**Performance Excellence Framework: Key Questions for Rural Hospitals Assessment**

The Baldrige Performance Excellence Framework can be used as a systems-based framework for rural hospitals to develop and support critical success factors in key areas leading to performance excellence across the organization.

Key areas of the framework include:

* Leadership
* Strategic Planning
* Patients, Partners and Communities
* Measurement, Feedback and Knowledge Management
* Workforce and Culture
* Operations and Processes
* Impact and Outcomes

Assess your organizations’ current capacity in each of these key areas to help identify opportunities for growth and development of system-based capacity for excellence.

Consider having a team of 6 - 8 people from across your organization complete this assessment independently, then use it as a tool for discussion to bring in perspective from across the organization, to understand varying perceptions, gain buy-in and identify opportunities and priorities for action.

For more information on the Baldrige Performance Excellence Framework and a blueprint for performance excellence in critical access hospitals, please see the Critical Access Hospital Blueprint for Performance Excellence available at:

[https://www.ruralcenter.org/tasc/resources/critical-access-hospital-blueprint-](https://www.ruralcenter.org/tasc/resources/critical-access-hospital-blueprint-performance-excellence)  [performance-excellence](https://www.ruralcenter.org/tasc/resources/critical-access-hospital-blueprint-performance-excellence)

If you have additional questions, please contact the Technical Assistance and Services Center (TASC), a program of the National Rural Health Resource Center at: [tasc@ruralcenter.org](mailto:tasc@ruralcenter.org) or (218) 727-9390.

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| **Performance Excellence Framework: Key Questions for Rural Hospitals Assessment** | | | | |
| *Please check the appropriate box:* | | | | |
| ***Leadership***  **Our Leadership team…** | **Strongly Disagree 1** | **Somewhat Disagree 2** | **Somewhat Agree**  **3** | **Strongly Agree**  **4** |
| Is aware of health industry trends and changes and how they may impact our facility |  |  |  |  |
| Understands need for systems approach in all aspects of our organization |  |  |  |  |
| Provides ongoing education opportunities for board, internal leadership and managers |  |  |  |  |
| Aligns hospital and medical leadership around values, goals and strategies |  |  |  |  |
| Empowers and motivates hospital employees to achieve performance excellence |  |  |  |  |
| ***Strategic Planning***  **Our Organization…** | **Strongly Disagree 1** | **Somewhat Disagree 2** | **Somewhat Agree**  **3** | **Strongly Agree**  **4** |
| Conducts meaningful strategic planning at least annually |  |  |  |  |
| Involves multiple stakeholders to ensure strategic plans reflect community needs |  |  |  |  |
| Uses a systems framework for planning to ensure a holistic approach |  |  |  |  |
| Communicates the plan organization-wide in easy to understand language |  |  |  |  |
| ***Patients, Partners and Communities***  **Our organization…** | **Strongly Disagree 1** | **Somewhat Disagree 2** | **Somewhat Agree**  **3** | **Strongly Agree**  **4** |
| Measures and publicly reports data on patient satisfaction |  |  |  |  |
| Excels at customer services as shown by our comparative results on patient satisfaction |  |  |  |  |
| Engages in partnerships with larger systems or rural networks |  |  |  |  |
| Works collaboratively with other types of providers in our service area to improve transitions of care and care continuity |  |  |  |  |
| Collaborates with public and private organizations in the community to assess and improve health of the population |  |  |  |  |

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| *Please check appropriate box:* | | | | |
| ***Measurement, Feedback and Knowledge Management***  **Our organization…** | **Strongly Disagree 1** | **Somewhat Disagree 2** | **Somewhat Agree**  **3** | **Strongly Agree**  **4** |
| Uses a strategic framework to manage information (such as a Balanced Scorecard) |  |  |  |  |
| Evaluates strategic process regularly and shares information organization-wide |  |  |  |  |
| Uses data to improve health and safety of patients in the service area |  |  |  |  |
| ***Workforce and Culture***  **Our organization…** | **Strongly Disagree 1** | **Somewhat Disagree 2** | **Somewhat Agree**  **3** | **Strongly Agree**  **4** |
| Supports development of a workforce that is change ready and adaptable |  |  |  |  |
| Has an intense focus on staff development and satisfaction |  |  |  |  |
| Supports ongoing staff skill building and education |  |  |  |  |
| Has developed a customer/patient focused staff culture |  |  |  |  |
| ***Operations and Processes***  **Our organization…** | **Strongly Disagree 1** | **Somewhat Disagree 2** | **Somewhat Agree**  **3** | **Strongly Agree**  **4** |
| Has developed efficient business processes and operations in all areas |  |  |  |  |
| Continually improves quality and safety |  |  |  |  |
| Uses technology appropriately to improve efficiency and quality |  |  |  |  |
| Ensures continuous process improvement is embedded in the culture |  |  |  |  |
| ***Impact and Outcomes***  **Our organization…** | **Strongly Disagree 1** | **Somewhat Disagree 2** | **Somewhat Agree**  **3** | **Strongly Agree**  **4** |
| Regularly documents and assesses outcomes and impact of the care and services we provide |  |  |  |  |
| Reports quality outcomes to federal agencies, community, staff and other stakeholders |  |  |  |  |
| Benchmarks outcomes with peers and internally |  |  |  |  |
| Documents value in terms of cost, efficiency, quality, satisfaction and population health |  |  |  |  |

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