2027

GHA
Georgia Hospital Association

PATIENT SAFETY AND QUALITY AWARDS



About

The GHA Patient Safety and Quality Award recognizes healthcare organizations for achievement in implementing best practices to reduce the risk of adverse outcomes and improve patient safety and quality.

Categories

1. Critical Access Hospitals
2. Hospitals with under 100 Beds
3. Hospitals with 100-299 Beds
4. Hospitals with more than 300 Beds
5. Health Systems
6. Specialty Hospitals and Outpatient Centers/Hospital-Owned Ambulatory Surgery Centers, Hospital-Owned Ambulatory Care Centers, Long-Term Acute Care Hospitals, Rehabilitation Hospitals, Rural Emergency Hospitals, and Behavioral Hospitals
7. Josh Nahum Award for Achievement in Infection Prevention and Control

Circle of Excellence Award

Given to a hospital that has demonstrated a sustained commitment to patient safety and quality as evidenced by winning an award this year as well as three awards within the previous five years. (No additional application required.)

Entry Deadlines/Fees **Friday, Dec. 18, at 5 p.m. No entry fees.**

Submissions

- To remain viable, each category must receive at least three applications, or else the category may be subject to removal.
- Submission of a single project (application) in multiple categories is prohibited.
- Submission of multiple projects (applications) is allowed. The application requirements and process for each category are the same.

Preparation

These guidelines are intended to help you organize your thoughts before completing this application. The guidelines do NOT require individual responses.

- Programs/initiatives must be data driven, practical to implement and administer, creative, innovative, and transferable across organizations and settings.
- Each applicant must demonstrate how participation in GHA's programs/initiatives assisted the applicant in identifying and undertaking programs/initiatives. These programs/initiatives have been implemented in your hospital and shown to improve safety and quality while reducing the risk of adverse outcomes.
- Applicants might consider using the FOCUS structure to effectively plan your PDSA (Plan, Do, Study, Act) and/or organize your thoughts. The FOCUS structure does NOT require individual responses, but may help plan and organize your thoughts for the application.

FOCUS Process

Find a process to improve

- Did you identify a care/service process that is key to your success?
- What was the AIM of your improvement?
  - Safe
  - Effective
  - Patient-centered
  - Timely
  - Efficient
  - Equitable
- How did you determine if there is a best practice, internally or externally?
- Is there a policy or regulation that was prescriptive?
- If the above-mentioned did not exist and you are setting the standard, what is the new practice?

Organize the team that knows the process

- Include key stakeholders who were most knowledgeable about the process and were key to making successful and sustainable improvements.
- Who was on the team and why did you include the various roles?

Clarify your current knowledge

- Identify how the process is currently taking place (the real practice).
- Did you generate a process map to represent the sequential order of each step?
- Did you collect/gather baseline data about the current process?
- Did you challenge the team to ask the five “Whys” to determine the root causes of any issues?
- Did you create a future state map that depicts where you would like the process to be a year later?
- Demonstrate with your data how you established the current performance practice.

Understand the process and any variation

- Did you compare the current process to the process that you would like to model?
- Was this based on policy, regulations, or a best practice model?
- Did you compare to understand the differences between the two practices and determine where non-value added steps exist?
- Did you analyze baseline data compared to best practice data when available?
- Provide the comparison of your current practice performance to the organization’s desired practice performance and elaborate on the variance.

Select what to improve about the process

- Did you use the baseline data to determine the improvement actions you needed to take?
- Did you calculate the cost of each improvement step, if any?
- Did you prioritize the list through rank order of importance?
- Did you determine how the changes will take place?
- What quality improvement best practices did you use to set baseline?
- Describe the process you used to prioritize improvement needs.

Application Submission

Instructions:

- Narrative responses and appendices must have no references to the organization or facility name or any other identifying demographic information. This information should be provided on the demographics sheet only.
  - The project submission should be single spaced using 12-point font and not exceed 10 pages.
  - Each page should have a heading and a page number. Conclusion and data supplied should be supported by graphs and analyses.
  - Five additional pages are allowed as appendices for the graphs, figures, and data tables.
  - Applications will be returned if project exceeds the page limit: 10 pages for narrative plus 5 pages for graphs, figures, data tables.

- A project abstract must accompany each submission to include:
  - Project title, goal, process, and results.
  - Abstract must be 500 words or less, typed, single-spaced, and fit on 8.5 x 11-inch paper.
  - 12-point font.
  - 1-inch margins.

- Each application must be accompanied by a digital photo of your team with the names of your team members and facility. Judges will not have access to the photos. The photos will not be used until the completion of the evaluation process and will become the property of GHA to be used in future publications, announcements, and press releases.

- Completed applications in PDF format must be emailed to GHA at **psqaward@gha.org** by Friday, Dec. 18, at 5 p.m.

- Application must include all 4 required components as separate attachments in submission email:
  - Demographics Sheet (1 page, attached below)
  - Abstract (1 page, 500 words)
  - Project Submission (10 pages text; 5 pages charts, graphs, etc.)
  - Digital Photo (do not place in Application PDF)

- For unbiased decisions, a blind judging panel comprised of representatives from external organizations as well as experts in patient safety and quality will review the awards submissions.

Tips for completing this application:

- The page and word limits are maximums; reviewers appreciate concise and direct responses.
- Bulleted responses, rather than narrative text, are acceptable and encouraged where appropriate.
- Be sure to proofread.
- If a system or mechanism that you have already described as a response to one question is also relevant to another answer, please refer to the original description and explanation rather than repeating it.
- When possible, cite specific examples that demonstrate progress or illustrate processes that have resulted in improved outcomes.

Application Submission

Components

The questions below must be answered in your application submission. Your application can be formatted either in direct responses to an individual bullet or as a narrative format where you answer the bullets and tell your story.

Plan: The change or improvement (20 points).

- What were the project goals?
- How did you involve frontline staff?
- Describe the target population you wish to involve with the project.
- Discuss involvement from the hospital board of trustees, senior hospital leadership, medical staff, nursing staff, other hospital staff, patient advocates, or community partners.
- Describe how the patient advocate role is incorporated into your hospital's culture.
- How did you overcome obstacles or challenges with buy-in?

Do: Share the results of your pilot test of the change (30 points).

- What changes did you make to improve quality and safety? Include implementation, staff involvement and training, and data collection or education tools.
- How were evidence-based processes or best practices utilized in the project? Describe the quality improvement resources used (SHIP, Flex, Boot Camps, Lean Six Sigma, TeamSTEPPS, etc.).
- Describe the specific measures used to identify, monitor, and track your improvement initiative. Include measures of change in:
  - Structure (e.g., equipment)
  - Process (e.g., no razors)
  - Outcomes (e.g., surgery infection rate)
- How did you overcome obstacles or challenges with data?

Check/Study: Gather data about the pilot change to ensure success (30 points).

- How was the data analyzed? Use data, tables, and charts to explain data collection, measurement, and analysis.
- What barriers did you encounter and how did you overcome obstacles?
- Were there revisions made as the data was collected? How did the revisions affect the outcomes?

Act: Revisions and final performance improvement results (20 points).

- Explain what worked and what did not work. Include both positive and negative results.
- What were the ultimate changes in structure, process, and outcomes?
- Did you accomplish the desired results through the process used?
- Did those results meet your overall objectives and goals?
- Do you have a plan for spread if project was successful?

Disclaimer

Award-winning achievements in hospitals are published on the GHA website, as well as in newsletters and other publications. The award-winning hospitals may have the opportunity to present their project at various conferences and webinars throughout the year, including the Annual Quality Conference.

Demographic Sheet

Category (Select one):

- ☐ Critical Access Hospitals
- ☐ Hospitals with under 100 Beds
- ☐ Hospitals with 100-299 Beds
- ☐ Hospitals with over 300 Beds
- ☐ Health Systems
- ☐ Specialty Hospitals and Outpatient Centers/Hospital-Owned Ambulatory Center (LTAC Hospitals, Rehab Hospitals, Rural Emergency Hospitals, or Psychiatric/Behavioral Hospitals)
- ☐ Josh Nahum Award for Achievement in Infection Prevention and Control

Title of Patient Safety Initiative:

Hospital Name:

Address:

City, State, ZIP:

CEO: CEO email:

Primary Contact:

Title:

Phone Number: Email:

Alternate Contact:

Title:

Phone Number: Email:

CEO or Senior Executive Officer Signature:

Print Name: Date:

Applicant checklist (total of 4 attachments)

- ☐ Demographic sheet completed with category indicated
- ☐ One-page abstract (PDF)
- ☐ Project submission (PDF)
- ☐ Team photo with members identified by name and title

Entry deadline: Must be received electronically by Friday, Dec. 18, at 5 p.m.

Submit application to GHA at **psqaward@gha.org**