meeting. update
1.2.2.4 Write Procedures (Stephanie Neff)													FT	update
1.2.2.5 Provide staff education on implementation of written policies and procedures to assure appropriate documentation. (Stephanie Neff)													FT	update
1.2.2.6 Conduct internal audit for completeness of Policies & Procedures and required accreditation documentation. (Stephanie Neff)													FT	update
1.2.2.6 Prepare and submit application for accreditation. (Stephanie Neff)													FT	update

Not only can process owners and LCPH leaders access the current status of improvement activities, but so too can members of the Board of Health who can log in to the PlanBase software at any time to review the status of the agency's initiatives.

### Working With the Plan

Now more than a year after the strategic plan was approved, the agency continues to make progress on key elements of its strategy. As with any continuous improvement initiative, the strategic plan and its associated objectives drive the agency's work over time.

LCPH continues to make progress toward demonstrating conformance with the national standards of the PHAB. In August 2011, LCPH was selected by the Iowa Department of Public Health to pilot the accreditation and site visit process. An application was submitted in December and the site visit followed in February 2012. LCPH met 81 of the 100 elements of the standard. This was the organization's first assessment toward the PHAB standards and Hodina believes that the gaps on the remaining 19 elements can be closed in time to meet the annual PHAB accreditation filing date of May 31, 2012.

### For additional details:

To learn more about the Hoshin strategic planning process, contact Gary Nesteby at the Iowa Quality Center via e-mail at [gnesteby@iowaqc.org](mailto:gnesteby@iowaqc.org) or call 319-398-7101.

Additional information about the Baldrige Performance Excellence Program, go to [www.nist.gov/baldrige](http://www.nist.gov/baldrige).

### Gallery Walk Pinpoints Improvement Opportunities

One of the most beneficial tools used in creating the Linn County Public Health (LCPH) strategic plan was the gallery walk led by the Iowa Quality Center (IQC). During this five-hour exercise, senior leaders assessed the agency by walking along a wall of papers that contained the *Baldrige Criteria for Performance Excellence* displayed on the top, explains Gary Nesteby, executive director of the IQC. The term gallery walk is based on the analogy of walking through an art gallery where a group's work is displayed for others to learn from and enjoy.

Nesteby says this exercise encourages leaders to ask penetrating questions about how processes are working or are not working in the organization, which stimulates useful conversations among members of the leadership team. He notes that dramatic changes in relationships can result from the experience as leaders engage in dialogue that brings new ideas to light.

Leaders are divided into small teams and asked to stand in front of the criteria, one category at a time, and read the questions posed from the Baldrige framework. The leaders then make an assessment of the organization regarding its strengths in meeting the criteria or the opportunities for improvement that the criteria may suggest through the question.

Nesteby says the criteria are not prescriptive, so it does not create an environment where the organization is undergoing an audit. Each team moves from category to category every 10 minutes until they all have visited the seven categories (leadership; strategic planning; customer focus; measurement, analysis, and knowledge management; workforce focus; operations focus; and results).

Key objectives of the gallery walk include:

- Understanding the top issues affecting the organization, specifically in the areas of leadership, strategic planning, customer focus, human resources, process management, information analysis, and organizational results.
- Identifying goals and action plans for using a continuous improvement framework to improve the organization.
- Learning more about customer relationships and how they are measured.
- Understanding the need for benchmarking and utilizing comparative data to make data-driven decisions.

Following the gallery walk, teams are assigned categories and are asked to prioritize the top two opportunities and strengths in each section. The IQC facilitators bring the 12 process strengths and opportunities to the front and add them to a list from all groups. After combining the information into like groups, the facilitators take the leaders through a relationship diagram. The diagram looks at the ability of the opportunities to influence each other and sets a prioritization of where the organization may go to have the highest level of influence in increasing the performance. Finally, the data is saved into a report to serve as support for the group's organizational assessment.

"The gallery walk was a robust approach to helping the LCPH management team identify strengths and weaknesses across all critical functions of the agency. This initial surveillance of our business environment prepared us well as we began framing the strategic framework for our agency objectives, tactics, and metrics," said Jim Hodina, LCPH environmental director.

# Upcoming Classes

## Lean Six Sigma Green Belt Training

May 21-25, Cedar Rapids/ Marion

\$2,700 IQC Member

\$3,200 Non Member

## ISO 9001:2008 Internal Auditor Training

Jul. 30-Aug. 1, Marion

\$850 IQC Member

\$1,100 Non Member

## IRPE Examiner Training

Aug. 14 & Sep. 17-20, Des Moines

Aug. 16 & Sep. 24-27, Marion

\$475 New Examiner

\$275 Returning Examiner

## 2012 Networks

### May

9—Lean Six Sigma

18—Des Moines Area Learning

22—Iowa City

23—Systems Thinking

### June

13—Lean Six Sigma

15—Des Moines Area Learning

26—Iowa City

27—Systems Thinking

### July

11—Lean Six Sigma

20—Des Moines Area Learning

24—Iowa City

25—Systems Thinking

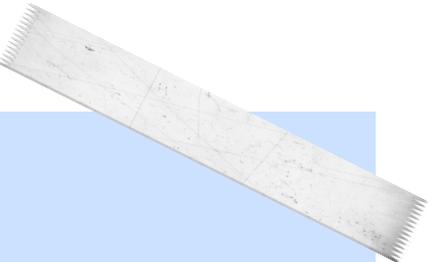
### August

8—Lean Six Sigma

17—Des Moines Area Learning

22—Systems Thinking

28—Iowa City



### September

12—Lean Six Sigma

21—Des Moines Area Learning

25—Iowa City

26—Systems Thinking

### October

10—Lean Six Sigma

19—Des Moines Area Learning

23—Iowa City

24—Systems Thinking

### November

14—Lean Six Sigma

16—Des Moines Area Learning

27—Iowa City

28—Systems Thinking

### December

12—Lean Six Sigma

21—Des Moines Area Learning

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