Organizational network analysis provides evidence-based decision support for health department managers preparing for accreditation

Evidence demonstrates that local health departments can benefit from the same tools Fortune 500 companies use to improve their organizations—Organizational Network Analysis (ONA). The technique, a form of performance assessment, is used extensively in private sector organizations to understand how work is accomplished. Organizational network analysis is a like an x-ray for analyzing the patterns of relationships among the components that make up a LHD: the employees, the tasks they perform, and the knowledge and resources they use to do their work.

A network analysis produces three types of evidence to support decisions about managing performance. The first, and probably most compelling, is an image of the LHD network. In these diagrams each employee is represented by a “node” and their relationships represented by lines that “link” them to each other and to their tasks, and the knowledge and resources they use to do their work.

The second type of evidence is measurement of the network which illustrate:

- **Complexity** reflects the integration among groups and processes within the organization—adequate complexity supports economies of scale, coordination and collaboration, and helps counter wasteful or duplicative work.
- **Communication Centralization** shows the structure of information flow in the organization. It indicates the degree to which an organization’s communication is hierarchical (command and control) versus distributed.
- **Communication Density** compares existing communication pathways with all possible pathways within the organization. Density shows bottlenecks and gaps in information flow between individual employees.
- **Assignment Redundancy** shows the proportion of staff who perform the same tasks as part of their normal work. This reflects capacity for the organization to adapt to changing circumstances, employee absences, and emergencies.
- **Silo Analysis** measures the potential that information stays within a program versus circulating to staff in other programs who may need it for their work. This evidence enables managers to devise strategies to improve information flow in the overall organization.

The third type of evidence is charts that rank who does what, who knows what, and who has access to what resources. These charts also show the flip side—tasks with the least backup, staff missing important knowledge, and where lack of resources may impede work. This evidence aids in planning and implementing resource acquisition and allocation and employee development.

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