

2024 Press Ganey Awards Criteria

HAVE QUESTIONS?

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Guardian of Excellence Award®

Patient experience

The Guardian of Excellence Award is given to organizations that have achieved the 95th percentile or higher for any of a set of designated survey measures, including Likelihood to Recommend, Overall Rating and Teamwork. For organizations that use an integrated Press Ganey patient experience survey or CAHPS-only survey, the award program also considers performance on the CAHPS Rate 0-10 measure.

The 2024 awards evaluate performance on surveys received by March 31, 2024, in the following areas:

- Scores (Mean Score for Press Ganey and Top Box for CAHPS) are based on the standard lookback period for the population.
- Lookback periods vary depending on the population
- Benchmarks are generated to reflect performance during the lookback periods based on data in our database using the JAJO cycle (Jul. 2023, Oct. 2023, Jan. 2024, Apr. 2024).
- At least one of the award measures must have a rank at or above the 95th percentile for every lookback period.

The specific peer groups used are stated by each population in the table below. Organizations will be compared to the database they are included in for benchmarks. To be eligible, organizations must:

- Fit the eligibility requirements of one of the targeted award peer groups
- Meet minimum n guidelines* based upon the targeted peer group
- Actively surveying for the entire award period
- eSurvey adjustments and phone calibrations are applied to all data where appropriate.

Patient Experience winners will be identified in the following categories:

Population	Targeted peer group comparisons	Award measures	Lookback periods
Inpatient and HCAHPS	Large database; All database for only small facilities	Likelihood to recommend	Apr23-Jun23
			Jul23-Sep23
		Overall rating	Oct23-Dec23
		Teamwork	Jan24-Mar24
		HCAHPS Rate 0-10	
Ambulatory Surgery and OASCAHPS	Large database; All database for only small facilities	Teamwork	Apr23-Jun23
		OASCAHPS Rate 0-10	Jul23-Sep23
			Oct23-Dec23
			Jan24-Mar24
ED	Large database; All database for only small facilities and freestanding EDs	Teamwork	Apr23-Jun23
		Likelihood to recommend	Jul23-Sep23
			Oct23-Dec23
		Overall rating	Jan24-Mar24
		EDCAHPS Rate 0-10	
Medical Practice and CGCAHPS	All Press Ganey National Facilities database (facility-level only)	Likelihood to recommend practice	Jan23-Jun23
			Apr23-Sep23
		Teamwork	Jul23-Dec23
		CGCAHPS Rate 0-10	Oct23-Mar24
Outpatient Services	All Press Ganey database	Likelihood to recommend	Apr23-Jun23
			Jul23-Sep23
		Teamwork	Oct23-Dec23
			Jan24-Mar24

Home Health and HCAHPS	All Press Ganey database	Likelihood to recommend	Jan23-Jun23
			Apr23-Sep23
		Overall rating	Jul23-Dec23
		Teamwork	Oct23-Mar24
		HCAHPS Rate 0-10	

Inpatient Rehabilitation	All Press Ganey database	Likelihood to recommend	Jan23-Jun23
			Apr23-Sep23
		Overall rating	Jul23-Dec23
		Teamwork	Oct23-Mar24

Outpatient Oncology	All Press Ganey database	Likelihood to recommend	Jul22-Jun23
			Oct22-Sep23
		Overall rating	Jan23-Dec23
		Teamwork	Apr23-Mar24

Population	Targeted peer group comparisons	Award measures	Lookback periods
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Inpatient Behavioral Health	All Press Ganey database	Likelihood to recommend	Jan23-Jun23
			Apr23-Sep23
		Overall rating	Jul23-Dec23
		Teamwork	Oct23-Mar24

Urgent Care	All Press Ganey database	Likelihood to recommend	Apr23-Jun23
			Jul23-Sep23

		Overall rating	Oct23-Dec23
		Teamwork	Jan24-Mar24
Inpatient Pediatric and Child HCAHPS	All Press Ganey database	Likelihood to recommend	Jan23-Jun23
			Apr23-Sep23
		Overall rating	Jul23-Dec23
		Teamwork	Oct23-Mar24
		Child HCAHPS Rate 0-10	
NICU	All Press Ganey database	Likelihood to recommend	Jul22-Jun23
			Oct22-Sep23
		Overall rating	Jan23-Dec23
		Teamwork	Apr23-Mar24
Outpatient Rehabilitation	All Press Ganey database	Likelihood to recommend	Mar22-Jun23
			Jun22-Sep23
		Overall rating	Sept22-Dec23
		Teamwork	Dec22-Mar24
Pediatric Emergency Department	All Hospital Database	Likelihood to recommend	Jan23-Jun23
			Apr23-Sep23
		Overall rating	Jul23-Dec23
		Teamwork	Oct23-Mar24
Outpatient Behavioral Health	All Center Database	Likelihood to recommend	Jan23-Jun23
			Apr23-Sep23
		Overall rating	Jul23-Dec23
		Teamwork	Oct23-Mar24

*Must have been a Press Ganey client for the entire year with data received in each month during the award period. In addition, total annual returned n size must meet at least 90% or exceed the summed quarterly requirements for the peer group minimum n guidelines.

***CAHPS analysis uses phone-adjusted scores, not eSurvey adjustment.

Note: As organizations transition to Press Ganey Targeted Surveys, the awards transitioned from using the composite overall rating to item-level measures to allow for accurate benchmarking. Press Ganey will consider performance on each of the award measures; if performance on any of the measures meets the criteria, the organization will be a winner.

Workforce engagement

Guardian of Excellence awards honor facilities for their performance in employee engagement or physician engagement. Benchmarks based on specific peer groups provide the engagement performance scores used to determine award winners. Peer groups are selected based on facility attribute information or work unit information.

Facility attribute information is provided in the client's demographic profile and is specific to characteristics of that facility (e.g., it is a hospital or a standalone emergency department).

Work unit information comes from assigning standardized work unit names to report groups within a client's reporting hierarchy (e.g., work groups that carry out behavioral health functions, or work units specific to an ICU).

A client does not need to request to be a part of a specific benchmark for their data to be included, nor do they need to actively use the benchmark that their award was derived from. If their data meet the criteria for inclusion, they will be pulled into the appropriate benchmark. Facilities must meet all benchmark inclusion criteria to be eligible for these awards.

Regardless of the peer group level (facility or unit), awards are assigned at the facility level. Please note that while work unit-level benchmarks are assigned at the facility level, only the relevant work units within the facility achieved the qualifying engagement score. For example, although the Behavioral Health award is granted at the facility level, this award only reflects the performance of all report groups characterized as behavioral health units within the facility.

EMPLOYEE EXPERIENCE

These awards honor facilities in the appropriate peer group who achieved the 95th percentile or higher on Engagement for their most recent census or standalone survey completed during the award year (January – December 2023). Please note that the 95th percentile thresholds are determined from the relevant benchmarks provided in the tables below, not from National Healthcare Avg.

PHYSICIAN EXPERIENCE

These awards honor facilities in the appropriate peer group who achieved the 95th percentile or higher on Engagement for their most recent census or standalone survey completed during the award year (January – December 2023). Please note that the 95th percentile thresholds are determined from the relevant benchmarks provided in the tables below, not from National Physician Avg.

The following awards are based on facility attributes:

Breakout group	Peer group	Benchmark
Hospital	General acute care hospitals	Nat'l Acute Care Avg

		Nat'l Physician Acute Care Avg
Academic	Medical school-affiliated facilities	Nat'l Academic Healthcare Avg Nat'l Physician Academic Healthcare Avg
Medical Practice	Medical practice facilities	Nat'l Medical Group Avg Nat'l Physician Medical Group Avg
Community Hospital	Community hospitals and critical access hospitals	Nat'l Community Hospital Avg Nat'l Physician Community Hospital Avg
Children's Healthcare	Organizations (or stand-alone hospitals) that only specialize in pediatric care	Nat'l Children's Healthcare Avg Nat'l Physician Children's Avg

The following awards are based on the combined performance of specific work unit types:

Breakout group	Peer group	Benchmark
Behavioral Health	Mental and emotional health work units housed in inpatient and outpatient facilities	Nat'l Behavioral Health Avg
Ambulatory Care	Ambulatory work units housed within inpatient or outpatient facilities	Nat'l Ambulatory Care Avg
Long Term Care	Work units (LTC, home health, hospice) that provide care over a long period of time	Nat'l Long Term Care Avg
Cancer Center	Cancer/cancer treatment work units housed in inpatient or outpatient facilities	Nat'l Cancer Center Avg

Clinical quality

Using prior calendar year data, 10 active and representative clinical measures from the outpatient services, pregnancy and related conditions, tobacco, sepsis, and substance abuse measure sets will be used to calculate an overall composite score for each organization.

Organizations performing in the 95th percentile on the overall composite score will be recognized.

To be eligible for this award, organizations must have a minimum of 10 cases for at least five measures in prior calendar year.

Consumer Experience

Coming soon! We're in the process of updating our criteria for this award.

Pinnacle of Excellence Award®

Patient experience

This award recognizes the top performers in each category based on the performance on designated award survey measures for the three-year award period. Winners are identified based on performance on three full years of data, from April 2021 - March 2024. Up to four winners will be identified in each category.

The award considers performance on global survey measures including Likelihood to Recommend, Overall Rating and Teamwork, using an average across the designated questions on the Press Ganey survey.

For organizations that use an integrated Press Ganey patient experience survey or CAHPS-only survey, the award program also considers performance on the CAHPS Rate 0-10 measure.

To be eligible, organizations must meet minimum n guidelines for all three years of the award period, as noted below. For Press Ganey surveys, annual n size is pulled from the overall composite; for CAHPS surveys, the n size is based on the CAHPS Rate 0-10 question.

Population	Categories & minimum N	Award measures
Inpatient and HCAHPS*	<ul style="list-style-type: none"> - <50 beds (100 responses/year) - 50-99 (100 responses/year) - 100-199 (300 responses/year) - 200-299 (300 responses/year) - 300+ (300 responses/year) - Academic Medical Centers (300 responses/year) 	Likelihood to recommend Overall rating Teamwork HCAHPS Rate 0-10
Ambulatory Surgery and OASCAHPS	<ul style="list-style-type: none"> - <3,400 cases (30 responses/year) - 3,400-5,600 (100 responses/year) - > 5,600 (300 responses/year) 	Teamwork OASCAHPS Rate 0-10
Emergency Department and ED CAHPS	One category only; minimum of 100 responses/year	Likelihood to recommend Overall rating EDCAHPS Rate 0-10

Population	Categories & minimum N	Award measures
Medical Practice and CGCAHPS	<ul style="list-style-type: none"> - <10 physicians (30 responses/year) - 10-49 (100 responses/year) - >50 (300 responses/year) 	<p>Likelihood to recommend practice</p> <p>Teamwork</p> <p>CGCAHPS Rate 0-10</p>
Outpatient Services	<ul style="list-style-type: none"> - <15,000 procedures (30 responses/year) - 15,000-199,999 (100 responses/year) - >200,000 (300 responses/year) 	<p>Likelihood to recommend</p> <p>Teamwork</p>
Inpatient Pediatrics and Child HCAHPS	One category only; minimum of 50 responses/year	<p>Likelihood to recommend</p> <p>Overall rating</p> <p>Child HCAHPS Rate 0-10</p> <p>Teamwork</p>
Inpatient Behavioral Health	One category only; minimum of 50 responses/year	<p>Likelihood to recommend</p> <p>Overall rating</p> <p>Teamwork</p>
Pediatric Emergency Department	One category only; minimum of 50 responses/year	<p>Likelihood to recommend</p> <p>Overall rating</p> <p>Teamwork</p>
Outpatient Behavioral Health	One category only; minimum of 50 responses/year	<p>Likelihood to recommend</p> <p>Overall rating</p> <p>Teamwork</p>

NICU	One category only; minimum of 50 responses/year	Likelihood to recommend Overall rating Teamwork
Urgent Care	One category only; minimum of 50 responses/year	Likelihood to recommend Overall rating Teamwork

*Bed size for Inpatient uses the Licensed Beds variable.

Workforce engagement

EMPLOYEE EXPERIENCE

This award recognizes top performers in the Nat'l Healthcare Avg benchmark based on their averaged Engagement score from census surveys conducted in the two most recent calendar years. If a client conducted more than one census survey annually, Engagement scores from the most recent survey in that year will be used.

The three facilities with the highest overall scores in each of the following market segments will be recognized:

- <100 returned employee surveys
- 100-499
- >500

PHYSICIAN EXPERIENCE

This award recognizes top performers in the Nat'l Physician Avg benchmark based on their averaged Engagement score from census surveys conducted in the two most recent calendar years. If a client conducted more than one census survey annually, Engagement scores from the most recent survey in that year will be used.

The three facilities with the highest overall scores in each of the following market segments will be recognized:

- <25 returned physician surveys
- 26 to 75
- >75

Clinical quality

This award recognizes a consistent top performer from each organization size category using the most recent two years of data

There are 10 active and representative clinical measures from the outpatient services, pregnancy and related conditions, tobacco, sepsis, and substance abuse measure sets used to calculate eight quarterly composite scores for each client.

The inclusion of measures for evaluation requires adoption by enough organizations to ensure a valid sample for judging relative performance.

To be eligible for this award, organizations must have a minimum of 10 cases for at least five measures in the most recent year.

Overall performance is calculated using a methodology that incorporates both performance across all measures and consistency over time.

- Average facility-level performance score is determined for each measure and reporting period.
- These scores are adjusted by the variation across reporting periods by subtracting $0.2 * [\text{Standard Error}]$.
- The average of these adjusted measure scores is calculated to produce an overall performance score for each facility.
- The client with the highest overall performance score in each of three bed size segments will be awarded: <100 beds, 100-299 and 300.

Note: The award program includes clinical quality measures that are proportional measures with sufficient participants and without the need for risk adjustment.

Measures for all clinical quality awards include:

Measure ID	Measure name
OP-23	Head CT or MRI Scan Results for Acute Ischemic or Hemorrhagic Stroke Patients who Received Head CT or MRI Scan Interpretation Within 45 Minutes of ED Arrival
PC-01	Elective Delivery
PC-02	Cesarean Birth

PC-05	Exclusive Breast Milk Feeding
PC-06	Unexpected Complications in Term Newborns
TOB-2	Tobacco Use Treatment Provided or Offered
TOB-3	Tobacco Use Treatment Provided or Offered at Discharge
SUB-2	Alcohol Use Brief Intervention Provided or Offered
SUB-3	Alcohol and Other Drug Use Treatment Provided or Offered at Discharge
SEP-1	Severe Sepsis and Septic Shock Management Bundle

Consumer Experience

Coming soon! We're in the process of updating our criteria for this award.

Member Experience

This award recognizes the top performers in each category based on member experience ratings on designated survey measures for a one-year period. Winners are identified based on performance from the latest CAHPS survey results. Up to four winners will be identified in each category. To be eligible, organizations must meet minimum guidelines outlined for each population.

The award considers performance on global survey measures including Overall Rating of Health Plan, Overall Rating of Health Care, Overall Rating of Personal Doctor, along with composite ratings such as Getting Care Quickly and Getting Needed Care. Award measures include average scores of two or more designated questions or composites from CAHPS survey results.

Population	Criteria	Categories	Award measures
Medicare	<ul style="list-style-type: none"> - Average of relevant Star ratings from the CAHPS survey - Contract must receive a Star Rating on at least two-thirds of the relevant CAHPS survey measures to be included 	<ul style="list-style-type: none"> - HMO / POS (Health Maintenance and Point of Service Organizations) - Non-HMO (Preferred Provider and Exclusive Provider Organizations) - PDP (Prescription Drug Plans) 	<ul style="list-style-type: none"> - Overall: All eight CAHPS rating measures (PDPs not eligible) - Access to Care: Getting needed care, Getting care quickly, & Care coordination (PDPs not eligible) - Prescription Drugs: Getting needed Rx & Rating of drug plan
Individual & Family Marketplace	<ul style="list-style-type: none"> - Average of relevant scaled means scores from the CAHPS survey - Minimum of 100 survey responses on at least two-thirds of the relevant CAHPS measures to be included 	<ul style="list-style-type: none"> - HMO / POS (Health Maintenance and Point of Service Organizations) - Non-HMO (Preferred Provider and Exclusive Provider Organizations) 	<ul style="list-style-type: none"> - Overall: All ten CAHPS rating measures - Access & Coordination: Access to care and Care coordination - Doctors & Care: Rating of personal doctor,

			rating of specialist and Overall rating of health care
			<ul style="list-style-type: none"> - Enrollee Experience: Access to information, Plan administration and Overall rating of health plan
Commercial	<ul style="list-style-type: none"> - Average of relevant Summary Rate Scores from the CAHPS survey - Minimum of 100 survey responses on at least two-thirds of the relevant CAHPS measures to be included 	<ul style="list-style-type: none"> - Adult Commercial HMO / POS (Health Maintenance and Point of Service Organizations) - Adult Commercial Non-HMO (Preferred Provider and Exclusive Provider Organizations) 	<ul style="list-style-type: none"> - Overall: All seven CAHPS rating measures reported by NCQA for accreditation - Plan Services: Customer service, Claims processing and Ease of filling out forms - Access to Care: Getting needed care, Getting care quickly and Care coordination - Doctors & Care: Rating of personal doctor, rating of specialist and Overall rating of health care
Medicaid	<ul style="list-style-type: none"> - Average of relevant Summary Rate Scores from the CAHPS survey - Minimum of 100 survey responses on at least two-thirds of the relevant CAHPS measures to be included 	<ul style="list-style-type: none"> - Adult Medicaid - Child Medicaid 	<ul style="list-style-type: none"> - Overall: All five CAHPS rating measures reported by NCQA for accreditation - Access to Care: Getting needed care, Getting care quickly and Care coordination - Doctors & Care: Rating of personal doctor, rating of specialist and Overall rating of health care

NDNQI® Award For Outstanding Nursing Quality

The NDNQI Award for Outstanding Nursing Quality is awarded annually to the best performing hospital in each of seven categories: academic medical center, teaching hospitals, community hospital, pediatric hospital, rehabilitation hospital, psychiatric hospital, and international. (Note: There is an “Overall” NDNQI award for international clients across all hospital types combined, and individual awards for U.S. clients by hospital type (e.g. pediatric, psychiatric, etc.).) Participation in the RN Survey is not required, however, measures on the RN survey are available for inclusion based on the total set submitted.

A total of 16 measures are included in overall quality assessment:

- Academic medical centers and teaching hospitals must have submitted data on at least 10 measures, including 5 or more patient outcome measures.
- Community, pediatric, and rehabilitation hospitals must have submitted data on at least 8 measures, including at least 3 patient outcome measures.
- Psychiatric hospitals must have submitted data on at least 6 measures, including injury assault rate.

Hospital scores are calculated in a two-step process.

1. Consistent with the unit focus of NDNQI, hospitals are compared based on assessments of their nursing units. Each unit is assessed only in comparison to other units of the same type to provide control for differences among unit types in patient risk and acuity. For each measure, standardization by unit type is accomplished by expressing each unit's score in terms of the number of standard deviations the unit fell above or below the mean score for all other units of the same type.
2. These standardized scores are averaged across units in each hospital to yield a hospital score on each measure, and each hospital's scores on the relevant measures are averaged to produce an overall score. Hospitals are ranked according to these overall scores. The highest-ranking hospital in each category is identified and, after undergoing a qualitative screening, given the award.

Measure ID	Measure name
TNHPD	Total nursing hours per patient day
RN skill mix	Percent of nursing care hours provided by RNs
Percent agency hours	Percent of RN hours provided by contract/agency staff

RN education and certification	Average of (1) percent of RNs with BSN or higher degree and (2) percent certified RNs
RN turnover	Annualized RN turnover rate
Non-RN turnover	Annualized turnover rate for LPNs/UAPs
RN experience and tenure	Average of (1) average years U.S. nursing experience* and (2) average years on unit
Quality of care	Average quality of care rating
Pediatric Pain Air Cycle	Average Number of Pediatric Pain Assessments per Patient Initiated in 24 Hours
Injury assault rate	Injury assaults per 1,000 patient days
Total fall rate*	Falls per 1,000 patient days
Unassisted fall rate*	Unassisted falls per 1,000 patient days
UAPI rate*	Unit-acquired pressure injury rate
CLABSI rate*	Central line-associated bloodstream infections per 1,000 device days
CAUTI rate*	Catheter-associated urinary tract infections per 1,000 patient days
PIV infiltration rate*	Rate of pediatric IV infiltrations per IV

*Patient outcomes measure