FHCA 2019 Annual Conference & Trade Show

CE Session #35 – National Quality Award Program: From the Eyes of Examiners
Tuesday, August 6 – 6:00 to 7:30 p.m.
Celebration 7-8 – Operations/Quality Improvement

Upon completion of this presentation, the learner will be able to:

- Address four fundamental elements of Quality Improvement in the Baldrige Performance Excellence Framework - Approach, Deployment, Learning and Integration
- Identify six areas of process categories of the National Quality Award Program application
- Demonstrate ADLI in 12 Items of Criteria Requirements of National Quality Award Program application

Seminar Description:

The National Quality Award program is about the journey and not always about the award. Receiving the award is the goal, but the journey to get there is just as important. In this session, several Quality Award Senior and Master Examiners will provide inside tips, including most commonly made mistakes and evidence that examiners typically find most scorable to help applicants write a successful application.

Presenter Bio(s):

Alexis Bautz is the Quality Coordinator for Florida Presbyterian Homes, Inc. in Lakeland, Florida, where she oversees quality improvement, education and control. Alexis is a graduate of The University of South Florida's School of Aging Studies and is a Lean Six Sigma Black Belt. She is a Senior Examiner for the National Quality Award program and a member of Florida Health Care Associations Performance Excellence Council.

Maureen Brown RN, MSN, MBA, HCM, RAC is the Administrator at Miami Shores Nursing and Rehabilitation Center for the past 13 years. Prior to her current position Maureen worked as a Regional Clinical Nurse Coordinator for her current company DOS Healthcare Management. Her tenure is 21 years at DOS Health Management. Maureen's experience includes working in acute care setting, also as a Director of Nursing and as a MDS Care Plan Coordinator. She has been a Registered Nurse for the past 28 years and License Nursing Home Administrator for the past 13 years. Maureen has been a senior examiner for the American Healthcare Association Quality Award Program for the past four years.

Dr. Kendra Ferrero is a multi-state licensed RN board certified in Gerontology. She also holds an active Nursing Home Administrator license in several states. Kendra earned her MBA from Warner University and her Doctorate degree with a specialty in Health Care Administration from Northcentral University. She has worked in the post-acute environment since 1977. Kendra has been involved in the delivery of educational presentations in skilled nursing since 1984. She was part of the original RUG11 Demonstration Project when it was implemented in NY in 1985. She has held positions as a Director of Nursing, Regional Nurse, VP of Clinical, Nursing Home Administrator and Regional Vice President of Operations. Kendra currently works with Consulate Healthcare on the clinical team helping oversee clinical and regulatory compliance. She has sat on numerous FHCA committees for the past 10 years. She is a Lead Senior Examiner for AHCA/NCAL Quality Program. Kendra is a certified Risk Manager and has a passion for the skilled nursing environment, ensuring quality care is provided to the residents.

Heather Jackson is the Administrator of Parkside Health and Rehabilitation Center in Deland, Florida. She has been an AHCA/NCAL Senior Examiner for the past five years reviewing Silver Award Applications and currently serves as a Master Examiner reviewing Gold Award Applications.

Koko Okano is the Quality Improvement and Research Analyst with Florida Health Care Association. Koko is a Master Examiner and Team Leader for the AHCA National Quality Award Program and serves on the Board of Overseers of the program. Koko serves as an advanced examiner for the Governor's Sterling Award and on the board of examiners for the National Baldrige Program.

Samantha Vosloo is an Executive Director at Palm Garden of Largo, a 140-bed skilled nursing center in Largo, Florida. She has served as a Senior Examiner in the Quality Award Program for four years. Samantha has worked in long term care for seven years as an Administrator and graduated from the University of South Florida. During her free time, Samantha enjoys spending time with her husband, daughter and dog, Chivas.

From Eyes of Examiners: How to Write a Successful Application

2019 FHCA Annual Conference, Orlando, FL

AHCA/NCAL
National
Quality Award

EXAMINER

Panel of Presenters:
Alexis Bautz (Senior)
Bob Murphy (Senior)
Heather Jackson (Master)
Maureen Brown (Senior)
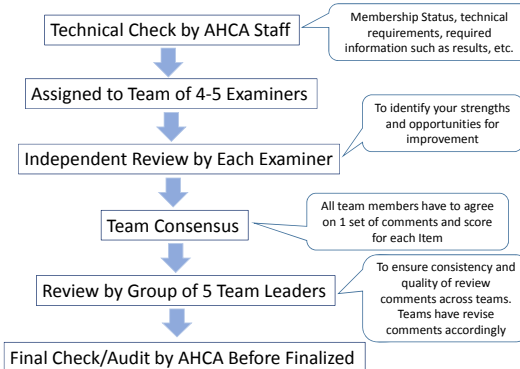Samantha Vosloo (Senior)
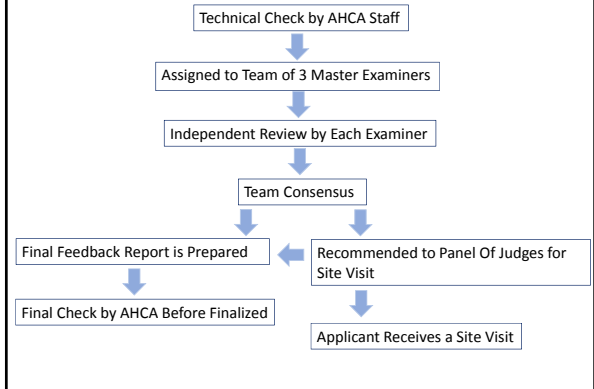
Moderator:
Koko Okano (Master)

What is National Quality Award Program?

- Started in 1996 by American Health Care Association
- It is a Baldrige-based Program.
- Since it is used in most of the industries in US such as medical, healthcare, manufacture, public offices, etc., long term care industry does not have disadvantage
- It is a three-tier program (Bronze, Silver and Gold)
- It is the largest Baldrige associate program in the nation
- FL recipients meet quality points for reimbursement by receiving silver or gold
- The deadline is usually at the end of January or the beginning of February, with intent to apply (not required) by October-November for all levels.
- Recertification policy was implemented in 2014, requiring all recipients to **submit** another application within 3 years to keep current status.
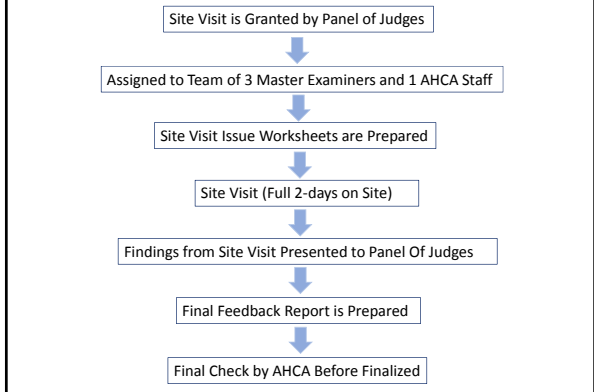

How is Your Application Reviewed (Silver)?

Technical Check by AHCA Staff — Membership Status, technical requirements, required information such as results, etc.

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Assigned to Team of 4-5 Examiners

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Independent Review by Each Examiner — To identify your strengths and opportunities for improvement

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Team Consensus — All team members have to agree on 1 set of comments and score for each Item

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Review by Group of 5 Team Leaders — To ensure consistency and quality of review comments across teams. Teams have revise comments accordingly

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Final Check/Audit by AHCA Before Finalized

How is Your Application Reviewed (Gold)?

Technical Check by AHCA Staff

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Assigned to Team of 3 Master Examiners

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Independent Review by Each Examiner

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Team Consensus

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Final Feedback Report is Prepared ← Recommended to Panel Of Judges for Site Visit

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Final Check by AHCA Before Finalized

↓

Applicant Receives a Site Visit

How is Your Application Reviewed (Gold)?

Site Visit is Granted by Panel of Judges

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Assigned to Team of 3 Master Examiners and 1 AHCA Staff

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Site Visit Issue Worksheets are Prepared

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Site Visit (Full 2-days on Site)

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Findings from Site Visit Presented to Panel Of Judges

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Final Feedback Report is Prepared

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Final Check by AHCA Before Finalized

About the Examiners

- There are 2 levels of examiners – Senior examiners review silver applications and master examiners review gold applications. While senior examiners are mostly ours who are trained to be examiners, most of the master examiners are Baldrige examiners
- Quality award examiners are VOLUNTEERS for their hours and work. Only expenses are paid
- All examiners, senior and master, have to go through online and onsite examiner training every year
- Some audit systems have been implemented for consistency and quality of examiner work
- LOTS of personal sacrifices to review fulfill examiner responsibilities (especially team leaders!)
- Application is available online on AHCA website in every fall

About Today's Examiners

❖ 5 current Senior (Silver) Examiners and 2 Master (Gold) Examiners, including team leaders (and we have a lot more from Florida!)
❖ Combined of 33+ Years of Examiner Experience
❖ State and National Baldrige Experience

This is What We Want to Present Today:

• Commonly Seen Mistakes and "Oops" While Reviewing Applications
• What Examiners Want to Tell All Applicants

Oops #1: It is Technical Writing!

Approach: a systematic way you do what you do. If the question is "how do you listen to your customers," then the response should be systematic methods you use to listen to your customers.

Deployment: the way you deploy your approach across all related people, units, groups, etc. If your method is "employee education," then the response should include how you educate everyone in the organization appropriately – from front line staff to leadership team, from day shift to night shift, from full time to part-time, from clinical to non-clinical.

Learning: an evaluation and improvement of your methods. If your method to listen to your customers is a satisfaction survey, how do you know if it is working most effectively and needs any improvement?

Integration: always remember what you wrote in the organizational profile!!

Examiners Need Facts, Not Stories

Q: How do you listen to and interact with your patients and other customers?

We listen to every resident very carefully because providing our residents what they want is most important in our work. We communicate with our residents daily to learn what we can do to make them happy. Our senior leaders are always visible on the floor communicating with residents and families and also respond to call lights.

• Communicating with residents daily – who communicates with them? How? With what methods?
• Visible on the floor – what does it mean? Are those scheduled rounds or just walk on the floor whenever they have time? If so, how often is it done?
• SLs responding to call lights – is that a policy that all the senior leaders follow?

Examiners Need Facts, Not Stories

Q: How do you listen to and interact with your patients and other customers?

We listen to and interact with our residents and families through multiple formal and informal communication methods. Formal communication methods include customer satisfaction surveys, monthly resident and family council, exit telephone surveys for SS residents, daily scheduled rounds by senior leaders (morning, afternoon, and evening), and suggestion boxes located throughout the building. Informal communication methods include daily interaction with residents and families. All direct care staff receive annual in-service training to detect, determine, and report customer comments or behaviors for satisfaction and dissatisfaction.

Oops #2: Avoid These Words!

- Regularly – how frequently does it actually happen?
- Encourage – are people actually doing it?
- Empower – empower how?? What are the actual actions?
- As necessary or as needed – is it really done, in what circumstances?
- Leadership leads the organization by being a role model – what exactly do they do?
- Communicate via open door policy – is it systematically done? Have you evaluated if it helps communication with everyone?

Oops #3: Didn't Read the Glossary?

Baldrige may have more specifically and narrowly defined terms - if you see the terms with UPPER CARE LETTERS, always check the glossary for definition, even some very familiar terms! Those may be different from commonly used definition!

Overall Item Requirement

1.1b How do SENIOR LEADERS deploy the VISION and VALUES through your leadership system?

1.1c How do SENIOR LEADERS communicate with and engage the entire WORKFORCE and KEY CUSTOMERS?

CUSTOMER. An actual or potential user of your organization's health care services.

See also **STAKEHOLDERS**.

✓ Many applicants list their employees as their customers – are they??

WORKFORCE. All people actively supervised by your organization and involved in accomplishing your organization's work, including paid employees (e.g., permanent, part-time, temporary, and telecommuting employees, as well as contract employees supervised by

Oops #4: Don't Assume You know!

6.1 Work Processes (45 points)
Basic Item Requirement
6.1a How do you design, manage, and improve your KEY WORK PROCESSES used to deliver HEALTH CARE services?

WORK PROCESSES. Your organization's most important internal value-creation processes.

Still…what's a WORK PROCESS??

Google

baldrige, work processes

Google Search   I'm Feeling Lucky

Key Work Processes

Work Systems

All work needed to produce products and related services to create value for customers and achieve organization's success.

Internal Work (Work Processes)

Work carried out by the workforce under the supervision of the organization. This work typically aligns with the organization's core competencies and involves the majority of the workforce and may be considered a key work process. Key work processes are always carried out by internal workers. Key work processes are critical to value creation and might include product design and delivery, customer support, and other business processes.

External Work (Outsourcing)

Correct Understanding of Terms

Strategic Objectives	Action Plans	Measures	Goals/Timetable
Reduce hospital readmission	Reduce hospital readmission rate to 10%	Hospital readmission rate	12% by 2019, 10 by 2020

Strategic Objectives	Action Plans	Measures	Goals/Timetable
Reduce hospital readmission rate to 10%	1. Retrain all clinical staff on Interact tools 2. Develop customer/family education program 3. Develop an effective decision making process for leadership	Readmission Rate 1. % of staff trained, % of SBAR completed correctly, …..	12% readmission rate by 2019, 10% by 2020 1. ….

Examiners Want All Applicants to Know What Those Mean Before You Start Writing

- Strategic Objectives (Category 2)
- Action Plans (Category 2)
- Innovation (Category 2, 4, and 6)
- Performance Measures (Category 2 and 4)
- Customer and Workforce Engagement (Category 3 and 5)
- Knowledge Assets (Category 4)
- Workforce Capacity and Capability (Category 5)
- Work Processes (Category 6)

First, look up the glossary. Then, try Google for reliable sources!

Oops #5: …Nobody Proofread?

Yes, teamwork is strongly recommended at the Silver level and it is absolutely A MUST at the Gold level. But make sure someone is reading the whole thing for consistency!

- Is writing style consistent (although applicants will never be penalized for writing skills)?
- Are contents, such as methods and definitions (like who your customers are) consistent across Categories and Items?
- Does everyone in the team understand ADLI and Criteria Requirements?

Oops #6: Wrong Evaluation!

Evaluation and improvements – what are you evaluating?

- Ever got the feedback report telling you that you did not have evaluation? Probably because you evaluated the wrong thing (or wrote about the evaluation on the wrong stuff)!

3.1 How do you listen to customers to obtain information?

1. Customer evaluation showed our food sucked. So, we improved our food/dining services and now we have fabulous food everyone likes!

2. Annual customer satisfaction survey only targets long-stay residents. Due to increasing volume of short-stay residents in recent years, we added a phone survey for short-stay residents within 2 weeks from discharge to listen to all our customers better.

One met the learning requirement but one did not. Do you know which one met the learning requirement?

Answer is in Your Response

3.1b

We listen to and interact with our residents and families through multiple formal and informal communication methods. Formal communication methods include customer satisfaction surveys, monthly resident and family council, exit telephone surveys for SS residents, daily scheduled rounds by senior leaders (morning, afternoon, and evening), and suggestion boxes located throughout the building.

Your response in 3.1d should be about any evaluation and improvement on the way you do customer satisfaction surveys, the way you do resident and family council, the way you do exit phone survey, the way SLs do rounds, or the way you manage suggestion boxes, but **NOT** about improvement you made on your services based on what customer told you about.

Oops #7: You Ran Out of Time, Didn't You?

You need equal amount of space to address all criteria requirements for Category 1 through 6 for a successful application.

- Category 6 is very important, and 6.1 can be the most difficult category to write. Yet, it often times THE shortest category in the application. Examiners have difficult time reviewing if the entire category is half the page….
- Technical writing in Category 1 but essay writing in Category 6. Applicants start out very well in Category 1, seemingly understand ADLI and criteria requirements. Excitement and high expectation quickly turn into disappointment when examiners see it does not last long after the middle of the application.
- Category 3 and 5 are score making categories for every applicant. Yet, applicants miss that opportunities in Cat 3 and 5.
- Process categories (Category 1-6) are very well written but examiners cannot say the same thing for the last category – Category 7.
- Applications are not proofread.

Oops #8: You Missed the Biggest Chance!

Category 7 has most points for scoring

- Required results are the minimum to pass technical requirements. But it is not enough to receive Silver or get a site visit for Gold.
- How many results you need or what results you need are depending on what you wrote in Category 1-6.
- Report "process measures" correctly in 7.1 for higher score.
- Report "market data" in 7.5 for higher score.
- Obtain extremal comparison for as many results as you can, but you do not need external comparison for all results.

What Examiners Want to Tell Applicants

PLEASE read the <u>entire</u> application guideline.

- Technical requirements (font, page limit, format choices, etc)
- Eligibility requirements
- Application policies
- Submission instructions
- Guidelines for responding criteria
- Criteria requirements
- Glossary of key terms

What Examiners Want to Tell Applicants

PLEASE read the <u>Notes</u> section
Notes are the biggest tips for you!

Notes:

3.1. The voice of the customer refers to your processes for capturing patient/resident and other customer-related information. The goal is customer engagement. In listening to the voice of the customer, you might gather and integrate various types of patient/resident and other customer data, such as survey data, focus group findings, blog comments, and data from other social media, marketing information, and complaint data that affect other engagement decisions. The results obtained using these methods should be reported in item 7.2.

What Examiners Want to Tell Applicants

PLEASE use your resources!

- Quality Award page on the American Health Care Association's website
- Trend Tracker for results
- FHCA Bronze, Silver, and Gold workshops (fall 2019)
- Staff examiner Koko Okano
- Baldrige Performance Excellence Program on NIST.gov website
- Recommended Books

What Examiners Want to Tell Applicants

PLEASE build your timetable wisely!

- ✓ August 1, 2019: Application Guidelines for Bronze, Silver, and Gold are published on AHCA website

- ✓ Sept – Oct/Nov 2019: Intent to Apply becomes available on AHCA website

- ✓ Sept 2019 – Jan 2020: FHCA workshops are provided throughout the state

- ✓ Jan/Feb 2020: Submission deadline for all levels