2009 AHCA/NCAL National Quality Award Program - Step II Overview - Session Two

John Stepahin
Tim Case
Step II Criteria

- 2.0 Organizational Profile
- 2.1 Visionary Leadership and Social Responsibility and Community Health
- 2.2 Focus on the Future
- 2.3 Resident-Focused Excellence
- 2.4 Management by Fact
- 2.5 Organizational and Personal Learning
- 2.6 Valuing Staff and Partners
- 2.7 Systems Perspective, Agility, & Managing for Innovation
- 2.8 Focus on Results and Creating Value
2.0 Organizational Profile

- This was formerly referred to as, and remains largely based on, the Step I criteria.
- Make sure you update any information you copy from a former Step I application.
- You are not bound by your previous Step I application.
- 2.0 establishes the foundation for the entire application.
2.1 Visionary Leadership & Social Responsibility and Community Health

How does your organization’s leadership system embody the core values and concepts of visionary leadership, and social and community health responsibility?
2.2 Focus on the Future

How does the organization plan for a future of sustainable performance excellence as a long term commitment to its stakeholders?
2.3 Resident-Focused Excellence

How does the organization focus on providing value and satisfaction to the resident in delivering services?
2.4 Management by Fact

How does the organization select, manage, analyze, and use data and information to assess and improve performance?
2.5 Workforce Engagement and Organizational / Personal Learning

How does the organization embed in its operations both organizational and personal learning to gain marketplace sustainability and workforce motivation to excel?
2.6 Valuing Staff and Partners

How does the organization build internal and external partnerships to create a basis for mutual investment and respect, and to better accomplish overall goals?
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How does your organization systematically:

(provide examples)

a. Creates flexible, high performing work practices tailored to the staff.
2.6 Valuing Staff and Partners

How does the organization build internal and external partnerships to create a basis for mutual investment and respect, and to better accomplish overall goals?

How does your organization systematically: (provide examples)

a. Creates flexible, high performing work practices tailored to the staff.

b. Recognizes efforts of staff, both individually and as teams, beyond the normal compensation system.
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d. Creates a supportive environment for a diverse workforce.
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e. Improves flexibility, responsiveness and knowledge sharing between departments and other segments of the organization.
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c. Creates an environment that encourages appropriate risk taking and innovation.

d. Creates a supportive environment for a diverse workforce.

e. Improves flexibility, responsiveness and knowledge sharing between departments and other segments of the organization.

f. Develops and sustains partnerships with entities outside the organization.
How does the organization effectively interconnect the individual components of its performance management system to view the organization as a whole and to ensure consistency of plans, processes, measures, and actions in order to maximize agility, encourage innovation, and achieve performance excellence?
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How does the organization systematically:

a. Ensures alignment of processes, measures, and action plans across departments and throughout various organizational levels to improve performance and customer satisfaction.
2.7 Systems Perspective, Agility, & Managing for Innovation

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How does the organization systematically:

a. Ensures alignment of processes, measures, and action plans across departments and throughout various organizational levels to improve performance and customer satisfaction.

b. Works to reduce the cycle time for process changes and responding to changes in customer expectations.
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How does the organization systematically:

a. Ensures alignment of processes, measures, and action plans across departments and throughout various organizational levels to improve performance and customer satisfaction.

b. Works to reduce the cycle time for process changes and responding to changes in customer expectations.

c. Encourages meaningful change to create new value for stakeholders by improving the organization’s services, programs, processes, and operation.
2.8 Focus on Results and Creating Value

How does the organization use performance measures to focus on key results that create value for its key stakeholders?
## Criteria Scoring Points and Weighted Percentages

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Points</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.0</td>
<td>25</td>
<td>2.5%</td>
</tr>
<tr>
<td>2.1</td>
<td>180</td>
<td>18%</td>
</tr>
<tr>
<td>2.2</td>
<td>50</td>
<td>5%</td>
</tr>
<tr>
<td>2.3</td>
<td>110</td>
<td>11%</td>
</tr>
<tr>
<td>2.4</td>
<td>90</td>
<td>9%</td>
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<td>2.5</td>
<td>75</td>
<td>7.5%</td>
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<td>2.6</td>
<td>75</td>
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<tr>
<td>2.7</td>
<td>175</td>
<td>17.5%</td>
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<tr>
<td>2.8</td>
<td>220</td>
<td>22%</td>
</tr>
</tbody>
</table>

Total: 1000 points (100%)
2.8 Focus on Results and Creating Value

How does the organization use performance measures to focus on key results that create value for its key stakeholders?

Effective and complete reporting of results include:

a. Focus on the most important organizational performance measures. At a minimum, applicants should consider:
   i. Government survey deficiency results over time.
   ii. Results of employee, resident, and family satisfaction survey.
   iii. Employee turnover rates or retention rates.
   iv. At least three key clinical outcome results.
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b. Examples of how you use these key measures to drive performance improvement.
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b. Examples of how you use these key measures to drive performance improvement.

c. Report the results using the Guidelines for Responding to Result Items.
Guidelines for Responding to the Results Items

1. Focus on the most critical organizational performance results.
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2. Note the meaning of four key requirements for effective reporting of results data:
   1. Performance
   2. Trends
   3. Comparisons
   4. Breadth and importance of results
Guidelines for Responding to the Results Items

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3. Include trend data covering actual periods for tracking trends.
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5. Integrate results into the body of the text and interpret where appropriate.
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4. Use a compact format – graphs and tables.
5. Integrate results into the body of the text and interpret where appropriate.
6. Interpret the graphed results.
### Graphs and Tables

![Customer Service Trends]

<table>
<thead>
<tr>
<th></th>
<th>JAN - MAR 2007</th>
<th>JAN - MAR 2008</th>
<th>DIFFERENCES</th>
</tr>
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<tbody>
<tr>
<td><strong>OVERALL</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Score</td>
<td>56.97</td>
<td>56.49</td>
<td></td>
</tr>
<tr>
<td>Median</td>
<td>133</td>
<td>125</td>
<td></td>
</tr>
<tr>
<td>10th percentile</td>
<td>14</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>90th percentile</td>
<td>113</td>
<td>108</td>
<td></td>
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<tr>
<td><strong>COMPLAINTS</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Escape</td>
<td>90.87</td>
<td>90.64</td>
<td></td>
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<tr>
<td>Severity</td>
<td>90.87</td>
<td>90.64</td>
<td></td>
</tr>
<tr>
<td>Billing</td>
<td>90.61</td>
<td>90.41</td>
<td></td>
</tr>
<tr>
<td>Communication</td>
<td>91.44</td>
<td>92.06</td>
<td>-0.62</td>
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<tr>
<td>Education</td>
<td>93.47</td>
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<td>Environment</td>
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<tr>
<td>General Care</td>
<td>90.72</td>
<td>92.43</td>
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<tr>
<td><strong>GENERAL</strong></td>
<td></td>
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<tr>
<td>Complaints</td>
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<td>91.03</td>
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<tr>
<td>Severity</td>
<td>91.03</td>
<td>90.54</td>
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<tr>
<td>Billing</td>
<td>92.26</td>
<td>90.24</td>
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<tr>
<td><strong>LEADS</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Score</td>
<td>56.97</td>
<td>56.49</td>
<td></td>
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<td>113</td>
<td>108</td>
<td></td>
</tr>
</tbody>
</table>

*(Data for January-March 2007 and 2008)*
Graphs and Tables

“Quality of Dining Experience”

<table>
<thead>
<tr>
<th></th>
<th>October 2006</th>
<th>October 2007</th>
<th>October 2008</th>
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</thead>
<tbody>
<tr>
<td>Incidence</td>
<td>67%</td>
<td>71%</td>
<td>82%</td>
</tr>
</tbody>
</table>
Graphs and Tables

Nursing Staff Data

Percent of Falls

2003
2004
2005
2006
2007

NAR without turnover
NAR stability
NARs without Absenteeism
RN / LPN Turnover
RN / LPN Stability
RN / LPN Withou Absenteeism

Nursing Staff Data

Percent of Falls

0
10
20
30
40
50
60
70
80
90
100

Jan. 06
Feb. 06
Mar. 06
Apr. 06
May 06
June 06
July 06
Aug. 06
Sep. 06
Oct. 06
Nov. 06
Dec. 06
Jan. 07

Percent of Falls

0
5
10
15
20

2003
2004
2005
2006
2007

## Table 2.8a Year to Date Census

<table>
<thead>
<tr>
<th>Year</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
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</thead>
<tbody>
<tr>
<td>YTD Census (%)</td>
<td>68</td>
<td>60</td>
<td>72</td>
<td>89</td>
<td>89</td>
<td>86</td>
</tr>
</tbody>
</table>

## Table 2.8b Year to Date Medicare Census

<table>
<thead>
<tr>
<th>Year</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>YTD Census (%)</td>
<td>6</td>
<td>8</td>
<td>10</td>
<td>13</td>
<td>13</td>
<td>10</td>
</tr>
</tbody>
</table>
Graphs and Tables

Figure 3 – Employee Turnover

Employee Turnover

Average for Calendar Year
Timeline to Completion

**January 15**
- Update Step I Criteria
- Outline of Responses to Step II Criteria
  - Page Budget

**January 30**
- Detailed Outline for Responses to Core Values
  - Writing Assignments
  - Paragraph Budgets
Timeline to Completion

**February 13**
- Finalize Step I Criteria
- First Draft of 8 Step II Criteria
  - ✔️ Within 20% of Page Budget

**February 27**
- Good Draft of 8 Step II Criteria
- Check Request (if necessary)
- Gather Turnover and Survey Data for Application
Timeline to Completion

- **March 13**
  - Final Draft of 8 Step II Criteria

- **March 16th to March 31st**
  - Wrap-up and finalize
  - Submit early if possible

- **March 31st – Absolutely no later!!**
  - Confirmation email will contain instructions for payment (credit card payment preferred)
Technical Requirements

- Due electronically March 31, 2009
- 18-page limit
- 1” Margins
- 12-pt Times New Roman font
- $475 application fee
Resources

AHCA/NCAL National Quality Award program requirements and application information (www.ahcancal.org).

Baldrige National Quality Award Program
To order a free copy of the Baldrige Health Care Criteria for Performance Excellence:
Tel: 301-975-2036
Website: www.baldrige.nist.gov.
More Resources

Books available at www.ahcapublications.org:

- Conducting Satisfaction-Based Customer Surveys: A Guidebook for Long Term Care Providers by Vivian Tellis-Nayak, Ph.D.
- Continuous Quality Improvement: Using the Regulatory Framework by Barbara Baylis
- Developing a Quality Management System: The Foundation for Performance Excellence in Long Term Care by Bernie Dana
- Quality Management Integration in Long-Term Care: Guidelines for Excellence by Maryjane Bradley and Nancy Thompson
The first step towards getting somewhere is to decide that you are not going to stay where you are.

*J. Pierpont Morgan*