

Internal Evaluation on the Edge: Postcard from a Postmodern Practitioner

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Abstract

This paper identifies and explores contemporary issues in the role of the internal evaluator in a postmodern context. Emerging postmodern organisational forms demand that the internal evaluator cross orthodox boundaries to adopt new methods and styles of work. Elements of quality assurance, quality improvement, continuous quality improvement and evaluation that derive from disparate traditions and discourses merge and overlap in postmodern organisations that increasingly look to both the market and the public purse. While the concern of primary care with the practitioner/client relationship, can lead to a greater understanding of quality assurance initiatives there is a growing recognition of the need for group, program or population based approaches. The needs of organisational leadership in this context follow international trends favouring short term internal evaluation; management information that is based on information management that can provide data for program improvement quickly and simply. Feeding timely information directly into organisational planning and decision-making processes is critical for the internal evaluation role in this setting.

Key words: Internal evaluation, postmodernity, organisations, quality, primary care

We are currently poised on the edge of a newly emerging, complex world that many social observers have labelled postmodern. This is a particularly exciting and challenging time, for the edges of large social systems have always been the primary source of activity and information in defining the nature of cultures and societies. (Bergquist, 1993:11)

The internal evaluation role in the contemporary postmodern organisation can be described as a study in professional cross dressing requiring the adoption of new roles, swapping of disciplines and crossing of boundaries in reconfigured, decentred, organisations that display multiple cross sectoral identities. Situated on the edge of orthodox evaluation this paper maps some of the volatile, discontinuous and changing terrain that is navigated by the postmodern internal evaluator.

Postmodernity can be described as awareness of an emerging era that is defined by its relationship to modernity rather than based on knowledge of what a newly emerging world will become. It is characterised by difference from modernity and the pre modern period and yet features of these worlds permeate and coexist with new hybrid forms of organisation. Premodern organisations can be described as small with simple structures, limited growth, capital based on land, communication commonly oral (face to face) and paternal or charismatic leadership. Modern organisations, by contrast, are large and complex with growth a marker of success, capital based on buildings, equipment and money, communication typically in written form and a focus on management processes. The postmodern organisation combines features of both, often being small to medium in size with flexible structures and diffuse boundaries with capital based on knowledge and information, predominantly oral communication (often mediated electronically) and a need for leadership capacity rather than traditional management. (Bergquist, 1993xii). Living and working in this postmodern hybrid organisation confronts the internal evaluator with an array of new challenges.

The contemporary internal evaluator often now works in a twilight world within emerging postmodern organisations that are characterised by shifting internal divisions and diffuse external organisational boundaries. Restructuring has become an organisational commonplace so that processes of review and internal repartnering have become a usual part of increasingly short-term organisational planning cycles. Similarly the external 'boundaries' of organisations are subject to an ongoing process of redefinition and change with review of 'core' activities, development of commercial arms, outsourcing of functions and development of new relationships, partnerships and collaborations with other organisations. The range of activities undertaken within these shifting components increasingly span a more complex and dynamic mixture of public and private activities with commercial activities likely to be funded largely from public sources and with core functions more often now funded from private sources.

At the same time the traditional internal evaluation role has also become more fragmented and contradictory as it is redefined in management discourses that draw on the quality movement requiring the inclusion of quality assurance, quality improvement and continuous quality improvement functions. These activities now mingle and overlap with traditional internal evaluation approaches that are produced within the discourses of social science and education. Despite different disciplinary origins, the distinctions between these different activities have become blurred and may now exist more often in the formal literature than in everyday organisational practice. This may be particularly true in the

primary area of focus for internal evaluators, formative evaluation, where the emphasis is both on value and program improvement. Both the quality movement and internal evaluation now emphasise program improvement and the enhancement of program effectiveness as their primary purpose.

With a focus on program improvement, intimate knowledge of a setting becomes important (Morell, 2000, Sonnichsen, 1999). This requires a decentring of the internal evaluation role to a location close to the program. The contemporary internal evaluator, then, needs to work in a decentred way, flexibly, across and within specific program areas. In the postmodern organisation this method of working demands greater reliance on lines of informal communication across the various arms and relationships, both inside and outside the organisation, that may make up a program area. This level of involvement also requires skills very similar to those of the participant observer, as both insider and outsider, involving the development of rapport with key informants and participation in activities whilst maintaining distance and some objectivity (Jorgensen, 1989 Whyte, 1981).

The different functions of internal evaluation and quality management have also drawn closer together in their unit of analysis. The original focus of quality assurance and quality improvement at the individual case study level is expanding to include a focus on outcomes, aggregate data and cumulative information collated over time. At the same time, internal evaluation has come to focus more on qualitative and individualised case data, program processes and implementation issues. Within postmodern organisations the two functions now increasingly share the same information systems, data sources and professional support. At a practitioner level the two functions have also now merged so that it is now possible that both terms can be included in the duties of one position. My position is an example of such a merger. With a job title of *Quality Improvement Officer* my position objective and key responsibilities require the *evaluation* of achievements, systems and processes and the use of *evaluation* methods, techniques and activities. At the same time one of the aims listed is to ensure *continuous quality improvement*.

A comparison of the features that traditionally characterise quality assurance, quality improvement, continuous quality improvement and internal evaluation has been made in Table 1 below in order to map these areas of overlap and ambiguity.

Table 1 Quality Management/Evaluation Processes in Primary Care

	Quality Assurance	Quality Improvement	Continuous Quality Improvement	Internal Evaluation
ongoing	◦	◦	•	•
internally managed	◦	•	•	•
externally managed	•	◦	•	◦
qualitative	•	•	•	•
quantitative	•	•	•	•
engineering base	•	•	•	◦
social science base	◦	◦	◦	•
individual case	•	◦	•	◦
organisational learning	◦	•	◦	•
for improved outcomes	•	•	•	•
for accountability	•	◦	◦	•
programs	•	•	•	•
planning	◦	◦	◦	•
development	◦	•	◦	•
implementation	◦	•	◦	•
processes	•	•	•	•
monitoring	•	•	•	•
local knowledge	◦	•	◦	•
public sector	•	•	•	•
private sector	•	•	•	•
Total	13	14	13	17

- = a common feature
- = not a common feature

Quality Assurance – for example, clinical audit and accreditation activities

Quality Improvement – for example, stakeholder feedback surveys

Continuous Quality Improvement – for example, ongoing accreditation processes

Internal Evaluation – for example, process and monitoring evaluation

The four different functions show considerable overlap. The eight features that overlap relate to the methods used, the focus on program improvement, a concern with processes and monitoring and their location within a mixture of public and private sector organisations. The major differences lie in the underlying theoretical knowledge base, the location of practitioners and the stage of program development to which the activities apply. While the body of literature on the practice of internal evaluation offers the practitioner a high level of support in developing their role, interaction with quality management professionals can provide a further source of ready ideas that can also usefully be applied.

Far from leading to contamination, chaos and confusion, such a mingling of terms and disciplines provides a plethora of resources and ideas from which to piece together individual evaluation/quality improvement plans. The skills required of the internal evaluator in this case are those of the bricoleur, piecing together useful methods and techniques from a large pool of approaches that cross conventional boundaries and borders. In many ways the focus of the quality movement on cycles of quality improvement and change and on staff participation lends itself to a level of flexibility that fits well with a postmodern environment of ongoing and uneven organisational change. Many of the

approaches and methods of internal evaluation cannot meet the demands of a discontinuous and volatile organisational context (Morrell, 2000). Internal evaluators, then, will need to further develop their repertoire of skills and approaches in order to respond to this new environment (Sonnichsen, 2000).

While internal evaluation encompasses many of the features of its quality management cousins, it does not commonly share the focus on the individual case that characterises the quality assurance process. This is an important distinction in the primary care context where quality assurance activities, such as clinical audit, are widespread and fairly well understood by clinicians. The overlapping features of quality improvement, continuous quality improvement and internal evaluation at the program level are less familiar and less well understood by the clinician. It is, however, just these functions at the program level that are of increasing interest to organisational leaders in primary care. Their needs follow international trends favouring short term internal evaluation; management information that is based on information management that can provide data quickly and simply. Feeding timely information directly into increasingly short term organisational planning and decision making processes is critical for the internal evaluation role in this setting.

Increasingly the internal evaluator role encompasses the demands of postmodern organisations for short term and strategic approaches. The internal evaluator needs to consider unpredictable change as a normal feature of postmodern organisational life. Many of the best methods of social science require a level of stability and coherence and a concern for modern management processes that will never eventuate in the normal chaos of postmodern organisational life (Morrell, 2000:43). However, shorter internal evaluation projects that serve the needs of organisational leaders need not be of the 'quick and dirty' kind. A capacity to respond rapidly to demands for information does not preclude a capacity to provide useful data. High level decisions are often, of necessity, made with limited information. For organisational leaders the provision of timely and useful information, however limited, can only enhance organisational decision making capacity (Sonnichsen, 2000:207, Owen and Lambert, 1998:356, Wholey, 1983). The development of rapid response techniques that include staged and iterative approaches such as those that characterise the quality movement can only enhance evaluation capacity in the postmodern organisation.

While the role of the internal evaluator is rapidly changing and expanding, the demand for internal evaluation in the postmodern organisation is steadily increasing. The role has become both more important and more pervasive within organisations (Patton, 1997, Sonnichsen, 2000). It has been estimated that three-quarters of the evaluation activities undertaken in North America are conducted internally (Love 1991:2). An informal international survey by Sonnichsen indicates that a substantial and increasing proportion of evaluation across the globe is being conducted internally (2000:40). This increase indicates a growing focus on program improvement and the importance placed on detailed program knowledge by organisations.

The emerging postmodern consciousness has focussed attention on changes in organisational forms and processes that call for greater flexibility in internal evaluation. This includes the need to work more closely with program areas, to embrace methods from other disciplines to communicate more flexibly across organisational components, and to provide more short term and strategic evaluation to meet the needs of organisational leadership. This is, as Bergquist points out, a 'particularly exciting and challenging time', a

time in which to cross orthodox disciplinary and organisational divisions and to develop novel methods and approaches that will best suit the needs of the emerging hybrid postmodern organisational forms (Bergquist, 2000:11).

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