



AHCA/NCAL NATIONAL QUALITY AWARD PROGRAM

BOARD OF OVERSEERS

2010 ANNUAL REPORT

The Board of Overseers (Board) for the National Quality Award Program is responsible for program oversight, including developing policies and ensuring the integrity and vitality of the program.

During 2010, the Board grew to ten members and continued to function as a data-driven, quality organization. We improved the quality award program by developing objectives and improvement strategies based on an analysis of our 3rd year of measurements for our key success factors.

Tim Case, Program Administrator, and Courtney Krier, Program Manager, have continued their outstanding performance in carrying out and improving the many administrative functions related to the program.

Key Strategies and Changes

The key actions of the Board over the past year are:

- Elected a new member to the Board of Overseers who represents a long term care organization that has been on the forefront of Quality Improvement, increasing its size to 10 members.
- Implemented a new requirement for Quality Award applications mandating that they must attend an educational session related to the Quality Award program.
- Implemented a new policy that allows facilities to reapply for the Bronze level award if it has been more than five years and there has been a substantive change in ownership or administration. The goal of this policy is to give facilities that are not ready to apply for a Silver the option to start the journey again.
- Developed a new review protocol for Senior Examiners to ensure that teams are being effectively and appropriately managed, and to increase consistency in the review process.
- Organized a training session for Examiner team leaders to educate them on the new review protocol, feedback and scoring.
- Increased our Examiner roster by 50%, with additional participation from outside organizations and Examiners with Baldrige and State Quality Award programs.
- Planned and executed the largest Examiner review meeting to date, with over 120 Senior and Master Examiners participating.

- Continued the collection and analysis of applicant and examiner feedback via electronic surveys.
- Held a Board meeting in conjunction with a visit to a Gold level award recipient so that Board members could collectively see and hear about the impact of the quality award program on their journey to performance excellence.
- Implemented a “Feedback Challenge” process for the Silver and Gold application levels. The process gave Silver and Gold applicants a venue to present their challenges.
- Joined the Alliance for Performance Excellence, a non-profit network of national, state and local Baldrige-based award programs.

Key Results

Strategies are of little value if they do not produce results. The key results for 2010 are:

- As an indicator of senior leadership support, 12 of the 14 (86%) health care provider members of the Board of Governors represent facilities that have participated in the Quality Award program.
- The total number of applications for 2010 increased by 11% and was spread across all award levels.

	<u>2009</u>	<u>2010</u>	<u>% Chg</u>
Bronze			
Applications	664	701	6%
Awards	439	465	6%
% Awarded	66%	66%	
Silver			
Applications	215	271	26%
Awards	27	39	44%
% Awarded	13%	14%	
Gold			
Applications	19	26	37%
Awards	3	1	-66%
% Awarded	16%	4%	
TOTAL			
Applications	898	998	11%
Awards	469	505	8%
% Awarded	52%	51%	

- The applications came from 47 states and facilities in 46 states received awards. Wyoming had the highest percentage of

applicants per members with 33%, and Florida had the highest number of applicants with 100. Twenty states had more than 10% member participation and only four states had less than 2% member participation.

- 99% of the feedback reports for all applicants were distributed by the published deadline.
- 66% of the applicants responded to an electronic survey in April to assess the application process. 38% responded to a second survey sent in October to assess the examination and feedback and 55% of the award recipients responded to an additional survey sent in November to assess the recognition process. The following key outcomes are derived from these surveys. In the following table, “A/SA” represents agree and strongly agree. “D/SD” represents disagree and strongly disagree.

	A/SA	D/SD
Overall program satisfaction	95%	5%
Award program adds value	95%	5%
Award criteria clearly written	86%	14%
Satisfied with app process	90%	10%
Satisfied with feedback report	83%	17%

- Nearly 23% of the 123 volunteer Senior (Silver level) and Master (Gold level) Examiners come from non-provider groups such as Quality Improvement Organizations and consultants. The 2010 Senior Examiners worked in teams of four, reviewing 8-9 applications (18 pages each). Master Examiners worked in teams of 2-4 person teams reviewing 3-5 applications (55 pages each).
- Electronic surveys were sent to all 2010 Senior and Master Examiners. The survey asked whether the time they needed to commit to the review process met their expectations. 79% responded with strongly agree or agree and 21% with disagree or strongly disagree. 87 of the 93 examiners who responded said that they planned to serve as an Examiner in 2011.

Assessment and the Future

The most significant issue the Board is facing over the coming years is the sustainability of the program. In 2007, a change was made to the Bronze criteria that resulted in an increased success rate. This, coupled with the significant growth in the program, has resulted in over 1,200 Bronze recipients in the past 3 years. We believe that this increased number of Bronze recipients will result in an increased push for eligible facilities to apply for the Silver. Over the past four years, we

have experienced high levels of growth in Silver and Gold applications, causing increased workload for the volunteer Examiners. To compensate for this increased workload, large numbers of new Examiners have been recruited. The influx of new Examiners has led to issues of reliability and commitment and the quality of the review process. It has also added strain on our experienced Examiners whose responsibility it is to train and support new Examiners. This has led to concerns about the sustainability of our Examination process. The Board has chartered a team that includes some of our most experienced Examiners to take a hard look at this issue, and develop strategies to be implemented for the 2012 cycle.

Another key issue the BOO is looking at is the Silver criteria. The current Silver criteria is based on the Core Values and Concepts of the Baldrige criteria. For a number of years, it has been suggested that applicants would be more successful in responding to a modified Baldrige criteria (sometimes referred to as a “Baldrige light” criteria), and that their journey from Silver to Gold would be more successful.

In 2010, the BOO piloted the expansion of AHCA/NCAL National Quality Award program to include state affiliate members. The goal is for demonstrated involvement in promoting quality improvement among its members. Five State Affiliates agreed to participate in the pilot program: Florida, Minnesota, Michigan, New York and Tennessee. At the completion of the pilot, the BOO will assess the pilot to inform the next steps.

The BOO will be conducting a study in 2011 to assess why facilities do not reapply after not receiving an award. The results of the study will provide direction for strategies to track and improve applicant retention throughout the award program.

The BOO will continue to develop strategies to increase participation among under represented provider groups, such as Independent Owners and Assisted Living facilities.

John “Chick” Stepahin, Chair
January 1, 2011

2010 Board of Overseers: Barbara Baylis, Mary Bostwick, Bernie Dana, Bill Kubat, Douglas Olson, Dorothy Ray, Brad Shiverick, Chick Stepahin, LuMarie Polivka-West and Chris Boldt.