2026 Bernard A. Kershner Innovations in Quality Improvement Award Program Requirements

AAAHC ACCREDITATION ASSOCIATION for AMBULATORY HEALTH CARE | quality every day 1095 STRONG

Key Dates

Submissions Open:	January 5, 2026 8:00 AM CT	**Organization Eligibility:**	Only submissions from organizations accredited by AAAHC, from January 5, 2026 up to and including March 31, 2026 are eligible for consideration
Entry Deadline:	March 31, 2026 11:59 PM CT		
Finalists Webinar Release:	September 30, 2026	**Finalists' Notification:**	June 15-16, 2026

Submission Requirements

As part of the online submission process, participants are required to electronically sign both the **Quality Improvement (QI) Study Submission Agreement** and the **Release of Likeness** form. Please note that hard copy submissions will not be accepted**.** All entries must be submitted by the deadline indicated above.

To ensure compliance with HIPAA regulations, no patient identifiers may be included in any part of the submission.

The AAAHC Institute Quality Advisory Committee (IQAC) has convened an Expert Panel to review all submissions and recommend six finalists, three from Primary Care and three from Surgical/Procedural settings. Submissions will be evaluated based on the following criteria:

A. The submitted study must be completed and include documentation of at least one or two rounds of sustainment. Please ensure your study documentation reflects these updates.
B. The study must be recent, defined as completed within the organization's most recent three-year accreditation cycle.
C. A concise summary must be prepared in accordance with the "Submission Questions" section on pages 4-5, aligning with AAAHC's six-component quality improvement framework.
D. Submissions lacking required information will not be considered for further review.

The Expert Panel will also assess submissions for evidence of:

- Innovative thinking
- Effective teamwork
- Transferability to other ambulatory health care settings and issues

The Panel's recommendations will be submitted to the IQAC for final review and approval. All decisions made by the Committee are final.

Institute for Quality Improvement

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Representatives of the six selected studies will be invited to present their work via poster presentations for virtual, live, and/or recorded use. Finalists are typically featured in a webinar to showcase their achievements. Winners will be announced at the AAAHC *Achieving Accreditation* program in December 2026.

Finalists will receive the following:

1. A $500 honorarium (one per organization, six total) for each poster presentation
2. Complimentary registration (one per organization, six total) to the *Achieving Accreditation* program
3. Physical awards for the organizations whose studies are selected as best by the Expert Panel and program attendees
4. Publication of posters in AAAHC newsletters, on the website, and in educational offerings such as *Achieving Accreditation*

No additional awards or compensation will be provided. All other expenses are the responsibility of the participating organizations. AAAHC reserves the right to withhold awards if submissions do not meet the established evaluation criteria.

Only organizations currently accredited by AAAHC are eligible to participate, as outlined in the "Organization Eligibility" section. Submissions authored or co-authored by current members of the AAAHC Institute Quality Advisory Committee are not eligible.

Note: Each organization (defined as a single legal entity) may submit only one QI study for consideration.

Due to the anticipated volume of submissions, only the six finalists will be contacted. Notifications will be sent on the date specified to allow adequate time for poster development, webinar participation, and travel planning.

By submitting a QI study, organizations agree to release from liability, indemnify, and hold harmless AAAHC and its employees, directors, officers, members, and any other agents against all actual and direct losses suffered, and all liability to third parties arising from or in connection with participating in the award program.

For questions, please contact us at quality@aaahc.org

Program void where prohibited.

Quality Improvement Study Submission Agreement

On behalf of the organization listed above, I agree to the terms of Bernard A. Kershner Innovations in Quality Improvement Award Program (Award Program), as described in this QI Study Submission Agreement document.

I attest that the information included in the submission for the Award Program is accurate and truthful to the best of my knowledge.

I will not include any HIPAA prohibited patient identifiers in my submission. I agree to make available, to the AAAHC Institute, de-identified patient documentation of the QI study being submitted, upon request.

By making a submission to the Award Program, I agree to allow the AAAHC to use all or any portion of the submission for educational and/or promotional purposes indefinitely.

I also agree that if chosen as one of the 6 finalist organizations, my organization will produce a poster, in coordination with AAAHC Institute staff, and make a presentation of the poster at a 2026 AAAHC *Achieving Accreditation* program.

I agree to release from liability, indemnify, and hold harmless AAAHC and its employees, directors, officers, members, and any other agents against all actual and direct losses suffered, and all liability to third parties arising from or in connection with participating in the Award Program.

<Authorized Organizational Representative Electronic Signature Required>

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Release of Likeness

Completion of this agreement is a prerequisite for study submission and participation in the Bernard A. Kershner Award program.

I, hereby grant to the Accreditation Association for Ambulatory Health Care, Inc., its subsidiaries, affiliates, related companies and any of its legal representatives, agents, or employees ("AAAHC"), the royalty-free right and permission to use in any form or fashion my name, picture, image, likeness, voice, appearance, video or any other indicia of my identity created, depicted, captured or recorded by or at the direction of AAAHC ("Materials").

I agree that AAAHC has complete and absolute ownership of such Materials, including the entire copyright, and may use the same for any lawful purpose, including, but not limited to, publicity, illustration, advertising, Web and website content and other commercial purposes. I agree that AAAHC has the right to use, copyright, reproduce, edit, or otherwise alter such Materials at its sole discretion and for as long as AAAHC deems necessary. The rights granted by me hereunder are perpetual, universal, irrevocable, unconditional, and transferable.

I am over eighteen (18) years of age, and I have full legal capacity to grant this consent and release on my own behalf. I have read and understood the above consent and release prior to its execution. By attending and/or participating in AAAHC events and activities, I consent and attest to the above.

<Electronic Signature of Study Presenter Required>

Submission Questions Requirement

Please read the following in its entirety and gather all information prior to logging into the portal to submit as you will need to complete the entire application at that time.

A. Contact information
- Study Name
- Organization Name and DBA (as noted on your AAAHC decision letter)
- AAAHC Organization ID Number
- Study Contact Name and Credentials
- Study Contact Title
- Address, City, State, Zip
- Phone
- Email

B. Initial information
- What is your organization type?
  - ✓ Surgical/Procedural
  - ✓ Primary Care
- What was the quality issue you addressed? Please be specific (e.g., Hand Hygiene, Post-Operative Knee Infection Rate, Patient Satisfaction with Waiting Times)
- In 1-2 sentences, please explain a synopsis of the results of your study using the following examples as your format:
  - ✓ Improved depression screening rates from 71% to 98% for primary care and specialty clinics at student health center exceeding goal of 95%
  - ✓ Improved OR terminal cleaning effectiveness from 20% to 92% exceeding goal of 90%
- Why is the issue you addressed important to your organization and others? (e.g., threats to safety; high prevalence; high incidence; high cost; wide variations in practice, national clinical practice guidelines, national/local health statistics, peer-reviewed research).

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C. QI Study Summary
A concise summary must be prepared in accordance with the outline and examples below, aligning with the AAAHC six-component quality improvement framework.

1. **Purpose of the Study**
Clearly state the purpose of your Quality Improvement (QI) study.
In 2–3 sentences, describe the problem your organization sought to address. **Include your baseline performance as a numeric value** and explain why improvement was necessary.

Example: "Provider hand hygiene entering and exiting patient exam rooms at the main site was only 46% in the last quarter. Improving hand hygiene rates will reduce infections and save lives."

2. **Goal Statement**
Define your performance improvement goal.
In 1–2 sentences, state the **target performance level** and the date by which you aimed to achieve it.

Example: "Increase hand hygiene at the main site from 46% to 80% by August 1, 2025."

3. **Data analysis**
Identify the key factors (root causes) contributing to the performance gap.
List 3–4 concise bullet points that describe the **underlying causes** preventing achievement of the goal.

Example:
- *"Providers are unaware of the CDC recommendations adopted in our infection control plan*
- *Surveillance is only once per quarter*
- *No performance results are going to providers*
- *Missing two gel dispensers in the clinic"*

4. **Corrective Actions**
Describe the interventions implemented to address each root cause.
List 3–4 bullet points that align with the root causes above, specifying **what was done and how**.

Example:
- *"Providers are unaware of the CDC recommendations adopted in our infection control plan – created standard work for when hand hygiene is performed and provided inservice to providers*
- *Surveillance is only once per quarter – increased surveillance to weekly*
- *No performance results are going to providers – provided weekly surveillance results to providers*
- *Missing two gel dispensers in the clinic – installed two additional gel dispensers"*

5. **Remeasurement and Sustainment**
Track performance over time to demonstrate **improvement and sustainment**.
Use a table or bullet format to document:
   - Baseline performance
   - Goal
   - Dates and results of each remeasurement
   - At least one or two sustainment checks after the goal is met

Example:

Baseline	Goal	Remeasure #1	Remeasure #2 (if needed)	Sustainment #1	Sustainment #2
46%	80%	7/1/25 72% Not met	8/1/25 83% Met	9/1/25 85% Sustained	10/1/25 84% Sustained

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6. Communication and Dissemination
Document how results were shared with the governing body and across the organization. Clearly state **who was informed**, **how**, and **when**.

Example:
To the governing body –
- *Study write-up presented per the governing body minutes 10/17/25*

To the organization –
- *Reviewed in staff huddles the week of 10/20/25*
- *Posted in the break room 10/23/25*
- *Medical Director presentation at staff meeting 10/29/25*

Additional information on the AAAHC Six-Component Criteria can be found here: https://www.aaahc.org/uploads/2024/04/240411_IQI_DOC_Documenting-QI-Using-6-Component-Criteria.pdf

D. Additional uploads:

1. Please upload a copy of your completed QI Study in PDF format here. (required)
2. Please upload any additional supporting documents in PDF format (e.g., graphs, tables, or forms) to support your study here. (optional)

Thank you for participating!
The AAAHC Quality Team

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