# UNTHSC PERFORMANCE IMPROVEMENT COMMITTEE PRESIDENT'S AWARD FOR BEST PRACTICES 2007

# **PURPOSE & DEFINITION**

The purpose of the President's Award for Best Practices is to identify and celebrate Best Practices at UNT Health Science Center. Best Practices are integral to achieving the institutional mission. A Best Practice is a technique or methodology that, through experience and research, has proven to be the best path to a desired result, such as superior performance against key organizational benchmarks. Best Practices will include specific guidelines, tactics, and procedures for accomplishing the objective effectively and efficiently. Best Practices should include a systematic process for performance improvement, such as PDCA (Plan, Do, Check, Act). Best Practices are frequently employed by companies in the financial services industry, health care, government administration, education, project management, hardware and software product development, and elsewhere.

A practice, method, or process may be deemed as a Best Practice when:

- it produces superior results
- it is clearly a new or innovative use of human resources or technology
- it is deemed so by the organization's customers or suppliers
- it leads to exceptional performance.

# SUBMISSION REQUIREMENTS

All schools, departments and clinics within UNT Health Science Center are encouraged to submit examples of their Best Practices using the following submission requirements.

- A. Best Practice submissions must include each of the Required Components (see below for more detail) to be considered for review.
- B. Best Practice submissions must use the following format: ten pages or less (not including attachments), double spaced, 12 point font, and 1-inch margins.
- C. Best Practice submissions should include documentation of outcomes and/or processes to support the narrative.
- D. Best Practice submissions should be submitted electronically to Miranda Carter in Office of Strategy and Measurement at <u>mcarter@hsc.unt.edu</u> ext 2612. The deadline for submissions is April 2, 2007.

# **REQUIRED COMPONENTS**

## A. School/Department/Clinic Profile

Describe the organizational environment and key relationships with customers and stakeholders, i.e., where is the unit within the institution; what are its key services, programs or offerings; what is the structure and governance system; who are the major customers and stakeholders.

Describe your component's key strategic challenges and your system for performance improvement.

Describe your organizational mission and goals and how they relate to the UNTHSC mission and goals.

## B. Leadership (20 points)

Describe how your senior leaders set vision and values and create an environment for performance improvement and accomplishment of tactical initiatives. Describe how your senior leaders communicate with, empower and motivate staff to reinforce high performance.

## C. Planning (10 points)

Describe how the problem area was identified; how you collected and used data to identify the problem; and how you developed and deployed action plans to achieve your Best Practice. Describe how you allocated resources to ensure accomplishment of the Best Practice.

## D. Customers and Stakeholders (10 points)

Describe the process used to identify customers (students and patients) and stakeholders (staff, faculty, suppliers and community members) and their requirements, expectations and preferences related to the Best Practice.

# E. Measures and Indicators (10 points)

Describe how you selected, gathered and analyzed data and information to track progress on your Best Practice. List the measures and indicators used to monitor and evaluate the performance of the Best Practice. State whether comparative data (benchmarks) were used to develop measures and indicators or to evaluate the performance of the Best Practice and how needed data and information were made available to staff and others as appropriate.

# F. Faculty and/or Staff Involvement (10 points)

Describe the process used to engage faculty and/or staff in the implementation of the Best Practice. Describe any changes to work systems, staff learning and approaches used to motivate personnel.

## G. Process Management (10 points)

Describe the management or business processes that were changed to bring about the Best Practice. Describe the system of improvement used for the control and improvement of the process, e.g., Plan, Do, Check, Act. Describe the process used to monitor budget and operations related to the Best Practice.

## H. Performance Results (30 points)

Summarize your key performance results for the best practice with respect to:

- a. stakeholder/customer satisfaction (students, staff, faculty, patients, community)
- b. organizational effectiveness
- c. budgetary impact
- d. staff and faculty performance and satisfaction

# SCORING

A team consisting of Performance Improvement Committee members and previous Best Practice Award winners will review Best Practice submissions. Scores will be assigned for each required component up to the maximum available for each category.

Each section will be reviewed to determine how well the applicant answered the questions and the extent to which the answers demonstrate Approach, Deployment, Learning, and Integration.

"Approach" refers to the methods used by an organization to address the questions in Categories B–H. Applicant's approaches are evaluated for appropriateness to the criteria as well as the effectiveness in achieving their intended purpose. Approaches are also evaluated for systematic methods, that is, they are repeatable and use information and data to support learning.

"Deployment" refers to the extent to which a process is applied in addressing Best Practice requirements. Deployment is evaluated on the basis of the breadth and depth of application of the process to relevant work units throughout the organization. Deployment is also evaluated on the consistency of use of the process in relevant work units as well as completeness of coverage.

"Learning" refers to new knowledge or skills acquired through evaluation, study, experience, and innovation related to the Best Practice. Organizational learning is achieved through research and development, evaluation and improvement cycles, employee and customer ideas and input, best practice sharing, and benchmarking. Personal learning is achieved through education, training, and developmental opportunities. To be effective, these types of learning should be embedded in the way an organization operates.

"Integration" refers to the harmonization of the Best Practice to support key organizational needs. Examples of needs are strategic challenges, objectives, and related action plans; organizational mission, vision, and goals; key processes and measures; key customer/market segments and requirements; and employee groups and requirements. Effective integration goes beyond alignment and is achieved when the individual components of a performance management system operate as a fully interconnected unit.

Award winners will be announced at the Town Hall meeting in May.

# **GLOSSARY OF TERMS**

#### **Best Practice**

The term "Best Practice" refers to a technique or methodology that, through experience and research, has proven to reliably lead to a desired result. A superior method or innovative practice that contributes to the improved performance of an organization, usually recognized as "best" by other peer organizations.

#### **Benchmarks**

The term "benchmarks" refers to processes and results that represent best practices and performance for similar activities, inside or outside the education community. Benchmarks are comparative data used to evaluate one organization's performance against others.

#### Customer

The term "customer" refers to actual and potential users of your organization's services. Patients are the primary customers of health care organizations. Students are the primary customers of educational institutions.

#### Leadership

The term "leadership" refers to how leadership is exercised, formally and informally, throughout the organization—the basis for and the way that key decisions are made, communicated and carried out. It includes structures and mechanisms for decision making; selection and development of senior leaders, administrators, departments heads and faculty leaders; and reinforcement of values, ethical behavior, directions and performance expectations.

#### **Measures and Indicators**

The term "measures and indicators" refers to numerical information that quantifies inputs, output and performance dimensions of processes, programs, offerings, services and outcomes.

#### **Performance Results**

The term "performance results" refers to output results and their outcomes obtained from processes, programs and services that permit evaluation and comparison relative to goals, standards, past results and other organizations. Results are evaluated on the basis of current performance; performance related to appropriate comparisons; the rate, breadth and importance of performance improvements; and the relationship of results measures to key organizational performance requirements.

## Plan, Do, Check, Act (PDCA Cycle)

**PDCA** (aka the Deming Cycle, Shewhart cycle, or Deming Wheel) is an iterative fourstep quality control strategy. **PLAN:** establish the objectives and processes necessary to deliver results in accordance with the specifications. **DO:** implement the processes. **CHECK:** monitor and evaluate the processes and results against objectives and Specifications and report the outcome. **ACT:** apply actions to the outcome for necessary improvement. This means reviewing all steps (Plan, Do, Check, Act) and modifying the process to improve it before its next implementation.

# Process

The term "process" refers to linked activities with the purpose of producing a program or service for customers (students, patients) and/or stakeholders within or outside the organization. Generally, processes involve combinations of people, machines, tools, techniques and materials in a defined series of steps or actions.

### Stakeholders

The term "stakeholders" refers to all groups that are or might be affected by an organization's actions and success. Examples of key stakeholders include faculty, staff, governing boards, alumni, employers, other schools, funding entities, suppliers, partners and local and professional communities.