NHA NEBRASKA HOSPITALS

Request for Applications

2024 Quest for Excellence Awards

Nebraska's Health Care Providers: Leaders in Quality

As a means of recognizing outstanding work in hospital quality and performance improvement in the State of Nebraska, the Nebraska Hospital Association, Nebraska QIO, COPIC, the Nebraska Health & Human Services' Office of Rural Health and the Nebraska Association for Healthcare Quality, Risk and Safety have come together to solicit applications for the *Quest for Excellence* Award. This award is presented during the Nebraska Hospital Association Annual Convention, which is held in the fall.

The *Quest for Excellence* Award is presented by these organizations to two Nebraska hospitals and one Rural Health Clinic each year to recognize their achievements in improving health care delivery in the areas of quality, performance, and patient safety. Created in 2004 to recognize hospitals' individual and independent efforts, the award is designed to showcase **innovative, exemplary, and reproducible models** of patient care to the health care community.

The need to demonstrate quality improvement is here... so is this incredible opportunity. Why not take the challenge? Regardless of your organization's past success, when you submit your application for the *Quest for Excellence* Award, you take another step toward quality and performance excellence.

Statement of Purpose

The *Quest for Excellence* Award recognizes outstanding efforts to improve hospital and clinic quality and patient care for the people of the State of Nebraska. The award represents the highest level of professional acknowledgement in Nebraska's hospital and clinic quality improvement arena. The goal of the award is to:

- Recognize outcomes in quality performance practices, capabilities, and results.
- Facilitate communication and sharing of best practices information among hospitals and clinics in Nebraska.
- Stimulate innovation, knowledge and learning in the creation of strategies, systems, and methods of achieving quality excellence in health care.

Application Content

To participate in the *Quest for Excellence* Award, an organization must submit an application that addresses the criteria listed below. Entries will be judged by a panel from the five sponsoring organizations. Eligible hospitals and clinics must be able to demonstrate measurable and quantifiable quality improvement. All project descriptions must be double-spaced in 12-point type with 1-inch margins. The document length is limited to 10 pages (excluding cover page). Additional supporting documentation of up to 5 pages may be attached. Only one entry per facility is allowed. Include a cover sheet with the following information:

- Name of organization
- Organization address
- Contact name and e-mail address
- Telephone number
- Submission date
- Topic

Submit your entry via email and postal mail.

1) Email (Word document, not PDF)

An electronic version of your application <u>and poster</u> (via PowerPoint Template), must be emailed no later than August 1 to <u>mwoeppel@nebraskahospitals.org</u>.

2) Postal mail eight (8) copies

Return via mail postmarked no later than August 1, 2024, to: Margaret Woeppel, Vice President, Workforce, Quality & Data Nebraska Hospital Association 3255 Salt Creek Circle, Ste. 100 Lincoln, NE 68504-4778

Please include the following categories as you describe your quality improvement activities – include all five categories in your application paper:

Criteria 1 – Leadership/Planning (10 points)

Describe how hospital/clinic leadership guides and sustains your organization by establishing organizational vision, values, and performance expectations, with a focus on patients, quality improvement, learning, and encouraging

innovation. Describe how this project is consistent with your strategic plan.

Criteria 2 – Process of Identifying Need (15 points)

Describe the need in your facility for this initiative; describe why you selected this project and what methods you used to identify the need, e.g., patient/staff/physician satisfaction surveys. What steps did you take to meet your patients' expectations and requirements? How will this initiative improve the quality of care provided to your patients and your community? Did you integrate your patient/family engagement team? Describe your facility specific issues, as well as providing any applicable national benchmarks or standards. Was data stratified to assess social drivers and vulnerable populations based on REAL data elements or other metrics that might affect patient outcomes?

Criteria 3 – Process Improvement Methods (30 points)

Describe who was involved in the improvement effort, methodology used (PDSA, LEAN, Six Sigma, etc.), how the data was collected, and the process that was used to achieve the results. Describe how you used the data and information to guide your process improvement efforts. This may include clinical, financial, and other data such as satisfaction surveys.

Criteria 4 - Results (30 points)

Describe the results including the patient outcomes, process changes and service delivery results, the financial and market performance improvements, leadership, or community improvements that occurred because of this project. Calculate the Return on Investment (ROI) for this project. **Projects that demonstrate creativity and innovation will be given greater consideration.**

Criteria 5 – Lessons Learned, Replicability, Sustainability (15 points)

Describe the lessons learned from this project; describe how you applied what was learned from this project to other areas in your facility; describe how other facilities could replicate what you did; describe your plans to sustain your gain.

Quest for Excellence Grading Rubric

Criteria	Notes	Points
Criteria 1: Leadership / Planning: Describe how		10 total points
hospital/clinic leadership guides and sustains your		
organization.		
Mission, Vision, Values		3 points
Connect to Strategic Plan		4 points
Support of C-Suite		3 points
Criteria 2: Process of Identifying Need: Describe the		15 total points
need in your facility for this initiative.		
 State why you select the project including internal baseline data 		5 points
 State how the project will improve patient care 		5 points
Describe how patient and family were		3 points
engaged in project decision-making		
 Describe how data was stratified to assess 		2 points
equitable care for the population served		
Criteria 3: Process Improvement Methods: Describe		30 total points
the improvement project and methodology.		
Discuss methodology used for your project		6 points
(PDSA, DMAIC, Lean)		
State how data was collected		5 points
• Discuss how data was used to drive your		6 points
project include state, regional and / or		
national benchmarks		
• Show data in graphical format to note		5 points
improvement – compare baseline to current		
Note how data was used to drive initiatives		8 points
Criteria 4: Results: Describe project results both		30 total points
intended and unintended.		
• Share both process and outcome measure		10 points
results in an effective manner		
• Discuss financial implications / return on		8 points
investment of the project		
Note market performance improvement,		8 points
leadership or community improvements		
Recognize the creativity and innovation in		4 points
the project		
Criteria 5: Describe lessons learned, replicability,		15 total points
sustainability.		
 Describe lessons learned from this project – 		6 points
note barriers and how those were		
addressed		
• Describe how other facilities could replicate this project		4 points
Note how the project and new processes		5 points
will be hard-wired and improvement		
sustained		
TOTAL Points		/100 pts

Poster

In addition to your application, please complete the poster template within the attached PowerPoint slide (template example below). The slide will be used to create a poster that will be showcased at the NHA Quality Conference. For submission, the PowerPoint should be included in the email but not included in the mailed submission.

INSERT Hospital, Unit (Type), City, State		Insert logo image	
Background	Plan	Results	
hospital, type of hospital, geographic location ta Data used to identify gaps to create aim Other information to include	 Insert what you steps you planned to take/took to accomplish aim 	 Insert quantitative or qualitative data (e.g., champions and teams engaged, choice of new products or tools, improvements in infection rate, utilization ratio) 	
	INSERT IMAGE OF TEAM, DATA DISPLAY		
	OF THE UNIT, ETC.	INSERT IMAGES OF DATA, TOOL CREATED,	
INSERT IMAGE OF BASELINE DATA OR		ETC.	
TOOL, IF APPLICABLE		Next Steps	
		 Insert next steps identified, plans for sustainability, etc. 	
Aims	Measure	····//·	
Insert aim from action plan	 Identify what measures you used (e.g., infection rate, utilization ratio, staff feedback, audits conducted) 	Team Insert Team Members (titles/designations)	

Recognition

Recipients of the *Quest for Excellence* Award will be notified prior to the NHA Annual Convention, which will be held October 16-18, 2024. Award recipients will receive:

- A \$1,000 award
- An engraved plaque presented at the NHA Convention Awards Banquet
- Public recognition in the form of a media release
- A feature article in NHA's publications

Three awards will be given. One award will be provided to a critical access hospital located in the State of Nebraska, one award will be provided to a non-critical access hospital located in the State of Nebraska and one award will be provided to a rural health clinic located in the State of Nebraska. We look forward to your participation in the *Quest for Excellence* Award application process. Nebraska's hospitals and clinics provide high quality care daily. Take a moment to share your quality initiatives with others by <u>submitting your application via email and postal mail no later than August 1, 2024</u>. Applications need to be received via mail to NHA by the due date. Late applications will not be considered.