Using the Baldrige Criteria to Achieve Performance Excellence

Jane Poulter, BSN, MSA Baldrige National Quality Program Quality Colloquium August 25, 2004

Outline of Talk

Baldrige National Quality Program Process for Selecting Recipients Performance Excellence Criteria

- Seven Categories
- Processes and Results
- Why Use the Baldrige Criteria?
- Self-Assessment
- Feedback Reports
 - The Rottom Line is Results

What Is the Baldrige National Quality Program?

Operates as a public-private partnership Manages the Malcolm Baldrige National Quality Award

Provides global leadership in promoting performance excellence

Disseminates information

What Is the History of the Program?

The Malcolm Baldrige National Quality Improvement Act of 1987, Public Law 100-107

Created Award program to

- identify/recognize role model businesses
- establish criteria for evaluating improvement efforts

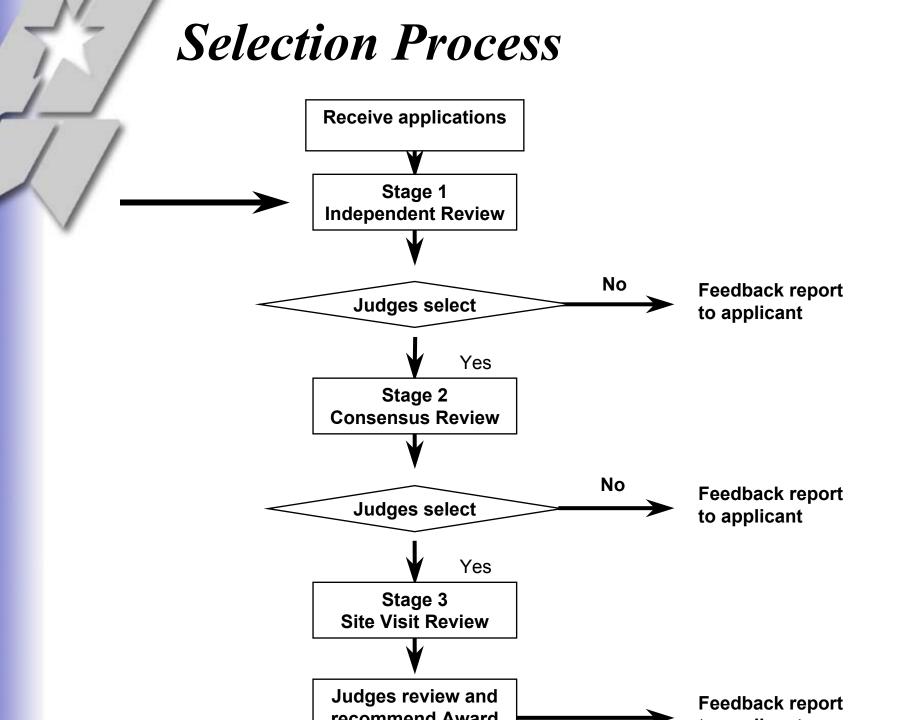
disseminate/share best practices
 Expanded to health care and education in 199

Who Can Apply for the Baldrige Award?

Manufacturing Service Small business (manufacturing or service) Education Health care

Health Care Award Recipients

- Baptist Hospital, Inc. (2003)
- Saint Luke's Hospital of Kansas City (2003)
- SSM Health Care (2002)



What Should I Know About the Baldrige Criteria?

Used as an assessment tool Used to identify Award recipients Basis for giving feedback to applicants Three versions: health care, education, and business Organizational Profile and Seven Categories compose an integrated framework Updated regularly

What Is Performance Excellence?

An <u>integrated approach</u> to organizational performance management that <u>results</u> in

delivery of ever-improving value to patients ar other customers, contributing to improved health care quality

improvement of overall organizational effectiveness and capabilities as a health care provider

organizational and personal learning

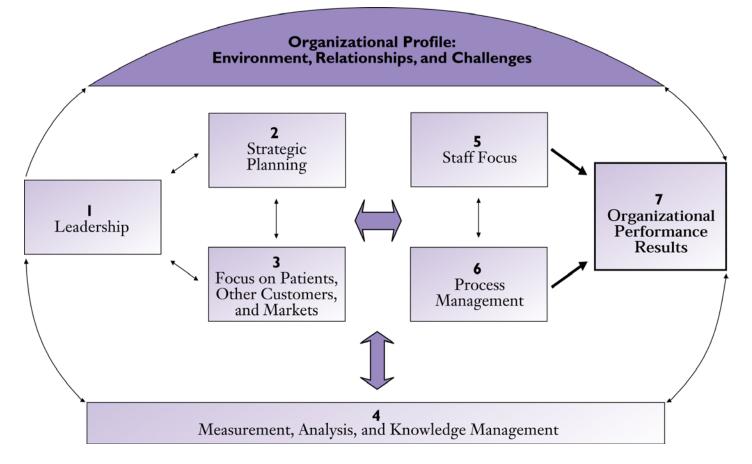
World Class Quality

" The most comprehensive list of actions to achieve world-class quality is contained in the Malcolm Baldrige Criteria."

> Joseph Juran *Quality Progress* August, 1994

Seven Categories of the Health Care Criteria Leadership Strategic Planning Focus on Patients, Other Customers, and Markets Measurement, Analysis, and Knowledge Management **Staff Focus Process Management Organizational Performance Results**

Baldrige Health Care Criteria Framework: A Systems Perspective



Know thyself.

Plato

Process Items

Seek information on "how" your organization does its work

- Defined and repeatable methods
- Use of data and information (measures)
- Deployment
- Evaluation, improvement/learning

Sample Process Item Questions

Item 3.1 a (2) How do you listen and learn to determine key patient/ customer requirements and expectations ... and their relative importance ...?

How do you do it (listen and learn)?

How do methods vary for different patient/ customer groups?

How do you use information from current and former patients/ customers, including . . .?

Sample Process Item Questions

Item 6.1(a)1-4

How does your organization determine its key health care processes ... process requirements ... and design these processe to meet all the key requirements ...?

How do these processes contribute to improved health care service outcomes?

How are health care service delivery processes and likely outcomes explained to set realistic patient expectations? Link to important processes and action plans Cover health care delivery and outcomes, patient and other customers satisfaction, financial and marketplace performance, staff and work systems, operational performance, and governance and social responsibility Ask for current performance level, trends, comparative data, and benchmarks.

Sample Results Item Questions

Item 7.1a(1) What are your current levels and trends in key measures or health care outcomes, health care delivery results, patient safety, and patients' functional statu that are important to your patients and othe customers?

How do these compare to the performance of your competitors and other organizations providing similar health care services?

Organizational Profile (no point value)

P.1 Organizational Description

P.2 Organizational Challenges

Organizational Profile

Self-assessment and application starting point

Basis for early action planning

1. Leadership (120 pts.)

Addresses Senior Leaders' Roles, Governance, and Citizenship

1.1 Organizational Leadership (70 pts.)

1.2 Social Responsibility (50 pts.)





Executive Leadership

Seven expectations for executive leaders ...

<u>Based on five system values:</u> Compassion, Respect, Excellence Stewardship, Community





2. Strategic Planning (85 pts.)

Addresses Strategic and Action Planning and Deployment of Plans

2.1 Strategy Development (40 pts.)

2.2 Strategy Deployment (45 pts.)

Pearl River: Strategic Planning

Strategic Objectives	Lag Indicators	Lead Indicators					
Goal 1: Improve Academic Performance							
Academic Achievement	Regents Diploma Rate	Achievement on 4^{h} and 8^{h}					
		grade NYS exams					
		CTPIII Reading and Math					
		Achievement					
		Gender Equity					
	Advenced Discovery Deta	Special Education Opportunity					
College Admissions	Advanced Placement Rate	Passing level on Regents					
	AP Performance Rate	Exams (Mastery) SAT I & II Participation Rate					
	AF Fenomance Rate	Scholar Athlete Teams					
Goal 2: Improve Perception							
Parent/Community	Maintain 2:1 Plurality on	Stakeholder Satisfaction					
Satisfaction	Budget Votes	Surveys					
	Market Oheren	Adult Education Enrollment					
	Market Share	Student Satisfaction Surveys					
		Prospective Homeowner Requests					
		New Resident Survey					
Goal 3: Maintain Fiscal Stability							
Cost-effective Fiscal	Contain Per-Pupil-Expenditure	Reduce Costs in Non					
Management	Below CPI and At/Below	Instructional Areas					
	County Average	Deduce Ceste in Non					
	Maintain Fund Balance	Reduce Costs in Non Instructional Areas					
		Instructional Areas					



3. Focus on Patients, Other Customers, and Markets (85 pts.)

Addresses how an Organization Determines Requirements, Expectations, and Preferences of Patients, Other Customers, and Markets

3.1 Patient, Other Customer, and Health Care Market Knowledge (40 pts.)

3.2 Patient and Other Customer Relationships and Satisfaction (45 nts.)

SSM: Customer and Market Focus

Listening and Learning Tools

- Former & current patients & families
 - Satisfaction surveys
 - Primary-secondary market research
 - Comment cards
 - Selected patient follow-up calls
 - Complaint Management System
 - Internet web pages response system





SSM: Customer and Market Focus

Listening and Learning Tools

Potential patients & future markets

- Primary-secondary market research
- Survey research
- Community contact telephone lines
- Internet web pages response system
- Professional associations, journals, abstracts, publications and courses





4. Measurement, Analysis, and Knowledge Management (90 pts.)

Addresses Analysis and Management of Data, Information, and Knowledge Assets

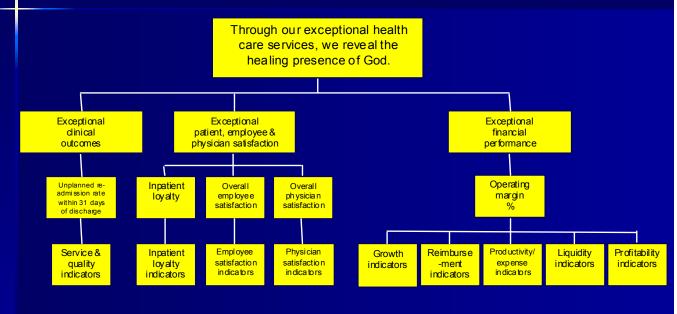
4.1 Measurement and Analysis of Organizational Performance (45 pts.)

4.2 Information and Knowledge Management



Performance Management Process

Alignment of Indicators







SSM: Measurement, Analysis, & Knowledge Management

Performance Analysis – System-Level Indicators

		Year to Date		Performance		
<u>Initiative</u>	Indicators	<u>Actual</u>	<u>Plan</u>	<u>To Plan</u>		
Consolidated Operations						
Profitability	Operating Margin %	1.5%	2.4%			
Liquidity	Unrestricted Days Cash on Hand	182	209			
Hospital Operations						
Growth	Acute Admissions	137 ,656	136,884	\bigcirc		
Reimbursement	Patient Revenue Per APD	\$1,410	\$1,336			
Producitvity/Cost	Operating Expense Per APD	\$1,402	\$1,321			
Profitability	Operating Margin %	3.7%	4.4%			
Clinical	31 Day Acute Readmission Rate	4.5%	4.2%	\bigcirc		
Service & Quality	Inpatient Loyalty Index	49.5%	52.9%	\bigcirc		
Satisfaction	Employee Satisfaction Indicator	74.1%	71.8%	\bigcirc		
Satisfaction	Physician Satisfaction Indicator	77.6%	73.6%	\bigcirc		
Skilled Nursing Home						
Profitability	Operating Margin %	1.4%	-1.9%			
Service & Quality	Daily Physical Restraints Prevalence	3.9%	5.1%	Ŏ		
Home Health						
Profitability	Operating Margin %	12.0%	8.4%			
Service & Quality	Homecare Patient Loyalty Index	56.9%	64.0%			
Physician						
Profitability	Net Revenue Per Physician	\$35,074	\$33,739			
Productivity	Practice Direct Operating Cost %	66.6%	68.4%	Õ		



○ > 5% favorable

> 5% unfavorable



5. Staff Focus (85 pts.)

Addresses Key Human Resource Practices

- 5.1 Work Systems (35 pts.)
- 5.2 Staff Learning and Motivation (25 pts.)
- 5.3 Staff Well-Being and Satisfaction (25 pt

Pearl River: Human Resource Focus

Aligning Employee Goals



Pearl River: Human Resource Focus

Key Factors for Teachers, Guidance, Nurses and Teaching Assistants

- Appropriate Work Space
- Adequate Supplies/Technology
- Communication from Principal
- Professional Development
- Opportunities to Collaborate



6. Process Management (85 pts.)

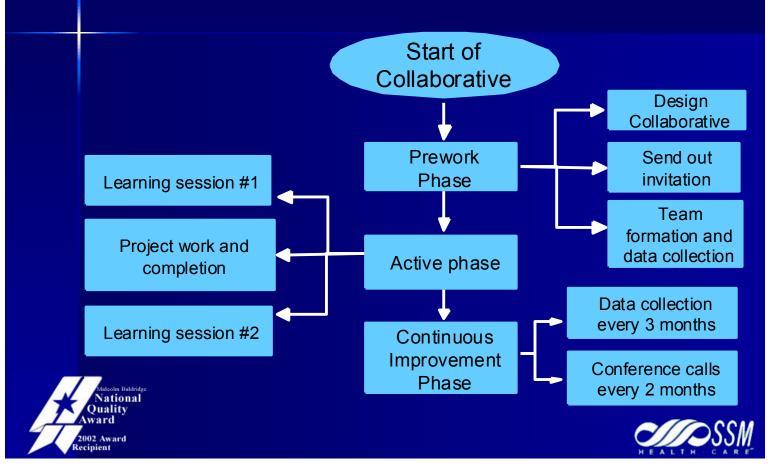
Addresses Key Processes and Process Management

6.1 Health Care Processes (50 pts.)

6.2 Support Processes (35 pts.)

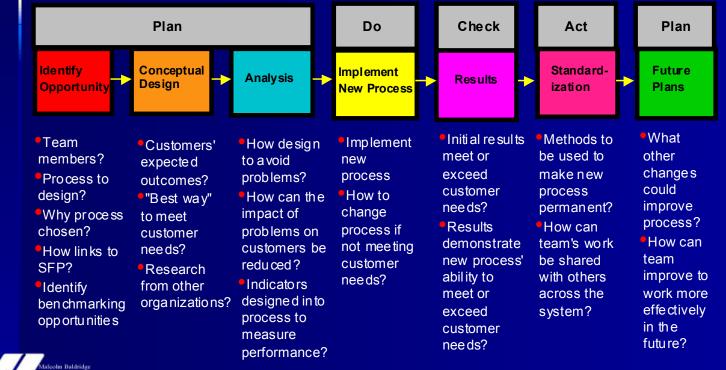
SSM: Process Management

Clinical Collaboratives



SSM: Process Management

CQI Model – Process Design Approach







7. Organizational Performance Result (450 pts.)

Addresses Progress on Results—Including Levels,

Trends, and Comparative Data

- 7.1 Health Care Results (75 pts.)
- 7.2 Patient- and Other Customer-Focused Rest (75 pts.)
- 7.3 Financial and Market Results (75 pts.)
- 7.4 Staff and Work System Results (75 pts.)

The Bottom Line: Results

Improved quality of care and outcomes Improved patient and other customers satisfaction and loyalty

Increased revenue/ lower costs/ financial stability

Increased market share

Greater staff productivity and satisfaction

Increased governance and social responsibility



Clinical Collaboratives

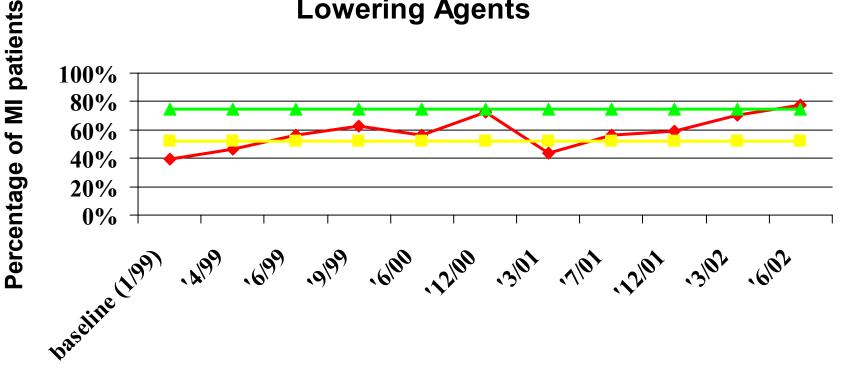
- Improving the Secondary Prevention of Ischemic Heart Disease (1/99)
- Improving Prescribing Practices (5/99)
- Using Patient Information to Improve Care (11/99)
- Enhancing Patient Safety Through Safe Systems (3/00)
- Improving the Treatment of Congestive Heart Failure (11/00)
- Achieving Exceptional Safety in Health Care (1/02)





SSM Health Care 2002 Award Recipient in Health Care

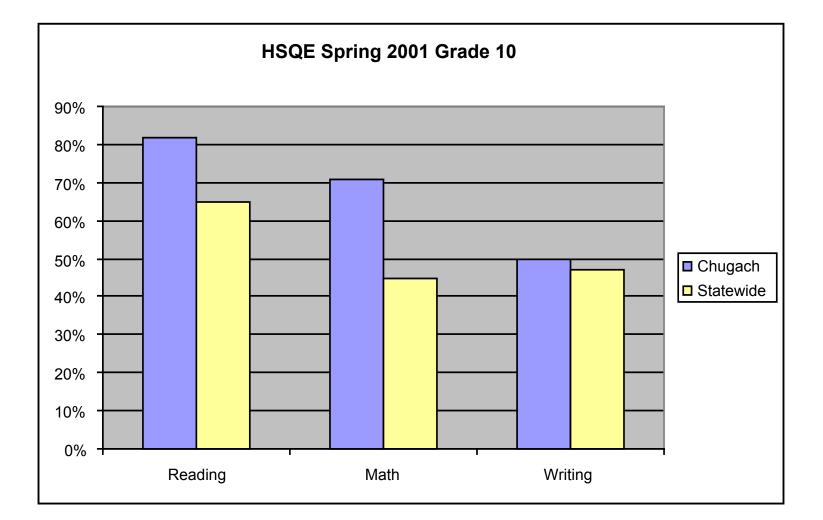
Heart Attack (MI) patients treated with Lipid-Lowering Agents



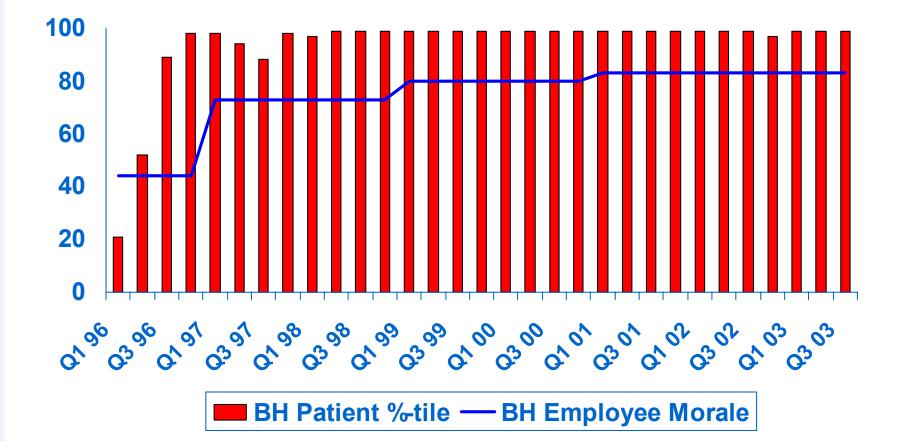
Saint Luke's Hospital of Kansas City 2003 Award Recipient in Health Care

	SLH	National Average
Medical Mortality	13.1%	15.3%
Surgical Mortality	1.8%	2.5%
Physician Rating	86%	33%
Accreditation Score	92	91
Overall Score	7669	5418
SLH Rank = 35 of 4,500 hospitals in U.S.A.		

Chugach School District 2001 Award Recipient in Education



Baptist Hospital, Inc. 2003 Award Recipient in Health Care

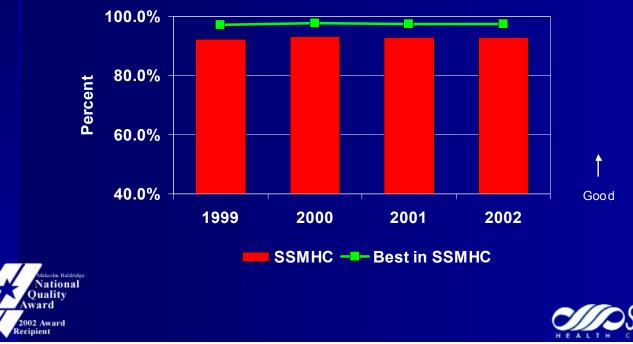




SSM: Results

Key Customer Requirements

Staff Did All Possible to Control Pain



SSM: Results

Physician Satisfaction

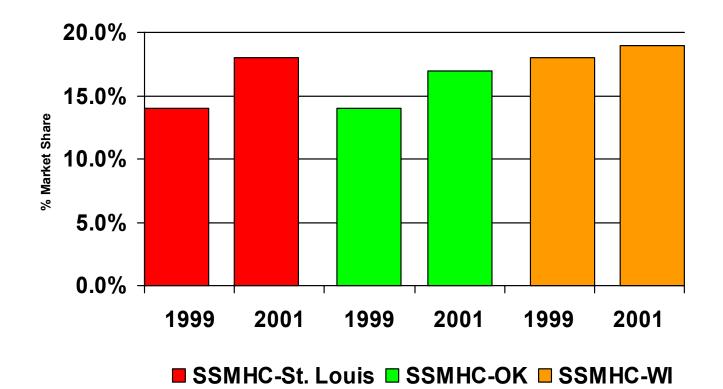






SSM Health Care 2002 Award Recipient in Health Care

Market Share



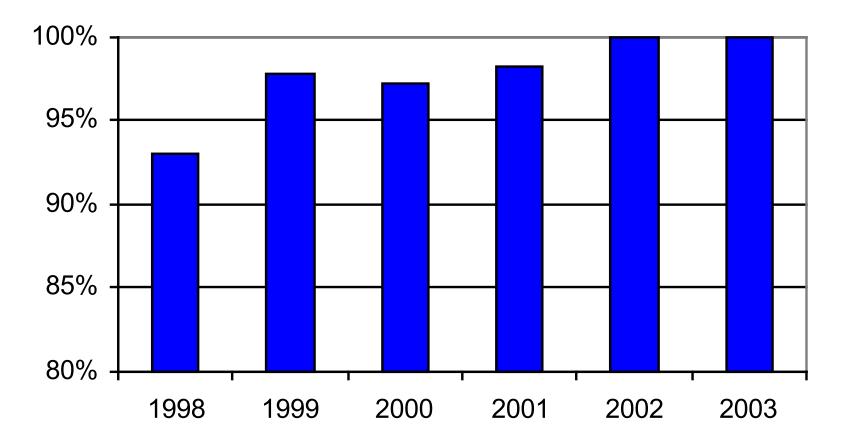
Medrad, Inc. 2003 Award Recipient in Manufacturing



Stoner, Inc.

2003 Award Recipient in Small Business

% Of Orders Shipped Same Day



What makes the Baldrige Criteria different?

Key Characteristics focus on results are non-prescriptive are adaptable support a systems perspective support goal-based diagnosis

Is Your Organization Ready?

It is **never too early** to begin using the Baldrige Criteria for Performance Excellence.

"It amazes me that U.S. businesses spend so much money on 'how-to' books and coursework to teach leaders how to build successful organizations. My recommendation: implement the Baldrige-based Criteria in your business. No other single document can help build a long-term successful organization."

Jerry R. Rose, President Sunny Fresh Foods Baldrige Award Recipient, 1999

Benefits of Self-Assessment and Applying for the Award

Identify successes and opportunities for improvement

Jump-start a change initiative

Focus your organization on common goals

Gain an outside perspective

Learn from feedback

Enhance organizational learning

The Feedback Report: Your Greatest Benefit

Written assessment of strengths and opportunities for improvement Compiled by a team of expert Examiners The report includes

- Key Themes Summary
- Comments
- Individual Scoring Range
- Scoring Distribution

"To change and to change for the better are two different things."

German Proverb

How Can I Learn More About the Baldrige Criteria?

e-Baldrige **Getting Started** Why Apply? Are We Making Progress? Are We Making Progress as Leaders? Criteria for Performance Excellence

How Can I Learn More About the Baldrige Program?

Visit our Web site at **www.baldrige.nist.go** Contact your state or local Baldrige-based program Attend a conference Become an Examiner

How Can I Contact the Baldrige Program?

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