



# EXAMINER TRAINING DAY 1

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November 2022

# Course Overview

## Learning Objectives...



Gain a Deeper & More  
Consistent Understanding of  
the Criteria



Apply Six-Step Independent  
Review Process to an Award  
Application



Make High Quality Decisions  
About Choosing Key Factors,  
Strengths / OFIs and Scoring



Write Better Feedback  
Comments Using the  
Comment Guidelines

# Agenda Day 1

- Introductions
- Code of Ethics & Professionalism
- Review Baldrige Framework, Criteria Structure
- Pre-work Item 2.1
- Pre-work Item 6.1
- Non Pre-work Process Items



Review Day 1



Pre-work Item  
7.1



Pre-work Item  
7.2



Non Pre-work  
Items



Consensus



Site Visit



Key Themes

# Agenda Day 2

# Ground Rules

## Keys for Learning

- Write down what is important; take notes
- Stay engaged; don't lose focus
- Always consider: How does this apply to me?

- Mute microphone when not speaking
- Cell phones on mute
- Come back from breaks on time
- All ideas are valid
- One conversation at a time
- ELMO
- Have fun
- Others?

# Introductions

- Name
- Organization
- Experience with Baldrige Criteria
  - TPE, National, Your Organization, Elsewhere

- ***Reminder to review TPE Examiner Process in Bridge LMS***



# Examiners Code of Ethical Conduct & Key Principles

## Exhibit TPE's Values at All Times

*Excellence – Diversity & Inclusion – Integrity – Visionary Leadership – Professionalism - Agility*



Provide high quality work products



Complete assignments within agreed-upon timeframes



Use effective communication skills & team behaviors to facilitate the consensus process



Adhere to the Code of Conduct



Protect the integrity of the Awards Process



Exhibit professional conduct at all times



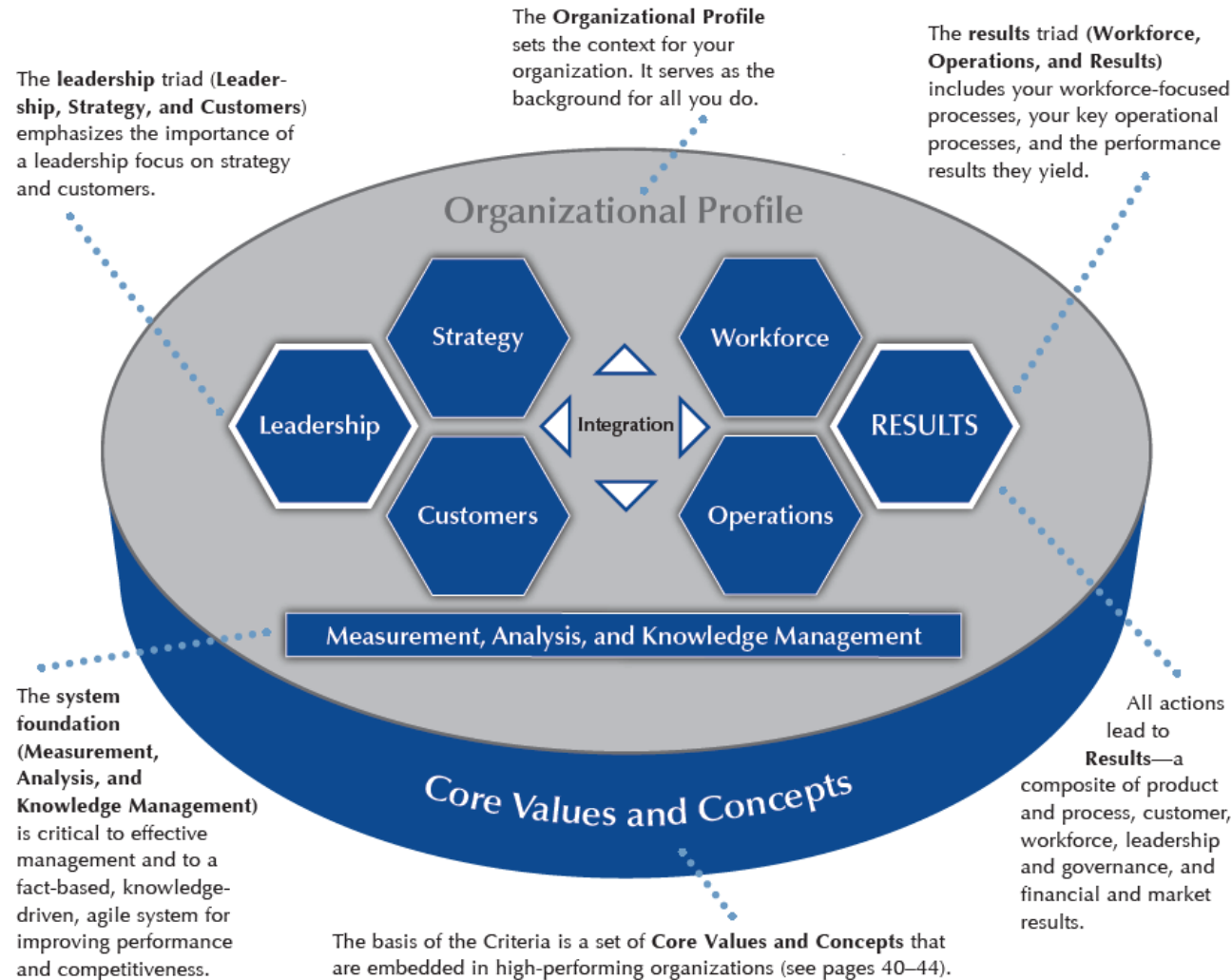
Protect the Confidentiality of Applicant/ Application



Protect the Applicant's intellectual property & proprietary information



# Criteria for Performance Excellence: Systems View





# 2021 - 2022 Baldrige Excellence Framework

Criteria Overview & Structure (Pages 1 - 2)

Criteria for Performance Excellence (Pages 3 – 28)

Scoring System (Pages 29 – 34)

Core Values and Concepts (Pages 38 – 43)

Glossary (Pages 46 – 53)





Review & study Framework  
booklet



Read entire application



Draft Key Factors (KF)

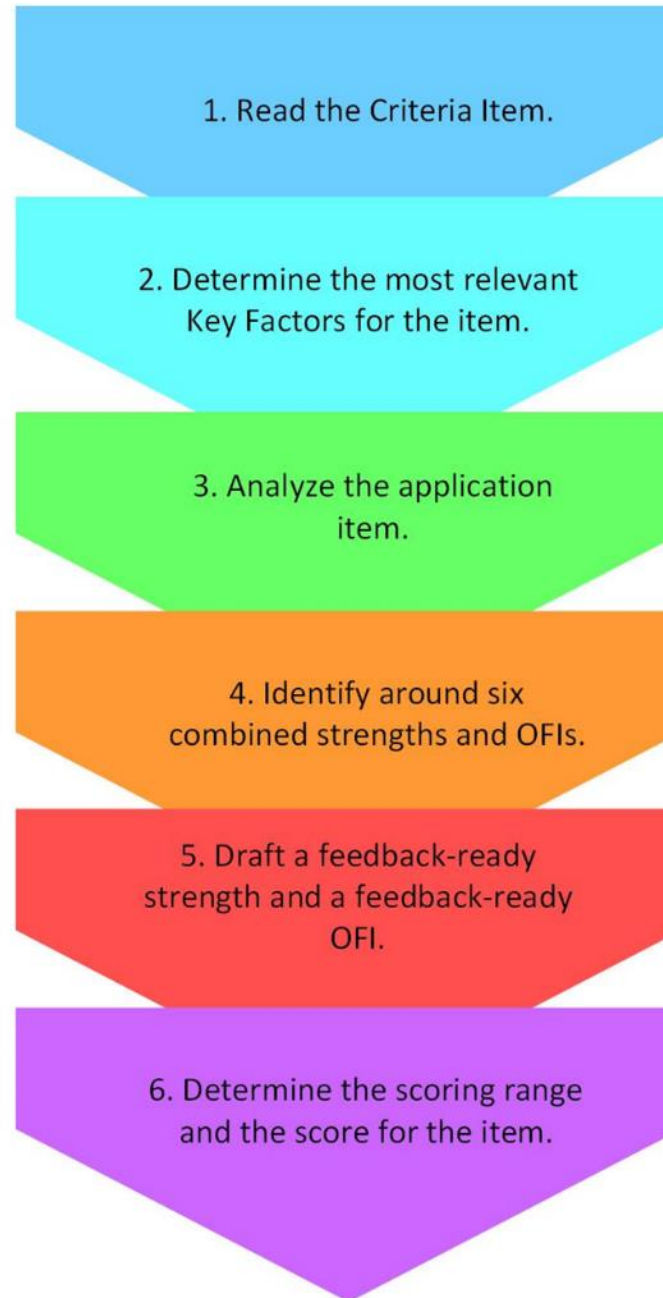
**Appendix**



Evaluate each item  
6-Step Item  
Evaluation Process

# Steps for Independent Review (IR)

# 6-Step Item Evaluation Process for IR



# 1. Read the Criteria Item.

3. Analyze the application item.

4. Identify around six combined strengths and OFIs.

5. Draft a feedback-ready strength and a feedback-ready OFI.

6. Determine the scoring range and the score for the item.

1. Read the Criteria Item.

2. Determine the most relevant  
Key Factors for the item.

combined strengths and OFIs.

5. Draft a feedback-ready  
strength and a feedback-ready  
OFI.

6. Determine the scoring range  
and the score for the item.

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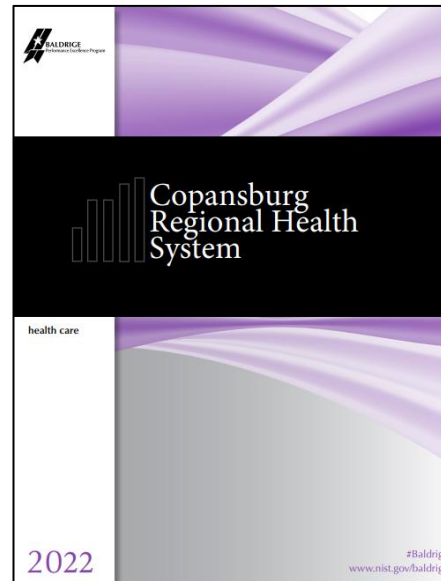
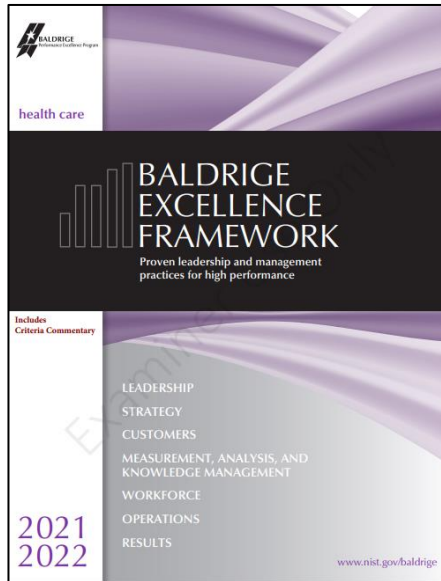
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# Resources for Breakout Sessions



**Your Pre-work for Items  
2.1, 6.1, 7.1 & 7.2**

# Segment 1, Round 1

## Pre-work Item 2.1

### Learning Objectives

1. Gain a deeper understanding of the criteria requirements
2. Evaluate and receive feedback on pre-work assignments



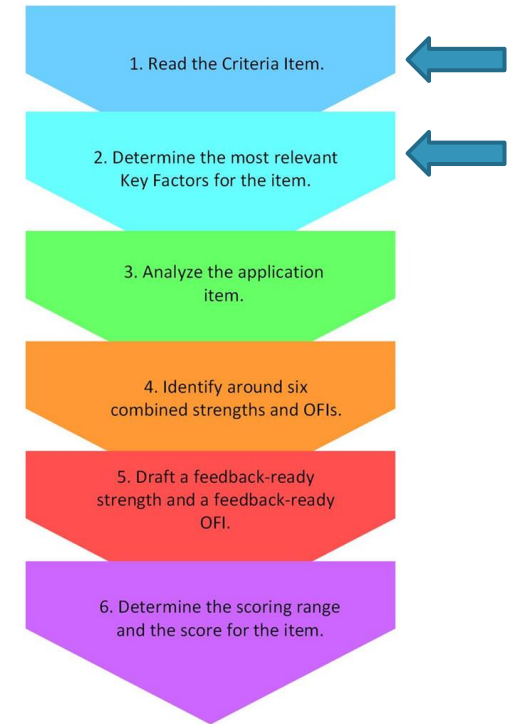
# Pre-work item 2.1 - Overview

- Select and come to consensus for
  - Key Factors
  - Strengths
  - OFIs
  - Scoring



# Steps 1 & 2: Independent Review (IR)

- Independent Review (IR): Steps 1 & 2
  - What are key factors & where are they found?
  - How do you decide which 4-6 key factors to include?
  - Will you change your pre-work as a result of this discussion?
    - If yes, what will you change?



*Time: 15 minutes*

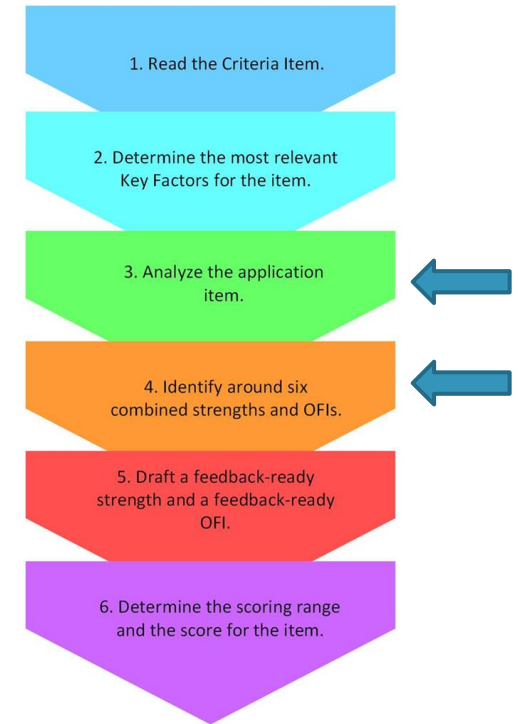
# Potential Key Factors for Item 2.1

## Steps 3 & 4 - Application Analysis, Strengths & OFIs

- IR Steps 3 & 4
  - How do you analyze the application?
  - What are you looking for?

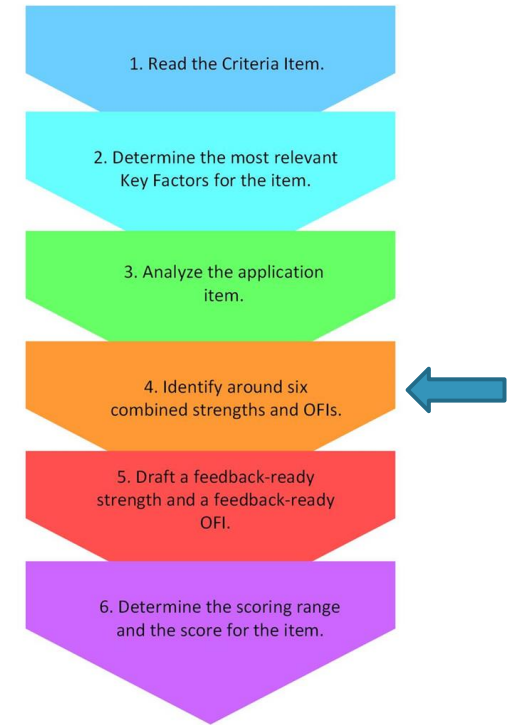
ADLI

*Time: 8 minutes*



# Breakout Session: Strengths & OFI

1. Share a strength & rationale for the strength and have someone capture in a list.
2. Do another round for OFIs.
3. Reach consensus on which strengths & OFIs from the list would make it into the scorebook and note them.
4. Report out:
  1. What decision criteria did you use to determine which strengths and OFIs would go to the scorebook?
  2. Are there any key factors you might add or remove after reaching consensus on strengths and OFIs?



*Time: 12 minutes breakout exercise + 5 minute debrief*



# Step 5: Comment Writing

- Actionable

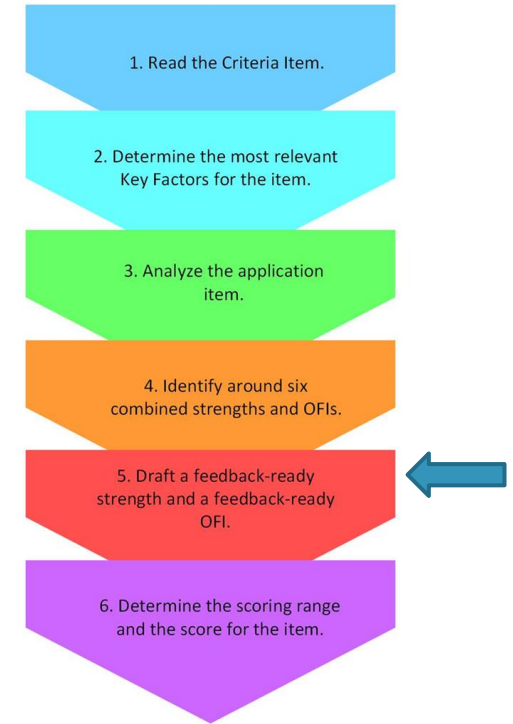
Appendix

- Main Idea – “Nugget”
- 1 – 2 Examples
- Relevance to Applicant

- Aligned

- Accurate

- Appropriate



# Process Strength “NERD” Comment Example

4.1a(1) Data and information are systematically selected, collected, aligned, and integrated to track daily operations and monitor progress toward achieving strategic objectives. The applicant selects, collects, aligns, and integrates data and information using eight-step Performance Management System (Figure 4.1-1) and tracks data and information using an automated health informatics system (DDI). Alignment and integration are reinforced through a set of dashboards cascaded through system's strategic scorecard. Systematically gathering appropriate data and information supports daily operations and fact-based decision making and sets the conditions to establish priorities for continuous improvement and innovation.

**Nugget - Evidence - Relevance**



# Process OFI “NERD” Comment Example

1.2c(2) It is unclear how the applicant’s activities related to determining areas for organizational involvement in supporting and strengthening its communities form a well-ordered, repeatable approach. Despite key community examples provided by the applicant, a process for identifying key communities is not apparent. Additionally, for key communities 40 miles east to west and 50 miles north to south of area, the organization does not make evident a process for determining these key communities within the geographic space. The lack of a systematic approach to identify key communities and determine areas for organizational involvement may limit the applicant’s ability to maintain its strategic advantage of market share leadership.



**Nugget** - **Evidence** - **Relevance**

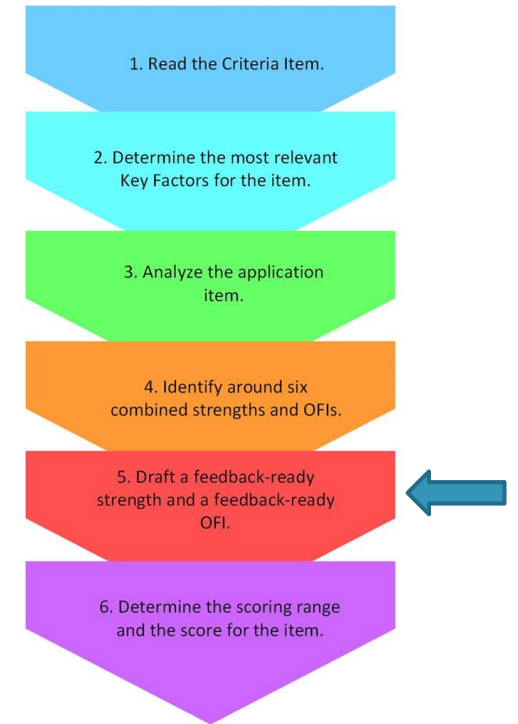
# Step 5: Comment Writing

In pairs, each person share a feedback-ready comment from pre-work assignment for 2.1.

Have partner evaluate using the Comment Guidelines.

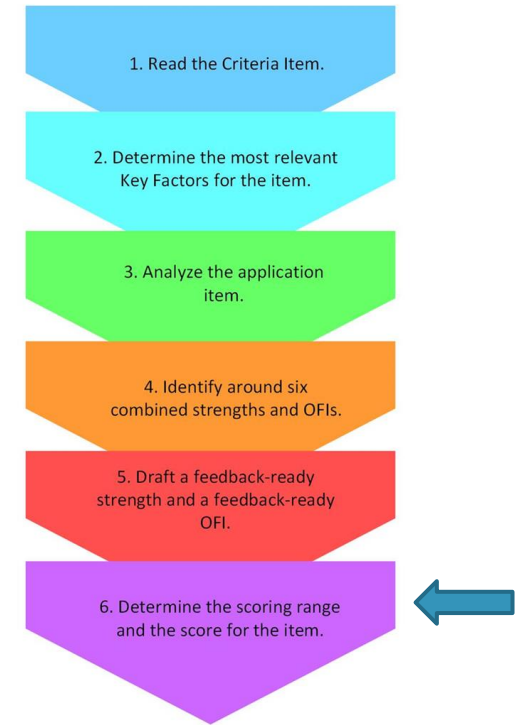
[Appendix](#)

*Time: 10 minutes*



# Step 6: Scoring

How do you determine the scoring range & score?



Appendix

# Process Scoring Guidelines – AD

	Approach	Deployment
0%-5%	No systematic approach is evident; information is anecdotal.	<b>Little or no deployment</b> of any systematic approach is evident.
10%-25%	The beginning of a systematic approach to the <b>basic question</b> in the Item is evident.	The approach is in the <b>early stages</b> of deployment in most areas of work units, inhibiting progress in achieving the basic question of the item.
30%-45%	An effective, systematic approach, responsive to the <b>basic question</b> in the Item, is evident.	The approach is <b>deployed</b> , although some areas or work units are in early stages of deployment.
50%-65%	An effective, systematic approach, responsive to the <b>overall questions</b> in the Item, is evident.	The approach is <b>well deployed</b> , although deployment <b>may vary</b> in some areas or work units.
70%-85%	An effective, systematic approach, responsive to <b>multiple questions</b> in the Item, is evident.	The approach is <b>well deployed</b> , with no significant gaps
90%-100%	An effective, systematic approach, fully responsive to the <b>multiple questions</b> in the Item, is evident.	The approach is <b>fully deployed</b> without significant weaknesses or gaps in any areas or work units.

# Process Scoring Guidelines – LI

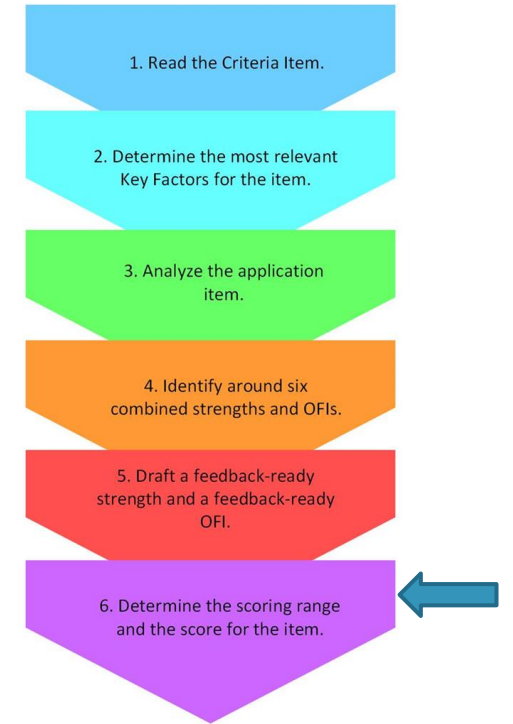
	Learning	Integration
0%-5%	<b>No evidence of an improvement</b> orientation; improvement is achieved through reacting to problems.	<b>No organizational alignment</b> is evident; individual areas or work units operate independently.
10%-25%	<b>Early stages</b> of a transition from reacting to problems to a general improvement orientation are evident.	The <b>approach is aligned with other areas</b> or work units largely through joint problem solving
30%-45%	The <b>beginning of a systematic approach</b> to evaluation and improvement of key processes is evident.	The approach is in <b>the early stages of alignment</b> with the basic organizational needs identified in response to the Organizational Profile and other process items.
50%-65%	A <b>fact-based, systematic evaluation</b> and improvement process and some organizational learning, including some innovation, are in place for improving the efficiency and effectiveness of key processes.	The approach is <b>aligned with your organizational needs</b> as identified in response to the Organizational Profile and other process items.
70%-85%	Fact-based, systematic evaluation and improvement and organizational learning, including <b>innovation</b> , are key management tools; there is <b>clear evidence of refinement</b> as a result of organizational-level analysis and sharing.	The approach is <b>integrated with your current and future organizational needs</b> as identified in response to the Organizational Profile and other process items.
90%-100%	Fact-based, systematic evaluation and improvement and organizational learning through innovation are key organization-wide tools; refinement and innovation, <b>backed by analysis and sharing</b> , are evident throughout the organization.	The approach is <b>well integrated</b> with your current and future organizational needs as identified in response to the Organizational Profile and other process items.

# Step 6: Determining the Score

How do you determine the scoring range & score?

*Time: 8 minutes +  
3 minute debrief*

Appendix





# Segment 1, Round 2

## Pre-work Item 6.1

### Improve Your Work: Overview

#### Learning Objectives

1. To gain a deeper understanding of the criteria requirements for item 6.1 taking learnings from the first round and using them to improve your work
2. To use the learnings gleaned from the first round to evaluate and improve your output (key factors, strengths and OFIs, comments & scoring) for item 6.1



# Potential Key Factors for Item 6.1

# Improve Your Work: Criteria & Key Factor Discussion

## Task:

- Perform a cycle of improvement on your pre-work
- Look at your notes, and take your learnings from previous work and improve your key factors, strengths and OFIs, and scoring for item 6.1

*Time: 15 minutes*

# Group Exercise: Share improvements

1. First, offer up improvements you made to key factors (about 7 minutes).
2. Second, offer up improvements to strengths and OFIs (about 7 minutes).
3. Third, offer up improvements to the scoring (again, about 7 minutes).

*Time: 20 minutes*

# Non Pre-work Process Items

## Group Assignments:

Group 1: Item 1.1

Group 2: Item 3.1

Group 3: Item 4.2

Group 4: Item 5.2

# Step 1: Read the criteria

A brief summary of the overall meaning & intent of the Criteria item assigned

Bullets indicating:

Points of agreement about the meaning of your Criteria question(s)

Examples of what you would expect to see in the application to address the requirement

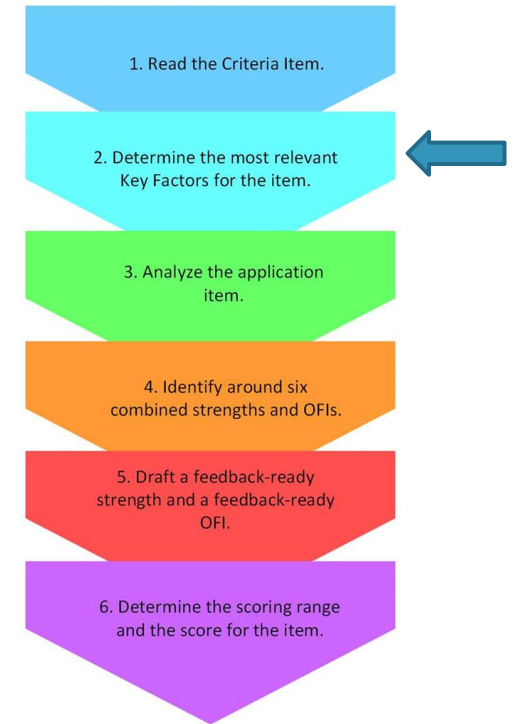
*Note: Steps 1 & 2 will be completed together*  
*Total time for both steps: 25 minutes in groups, 5 minute report out*



## Step 2: Determine most relevant key factors

### Group Activity

- Choose 4–6 key factors.
  - Groups to refer to Consensus Scorebook Key Factors Worksheet and choose 4 – 6 that resonate most for assigned item. **Appendix**
- Keep list of key factors for future use, but you do not need to report out on these.



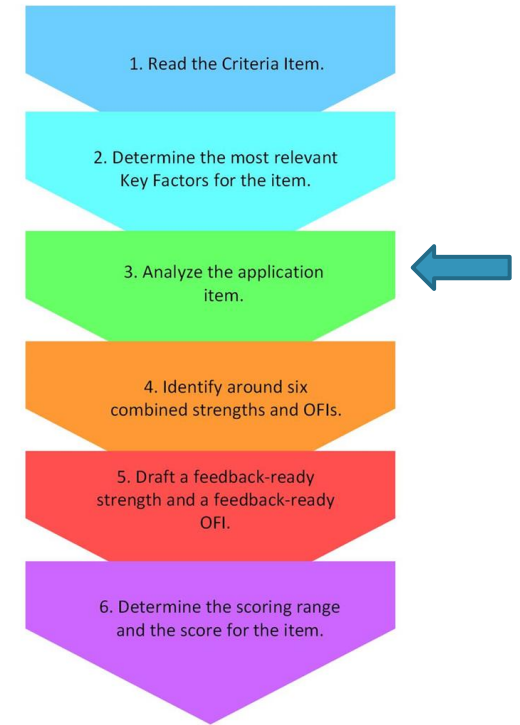
*Note: Steps 1 & 2 will be completed together*  
*Total time for both steps: 25 minutes in groups, 4 minute report out*

# Step 3: Read & Analyze Item in Application

## Independent Reading and Analysis

- Read your Criteria item & analyze.
- The goal is to analyze the application identify around six potential strengths/OFIs that you will develop in step 4.
- Please make sure to integrate lessons or tips you noted previously to improve your analysis.

*25 minutes*





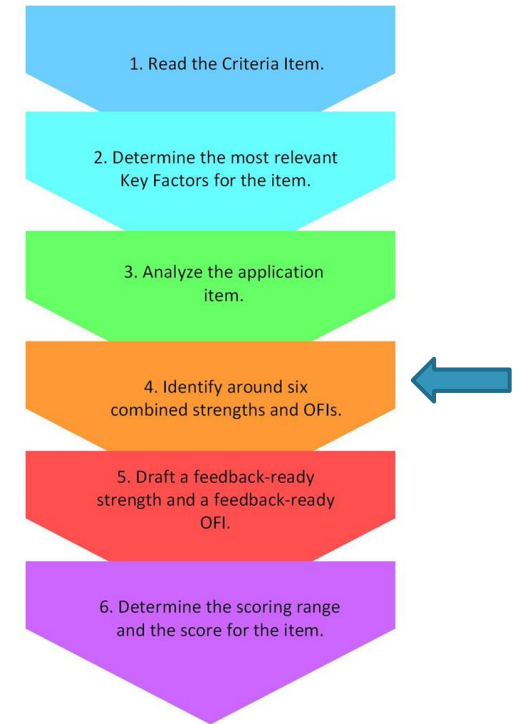
# Step 4: Determining Strengths & OFI

## Group Activity (Discussion)

- Using a round-robin approach, share a strength & rationale for the strength. Capture in a list.
- Do another round for the OFIs, capturing on the list.
- Decide the most important key strengths/OFIs
  - Normally around 6 (for exercise at least one strength & one OFI)

Be prepared to discuss your table's selected strengths and OFIs, and why you would choose to include or not include.

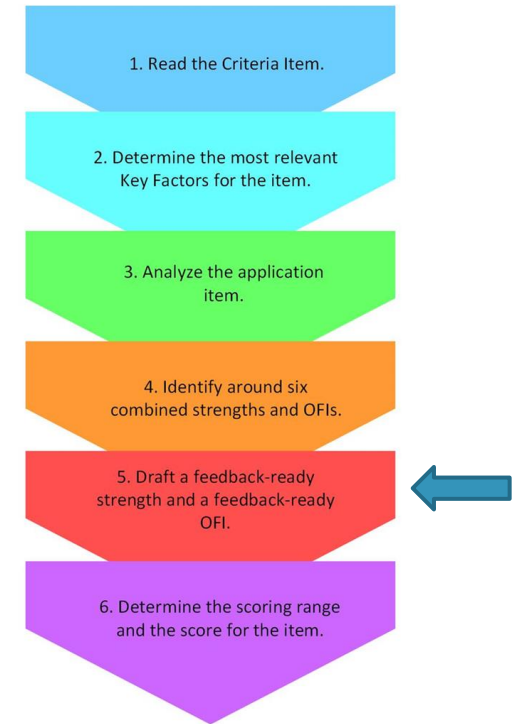
*15 minutes in groups, 4 minute report out*



# Step 5: Draft feedback ready comments

## Learning Objective

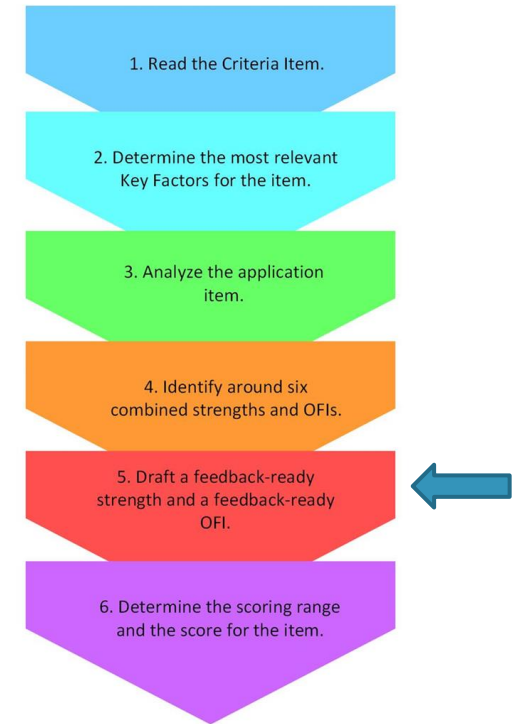
- Organize the information gleaned from the previous four steps & formulate two value-added comments (one strength and one OFI) for the case study applicant organization.



# Step 5: Draft feedback ready comments

## Group Activity

- Identify one of the most important strengths or OFIs from Step 4
- Develop into feedback ready comment
- Have someone document feedback ready comment

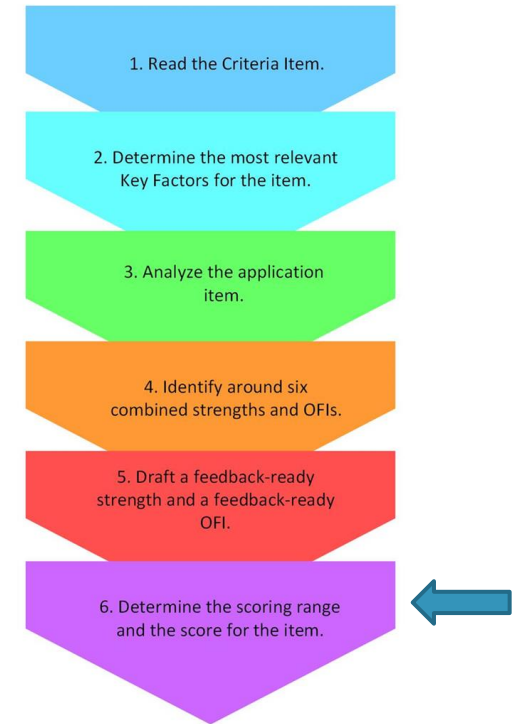


*Time: 10 minutes + 3 minute debrief*

# Step 6: Scoring

How do you determine the scoring range & score?

*Time: 5 minutes  
+ 2 minute debrief*



Appendix

# Day 1 Wrap Up



KEY LESSONS LEARNED  
FROM TODAY?



LINGERING QUESTIONS?

➤ ***Short Assignment – Improving Comments***

**Appendix**

**THANK YOU!**

**QUESTIONS?**

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For further questions/information:

Margot Hoffman

614-425-7157

[Margot.Hoffman@partnershipohio.org](mailto:Margot.Hoffman@partnershipohio.org)

# APPENDIX

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# 2022 – 2023 TPE Examiner Process

**The Partnership for Excellence (TPE) Examiner Process** 2022-2023 Examining Cycle

Rev. 9-19-2022

Oct/Nov/Dec 2022	Dec 2022/Jan 2023	Late Jan/Feb 2023	March 2023	Apr/May 2023	May/June 2023
1.1 Examiner Applications due September	2.1 Independent Review  TLs contact applicant's POC to set dates for Site Visit	3.1 Begin Consensus Review. TL assigns both Category Lead and Category Back-up responsibilities to each examiner on the team.	4.1 Plan SV (draft SVI worksheets, list documents to examine, walk-about questions, interviews, etc.)	5.1 TL and/or Scorebook Editor insert comments & scores into FBR template	6.1 TPE finalizes FBRs and sends to applicants
1.2 Applicants notified of acceptance within 72 hours	2.2 Review the Framework Booklet so that you are familiar with its contents. Assure you are using the correct Booklet for your application (i.e. Health Care for Health Care, etc.)	3.2 For your <i>assignment as Category Lead</i> , read the KFs, IR Strength & OFI, evidence, evaluation factors, comments, scoring range/score from <u>all</u> team members	4.2 Participate in 3-day SV. Review documents, interview assigned staff, verify and clarify SVI. <i>Work each SVI worksheet.</i>	5.2 When & where requested by TL, Category Leads contribute to feedback report	6.2 TPE announces award recipients
1.3 If a 1 <sup>st</sup> time examiner, attend New Examiner Orientation in October	2.3 Do a first read of the application: make notes in margins, underline, highlight, etc. of any important information that relates directly to the Criteria	3.3 Using strongest draft comments, develop 4- 6 FB-ready Strength & OFI comments for <u>each</u> assigned Item. Re-score both range & score using appropriate scoring guidelines. Enter in software by <i>(date)</i>	4.3 Re-write comments concisely, as needed, using Comment Guidelines. Walk-the-Wall.	5.3 TL completes Score Summary Worksheet	<b><u>KEY</u></b>  <i>ATL-Assistant Team Leader</i>
1.4 Prework – Oct (Time to complete prework: 33-43 hours.) Examiners <u>submit</u> completed prework at ex training	2.4 Read the applicant's OP and identify KF for P1a, P1b, P2a, P2b, and P2c. Develop a list of KF in word doc. Forward to TL.	3.4 Read the consensus comments and scoring for Items in your backup Category assignment and provide feedback to the Category Lead by phone, or in software by <i>(date)</i> . Review the draft list of KT.	4.4 Draft SV scorebook before leaving site. Return all applicant documents. Sign Scorebook.	5.4 TL discusses FBR and scores with Lead Judge	<b><i>ELRC – TPE's Examiner Learning Resource Center</i></b> <b><i>FB - Feedback</i></b> <b><i>FBR-Feedback Report</i></b>
1.5 If invited as a Team Leader or ATL, attend Team Leader Training late October.	2.5 TL will enter KF into software for team to review. Recommend changes to KF to TL by <i>(date)</i> . Team members to use common KF list going forward.	3.5 Read the feedback provided by your Category backup and revise your Strength & OFI comments and re-score as appropriate in software by <i>(date)</i>	4.5 Participate in closing meeting after which there are no further questions or interviews with applicant.	5.5 TL makes revisions per discussion with Lead Judge	<b><i>IR -Independent Review</i></b> <b><i>KF – Key Factors</i></b> <b><i>KT-Key Themes</i></b> <b><i>OFI-Opportunities for Improvement</i></b>
1.6 Attend Examiner Training in November	2.6 Analyze the applicant's response to each Item. In software, select KF, Item reference, record Strengths & OFIs, evidence, & ADLI/LeTCI. Draft <b>1 Strength &amp; 1 OFI</b> comment <i>for each Item</i> . Write concisely. Use Comment Guidelines for help.	3.6 Once all comments are posted, read <u>all</u> consensus comments & scoring for <u>all</u> Categories. Provide feedback to the Category Lead in software by <i>(date)</i> .	<b>4.6 Very important:</b> Hold all paperwork and notes from SV until instructed to destroy	5.6 Judges meet to decide award levels and make recommendations to Board of Trustees	<b><i>OP-Organizational Profile</i></b> <b><i>RS-Resource Sheet</i></b> <b><i>SV-Site Visit</i></b> <b><i>SVI-Site Visit Issue</i></b> <b><i>TL-Team Leader</i></b>
1.7 Examiners receive 50-page application early-mid Dec. Notify TPE immediately of any Conflict of Interest.	2.7 Score each Item using the appropriate scoring guidelines – Process or Results. Indicate scoring range and percent score <i>for each Item</i> . Complete IR wkshts in software by <i>(date)</i> . Review draft of KT posted by TL in software.	3.7 Attend Consensus Meeting: resolve consensus issues & rewrite comments. Ensure comments are well-developed and FB-ready. Re-score where necessary. Review KT.		5.7 Board of Trustees ratify awards. TPE President/CEO contacts applicants with award level	





## The Partnership for Excellence Board of Examiners

### Code of Ethical Conduct

Members of The Partnership for Excellence Board of Examiners pledge to uphold, and be guided by, these professional principles in the fulfillment of their responsibilities: integrity, professional conduct, confidentiality, and respect for intellectual property. In promoting high standards of public service and ethical conduct, they will ...

1. conduct themselves professionally, guided by truth, accuracy, fairness, respect, and responsibility in all their interactions
2. avoid representing conflicting or competing interests, or placing themselves in such a position where their interest may be in conflict—or appear to be in conflict—with the purposes and administration of the Award
3. safeguard the confidences of all parties involved in the judging or examination of present or former applicants
4. protect confidential information and avoid disclosures that may in any way influence the Award integrity or process, currently or in the future
5. not serve any private or special interest in their fulfillment of the duties of an Examiner, therefore excluding by definition the examination of any organization or subunit of an organization that employs them or has a consulting arrangement in effect or anticipated with them
6. not serve as Examiners of a primary competitor or customer or supplier of any organization (or subunit of an organization) that employs them, that they have a financial interest in, or with which they anticipate a consulting arrangement, or are otherwise involved
7. not intentionally communicate false or misleading information that may compromise the integrity of the Award process or decisions therein
8. make it clear, when establishing links from their own websites to TPE website, that users will be taken to the official TPE website
9. never approach an organization they have evaluated for their personal gain, including the establishment of an employment or consulting relationship, and, if approached by an organization they have evaluated, not accept employment from that organization for a period of three years after the evaluation
10. maintain and safeguard fairness in the examination process and the confidentiality of all Award application information, including the identity of applicants
11. treat as confidential all information about the applicant and the applicant's operation gained through the evaluation process, and take the following precautions:
  - a. Applicant information is not discussed with anyone, including other Examiners, with the exceptions of designated team members, Judges, TPE Award administrator and staff, and TPE Board of Trustees. This includes information contained in the written application as well as any additional information obtained during a site visit.
  - b. Names of applicants are not disclosed during or after the application review process.
  - c. No copies of application information are made or retained.
  - d. No notes, written or electronic, pertaining to the application are retained. *(TPE or your Team Leader will notify Examiners when to destroy all notes.)*

- e. No applicant information is adapted and/or used subsequent to the review process, unless the information is publicly released by the applicant (*at the annual Quest for Success Conference, for example*).
- f. Examiners do not reveal or discuss with other Examiners, either during training or during the application review phases, their participation with an organization in the preparation of an Award application.
12. personally and independently score all assigned applications
13. during Independent and Consensus Reviews, not communicate with the applicant organization, unless instructed by the Team Leader, or in any manner seek additional documentation, information, or clarification about the applicant's organization. This restriction includes Internet searches.
14. during the entire evaluation cycle use only applicant-specific information provided by the applicant. Not at anytime use independently gathered information on the applicant, e.g. from the press, web sites, or other social media.
15. not at any time (*during or after the evaluation cycle*) independently give feedback to applicants regarding scoring or overall performance
16. upon completion of the Examiner Preparation Course, be able to use the following designation: Examiner, The Partnership for Excellence, and year(s) served.
17. during the consensus and site visit processes, encourage and maintain a professional working environment that promotes respect for the Award applicants, their employees, and all members of the Examiner team
18. when participating in a site visit, respect the climate, culture, and values of the organization being evaluated

Furthermore, board members enhance and advance The Partnership for Excellence as it serves to stimulate U.S. companies and organizations to improve quality, productivity, and overall performance. **All applicants to the TPE Board of Examiners must pledge to abide by this Code of Ethical Conduct.**

*I understand and agree to the responsibilities of being an TPE examiner and  
I agree to abide by TPE's Code of Ethical Conduct.*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## TPE CONFLICT OF INTEREST DETERMINATION WORKSHEET

IMMEDIATELY UPON RECEIPT OF THIS APPLICATION, CHECK FOR CONFLICTS OF INTEREST.

The purpose of this worksheet is to ensure that you do not have a real conflict of interest or what could be perceived as a conflict of interest with this applicant. The integrity of the TPE Award Program hinges in large part on the avoidance of conflicts of interest.

### Conflict of Interest Determination Process

**Step 1:** Read the applicant's Notification of Intent to Apply and Eligibility Form, the Organizational Profile, and the organization charts, and skim all figures in the application.

**Step 2:** Answer the following questions. If you answer "yes" or "don't know" (DK) to one or more of the questions below, call Margot Hoffman at (614) 425-7157 *immediately to discuss the situation*. Do not inquire within your own organization; such inquiry could reveal the identity of the applicant.

**Step 3:** If the answer to all questions is "no" Email [lauren.browning@thepartnershipforexcellence.org](mailto:lauren.browning@thepartnershipforexcellence.org) the completed checklist and signed statement within **2 business days of receipt**.

1. Is the applicant your current employer, client, or parent organization? Yes  No  DK
2. Is the applicant currently owned or controlled by your employer, client, or parent (e.g., another subunit of your parent)? Yes  No  DK
3. Have you recently (within five years) left or retired from the applicant, the applicant's parent, or another subunit of the parent? Yes  No  DK
4. Is your employer or client listed as a key supplier, partner, customer, competitor, or benchmark of the applicant? Yes  No  DK
5. Is the applicant or the applicant's parent a key partner, customer, or competitor of your employer, your parent, or a subdivision of your employer? ("Key" may be defined as constituting at least 5 percent.) Yes  No  DK
6. Did you help prepare or review (paid or unpaid) all or part of the application or evaluate the applicant within the last five years? Yes  No  DK
7. Do you or a family member have a financial interest in the applicant, the applicant's parent, or a key competitor of the applicant? (This includes financial interests such as stocks, bonds, and retirement funds. Mutual fund holdings are of concern only if the mutual fund family is the applicant.) Yes  No  DK
8. Do you have considerable knowledge about the applicant through personal interactions (paid or unpaid), company relationships, family, or friends? Yes  No  DK
9. Do you know of any reason why you might have a real or perceived conflict with this applicant? Yes  No  DK

Examples of such conflicts include the following:

- Do you know anyone on the organization chart?
- Does a close relative work for the applicant?
- Have you recently interviewed with the applicant?

## CONFLICT OF INTEREST STATEMENT

As a member of The Partnership for Excellence Board of Examiners, I have voluntarily responded to the above questions and contacted the TPE Office for further direction should any of the questions be indicated with a "Yes" response.

I confirm the accuracy of the responses I have indicated, and I reaffirm my willingness to abide by the Code of Ethical Conduct.

I will not disclose any information gained through the evaluation of the applicant about the applicant; the applicant's clients, competitors, customers, or suppliers; or any other associated person or organization to anyone other than those in The Partnership for Excellence directly involved with the applicant review process.

I certify that I have read and understand the above statement.

Applicant Number \_\_\_\_\_

Name of Examiner \_\_\_\_\_ Date \_\_\_\_\_  
(Please print name)

Signature of Examiner \_\_\_\_\_

Email ([lauren.browning@thepartnershipforexcellence.org](mailto:lauren.browning@thepartnershipforexcellence.org)) the completed checklist and signed statement within **2 business days of receipt**.

## Key Factors Fact Sheet

Key factors are significant attributes of an organization that influence the way the organization operates.

### Examiners use key factors to

- Provide more accurate and meaningful feedback to the applicant.
- Understand the areas of the Criteria that are of greatest importance to the applicant.
- Understand the key points to investigate during the consensus and site visit stages of the award process.

### Judges use key factors to

- Quickly acquaint themselves with the applicant.
- Focus on what is most important.

### Examples of key factors

- mission, vision and values
- core competencies
- employee/staff profile
- governance system
- governance structure
- customer and market segments and customer requirements
- competitive position
- strategic challenges/strategic advantages

### Key factors can be found in several places

- Most will be found in the Organizational Profile.
- A few will be found in the responses to the Criteria items.
- A few may be found in the Intent to Apply form.
- It is important that examiners consider key factors wherever they are found in the application.

### Key factor format essentials

- The purpose of key factors is to give a concise summary of the most important aspects of the applicant's organizational environment. Each key factor describes a significant fact about or aspect of the applicant, such as environment, key working relationships, and strategic challenges.
- Enter the key factors into one of five areas to address outlined in the Organizational Profile:
  - Organizational Environment
  - Organizational Relationships
  - Competitive Environment
  - Strategic Context
  - Performance Improvement System
- Use phrases rather than complete sentences.
- Do not cut and paste the entire Organizational Profile into a key factors list. Use discretion.
- Revise your list of key factors throughout the evaluation process as additional information and insights are gained during the consensus and site visit stages.

### Key factors and independent review

As you begin independent review for each item, you will be asked to enter the key factors that are relevant to that item:

- Consider which key factors would impact individual item requirements.
- Ask yourself: "will it make a difference in my assessment of this item?"
- Identify the 4-6 key factors that are most relevant for each item – these will be a subset of your complete list of key factors.
- Select these from the drop-down menu on each item from the IR Worksheets screen using the "Relevant Key Factor" panel in the online Examiner software.

[The Partnership for Excellence Key Factors Template for  
*Health Care Organizations 2021-2022*

Team # \_\_\_\_\_ Examiner: \_\_\_\_\_ Date: \_\_\_\_\_

#### P.1 Organizational Description

##### a. Organizational Environment

- (1) Health Care Service Offerings
- (2) Mission, Vision, Values, and Culture
- (3) Workforce Profile
- (4) Assets
- (5) Regulatory Environment

##### b. Organizational Relationships

- (1) Organizational Structure
- (2) Patients, Other Customers, and Stakeholders
- (3) Suppliers, Partners, and Collaborators

#### P.2 Organizational Situation

##### a. Competitive Environment

- (1) Competitive Position
- (2) Competitiveness Changes
- (3) Comparative Data

##### b. Strategic Context

##### c. Performance Improvement System





# Copansburg Regional Health System Case Study Key Factors

## ▲ Key Factors Worksheet

### P.1a Organizational Environment

**Organization Description** Not-for-profit integrated delivery health care provider. Service area of approximately 2,000 square miles includes both rural and urban areas. System created in 2000 with merger of two regional health care providers. Significant growth organically and through acquisitions

**Service Offerings** Five hospitals include a teaching hospital with 120 residents and service lines of cardiology, oncology, orthopedics, women's and children's health, behavioral health/substance abuse, and neurology. Outpatient and post-acute service lines (home health, hospice, and durable medical equipment [DME]) generate 70% of the total revenue. Diagnostic and treatment centers, joint venture (JV) surgery centers, imaging and rehabilitation services, urgent care, and 750-member multi-specialty medical group along with 420 independent physician members. Operates health insurance plans

**Mission, Vision, Values** Mission – provide outstanding health care services to improve the health of all citizens in the service area; Vision – to be among America's best health systems; Values – WE CARE: World-class medicine, Efficiency, Compassion, Accountability, Respect, Excellence

**Core Competencies** Safe, high-quality clinical care; efficiency in operations

**Workforce profile** Workforce segments: 9,830 employees (5,730 clinical; 4,100 non-clinical), 1,290 physicians (750 employed, 420 non-employed), 140 students (100 nursing, 40 other), and 500 volunteers (400 adults, 100 teens). Organized bargaining units for nurses and environmental and facilities workers

**Workforce Engagement Factors** Clinical employees: support of clinical practice, competitive compensation, collegial environment, safe environment, appreciation, and wellness. Non-clinical employees: collegial environment, competitive compensation, wellness, and ability to work remotely. Employed physicians: support of clinical practice, competitive compensation, staff competency, and support for service growth. Non-employed physicians: ease of practice, staff competency, and support for service growth. Students: safe learning environment, expert clinical faculty, and career acceleration. Volunteers: meaningful work, appreciation, and wellness

**Assets** Five hospitals: 600-bed, 150-bed, 50-bed (2), and 25-bed critical access; corporate office building; outpatient facilities; surgery centers; imaging centers; and urgent care and rehabilitation therapy facilities. Equipment: imaging, radiation oncology, e-ICU (intensive care unit), cardiology, neurosurgery, and mobile clinic. Nonphysical assets: Apex electronic medical record (EMR) software, telehealth platform, analytics platform, and residency curriculum and programming

**Regulatory Environment** Heavily regulated by federal, state, and industry organizations. Federal: Centers for Medicare and Medicaid Services (CMS), Occupational Safety and Health Administration (OSHA), Office of Inspector General (OIG), Office for Civil Rights (OCR), Equal Employment Opportunity Commission (EEOC), Food and Drug Administration (FDA), Environmental Protection Agency (EPA), Internal Revenue Service (IRS), and Department of Energy (DOE). State: Department of Health, insurance, Medicaid services, and emergency medical services. Third layer of regulators include United Practice, American Surgeons Group, American Pathologists Group, Accreditation Council for Graduate Healthcare Education, Radiologists Group of America, and Commission of Education Advancement

### P.1b Organizational Relationships

**Organization Structure** 16-member volunteer board of trustees (BOT), local advisory boards at all hospitals serving three-year terms that can be re-elected twice. Officers: Chair, Vice-Chair, Secretary, Treasurer. Committees: Quality, Finance, Governance, Risk Management, and Executive. Chief Executive Officer (CEO) reports to BOT. Foundation has separate 12-member community-based advisory board

**Leadership Structure** Executive Leadership Team (ELT): CEO and direct reports; Senior Leadership Team (SLT) in each business unit includes senior leader and direct reports. Corporate office provides strategic planning, marketing, finance, legal, risk management, accreditation, information technology (IT), biomedical services, and human resources (HR) services

**Customers and Stakeholders** Key customer and requirements: patients (inpatient, emergency care, outpatient, post-acute care, insurance plan members): access to care, high-quality and safe care, service excellence, participation in care, and value. Second key customer and requirements: family members (other customers):

high-quality and safe care, service excellence, communication, and access to loved ones. Ultimate customer and requirements: communities served: access to care, high-quality and safe care, value, scope of services, and societal responsibility

**Suppliers, Partners, and Collaborators** Suppliers: sell supplies, equipment, drugs, and services for core operations. Key requirements: quality of products/services, availability of products/services, and cost. Partnerships: key equity partnerships with > 51% equity, three surgery centers, six imaging centers, city government, university school of medicine, nursing, and pharmacy. Collaborators: county health department, regional Federally Qualified Healthcare Centers (FQHC), state office for rural health, and Communities of Excellence 2026 (COE)

### P.2a Competitive Environment

**Competitive Position** Market share leader for almost all clinical services in region. Competitors: university academic medical centers (AMCs) (400-bed and 450-bed), national hospital corporation (250-bed), independent hospitals, outpatient centers (imaging, surgery, physical therapy [PT], and urgent care), and health insurance plans

**Competitiveness Changes** Potential mergers of independent hospitals with other. Closure of rural hospitals presents opportunities for collaboration. For-profit surgery center has been approved in primary market space. **Comparative Data** Internal and external. Covid has disrupted comparative data. CMS, Consumer Assessment of Healthcare Providers and Systems (CAHPS), Centers for Disease Control and Prevention (CDC), National Healthcare Safety Network (NHSN), Healthcare Effectiveness Data and Information Set (HEDIS), ASG, National Database of Care Quality Factors (NDCQF), Medical Agency Research and Quality, Bureau of Labor Statistics (BLS), State Health Group, Kress Daney, National Data Sort Corporation, Carerank, Voorlan, LeapCore, Zandi's Rating Agency, and Craigly Rating Agency

### P.2b Strategic Context

**Strategic Challenges** Workforce burnout; shortages of nurses, technologists, and some physician specialties; national and state health care payment changes; increasing costs of drugs; cybersecurity and emergency preparedness; and difficulty in reducing health disparities

**Strategic Advantages** System scale that helps create a cost advantage, integrated EMR for all entities that provides for a convenient experience and supports telehealth, market share leadership, and resilience

**Strategic Opportunities** Embedding resilience in operations, increasing connectivity in rural and disadvantaged urban areas, and increasing health care access throughout service area

**Strategic Objectives** Achieve top-decile performance in customer excellence, achieve top-decile performance in workforce excellence, achieve top-decile performance in financial excellence, and achieve top-decile performance in process excellence

### P.2c PERFORMANCE Improvement System

**Performance Improvement System** Baldrige framework – all employees trained in the framework and Plan-Do-Check-Act (PDCA) methodology for daily improvement. Performance Improvement Council (PIC) selects improvement projects and assigns to a team. Institutional Review Board (IRB) supports innovation in medical care. Performance Excellence and Strategy Teams identify opportunities for intelligent risks to pursue.



# Baldrige Comment Guidelines

The applicant is the customer for your feedback comments. Your goal is to meet the customer requirements below.

## Actionable

The applicant can take action based on the comment and understand the potential benefit.

Include these elements in your comments. Arrange them in the most readable way for the applicant.

- **A concise opening statement of the main idea (the “nugget”).** Include only one main idea per comment. If you have several, either choose one, or combine them into a higher-level, more general nugget. If something “is not clear,” describe what is missing.
- **The relevance of this main idea to the applicant.** Use a key factor to show the relevance—why the comment is important to the applicant. Include just one point of relevance per comment.
- **One or two examples to support and clarify the main idea.** Choose examples from the application that clarify the strength or opportunity for improvement. If you have many, choose the most important ones, or group them.

## Aligned

The comment reflects the Criteria and reflects the scoring range you have chosen.

Write comments on the basic, overall, or multiple Criteria questions that are most important to the applicant; ensure that the comments align with the score. Use language from the Criteria.

Use only enough Criteria language to add clarity. Seek to **add value rather than restate information.**

Point out areas of strength or opportunities for improvement based on the **evaluation factors (ADLI or LeTCI)**. Use language from the Scoring Guidelines. In each comment, focus on just one or two evaluation factors.

Ensure that the comment **does not contradict other comments** in the same item or other items.

## Accurate

The facts and data are correct.

Use the **applicant’s terminology.**

Use the **correct names and terms** (e.g., for the applicant’s processes and for figure names).

**Check the facts and data** in your comment. For example, if you state that “there is no evidence,” check text and figures to ensure that this is true; if you note adverse trends or a lack of comparative data, make sure this is true.

Don’t “parrot” the application; seek to **add value rather than restate information.**

## Appropriate

The tone is professional and polite.

**Don’t comment on the applicant’s style of writing or data presentation.**

**Don’t use jargon or acronyms unless they are the applicant’s terms.**

**Don’t be judgmental** by using terms such as “bad” or “inadequate.”

**Don’t be prescriptive** by telling the applicant what it “should” do or recommending specific practices that are **beyond the Criteria.**

**Don’t assert your personal opinions.**

# Embrace your inner NERD



What I need...	What it means...	An example is... (from Item 3.1 <u>Copansburg Regional Health System Case Study</u> )
<b>Nugget</b>	A concise opening statement of the main idea	Use multiple methods to listen to patients and other customers to obtain actionable information across the stages of the customer relationship.
<b>Evidence</b>	One or two examples that support the <b>Nugget</b>	Develop customer listening posts based on PDCA ..., followed by focus group interviews ..., testing the draft method, gathering feedback, refining the design, and checking to assess effectiveness (Figure 3.1-2); Sample of Key Patient, Family Member, and Other Customer Listening Methods (Figure 3.1-1).
<b>Relevance</b>	Describe the importance of the <b>Nugget</b> to the applicant	May enable applicant to learn from patients and meet key requirements as it is striving to perform at the top-decile level.
<b>Done</b>	Quit writing!!!	



Application Number:				
<b>SCORE SUMMARY WORKSHEET</b>				
	Total Points Possible	Percentage Score 0–100%	Score (A x B)	Scoring Band
<b>Summary of Criteria Items</b>	<b>Column A</b>	<b>Column B</b>	<b>Column C</b>	<b>Column D</b>
<b>Category 1 (Process)</b>				
1.1	70		0	
1.2	50		0	
<b>Category Total</b>	<b>120</b>		<b>0</b>	
<b>Category 2 (Process)</b>				
2.1	45		0	
2.2	40		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
<b>Category 3 (Process)</b>				
3.1	40		0	
3.2	45		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
<b>Category 4 (Process)</b>				
4.1	45		0	
4.2	45		0	
<b>Category Total</b>	<b>90</b>		<b>0</b>	
<b>Category 5 (Process)</b>				
5.1	40		0	
5.2	45		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
<b>Category 6 (Process)</b>				
6.1	45		0	
6.2	40		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
				<b>Process Scoring Band</b> ↓
<b>SUBTOTAL Cat. 1–6</b>	<b>550</b>		<b>0</b>	
<b>Category 7 (Results)</b>				
7.1	120		0	
7.2	80		0	
7.3	80		0	
7.4	80		0	
7.5	90		0	
				<b>Results Scoring Band</b> ↓
<b>SUBTOTAL Cat. 7</b>	<b>450</b>		<b>0</b>	
<b>GRAND TOTAL (D)</b>	<b>1,000</b>	<b>TOTAL SCORE</b>	<b>0</b>	





## 2021–2022 Scoring Band Descriptors

<i>Band Score / Band Number</i>	<i>PROCESS Descriptor</i>	<i>Band Score / Band Number</i>	<i>RESULTS Descriptor</i>
0–150	1 The organization demonstrates early stages of developing and implementing approaches to the basic Criteria questions, with deployment lagging and inhibiting progress. Improvement efforts are a combination of problem solving and an early general improvement orientation.	0–125	1 A few results are reported responsive to the basic Criteria questions. These results generally lack trend and comparative data.
151–200	2 The organization demonstrates effective, systematic approaches generally responsive to the basic Criteria questions, with some areas or work units in the early stages of deployment. The organization has developed a general improvement orientation that is forward-looking.	126–170	2 Results are reported for several areas responsive to the basic Criteria questions and the accomplishment of the organization's mission. Some of these results demonstrate good performance levels. The use of comparative and trend data is in the early stages.
201–260	3 The organization demonstrates effective, systematic approaches responsive to the basic questions in most Criteria items, with some areas or work units still in the early stages of deployment. Key processes are beginning to be systematically evaluated and improved.	171–210	3 Results address areas of importance to the basic Criteria questions and accomplishment of the organization's mission, with good performance being achieved. Comparative and trend data are available for some of these important results areas, and some trends are beneficial.
261–320	4 The organization demonstrates effective, systematic approaches generally responsive to the overall Criteria questions. Deployment may vary in some areas or work units. Key processes benefit from fact-based evaluation and improvement, and approaches are being aligned with overall organizational needs.	211–255	4 Results address some key customer/stakeholder, market, and process requirements, and they demonstrate good relative performance against relevant comparisons. Beneficial trends and/or good performance are reported for many areas of importance to the overall Criteria questions and the accomplishment of the organization's mission.
321–370	5 The organization demonstrates effective, systematic, well-deployed approaches responsive to the overall questions in most Criteria items. The organization demonstrates a fact-based, systematic evaluation and improvement process and organizational learning, including some innovation, that result in improving the effectiveness and efficiency of key processes.	256–300	5 Results address most key customer/stakeholder, market, and process requirements, and they demonstrate areas of strength against relevant comparisons and/or benchmarks. Beneficial trends and/or good performance are reported for most areas of importance to the overall Criteria questions and the accomplishment of the organization's mission.
371–430	6 The organization demonstrates refined approaches generally responsive to the multiple Criteria questions. These approaches are characterized by the use of key measures and good deployment in most areas. Organizational learning, including innovation and sharing of best practices, is a key management tool, and there is some integration of approaches with current and future organizational needs.	301–345	6 Results address most key customer/stakeholder, market, and process requirements, as well as many action plan requirements. Results demonstrate beneficial trends in areas of importance to the multiple Criteria questions and the accomplishment of the organization's mission, and the organization is an industry* leader in some results areas.
431–480	7 The organization demonstrates refined approaches responsive to the multiple questions in most Criteria items. It also demonstrates innovation, excellent deployment, and good-to-excellent use of measures in most areas. There is good-to-excellent integration of approaches with organizational needs; organizational analysis, learning through innovation, and sharing of best practices are key management strategies.	346–390	7 Results address most key customer/stakeholder, market, process, and action plan requirements. Results demonstrate excellent organizational performance levels and some industry* leadership. Results demonstrate sustained beneficial trends in most areas of importance to the multiple Criteria questions and the accomplishment of the organization's mission.
481–550	8 The organization demonstrates outstanding approaches fully responsive to the multiple Criteria questions. Approaches are fully deployed and demonstrate excellent, sustained use of measures. There is excellent integration of approaches with organizational needs. Organizational analysis, learning through innovation, and sharing of best practices are pervasive.	391–450	8 Results fully address key customer/stakeholder, market, process, and action plan requirements and include projections of future performance. Results demonstrate excellent organizational performance levels, as well as national and world leadership. Results demonstrate sustained beneficial trends in all areas of importance to the multiple Criteria questions and the accomplishment of the organization's mission.

\* "industry" refers to other organizations performing substantially the same functions, thereby facilitating direct comparisons.





# Process Strength “NERD” Comment Example

3.2c The applicant systematically uses VOC data to create a patient-focused culture, with evidence of learning. Data are categorized, aggregated, and used at multiple levels: front line for quick adjustments, middle management for functional changes, and senior leadership for new services/investments. Data are aggregated quarterly and listening posts and customer segments are evaluated annually. This systematic approach may help the applicant achieve its strategic objective of top-decile performance in customer excellence.

**Nugget** - **Evidence** - **Relevance**



# Process OFI “NERD” Comment Example

5.1a(4) It is unclear how the applicant systematically organizes and manages its workforce to reinforce organizational resilience and agility. Beyond anecdotal examples of resilience and agility, the applicant has not made evident a systematic process to organize and manage its workforce to reinforce organizational resilience and agility. Additionally, it is not evident how the applicant organizes and manages its workforce to reinforce a patient focus and exceed performance expectations.

Systematically organizing its workforce to reinforce organizational resilience and agility may help the applicant address its strategic opportunity of embedding resilience in its operations.

**Nugget - Evidence – Relevance**



# Comment Improvement Assignment

*For each of the two comments provided, review the comment and using the Baldrige (4A) Comment Guidelines identify ways to improve the comment. In the text box below each comment, make notes on how to improve the comment or re-write the comment to be more valuable to the applicant.*

- **Strength Comment:**

- 2.1a(1) The applicant uses PDCA for its SPP to ensure cycles of evaluation. The process engages senior leaders, and the plan incorporates short-term, long-term and ultra-long term planning horizons.
  - *How could you improve this Feedback Ready strength comment?*

- **OFl Comment:**

- 2.1b(2) While consideration is given to balancing needs, it is not apparent how the applicant considers needs of all stakeholders. For example, it is not clear how needs are balanced during budgeting. This approach does not support the applicant's vision.
  - *How could you improve this Feedback Ready OFI comment?*





# EXAMINER TRAINING DAY 2

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November 2022

# DAY TWO



Any "Ah Ha!" insights over night?



Any lingering questions you didn't ask yesterday?

➤ ***Review Assignment – Improving Comments***

# Pre-work Item 7.1

Select & come to consensus for

Key factors

Strengths

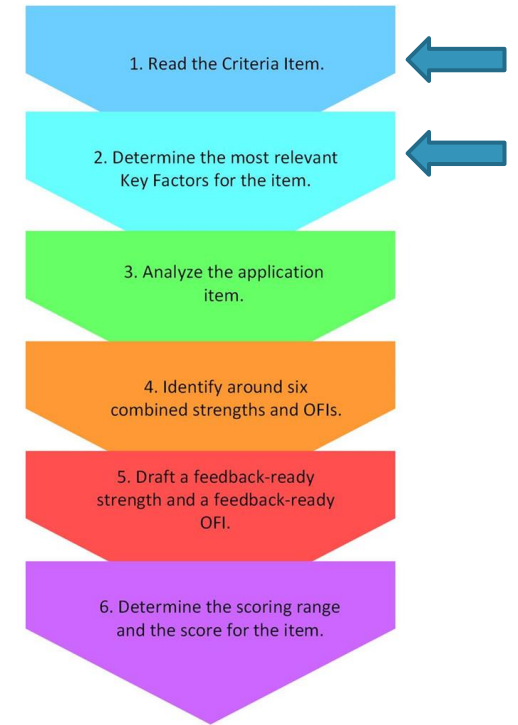
OFls

Scoring

# Steps 1 & 2: Independent Review (IR)

## Independent Review (IR): Steps 1 & 2

- What are key factors and where are they found?
- How do you decide which 4-6 key factors to include?
- Will you change your prework as a result of this discussion?
  - If yes, what will you change?



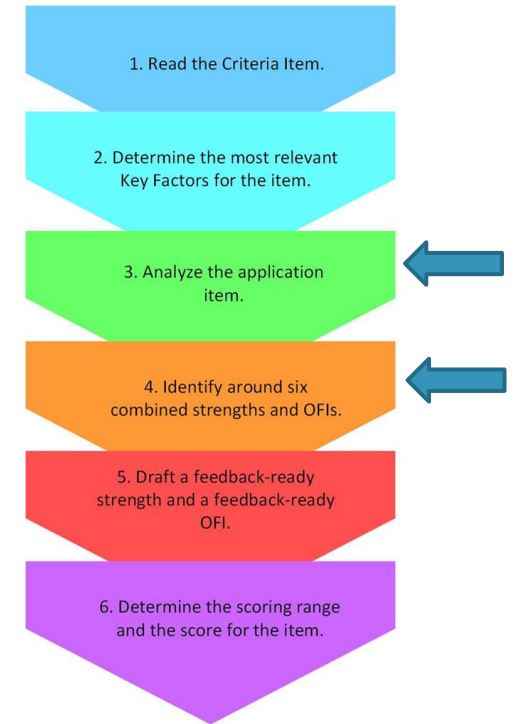
# Potential Key Factors for Item 7.1



# Steps 3 & 4: Application Analysis – Strengths & OFI

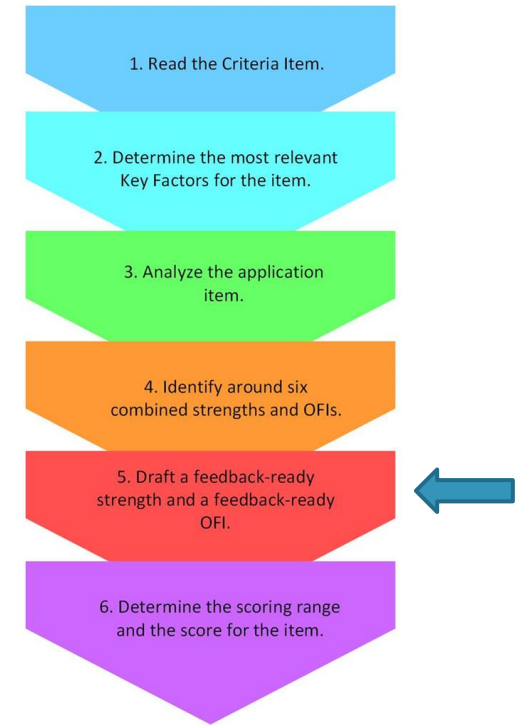
- Levels
- Trends
- Comparisons
- Integration

LeTCl



# Step 5: Comment Writing

- Each person share a feedback-ready comment from pre-work assignment for 7.1
- Have partner evaluate using the Comment Guidelines



*Time: 10 minutes*

Appendix

# Results Strength “NERD” Comment

7.5a(1) Most results for key financial performance measures demonstrate beneficial trends and show areas of leadership when evaluated against relevant benchmarks and comparisons. For example, Net Patient Revenue (Figure 7.5-1) results increased from \$2,878.20 in 2015 to \$3,578 in 2021, outperforming all competitors and Zandi’s A1 rating, Operating Margin (Figure 7.5-2) results increased from 2.4% in 2015 to 4.4% in 2021 and outperformed Zandi’s A1 rating, and Days Cash on Hands (Figure 7.5-4) results show a beneficial trend, with levels approaching Zandi’s A1 in each year, and comparing favorably to Zandi’s A2 each year. Strong financial performance may help the organization address its strategic challenges of national and state health care payment changes and increasing drug costs.

**Nugget Evidence Relevance**



# Results OFI “NERD” Comment

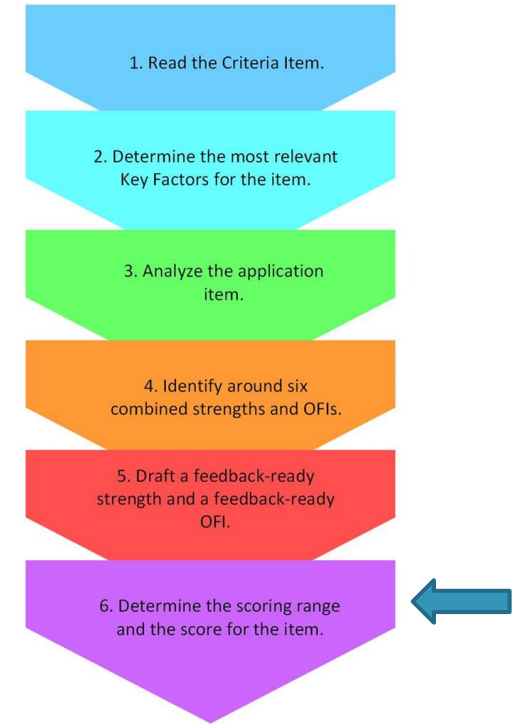
7.5b **Most key performance measures for strategic goals/action plans do not achieve top-decile performance.** The applicant set strategic objectives to achieve top-decile in customer excellence, workforce excellence, financial excellence, and process excellence and lists strategic goals/action plans and key performance measures for each of the four objectives (Figure 2.2-2). Only one of the 17 key performance measures, Operating Margin (Figure 7.5-2), demonstrates top-decile performance. Raising performance levels for most key performance measures could facilitate the achievement of the organization’s strategic objective to reach top-decile performance.

**Nugget Evidence Relevance**



# Step 6: Scoring

How do you determine the scoring range and score?



*Time: 10 minutes*

Appendix

# Results Scoring Guidelines – LeT

	Levels	Trends
0%-5%	There are <b>no</b> organizational results or results are <b>poor</b> .	Trend data are <b>not reported</b> or shown <b>mainly adverse</b> trends.
10%-25%	A few organizational performance results responsive to <b>basic question</b> and early <b>good performance</b> levels are evident.	<b>Some trend</b> data are reported, with <b>some adverse</b> trends evident.
30%-45%	<b>Good</b> organizational performance levels responsive to <b>basic question</b> .	<b>Some trend</b> data are reported, and most trends are <b>beneficial</b> .
50%-65%	<b>Good</b> organizational performance levels responsive to <b>overall questions</b> .	<b>Beneficial trends</b> are evident in areas of importance to the accomplishment of organization's <b>mission</b> .
70%-85%	<b>Good-to-excellent</b> organizational performance levels responsive to <b>multiple questions</b> .	Beneficial trends have <b>sustained</b> over time in areas of importance to the accomplishment of organization's <b>mission</b> .
90%-100%	<b>Excellent</b> organizational performance levels fully responsive to <b>multiple questions</b> .	Beneficial trends have <b>sustained</b> over time in <b>all</b> areas of importance to the accomplishment of organization's <b>mission</b> .

# Results Scoring Guidelines – CI

	Comparisons	Integration
0%-5%	Comparative information is <b>not reported</b> .	Results are <b>not reported</b> for any areas of importance to accomplishment of organization's mission.
10%-25%	<b>Little or no</b> comparative information is reported	Results are reported for a <b>few areas</b> of importance to accomplishment of organization's mission.
30%-45%	<b>Early stages</b> of obtaining comparative information are evident.	Results are reported for <b>many areas</b> of importance to accomplishment of organization's mission.
50%-65%	<b>Some</b> current performance levels have been evaluated against <b>relevant comparisons</b> &/or <b>benchmarks</b> and show areas of <b>good</b> relative performance.	Organizational performance results are reported for <b>most</b> key customer, market, and process requirements.
70%-85%	<b>Many to most trends</b> and current performance levels have been evaluated against relevant comparisons &/or benchmarks and show <b>areas of leadership</b> and very good relative performance.	Organizational performance results are reported for most key customer, market, process, and <b>action plan</b> requirements.
90%-100%	Industry and <b>benchmark leadership</b> is demonstrated in many areas.	Organizational performance results and <b>projections</b> are reported for most key customer, market, process, and action plan requirements.

# Pre-work Item 7.2

- Individual Work: 10 minutes
  - Review your Strengths and OFIs for 7.2
  - Review your feedback-ready comments
  - Review your scoring range and score
- Group Work: 15 minutes
  - Share what improvements you would make to your pre-work in any of those areas
- Large Group Debrief: 4 minutes



# Potential Key Factors for Item 7.2

# Non Pre-work Items

## Group Assignments:

Group 1: Item 7.3a(3)

Group 2: Item 7.4a(1)

Group 3: Item 7.5a(1)

# Step 1: Read the Criteria

## Group Activity

Develop brief summary of the overall meaning & intent of the **entire** Criteria item assigned

Capture bullets indicating;

Points of agreement on the meaning of the Criteria item

Examples of what you would expect to see in the application in response to Criteria

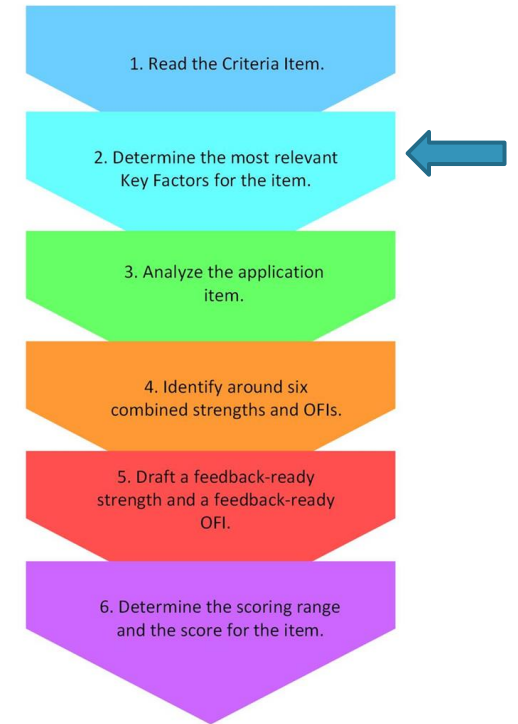
*Note: Steps 1 & 2 will be completed together*  
*Total time for both steps: 25 minutes in groups, 4 minute report out*



## Step 2: Determine most relevant key factors

### Group Activity

- Choose 4–6 key factors.
  - Refer to Consensus Scorebook Key Factors Worksheet & choose 4 - 6 that resonate the most for assigned Criteria item. **Appendix**
- Keep list of key factors for future use, but you do not need to report out on these.



*Note: Steps 1 & 2 will be completed together  
Total time for both steps: 25 minutes in groups, 4 minute report out*

# Step 3: Read & Analyze Relevant Section of Application

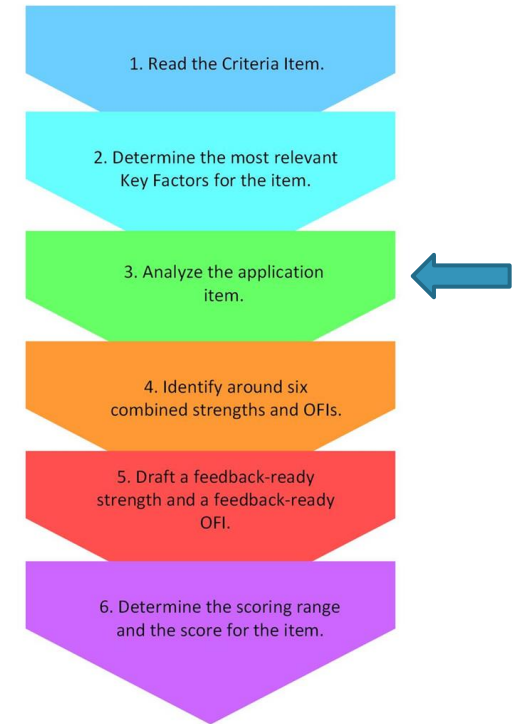
## Independent Reading and Analysis

Read your Criteria item area and analyze.

The goal is to analyze the application & identify around 6 potential strengths/OFIs that you will develop in step 4.

Please make sure to integrate lessons or tips you noted previously to improve your analysis.

*20 minutes*



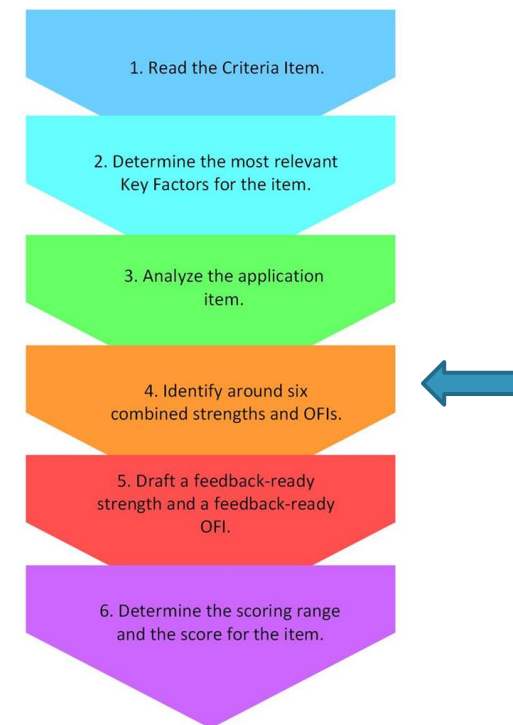
# Step 4: Determining Strengths & OFIs

## Breakout Group Activity (Discussion)

- Using a round-robin approach, share a strength and the rationale for the strength. Capture in a list.
- Do another round for the OFIs, capturing on flip list.
- Decide the most important key strengths/OFIs
  - Normally around 6 (for exercise at least one strength & one OFI)

Be prepared to discuss your group's selected strengths & OFIs, and why you would choose to include these or not include.

*20 minutes in groups, 4 minute report out*



# Step 5: Draft feedback ready comments

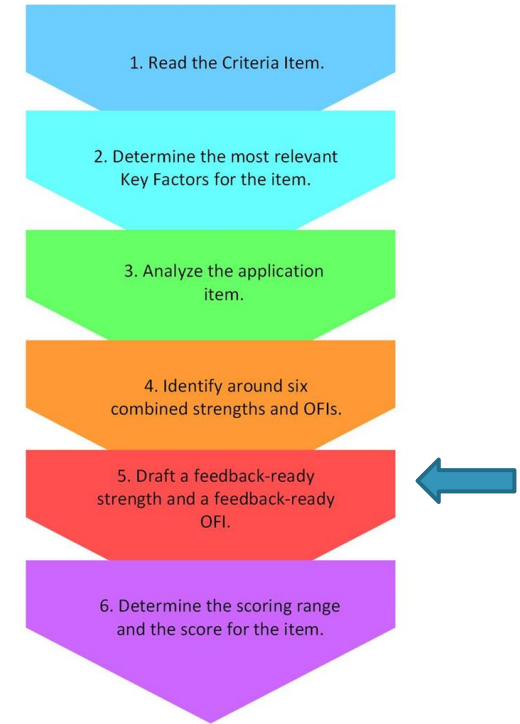
## Learning Objective

- Organize the information gleaned from the previous four steps and formulate two value-added comments

## Group Activity

- Identify one of the most important strengths or OFIs from Step 4
- Develop into feedback ready (NERD) comment
- Have someone document comment

*Time: 10 minutes + 5 minute debrief*



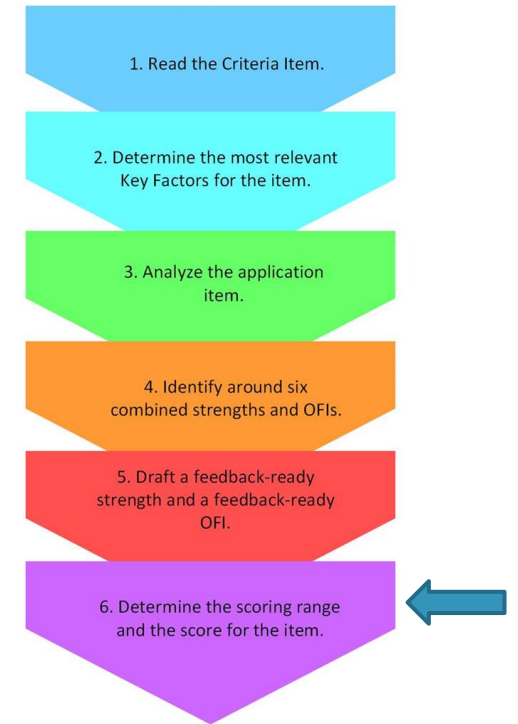


# Step 6: Scoring

- Individually assign a score for this item. Refer to the key learnings captured in Segment 1.
- Each individual shares his or her score for the item and rationale.
- The group discusses the scores and arrives at a scoring range and a score that best describes the applicant's level of maturity.
- Record scoring range and score.

Appendix

*Time: 8 minutes + 2 minute debrief*



# Consensus Review

Purpose, goals, outcomes

Process

How IR feeds into Consensus

Examiner role

Team Leader role

***Note: Consensus Meetings will be conducted virtually.***

**Appendix**

# Site Visit

Purpose goals, outcomes

Process

How consensus feeds into Site Visit

Examiner role

Team Leader role

***Note: Site Visits will be conducted virtually or a hybrid approach.***

**Appendix**

# Key Themes

Appear first in the feedback report

Addressed to applicant's senior leaders as an executive summary

Summarize most vital issues for organization as a whole, including what the organization must do to remain or become competitive and ensure long-term sustainability

Cut across items, reflect role model practices or important OFIs, relate to a key factor, and may tie to a core value

Strategic in nature, may address how well an organization is managing:

- Major change or improvement

- Competitiveness or social issues

- Significant customer, market, product or technological opportunities, challenges

**Appendix**

# Judging Process: Determination of Award Level Recommendations

- Lead Judge is advocate for Examiner team
  - Considers findings of Examiner team with emphasis given to site visit & supporting documents
  - Assesses applicant's understanding of performance excellence, leadership commitment, systematic performance excellence system in place, evidence of improvement cycles and positive results & trends with comparative data & benchmarks
  - May consider mitigating factors to implement a performance excellence system and key organizational factors &/or applicant's position in market/sector
  - Prepares Judge's Assessment Form of applicant and provides to Judges prior to Judges' Meeting
- At conclusion of discussion, Judges vote on recommended award level
  - A two-thirds "yes" vote is required to receive an award level
- For returning applicants, award level recommendations are compared to previous decisions to ensure consistency
- Evaluation of judging process & each judge occurs at conclusion of annual cycle to ensure continuous improvement

# Examiner Software



## *Assistance/Troubleshooting*

- Demo Video:  
<https://www.youtube.com/watch?v=hb6Lfg8z2B8>
- Lauren Browning, Training and Administration Manager  
(901) 830-4499  
[lauren.browning@thepartnershipforexcellence.org](mailto:lauren.browning@thepartnershipforexcellence.org)

# STRATEX APEX

## Formatting for Independent Review

### Strength/OFI

Add/Edit Comment

Type: Strength Important: No

Approach  Deployment  Learning  Integration\_Process  Innovation

Levels  Trends  Comparisons  Integration\_Results

**Nugget:** Applicant systematically deploys its strategy to its workforce, aligning goals with individual performance and improving the approach from a reactive push from leadership to a proactive process with staff input.

**Evidence:** In Step 7 of SPP (Figure 2.1-1), strategic goals are cascaded through Communication Process (Figure 1-1-3), and key outcomes are tracked through web-based program that aligns goals with

Label "Nugget" & "Evidence"

### Feedback Ready Comment

Add/Edit Comment

Type: OFI Important: No

Approach  Deployment  Learning  Integration\_Process  Innovation

Levels  Trends  Comparisons  Integration\_Results

**FB Ready:** results are missing for some measures of workforce-focused performance. For example, results are missing for the key driver of relationship with coworkers; for the workforce capability and capacity measure of skills and competencies by job description or staffing ratios; and for workforce climate processes, such as rounding for outcomes or the health, security, and accessibility factors shown in Figure 5.1-5. Monitoring these results may help the applicant correlate workforce measures with any adverse trends in the overall satisfaction measures.

Label "FB Ready"



# TPE Examiner Process 2021-2022



**THANK YOU!**

**QUESTIONS?**

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Please complete survey you will receive via email

For further questions/information:

Margot Hoffman

614-425-7157

[Margot.Hoffman@partnershipohio.org](mailto:Margot.Hoffman@partnershipohio.org)

# APPENDIX

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# Baldrige Comment Guidelines

The applicant is the customer for your feedback comments. Your goal is to meet the customer requirements below.

## Actionable

The applicant can take action based on the comment and understand the potential benefit.

Include these elements in your comments. Arrange them in the most readable way for the applicant.

- **A concise opening statement of the main idea (the “nugget”).** Include only one main idea per comment. If you have several, either choose one, or combine them into a higher-level, more general nugget. If something “is not clear,” describe what is missing.
- **The relevance of this main idea to the applicant.** Use a key factor to show the relevance—why the comment is important to the applicant. Include just one point of relevance per comment.
- **One or two examples to support and clarify the main idea.** Choose examples from the application that clarify the strength or opportunity for improvement. If you have many, choose the most important ones, or group them.

## Aligned

The comment reflects the Criteria and reflects the scoring range you have chosen.

Write comments on the basic, overall, or multiple Criteria questions that are most important to the applicant; ensure that the comments align with the score. Use language from the Criteria.

Use only enough Criteria language to add clarity. Seek to **add value rather than restate information.**

Point out areas of strength or opportunities for improvement based on the **evaluation factors (ADLI or LeTCI)**. Use language from the Scoring Guidelines. In each comment, focus on just one or two evaluation factors.

Ensure that the comment **does not contradict other comments** in the same item or other items.

## Accurate

The facts and data are correct.

Use the **applicant’s terminology.**

Use the **correct names and terms** (e.g., for the applicant’s processes and for figure names).

**Check the facts and data** in your comment. For example, if you state that “there is no evidence,” check text and figures to ensure that this is true; if you note adverse trends or a lack of comparative data, make sure this is true.

Don’t “parrot” the application; seek to **add value rather than restate information.**

## Appropriate

The tone is professional and polite.

**Don’t comment on the applicant’s style of writing or data presentation.**

**Don’t use jargon or acronyms unless they are the applicant’s terms.**

**Don’t be judgmental** by using terms such as “bad” or “inadequate.”

**Don’t be prescriptive** by telling the applicant what it “should” do or recommending specific practices that are **beyond the Criteria.**

**Don’t assert your personal opinions.**

Application Number:				
<b>SCORE SUMMARY WORKSHEET</b>				
	Total Points Possible	Percentage Score 0–100%	Score (A x B)	Scoring Band
<b>Summary of Criteria Items</b>	<b>Column A</b>	<b>Column B</b>	<b>Column C</b>	<b>Column D</b>
<b>Category 1 (Process)</b>				
1.1	70		0	
1.2	50		0	
<b>Category Total</b>	<b>120</b>		<b>0</b>	
<b>Category 2 (Process)</b>				
2.1	45		0	
2.2	40		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
<b>Category 3 (Process)</b>				
3.1	40		0	
3.2	45		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
<b>Category 4 (Process)</b>				
4.1	45		0	
4.2	45		0	
<b>Category Total</b>	<b>90</b>		<b>0</b>	
<b>Category 5 (Process)</b>				
5.1	40		0	
5.2	45		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
<b>Category 6 (Process)</b>				
6.1	45		0	
6.2	40		0	
<b>Category Total</b>	<b>85</b>		<b>0</b>	
				<b>Process Scoring Band</b> ↓
<b>SUBTOTAL Cat. 1–6</b>	<b>550</b>		<b>0</b>	
<b>Category 7 (Results)</b>				
7.1	120		0	
7.2	80		0	
7.3	80		0	
7.4	80		0	
7.5	90		0	
				<b>Results Scoring Band</b> ↓
<b>SUBTOTAL Cat. 7</b>	<b>450</b>		<b>0</b>	
<b>GRAND TOTAL (D)</b>	<b>1,000</b>	<b>TOTAL SCORE</b>	<b>0</b>	



## 2021–2022 Scoring Band Descriptors

<i>Band Score / Band Number</i>	<i>PROCESS Descriptor</i>	<i>Band Score / Band Number</i>	<i>RESULTS Descriptor</i>
0–150	1 The organization demonstrates early stages of developing and implementing approaches to the basic Criteria questions, with deployment lagging and inhibiting progress. Improvement efforts are a combination of problem solving and an early general improvement orientation.	0–125	1 A few results are reported responsive to the basic Criteria questions. These results generally lack trend and comparative data.
151–200	2 The organization demonstrates effective, systematic approaches generally responsive to the basic Criteria questions, with some areas or work units in the early stages of deployment. The organization has developed a general improvement orientation that is forward-looking.	126–170	2 Results are reported for several areas responsive to the basic Criteria questions and the accomplishment of the organization's mission. Some of these results demonstrate good performance levels. The use of comparative and trend data is in the early stages.
201–260	3 The organization demonstrates effective, systematic approaches responsive to the basic questions in most Criteria items, with some areas or work units still in the early stages of deployment. Key processes are beginning to be systematically evaluated and improved.	171–210	3 Results address areas of importance to the basic Criteria questions and accomplishment of the organization's mission, with good performance being achieved. Comparative and trend data are available for some of these important results areas, and some trends are beneficial.
261–320	4 The organization demonstrates effective, systematic approaches generally responsive to the overall Criteria questions. Deployment may vary in some areas or work units. Key processes benefit from fact-based evaluation and improvement, and approaches are being aligned with overall organizational needs.	211–255	4 Results address some key customer/stakeholder, market, and process requirements, and they demonstrate good relative performance against relevant comparisons. Beneficial trends and/or good performance are reported for many areas of importance to the overall Criteria questions and the accomplishment of the organization's mission.
321–370	5 The organization demonstrates effective, systematic, well-deployed approaches responsive to the overall questions in most Criteria items. The organization demonstrates a fact-based, systematic evaluation and improvement process and organizational learning, including some innovation, that result in improving the effectiveness and efficiency of key processes.	256–300	5 Results address most key customer/stakeholder, market, and process requirements, and they demonstrate areas of strength against relevant comparisons and/or benchmarks. Beneficial trends and/or good performance are reported for most areas of importance to the overall Criteria questions and the accomplishment of the organization's mission.
371–430	6 The organization demonstrates refined approaches generally responsive to the multiple Criteria questions. These approaches are characterized by the use of key measures and good deployment in most areas. Organizational learning, including innovation and sharing of best practices, is a key management tool, and there is some integration of approaches with current and future organizational needs.	301–345	6 Results address most key customer/stakeholder, market, and process requirements, as well as many action plan requirements. Results demonstrate beneficial trends in areas of importance to the multiple Criteria questions and the accomplishment of the organization's mission, and the organization is an industry* leader in some results areas.
431–480	7 The organization demonstrates refined approaches responsive to the multiple questions in most Criteria items. It also demonstrates innovation, excellent deployment, and good-to-excellent use of measures in most areas. There is good-to-excellent integration of approaches with organizational needs; organizational analysis, learning through innovation, and sharing of best practices are key management strategies.	346–390	7 Results address most key customer/stakeholder, market, process, and action plan requirements. Results demonstrate excellent organizational performance levels and some industry* leadership. Results demonstrate sustained beneficial trends in most areas of importance to the multiple Criteria questions and the accomplishment of the organization's mission.
481–550	8 The organization demonstrates outstanding approaches fully responsive to the multiple Criteria questions. Approaches are fully deployed and demonstrate excellent, sustained use of measures. There is excellent integration of approaches with organizational needs. Organizational analysis, learning through innovation, and sharing of best practices are pervasive.	391–450	8 Results fully address key customer/stakeholder, market, process, and action plan requirements and include projections of future performance. Results demonstrate excellent organizational performance levels, as well as national and world leadership. Results demonstrate sustained beneficial trends in all areas of importance to the multiple Criteria questions and the accomplishment of the organization's mission.

\* "industry" refers to other organizations performing substantially the same functions, thereby facilitating direct comparisons.





# Copansburg Regional Health System Case Study Key Factors

## ▲ Key Factors Worksheet

### P.1a Organizational Environment

**Organization Description** Not-for-profit integrated delivery health care provider. Service area of approximately 2,000 square miles includes both rural and urban areas. System created in 2000 with merger of two regional health care providers. Significant growth organically and through acquisitions

**Service Offerings** Five hospitals include a teaching hospital with 120 residents and service lines of cardiology, oncology, orthopedics, women's and children's health, behavioral health/substance abuse, and neurology. Outpatient and post-acute service lines (home health, hospice, and durable medical equipment [DME]) generate 70% of the total revenue. Diagnostic and treatment centers, joint venture (JV) surgery centers, imaging and rehabilitation services, urgent care, and 750-member multi-specialty medical group along with 420 independent physician members. Operates health insurance plans

**Mission, Vision, Values** Mission – provide outstanding health care services to improve the health of all citizens in the service area; Vision – to be among America's best health systems; Values – WE CARE: World-class medicine, Efficiency, Compassion, Accountability, Respect, Excellence

**Core Competencies** Safe, high-quality clinical care; efficiency in operations

**Workforce profile** Workforce segments: 9,830 employees (5,730 clinical; 4,100 non-clinical), 1,290 physicians (750 employed, 420 non-employed), 140 students (100 nursing, 40 other), and 500 volunteers (400 adults, 100 teens). Organized bargaining units for nurses and environmental and facilities workers

**Workforce Engagement Factors** Clinical employees: support of clinical practice, competitive compensation, collegial environment, safe environment, appreciation, and wellness. Non-clinical employees: collegial environment, competitive compensation, wellness, and ability to work remotely. Employed physicians: support of clinical practice, competitive compensation, staff competency, and support for service growth. Non-employed physicians: ease of practice, staff competency, and support for service growth. Students: safe learning environment, expert clinical faculty, and career acceleration. Volunteers: meaningful work, appreciation, and wellness

**Assets** Five hospitals: 600-bed, 150-bed, 50-bed (2), and 25-bed critical access; corporate office building; outpatient facilities; surgery centers; imaging centers; and urgent care and rehabilitation therapy facilities. Equipment: imaging, radiation oncology, e-ICU (intensive care unit), cardiology, neurosurgery, and mobile clinic. Nonphysical assets: Apex electronic medical record (EMR) software, telehealth platform, analytics platform, and residency curriculum and programming

**Regulatory Environment** Heavily regulated by federal, state, and industry organizations. Federal: Centers for Medicare and Medicaid Services (CMS), Occupational Safety and Health Administration (OSHA), Office of Inspector General (OIG), Office for Civil Rights (OCR), Equal Employment Opportunity Commission (EEOC), Food and Drug Administration (FDA), Environmental Protection Agency (EPA), Internal Revenue Service (IRS), and Department of Energy (DOE). State: Department of Health, insurance, Medicaid services, and emergency medical services. Third layer of regulators include United Practice, American Surgeons Group, American Pathologists Group, Accreditation Council for Graduate Healthcare Education, Radiologists Group of America, and Commission of Education Advancement

### P.1b Organizational Relationships

**Organization Structure** 16-member volunteer board of trustees (BOT), local advisory boards at all hospitals serving three-year terms that can be re-elected twice. Officers: Chair, Vice-Chair, Secretary, Treasurer. Committees: Quality, Finance, Governance, Risk Management, and Executive. Chief Executive Officer (CEO) reports to BOT. Foundation has separate 12-member community-based advisory board

**Leadership Structure** Executive Leadership Team (ELT): CEO and direct reports; Senior Leadership Team (SLT) in each business unit includes senior leader and direct reports. Corporate office provides strategic planning, marketing, finance, legal, risk management, accreditation, information technology (IT), biomedical services, and human resources (HR) services

**Customers and Stakeholders** Key customer and requirements: patients (inpatient, emergency care, outpatient, post-acute care, insurance plan members): access to care, high-quality and safe care, service excellence, participation in care, and value. Second key customer and requirements: family members (other customers):

high-quality and safe care, service excellence, communication, and access to loved ones. Ultimate customer and requirements: communities served: access to care, high-quality and safe care, value, scope of services, and societal responsibility

**Suppliers, Partners, and Collaborators** Suppliers: sell supplies, equipment, drugs, and services for core operations. Key requirements: quality of products/services, availability of products/services, and cost. Partnerships: key equity partnerships with > 51% equity, three surgery centers, six imaging centers, city government, university school of medicine, nursing, and pharmacy. Collaborators: county health department, regional Federally Qualified Healthcare Centers (FQHC), state office for rural health, and Communities of Excellence 2026 (COE)

### P.2a Competitive Environment

**Competitive Position** Market share leader for almost all clinical services in region. Competitors: university academic medical centers (AMCs) (400-bed and 450-bed), national hospital corporation (250-bed), independent hospitals, outpatient centers (imaging, surgery, physical therapy [PT], and urgent care), and health insurance plans

**Competitiveness Changes** Potential mergers of independent hospitals with other. Closure of rural hospitals presents opportunities for collaboration. For-profit surgery center has been approved in primary market space. **Comparative Data** Internal and external. Covid has disrupted comparative data. CMS, Consumer Assessment of Healthcare Providers and Systems (CAHPS), Centers for Disease Control and Prevention (CDC), National Healthcare Safety Network (NHSN), Healthcare Effectiveness Data and Information Set (HEDIS), ASG, National Database of Care Quality Factors (NDCQF), Medical Agency Research and Quality, Bureau of Labor Statistics (BLS), State Health Group, Kress Daney, National Data Sort Corporation, Carerank, Voorlan, LeapCore, Zandi's Rating Agency, and Craigly Rating Agency

### P.2b Strategic Context

**Strategic Challenges** Workforce burnout; shortages of nurses, technologists, and some physician specialties; national and state health care payment changes; increasing costs of drugs; cybersecurity and emergency preparedness; and difficulty in reducing health disparities

**Strategic Advantages** System scale that helps create a cost advantage, integrated EMR for all entities that provides for a convenient experience and supports telehealth, market share leadership, and resilience

**Strategic Opportunities** Embedding resilience in operations, increasing connectivity in rural and disadvantaged urban areas, and increasing health care access throughout service area

**Strategic Objectives** Achieve top-decile performance in customer excellence, achieve top-decile performance in workforce excellence, achieve top-decile performance in financial excellence, and achieve top-decile performance in process excellence

### P.2c PERFORMANCE Improvement System

**Performance Improvement System** Baldrige framework – all employees trained in the framework and Plan-Do-Check-Act (PDCA) methodology for daily improvement. Performance Improvement Council (PIC) selects improvement projects and assigns to a team. Institutional Review Board (IRB) supports innovation in medical care. Performance Excellence and Strategy Teams identify opportunities for intelligent risks to pursue.





## Comment and Scoring Checklist

- Comment provides meaningful, actionable feedback.**  
A strength comment provides one concise opening statement or “nugget” about a beneficial process or results area that the applicant should maintain or build on. An opportunity for improvement (OFI) comment provides one concise statement or “nugget” about a process or results area that the applicant may need to address in order to move to the next level of maturity. The comment conveys only one main idea.
- Comment addresses the relevant evaluation factor or factors (ADLI or LeTCI).**  
The comment uses ADLI or LeTCI to clearly articulate areas of strength or to provide insights on areas in which maturity may be enhanced (e.g., deployment to most critical groups, lack of cycles of refinement of processes critical to a key factor, integration of a process throughout functional areas of an organization, lack of results in key areas, or lack of segmentation in results for critical groups).
- Comment is relevant to this applicant.**  
The comment relates specifically to the applicant (i.e., it is connected to the key factors) and is not just some generic observation.
- Examples in the comment support the main idea.**  
One or two examples from the application support the “nugget” by showing the applicant instances of strength or opportunity.
- Results comments cite key data.**  
Results comments include a few examples of key data. The rationale field may include additional supporting data.
- Data are correct.**  
All figures cited, processes named, and results included are correct, in both the comment and the rationale, as checked against the application.
- Scoring reflects the content of the comments.**  
From a holistic standpoint, the range and score reflect the relative significance of the comments (i.e., content and significance of bolded comments) and are most descriptive of the organization’s achievement level for the item. For example, the scoring range for the item would likely be 50–65% if comments indicate that overall questions are addressed; processes are well deployed (although, may vary in some areas); evaluation, improvement, and some organizational learning are demonstrated; and alignment is observed. See the Scoring Guidelines within the Criteria and note whether your comments address the basic, overall, or multiple Criteria questions.
- Scoring reflects the balance of the comments.**  
A total of around six comments are distributed in a way that reasonably reflects the score. For example, a score of 45% may reflect three strengths and three OFIs of equal weight, while a score of 70% may include four major strengths and two OFIs addressing a specific aspect of a multiple question. Strict ratios are not required. Instead, a reasonable distribution should reflect the score and the content of the comments.



## Consensus Script: Applicant \_\_\_\_

Item \_\_\_\_\_

Criteria Summary—item covers \_\_\_\_\_.

Key Factors Summary—included here are \_\_\_\_\_.

Strengths proposed for the consensus report

1.

Strengths not included

1.

OFIs proposed for the consensus report

1.

OFIs not included

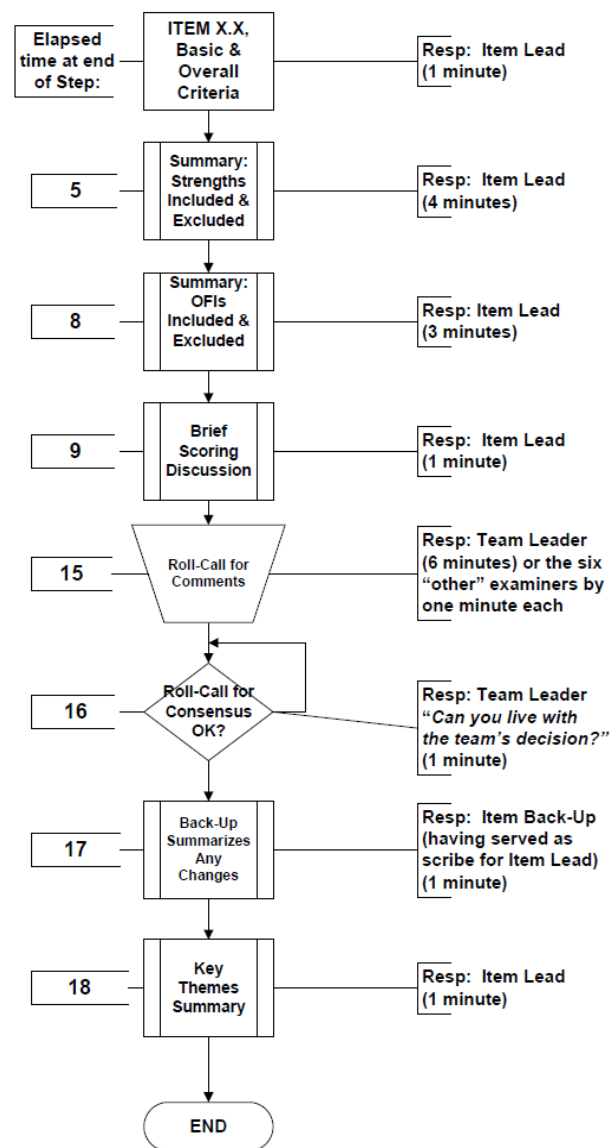
1.

Item \_\_\_\_\_ scoring discussion:

(Include rationale for not selecting a higher or lower range) – Note: this should not be based on examiners' IR scores, but rather a rationale based on the proposed CR comments

And a score of \_\_\_\_\_ (include proposed range)

## Consensus Script Flow-Chart



## General Guidelines for Asking Questions

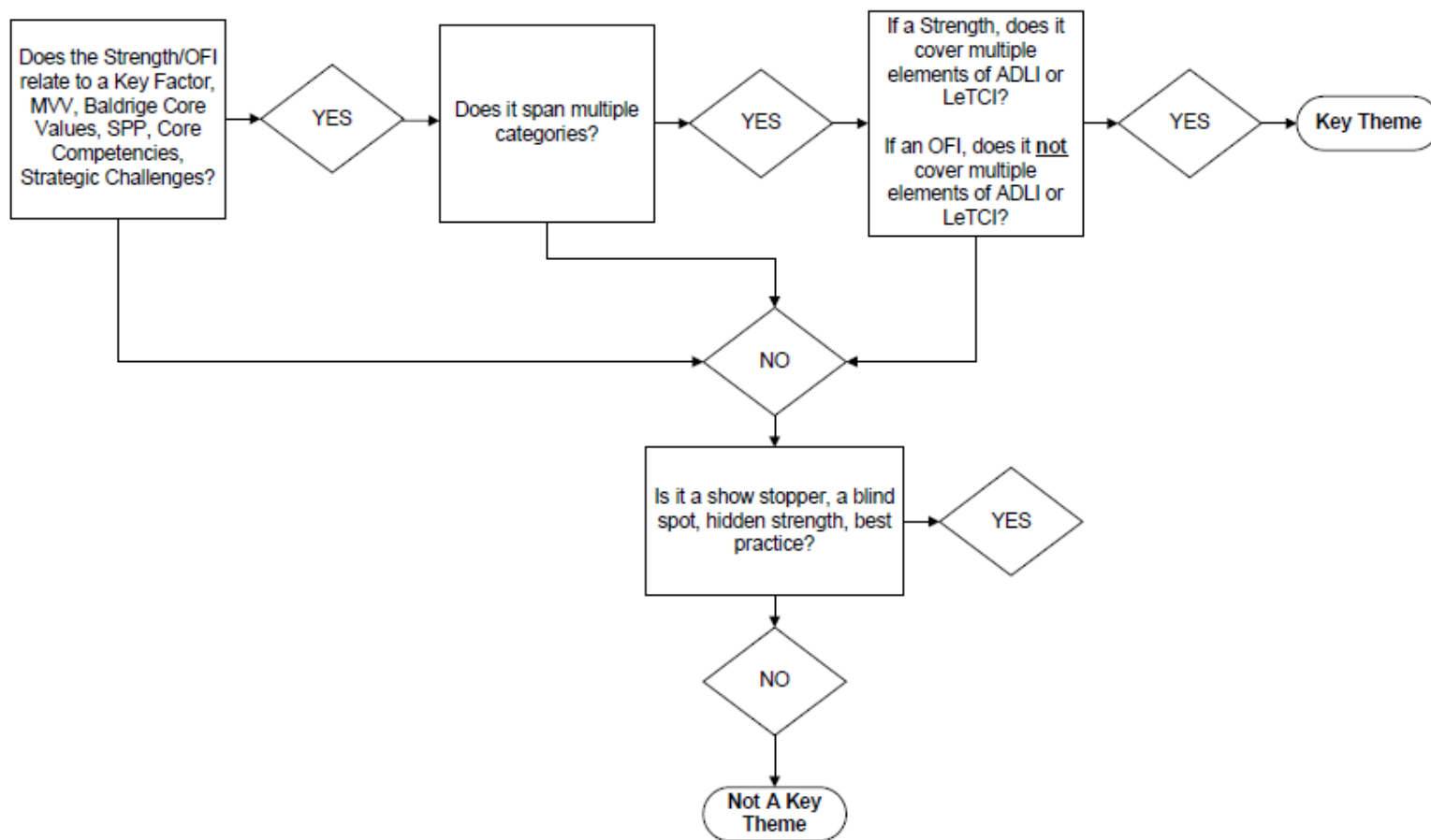
### Site Visit Interview Tips and Techniques

- Be prompt in starting the interview.
- Introduce yourself: "Hello, I'm \_\_\_\_\_ from the TPE Examiner team." Ask the person's name if it is not offered. Ask the person some questions about his or her background to help put him or her at ease.
- Begin the interview by telling the applicant that examiners are not looking for right answers but, rather, that they are trying to fully understand processes and results.
- Ask if anyone else from the examiner team has spoken to the interviewee.
- Let him or her know you will be taking notes.
- Keep a separate page for each person with whom you talk. Note his or her name, department or unit, and other pertinent information. Keep a separate page for each SVI. This permits easier sharing of information among the examiners.
- Ask simple, straightforward questions using the applicant's language. Avoid Baldrige or other types of jargon.
- Do not ask leading questions, and be careful not to inadvertently prompt answers. For example, you should ask, "How often does the planning team meet?" rather than "Does the planning team meet every week?"
- Ask the person if he or she would like to add anything. You may have missed something the applicant feels is vital.
- Thank the interviewee for his/her time, and communicate appreciation for the applicant's effort.
- Record materials requested and received.

Applicants are typically interested in assessing their progress on a site visit, and they may ask you how their site visit is going. While this is a simple question, it is one that is premature to answer while the site visit is ongoing and the team is gathering information on its SVIs. Accordingly, if the applicant asks you, "How are we doing?" you should simply tell the applicant that the team is still in the process of gathering information on its site visit issues and, as such, it is premature to answer the question. However, you can compliment the applicant on its hospitality, flexibility, and cooperation in helping the team obtain the information needed to close out the SVIs.



## IS IT A KEY THEME?



# Results Strength “NERD” Comment

7.3a(1) The applicant reports multiple results for workforce capacity for its various workforce groups and segments that demonstrate favorable trends. For example, Physician Capability and Capacity (Figure 7.3-2) show the number of physicians with admitting privileges increased from 874 in 2017 to 1018 in 2021, the number of new practitioners increased from 126 to 232, and resident retention increased from 49% to 64% in the same time frame and Workforce Retention Overall (Figure 7.3-4) increased for all classifications and locations from 2015 to 2021. These favorable results may help the applicant address its strategic challenge of workforce burnout and shortages.

**Nugget Evidence Relevance**



# Results OFI “NERD” Comment

7.2a(1) The applicant is missing patient satisfaction results for some key outpatient and post-acute care service offerings. Examples of missing results include those for outpatient diagnostic and treatment facilities, including JV surgery centers, JV imaging centers, and urgent care; sounding boards in the emergency room; and daily four-question surveys from the meal service. Tracking customer satisfaction and engagement data for all services and across the continuum of care may enable the organization to identify opportunities to better meet customer expectations.

**Nugget Evidence Relevance**



# Improving Strength Comment for 2.1a(1)

*2.1a(1) The applicant uses PDCA for its SPP to ensure cycles of evaluation. The process engages senior leaders, and the plan incorporates short-term, long-term and ultra-long term planning horizons.*

How did you improve this comment?



# Improving Strength Comment for 2.1a(1)

- Original Comment

- *2.1a(1) The applicant uses PDCA for its SPP to ensure cycles of evaluation. The process engages senior leaders, and the plan incorporates short-term, long-term and ultra-long term planning horizons.*

- Example of Improved Comment

- *2.1a(1) The applicant's well-deployed and systematic approach to strategic planning benefits from cycles of learning and improvement. The 16-step Strategic Planning process (SPP, Figure 2.1-1) is founded in a PDCA approach to facilitate evaluation and improvement. Planning involves the ELT, business-unit SLTs, and board members and inputs to hear the "voice" of stakeholders. Planning horizons are set for short term, long term, and ultra-long term. As a result of a cycle of learning and improvement, the SPP moved from a three-year planning process to annual planning process. Having a systematic SPP may assist the applicant in realizing its strategic advantages of market share leadership and resilience.*





# Improving OFI Comment for 2.1b(2)

- *2.1b(2) While consideration is given to balancing needs, it is not apparent how the applicant considers needs of all stakeholders. For example, it is not clear how needs are balanced during budgeting. This approach does not support the applicant's vision.*

How did you improve this comment?

# Improving OFI Comment for 2.1b(2)

- Original Comment
  - *2.1b(2) While consideration is given to balancing needs, it is not apparent how the applicant considers needs of all stakeholders. For example, it is not clear how needs are balanced during budgeting. This approach does not support the applicant's vision.*
- Example of Improved Comment
  - *2.1b(2) It is not clear how the applicant systematically considers and balances the needs of all key stakeholders in relation to its strategic objectives. Specifically, it is not clear how balancing occurs when key stakeholder needs are considered through the budgeting process inherent in the action planning process (APP, Figure 2.2-1) nor is it clear how the applicant ensures balancing of needs through discussions by the Board of Trustees and leadership. An approach to ensure the organization considers and balances the needs of all key stakeholders as part of determining strategic objectives may help it enhance the future engagement of key stakeholders and to execute its strategies and action plans.*