

LifeBridge Organ and Tissue Sharing Case Study Feedback Report

nonprofit

2019

Baldrige Performance Excellence Program

National Institute of Standards and Technology (NIST) • United States Department of Commerce



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The Baldrige Program welcomes your comments on the case study and other Baldrige products and services. Please direct your comments to the address above.

The Baldrige Program is very grateful to an actual organ procurement organization that allowed its own Baldrige-based award application to be the basis for this case study. From that real application, names and data have been fictionalized, and elements have been intentionally edited to be less mature, less beneficial, and missing in order for this case study to score lower than the real application. Such editing was done so that Baldrige examiners being trained using the case study can more easily identify opportunities for improvement and general feedback.

The LifeBridge Organ and Tissue Sharing Case Study Feedback Report is a fictional Baldrige Award feedback report developed by a team of experienced Baldrige examiners who evaluated the LifeBridge Organ and Tissue Sharing Case Study against the 2019–2020 Baldrige Criteria for Performance Excellence, conducting an Independent Review and a Consensus Review. The fictitious case study organization is intended to be a regional organ and tissue procurement organization for people living in a federally assigned territory within the made-up states of North and South Takoma. There is no connection between the fictitious LifeBridge Organ and Tissue Sharing and any other organization, named either LifeBridge Organ and Tissue Sharing or otherwise. The names of several national and government organizations are included to promote the realism of the case study as a training tool, but all data and content about them have been fictionalized, as appropriate; all other organizations cited in the case study are fictitious or have been fictionalized.

LifeBridge Organ and Tissue Sharing scored in band 4 for process items and band 3 for results items. An organization in band 4 for process items demonstrates effective, systematic approaches generally responsive to the overall Criteria questions. Deployment may vary in some areas or work units. Key processes benefit from fact-based evaluation and improvement, and approaches are being aligned with overall organizational needs. For an organization that scores in band 3 for results items, results address areas of importance to the basic Criteria questions and accomplishment of the organization's mission, with good performance being achieved. Comparative and trend data are available for some of these important results areas, and some trends are beneficial.

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Baldrige Performance Excellence Program

October 1, 2019

Marie Jamerson
Chief Executive Officer
LifeBridge Organ and Tissue Sharing
444000 Georgie Boulevard, Suite 100
Columbia, NT 01011

Dear Mrs. Jamerson:

Congratulations for taking the Baldrige challenge this year! We commend you for your commitment to performance excellence as demonstrated by your applying for the Malcolm Baldrige National Quality Award (MBNQA), the nation's highest award for organizational excellence.

The enclosed feedback report, which was prepared for your organization by members of the volunteer Board of Examiners in response to your application, describes areas identified as strengths and opportunities for possible improvement and shows your organization's scoring. The report contains the examiners' observations about your organization, but it is not intended to prescribe a specific course of action. In some cases, the comments do not cover all areas to address within a Criteria item; instead, the examiner team collectively identifies your most significant strengths and your most important opportunities for improvement. Please refer to the "Preparing to Read Your Feedback Report" introductory section for suggestions about how to use the information contained in your feedback report.

We are eager to ensure that the comments in the report are clear to you so that you can incorporate the feedback into your planning process to continue to improve your organization. As direct communication between examiners and applicants is not permitted, please contact me at (301) 975-2361 if you wish to clarify the meaning of any comment in your report. We will contact the examiners for clarification and convey their intentions to you.

The feedback report is not your only source of ideas about organizational improvement and excellence. Current and previous Baldrige Award recipients can be potential resources for your organization's efforts in any performance dimension addressed by the Criteria. Information on contacting Baldrige Award recipients is located at the end of your feedback report. The 2019 award recipients and any organizations recognized for category best practices as well as previous recipients will share their best practices at our annual Quest for Excellence® Conference, March 24–27, 2020. Current and previous award recipients also participate in the Baldrige Fall Conference held each year.

In addition to the Baldrige Award and our annual conference, we offer several other products and services to assist your organization in your improvement efforts. Both the Baldrige Site Visit Experience and Baldrige Collaborative Assessment can give you detailed insight into what examiners look for and evidence found during assessments, as well as a tailored, collaborative approach to help you identify

and prioritize opportunities. Information about these offerings can be found on our website at www.nist.gov/baldrige or by contacting us at baldrige@nist.gov or (301) 975-2036.

In approximately 60 days, you will receive a survey from the Judges Panel of the MBNQA. As an applicant, you are uniquely qualified to provide an effective evaluation of the materials and processes that we use in administering the Baldrige Program.

Thank you for participating in the Malcolm Baldrige National Quality Award process this year. Best wishes for continued progress in your organization's quest for excellence.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Fangmeyer', with a long horizontal flourish extending to the right.

Robert G. Fangmeyer, Director
Baldrige Performance Excellence Program

Enclosures

LifeBridge Organ and Tissue Sharing

[This partial feedback report contains key factors; key themes; and items 2.2, 6.1, 7.3, and 7.4.]

Baldrige ... clearly impacted our ability to achieve better strategies. We're a company that helps create and execute strategies for others. Yet [the Baldrige framework] helped us to take our own strategy to a new and impactful level.

*C. Richard Panico, President and CEO
Integrated Project Management Company, Inc.
2018 Baldrige Award Recipient*

Preparing to read your feedback report . . .

Your feedback report contains Baldrige examiners' observations based on their understanding of your organization. The examiner team has provided comments on your organization's strengths and opportunities for improvement relative to the Baldrige Criteria. The feedback is not intended to be comprehensive or prescriptive. It will tell you where examiners think you have important strengths to celebrate and where they think key improvement opportunities exist. The feedback will not necessarily cover every question in the Criteria, nor will it say specifically how you should address these opportunities. You will decide what is most important to your organization and how best to address the opportunities.

If your organization has not applied in the recent past, you may notice a change in the way feedback comments are now structured in the report. In response to applicant feedback, the Baldrige Program now asks examiners to express the main point of the comment in the first sentence, followed by relevant examples, in many cases resulting in more concise, focused comments. In addition, the program has included Criteria item references with each comment to assist you in understanding the source of the feedback. Each 2019 feedback report also includes a graph in Appendix A that shows your organization's scoring profile compared to the median scores for all 2019 applicants at Consensus Review.

Applicant organizations understand and respond to feedback comments in different ways. To make the feedback most useful to you, we've gathered the following tips and practices from previous applicants for you to consider.

- Take a deep breath and approach your Baldrige feedback with an open mind. You applied to get the feedback. Read it, take time to digest it, and read it again.
- Before reading each comment, review the Criteria questions that correspond to each of the Criteria item references (which now precede each comment); doing this may help you understand the basis of the examiners' evaluation. The *2019–2020 Baldrige Excellence Framework* containing the Business/Nonprofit Criteria for Performance Excellence can be purchased at http://www.nist.gov/baldrige/publications/business_nonprofit_criteria.cfm.

One of the beauties of the Baldrige framework is how it saved us from ourselves by forcing the really hard questions about organizational systems and what is most essential. . . . Everything flows of course [from] our leadership system.

*Sue Dunn, President and CEO
Donor Alliance
2018 Baldrige Award Recipient*

- Especially note comments in **boldface type**. These comments indicate observations that the examiner team found particularly important—strengths or opportunities for improvement that the team felt had substantial impact on your organization’s performance practices, capabilities, or results and, therefore, had more influence on the team’s scoring of that particular item.
- You know your organization better than the examiners know it. If the examiners have misread your application or misunderstood information contained in it, don’t discount the whole feedback report. Consider the other comments, and focus on the most important ones.
- Celebrate your strengths and build on them to achieve world-class performance and a competitive advantage. You’ve worked hard and should congratulate yourselves.
- Use your strength comments as a foundation to improve the things you do well. Sharing those things you do well with the rest of your organization can speed organizational learning.
- Prioritize your opportunities for improvement. You can’t do everything at once. Think about what’s most important for your organization at this time, and decide which things to work on first.
- Use the feedback as input to your strategic planning process. Focus on the strengths and opportunities for improvement that have an impact on your strategic goals and objectives.

KEY THEMES

Key Themes—Process Items

LifeBridge Organ and Tissue Sharing (LOTS) scored in band 4 for process items (1.1–6.2) in the Consensus Review of written applications for the Malcolm Baldrige National Quality Award. For an explanation of the process scoring bands, please refer to Figure 6a, Process Scoring Band Descriptors.

An organization in band 4 for process items typically demonstrates effective, systematic approaches generally responsive to the overall Criteria questions. Deployment may vary in some areas or work units. Key processes benefit from fact-based evaluation and improvement, and approaches are being aligned with overall organizational needs.

a. The most important strengths or outstanding practices (of potential value to other organizations) identified in LOTS’s response to process items are as follows:

- Leaders manage LOTS from a systems perspective of its interdependent operations. Several approaches are integrated with the Strategic Planning Process (SPP), the Performance Measurement System (PMS), and other important processes. For example, integration of the SPP and PMS with the Communication Process, the voice of the customer, and the Corporate Compliance Program creates a focus on customers to support their satisfaction and engagement. Leveraging the PMS within the Operational Management Process (OMP) allows LOTS to synthesize daily information to monitor and manage key processes. The Workforce Performance Measurement System cascades performance goals to individual employees using scorecards that are integrated with the Performance Evaluation Process (PEP). In addition, aligning the workplace environment with workforce needs and engagement factors, as well as with the Learning and Development System, builds on LOTS’s core competency of a mission-driven workforce and strengthens its strategic advantage of a supportive culture. These aligned and integrated systems function in harmony to help LOTS deliver on its mission to save and improve lives.
- Strengthening LOTS’s core competency of a mission-driven workforce, LOTS has implemented multiple approaches that demonstrate that it values its employees. Beginning at the top, the Leadership Team (LT) models ethical behavior and uses multiple touchpoints to communicate with the workforce. Workforce members’ engagement in the success of LOTS is supported through the cascading of strategic goals and by addressing their needs via various benefit-plan options and promoting a safe operating environment. Additionally, LOTS has designed the Learning and Development System to improve workforce learning and then uses multidisciplinary meetings and Rounding for Outcomes (RFO) to capture and disseminate valuable workforce knowledge. All these workforce-focused approaches highlight LOTS’s philosophy: “We take care of ‘Our People’ so they can take care of others.”

- Multiple approaches for identifying and integrating data and information to manage LOTS's performance support its vision that organs and tissues will always be available. Steps 2, 3, 4, and 6 of the SPP involve collection and analysis of data from within and outside of LOTS's industry, and those data are then integrated with the PMS. Data from approaches for determining customer satisfaction and engagement, as well as from the customer complaint process, integrate the voice of the customer with the SPP, the PMS, and the Communication Process. These and other data and information are made available to the workforce, suppliers, partners, and customers in a timely manner. These approaches also provide data to manage cost and efficiency, which minimizes customer losses in regard to the gift of donation.

b. The most significant opportunities, concerns, or vulnerabilities identified in LOTS's response to process items are as follows:

- Systematic, fact-based evaluation of processes, a key component of organizational learning, is not apparent for processes in multiple areas. For example, LOTS does not offer evidence of continuous improvement to its existing approaches for leading the organization, developing and deploying its strategy, or operating key work processes daily. In addition, improvements are not evident in LOTS's methods for interacting with its customers and workforce. In alignment with its core values of quality and improvement, implementing systematic reviews of its processes across all Criteria categories may help LOTS better foster donations as it tries to meet needs for organs and tissue that currently outpace availability.
- It is not clear how LOTS identifies and pursues intelligent risk or strives to make significant and innovative changes to its processes, programs, and services. For example, LOTS's approaches for cultivating innovation and intelligent risk taking are not evident within leadership processes; nor are methods identified for how strategic opportunities are assessed to determine which are intelligent risks as part of incorporating innovation into strategy development. Additionally, how LOTS reinforces intelligent risk taking with the workforce or pursues opportunities for innovation in managing its work processes is not clear. As LOTS tries to ensure continued success within its designated service area working with technically advanced customers, such as transplant centers and tissue processors, methods to strategically identify intelligent risks and their pursuit may lead to breakthrough improvements.
- Systematic approaches are not evident or are unclear in many areas of importance to LOTS's success. In particular, action plans, workforce plans, measures and performance projections, and a method to address gaps between the projected performance of LOTS and that of comparable organizations are not evident. Approaches to ensure that the action plan measurement system fully reinforces organizational alignment and to track progress in achieving strategic objectives and action plans also are not evident. For example, the Topline Scorecard measures shown in Figure 4.1-2 focus predominantly on the Organ Work System, and no measures are included for the accomplishment of

action plans related to improving stakeholder satisfaction. It is also unclear whether LOTS's approaches to ensuring the security and cybersecurity of data and information are systematic and address all physical and electronic data, as well as data theft and loss. Additionally, it is not evident how LOTS ensures that customers and key stakeholders understand and fulfill their security and cybersecurity roles and responsibilities. Without systematic approaches in such areas to fully leverage its strategic advantage of embracing the Baldrige framework, LOTS may limit its ability to save and improve lives.

Key Themes—Results Items

LOTS scored in band 3 for results items (7.1–7.5). For an explanation of the results scoring bands, please refer to Figure 6b, Results Scoring Band Descriptors.

For an organization in band 3 for results items, results typically address areas of importance to the basic Criteria questions and accomplishment of the organization's mission, with good performance being achieved. Comparative and trend data are available for some of these important results areas, and some trends are beneficial.

c. Considering LOTS's key business/organization factors, the most significant strengths found in response to results items are as follows:

- Some work process effectiveness, customer-focused, workforce-focused, and leadership results demonstrate good-to-excellent performance against relevant comparisons. Among process effectiveness measures, results for Missed Organ Referrals (Figure 7.1-15) have been near zero since 2016, comparing favorably to Allograft Resources best-in-class results. Results for organ and tissue authorization (Figures 7.1-17 and 7.1-18) and for Organ Donor Yield (Figure 7.1-19) are in the top quartile of peer results. For customer-focused measures, hospital partner satisfaction regarding organs and tissue (Figures 7.1-1A and 7.1-2A) was at best-in-class levels between 2016 and 2019; total tissue and skin donors (Figures 7.1-4 and 7.1-14), as well as Local Lungs Transplanted (Figure 7.1-9), were in the top quartile. For customer satisfaction and engagement, LOTS reports good-to-excellent results levels for the Organ Work System: satisfaction with the key requirements of competence and information (Figures 7.2-1A and 7.2-1B, respectively), and results for overall engagement (Figure 7.2-1) were at the best-in-class benchmark in 2018. Some workforce engagement results are in the top quartile, while workforce development results for Training Expenditures (Figure 7.3-17) outperformed top-quartile comparisons from 2016 to 2018; those for Leader Development Satisfaction (Figure 7.3-18) were better than the top-quartile comparison in 2018. Furthermore, measures of LOTS's overall financial position (Figures 7.5-1 through 7.5-3) show good performance from 2016 to 2018 relative to the top quartile. These results demonstrate LOTS's commitment to delivering value and results.
- LOTS reports good performance for a few measures that are important to its mission. The overall satisfaction of organ transplant customers was at or near 5.0 on a 5-point

scale for administrators, coordinators, and physicians in 2018 (Figure 7.2-1C). Results for clinical staff in Radiation Exposure (Figure 7.3-8) demonstrate sustained levels near zero that are significantly better than the U.S. Department of Health and Human Services (DHSS) limit. In addition, results for Regulatory and Legal Compliance Key Measures (Figure 7.4-3) show performance at the highest possible level of achievement. These results leverage LOTS's strategic opportunity related to customer satisfaction, reinforce its strategic advantage of a supportive culture for the workforce, and reflect its core value of quality.

d. Considering LOTS's key business/organization factors, the most significant opportunities, vulnerabilities, and/or gaps (related to data, comparisons, linkages) found in response to results items are as follows:

- Results are missing for measures of key processes and for some measures related to customers, the workforce, leadership, governance, and finances and strategy. For example, some results for key work process effectiveness, safety and emergency preparedness, and supply network management are absent; customer-focused results related to aspects of the customer life cycle of pre-donation, procurement, allocation, and post-donation are not reported. Results are also missing for the key workforce driver of "relationship with co-workers"; for the workforce capability and capacity measure of skills and competencies by job description or staffing ratios; and for the workforce climate factors of health, security, and accessibility. No results are reported for the leadership approaches of RFO or for leaders' communication/engagement with partners and customers, the number of deviations from audits, the number of substantiated corporate compliance hotline issues, or recycling and reduction in energy consumption. Nor does LOTS report data reflecting the strategic challenge and opportunity of increasing registry enrollment or reflecting modified action plans based on performance projection gaps. Tracking and trending of key performance measures may strengthen LOTS's efforts to "find the heroes" and maximize the very limited donation opportunities.
- Adverse trends are reported for many measures related to work processes, customers, the workforce, and governance. For example, organs, hearts, and livers transplanted (Figures 7.1-5, 7.1-8, and 7.1-10), as well as total bone and skin donors (Figures 7.1-13 and 7.1-14) demonstrate adverse trends since 2016. Customer satisfaction and engagement measures with flat or adverse trends include Transplant Center Satisfaction—Organ (Figure 7.2-1A) for the key requirement of competence, as well as overall Tissue Processor Satisfaction (Figure 7.2-2C) for the key requirement of information. In addition, tissue customer complaints and dissatisfaction (Figures 7.2-3 and Figure 7.2-3B) show unfavorable levels and mixed trends. In addition, flat or adverse trends are evident in results for ethnic diversity among new hires (Figure 7.3-4A); for overall retention (Figure 7.3-13), and for overall job satisfaction (Figure 7.3-14). Other examples are governance results from 2016 to 2018 in all four areas of the Board Self-Assessment (Figure 7.4-2), including adverse trends for strategic and financial oversight

and mixed trends for the other areas. Addressing these results may help LOTS maximize donations.

- Some work process, customer dissatisfaction, leadership, and financial and market results are unfavorable relative to relevant comparisons or are missing comparisons. Sample results for key work and support processes include those for measures of local organs transplanted by population, local hearts transplanted, local livers transplanted, and total bone donors (Figures 7.1-5, 7.1-8, 7.1-10, and 7.1-13, respectively). For the Organ Work System, results for Observed vs. Expected by Organ (Figure 7.1-19A) are lower than the expected results for kidneys, heart, and pancreas; for the Tissue Work System, results for Skin Yield (Figure 7.1-23) are not favorable in comparison to Allograft Resources best-in-class results. Results for satisfaction with leader communication (Figure 7.4-1) are below the Excel Employee Engagement benchmark from 2016 through 2018. Additionally, Gross Revenue—Organ Work System, Days in Accounts Receivable, and Days Cash on Hand (Figures 7.5-2A, 7.5-5, and 7.5-9, respectively) were below the top-quartile comparisons from 2016 to 2018, and Market Share Growth—Allograft Resources Partners (Figure 7.5-13) shows performance below the comparison from 2016 to 2018. Improving these results may help LOTS distinguish itself for its performance amid industry changes.

DETAILS OF STRENGTHS AND OPPORTUNITIES FOR IMPROVEMENT

The numbers and letters preceding each comment indicate the Criteria item questions to which the comment refers. Not every Criteria question will have a corresponding comment; rather, these comments were deemed the most significant by a team of examiners.

[Items 1.1, 1.2, and 2.1 are not included in this report.]

Category 2 Strategy

2.2 Strategy Implementation

Your score in this Criteria item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Process Scoring Guidelines.)

STRENGTHS

- a(2) In support its core competency of a mission-driven workforce and its value of teamwork, LOTS systematically deploys its strategy to its workforce, aligning goals with individual performance and improving the approach from a reactive push from leadership to a proactive process with staff input. In Step 7 of the SPP (Figure 2.1-1), strategic goals are cascaded through the Communication Process (Figure 1.1-3), and key outcomes are tracked through a web-based program that aligns goals with individual performance.
- a(3,4) LOTS has a systematic approach to ensuring that workforce, financial, and other resources are available to support the achievement of action plans. Step 5 of the SPP includes a review of workforce capability and capacity, and the monthly budgeting process ensures that financial resources are available to support current or modified action plans.
- b LOTS systematically establishes, deploys, and integrates modified action plans when necessary, supporting the organization in responding to the strategic challenge of industry changes. Metrics are evaluated during work system meetings, LT meetings, and ongoing strategic discussions. If actual measures are not performing to expected targets, plans are modified, and if performance lags for three months, a “red-box” discussion occurs. Any corrective actions are monitored through cascading scorecards, the PEP, and RFO.

OPPORTUNITIES FOR IMPROVEMENT

- **a(1,4,5,6) Action plans, workforce plans, measures, and performance projections, as well as a method to address gaps in projected performance against comparable organizations, are not evident for LOTS’s strategic objectives, goals, and targets (Figure 2.1-3). Without a clear understanding of these elements, as well as how they align with**

and support the strategic objectives, LOTS may miss the opportunity to effectively accomplish its action plans.

- a(5) It is not clear how LOTS's action plan measurement system reinforces organizational alignment, as not all of LOTS's strategic goals (Figure 2.1-3) appear to be addressed by the Top-Line Scorecard (Figure 4.1-2). For example, the scorecard measures appear to focus on the Organ Work System, with no measures related to the accomplishment of action plans related to improvement of stakeholder satisfaction. Including such measures may allow LOTS to better address its strategic challenges related to increasing the registry and retaining the workforce.
- a(2,3,4,5),b The changes described in LOTS's approaches to strategic implementation do not appear to constitute systematic evaluation and improvement or organizational learning, including innovation. Systematically improving its approaches to strategic implementation may enable LOTS to accelerate its accomplishments of its action plans and strategic objectives.

[Items 3.1 through 5.2 are not included in this report.]

Category 6 Operations

6.1 Work Processes

Your score in this Criteria item for the Consensus Review is in the 50–65 percentage range. (Please refer to Figure 5a, Process Scoring Guidelines.)

STRENGTHS

- b(1) The OMP, which is used to ensure that work processes meet key process requirements, is deployed to both work systems, is integrated with the SPP and PMS, and uses the Corrective Action Preventive Action deviation system for learning and improvement. Ongoing evaluation of key work process measures occurs through the PMS. Alignment and integration of performance measures begin in the SPP and continue through the OMP to ensure that all data and information needs are met to effectively manage performance outcomes.
- a(1) LOTS's integration of the voice of the customer as the mechanism to determine key product and work process requirements helps leverage the business strategic advantage of stakeholder satisfaction. Examples include formal and informal surveys, feedback reports, and informal interactions. A cycle of improvement resulted in an information card for physicians and nurses to use in donation discussions, particularly donation after cardiac death.
- a(3),b(3) LOTS systematically designs and improves products and work processes through the OMP (Figure 6.1-1), which is integrated with other key processes as opportunities are identified through the SPP (Figure 2.1-1) and the PMS (Figure 4.1-1). Improvements are initiated using PDSA methodology. This approach to designing and improving work processes may help LOTS proactively identify improvement opportunities and rapidly respond to changes in requirements or performance.
- c LOTS's systematic approach to manage the supply network for the organ and tissue work systems helps ensure that services provided by referral partners meet customer needs. The Standardized Identification and Referral Process is used to ensure quality from referral to establishing donor suitability, approaching the family, and securing donation. In addition, metrics for referral suppliers are tracked and reviewed quarterly on the Hospital Services scorecard.

OPPORTUNITIES FOR IMPROVEMENT

- b(2) It is unclear how LOTS uses the OMP to determine key support processes and their requirements and determines that these processes are meeting key business

requirements during daily operations. Without a systematic approach in this area, key services and work processes may be at risk.

- d A process for pursuing opportunities for innovation in work processes is not evident, as LOTS's improvement teams appear to focus on driving continuous improvement in work processes. An approach that goes beyond continuous improvement to innovation management may enable LOTS to effectively pursue its identified strategic opportunities, such as increasing registry enrollment, by driving breakthrough improvement.
- a(3) It is unclear how new technology, risk consideration, and the potential need for agility, which are cited in a list, are incorporated into the design of products and work processes in step 4 of the OMP. Focused efforts to integrate these aspects into process design may help LOTS continue to deliver services that exceed customer expectations.
- c It is unclear how LOTS ensures that suppliers other than referral partners, such as Guardian Ambulance, Columbia Cremation, Transplant Technologies, and Wright Brothers Charters, meet operational needs and customer requirements. Approaches that go beyond communication and the tracking of performance may help ensure that suppliers contribute to the accomplishment of organizational objectives established through the SPP, PMS, and OMP.

[Items 6.2, 7.1, 7.2 and 7.5 are not included in this report.]

Category 7 Results

7.3 Workforce Results

Your score in this Criteria item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Results Scoring Guidelines.)

STRENGTHS

- a(2) In support of the key driver of employee benefits, some workforce climate results, including satisfaction with benefits, show mostly sustained good levels that are better than the comparisons shown. For example, LOTS's days away, restricted, or transferred (DART) rate was better than the U.S. Department of Labor comparison from 2016 to 2018 (Figure 7.3-7), and Radiation Exposure (Figure 7.3-8) shows sustained levels near zero, significantly better than the Department of Health and Human Services limit. In addition, satisfaction with benefits (Figure 7.3-15) shows sustained levels better than or equal to the health care industry top-quartile comparison from 2016 to 2018.
- a(3) Some workforce engagement results exhibit good relative performance against the Excel Employee Engagement top quartile, demonstrating the core competency of a mission-driven workforce. For example, Connection to the Mission (Figure 7.3-11) is better than the comparison, with the gap widening, and Overall Job Satisfaction (Figure 7.3-14) was slightly better than the comparison from 2016 to 2018.
- a(4) Reinforcing the strategic advantage of a supportive culture, LOTS demonstrates good levels, with good performance relative to comparisons, for some workforce development results. Training Expenditures (Figure 7.3-17) shows performance better than the Association for Organ Procurement Organizations (AOPO) top-quartile from 2016 to 2018; results for Leader Development Satisfaction (Figure 7.3-18) were better than the top-quartile in 2018.

OPPORTUNITIES FOR IMPROVEMENT

- a Results are missing for some measures of workforce-focused performance; namely, for the key driver of relationship with coworkers; for the workforce capability and capacity measure of skills and competencies by job description or staffing ratios; and for workforce climate processes, such as RFO or the health, security, and accessibility factors shown in Figure 5.1-5. Monitoring these results may help LOTS correlate workforce measures with any adverse trends in overall satisfaction measures.
- a(1) LOTS shows flat or adverse trends in areas of performance that are key to the achievement of a steady and diverse workforce. For example, overall retention (Figure 7.3-13) and overall job satisfaction (Figure 7.3-14) decreased from 2016 to 2018, as did the

ethnic diversity of new hires (Figure 7.3-4A). In addition, internal measures of consistent staffing levels, Organ Donors per OPC (Figure 7.3-2) and Tissue Donors per TOP (Figure 7.3-3), show adverse or mixed trends. Improving trends in these areas may help LOTS address the strategic challenge of workforce retention.

- a The workforce-focused performance results given are not segmented by the groups noted in Figure P.1-4. For example, workforce engagement results are not segmented by department, gender, tenure, or job type. Segmentation of results such as overall job satisfaction (Figure 7.3-14) and retention (Figure 7.3-13) may enable LOTS to monitor differences among these groups and make improvements to support the strategic advantage of a supportive culture and address the challenge of retention.

7.4 Leadership and Governance Results

Your score in this Criteria item for the Consensus Review is in the 30–45 percentage range. (Please refer to Figure 5b, Results Scoring Guidelines.)

STRENGTHS

- a(3,4,5) Several law and regulation, ethics, and society results show good performance levels and beneficial trends. For example, results for Regulatory and Legal Compliance Key Measures (Figure 7.4-3) are at the highest possible level. Other examples include five consecutive “unqualified opinion” determinations for LOTS’s external financial audit (Figure 7.4-4); BOD Trust of CEO (Figure 7.4-7), which reached nearly 3.00 on a 3-point scale in 2017; and the percentage of action plans completed (Figure 7.5-14), which has been sustained above 85% for four years. These results may help LOTS retain the Designated Service Area based on Centers for Medicare and Medicaid Services standards.
- a(2) Governance results for Board Self-Assessment (Figure 7.4-2) show performance better than the BoardInfo benchmarks in all four key areas for 2016–2018. This good relative performance against comparisons may reinforce the culture of a strong drive to meet the mission.

OPPORTUNITIES FOR IMPROVEMENT

- **a(1,3,4,5) Some results related to LOTS’s approaches to leadership, law and regulation, ethics, and societal well-being and support are missing. For example, LOTS does not report results for RFO or for leaders’ communication/engagement with partners and customers, for the number of deviation forms resulting from audits (1.2b[1]), for the number of substantiated corporate compliance hotline issues, or for recycling and reduction in energy consumption. Monitoring results in these areas may address the societal-responsibility-related strategic challenge of increasing registry.**
- a(1) Results for satisfaction with leader communication (Figure 7.4-1) show poor relative performance against the Excel Employee Engagement benchmark from 2016 through 2018 and lack segmentation by relevant workforce segments. Segmenting these results may help identify specific actions to improve the performance of leader communication and address the workforce strategic challenge of retention.
- a(2,4) Some governance results related to BOD requirements and to compliance show adverse or mixed trends. The BOD’s self-assessment of strategic oversight and financial oversight shows declines from 2016 to 2018, and the other areas of self-assessment show mixed trends (Figure 7.4-2). In addition, Reported Corporate Compliance Hotline Issues (Figure 7.4-6) shows an increase from 0 or 1 in 2014–2018 to 4 in 2019 year-to-date. Continuing to monitor these trends may allow LOTS to proactively identify and mitigate potential issues in these areas.

APPENDIX A

The spider, or radar, chart that follows depicts your organization’s performance as represented by scores for each item. This performance is presented in contrast to the median scores for all 2019 applicants at Consensus Review. You will note that each ring of the chart corresponds to a scoring range.

Each point in red represents the scoring range your organization achieved for the corresponding item. The points in blue represent the median scoring ranges for all 2019 applicants at Consensus Review. Seeing where your performance is similar or dissimilar to the median of all applicants may help you initially determine or prioritize areas for improvement efforts and strengths to leverage.

[The spider chart will be added when 2019 data are available.]

APPENDIX B

By submitting a Baldrige Award application, you have differentiated yourself from most U.S. organizations. The Board of Examiners has evaluated your application for the Malcolm Baldrige National Quality Award. Strict confidentiality is observed at all times and in every aspect of the application review and feedback.

This feedback report contains the examiners' findings, including a summary of the key themes of the evaluation, a detailed listing of strengths and opportunities for improvement, and scoring information. Background information on the examination process is provided below.

APPLICATION REVIEW

Independent Review

Following receipt of the award applications, the award process evaluation cycle (shown in Figure 1) begins with Independent Review, in which members of the Board of Examiners are assigned to each of the applications. Examiners are assigned based on their areas of expertise and with attention to avoiding potential conflicts of interest. Each application is evaluated independently by the examiners, who write observations relating to the scoring system described beginning on page 29 of the *2019–2020 Baldrige Excellence Framework*.

Award Process Evaluation Cycle

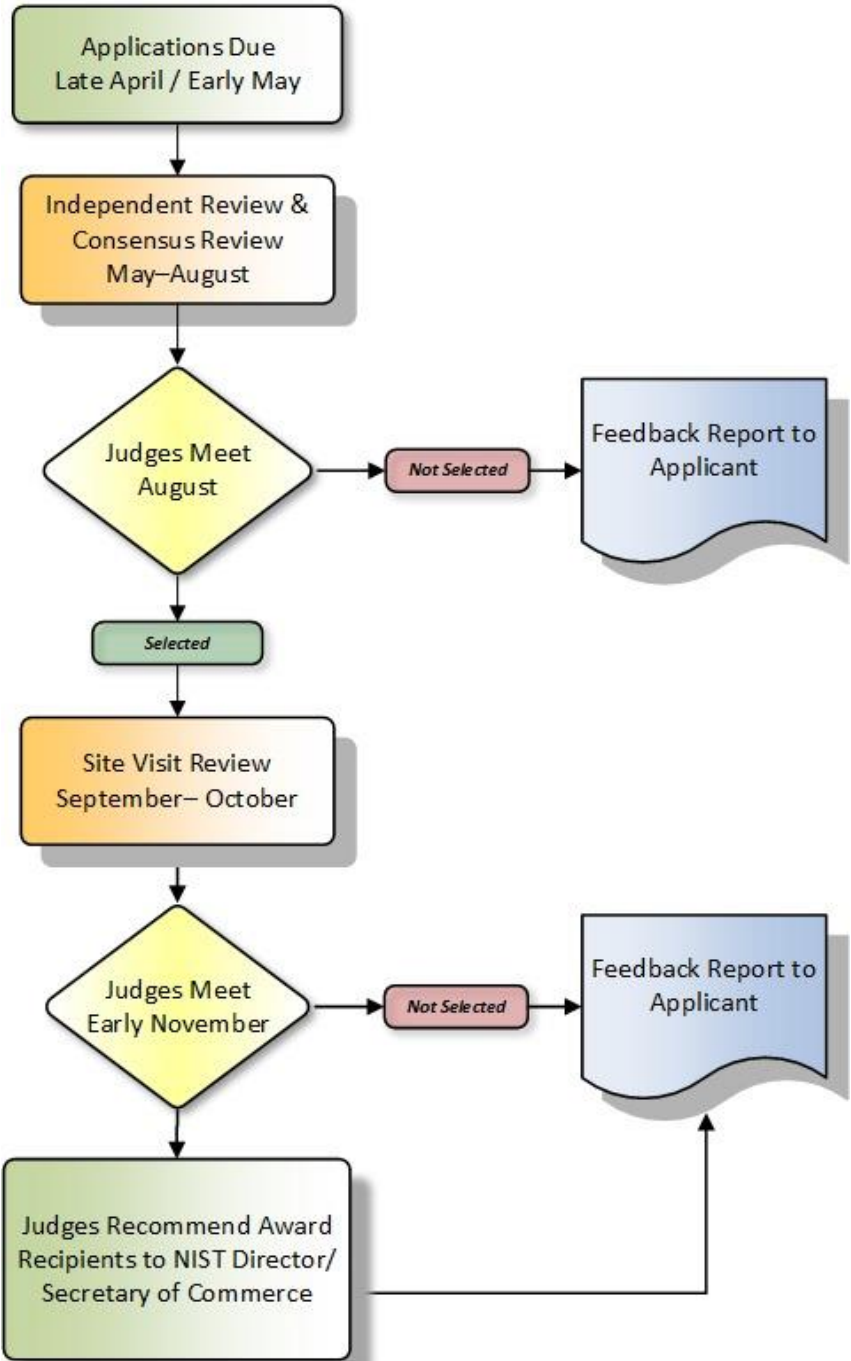


Figure 1—Award Process Evaluation Cycle

Consensus Review

In Consensus Review (see Figure 2), a team of examiners, led by a senior or master examiner, conducts a series of reviews, first managed virtually through a secure database called BOSS and eventually concluded through a focused conference call. The purpose of this series of reviews is for the team to reach consensus on comments and scores that capture the team’s collective view of the applicant’s strengths and opportunities for improvement. The team documents its comments and scores in a Consensus Scorebook.

| Step 1 Consensus Planning | Step 2 Consensus Review in BOSS | Step 3 Consensus Call | Step 4 Post-Consensus-Call Activities |
|---|--|--|--|
| <ul style="list-style-type: none"> • Clarify the timeline for the team to complete its work. • Assign category/item discussion leaders. • Discuss key business/organization factors. | <ul style="list-style-type: none"> • Review all Independent Review evaluations—draft consensus comments and propose scores. • Develop comments and scores for the team to review. • Address feedback, incorporate inputs, and propose a resolution of differences on each worksheet. • Review updated comments and scores. | <ul style="list-style-type: none"> • Discuss comments, scores, and all key themes. • Achieve consensus on comments and scores. | <ul style="list-style-type: none"> • Revise comments and scores to reflect consensus decisions. • Prepare final Consensus Scorebook. • Prepare feedback report. |

Figure 2—Consensus Review

Site Visit Review

After Consensus Review, the Judges Panel of the Malcolm Baldrige National Quality Award selects applicants to receive site visits based on the scoring profiles. If an applicant is not selected for Site Visit Review, the final Consensus Scorebook receives a technical review by a highly experienced examiner and becomes the feedback report.

Site visits are conducted for the highest-scoring applicants to clarify any uncertainty or confusion the examiners may have regarding the written application and to verify that the information in the application is correct (see Figure 3 for the Site Visit Review process). After the site visit, the team of examiners prepares a final Site Visit Scorebook.

| Step 1 Team Preparation | Step 2 Site Visit | Step 3 Post-Site-Visit Activities |
|--|---|---|
| <ul style="list-style-type: none"> • Review consensus findings. • Develop site visit issues. • Plan site visit. | <ul style="list-style-type: none"> • Make/receive presentations. • Conduct interviews. • Record observations. • Review documents. | <ul style="list-style-type: none"> • Resolve issues. • Summarize findings. • Finalize comments. • Prepare final Site Visit Scorebook. • Prepare feedback report. |

Figure 3—Site Visit Review

Applications and Site Visit Scorebooks for all applicants receiving site visits are forwarded to the Judges Panel for review (see Figure 4). The judges recommend which applicants should receive the Baldrige Award and identify any non-award recipient organizations demonstrating one or more Category Best Practices. The judges discuss applications in each of the six award sectors separately, and then they vote to keep or eliminate each applicant. Next, the judges decide whether each of the top applicants should be recommended as an award recipient based on an “absolute” standard: the overall excellence of the applicant and the appropriateness of the applicant as a national role model. For each organization not recommended to receive the Baldrige Award, the judges have further discussion to determine if the organization demonstrates any Category Best Practices. The process is repeated for each award sector.

| Step 1 Judges Panel Review | Step 2 Evaluation by Category | Step 3 Assessment of Top Organizations |
|---|---|--|
| <ul style="list-style-type: none"> • Applications • Consensus Scorebooks • Site Visit Scorebooks | <ul style="list-style-type: none"> • Manufacturing • Service • Small business • Education • Health care • Nonprofit | <ul style="list-style-type: none"> • Overall strengths/opportunities for improvement • Appropriateness as national model of performance excellence |

Figure 4—Judges’ Review

Judges do not participate in discussions or vote on applications from organizations in which they have a competing or conflicting interest or in which they have a private or special interest, such as an employment or a client relationship, a financial interest, or a personal or family relationship. All conflicts are reviewed and discussed so that judges are aware of their own and others' limitations on access to information and participation in discussions and voting.

Following the judges' review and recommendation of award recipients, the Site Visit Review team leader edits the final Site Visit Scorebook, which becomes the feedback report.

SCORING

The scoring system used to score each item is designed to differentiate the applicants in the various stages of review and to facilitate feedback. As seen in the Process Scoring Guidelines and Results Scoring Guidelines (Figures 5a and 5b, respectively), the scoring of responses to Criteria items is based on two evaluation dimensions: process and results. The four factors used to evaluate process (categories 1–6) are approach (A), deployment (D), learning (L), and integration (I), and the four factors used to evaluate results (items 7.1–7.5) are levels (Le), trends (T), comparisons (C), and integration (I).

In the feedback report, the applicant receives a percentage range score for each item. The range is based on the scoring guidelines, which describe the characteristics typically associated with specific percentage ranges.

As shown in Figures 6a and 6b, the applicant's overall scores for process items and results items each fall into one of eight scoring bands. Each band score has a corresponding descriptor of attributes associated with that band. Figures 6a and 6b show the percentage of applicants scoring in each band at Consensus Review.

| SCORE | DESCRIPTION |
|-----------------------|--|
| 0% or 5% | <ul style="list-style-type: none"> No SYSTEMATIC APPROACH to item questions is evident; information is ANECDOTAL. (A) Little or no DEPLOYMENT of any SYSTEMATIC APPROACH is evident. (D) An improvement orientation is not evident; improvement is achieved by reacting to problems. (L) No organizational ALIGNMENT is evident; individual areas or work units operate independently. (I) |
| 10%, 15%, 20%, or 25% | <ul style="list-style-type: none"> The beginning of a SYSTEMATIC APPROACH to the BASIC question in the item is evident. (A) The APPROACH is in the early stages of DEPLOYMENT in most areas or work units, inhibiting progress in achieving the BASIC question in the item. (D) Early stages of a transition from reacting to problems to a general improvement orientation are evident. (L) The APPROACH is ALIGNED with other areas or work units largely through joint problem solving. (I) |
| 30%, 35%, 40%, or 45% | <ul style="list-style-type: none"> An EFFECTIVE, SYSTEMATIC APPROACH, responsive to the BASIC question in the item, is evident. (A) The APPROACH is DEPLOYED, although some areas or work units are in early stages of DEPLOYMENT. (D) The beginning of a SYSTEMATIC APPROACH to evaluation and improvement of KEY PROCESSES is evident. (L) The APPROACH is in the early stages of ALIGNMENT with the basic organizational needs identified in response to the Organizational Profile and other process items. (I) |
| 50%, 55%, 60%, or 65% | <ul style="list-style-type: none"> An EFFECTIVE, SYSTEMATIC APPROACH, responsive to the OVERALL questions in the item, is evident. (A) The APPROACH IS WELL DEPLOYED, although DEPLOYMENT may vary in some areas or work units. (D) A fact-based, SYSTEMATIC evaluation and improvement PROCESS and some organizational LEARNING, including INNOVATION, are in place for improving the efficiency and EFFECTIVENESS of KEY PROCESSES. (L) The APPROACH IS ALIGNED with your overall organizational needs as identified in response to the Organizational Profile and other process items. (I) |
| 70%, 75%, 80%, or 85% | <ul style="list-style-type: none"> An EFFECTIVE, SYSTEMATIC APPROACH, responsive to MULTIPLE questions in the item, is evident. (A) The APPROACH is well DEPLOYED, with no significant gaps. (D) Fact-based, SYSTEMATIC evaluation and improvement and organizational LEARNING, including INNOVATION, are KEY management tools; there is clear evidence of refinement as a result of organizational-level ANALYSIS and sharing. (L) The APPROACH IS INTEGRATED with your current and future organizational needs as identified in response to the Organizational Profile and other process items. (I) |
| 90%, 95%, or 100% | <ul style="list-style-type: none"> An EFFECTIVE, SYSTEMATIC APPROACH, fully responsive to the MULTIPLE questions in the item, is evident. (A) The APPROACH is fully DEPLOYED without significant weaknesses or gaps in any areas or work units. (D) Fact-based, SYSTEMATIC evaluation and improvement and organizational LEARNING through INNOVATION are KEY organization-wide tools; refinement and INNOVATION, backed by ANALYSIS and sharing, are evident throughout the organization. (L) The APPROACH is well INTEGRATED with your current and future organizational needs as identified in response to the Organizational Profile and other process items. (I) |

Figure 5a—Process Scoring Guidelines (For Use with Categories 1–6)

| SCORE | DESCRIPTION |
|-----------------------|--|
| 0% or 5% | <ul style="list-style-type: none"> • There are no organizational PERFORMANCE RESULTS, or the RESULTS reported are poor. (Le) • TREND data either are not reported or show mainly adverse TRENDS. (T) • Comparative information is not reported. (C) • RESULTS are not reported for any areas of importance to the accomplishment of your organization’s MISSION. (I) |
| 10%, 15%, 20%, or 25% | <ul style="list-style-type: none"> • A few organizational PERFORMANCE RESULTS are reported, responsive to the BASIC QUESTION in the item, and early good PERFORMANCE LEVELS are evident. (Le) • Some TREND data are reported, with some adverse TRENDS evident. (T) • Little or no comparative information is reported. (C) • RESULTS are reported for a few areas of importance to the accomplishment of your organization’s MISSION. (I) |
| 30%, 35%, 40%, or 45% | <ul style="list-style-type: none"> • Good organizational PERFORMANCE LEVELS are reported, responsive to the BASIC QUESTION in the item. (Le) • Some TREND data are reported, and most of the TRENDS presented are beneficial. (T) • Early stages of obtaining comparative information are evident. (C) • RESULTS are reported for many areas of importance to the accomplishment of your organization’s MISSION. (I) |
| 50%, 55%, 60%, or 65% | <ul style="list-style-type: none"> • Good organizational PERFORMANCE LEVELS are reported, responsive to the OVERALL QUESTIONS in the item. (Le) • Beneficial TRENDS are evident in areas of importance to the accomplishment of your organization’s MISSION. (T) • Some current PERFORMANCE LEVELS have been evaluated against relevant comparisons and/or BENCHMARKS and show areas of good relative PERFORMANCE. (C) • Organizational PERFORMANCE RESULTS are reported for most KEY CUSTOMER, market, and PROCESS requirements. (I) |
| 70%, 75%, 80%, or 85% | <ul style="list-style-type: none"> • Good-to-excellent organizational PERFORMANCE LEVELS are reported, responsive to MULTIPLE QUESTIONS in the item. (Le) • Beneficial TRENDS have been sustained over time in most areas of importance to the accomplishment of your organization’s MISSION. (T) • Many to most TRENDS and current PERFORMANCE LEVELS have been evaluated against relevant comparisons and/or BENCHMARKS and show areas of leadership and very good relative PERFORMANCE. (C) • Organizational PERFORMANCE RESULTS are reported for most KEY CUSTOMER, market, PROCESS, and ACTION PLAN requirements. (I) |
| 90%, 95%, or 100% | <ul style="list-style-type: none"> • Excellent organizational PERFORMANCE LEVELS are reported that are fully responsive to the MULTIPLE QUESTIONS in the item. (Le) • Beneficial TRENDS have been sustained over time in all areas of importance to the accomplishment of your organization’s MISSION. (T) • Industry and BENCHMARK leadership is demonstrated in many areas. (C) • Organizational PERFORMANCE RESULTS and PROJECTIONS are reported for most KEY CUSTOMER, market, PROCESS, and ACTION PLAN requirements. (I) |

Figure 5b—Results Scoring Guidelines (For Use with Category 7)

| Band Score | Band Number | % Applicants in Band ¹ | PROCESS Scoring Band Descriptors |
|------------|-------------|-----------------------------------|---|
| 0–150 | 1 | | The organization demonstrates early stages of developing and implementing approaches to the basic Criteria questions, with deployment lagging and inhibiting progress. Improvement efforts are a combination of problem solving and an early general improvement orientation. |
| 151–200 | 2 | | The organization demonstrates effective, systematic approaches responsive to the basic questions in the Criteria, but some areas or work units are in the early stages of deployment. The organization has developed a general improvement orientation that is forward-looking. |
| 201–260 | 3 | | The organization demonstrates effective, systematic approaches responsive to the basic questions in most Criteria items, although there are still some areas or work units in the early stages of deployment. Key processes are beginning to be systematically evaluated and improved. |
| 261–320 | 4 | | The organization demonstrates effective, systematic approaches responsive to the overall questions in the Criteria, but deployment may vary in some areas or work units. Key processes benefit from fact-based evaluation and improvement, and approaches are being aligned with overall organizational needs. |
| 321–370 | 5 | | The organization demonstrates effective, systematic, well-deployed approaches responsive to the overall questions in most Criteria items. The organization demonstrates a fact-based, systematic evaluation and improvement process and organizational learning, including some innovation, that result in improving the effectiveness and efficiency of key processes. |
| 371–430 | 6 | | The organization demonstrates refined approaches responsive to the multiple questions in the Criteria. These approaches are characterized by the use of key measures and good deployment in most areas. Organizational learning, including innovation and sharing of best practices, is a key management tool, and integration of approaches with current and future organizational needs is evident. |
| 431–480 | 7 | | The organization demonstrates refined approaches responsive to the multiple questions in most Criteria items. It also demonstrates innovation, excellent deployment, and good-to-excellent use of measures in most areas. Good-to-excellent integration is evident, with organizational analysis, learning through innovation, and sharing of best practices as key management strategies. |
| 481–550 | 8 | | The organization demonstrates outstanding approaches focused on innovation. Approaches are fully deployed and demonstrate excellent, sustained use of measures. There is excellent integration of approaches with organizational needs. Organizational analysis, learning through innovation, and sharing of best practices are pervasive. |

¹ Percentages are based on scores from the Consensus Review.

Figure 6a—Process Scoring Band Descriptors

| Figure 6a—Band Score | Band Number | % Applicants in Band ¹ | RESULTS Scoring Band Descriptors |
|----------------------|-------------|-----------------------------------|---|
| 0–125 | 1 | | A few results are reported responsive to the basic Criteria questions, but they generally lack trend and comparative data. |
| 126–170 | 2 | | Results are reported for several areas responsive to the basic Criteria questions and the accomplishment of the organization’s mission. Some of these results demonstrate good performance levels. The use of comparative and trend data is in the early stages. |
| 171–210 | 3 | | Results address areas of importance to the basic Criteria questions and accomplishment of the organization’s mission, with good performance being achieved. Comparative and trend data are available for some of these important results areas, and some beneficial trends are evident. |
| 211–255 | 4 | | Results address some key customer/stakeholder, market, and process requirements, and they demonstrate good relative performance against relevant comparisons. There are no patterns of adverse trends or poor performance in areas of importance to the overall Criteria questions and the accomplishment of the organization’s mission. |
| 256–300 | 5 | | Results address most key customer/stakeholder, market, and process requirements, and they demonstrate areas of strength against relevant comparisons and/or benchmarks. Beneficial trends and/or good performance are reported for most areas of importance to the overall Criteria questions and the accomplishment of the organization’s mission. |
| 301–345 | 6 | | Results address most key customer/stakeholder, market, and process requirements, as well as many action plan requirements. Results demonstrate beneficial trends in most areas of importance to the Criteria questions and the accomplishment of the organization’s mission, and the organization is an industry ² leader in some results areas. |
| 346–390 | 7 | | Results address most key customer/stakeholder, market, process, and action plan requirements. Results demonstrate excellent organizational performance levels and some industry ² leadership. Results demonstrate sustained beneficial trends in most areas of importance to the multiple Criteria questions and the accomplishment of the organization’s mission. |
| 391–450 | 8 | | Results fully address key customer/stakeholder, market, process, and action plan requirements and include projections of future performance. Results demonstrate excellent organizational performance levels, as well as national and world leadership. Results demonstrate sustained beneficial trends in all areas of importance to the multiple Criteria questions and the accomplishment of the organization’s mission. |

¹ Percentages are based on scores from the Consensus Review.

² “Industry” refers to other organizations performing substantially the same functions, thereby facilitating direct comparisons.

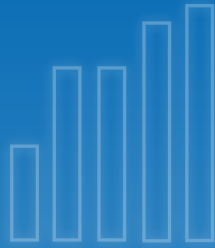
Figure 6b—Results Scoring Band Descriptors

2019 BALDRIGE AWARD APPLICANTS

| Sector | Total Number of Award Applications | Number of Award Applicants Recommended for Site Visit |
|-------------------------|------------------------------------|---|
| Health Care | 16 | |
| Nonprofit | 5 | |
| Education | 1 | |
| Business–Small Business | 3 | |
| Business–Service | 1 | |
| Business–Manufacturing | 0 | |
| Total | 26 | |

BALDRIGE AWARD RECIPIENT CONTACT INFORMATION 1988–2018

Baldrige Award winners generously share information with numerous organizations from all sectors. To contact an award winner, please see <https://www.nist.gov/baldrige/award-recipients>, which includes links to contact information as well as profiles of the winners.



The ratio of the Baldrige Program's benefits for the U.S. economy to its costs is estimated at **820 to 1**.

110 Baldrige Award winners serve as national role models.

2010–2018 award applicants represent **641,693 jobs**, 3,072 work sites, over \$166 billion in revenue/budgets, and about 451 million customers served.

352 Baldrige examiners volunteered roughly **\$7.9 million** in services in 2018.

State Baldrige-based examiners volunteered around **\$29 million** in services in 2017.



What People Are Saying

I have always envisioned Stellar to be a company that is built to last. . . . And if you ask how we can ensure that we are built to last, I would say the answer is Baldrige.

Celeste Ford
CEO and Founder
Stellar Solutions
Palo Alto, CA
Baldrige Award recipient

We believe that government can be great. We believe that local government can be great. And we believe that the Baldrige framework is ideally suited to help local government go from here to here [low to high].

Darin Atteberry
City Manager
City of Fort Collins
Fort Collins, CO
Baldrige Award recipient

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