

**FOR REFERENCE ONLY—APPLICATION MUST BE  
SUBMITTED THROUGH APPLICATION SYSTEM  
AT [WWW.AHA.ORG/QUESTFORQUALITY](http://WWW.AHA.ORG/QUESTFORQUALITY).**



## **The American Hospital Association Quest for Quality Prize® 2025 Hospital and Health System Application**

**The American Hospital Association Quest for Quality Prize®** is presented annually to recognize health care leadership and innovation in improving quality and advancing health of individuals and communities. The AHA and its members are committed to improving quality and safety by establishing organizational culture that promotes engagement from staff and patients, protects staff and patients from harm, uses data and evidence-based tools; ensures equitable treatment; and promotes innovation to achieve higher quality, safer care.

Prize honors are: one winner; up to three finalists or Citation of Merit honorees. The goals of this prize are to:

- Raise awareness of the value of a hospital-wide/system-wide commitment to advancing health in America by providing access to exceptional quality, safe, timely, effective, efficient, equitable, patient- and family- centered and affordable care that promotes individual and community well-being
- Showcase successful efforts to develop and promote new and innovative models of care, services and collaboration
- Inspire hospitals and systems to lead and partner with community organizations to improve health and address health disparities
- Recognize hospital and system leadership to improve safety and effectiveness of care

The 2025 prize will be presented at the 2025 AHA Leadership Summit, July 20 - 22, 2025, in Nashville. One representative from each honored organization will receive complimentary registration, flights and two hotel nights to attend the Leadership Summit.

### **Prize Eligibility**

All **hospitals** and **health systems** in the United States are eligible to apply for the award. Please be aware that a hospital that is part of a system may apply separately as a hospital even if the system as a whole is applying as a system. However, if the system is selected for a site visit, the hospital would not be eligible for a separate site visit and would be considered only as part of the system.

### **Application Materials**

1. Organizational demographic information
2. Narrative responses and data on your organization's efforts to improve and ensure overall quality in eight quality domains.

If you have questions about the prize or completing the application, please e-mail [questforquality@aha.org](mailto:questforquality@aha.org).

## Requirements

Organizations selected for site visits will be asked to provide additional follow-up information for the AHA Quest for Quality Prize Committee. They also will be expected to identify a cross-section of key leaders willing to work with AHA and the selection committee to teach others about their strategies to improve the quality of care. Honorees will be expected to participate as requested in outreach and education, including public speaking engagements at various forums and working with editors and writers of AHA and its subsidiaries and other publications as requested by the American Hospital Association.

All applications become the property of the AHA and may be used in AHA's activities to provide "best practices" and examples of different approaches to achieving the prize's goals. In these cases, AHA will contact the hospital or health system to explore its interest in participating in an interview or case study. All materials submitted for site visits will be kept confidential.

## Evaluation and Judging

The applications are reviewed by members of the AHA Quest for Quality Committee. The Committee selects organizations to be site visited, participates in site visits and selects the organizations to which honors will be presented. During the site visits, the Committee members will be particularly interested in seeing evidence of trends in improvement and impact on patients and the community and in hearing what steps have been taken to ensure that process changes have led to the desired improvements in outcomes and to sustain performance improvements. The Committee is looking for an organization-wide commitment to and participation in improved quality and safety, innovations to improve care, addressing disparities, and working with other community organizations and agencies to improve health status. The Committee also will want an understanding of the replicability of successful practices and policies. Additionally, the Committee will be interested in how the organization has identified health needs in its community and is partnering to address those and how the organization is working toward diversity and equity of opportunities within its own staff, volunteers, leadership and board.

The American Hospital Association Quest for Quality Prize<sup>®</sup> is administered by the Health Research & Educational Trust. AHA is grateful for the extensive volunteer contributions made by Committee members.

## Submission of Applications

Completed applications must be submitted **through the application system using your customized link by midnight Central Time on September 13, 2024**. The application system will close at that time and unfortunately, we are not able to offer an extension on this deadline. Incomplete applications will not be reviewed. All applications will receive an email acknowledgement within one business day. Please check your spam, junk, quarantine, and clutter folders if you do not receive an acknowledgement. Emailed applications will not be accepted.

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## **The American Hospital Association Quest for Quality Prize® 2025 Application for Hospitals and Health Systems**

Are you applying as a hospital or health system? (please check one)

Hospital                       Health System

**Hospital Name:**

**Health System Name** (if applicable)

**Application Contact:**

**Title:**

**Telephone:**

**Email:**

**Address:**

Where did you learn about the AHA Quest for Quality Prize?

- AHA Website                       AHA Meeting/Conference  
 AHA Email/Newsletter                       LinkedIn  
 Other:

The following should be read by the hospital or health system CEO.

*The AHA Quest for Quality Prize seeks to increase understanding of the value of organizational focus and commitment to achieving quality health care and advancing health in communities. Hospitals and systems are urged to consider participation in the awards process both as a recognition and an assessment of their efforts to provide exceptional quality, safe, timely, effective, efficient, equitable, patient- and family-centered (STEEEP) care that promotes individual and community well-being and adds value to lives. All applications for the AHA Quest for Quality Prize® become the property of the American Hospital Association. Descriptions of the honored programs will be published, and the Association may use information from all applications in articles aimed at increasing awareness and ability of organizations to implement a system-wide commitment to quality and patient safety improvement. Program contacts may be asked to provide additional information. I agree, if our hospital/health system is being considered for recognition, to host a site visit as part of the final selection process. I also understand that the honorees will be expected to participate in outreach and sharing of organizational improvement efforts and knowledge.*

**Guidelines/Guidance for Completing this Application:**

- A team approach to completing this application is recommended and may include patients/family members. In general, applications that are written by staff with primary responsibility for quality improvement (rather than public relations, marketing or grant writers) in close collaboration with senior leadership are more likely to include the type of information the committee is seeking. You can share your customized link with your team members but only one individual can work on the application at a time.
- If a system or mechanism that you have already described as a response to one question is also relevant to another answer, please feel free to refer to the original description and explanation rather than repeat it.
- Part 2 of the application seeks a better understanding of how your hospital/health system is approaching and progressing on providing access to exceptional quality as well as safe, timely, effective, efficient, equitable, patient- and family-centered (STEEEP) care that promotes individual and community well-being and adds value to lives. To the extent possible, please emphasize integration of this commitment and systemic approaches across and throughout the hospital/health system.
- Please note that the word limits in Part 2 are maximums, not suggestions. The prize committee appreciates concise and direct responses. Bulleted responses rather than narrative text is welcome but please be sure that a context for understanding the bullets is provided. Concrete examples with pertinent details to substantiate broad statements provide greater clarity and credibility for your application.
- Each domain in Part 2 includes the option to upload data relevant to the questions asked. Be sure to relate data to specific care improvement efforts and processes. Data on progress should be as recent as possible and include relevant benchmarking data. Please do not exceed 10 total pages of data across all 8 domains.
- The committee also will be examining publicly available indicators such as hospital performance on the [Care Compare website](#) and reliable sources of comparative data.

**Part I: ORGANIZATIONAL Demographic Information**

**1 System profile (if applicable):**

- \_\_\_\_\_ Total number of hospitals in system
- \_\_\_\_\_ Number of hospitals owned by system
- \_\_\_\_\_ Number of hospitals managed by system
- \_\_\_\_\_ Number of hospitals leased by system

**2a) If applying as system:** How many of your hospitals are in the following size ranges:

- \_\_\_\_\_ Fewer than 100 beds
- \_\_\_\_\_ 100 to 299 beds
- \_\_\_\_\_ 300 to 499 beds
- \_\_\_\_\_ 500 beds and over

**2b) If applying as hospital:** Number of acute care beds currently set up and staffed for use in your hospital (please check one):

- \_\_\_\_\_ Fewer than 100 beds
- \_\_\_\_\_ 100 to 299 beds
- \_\_\_\_\_ 300 to 499 beds
- \_\_\_\_\_ 500 beds and over

**3) If applying as hospital,** please select one (system applicants, go to #4):

- Part of a system                      Independent

**4) Other types and numbers of facilities owned and operated by the system** (ambulatory clinics, physician offices, surgicenters, long-term care facilities, etc.) (hospital applicants, go to #6):

\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) Annual number of outpatient visits in these facilities: \_\_\_\_\_

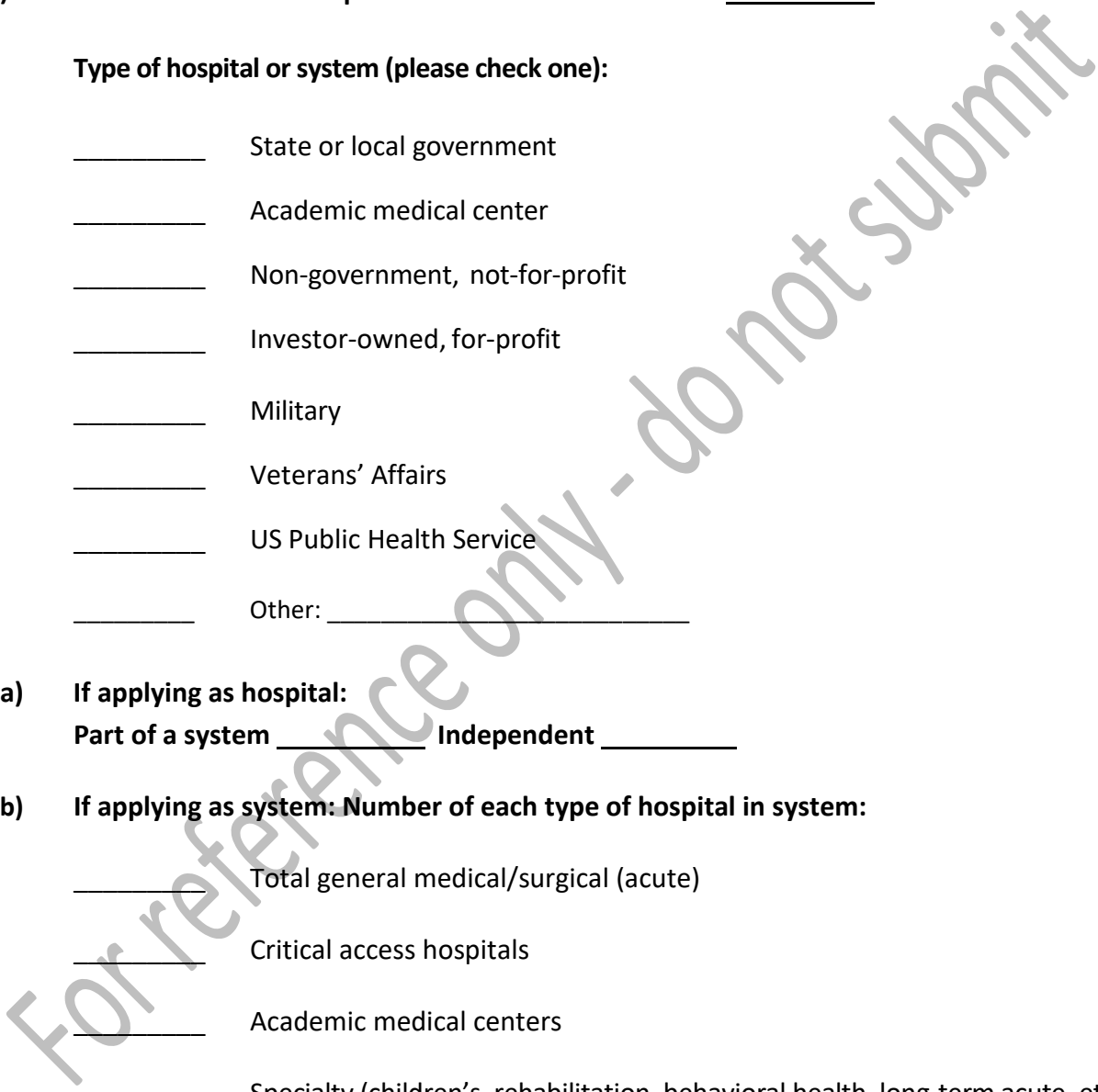
6 Type of hospital or system (please check one):

- \_\_\_\_\_ State or local government
- \_\_\_\_\_ Academic medical center
- \_\_\_\_\_ Non-government, not-for-profit
- \_\_\_\_\_ Investor-owned, for-profit
- \_\_\_\_\_ Military
- \_\_\_\_\_ Veterans' Affairs
- \_\_\_\_\_ US Public Health Service
- \_\_\_\_\_ Other: \_\_\_\_\_

7a) If applying as hospital:  
Part of a system \_\_\_\_\_ Independent \_\_\_\_\_

7b) If applying as system: Number of each type of hospital in system:

- \_\_\_\_\_ Total general medical/surgical (acute)
- \_\_\_\_\_ Critical access hospitals
- \_\_\_\_\_ Academic medical centers
- \_\_\_\_\_ Specialty (children's, rehabilitation, behavioral health, long-term acute, etc.)
- \_\_\_\_\_ Other: \_\_\_\_\_



**8) Financial information on your hospital or health system:**

Net operating margin (percent) \_\_\_\_\_ %

Bond rating \_\_\_\_\_

Days cash on hand \_\_\_\_\_

**9a) If you have PHYSICIAN residency training programs approved by the Accreditation Council for Graduate Medical Education, how many FTE residents do you employ in each type of residency?**

**9b) Please list other types of training programs in your hospital or health system (i.e., nursing, pharmacy, social work, physical therapy, etc.):**

**11a) If applying as a hospital: Select the location of your hospital:**

\_\_\_\_\_ Urban                      \_\_\_\_\_ Suburban                      \_\_\_\_\_ Rural

**11b) If applying as a system: Enter the number of hospitals located in the following areas:**

\_\_\_\_\_ Urban                      \_\_\_\_\_ Suburban                      \_\_\_\_\_ Rural

**12) What percentage of physicians on staff at the hospital or health system are:**

\_\_\_\_\_ % Employed by the hospital or system

\_\_\_\_\_ % In a physician group associated with the hospital or system

\_\_\_\_\_ % In practices owned by the hospital or system

\_\_\_\_\_ % In independent, private practice

**13) Please describe the governance structure for your system and hospitals:**

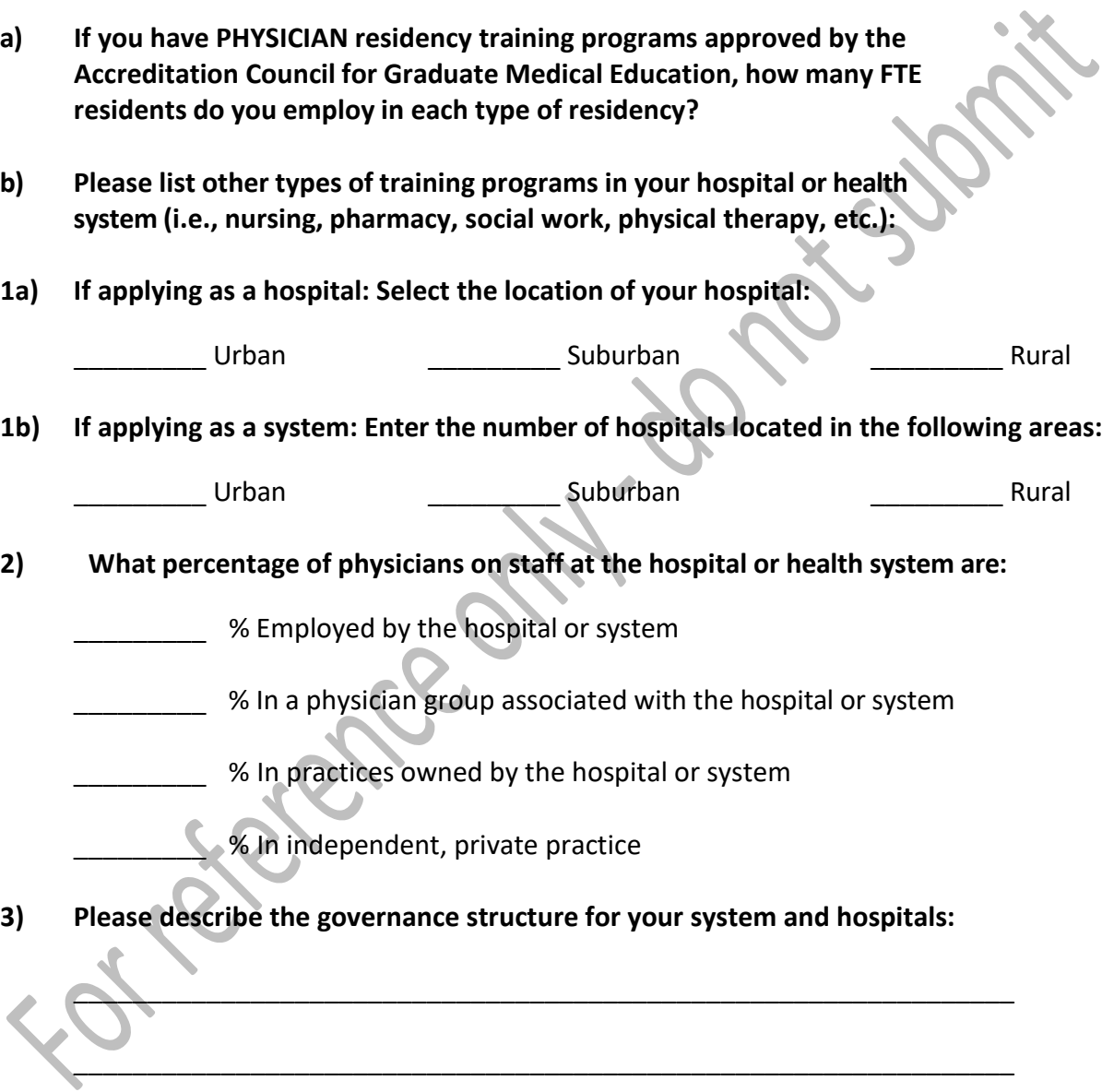
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**14) What is the size of your:**

- \_\_\_\_\_ Governing board
- \_\_\_\_\_ Medical staff
- \_\_\_\_\_ Executive staff
- \_\_\_\_\_ Employed staff (other than employed physicians included in medical staff count above)
- \_\_\_\_\_ Volunteer organization

**15) Please indicate percentages for each of the following categories. Racial/ethnic percentages must add up to 100%. If chart is incomplete at the time of submission, the application will not be reviewed.**

	Female	White	Hispanic/ Latino	Black or African- American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	Other
Hospital/ Health System governing board								
Hospital/ Health System executive staff								
Medical staff								
Employees other than medical staff								
Volunteers								
Community								

Find your service area’s demographics here: <https://www.census.gov/quickfacts/fact/table/US/PST045221>. In the search box, type the name of the county. Then, in the All Topics drop-down menu, select “Race and Hispanic Origin” to see the county’s racial/ethnic breakdown.



16) What is your annual rate of staff turnover? \_\_\_\_\_

*For reference only - do not submit*

**SERVICE Demographic Information**

**1) Scope of service area (check one):**

- Portion of community
- Entire community
- Community and surrounding area
- Multiple communities

**2a) Patient language demographics:**

- % English as primary language
- % Non-native English speaker
- % Little or no English (requiring interpreter)

**2b) Languages most frequently spoken by non-native English speakers (no more than top 5):**

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**3) Patient insurance demographics:**

- % Private insurance
- % Medicare
- % Medicaid or other public assistance only
- % Medicare/Medicaid (or other public assistance) dual eligible
- % No coverage

**4) Describe the communities your hospital(s) serve (max word count: 100):**

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## Part II: Quest for Quality Domains

The Quest for Quality Prize honors hospitals and health systems that are committed to and are making demonstrable progress toward making AHA's vision of a society of healthy communities where all individuals reach their highest potential for health a reality. As you respond to the following sections, consider how some or all of the following are integrated into your work:

**A hospital/health system-wide commitment to providing STEEEP:** Access to exceptional quality; safe, timely, effective, efficient, equitable, patient- and family-centered (STEEEP) care.

1. **Leadership Involvement in Quality:** Hospital/health system leadership prioritizes and is engaged in quality-improvement initiatives.
2. **Embed Quality into the Care Journey:** Incorporate quality as a foundational component to delivering value as a part of the overall care journey. Quality includes ensuring optimal care and best outcomes for individuals of all ages and backgrounds as well as across service delivery systems and settings.
3. **Promote Safety to Achieve Zero Preventable Harm:** Continue to strive to prevent all harm or death from health care errors through quality-improvement efforts, just culture and team communication.
4. **Foster Engagement to Improve Quality and Build Trust:** Increase engagement between individuals and their care teams to improve quality, establish trusting relationships, and bring the voices of people and caregivers to the forefront.
5. **Advance Health Equity and Community Partnerships:** Create a care journey that is free from inequity while optimizing opportunities, access, and outcomes for historically underserved and under-resourced communities through partnerships with community organizations to improve the health status of the community.
6. **Strengthen Resilience and Workforce:** Ensure resilience in the health care system to prepare for, and adapt to, future challenges and emergencies.
7. **Embrace the Digital Age:** Ensure timely, secure, seamless communication and care coordination between providers, plans, payers, community organizations, and individuals through interoperable, shared, and standardized digital data across the care continuum.
8. **Incentivize Innovation and Technology:** Accelerate innovation in care delivery and incorporate technology enhancements (e.g., telehealth, machine learning, advanced analytics, new care advances) to transform the quality of care and advance value.

### 1. LEADERSHIP INVOLVEMENT IN QUALITY (1000 words maximum)

Please describe your organization's **Leadership Involvement in Quality** by using the prompts below. Please provide specific examples, quality improvement approaches, and data/metrics to show progress and impact.

- A. How does your hospital/health system leadership and the governing board prioritize and engage in establishing and supporting quality goals and initiatives to ensure access to exceptional quality; safe, timely, effective, efficient, equitable, patient- and family- centered (STEEEP) and affordable care.
- B. How does your hospital/health system leadership and the governing board hold themselves accountable to the community for hospital initiatives to improve health status, ensure

seamless coordination of care, eliminate health disparities, and ensure access to effective and efficient care.

- C. How does your hospital/health system leadership ensure that the culture of quality is diffused throughout the hospital, including engagement with employees, medical staff, patients and families in the planning processes, goal setting, progress evaluation and change implementation.
- D. What efforts and progress has your hospital/health system made toward increasing diversity among hospital leadership, governance, medical staff, employees and volunteers to reflect the ethnic/racial makeup of the community.

**2. EMBED QUALITY INTO THE CARE JOURNEY (750 words maximum)**

Please describe how your organization **Embeds Quality into the Care Journey** by using the prompts below. Please provide specific examples, quality improvement approaches, and data/metrics to show progress and impact.

- A. Please provide an example of a successful quality improvement initiative, including how your hospital/health system identified the practice/process change, which quality/performance improvement tools and methodologies were utilized and, if applicable, ensured its systematic application throughout the hospital/health system. Please share data that shows the success of this quality improvement initiative.
- B. How does your hospital/health system empower, train, and build capacity for clinical and non-clinical staff to actively participate in and lead process change and quality improvement efforts, including how this expectation and training is reinforced, evaluated and recognized.

**3. PROMOTE SAFETY TO ACHIEVE ZERO PREVENTABLE HARM (1000 words maximum)**

Please describe how your organization **Promotes Safety to Achieve Zero Preventable Harm** by using the prompts below. Please provide specific examples, quality improvement approaches, and data/metrics to show progress and impact.

- A. How does your hospital/health system address near misses and adverse events, including how they are reported and shared throughout the hospital/health system, and how decisions regarding corrective actions are made and disseminated.
- B. How are clinical guidelines and care protocols used in your hospital/health system to ensure that the right care is delivered at the right time to the right person.
- C. How does your hospital/health system assess clinical and non-clinical staff perceptions of the quality and safety culture, including how results are shared and used for improvement.
- D. How does your hospital/health system work to identify and improve teamwork and communication for patient safety.

**4. FOSTER ENGAGEMENT TO IMPROVE QUALITY AND BUILD TRUST (850 words maximum)**

Please describe how your organization **Fosters Engagement to Improve Quality and Build Trust** by using the prompts below. Please provide specific examples, quality improvement approaches, and data/metrics to show progress and impact.

- A. How are patients and families involved in designing the total experience of care at your hospital/health system including efforts to meet special physical, psychological, developmental, cultural, and spiritual needs.
- B. Please describe how patients and families are involved and supported as members of your hospital/health system's patient and family advisory councils and members of safety and quality improvement teams.
- C. How does your hospital/health system enhance patient access to useful information, including a patient's medical record as well as educational resources, while protecting confidentiality. Please share the tools/resources your hospital utilizes in this effort and how they've impacted patient health literacy and building trust with your patients.
- D. What are your hospital/health system's policies and procedures on how patients and families are informed of errors; the processes in place to keep them informed as an investigation progresses; how this is monitored; and how the data from an investigation is utilized for future improvements.

**5. ADVANCE HEALTH EQUITY AND COMMUNITY PARTNERSHIPS (1,000 words maximum)**

Please describe how your organization **Advances Health Equity and Community Partnerships** by using the prompts below. Please provide specific examples, quality improvement approaches, data/metrics to show progress and impact.

- A. How does your hospital/health system promote an equitable and just culture for patients and families as well as staff.
- B. Please provide an example of a successful partnership(s) between your hospital/health system and a partnering community agency or organization to provide individuals and the community with access to exceptional quality; safe, timely, effective, efficient, equitable, patient- and family- centered (STEEEP) and affordable care.
- C. How does your hospital/health system identify and take action to address the community's racial, ethnic and gender disparities in health as well as medical care. Please provide examples, if possible, including how your hospital/health system is working with others to expand access to address the unmet needs of your community and address social determinants of health.
- D. How does your hospital/health system demonstrate transparency and takes accountability for improving community health status and outcomes, including reporting clinical performance measures. Please provide supporting data.

**6. STRENGTHEN RESILIENCE AND WORKFORCE** (750 words maximum)

Please describe how your organization **Strengthens Resilience and Workforce** by using the prompts below. Please provide specific examples, quality improvement approaches, data/metrics to show progress and impact.

- A. What strategies or initiatives has your hospital/health system implemented to prepare for and flexibly adapt to future emergencies or challenges. If possible, discuss strategies through the lens of culture, care coordination, and/or operations. Please share associated metrics, quality assurance and improvement programs, and other activities that evaluate these strategies.
- B. How does your hospital/health system assess clinical and non-clinical staff satisfaction and engagement, frequency of assessment, and examples of how that information is used. Please share data that supports these efforts.
- C. What successful strategies or initiatives has your hospital/health system implemented to support the well-being of staff on a routine basis. Please share data that supports success.

**7. EMBRACE THE DIGITAL AGE** (500 words maximum)

Please describe how your organization **Embraces the Digital Age** by using the prompt below. Please provide specific examples, quality improvement approaches, data/metrics to show progress and impact.

- A. How does your hospital/health system ensure timely, secure, seamless communication and care coordination across all settings through digital data and analytics. If possible, explain how the data is interoperable, shared, and standardized across the care continuum.

**8. INCENTIVIZE INNOVATION AND TECHNOLOGY** (750 words maximum)

Please describe how your organization **Incentivizes Innovation and Technology** by using the prompts below. Please provide specific examples, quality improvement approaches, and data/metrics to show progress and impact.

- A. How has your hospital/health system created a culture and atmosphere that welcomes and incentivizes innovation, advanced analytics, and/or technology from any staff member in order to transform the quality of care and advance value.
- B. What does your hospital/health system consider its most significant, unique and creative innovation or technology enhancement, and related outcomes. Please include measurable data showing progress and its impact on advancing quality and value.
- C. How has your hospital/health system adapted and implemented the innovations of other organizations.