

# The ACHS Quality Improvement Awards 2024

## Submission Guidelines

The ACHS Quality Improvement (QI) Awards acknowledge healthcare organisations that achieve excellence and innovation in clinical care, organisation-wide practice, service delivery and performance measurement. The QI Awards provide ACHS program members and ACHS Clinical Indicator members with the opportunity to share patient-focused innovation and communicate their quality improvement achievements.

### Eligibility

- > Entry is open to all current members of the ACHS Accreditation and Clinical Indicator programs.
- > The ACHS QI Awards are open to private and public organisations, large and small healthcare facilities in rural, regional and metropolitan settings.
- > Projects that have been entered in other awards are eligible to be entered in the ACHS QI Awards 2024.
- > Your application **MUST** relate to a quality improvement activity that has been implemented within the last two (2) years, at your organisation.
- > All entrants agree to the publication and distribution of their submission(s) by ACHS (see sections on Privacy and Publication of QI Awards Reports).

### Selecting a QI Category

There are three (3) QI Award 2024 categories:

- > **Clinical Excellence and Patient Safety**
- > **Non-Clinical Service Delivery**
- > **Healthcare Measurement**

Refer to page 5 of this document for further information about these categories. There are no restrictions on the number of separate entries you may submit. Organisations may make multiple submissions in a single category or enter multiple submissions across different categories. If you are unsure which category to select for your submission, please contact the Healthcare Standards Team at The Australian Council on Healthcare Standards on +61 (0)2 8218 2766 or email [qi.award@achs.org.au](mailto:qi.award@achs.org.au).

### Privacy

Please ensure that your submission does not contain confidential information or restricted intellectual property (IP) that should not be circulated in the public domain. ACHS will not assume liability for IP breaches due to the inappropriate distribution of information from parties external to the organisation. Submissions remain the property of ACHS. The information contained in the submission may be used for promotional purposes by ACHS. This may include imagery contained within the application.

In accordance with privacy legislation, ACHS assumes submitting authors have granted consent to publish any material contained in the application and reports. Any authors who do not wish their names or specific materials to be published must advise ACHS in writing prior to the electronic submission closing date.

## Preparing your Application

All submissions to the ACHS QI Awards 2024 must use the **ACHS QI Awards 2024 – Submission Document** template provided and be **uploaded via the [QI Awards Judgify Platform](#) only.**

- > Only one submission per one complete document will be accepted.
- > Submissions cannot be entered into multiple categories.
- > The font type, size, colour and margin formatting in the template document must be retained.
- > This document must remain in MS Word (either .doc or .docx format) as it will be reformatted for publication.
- > The use of acronyms and abbreviations should be avoided unless they are the name of a process or product. These should be clearly defined in-text.

**NOTE:** Please complete the registration and submission form details via Judgify prior to uploading your submission document.

The following sections of the **Submission Document** template must be completed:

### 1. Aim

The aim is to be text only and is limited to a maximum of four (4) sentences. If necessary, the aim can include dot points, however, it is discouraged. Insert the aim text in the field "Insert text". The font settings to be retained are Calibri 10pt, 1.0 line spacing, justified text alignment.

### 2. Summary Abstract

The Summary Abstract is limited to 1000 words. The Summary Abstract is to be text only and must not contain figures, tables, plates or equations. If necessary, the Summary Abstract can include dot points, however, it is discouraged. Insert the Summary Abstract in the field "Insert text". The font settings to be retained, 1.0 line spacing, justified text alignment.

### 3. Report

The Report section gives an opportunity for candidates to provide detailed information about their submission. Insert the Report text under the grey-shaded heading "C. REPORT". The font settings to be retained are Calibri 10pt, 1.0 line spacing, justified text alignment.

- > Please limit the Report to 3500 words. The word count includes all content in the submission (headings, body text, legend text and in-text citations).
- > The Report section of the **Submission Document** template includes headings to guide applicants in accordance with the QI Awards marking criteria. It is strongly advised that applicants use these headings as part of their submission text structure.
- > Figures, tables, plates and equations may be included in the report section or attached as an appendix.
- > Include legends for any figures, tables, plates or equations which are numbered sequentially from start to end of the document (legend text is included in the document word count).
- > In-text reference to figure, tables, plates or equations is strongly encouraged.
- > In-text references to appendix elements are strongly encouraged.
- > In-text reference citations must follow the Harvard System format.

### 4. References

Referencing should follow the *Harvard System*. Specific formatting is at the applicant's discretion on the proviso that the format is internally consistent throughout the document.

### 5. Appendix

Supporting appendix information:

- > Restricted to five elements.
- > Each appendix element should begin with an appendix title and be numbered sequentially followed by the title (e.g. Appendix 1: xxx, Appendix 2: xxx ...).
- > Each appendix element must begin on a separate page and be incorporated in the **Submission Document**. Multiple documents for one submission are strongly discouraged.
- > Multimedia formats (e.g. MPGs, DVDs, flash drives) will not be accepted in the judging proceedings.

If you have any questions, please contact the Healthcare Standards Team at The Australian Council on Healthcare Standards on +61 (0)2 8218 2766 or email [qi.award@achs.org.au](mailto:qi.award@achs.org.au).

## Announcements of QI winners

The QI Awards will be presented at the ACHS Awards Ceremony, in November 2024. Successful applicants will be notified directly by the ACHS Executive Director – Customer Services & Development. The winners in each QI Award category and the Highly Commended entries will be announced on the ACHS website and social media platforms after the Awards Ceremony.

## QI Awards Publication

The winner's and highly commended entries of the *Quality Initiatives – 27<sup>th</sup> Annual Quality Improvement Awards 2024* will be published on the ACHS website. The publication will include the full submission of each winning entry, abstracts of the highly commended submissions and a list of all submissions in each category.

## Submitting your Application

Applicants are required to send their submissions to ACHS in only electronic format via the Judgify Platform.

### Electronic Submission

Applicants are required to upload their completed **Submission Document** and relevant supporting documents to ACHS.

> Via: <https://www.judgify.me/achsgiawards2024>

> Save the file in the format before submission: [Surname of lead author], [QI Awards Category], [State/Territory/Country].

- E.g. Smith, CE, NSW
- Note for each QI Awards Category:  
CE = Clinical Excellence and Patient Safety,  
NC = Non-Clinical Service Delivery, and  
HM = Healthcare Measurement.

> The submission document must be saved in MS Word format (.doc or .docx).

> **Please note:** If you are both an author and the primary contact, please include your name in both sections of the Judgify submission form.

**Your electronic submission must be uploaded in time to reach ACHS by Friday, 6 September 2024 (5.00pm AEST) (GMT+10:00).**

**Please note:** You are no longer required to email or post any submission(s) to the ACHS office.

## QI Awards Judging

The judging panel for each of the three (3) categories consists of an ACHS councillor, an ACHS surveyor and a representative from an ACHS member organisation.

- > Judges are ineligible to vote on any entry from their own organisation.
- > The judging panels may request ACHS seek clarification of content or request additional information from a submitting organisation.
- > Entries will be judged only in the category nominated by the applicant.
- > Determining appropriateness according to the criteria is at the discretion of the judges whose decision is final.
- > A **Highly Commended** certificate may be awarded to exceptional submissions at the discretion of the judges.

## Marking criteria

The submission **MUST** relate to a period of up to no more than two (2) years prior to the year of entry.

Judges will assess all eligible submissions on the five (5) ACHS principles (see page 6):

<b>A1</b>	Is there a <b>consumer focus</b> ?
<b>A2</b>	Is there a culture of <b>effective leadership</b> ?
<b>A3</b>	Does it demonstrate <b>continuous improvement</b> ?
<b>A4</b>	Is there <b>evidence of outcomes</b> ?
<b>A5</b>	Does the project show evidence of <b>best practice</b> ?

Judges will also assess additional criteria:

<b>B1</b>	Is there a clear demonstration of improvement in patient safety and care?
<b>B2</b>	Were the outcomes measured?
<b>B3</b>	Is the project applicable to other settings?
<b>B4</b>	Does the project reflect innovation in patient care and/or processes?
<b>B5</b>	Is the project relevant to the QI award category?

## QI Award Categories

Submissions to the QI Awards will be in one (1) of three (3) categories:

### 1. Clinical Excellence and Patient Safety

The Clinical Excellence and Patient Safety Award recognises innovation and demonstrated quality improvement in the delivery of safe, effective consumer / patient care. Previous winning submissions in this category have included:

- Hep C is Everyone's Business – An Approach for Virtual Elimination of Hepatitis C from South Australian Prisons
- Wandjina: A new residential model of care to treat eating disorders in Australia
- Preventing Catheter Associated Urinary Tract Infection
- The Keep Them Safe Whole Family Team Gosford Pilot Project
- Reducing pressure ulcers in patients with hip fractures
- The introduction of an improved hospital-wide medication safety system
- The implementation of a system to better manage dialysis access
- A system to reduce the waiting time in an Emergency Department
- Improving safety, quality, and efficiency of care through the development of an Electronic Medical Record (EMR)

### 2. Non-Clinical Service Delivery

The Non-Clinical Service Delivery Award acknowledges a demonstrated outcome in improvement and innovation to patient / consumer services and organisation-wide practice including services provided by community and allied health. Previous winning submissions in this category have included:

- From words to images: Implementing Video Interpreting
- Embedding a culture of transformation at Gold Coast Health
- Good Start to Life – Co-designing optimal maternal and infant nutrition resources for and by Maori and Pacific Islanders families living in Queensland
- Preventing Infection through Cleaner Hospitals (PITCH): An Environmental Cleaning Bundle
- BloodMove Project
- Building capacity and skill for healthcare communication
- A volunteer-supported laundry to assist palliative care patients
- A return-to-work program for rural nursing staff
- Innovative improvement to food services for patients with allergies

### 3. Healthcare Measurement

This category recognises organisations which have measured an aspect of clinical management and/or outcome of care, taken appropriate action in response to that measurement, and demonstrated improved consumer / patient care and organisational performance upon further measurement. Healthcare measurement can include data collected from the ACHS Clinical Indicator program or other methods of monitoring consumer / patient care processes or outcomes. Both quantitative and qualitative data can be used, however this category must describe the initial measurement, the analysis of that measurement, the action(s) implemented, and the improved measurement(s). Previous winning submissions in this category have included:

- Parkinson Inpatient Experience (PIE) Project
- Virtual Clinical Pharmacy Service Project – Mental Health
- Sustaining Improvement in the management of the Endoscopy Waitlist
- Sustaining Improvements in Cystic Fibrosis (CF) Nutrition Outcomes
- Taking staff influenza vaccination rates to a record level
- Making food and nutrition care a priority
- Performance indicators developed to improve safety systems in the management of warfarin therapy
- A benchmarking project to integrate an external service discharge process for aged care patients and enable the reduction of patient length of stay.
- Up and at 'Em: a trial of early mobilisation in elective orthopaedics in the rural context

## ACHS Principles

Submissions to the QI Awards must address five (5) ACHS principles:

### 1. A consumer focus

Organisations demonstrate this in their care provision by:

- understanding the needs and expectations of present and potential consumers / patients,
- ensuring consumers / patients are the priority,
- evaluating the service from the consumer / patient perspective.

### 2. Effective leadership

Organisations demonstrate responsibility and commitment to excellence in care provision, quality improvement and performance by:

- providing direction for the organisation / health service,
- pursuing the ongoing development of strategies, systems and methods for achieving excellence,
- inspiring and motivating the workforce and encouraging employees to contribute, develop and learn,
- considering proposals that are innovative and creative.

### 3. Continuous improvement

Management and staff demonstrate how they continually strive to improve the quality of care. Continuous improvement assists the organisation / health service through:

- looking for ways to improve as an essential part of everyday practice,
- consistently achieving and maintaining quality care that meets consumer / patient needs,
- monitoring outcomes in consumer / patient care and seeking opportunities to improve both the care and its results.

### 4. Evidence of outcomes

Organisations depend on the measurement and analysis of performance. Indicators of good care processes or, wherever possible, outcomes of care demonstrate a commitment to maintaining quality and striving for ongoing improvement by:




- providing critical data and information about key processes, outputs and results,
- reflecting those factors that lead to improved health and/or quality of life for consumers / patients or to better operational performance.

### 5. Striving for best practice

The organisation compares its performance with, or learns from, others and applies best-practice principles. Organisations might demonstrate their efforts through:

- discovering new techniques and technologies, and using them to achieve world-class performance,
- learning from others to increase the efficiency and effectiveness of processes,
- improving consumer / patient satisfaction and outcomes.

For more information about the QI Awards or submission requirements please contact the ACHS Standards and Product Development Unit.

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