



**American Hospital
Association**

Liberty Place, Suite 700
325 Seventh Street, NW
Washington, DC 20004-2802
(202) 638-1100 Phone
www.aha.org

October 26, 2011

Dear Allied Association Executive:

The American Hospital Association has been proud to witness and support the tremendous leadership that allied hospital associations have contributed to nationwide efforts to improve health care quality. That's why we are pleased to invite your association to submit an application for **The Dick Davidson Quality Milestone Award for Allied Association Leadership**. This annual award will recognize allied hospital association efforts and share knowledge and progress toward national health care improvement.

As many of you know, Dick Davidson strongly promoted the role of hospital associations in leading quality improvement activities during his tenure as AHA president, and as president of the Maryland Hospital Association. In speaking with Dick about this award, he noted the "journey" that hospitals—and your association—are on in your quality improvement work and the importance of achieving "milestones" in this quest.

We have attached the award application, which describes the award criteria and application process. The award committee is chaired by an AHA trustee and includes allied hospital association executives, hospital and health system clinical/operational leaders, executives from award recipient organizations and at least one representative from a national organization (outside the AHA) involved in quality and performance improvement. The award committee will review all completed applications and select the award recipient, subject to approval by the AHA Board of Trustees. Please note that applications for the **2012 award are due by December 16, 2011**.

The **Dick Davidson Quality Milestone Award for Allied Association Leadership** will be presented at the 2012 AHA/Health Forum Leadership Summit held July 19-21, 2012 in San Francisco. The award recipient will receive an award sculpture, complimentary registration to the AHA Health Forum Leadership Summit and an invitation to the TRUST Award reception hosted by the Health Research & Educational Trust. The association will also be highlighted in a feature article to appear in *Hospitals & Health Networks*.

If you have any questions about the **Dick Davidson Quality Milestone Award for Allied Association Leadership**, please contact Debbie Pierce, dpierce@aha.org or (312) 422-2635.

We look forward to recognizing your hard work and valuable contributions. Thank you for all that you do to support hospital efforts to improve quality!

Sincerely,

Scott A. Duke, AHA Board of Trustees
Chair, Dick Davidson Quality Milestone
Award for Allied Association Leadership

Rich Umbdenstock
President and CEO





**American Hospital
Association**

**The Dick Davidson Quality Milestone Award
for Allied Association Leadership**

America's hospitals and health systems are making a significant commitment to improving health care quality and have demonstrated notable progress in recent years. As evident in numerous local and national efforts, health care outcomes across the six IOM aims (safe, timely, effective, equitable, efficient and patient-centered) have improved. At the same time, allied (state, regional and metropolitan) hospital associations have played an increasingly important role in facilitating and promoting health care quality improvement.

The Dick Davidson Quality Milestone Award for Allied Association Leadership is presented annually to a state, regional or metropolitan hospital association which, through its programs and activities, demonstrates exceptional organizational leadership and innovation in quality improvement and has made significant contributions to the measurable improvement of quality within its geographic area. The 2012 award will be presented at the 2012 AHA Health Forum Leadership Summit held July 19–21 in San Francisco. The award recipient will receive an award sculpture, complimentary registration to the AHA Health Forum Leadership Summit and an invitation to the TRUST Award reception hosted by the Health Research & Educational Trust (HRET). The association will also be highlighted in a feature article to appear in *Hospitals & Health Networks*.

The award is named after AHA President Emeritus Dick Davidson, who strongly promoted the role of hospital associations in leading quality improvement initiatives during his tenure as AHA president from 1991 to 2006 and as president of the Maryland Hospital Association from 1969 to 1991.

The goals of this award are to:

- Recognize outstanding efforts among allied hospital associations to improve quality;
- Encourage allied hospital associations to play key roles in raising the level of hospital and health system performance to achieve care that is safe, timely, effective, equitable, efficient and patient-centered; and
- Spread the learning and progress toward national health care improvement that are being promoted by allied hospital associations.

The award criteria include the following:

- Strength of organization's strategic and tactical improvement plan
- Improvement in specific quality measures
- Level of improvement spread
- Sustainability of the improvement
- Innovativeness of the improvement

All allied (state, regional and metropolitan) hospital associations in the United States are eligible to apply for the award. Regional and metropolitan hospital associations that are part of or managed by a state hospital association may apply separately or as part of a state hospital association application.

An award committee will review all applications and select the award recipient, subject to approval by the AHA Board of Trustees. The committee is chaired by an AHA trustee and includes allied hospital association executives, hospital and health system clinical/operational leaders, executives from award recipient organizations and at least one representative from a national organization (outside the AHA) involved in quality and performance improvement. The award program is administered by the Health Research & Educational Trust

Requirements

All applications become the property of the American Hospital Association and may be used in AHA's *Hospitals in Pursuit of Excellence* activities to share best practices and examples of different approaches to achieving the quality aims.

Submission of Applications

Completed applications must be emailed by midnight on **Friday, December 16, 2011**, to dpierce@aha.org. Applications should be converted to one complete PDF file to minimize possible distortion in graphs, charts and layout.

Application Materials

This application can be downloaded directly from <http://www.aha.org/about/awards/davidson/index.shtml>. Questions can be directed to Debbie Pierce at dpierce@aha.org or (312) 422-2635.

Each submitted application should have the following components:

- 1) Signed cover letter from the association CEO
- 2) Completed application cover page
- 3) Completed demographics section
- 4) Responses to specific questions about quality improvement in your association's geographic area and about your association's activities and initiatives to improve and sustain quality

Please make sure your application is easy to read by using 12-point type, single spacing, and normal margins. You are encouraged to submit data and charts, but please be sure that charts and tables are legible. Applications that are missing any required components, exceed the page limit or do not meet the data-reporting timeline requirements (within the last 24 months) will not be considered for full review by the award committee. **The maximum number of pages is 17 (does not include CEO letter).**



**The Dick Davidson Quality Milestone Award
for Allied Association Leadership**

2012 Application – Cover Page

Association Name: _____

Application Contact: _____

Title of Contact: _____

Street Address: _____

City, State, Zip Code: _____

Email Address: _____

Phone Number: _____ Fax: _____

Application Contact Assistant Information: _____

Assistant's email: _____ Phone: _____

PART 1: ASSOCIATION DEMOGRAPHIC INFORMATION

1. Please indicate the geographic scope of the association:

- _____ state
- _____ regional
- _____ metropolitan

If your association is a regional or metropolitan association, with which state association are you affiliated (if any)? _____

2. Membership data (as of October 31, 2011)

- Number of hospital/health system members: _____
- Number of other institutional members: _____ (please describe: _____)
- Number of affiliate members (e.g., corporations, vendors, consultants): _____
- Number of personal members: _____

3. How many staff does your association employ? _____

How many FTEs are assigned to quality, patient safety, and performance improvement? _____

4. Please indicate the size of your annual operating revenue for the most recently completed fiscal year. Include revenue from all operating entities of the association, including for-profit affiliates such as data services, insurance companies and shared services.

- _____ Less than \$2 million
- _____ \$2–\$5 million
- _____ \$5–\$10 million
- _____ More than \$10 million

PART 2: IMPROVEMENT INFORMATION

This part of the application explores the overall climate for health care quality improvement that your association has established in its geographic area. If your association includes other health care providers in its membership besides hospitals and health systems (e.g., nursing homes, medical groups), feel free to reflect their participation in your comments.

1. Describe **(in no more than two pages)** your association’s strategic and tactical quality improvement plan, including improvement priorities, engagement strategies, steps for aligning with national initiatives, and overall execution strategy for ensuring success.

2. Describe **(in no more than two pages)** quality measures related to specific quality improvement activities and initiatives of the association that have improved within the last 24 months across your geographic area. Determine the importance, magnitude and statistical level of the improvements. Identify if the improved measures are process, outcome and/or evidenced based. Examine process improvements (e.g., door to balloon time) and/or health outcome improvements (e.g., decreases in mortality, reduction in avoidable readmissions, lower infection rates). Please include relevant tables and graphs, including the following table. Explain if the improvement activities implemented became more efficient and effective as the projects evolved and if the improvements are transferable to others.

Measure Name and Definition	Data Source	Baseline		Follow-up Time (____)	
		Measure Value	No. of Hospitals/ Hospital Units Included	Measure Value	No. of Hospitals/ Hospital Units Included

3. Describe **(in no more than one page)** the extent to which improvement has spread across your association’s geographic area and among various settings of care and populations. Explore both the relative increases within each selected quality measure as well as the extent of improvement among health care providers in your geographic area (e.g., the number or percentage of providers which are contributing to these improvements, the size of the population(s) benefiting from the improvements).

4. Describe **(in no more than one page)** evidence of sustainability of the improvements, including the engagement and contribution of key stakeholders. Identify the processes in place to ensure and track sustainability.

5. Comment **(in no more than one page)** about the innovativeness of the intervention(s) that achieved the improvement as compared to similar interventions in other locations.

PART 3: SPECIFIC ASSOCIATION QUALITY IMPROVEMENT ACTIVITIES

Please provide the following information and details for ***no more than two (2) specific quality improvement activities*** (e.g., educational program, collaborative, data collection and benchmarking service) that were ***conducted during the last 24 month time frame***. **This section relates to question 2 in part 2 above and allows you an opportunity to further expand upon two of the improvement efforts that have shown measurable progress.** Multiyear and ongoing activities can be included; however the data you report for the purposes of this application must be within the last 24 months time frame. Responses are to be provided on separate pages and may not exceed a maximum of 8 pages total for the narrative description and any corresponding attachments. Bulleted responses rather than narrative text is allowed and encouraged where appropriate.

1. Name of activity

2. Brief description

- 3. Activity planning and support** — Describe the process used in deciding to launch this activity and gain support and participation. How was it determined to be a priority for the association? What data were used to influence this decision? How is this activity aligned with national quality improvement initiatives and priorities? What were the goals and target audience(s) of this activity? How did your association's leadership and governance demonstrate support for this activity? Discuss involvement from the association's board of trustees, volunteers, committees and staff. Did the association partner with other organizations engaged in improvement, e.g., quality improvement organization (QIO), health plans, business coalitions, and government agencies? If so, describe the partners and the specific contribution each one made to the activity. How were patients, families and community members engaged in this activity? Describe how your association encouraged participation in this activity by the hospitals and health systems in your geographic area. How many hospitals and health systems in your area participated in this activity?
- 4. Specific elements** — What were the specific elements of this activity? What was the implementation timeline? What midcourse adjustments, if any, were made during the activity?
- 5. Measuring success** — What were the results/outcomes of this activity? Explain what worked and did not work. How was the activity evaluated? Describe the specific measures used to monitor progress and track the activity. How does the activity utilize evidence-based measures to track performance? What barriers did you encounter and how did you overcome obstacles? What has been the impact of the activity on quality improvement activities among hospitals and health systems in your geographic area?
- 6. Spread and sustainability** — How has your association spread the improvements across hospitals and health systems in your geographic area? What specific plans does your association have for sustaining the improvements over time? How can this activity be adopted by other allied hospital associations?
- 7. Innovation** — What is truly innovative about this activity? How does this activity advance the practice of quality improvement?

CRITERIA INFORMATION

The award committee will evaluate all completed submissions based on the following criteria, with the associated weights and specific questions that will be reviewed for each criterion.

Criteria (Weight)

- | | |
|--|-------------------|
| 1. Strength of organization's strategic and tactical improvement plan | 20% weight |
| <ul style="list-style-type: none">• Is the quality improvement plan built into the organization's overall strategic plan?• How is buy-in from the members demonstrated?• How was the business case made?• How are priorities and activities reviewed to ensure success?• How aligned are improvement activities with national improvement priorities?• Is there a sustainable funding model for the quality activities? | |
| 2. Improvement in specific quality measures | 40% weight |
| <ul style="list-style-type: none">• How many quality measures improved?• Which measures were improved and are they important?• What was the magnitude and statistical level of the improvement?• How many patients were impacted?• What was the time frame of the improvement? Relevant to the award cycle (within the last 24 months)?• Are the improved measures process or outcome measures? Evidenced based?• How did the improvement activities that were implemented become more efficient and effective as the projects evolved?• How transferable is the improvement to others? | |
| 3. Level of improvement spread | 20% weight |
| <ul style="list-style-type: none">• What percentage of the providers was involved in the improvement?• Are there other health care settings involved other than hospitals?• Size of the patient population involved? | |
| 4. Sustainability of the improvement | 10% weight |
| <ul style="list-style-type: none">• How long has the improvement been sustained?• Identify engagement/contributions of key stakeholders .• What processes are in place to ensure and track sustainability? | |
| 5. Innovativeness of the improvement | 10% weight |
| <ul style="list-style-type: none">• What innovative approaches were used for the activities?• Was the work novel, evidenced based and important? | |

REMINDER:

The award application deadline is Friday, December 16, 2011.

Questions can be directed to Debbie Pierce at dpierce@aha.org or (312) 422-2635.