

## Bronze Series Viewing Guide

NATIONAL QUALITY AWARD PROGRAM

Inspiring Excellence Since 1996



Thank you for your interest in the AHCA/NCAL National Quality Award Program! The Bronze Award is the first step in the Quality Award journey. Through the Bronze criteria, you will assess your organizations mission, vision and key factors that lead to success. This will provide a strong foundation for the Silver and Gold Award levels.

The “[Bronze Criteria Series](#)” is a sequential series of videos, each covering an individual question in the Bronze Criteria. This series was developed to help applicants understand and meet the demands of the Bronze criteria. Additionally, this series can serve as a team building experience for your staff. We suggest that you form an application team that views the videos together and then completes the responses to the criteria as a team effort. This will result in a better application, greater understanding of the foundational elements of quality in your center, and enhanced excitement as your center engages in the program.

*Year-to-year, the series is updated to reflect changes in the criteria, so even if you have viewed the series previously, you may want to view it again this year.*

Before beginning the application process, you should review the 2019 Bronze Application Packet, containing program information and instructions, as well as the Bronze criteria. In addition to this series of videos, you’ll find many other resources on the [Quality Award website](#).

*If you are an Assisted Living provider utilizing the Assisted Living Bronze criteria:* Although the series is based on the SNCC, ID/DD criteria, you can apply it to the Assisted Living criteria. Simply review the AL criteria being addressed in the seminar prior to viewing. If you have any questions, please feel free to contact us at [qualityaward@ahca.org](mailto:qualityaward@ahca.org).

To work most efficiently, it is essential that your team draft a response to each criterion as soon as you complete viewing the associated seminar. A template with the appropriate criteria coding is included on page 3 of this viewing guide, as well as in the Bronze Application Packet. All seminars are less than 10 minutes, so you will often be able to view the seminar and draft your response in less than 30 minutes.

After your team has completed viewing the series, you will have a complete application, almost ready to submit. Your next step will be to read over the application with an eye toward continuity and cohesiveness. In addition, your application must abide by the technical requirements, laid out in Chapter 5 of the Bronze Application packet.

Keep in mind **the application deadline is Thursday, January 31, 2019 at 8 p.m. EST.**

One last tip- assigning team members the task of viewing a video and writing seminars alone is not a good strategy. The criteria questions are interdependent and responses often build on what has previously been written in other responses.

We hope you enjoy the series!

# Bronze Series Viewing Guide



Criteria Summary <i>(Provided for reference only, respond to full criteria in application packet.)</i>	Run Time
Bronze Series Introduction	4:51 minutes
P.1.a.1. What are your main HEALTH CARE SERVICE offerings? What is the relative importance of each to your organizational success?	4:29 minutes
P.1.a.2. What is your organization's MISSION/VISION statement (verbatim) and the specific methods used to communicate it across the organization?	3:27 minutes
P.1.a.3. What are your KEY ORGANIZATIONAL PERFORMANCE MEASURES?	5:29 minutes
P.1.a.4. What is the organization's WORKFORCE profile?	3:48 minutes
P.1.a.5. What are your major equipment and technologies?	3:14 minutes
P.1.a.6. What is the regulatory environment under which your organization operates? What are the KEY bodies of regulation related to health care delivery, occupational health and safety, physical plant, payment and reimbursement regulations?	1:53 minutes
P.1.a.7. What are your CORE COMPETENCIES and their relationship to your MISSION?	4:29 minutes
P.1.b.1. What are your principal CUSTOMER groups? What are the differences in requirements and expectations among CUSTOMER groups?	6:46 minutes
P.1.b.2. What are the KEY types of suppliers of goods and services, including other health care providers? What are your KEY mechanisms for communicating with suppliers? -AND- P.1.b.3. From the above, what are the most important types of suppliers of goods and services?	4:22 minutes
P.1.b.4. What are the limitations, special business relationships, or special requirements that may exist with some or all suppliers and partners?	3:21 minutes
P.1.b.5. What are your organizational structures and KEY management links to the parent company if the applicant organization is owned by a parent organization? Respond "NA" if the applicant is not owned by a parent organization.	3:36 minutes
P.2.a.1. What is the organization's position (relative size) within the local market environment? Include numbers and types of competitors.	5:49 minutes
P.2.a.2. What are the principal factors that determine competitive success in the local market?	3:37 minutes
P.2.a.3. What are your key available sources of competitive and COMPARATIVE DATA from within the long term care profession?	3:23 minutes
P.2.b.1. What are at least two major STRATEGIC CHALLENGES or ADVANTAGES for the organization?	6:42 minutes
P.2.b.2. What is the reason(s) why it is important that your organization address these STRATEGIC CHALLENGES or ADVANTAGES?	3:36 minutes
P.2.c.1. What are the KEY elements of your PERFORMANCE improvement SYSTEM?	2:43 minutes
P.2.c.2. What one HEALTH CARE RESULT did your organization improve by applying the KEY elements of your PERFORMANCE improvement SYSTEM?	7:52 minutes
P.2.c.3. ID/DD and assisted living-only providers only: report briefly on a second quality improvement effort.	
Bronze Series Conclusion	1:24 minutes



**Criteria Submission Format for the Upload PDF Application option:**

*Note that this is only for those applicants who choose the option of uploading a PDF document instead of completing the online application form.*

**P.1. Organizational Description:**

- P.1.a(1).
- P.1.a(2).
- P.1.a(3).
- P.1.a(4).

<b>Job Position</b>	<b>Desired Number of Employees</b>	<b>Educational/Professional Requirements</b>
1.	1.	1.
2.	2.	2.
3.	3.	3.

- P.1.a(5).
- P.1.a(6).
- P.1.a(7).

P.1.b(1).

<b>Principal Customer Groups</b>	<b>Requirements this Group has of your Organization</b>	<b>How your Organization Learned of these Requirements</b>
1. Patients (Residents)	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.

- P.1.b(2).
- P.1.b(3).
- P.1.b(4).
- P.1.b(5).

**P.2. Organizational Situation:**

- P.2.a(1).
- P.2.a(2).
- P.2.a(3).

- P.2.b(1).
- P.2.b(2).

- P.2.c(1).
- P.2.c(2).

P.2.c(3). *ID/DD residential services providers only, not including ICF/IID*