



NATIONAL ASSOCIATION FOR HEALTHCARE QUALITY

## 2008 Award for Association Excellence Application

### **Purpose**

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The National Association for Healthcare Quality (NAHQ) presents the NAHQ Award for Association Excellence in order to recognize state quality associations that provide exceptional membership services and benefits. The NAHQ Award for Association Excellence is awarded annually on a three-tier system of gold, silver, and bronze (beginning in 1997).

### **Eligibility**

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The NAHQ Award for Association Excellence is based on the following:

- achievement of goals and objectives consistent with, and supportive of, NAHQ, which are directed toward development of the state association and its members;
- quality of the newsletter;
- quality of the educational programs sponsored by the association;
- state membership's involvement in NAHQ;
- support of CPHQ certification, National Healthcare Quality Week, and the Healthcare Quality Foundation (HQF); and
- publication and poster contributions of individual members within the state organization
- Associations applying for the Award for Association Excellence may not apply for any sub-category awards in the same year;
- Associations can apply for up to two (2) sub-category awards per year;
- Associations winning an Award for Association Excellence are ineligible for the following year for any State Association awards including both the Award for Association Excellence and sub-category awards.

Applications for the NAHQ Awards for Association Excellence and required material must be **received by July 18, 2008**. The applications will be judged using an objective set of indicators, and the award winners will be announced at the NAHQ 33<sup>rd</sup> Annual Educational Conference in Phoenix, Arizona in September 2008.

### **Requirements**

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Please submit one copy of this application form along with any attachments. Use as many pages as necessary to complete the application. Please enter your answers into this form. All information submitted must be in an electronic format using either a CD or a winzip file.

### **Questions**

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If you have any questions about this application, please contact Cathy Munn, Team Leader, NAHQ Awards Team, at [Cmunn@dsthealthsolutions.com](mailto:Cmunn@dsthealthsolutions.com) or at 205/437-6343, or Cassidy Follins, NAHQ HQ, 847/375-6384, [cfollins@connect2amc.com](mailto:cfollins@connect2amc.com).

**NAHQ Award for Association Excellence  
2007 Application Form**

Date of Application \_\_\_\_\_

Association Name \_\_\_\_\_

Association Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_

Current President \_\_\_\_\_

President's Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_

Person Completing  
Application \_\_\_\_\_

Title held in state association \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (\_\_\_\_\_) \_\_\_\_\_

**By submitting this application, this state association agrees that all the information provided for the Award for Association Excellence is true and accurate.**

**E-mail (CD or winzip) the completed application and attachments by  
July 18, 2008 to**

[cfollins@connect2amc.com](mailto:cfollins@connect2amc.com).

National Association for Healthcare Quality  
4700 W. Lake Ave.  
Glenview, IL 60025-1485

## **1. Goals and Objectives**

a) List the association's goals and objectives.

b) Describe the achievement of each goal.

c) Provide an estimate of the percentage of achievement of each goal.



**3. Education Programs (Please use the Log/Chart on page 6 to demonstrate these categories.)**

<p>a) List all the educational program offerings within the last two years with or without offering CPHQ CE.</p>	<p>Please provide these electronically in a PDF. <b>Label them as Attachment 3. A. Education Programs-Brochures</b></p>
<p>b) Documentation of presenter qualifications for the above educational offerings. i) Presenters' CVs. ii) Summary of presenters' evaluations.</p>	<p>Please provide these as attachments to this application. <b>Label them as Attachment 3. B. Education Programs-CVs &amp; Evaluations</b></p>
<p>c) Program evaluation results for above offerings (Calculate all evaluations on content &amp; presentation).</p>	<p>If the results are more than one page, please provide these as attachments to this application. <b>Label them as Attachment 3. C. Program Evaluation Results</b></p>
<p>d) Program attendance i) Total attendance for each of the above educational programs. ii) Total number of association members who attended each of the above educational programs and the total state association membership at the time of each offering.</p>	

### III. Education Programs Log/Chart

Program Name	Presenters' Name Please attach CV	Presenters' Evaluation Score	Program Evaluation Score	Total Combined Scores	Program Attendance	Total State Association Attendance	Total State Association Membership	% Members Attendance/ Total Membership	Total CPHQ - CEs

Program <b>Total #</b>	<b>Total #</b> Presenters' (attached CV)	Overall Presenters' Evaluation Score	Overall Program Evaluation Score	<b>Total</b> Combine Scores	<b>Total</b> Program Attendance	<b>Total</b> State Association Attendance	Association Membership	<b>Total</b> Attendance/ Total Membership	<b>Total</b> CPHQ - CEs

#### 4. Association Membership Involvement/Participation with NAHQ

Please submit the following information (for a, b and c) using the figures you submitted to NAHQ for affiliation compliance in **2006** and **2007**.

	2006	2007
a) Total number of state association members for the past two (2) years. List each year separately.		
b) Total number of state association members who are also NAHQ members.		
c) Total percentage of state association members who are also NAHQ members.		
	2006	2007
d) Total number of allowed representatives to NAHQ Leadership Council in 2006 and 2007.		

e) List the state members who served as Leadership Council representatives in **2006** and **2007**.

	2006	2007
f) The percentage of allowed representatives who attended the NAHQ Leadership Council Annual Business Meeting in 2006 and 2007.		

g) List the association members and the positions they have held in NAHQ over the past two years, e.g., NAHQ board members, team members, task force members, Quality Volunteers.

## 5. Support of the CPHQ Certification Program

- a) Provide a list of current association members who are Certified Professionals in Healthcare Quality (CPHQ) and the **percent** of total current membership that this number represents. If this list is more than one page, please provide it as an attachment to this application. **Label it as Attachment 5. A. Current CPHQ list.**
  
- b) Describe the methods/programs the association has sponsored which support the certification process, e.g., exam review session, study groups, mentorship.
  
- c) Describe the methods the association has utilized to recognize new CPHQs, e.g., recognition in the newsletter.
  
- d) List the number of programs the association has sponsored or co-sponsored during the last two years that offer CPHQ continuing education credit.

## 6. Support/Promotion of National Healthcare Quality Week

- a) Provide evidence that the association has promoted National Healthcare Quality Week and/or Healthcare Quality event(s) throughout the year. Please provide these attachments electronically. **Please label the Attachment 6. A. National Healthcare Quality Week Support.**
  
- b) List the number of hospitals/healthcare organizations that have members in the association.
  
- c) List the number of hospitals/healthcare organizations that promoted National Healthcare Quality Week and /or recognition of quality at other times of the year.
  
- d) Calculate the **percentage** of the hospitals/healthcare organizations with members in the association that promoted National Healthcare Quality Week and/or recognition of quality at other times of the year.
  
- e) Briefly describe the promotional activities generated in each hospital/healthcare organization.

## 7. Support of the Healthcare Quality Foundation (HQF)

	2006	2007
a) Indicate any donations (specify amount) made to HQF within the last two (2) years.		

- b) Describe any fundraising activities the association has organized or supported during the last two years to support the HQF.

