



**2012**  
**AHCA/NCAL National Quality Award**

*A Benchmark of Distinction*

**Gold – Excellence in Quality**  
**General Information and**  
**Instructions**

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## CHAPTER 1: GENERAL INFORMATION

Thank you for your interest in the AHCA/NCAL National Quality Award program. The Quality Award program recognizes facilities who have established organizational systems of quality. The *Advancing Excellence in America's Nursing Homes* campaign and *LTC Trend Tracker<sup>sm</sup>* are AHCA endorsed programs that align with the Quality Award program. Applicants are strongly encouraged to participate in both programs to support their Quality Award journey and assist in their overall quality improvement efforts.

Applicants will be evaluated based on Criteria adapted from the Health Care Criteria for Performance Excellence (HCCPE) from the *Baldrige Performance Excellence Program*. These Criteria provide a standard of quality for organizations seeking the highest levels of performance and competitiveness. The Criteria address all of the key requirements that long term care organizations must address to achieve excellence. By focusing on results and the conditions and processes that lead to results, the Criteria offer a framework that organizations can use to guide their systems and processes toward ever-improving quality performance. The HCCPE is available on the Baldrige website, [www.nist.gov/baldrige/publications/hc\\_Criteria.cfm](http://www.nist.gov/baldrige/publications/hc_Criteria.cfm).

### ***Mission***

The mission of the AHCA/NCAL National Quality Award program is to support the application of continuous quality improvement in member organizations of AHCA and NCAL by promoting quality awareness and education and by recognizing significant achievements in quality improvement. The program also fosters networking among participating organizations by enabling them to share winning strategies and to communicate successful practices.

### ***Application Levels***

The AHCA/NCAL National Quality Award has been designed as a progressive, three step program. Organizations are able to apply for recognition at three levels, each of which requires a more detailed and comprehensive demonstration of quality integration and performance:

**Bronze – Commitment to Quality** – At the Bronze level, organizations begin their quality journey by describing their mission, characteristics, and key challenges that are embodied in the Organizational Profile section of the Baldrige Criteria. The objective of this award level is to provide a context for understanding the organization and its approach to performance improvement. The Criteria require that applicants provide a basic description of the organization, their mission/vision and how it is communicated across the organization, their stakeholder and key customer requirements, their supplier and partnering relationships, competitive factors, key performance measures, and their key challenges.

**Silver – Achievement in Quality** – At this level, organizations that have previously received a Bronze award will address the seven Baldrige Categories and the fifteen basic item requirements within these categories along with an updated Organizational Profile. Applicants describe the approaches they systematically use, how they deploy these approaches, how the organizations learn for continual improvement and how approaches are integrated. The Silver level award is a critical learning step for applicants. Applicants who receive the Silver award provide an

extensive assessment of their systematic approaches, performance measures, and sustainable organizational and process results that are linked to the key customer requirements, success factors, and challenges they identified in their Organizational Profile. Results do not have to be superior, but they must be good or improving and clearly linked to process improvements. Having been recommended by a team of independent and trained Senior Examiners, the application must meet the final approval of a larger group of Senior Examiners.

**Gold – Excellence in Quality** – At this level, organizations that have previously received the Silver award address the Health Care Criteria for Performance Excellence in its entirety. Applicants who receive the Gold award are recognized as some of the best performers in the long term care profession. They are prior recipients of the Bronze and Silver awards. Applicants who receive the Gold award demonstrate by approach, deployment, level and consistency of results that they are achieving high levels of performance in health care, customer satisfaction, financial, market, workforce, process, and leadership outcomes over time. Applications are reviewed by a team of independent and trained Master Examiners. If an application is recommended for the award, Master Examiners conduct a site visit to verify systems and performance.

### ***Benefits of Participation***

The goals of organizations that commit to the pursuit of excellence are to deliver ever-improving value to customers, improve organizational effectiveness, and engage in organizational and personal learning. Applicants of the National Quality Award program can expect to receive several benefits that will assist in their effort to become a high-performing organization, including:

- A heightened ability to improve services and internal processes;
- Peer recognition as a quality champion in the long term care profession;
- Public recognition for efforts and achievements;
- Increased customer loyalty resulting from a demonstrable commitment to quality;
- An understanding of how to use the Baldrige Criteria as an assessment tool; and
- Feedback reports that identify strengths in the organizations quality systems, as well as areas that need improvement.

### ***Confidentiality***

All applications are confidential. Applicants are not expected to provide or reveal proprietary information regarding products, processes, or services. Examiners are assigned in a way to avoid conflicts of interest. All Examiners sign nondisclosure agreements. Application information may be released only after written approval from the applicant.

## ***2012 Program Schedule***

Intent to Apply Submission Process Opens	November 1, 2011
Intent to Apply Deadline (at 8 p.m. EST)	January 12, 2012
Applications Accepted Online	January 16, 2012
Bronze Award Application Deadline (at 8 p.m. EST)	February 15, 2012
Silver and Gold Award Application Deadline (at 8 p.m. EST)	March 1, 2012
Bronze Applicant Notification and Feedback Distribution	May 16, 2012
Silver Applicant Notification	June 29, 2012
Gold Applicant Notification	July 16, 2012
Silver and Gold Feedback Report Distribution	September 28, 2012
AHCA/NCAL Annual Convention & Expo	October 7 - 10, 2012

## ***AHCA/NCAL National Quality Award Program Staff***

### **Timothy Case**

AHCA/NCAL National Quality  
Award Program Administrator

### **Courtney Krier**

AHCA/NCAL National Quality  
Award Program Manager

## ***AHCA/NCAL National Quality Award Board of Overseers***

The activities of the award program are overseen by the National Quality Award Board of Overseers, who approve program policies, oversee activities, ensure integrity and sustain the vitality of the AHCA/NCAL National Quality Award Program. This 11-member Board includes quality professionals, owners and administrators, Examiners, state affiliates and Baldrige Criteria experts. These individuals dedicate their time and service to providing continuous support and improvement to the Quality Award program.

## ***Contact Us***

The **Quality Award website** is a great resource for application information. To access the website, visit [www.ahcancal.org](http://www.ahcancal.org), or type [www.ahcancal.org/quality\\_improvement/quality\\_award](http://www.ahcancal.org/quality_improvement/quality_award) into your browser.

- Questions regarding the Intent to Apply, application process, membership status or technical requirements should be directed to [quality-award@ahca.org](mailto:quality-award@ahca.org).
- Questions regarding award Criteria, eligibility, or the review process should be sent to Tim Case at [tcase3362@charter.net](mailto:tcase3362@charter.net) or Courtney Krier at [ckrier@ahca.org](mailto:ckrier@ahca.org).

## **CHAPTER 2: CHANGES FOR 2012**

The Board of Overseers routinely reviews and makes policy and program changes in order to keep up with the changing landscape of the profession, meet the needs of its stakeholders, and continually strive for performance excellence. These changes are developed through the feedback received from two key stakeholders; Quality Award applicants and Examiners.

### ***Bronze Criteria Section P.2.C.2***

This change is applicable only to Assisted Living facilities. Previously section P.2.C.2 required Skilled Nursing (SNF) and Assisted Living (AL) applicants to report a clinical improvement effort. Assisted Living facilities, along with Developmentally Disabled and ICF-MR facilities now have the option of reporting either a resident-related improvement effort or a clinical improvement effort in section P.2.C.2.

### ***Silver Criteria***

The Silver Criteria has historically focused on the Core Values and Concepts of the Baldrige Criteria. The Silver Criteria have now shifted to reflect the Baldrige Criteria directly; in addition to the Organizational Profile, applicants will respond to the seven Baldrige categories and the 15 “basic item requirements” within these categories. In all categories, applicants will address the question posed in the basic item requirement by addressing the demands of the overall item requirement. This shift in the Criteria will allow participants to begin understanding and focusing on the Baldrige Criteria at the Silver level. It will also provide a clearer pathway for Silver recipients moving to the Gold Criteria.

### ***Silver Pre-Screening Protocol***

Beginning in 2012, all Silver applications will be subject to a pre-screening process prior to being forwarded to the Examiner teams for review. The pre-screening protocol will be focused on the Organizational Profile and Category 7 (results). To be successful at the pre-screen level, the application must demonstrate the interrelationship between the Organizational Profile; including stated Mission, Strategy and Key Success Factors, and Category 7; the organization’s results. The process-oriented sections (Categories 1-6) are used to demonstrate HOW the organization achieved the results that are tied to its goals. Therefore, without a clear and distinct correlation between the Organizational Profile and Category 7, the application, and its process sections, will not be considered by the Examiner teams. Applications that do not meet the pre-screen Criteria will receive a foundational feedback report focusing on the Organizational Profile and Category 7 and information regarding how the Baldrige Criteria can be successfully applied to enhance organizational success.

## **CHAPTER 3: GOLD APPLICATION POLICIES AND PROCEDURES**

### ***2012 Gold Application Deadlines***

*All deadlines listed are at 8 p.m. EST; applications submitted after 8 p.m. EST on the designated deadline will not be accepted*

Gold Intent to Apply Fee	January 12, 2012
Gold Application and Payment	March 1, 2012

### ***2012 Application Fees***

- Intent to Apply Fee (required for all applicants): \$75
- Bronze – Commitment to Quality: \$425
- Silver – Achievement in Quality: \$725
- Gold – Excellence in Quality: \$825

### ***2012 Application Policies***

- Applications at all levels will be accepted online beginning January 16, 2012. Application submission and payment instructions will be available on the Quality Award website.
- Applicants at all levels must submit the \$75 Intent to Apply fee before the designated deadline in order to submit an application. Applications submitted by facilities who have not submitted the Intent to Apply fee will not be accepted.
- Applications must be submitted by 8 p.m. EST on the designated deadline. Applications submitted at any point after the 8 p.m. EST deadline will not be accepted.
- Applicants who do not meet the 8 p.m. EST deadline due to non-AHCA technical issues will not have their applications accepted.
- Submit only one application – only the first version of your application will be accepted, duplicate or updated applications will not be accepted.
- Applicants who do not adhere to the technical requirements laid out on page 9 will be disqualified. Disqualified applications will not receive a feedback report or a refund of their application fee.
- Applications that are found to have plagiarized will be disqualified, and the facility will be ineligible to apply for two subsequent years. Applicants are cautioned against excessive use of language drawn verbatim from corporate documents.

## ***Eligibility to Apply***

The following eligibility requirements are mandatory. Facilities that are not eligible based on these requirements may apply and receive feedback, but will not be eligible to receive the award.

- The applying organization must be a member in good standing of AHCA/NCAL.
- Only long term care organizations may apply – skilled nursing facilities (SNFs), assisted living facilities (ALFs), intermediate care facilities for individuals with mental retardation (ICFs/MR), developmental disability (DD) residential services providers, or state veterans homes. Multi-facility corporations may not apply; however, their individual facilities (organizations) may apply.
- Applicants with multi-levels of care may elect to apply for the entire organization or may apply for a distinct part of the organization. The distinct part of the organization must be a separately licensed level of care serving a particular market segment in a clearly defined physical location. In addition, the organization must declare that any award received is for the distinct part rather than for the organization as a whole.
- Nursing facilities or intermediate care facilities for the mentally retarded (ICF/MR) that have been cited for a regulatory deficiency at the Immediate Jeopardy (IJ) or Substandard Quality of Care<sup>1</sup> level on any Medicare/Medicaid certification survey<sup>2</sup> in the past three calendar years (2009 - 2011) or prior to award notification in 2012, are not eligible to receive an award at any level.
- In addition to the basic survey requirement cited above, nursing facilities and ICF/MR applicants are not eligible to receive the Silver or Gold award if the average score for their three most recent standard surveys exceeds their state's average survey deficiency score for 2009-2011. Applicants should use the formula defined in Chapter 5 of the Silver and Gold application packets to calculate the average score for their three most recent standard surveys. Note that this requirement covers the three most recent standard surveys at the time of application deadline (March, 2012). These calculations include standard surveys only, and exclude life safety and complaint surveys.
- Applicants must participate in a Quality Award educational program in the year that they apply for the award. AHCA/NCAL provides free webinars on each award level in November and December, which are archived on the National Quality Award website for ongoing access. More information is available on the Quality Award website.

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<sup>1</sup> **Substandard Quality of Care F-Tags:** An organization is marked substandard QOC if it receives a deficiency in Quality of Care (F309 – F334), Quality of Life (F240 – F258), or Resident Behavior and Facility Practices (F221 – F226) at scope and severity level of F, H, I, J, K, or L. "G" is excluded because it is isolated in nature.

<sup>2</sup> This includes any regulatory inspection conducted according to federal "OBRA" regulations, including but not limited to standard (annual), complaint, federal surveys.

## Gold Technical Requirements

The following format guidelines are very important. Failure to follow them will result in your application being disqualified. Disqualified applications will not receive a feedback report or a refund of their application fee. Please refer to these requirements before submitting your application.

Element	Requirement	Notes
Page Limit	55 pages maximum	<u>Acronym List</u> : If application submitted uses a number of organization-specific acronyms, the applicant is encouraged to submit a list defining these acronyms. The list should be included as the last page of the application and does not count against the 55-page limit.
Page Size	Standard, 8 ½ -by-11 inch, white	
Page Orientation Text Pages Pages with graphs, figures and tables	Portrait Portrait or landscape	
Margins	1-inch minimum all around	Larger margins are acceptable
Page Numbering	Number pages 1 – 55 in sequence	
Responses to Criteria	Criteria Labeling  Prose Style Writing	Applicants must complete <b>all</b> sections of the application <u>and</u> must label responses sequentially to correspond to <b>all</b> section and subsection numbers and letters of the Criteria. Applicants should also use section headers throughout the application. Each Criteria must be addressed individually. An example of the correct formatting is included on the following page.  Applications should be written in prose style using complete sentences.
Font and Type Size Running text Text within tables Text within graphs and charts	Times New Roman, 12pt min. Times New Roman, 10pt min. Any font, legible text size	Applicants are encouraged to use charts, tables and graphs to present evidence and results. Charts, tables and graphs must be properly labeled and directly associated with the Criteria. Applicants should avoid using tables in lieu of prose responses unless required or clearly appropriate.

## CHAPTER 4: STAFF TURNOVER

### *Evaluating Staff Turnover and Clinical Results*

The objective of this section is to demonstrate the organization's capability to access historical data necessary to document performance improvement. Silver and Gold applicants should also address staff turnover as it relates to the specific Criteria.

### *Calculating Staff Turnover Rates*

The employee turnover rate should be calculated by dividing the number of employee terminations (regardless of cause) during the year by the average number of positions available during the year. This calculation is done without regard to whether the employee is full-time or part-time. The average number of positions available should be determined by counting the number of active employees on the payroll at the end of each quarter, and then computing the average for the four quarters. This method accounts for variation in the number of part-time and full-time employees (for example, some organizations have more students working during the summer). Applicants must count all terminations for a full 12-month period to compute an annual turnover rate.

Once complete, please enter your turnover rates for 2009-2011 in the *Survey and Turnover* section of your application.

	<b>Number of Active Employees on Payroll 2009</b>	<b>Number of Active Employees on Payroll 2010</b>	<b>Number of Active Employees on Payroll 2011</b>
Quarter 1			
Quarter 2			
Quarter 3			
Quarter 4			
Average of Quarters 1-4			

<b>Number of Terminations in 2009</b>	<b>Number of Terminations in 2010</b>	<b>Number of Terminations in 2011</b>

#### **Staff Turnover Rate Calculation:**

*Number of Terminations per Year / Average Number of Active Employees per Year*

**2009:** \_\_\_\_\_

**2010:** \_\_\_\_\_

**2011:** \_\_\_\_\_

## CHAPTER 5: CALCULATING SURVEY RESULTS

### *Nursing Facility Scope and Severity Comparative Data by State<sup>3</sup>*

For your three most recent standard surveys (excluding life safety and complaint), please calculate your organization's score based on the following table. Your three most recent surveys at the time of application deadline (March, 2012) may cover a 2-4 year time period, depending on the time between surveys. Once complete, please enter your scores in the *Survey and Turnover* section of your application.

1 point for each level A deficiency  
 2 points for each level B deficiency  
 3 points for each level C deficiency  
 4 points for each level D deficiency  
 5 points for each level E deficiency  
 6 points for each level F deficiency  
 7 points for each level G deficiency  
 8 points for each level H deficiency  
 9 points for each level I deficiency

Survey	Date of Survey	Organization Scores:	State Average Score <sup>4</sup> :
Most recent survey results			
First prior survey results			
Second prior survey results			
Three Survey Average Score			

***\*\*Applicants, please be advised that the Nursing Facility Three-Year (2009-2011) State Average Deficiency Scores chart will be available on the Quality Award website in October, 2011.***

***To access the website, visit [www.ahcancal.org](http://www.ahcancal.org), or type [www.ahcancal.org/quality\\_improvement/quality\\_award](http://www.ahcancal.org/quality_improvement/quality_award) into your browser.***

<sup>3</sup> Organizations with an average score exceeding the average score of their state, or organizations that have received an Immediate Jeopardy or Substandard Quality of Care level on any survey within the past three calendar years, may apply for but will not be eligible to receive a Silver or Gold award.

<sup>4</sup> The three year state survey average may not correspond directly with the dates of your three surveys. Even so, the program considers the data comparable for the purposes of determining eligibility for the National Quality Award.

### ***ICF/MR Conditions of Participation (COP) Deficiency Data by State<sup>5</sup>***

For your three most recent standard surveys, please calculate your average organization deficiency score. Once complete, please enter your scores in the *Survey and Turnover* section of your application.

<b>Survey</b>	<b>Date of Survey</b>	<b>Organization Scores:</b>	<b>State Average Score<sup>6</sup>:</b>
Most recent survey results			
First prior survey results			
Second prior survey results			
Three Survey Average Score			

***\*\*Applicants, please be advised that the IFC/MR Three-Year (2009-2011) State Average Deficiency Scores chart will be available on the Quality Award website in October, 2011.***

***To access the website, visit [www.ahcancal.org](http://www.ahcancal.org), or type [www.ahcancal.org/quality\\_improvement/quality\\_award](http://www.ahcancal.org/quality_improvement/quality_award) into your browser.***

<sup>5</sup> Organizations with an average score exceeding the average score of their state, or organizations that have received an Immediate Jeopardy deficiency on any survey within the past three calendar years, may apply for but will not be eligible to receive a Silver or Gold award.

<sup>6</sup> The three year state survey average may not correspond directly with the dates of your three surveys. Even so, the program considers the data comparable for the purposes of determining eligibility for the National Quality Award.

## CHAPTER 6: APPLICATION SUBMISSION PROCESS

### *Submission*

This is an on-line application process. You will enter the information gathered on the following two pages into our on-line application form before uploading a Microsoft Word document with your responses to the Silver Criteria. A successful submission will generate a confirmation email. If you do not receive a confirmation email, your application has not been submitted successfully.

Gold applications will be accepted on-line beginning January 16, 2012, and must be posted electronically prior to 8 p.m. EST (7 p.m. CST, 6 p.m. MST, 5 p.m. PST) on March 1, 2012. Applicants are strongly advised to upload their application early - the website will experience high volume on the day of the deadline which may result in delays. **Applications that are not uploaded by 8 p.m. EST for any reason will not be accepted.**

Detailed application submission and payment instructions will be available on the applicant resources section of the Quality Award website beginning in January, 2012.

### *Technical Requirements*

The technical requirements are very important. Failure to follow them will result in your application being disqualified. Disqualified applications will not receive a feedback report or a refund of their application fee. Please refer to page 9 for a list of technical requirements.

### *Authorization*

Prior to submitting your application, you will be asked to agree with the following statements:

- > Submission of this document certifies that the attached application is an accurate and true reflection of the application of the AHCA/NCAL award Criteria for this organization (facility). The contact person identified above certifies that the content of this application is original to this organization and was not supplied by others, including the corporate office or parent company or external consultants (mission and related statements exempt). Furthermore, the contact person identified above understands that if this application is deemed by AHCA/NCAL not to meet these requirements, it will be disqualified and the application fee will be forfeited. Applications will be compared against other current and previous applications to screen for originality.
- > By submitting this application, I also understand that in the interest of improving the quality of care provided to all long term care residents nationwide, I may be called upon by AHCA/NCAL to share success stories, lessons learned, or practices identified and/or implemented that have led to improved quality. I also may be asked to serve as an Examiner, or as an informal mentor to other applicants. I understand that I am not obligated to serve in any of these capacities, but that in the spirit of the mission of the AHCA/NCAL National Quality Award program, I will assist to the best of my ability in advancing quality improvement in long term care.

## On-line Application Form

The on-line application process will open January 16, 2012. You will enter the information gathered on the following two pages into our on-line application form. Please print and complete this form prior to initiating the on-line application process.

### 1. CONTACT INFORMATION

**Important** — Please specify the name of your organization (facility) *exactly as you would like it to appear on your award*. If you are chosen as a recipient, the name you provide here will be used on your award and in all written publications; you will not be given the opportunity to make a change. **Please double check for spelling errors.**

Name of Organization (facility): _____			
Six-Digit Federal Medicare/Medicaid Provider Number <sup>7</sup> (if none, write N/A): _____			
Name of Administrator: _____	Email: _____		
Contact Person: _____	Email: _____		
Address: _____			
City: _____	State: _____	Zip: _____	Phone: _____

### 2. DEMOGRAPHICS

Is your organization independently owned <i>or</i> part of a regional or national company? (Please check only one)
<input type="checkbox"/> Independently Owned
<input type="checkbox"/> Regional/National (Name of Parent Company: _____)
Is your organization a Not-For-Profit or a For-Profit? (Please check only one)
<input type="checkbox"/> Not-for-Profit
<input type="checkbox"/> For-Profit

Put an "X" next to the <b>primary</b> service(s) your organization provides that will be the focus of your responses to the Criteria:	
<input type="checkbox"/> Nursing Facility	<input type="checkbox"/> Assisted Living
<input type="checkbox"/> Nursing Facility/Assisted Living	<input type="checkbox"/> Residential Care for MR/DD

Please specify the scope of your application. Does your application cover a distinct part of your organization, or the entire organization?
---

<sup>7</sup> Your six-digit federal provider number - often referred to as the "Medicare Number" - can be found on the top right corner of any recent CMS-Form-2567 (the statement of deficiencies). It can also be found on any recent OSCAR 3 & 4 Report.

I am applying for my entire organization

I am applying for a distinct part of my organization (*please indicate below*)

Nursing Facility                       Assisted Living

Nursing Facility/Assisted Living    Residential Care for MR/DD

Has your organization previously applied for a Gold award?      Yes  No

If yes, please list the year(s) in which you previously applied: \_\_\_\_\_

Please provide the year that your organization received its Silver Award: \_\_\_\_\_

Please provide the year that your organization received its Bronze Award: \_\_\_\_\_

**3. PUBLICITY RELEASE**

AHCA/NCAL publicizes names of award recipients in printed materials and at events. Do we have your permission to publicize your organization’s name, as indicated in item 1 above, if you are an award recipient?      Yes       No

**4. ELIGIBILITY - You must answer “Yes” to the following two questions to be eligible for an award.**

Is your facility a member in good standing of AHCA/NCAL?      Yes       No

Have you or your staff participated in an educational program focusing on the 2012 National Quality Award Program?      Yes       No

**5. SURVEY AND TURNOVER RESULTS**

Has your organization been cited for Substandard Quality of Care or Immediate Jeopardy level on any type of survey (see Chapter 3) in any of the last three calendar years or in 2012 prior to submission of this application?<sup>8</sup>      Yes  No

Please tabulate and report your regulatory survey results for the last three most recent standard surveys at the time of application deadline (March, 2012), per Chapter 5.

	Most Recent	1 <sup>st</sup> Prior	2 <sup>nd</sup> Prior	Facility Average	3 yr State Average
Results:					
Dates:					

Please report your organization’s staff turnover rate for the last three calendar years, using the formula in Chapter 4.

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
 2009                                      2010                                      2011

<sup>8</sup> Not applicable for ALFs, developmental disability (DD) residential services providers or other non-Medicare/Medicaid certified providers. For all others, you are still eligible to apply and receive a feedback report if you answer “Yes,” but you will NOT be eligible to receive a National Quality Award.

## CHAPTER 7: GOLD – EXCELLENCE IN QUALITY CRITERIA

### *Gold Criteria*

Applicants for the Gold – Excellence in Quality Award must address the **2011-2012 Health Care Criteria for Performance Excellence (HCCPE)** in its entirety. Assisted Living Facilities (ALF) and MRDD facilities can choose to address the **2011-2012 Criteria for Performance Excellence** (used by business and non-profit organizations) if they feel it is more applicable to their organization. All other applicants (i.e. SNF, ICF/MR, State Veterans Homes) must address the HCCPE. The page limit for Gold applications is 55 pages.

Criteria packets can be requested free of charge or downloaded from the Baldrige website. The contact information is as follows:

Baldrige National Quality Program

Telephone: 301-975-2036

Email: [baldrige@nist.gov](mailto:baldrige@nist.gov)

Web Site: [www.quality.nist.gov](http://www.quality.nist.gov)

Health Care Criteria: [www.nist.gov/baldrige/publications/hc\\_Criteria.cfm](http://www.nist.gov/baldrige/publications/hc_Criteria.cfm)

Business Criteria: [www.nist.gov/baldrige/publications/business\\_nonprofit\\_Criteria.cfm](http://www.nist.gov/baldrige/publications/business_nonprofit_Criteria.cfm)

### *Gold Examination Process*

The Gold Award is intended to recognize organizations with fully deployed, systematic approaches to quality that produce “best-in-class” results or significant improvement trends over time. For the purposes of these Criteria, *organization* means the single facility or center that is applying for the award, not a multi-facility organization.

**Judging Criteria:** The Board of Master Examiners will recommend a site visit if an applicant (a) demonstrates that the organization has effective, systematic approaches that are responsive to the multiple requirements of each of the categories and subcategories of the Baldrige Criteria; (b) explains how the approaches are well-deployed with no significant gaps; and (c) shows that many to most trends and/or current performance levels, evaluated against relevant comparisons and/or benchmarks whenever possible, will show areas of benchmark leadership, and very good to excellent relative performance in many key customer, market, process, and action plan requirements.

**Site Visit:** The purpose of a site visit is to verify the data, systems and processes described in the application. The site visit will be conducted by 2-3 Master Examiners. The costs associated with the site visit, including Examiner travel expenses, are incurred by the applicant.

Recipients of the AHCA/NCAL National Quality Award are encouraged to pursue either their Baldrige-based state quality award or the Baldrige Performance Excellence award as further evidence of their sustained success.

### **END OF GOLD - EXCELLENCE IN QUALITY INFORMATION & INSTRUCTIONS**