



The American Hospital Association Quest for Quality Prize® 2022 Hospital Application

The American Hospital Association Quest for Quality Prize® is presented annually to recognize health care leadership and innovation in improving quality and advancing health in communities. Prize honors are: one winner; up to two finalists; and up to four Citation of Merit honorees; no more than five honors will be awarded. The goals of this prize are to:

- Raise awareness of the value of a hospital-wide/system-wide commitment to advancing health in America by providing access to exceptional quality, safe, and patient- and family-centered and affordable care that promotes individual and community well-being and adds value to lives
- Showcase successful efforts to develop and promote new and innovative models of care, services and collaboration to provide seamless care
- Inspire hospitals and systems to lead and partner with other community organizations to improve health status and address health care disparities
- Recognize hospital and system leadership to improve efficiency and effectiveness of care

The 2022 prize will be presented at the 2022 AHA Leadership Summit (July 17 – 19) in San Diego.

Eligibility

All **hospitals** and health systems in the United States are eligible to apply for the award. Please note that the hospital application is different from the health system application; be sure you are using the appropriate application. Please be aware that a hospital that is part of a system may apply separately using the hospital application even if the system as a whole is applying using the system application. However, if the system is selected for a site visit, the hospital would not be eligible for a separate site visit and would be considered only as part of the system.

Application Materials

Each application has four parts:

1. Cover page signed by the CEO
2. Completed demographics section
3. Responses to specific questions on your systems to improve and ensure overall quality
4. Up to seven pages for attachments and appendices

If you have questions about the prize, please contact the AHA Office of the Secretary, 312-422-2749 or e-mail questforquality@aha.org.

No supplemental materials in binders or special folders or video/audio materials will be accepted.

Requirements

Organizations selected for site visits will be asked to provide additional follow-up information for the AHA Quest for Quality Prize Committee. They also will be expected to identify a cross-section of key leaders willing to work with AHA and the selection committee to teach others about their strategies to improve the quality of care. Honorees will be expected to participate as requested in outreach and education, including public speaking engagements at various forums and working with editors and writers of AHA and its subsidiaries and other publications as requested by the American Hospital Association.

All applications become the property of the American Hospital Association and may be used in AHA's activities to provide "best practices" and examples of different approaches to achieving the prize's goals. In these cases, AHA will contact the hospital to explore its interest in participating in an interview or case study. All materials submitted for site visits will be kept confidential.

Evaluation and Judging

The applications are reviewed by members of the AHA Quest for Quality Committee. The Committee selects organizations to be site visited, participates in site visits, and decides which honors are to be presented. During the site visits, the Committee members will be particularly interested in seeing evidence of trends in improvement and impact on patients and the community. The site visitors will be interested in hearing what steps have been taken to ensure that process changes have led to the desired improvements in outcomes and to sustain performance improvements. The Committee is looking for an organization-wide commitment to and participation in improved quality and safety, innovations to improve care, addressing disparities, and working with other community organizations and agencies to improve health status. The Committee also will want an understanding of the replicability of successful practices and policies.

The American Hospital Association Quest for Quality Prize® is administered by the Health Research & Educational Trust. AHA is grateful for the extensive volunteer contributions made by Committee members.

Submission of Applications

Completed applications must be **submitted by midnight Central Time, Friday, Oct. 15, 2021**. We strongly encourage you to convert attachments/appendices into a single PDF to ensure that all materials are seen by the Committee and to minimize the chance of possible distortion in graphs, charts and layout. The file name should contain your organization's name.



The American Hospital Association Quest for Quality Prize® 2022 Application for Hospitals

Hospital Name: _____

Application Contact: _____

Title of Contact: _____

Street Address: _____

City, State, Zip Code: _____

E-mail Address: _____

Phone Number: _____

The following should be read and signed by the hospital CEO.

The AHA Quest for Quality Prize seeks to increase understanding of the value of organizational focus and commitment to achieving quality health care and advancing health in communities. Hospitals and systems are urged to consider participation in the awards process both as a recognition and an assessment of their efforts to provide exceptional quality, safe, and patient- and family-centered and affordable care that promotes individual and community well-being and adds value to lives. All applications for the AHA Quest for Quality Prize® become the property of the American Hospital Association. Descriptions of the honored programs will be published, and the Association may use information from all applications in articles aimed at increasing awareness and ability of organizations to implement a system-wide commitment to quality and patient safety improvement. Program contacts may be asked to provide additional information. I agree, if our hospital is being considered for recognition, to host a site visit as part of the final selection process. I also understand that the honorees will be expected to participate in outreach and sharing of organizational improvement efforts and knowledge.

I certify that the information in this application is accurate.

Signature _____ Date _____

Title _____

Guidelines/Guidance for Completing this Application:

- A team approach to completing this application is recommended and may include patients/family members. In general, applications that are written by staff with primary responsibility for quality improvement (rather than public relations, marketing or grant writers) in close collaboration with senior leadership are more likely to include the type of information the committee is seeking.
- If a system or mechanism that you have already described as a response to one question is also relevant to another answer, please feel free to refer to the original description and explanation rather than repeat it.
- Part II of the application seeks a better understanding of how your hospital is approaching and progressing on providing access to exceptional quality, safe, and patient- and family-centered and affordable care that promotes individual and community well-being and adds value to lives. To the extent possible, please emphasize integration of this commitment and systemic approaches across and throughout the hospital.
- Please note that the word limits in Part II are maximums, not suggestions; the prize committee appreciates concise and direct responses; bulleted responses rather than narrative text is allowed, but please be sure that a context for understanding the bullets is provided. Concrete examples with pertinent details to substantiate broad statements provide greater understandability and credibility for your application. Charts and tables should be included in attachments or appendixes. Be sure to relate data to specific care improvement efforts and processes. Data on progress should be as recent as possible and include relevant benchmarking data. Please do not exceed more than seven (7) pages of attachments/appendixes/etc.
- The committee also will be examining publicly available indicators such as hospital performance on the [Care Compare website](#) and reliable sources of comparative data.

Part I: ORGANIZATIONAL Demographic Information

1a) Number of acute care beds currently set up and staffed for use in your hospital (please check one):

_____ Fewer than 100 beds

_____ 100 to 299 beds

_____ 300 to 499 beds

_____ 500 beds and over

1b) Other types of facilities owned and operated by the hospital (ambulatory clinics, physician offices, surgicenters, long-term care facilities, etc.):

1c) Annual number of outpatient visits in these facilities: _____

1d) Part of a System _____ Independent _____

2) Type of hospital (please check one):

_____ State or local government

_____ Academic medical center

_____ Non-government, not-for-profit

_____ Investor-owned, for-profit

_____ Military

_____ Veterans' Affairs

_____ US Public Health Service

_____ Other: _____

3) Financial information on your hospital:

Net operating margin (percent) _____ %

Bond rating _____

Days cash on hand _____

4a) If you have PHYSICIAN residency training programs approved by the Accreditation Council for Graduate Medical Education, how many FTE residents do you employ in each type of residency

4b) Please list other types of training programs in your hospital (i.e., nursing, pharmacy, social work, physical therapy, etc.):

5) Location of your hospital (please check one):

_____ Urban

_____ Suburban

_____ Rural

9) What is your annual rate of staff turnover? _____

SERVICE Demographic Information

1) Scope of service area (check one):

- _____ Portion of community
- _____ Entire community
- _____ Community and surrounding area
- _____ Multiple communities

2a) Patient language demographics:

- _____ % English as primary language
- _____ % Non-native English speaker
- _____ % Little or no English (requiring interpreter)

2b) Languages most frequently spoken by non-native English speakers (no more than top 5):

3) Patient insurance demographics:

- _____ % Private insurance
- _____ % Medicare
- _____ % Medicaid or other public assistance only

_____ % Medicare/Medicaid (other public assistance) dual eligible

_____ % No coverage

Part II: Quest for Quality Domains

The Quest for Quality Prize honors hospitals and systems that are committed to and are making demonstrable progress toward making AHA's vision of a society of healthy communities where all individuals reach their highest potential for health a reality. As you answer the following sections, consider how some or all of the following are integrated into your work:

- A hospital-wide commitment to providing access to exceptional quality, safe, and patient- and family-centered and affordable care that promotes individual and community well-being and adds value to lives
- Development and promotion of new and innovative models of care, services and collaboration to provide seamless care
- Leading and partnering with other community organizations to improve health status and address health care disparities
- Hospital leadership that improves efficiency and effectiveness of care

A. LEADERSHIP (1,200 words maximum)

Please describe:

1. How the governing board participates in establishing and supporting quality goals to ensure access to exceptional quality, safe, and patient- and family-centered and affordable care.
2. How the hospital leadership and governing board hold themselves accountable to the community for the hospital's initiatives to improve health status, ensure seamless coordination of care, eliminate health disparities, and ensure access to effective and efficient care.
3. How your senior leadership ensures that the desired culture and leadership style is diffused throughout your organization and how it engages the employees, medical staff, patients and families in the planning processes, goal setting, progress evaluation and change implementation.
4. How senior leaders and the governing board assess culture, leadership style and employee, medical staff, patient and family engagement and how often these issues are reviewed and discussed.
5. How leadership prioritizes quality and safety initiatives, sets goals and monitors progress toward safer, accessible health care.
6. Efforts and progress made toward increasing diversity among hospital leadership, governance, medical staff, employees and volunteers to reflect the ethnic/racial makeup of the community.

B. QUALITY AND SAFETY TO IMPROVE VALUE (1,400 words maximum)

Please describe and attach data to show results:

1. A successful quality improvement initiative, including how your organization identified the practice/process change and, if applicable, ensured its systematic application throughout the hospital. Please provide data that supports this success.
2. How your organization empowers physicians, front-line caregivers and other staff to actively participate in and lead process change and quality improvement efforts, and discuss how this expectation is reinforced, evaluated and recognized.
3. How the hospital addresses near misses and adverse events, including how they are reported and shared throughout the hospital, and how decisions regarding corrective actions are made and disseminated.
4. Hospital policies and procedures on how patients and families are informed of errors, the processes in place to keep them informed as an investigation progresses, and how this is monitored.
5. How the hospital promotes a just culture for patients and families as well as staff.
6. How your hospital uses data and analytics to support coordination of care across all settings.
7. How clinical guidelines and care protocols are used to ensure that the right care is delivered at the right time.

C. PARTNERING WITH PATIENTS AND FAMILIES (1,000 words maximum)

Please describe:

1. How patients and families are involved in designing the total experience of care, including efforts to meet special physical, psychological, developmental, cultural and spiritual needs.
2. How patient and family advisors are involved and supported as members of patient and family advisory councils and members of safety and quality improvement teams.

3. How your hospital enhances patient access to useful information, including a patient's own medical record as well as information about patient educational resources, while protecting confidentiality.
4. How your hospital involves patients and families in response to a near miss or adverse event.
5. How your hospital gathers patient feedback and how that information is used. If possible, provide a specific example of an instance when patient feedback led to a process change.
6. How your organization partners with patients, families, and community members to help them improve and maintain their health.

D. WORKFORCE (1,000 words maximum)

Please describe:

1. How employees and clinical staff are trained in and promote access to exceptional quality, safe, and patient- and family-centered and affordable care that promotes individual and community well-being and adds value to lives, and how your hospital evaluates the effectiveness of the training.
2. How your organization assesses physician and employee satisfaction and engagement, how often that assessment occurs, and examples of how that information is used.
3. How the methods and frequency of how your hospital assesses employee and medical staff perceptions of the quality and safety culture within your organization, and how personal accountability plays a role in the quality and safety culture.

E. COMMUNITY (1,000 words maximum)

Please describe:

1. How the hospital selects the community stakeholders (employers, schools, police, religious organizations, agencies, etc.) with which it partners to identify and address specific community health needs.
2. How the hospital is partnering with community agencies and organizations to provide access to exceptional quality, safe, and patient- and family-centered and affordable care that promotes individual and community well-being and adds value to lives. Share examples of how your organization is working with others to expand access to address the unmet needs of your community, support patients after discharge, and address social determinants of health. Describe the initiatives and the results.
3. How your hospital identifies and takes action to address the community's racial, ethnic and gender disparities in health as well as medical care.
4. How the hospital measures and demonstrates accountability for improving community health status and outcomes. Please provide supporting data.
5. How your organization demonstrates transparency with the community, including reporting clinical performance measures.

F. INNOVATION (800 words maximum)

Please describe:

1. How the hospital creates a culture and atmosphere that welcomes and values innovative ideas from all staff members, regardless of job title.
2. What your hospital considers its most significant, unique and creative innovation and its related outcomes. Include measurable data showing progress and address other organizations' ability to replicate these innovations.
3. How your hospital has adapted and implemented the innovations of other organizations.

G. COVID-19 RESPONSE (1,000 words maximum)

Please describe:

1. How changes and innovations developed in response to COVID altered how your hospital provides care and works with the community and other organizations.
2. Any long-term adjustments your hospital has had to make to sustain your quality and safety programs as a result of your response to COVID.
3. How your hospital might be different in the future, i.e., strategic plan, budget, care delivery, workforce, etc., based on your experience during the pandemic.