

September 8-10, 2025



Call for Abstracts

In late 2018, NAHQ created the first comprehensive framework of competencies for the healthcare quality profession. NAHQ's Healthcare Quality Competency Framework sets specific job requirements and capabilities across eight domains, 29 competencies, and 486 behavior-based competencies, stratified against novice, proficient, and expert levels. Collectively, the competencies framework describes the knowledge and skills required for developing and leading a successful healthcare quality program.

As a leader in setting industry-standard quality competencies, NAHQ is dedicated to preparing a coordinated, competent workforce to lead and advance healthcare quality across the continuum of care. One path to achieve this is delivering the highly regarded NAHQ next.

NAHQ encourages you to submit an abstract for virtual only 2025 NAHQ next on September 8-10. This is your opportunity to make an impact with experiences, research, tools, and expertise that are aligned with the competencies! NAHQ needs your HQ Best Practice Tools and poster submissions to train and develop the workforce to get our industry one step closer to true quality-driven healthcare.

Deadline for submission is March 14, 2025, with submitters being notified of acceptance in May 2025.

[Please submit abstracts here.](#)

60-Minute sessions are available as on-demand sessions on the virtual platform. These sessions allow presenters to expand and go more in-depth on topics within the competency framework. 60-minute sessions that aren't accepted for inclusion in virtual NAHQ next 2025, may be kept on record & NAHQ may reach out to the submitter to present in other channels throughout the year.

HQ Best Practice Tool sessions are 15-minute sessions that will be available as an on-demand session on the virtual platform. HQ Best Practice Tool sessions should focus on a problem you are trying to solve, the process including the quality tool(s) and resources you utilized to arrive at a solution, results you obtained, and how you plan to improve and/or sustain your results. A sample/template of the tool(s) must be made available to the learner. HQ Best Practice Tool sessions that aren't accepted for inclusion in virtual NAHQ next 2025, may be kept on record & NAHQ may reach out to the submitter to present in other channels throughout the year.

Poster presentations will be displayed on the virtual platform. **Poster presenters are required to record a 10 minute or less video** with a summary of their poster that can accompany their poster visual. An example of this can be found [here](#).

Selection Criteria:

Content:

- Align with the Competency Framework (see pages 2-4)
- Relevant and timely to the healthcare quality audience
- Participants should be able to apply their learning in their daily work
- Content submissions highlighting work in hospital and non-hospital settings, such as ambulatory care, physician practices, managed care or health plans, and behavioral health settings are encouraged
- Content should not advertise products or services

Appeal to the NAHQ audience, described below:

- Primary Position: Over half are in management, with titles like Director of Quality, Director of Performance Improvement, Quality Manager and Coordinator
- Executives in administration, VPs, or CQOs and others are consultants, project managers, analysts, and staff nurses
- Primary Work Setting: Over half work in acute care (stand alone or health system) but the audience extends across the continuum (e.g., long term care, payer government agencies, primary care, behavioral health, and community health)
- Primary Responsibility: Many professionals work in quality departments with a broad scope of responsibilities. Some specialize in areas such as regulatory and accreditation or data analytics. Others work in clinical, and ancillary departments such as case management, infection control, patient experience, patient safety, and population health.

Upon Acceptance:

- To continuously improve the experience, the Conference Planning Team may have suggestions or recommendations upon acceptance
- Accepted presenters will receive virtual presentation tips & coaching
- NAHQ will work with presenters to pre-record their session based on availability. Typically, sessions are pre-recorded in early/mid-August (approx. 4-6 weeks prior to the virtual event date)
- HQ Best Practice Tool & poster presenters must register for NAHQ Next and are responsible for registration fees.

Competency Framework Domains and Statements:**Regulatory & Accreditation**

- Operationalize processes to support compliance with regulations and standards
 - Peer Review
 - How do you determine the performance criteria, measures, benchmarks, and data needed to support practitioner review activities?
 - What do you consider when organizing production, analysis and presentation of practitioner performance review data and reports?
 - Best practices for organizing practitioner performance review meetings, what works and why? Specific tools? Soft skills, communications?
- Facilitate continuous survey readiness activities
 - Survey Readiness:
 - Specific areas of focus or developing/nurturing a culture of readiness.

- How does your org go about establishing assignments for continuous survey readiness activities (e.g., audits, tracers)?
- How do you go about engaging all levels of the organization in continuous survey readiness activities?
- What are best practices for Implementing proactive processes for auditing and monitoring compliance (e.g., mock surveys, tracer activities, role-play interviews, ongoing rounding)?
- What have you found most effective to training others to perform internal audits/surveys/tracers?
- Guide the organization through survey processes and findings
 - Survey response- to accreditation agencies as well as internal response with appropriate action plan development.

Professional Engagement

- Integrate ethical standards into practice
- Engage in lifelong learning
- Participate in activities that advance the profession

Patient Safety

- Identify and report patient safety risks and events
- Assess patient safety culture
- Apply safety science principles and methods
- Collaborate to analyze patient safety risks and events

Population Health & Care Transitions

- Collaborate with stakeholders to improve care processes and transitions
- Integrate population health strategies into quality work
- Apply a holistic approach to improvement

Quality Leadership and Integration

- Apply procedures to regulate the use of privileged or confidential information
- Communicate effectively with different audiences to achieve quality goals
- Direct the quality infrastructure to achieve organizational objectives
- Implement processes to promote stakeholder engagement and interprofessional teamwork
- Create learning opportunities to advance healthcare quality throughout the organization

Health Data Analytics

- Apply procedures for governance of data assets
- Design data collection plans for key metrics and performance indicators
- Acquire data from source systems
- Integrate data from internal and external electronic data systems
- Use statistical and visualization methods

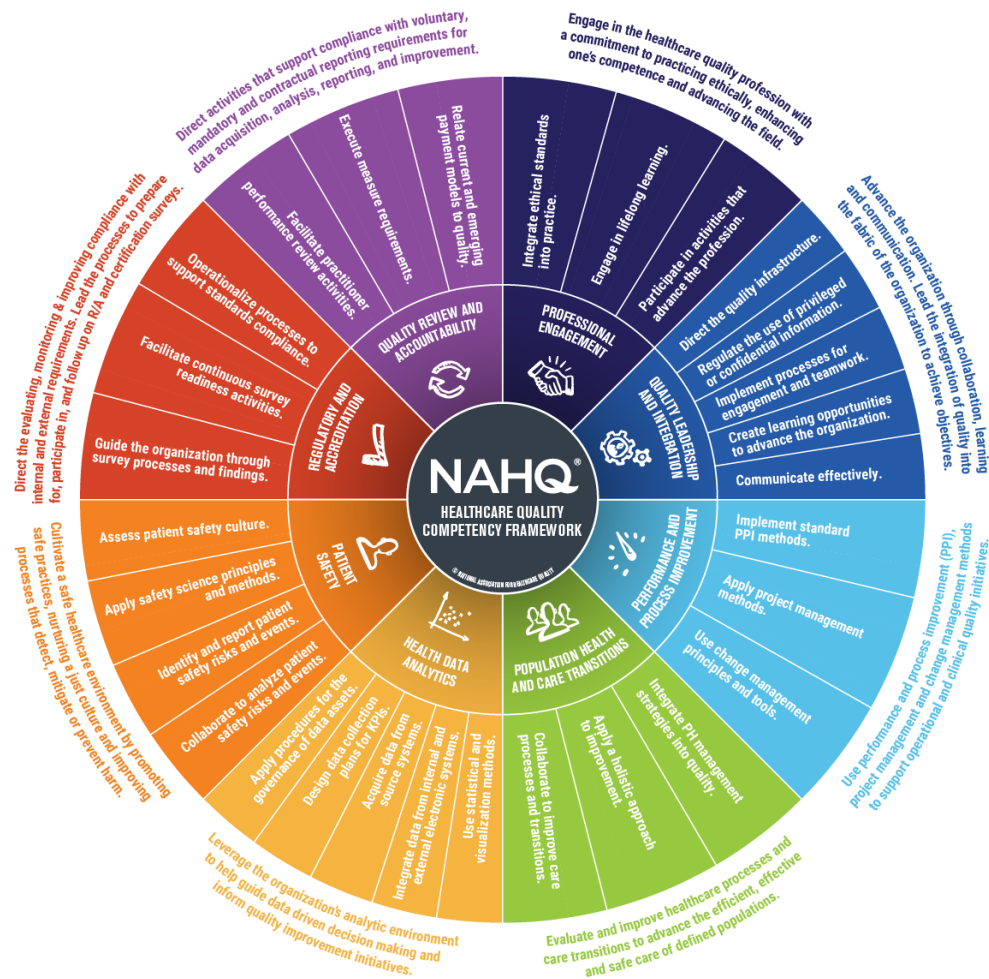
Performance and Process Improvement

- Implement standard performance and process improvement (PPI) methods
- Apply project management methods

- Use change management principles and tools

Quality Review & Accountability

- Relate current and emerging payment models to healthcare quality work
- Conduct the activities to execute measure requirements
- Implement processes to facilitate practitioner performance review activities
 - Peer Review Process- development & ongoing review, identifying triggers, etc.



This page serves as a preview to the abstract submission form to help you prepare prior to submitting. All abstracts must be submitted online by [clicking here](#). You may save abstracts as Work-In-Progress in the online system and return to them later. If you have any questions, please contact Member Services at 1.847.375.4720 or info@nahq.org.

Presenter Information

- First Name
- Initial
- Last Name
- Suffix (Jr. III, etc.)
- Position or Job Title
- Credentials (as you would like them to appear in the program book and on the NAHQ website).
- Institution or Organization
- Department
- Email Address
- Phone Number
- Cell Phone Number
- Preferred Address
- City
- State, Province, or County
- Zip/Postal Code
- Country
- Biography/CV: Please provide a brief description (no more than 150 words) about your background. Why are you uniquely qualified to present this information to the NAHQ audience?
- Have you spoken at NAHQ Next before?
- Prior presentation/speaking experience: Please list your most recent speaking engagements (must list at least one, up to five).

Disclosure/COI

Abstract Description

- Type of presentation
 - HQ Best Practices Tool
 - Poster
- This abstract can be considered for either an HQ Best Practices Tool or Poster.
 - Yes
 - No
- Learning approach
 - Case study: Presentation that describes the application of a tool or concept to your experience. (e.g., Using Daily Safety Briefings in a Healthcare System)
 - Innovation & research: Presentation that introduces a new study or approach to quality work. (e.g., Integrating Social Determinant Data)
 - Performance & Process Improvement: Presentation focuses on quality methodologies that impacted outcomes. (Ex. Collaboration Across the Continuum that Decreased Acute Care Readmissions)
- Title: 12 words maximum

- Description: 100 words maximum

Target audience:

- Job Level: Choose up to three roles of your target audience.
 - Analyst
 - Clinical Educator
 - Chief Medical Officer
 - Chief Nursing Officer
 - Chief Quality Officer
 - Consultant
 - Coordinator
 - Director
 - Manager/Supervisor
 - Physician
 - President
 - Instructor
 - Project Manager/Leader
 - Staff Nurse
 - Vice President
 - Other (please specify)
- Primary Responsibility: Choose up to three responsibilities of your target audience.
 - Accreditation/Regulation
 - Case Management
 - Clinician (Direct Patient Care)
 - Data Analytics
 - Infection Prevention/Control
 - Medical/Professional Staff Coordination
 - Patient Experience/Relations/Advocacy
 - Patient Safety/Risk Management
 - Population Health
 - Performance and Process Improvement
 - Quality Management

Fields for HQ Best Practices Tools and Posters

- Problem: What problem were you trying to solve?
- Measurement: How did you measure it? What tools did you utilize? (e.g., fishbone diagrams, control charts)
- Analysis & Methodology: How did you go about your analysis? Describe any type of statistical analysis you utilized to measure results.
- Implementation: What did you implement? What obstacles did you encounter along the way? How did you approach them? How can other healthcare quality professionals apply and or benefit from your research?
- Results/Discussion: What was the outcome? What quality processes and tools were critical to your success? How do you plan to improve and/or sustain your results?
- Describe how you might plan to visualize your data and results on your poster.

All Sessions Questions:

- Applications to the job: What will participants take away from this session and apply to their work? These should be action-oriented statements. You are required to submit at least two and no more than five.
- Competency Framework Domain and Statement: Pick up to two that most closely apply.
- References (at least one evidence-based reference required)

Co-Presenters

Please add information for each of the presenters in your abstract.

If co-presenter information is not added by the submission deadline, your submission will not be reviewed for consideration