

**2007**

National Institute of Standards and Technology  
Technology Administration • Department of Commerce  
Baldrige National Quality Program



# Share Food Feedback Report

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# Feedback Report

This Share Food Feedback Report was prepared for use in the 2007 Malcolm Baldrige National Quality Award Examiner Preparation Course. A team of experienced Baldrige Examiners evaluated the Share Food Case Study, using the Independent and Consensus Review Process. The Share Food Case Study describes a fictitious nonprofit organization. There is no connection between the fictitious Share Food and any other organization, either named Share Food or otherwise. Other organizations cited in the case study also are fictitious, except for several national and government organizations. Because the case study is developed to train Baldrige Examiners and others and to provide an example of the possible content of a Baldrige application, there are areas in the case study where Criteria requirements are not addressed.

Share Food scored in band 3, showing that the organization demonstrates effective, systematic approaches responsive to the basic requirements of most Items, although there are still areas or work units in the early stages of deployment. Key processes are beginning to be systematically evaluated and improved. Results address many areas of importance to the organization's key requirements, with improvements and/or good performance being achieved. Comparative and trend data are available for some of these important results areas.

October 26, 2007

Ms. Nancy Goode  
Executive Director  
Share Food  
3353 Heartland Street  
Des Couers, IA 62871

Dear Ms. Goode:

Congratulations for taking the Baldrige challenge! We commend you for your commitment to performance excellence and applying for the Malcolm Baldrige National Quality Award.

This feedback report was prepared for your organization by members of the Board of Examiners in response to your application for the 2007 Malcolm Baldrige National Quality Award. It presents an outline of the scoring for your organization and describes areas identified as strengths and opportunities for possible improvement. The report contains the Examiners' observations about your organization, although it is not intended to prescribe a specific course of action. Please refer to "Preparing to Read Your Feedback Report" and "Considerations for Reviewing Small Organizations" for further details 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) 975-2360 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 for ideas about organizational improvement. Current and previous Award recipients can be potential resources on your continuing journey to performance excellence. A contact list of Award recipients is enclosed. The 2007 recipients will share their stories at our annual Quest for Excellence Conference, April 22–25, 2008. Current and previous recipients participate in our regional conferences as well. Information about these events and other Baldrige Program-related activities can be found on our Web site at [www.baldrige.nist.gov](http://www.baldrige.nist.gov).

In approximately 30 days, you will receive a customer satisfaction survey from the Panel of Judges. As an applicant, you are uniquely qualified to provide an effective evaluation of the materials and processes that we use in administering the Award Program. Please help us continue to improve the program by completing and returning this survey.

Thank you for your participation in the Baldrige Award process. Best wishes for continued success with your performance excellence journey.

Sincerely,

Harry S. Hertz, Director  
Baldrige National Quality Program

Enclosures

## Preparing to read your feedback report . . .

*Your feedback report contains Baldrige Examiners' observations that are 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 requirement of the Criteria, nor will it say specifically how you should address these opportunities. You will decide what is most important to your organization and the best way to address the opportunities.*

*Applicant organizations read and use feedback comments in different ways. We've gathered some tips and practices from prior 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.
- Especially note comments in **boldface type**. These comments indicate particularly important observations—those the Examiner Team felt had substantial impact on your organization's performance practices, capabilities, or results (either a strength or opportunity for improvement) and, therefore, had more influence on the team's scoring of that particular Item.
- You know your organization better than the Examiners know it. There might be relevant information that was not communicated to them or that they did not fully understand. Therefore, not all of their comments may be equally accurate.
- Although we strive for "perfection," we do not achieve it in every comment. If Examiners have misread your application or misunderstood your organization on a particular point, 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 to understand what the Examiners observed you do well and build upon them. Continue to evaluate and 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.

## **Considerations for Reviewing Small Organizations**

All applicants are reviewed in the context of their individual key factors. In the case of small organizations, size is a significant key factor. While an organization's size does not affect the applicability of the Baldrige Criteria, it does need to be factored into the assessment of an applicant's responses in its Baldrige Award application. Therefore, Examiners with large-organization frames of reference should be careful not to apply operational and procedural requirements as they review small organization applications.

Some guidelines are given below for understanding the context for reviewing a small organization:

- Small organization applicants are defined as those with 500 or fewer employees. Also noteworthy is the significant difference in resource availability between a 450-person organization and a 50-person organization.
- Social responsibility and community involvement must be viewed in the context of the applicant's size. A large organization might have impacts on a national or international basis; a small organization will frequently focus its involvement on a local community.
- The issues of fiscal and managerial accountability, ethical behavior, and legal compliance are as pertinent to a small organization as they are to a large one, and the responses of management to these issues are equally important. A small organization, however, will necessarily address these issues in the context of its size, ownership (many are privately held or family-owned), and responsibilities. Good governance practices are still an imperative.
- While large organizations frequently have complex computer/information systems for data management, a small organization (depending upon how small) may perform data and information management with a combination of personal computer- or work station-based data management systems and manual methods.
- Due to limited workforce and funding resources, benchmarking and competitive comparison information in a small organization environment may be based largely on literature/trade association information and comparisons with best practices in the local geographic area.
- In the context of a small organization, systems for workforce involvement and process management may rely more on informal verbal communication than on formal written communication and documentation. However, all applicants have the same requirement to demonstrate that their processes are repeatable, can produce the desired results, and are deployed fully and systematically throughout the organization.
- The ability of a small organization to leverage key suppliers, particularly large suppliers, has to be viewed in the context of workforce availability and the volume of business that it does with the supplier.

- The ability of a small organization to obtain customer and market knowledge through independent third-party surveys, commissioned studies, extensive interviews, or focus group techniques is limited by its resources. The important consideration for Examiners is to assess whether the applicant, given its resources, is using appropriate mechanisms to gather and use information to improve its customer and market focus and satisfaction.
- The expectation that large organizations will segment their results data with regard to various customer and workforce segments may require modification in small organizations, depending on the complexity of these groups and the level of resources needed to gather and analyze the data.

## **KEY THEMES**

Share Food (SF) scored in band 3 in the consensus review of written applications for the Malcolm Baldrige National Quality Award. For an explanation of the scoring bands, please refer to Figure 6, “2007 Scoring Band Descriptors.”

An organization in band 3 typically demonstrates effective, systematic approaches responsive to the basic requirements of most Items, although there are still areas or work units in the early stages of deployment. Key processes are beginning to be systematically evaluated and improved. Results address many areas of importance to the organization’s key requirements, with improvements and/or good performance being achieved. Comparative and trend data are available for some of these important results areas.

**a. The most important strengths or outstanding practices (of potential value to other organizations) are as follows:**

- Senior leaders demonstrate visionary leadership by creating strategies, systems, and methods to ensure organizational sustainability. For example, the Corporate Contributor Program, introduced in 2001 and adopted by other food banks as a best practice, addresses financial sustainability by providing a method for several key donor organizations to fund general administrative overhead. This allows 100% of other donations to be used to fulfill SF’s mission to feed the hungry. SF also gains support through creative partnerships with government agencies and a university that provide students and fellows for improvement projects, as well as through workforce practices such as the Leadership Development Program (LDP), succession planning, and job rotation for employees and volunteers.
- The biennial 12-step Strategic Planning Process (SPP) is an effective, systematic approach initiated in 1997 and restructured in 2004 that involves members of the Board of Directors, employees, and stakeholders and aligns objectives with strategic challenges, values, key success factors, and stakeholder needs. Leaders have improved the process through benchmark analyses of food banks and other nonprofit organizations, Baldrige-based self-assessments, and feedback from the state award process, resulting in enhancements such as a Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis and an Environmental Scan to identify potential blind spots. The SPP reflects a strong alignment with SF’s mission, vision, and values (MVV), as evidenced by the 2003 decision to exit food pantry and soup kitchen services to focus on SF’s core competency of food banking.
- SF uses its five-step Critical-to-Quality (CTQ) Determination Process to determine key customer requirements, needs, and changing expectations and their relative importance to customers’ relationship decisions. In addition, the CTQ Determination Process is used to identify key work process requirements, and teams use CTQ indicators, combined with the Plan-Do-Check-Act (PDCA) Process (Figure 6.1-3), to

help ensure that hunger-reducing processes meet customer needs. In-process measures based on CTQ indicators are tracked daily, weekly, and monthly and updated on the Daily Harvest, Monthly Harvest, and Balanced Plate Scorecard (Figures 4.1-1 and 4.1-2). SF uses its team-based PDCA Process to systematically evaluate and improve its work processes and approaches. For example, in 2006, SF conducted a redesign of each of its key work processes to ensure they had appropriate, effective CTQ indicators. The planning step of the PDCA Process was enhanced through extensive senior leader and stakeholder participation.

- SF demonstrates management by fact in its use of the FOODS Balanced Plate Scorecard; scheduled performance reviews of Harvest metrics, Baldrige-based self-assessments, SWOT Analyses, and Environmental Scans; and technological advances such as FoodAnswers and the Rapid Inventory Control Enterprise (RICE) system. The Balanced Plate Scorecard (Figure 4.1-1) is built on SF's mission and key success factors and is linked to strategic objectives and action plans. These assessment methods have matured over successive cycles of improvement.

**b. The most significant opportunities, concerns, or vulnerabilities are as follows:**

- While the Executive Director is acknowledged as a community leader in ethics, SF does not describe a systematic approach for senior leaders to personally promote an organizational environment that requires and results in ethical behavior, a method to monitor ethical behavior throughout the organization in all interactions, a way to anticipate public concerns with future services and operations, or processes to meet regulatory requirements and goals. A lack of systematic approaches to manage social responsibility may limit SF's ability to fulfill the stakeholder and donor/supplier requirements of accountability and integrity.
- While SF collects and reviews data to assess its performance related to the Strategic Plan and action plans (Figure 2.2-2), SF does not describe how it deploys its action plans or ensures that their outcomes are sustained. In addition, a systematic process is not evident for using performance review results to prioritize and carry out improvements and innovations. Further, it is not clear how these priorities and opportunities are deployed to suppliers, partners, and collaborators, when appropriate.
- While SF uses the Development and Friend-Raising Committees and the Donor Pyramid Framework (Figure 3.2-1) to build relationships with donors, a systematic process is not evident for building relationships with SF's other customer/stakeholder groups in order to acquire new customers, increase loyalty and repeat business, and gain positive referrals. Further, it is not clear how SF keeps its methods to build customer relationships and determine customer satisfaction current with business needs and directions. These gaps may detract from customer-driven excellence and limit SF's ability to support its key success factor of the satisfaction of member agencies, donors/suppliers, and the community (Figure 4.1-1).



- Although employees and volunteers participate in mock disaster drills and emergency events, it is not clear that SF has developed a fully deployed system that considers prevention, management, continuity of operations, and recovery in its preparedness system. For example, it is not clear how SF prepares for or ensures the continuity of its many volunteer-dependent processes in the event that damage from the prevalent tornadoes in the area prevents volunteers from working. Likewise, SF relies on a few core volunteers and pro bono services from a local information technology (IT) provider to maintain its hardware and software; however, it is not clear that these volunteers would be available and trained to ensure operations and the functionality of information systems in the event of an emergency. The lack of systematic approaches in these areas could compromise SF's key community requirement to provide an effective response to emergency needs (Figure P.1-4) and its strategic challenge to ensure that food reaches those most in need when they need it most.
- It is not evident that SF has yet developed well-deployed, systematic processes for several aspects of building an effective and supportive workforce environment. For example, while multiple mechanisms are used to recruit volunteers (Figure 5.2-2), it is not clear whether these or other methods are used to recruit employees, and a systematic approach is not evident for retaining members of the workforce. In addition, while SF uses focus groups to help recruit Hmong and Hispanic volunteers, a systematic process is not evident to address other diversity factors, such as diversity in volunteers' ages. Further, performance measures are not provided for workplace security, and it is not clear whether any policies or services are in place to support volunteers, including its 20 core team volunteers. Without systematic processes in these areas, SF may be limited in its ability to meet key workforce requirements, such as security and regulatory compliance, and to address its strategic challenges to recruit sought-after volunteers, especially from a broad range of age segments, and to optimize human resources.

**c. Considering SF's key business/organization factors, the most significant strengths, opportunities, vulnerabilities, and/or gaps (related to data, comparisons, linkages) found in its response to Results Items are as follows:**

- SF's results address many areas of importance to its key requirements, with improvements and good performance being achieved. For example, product and service outcomes for food availability and distribution (Figures 7.1-1 through 7.1-4) demonstrate favorable trends from 2003 to 2006, and SF's fill rate of 95% (Figure 7.1-4) was the best performance at the state and regional level (i.e., for the Iowa Food Bank Association [IFBA] and The Food Bank Learning Collaborative [FBLC], respectively). In addition, results for member agencies' satisfaction overall and their satisfaction with a variety of requirements (e.g., timeliness/dependability, communications, hours of operation, food selections and nutritional quality) show a positive trend from 2003 to 2006 (Figures 7.2-1 through 7.2-5).

- SF demonstrates positive trends in leadership and workforce development results. The number of hours contributed by core volunteers increased steadily from 2003 to 2006 (Figure 7.4-11), and the number of volunteers also increased; for example, from 2004 to 2006, the number of former clients who became volunteers increased from 3 to 15 (Figure 7.4-5) and the number of court-ordered placements who became volunteers tripled (Figure 7.4-9). In addition, from 2003 to 2006, the annual number of training hours for employees more than tripled (to 350 hours) and for volunteers increased from 900 to 4,500 hours (Figure 7.4-1). In 2006, more than 60% of volunteers and 80% of employees were cross-trained, and the effectiveness of workforce and leader development reached the best performance level in the regional FBLC (Figure 7.4-7). These results address SF's key success factor to maintain its dedicated and experienced employees and volunteers.
- Results for a number of process effectiveness measures demonstrate favorable performance levels, trends, and comparisons. SF shows positive three-year trends and attained the FBLC best performance in the percentage of effectiveness in meeting food demands in both 2005 and 2006 (Figure 7.5-4) and in the percentage of times that it met seasonal demand in 2006 (Figure 7.5-10). In addition, SF attained the best satisfaction ratings from its key suppliers and donors of services in 2005 and 2006 (Figure 7.5-15).
- SF demonstrates several favorable governance and senior leadership outcomes, including rising stakeholder trust, as indicated by improving scores from 2004 to 2006 on survey responses addressing a variety of confidence and trust issues (Figure 7.3-10), as well as increases in donations (Figure 7.6-3) and annual grants (Figure 7.6-7) during the same time period. In addition, favorable fiscal accountability results include performance to budget above 99% from 2004 to 2006 (Figure 7.6-8), and improvements in regulatory compliance ratings include 2006 performance levels for sanitation and safe food handling and disposal at or near the best levels of the FBLC and Food Banks of America (FBA) (Figure 7.4-14). Also, organizational citizenship advances are represented by a three-year increase (from 75% to 100%) in Employee Participation in Community Ways of Connection Efforts (Figure 7.6-13), an increase in paper recycling from about 3,000 pounds in 2002 to more than 10,000 pounds in 2006 (Figure 7.6-14), and 2006 state-best performance in Food as an Economic Engine for Development (FEED) Iowa Partnership Development support (Figure 7.6-15).
- Results are not provided for a variety of measures relevant to SF's key organization factors, including the requirements and expectations of key customers, stakeholders, market segments, and workforce members (Figures P.1-4 and P.1-2a). For example, outcomes for product and service performance do not include results related to the customer requirement of consistency or the customer expectation of dependability. In addition, there are no results related to several key employee and volunteer requirements and expectations, such as a focus on the MVV, respectful and nondiscriminatory communications and actions, a spirit of collaboration and

- teamwork, and supervision/mentoring/guidance from the organization's leaders.
- Results are not provided for several scorecard and operational metrics, such as current liabilities (Figure 4.1-1) and the percentage of repackaging time, the food storage compliance index, accounts receivable days outstanding, and the warehouse equipment maintenance expense ratio (Figures 6.1-2 and 6.2-1). In addition, despite a doubling of demand in the past three years, no results for measures of marketplace performance are provided, such as changes in market share or position. Finally, results are not provided for survey responses on workforce perceptions of ethical behavior or for indicators of breaches of ethical behavior (e.g., the number of ethical conduct breaches).
  - Comparative data are not included in a number of results areas. For example, comparisons are missing for several key indicators of work process effectiveness, including the Inventory and Resource Effectiveness Index (Figure 7.5-13), RICE Percentage of Uptime and User Interface Accuracy (Figure 7.5-19), Fleet Maintenance Index (Figure 7.5-20), and Key Maintenance Metrics (Refrigeration and Grounds Maintenance) (Figure 7.5-21), which also are strategic action plan or Balanced Plate Scorecard indicators. In addition, comparisons are not provided for a number of customer-focused results (e.g., results for complaints [Figure 7.2-6], referrals [Figure 7.2-7], communication [Figure 7.2-8], years of donation [Figure 7.2-10], and community satisfaction [Figure 7.2-11]). Further, limited or no comparisons are provided for several financial and market performance indicators; no comparative data are provided for income results (Figure 7.3-9), results related to organizational capacity and efficiency (Figures 7.3-1 through 7.3-7) include comparisons to only the national Assistance Now Finder, and results for the FBLC Overall Peer Comparison (Figure 7.3-8) include only four other food banks. A more comprehensive use of comparative data may assist SF in better judging its progress relative to other nonprofit organizations providing the same or similar products and services.
  - Although SF segments its data for several measures, it does not use segmentation in many results related to its vision of Iowa's heartland as hunger-free. For example, most of the product and service outcomes presented are not segmented by product and service types, customer groups, or market segments, and most workforce-focused results are not segmented to address the diversity of SF's workforce or its various workforce groups (e.g., employees, core volunteers, general volunteers, and students and fellows). In addition, customer-focused results include limited data on member agency segments; results are provided for only 3 of the 58 member agencies and no segmented data are provided based on the Segmentation Process definitions of size, frequency of service, and urban or rural location. Further, process effectiveness outcomes include limited segmentation; for example, the effectiveness of meeting food demands (Figure 7.5-4) is not segmented geographically to help assess whether the two counties with a percentage of food-insecure residents that is above the state average are equitably served. Lack of segmentation may limit SF's ability to identify

and focus its resources on those groups and areas most in need of improvement.

- Most of the comparisons provided for SF's organizational performance results do not include trend data (generally a minimum of three historical data points); with a few exceptions, such as the Assistance Now Finder comparisons for financial and market results, the comparisons are for one year only. In addition, several results do not include any trend data. For example, results for Standards and Regulatory Agency Requirements (Figure 7.6-6) provide only the current status of SF's performance, and specific results data over time are not provided for primary revenue growth or working capital (7.3a[1]), two of the three measures that constitute the organizational capacity score. Without data that delineate organizational performance over time in relation to comparable organizations, as well as within the organization, SF may be limited in its ability to accurately assess its progress.

## DETAILS OF STRENGTHS AND OPPORTUNITIES FOR IMPROVEMENT

### Category 1 Leadership

#### 1.1 Senior Leadership

Your score in this Criteria Item for the consensus stage is in the 50–65 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### STRENGTHS

- Senior leaders use Step 2 of the SPP (Figure 2.1-1) to review and change the MVV for the coming two years. They deploy the vision and values to the workforce through employee and volunteer orientation, role modeling, daily posting of a value at the workplace entrance and in the break room, and daily discussion of the value with employees and volunteers in the break room and during walk-arounds. The vision and values are deployed to other stakeholders through SF’s Web site, annual report, and newsletter and at an annual banquet. Deployment improvement cycles include implementing additional volunteer orientation, reinforcing the value of partnering and participation, and broadening senior leaders’ involvement in posting the value of the day.
- **Senior leaders address financial sustainability through the Corporate Contributor Program, introduced in 2001, which provides a method for several key donor organizations to fund general administrative overhead, thus allowing all other donations to be used to fulfill SF’s mission to feed the hungry. Leadership sustainability is addressed through a succession planning system developed by the Board of Directors in which the board takes responsibility for training and mentoring future leaders. Employees and volunteers also receive leadership and professional development through mentoring, rotational assignments, just-in-time volunteer training, and the Leadership Development Program (LDP).**
- Senior leaders use the structure of the Leadership System Model (Figure 1.1-1) to foster an environment for organizational performance improvement and a focus on accomplishing SF’s mission and strategic objectives. The board oversees the organizational direction through interlocking committees; senior leaders serve as champions for each strategic objective and form interlocking teams to develop and carry out action plans. All employees are involved in interlocking teams, which are composed of employees and volunteers.
- Senior leaders communicate with and engage the employee and volunteer workforce through the various mechanisms shown in Figure 1.1-2, which include two-way communication methods such as daily walk-arounds, interlocking teams, annual evaluation, and quarterly brown-bag debriefings. Leaders are involved in numerous

employee recognition events for both individuals and teams that are designed to support high performance.

## OPPORTUNITIES FOR IMPROVEMENT

- **It is unclear how senior leaders personally promote an organizational environment that fosters, requires, and results in legal and ethical behavior. For example, the Executive Director is widely acknowledged as a community leader in ethics; however, it is not clear that she or other senior leaders follow a systematic approach to personally promote an environment within the organization that requires and results in ethical behavior. Without an effective, systematic approach, SF may find it challenging to consistently meet the customer, stakeholder, and supplier/donor key requirements of accountability, integrity, dependability, predictability of operations, and competency/consistency.**
- While succession planning for the five key leadership positions is addressed during biennial strategic planning, it is not clear how senior leaders personally participate in the development of future organizational leaders. Also, information is not provided concerning other aspects of sustainability, such as issues related to the changing future business and market environment (including volunteer availability) or a safe and secure environment. The lack of an effective, systematic approach may affect SF's ability to prepare for and manage its future state as it addresses threats and risks in the environment.
- While senior leaders make quarterly reports on strategic action plans to board committees (Figures 2.1-1 and 2.2-2), review Balanced Plate Scorecard metrics monthly (Figure 4.1-1), and review numerous other indicators frequently (Figure 4.1-2), it is not clear how senior leaders include a focus on creating and balancing value in their organizational performance expectations for customers and stakeholders beyond the member agencies. Without such a focus, SF may be limited in its ability to prioritize actions and ensure success with all stakeholder groups in meeting requirements.

## 1.2 Governance and Social Responsibilities

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- SF’s governance system addresses key aspects of oversight through a variety of formal reviews and reports (Figure 1.2-1) that include involvement by the board, senior leaders, and board committees. Board committees include employees, volunteers, and, occasionally, suppliers and member agencies, as appropriate. In addition to these various methods, SF addresses the protection of stakeholder interests through the broad involvement of internal and external stakeholders in the SPP (Figure 2.1-1).
- Evaluation of senior leaders’ performance occurs at various levels. The board conducts an annual self-evaluation to identify improvement opportunities, such as the creation of the interlocking Leadership System Model (Figure 1.1-1) in 2004. The board is responsible for the performance evaluation of the Executive Director, using a 360-degree approach that includes the board, senior leaders, two employees and volunteers, and executives of two member agencies. The other senior leaders are evaluated by the Executive Director in the areas of accomplishing strategic objectives and professional achievement goals. The senior leaders evaluate all employees and core volunteers.
- SF identifies its key communities as those within its geographic service areas, choosing activities linked to food or hunger. It supports these communities through education about nutrition, hunger, and the food-insecure (Figure 3.1-2) and through the LDP, which is open to volunteers, employees, and representatives of other community nonprofits. SF also collaborates with other organizations in the Food as an Economic Engine for Development (FEED) Partnership to provide safety-net services. Employees and all senior leaders are provided with time off to volunteer for community outreach programs (Figure 1.2-2). SF also provides placement for people with court-ordered community service sentences.

### OPPORTUNITIES FOR IMPROVEMENT

- While SF has developed an approach for evaluating senior leaders’ performance, there is no indication of how senior leaders use the results of these reviews to further develop and improve personal leadership effectiveness and the effectiveness of the leadership system as a whole. Without a fact-based, systematic approach, SF may find it difficult to provide the leadership necessary to achieve its vision: Iowa’s heartland is hunger-free.
- **It is not evident how SF anticipates public concerns with future products, services, and operations. Additionally, while Figure P.1-3 outlines regulatory entities, measures, and performance goals, there is no indication of the key processes used to**

**attain these performance levels. For instance, no processes are described to meet the requirements and goals of the Internal Revenue Service (IRS) or The Emergency Food Assistance Program (TEFAP). Proactive anticipation of concerns and processes to address ongoing regulatory requirements may provide the opportunity to manage regulatory requirements and stakeholder risks as part of a systematic approach rather than attending to issues as they emerge.**

- **While an employee appraisal form and orientation communicate SF's ethics-based values, there is no indication of the effectiveness of the volunteer self-appraisal form in enabling or monitoring ethical behavior. In addition, it is not evident what key processes or measures for enabling and monitoring ethical behavior in governance, operations, or stakeholder interactions are used other than an ethics hotline that yielded only three calls in five years. This beginning of a systematic approach to promote, ensure, and measure ethical behavior does not appear to be aligned with the importance that the Executive Director places on this subject.**



## **Category 2 Strategic Planning**

### **2.1 Strategy Development**

Your score in this Criteria Item for the consensus stage is in the 50–65 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### **STRENGTHS**

- SF uses a biennial 12-step SPP (Figure 2.1-1) that involves community leaders, volunteers, member agencies, and donors. The key process steps are Preparation; Review of the MVV; SWOT Analysis and an Environmental Scan; Review of Funding Mandates; “Current State” Performance Analysis; “Future State” Brainstorming; Development of Strategic Objectives, Goals, and Time Frames; Resource Allocation; Action Planning; Board Approval; Strategic Plan and Action Plan Deployment; and Strategic Plan Monitoring. SF identifies strategic challenges in the “Current State” step, and it includes inputs from the SWOT Analysis, Environmental Scan, and Funding Mandate Review. The “Future State” step uses appreciative inquiry to identify strategic advantages. The SPP was initiated in 1997 and restructured in 2004 as a result of benchmarking analyses of food banks and other nonprofit organizations, Baldrige-based self-assessments, and feedback from the state award process, and the biennial Environmental Scan was added in 2005.
- The SPP (Figure 2.1-1) uses SWOT Analysis, an Environmental Scan, and performance analyses to identify potential blind spots. For example, the SWOT Analysis considers data and information relative to operations; shifts in economic, legal, political, market, and competitive environments; regulatory issues; and technology changes. An Environmental Scan using a minimum data set also is conducted as a stand-alone process in years when there is no SPP.
- SF has identified its strategic objectives (Figure 2.2-2), as well as its short- and longer-term goals (for FY2007, FY2008, FY2009, and FY2010), along with associated timetables for their accomplishment. SF aligns its strategic objectives with strategic challenges, values, key success factors, and stakeholder requirements (Figure 2.1-3).

#### **OPPORTUNITIES FOR IMPROVEMENT**

- It is unclear how SF ensures that strategic planning addresses key factors in some areas that have been identified as important threats. For example, it is not clear how SF addresses its need to optimize human resources and partnerships in light of fluctuations in the volunteer workforce, member agency needs, and supplier capabilities. It also is unclear how strategic planning addresses the need to obtain and maintain adequate financial resources, which may be of particular significance considering that support from

key donors may be decreasing (Figure 7.6-9) and SF competes with other nonprofit organizations for funding.

- Although SF notes innovations in specific areas, it is not clear how its strategic objectives address larger opportunities for innovation in products, services, operations, and its business model. For example, there is no evidence of innovation in SF's approaches for competing with other nonprofits for funding or volunteers. A focus on developing and implementing innovations, possibly by capitalizing on the diversity of its large number of volunteers, may provide SF with the opportunity to increase its effectiveness and provide greater service to the communities it serves.
- While SF has aligned its strategic objectives with its strategic challenges (Figure 2.1-3), it is unclear how SF ensures that its strategic objectives balance short- and longer-term challenges and opportunities. A systematic process for understanding and reacting to short- and long-term challenges and opportunities may help ensure that SF can be agile in addressing organizational needs and directions.

## 2.2 Strategy Deployment

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- The SPP (Figure 2.1-1) and the PDCA Process (Figure 6.1-3) are used for the development of action plans. Action plans are created to support the strategic objectives during Step 9 of the SPP. Champions (chosen from senior leaders, board members, volunteers, and LDP graduates) are assigned to each action plan to lead development and deployment throughout the organization and to perform quarterly reviews.
- SF uses its SPP (Figure 2.1-1) to ensure that adequate financial and other resources are available and allocated to support the accomplishment of its action plans. For example, adequate financial resources are addressed as part of Steps 8 and 10. In Step 8, the Executive Director, with help from other senior leaders, develops annual fiscal and capital budgets in order to support the objectives and goals established in Step 7. The Finance/Audit Committee reviews these budgets and an outline of resources needed to support the Strategic Plan. The Finance/Audit Committee recommends allocations of resources based partly on action plans, and the budgets are presented for approval by the board in Step 10.
- As circumstances warrant, SF uses the Emergent Strategy Alert Process (Figure 2.2-1) to establish and deploy modified action plans. For example, circumstances may arise as the result of the Environmental Scan done on the years when there is no SPP or as the result of the Community Needs Assessment. The four-step Emergent Strategy Alert Process, which includes a rapid-cycle SWOT Analysis, guides SF to develop and deploy new or modified strategies, goals, and actions.
- SF has identified key short- and longer-term action plans that are mapped to strategic objectives and goals (Figure 2.2-2). For example, achieving a rating of 10 on the American Association of Food and Nutrition for a Healthier America (AAFNHA) Nutrition Scale by FY2010 is a long-term action plan, and increasing the number of pounds of food per person in poverty by 5% by FY2007 is a short-term action plan. Both are linked to the strategic objective “to increase the amount and quality of food delivered.” SF also has identified key changes planned for products and services. For example, in this fiscal year it will increase the variety of nutritional food offered to member agencies to reflect the *Dietary Guidelines for Americans*, 2005 and look for innovative ways to use Internet communication.

## OPPORTUNITIES FOR IMPROVEMENT

- **While champions are responsible for the deployment of action plans, a systematic approach is not described for deploying the plans to achieve strategic objectives or for ensuring that the key outcomes of action plans can be sustained. For example, it is not clear how the board’s oversight at quarterly meetings ensures sustainability or what other actions are taken to integrate action plans into processes and approaches to ensure they are maintained. Without systematic approaches to deploy action plans and sustain their outcomes, SF may find it difficult to attain its strategic performance goals.**
- It is unclear how SF assesses financial and other risks associated with its action plans (e.g., possible financial risks associated with its long-term action plan to achieve a rating of 10 on the AAFNHA Nutrition Scale, which might result in increased costs from purchasing food to supplement possibly less-nutritious, donated food). The lack of an effective, systematic approach may hamper SF’s ability to evaluate the feasibility of each action plan as it strives to consistently acquire, warehouse, transport, and distribute food to the food-insecure through partnerships with its 58 member agencies.
- It is not clear how the key human resource plans SF has noted will accomplish its strategic objectives and action plans. More specifically, because the human resource plans are nearly identical to short- and longer-term action plans listed for the first strategic objective in Figure 2.2-2, it is not evident how the former will help accomplish the latter. In addition, while the human resource/action plans include goals (e.g., “increase volunteers’ hours by 10% each year”), they do not include specific actions, including resource commitments, to accomplish those goals and the related strategic objective. Further, it is unclear how the human resource plans will address potential impacts on the workforce and potential changes to workforce capability and capacity. The lack of an effective, systematic approach and specific plans may impede SF’s ability to meet its annual strategic goals as well as its ability to continue and expand its services for the food-insecure.
- While senior leaders and board committee chairs set performance projections during Step 7 of the SPP (Figure 2.2-2), it is not clear how these short- and longer-term performance projections are determined. Additionally, it does not appear that projected performance is compared with that of comparable organizations or past performance. Also, while goals are presented for FY2008, FY2009, and FY2010, it is not clear whether these differ from performance projections and if so, how. The lack of a fact-based, systematic approach may limit SF’s ability to assess its relative performance and prepare for projected changes, such as the growing demand for its services, which has doubled in the last three years.

## Category 3 Customer and Market Focus

### 3.1 Customer and Market Knowledge

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### STRENGTHS

- The Retreat Committee uses a four-step Segmentation Process during the SPP, SWOT Analysis, and Environmental Scan to identify current and future customers, customer groups, and market segments. The committee gathers and integrates information, validates existing segments and identifies emerging ones, communicates final segmentation throughout the organization, and organizes data by segments as input to the Critical-to-Quality (CTQ) Determination Process. For example, agencies are segmented by size, frequency of service, and urban or rural location, and donors are segmented by type of contribution. The Segmentation Process enables SF to address the needs of constantly shifting groups of food-insecure persons.
- SF uses its five-step CTQ Determination Process, combined with the PDCA Process, to determine key customer requirements, needs, and changing expectations and their relative importance to customers’ relationship decisions. SF gathers voice-of-the-customer information using multiple listening and learning methods (Figure 3.1-2), analyzes segment requirements and priorities and their impact on operations and processes, and shares this information with its member agencies, the community, and other stakeholder groups. SF uses this knowledge internally to plan, conduct performance reviews, design operations, and manage relationships and day-to-day distribution.
- SF’s multiple listening and learning methods vary for each of its four stakeholder groups and their needs (Figures 3.1-1 and 3.1-2). For example, SF places a comment card in each delivery to member agencies to solicit comments on quality and timeliness, and it conducts community surveys and needs assessments to forecast future demand.

#### OPPORTUNITIES FOR IMPROVEMENT

- **It is not clear how SF uses relevant information and feedback from current and former customers, including customer loyalty and retention data, customer referrals, and win/loss analysis, in order to plan products and services and develop new business opportunities. For example, a key strategic challenge is to ensure that food reaches those most in need when they need it most; however, it is unclear how SF uses relevant data and information from customers to address this challenge. The lack of a fact-based, systematic approach may impede SF’s ability to achieve its vision: Iowa’s heartland is hunger-free.**

- While SF collects and analyzes a variety of voice-of-the-customer information for each of its four stakeholder groups (Figure 3.1-1) and it provides an example of focus group findings leading to the use of students as volunteers, a systematic process is not described for using voice-of-the-customer information to become more customer-focused, to take action to better satisfy customer needs and desires, or to identify opportunities for innovation.
- It is not clear how SF keeps its listening and learning methods current with business needs and directions. For example, the Board of Directors and senior leaders use information gathered through SF's listening and learning methods to improve products, services, and operations; however, it is unclear how those listening and learning methods themselves are evaluated and improved. The lack of a systematic, fact-based evaluation and improvement method may hamper SF's ability to identify and address the needs of its four major customer/stakeholder/market segments, each with specific requirements.

### 3.2 Customer Relationships and Satisfaction

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### STRENGTHS

- SF uses a variety of methods to build relationships with donors; for example, the Development and Friend-Raising Committees develop methods specific to each donor level (Figure 3.2-1), such as direct mail, SF’s Web site, and personal contact by letter or phone call. SF also uses a variety of access mechanisms, including a toll-free number, daily walk-arounds, and comment cards in food shipments, to enable various customer/stakeholder groups to seek information, conduct business, and make complaints. Contact requirements are deployed via reminders during each work shift. Information gained through these interactions with customers and other stakeholders is then assessed in the SWOT Analysis and Environmental Scan.
- SF uses a Complaint Resolution Process to manage customer complaints, with the goal of resolving each complaint within 24 hours. All employees and volunteers keep a log of complaints and resolutions, and some of the data are aggregated using the FoodAnswers database and reviewed regularly by the board, senior leaders, employees, and volunteer leaders. When this process revealed a food storage problem in 2006, new refrigeration was added. In addition, FoodAnswers allows special access for employees, volunteers, partners, member agencies, and Food Banks of America (FBA), Food Bank Learning Collaborative (FBLC), and Iowa Food Bank Association (IFBA) members.
- SF uses a three-step Satisfaction Determination Process to capture actionable information for use in exceeding customers’ expectations. The process steps entail identifying the factors that contribute to satisfaction and dissatisfaction; deploying the satisfaction assessments; and aggregating, analyzing, and distributing information. Satisfaction assessments include formal and informal methods, and member agencies are surveyed regularly using comment cards. SF segments data to identify varying viewpoints and conducts a gap analysis to identify differences.

#### OPPORTUNITIES FOR IMPROVEMENT

- **It is unclear how SF builds relationships with customer/stakeholder groups other than donors, who are solicited through the Development and Friend-Raising Committees and the Donor Pyramid Framework (Figure 3.2-1). While SF determines the needs and measures the satisfaction of member agencies, community segments, and other stakeholders, it does not describe how it builds relationships with these groups to acquire customers, to meet and exceed their expectations, to increase loyalty and repeat business, or to gain positive referrals.**

- While SF reviews its aggregated complaint data to identify systemic issues, it is not apparent how it resolves individual complaints effectively and promptly within its 24-hour goal, or how it minimizes dissatisfaction and loss of repeat business and referrals at the time of each complaint.
- Although SF uses competitive comparisons of customer satisfaction for its annual survey of donors, it is not clear how it obtains and uses information about the satisfaction of its other customer/stakeholder groups relative to the satisfaction levels of other organizations providing similar products or services and/or relative to industry benchmarks. For example, no comparative or competitive satisfaction assessments are described for its 58 member agencies, community segments, or other stakeholders. Without the use of comparative information to gauge its progress, SF may be limited in building relationships and growing customer satisfaction and loyalty.
- While SF conducts an annual review of its satisfaction determination methodologies and CTQ Determination Process, it is not clear that this review addresses the need to keep its various relationship-building approaches, customer access mechanisms, and satisfaction determination approaches current with business needs and directions. A systematic process for keeping these approaches and mechanisms current may be of particular importance considering the demographic and seasonal changes in SF's service area among groups of temporarily food-insecure persons.



## **Category 4 Measurement, Analysis, and Knowledge Management**

### **4.1 Measurement, Analysis, and Improvement of Organizational Performance**

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### **STRENGTHS**

- SF uses its SPP to select, collect, align, and integrate data and information to track daily operations and overall organizational performance, including progress relative to strategic objectives and action plans. For example, the SPP is used to select organizational performance measures during biennial review cycles. Key indicators are integrated using the FOODS/Balanced Plate Scorecard, which is aligned with SF’s mission and is linked to the key success factors (Figure 4.1-1) and strategic objectives and action plans (Figure 2.2-2).
- SF uses its SPP to keep its performance measurement system current with business needs and directions. For example, the Balanced Plate Scorecard (Figure 4.1-1) has matured over successive improvement cycles that have addressed several areas, including the need for an Environmental Scan in the “off years” of the SPP, the implementation of annual Balanced Plate Scorecard reviews by the Executive Director and Finance/Audit Committee, and the need to keep comparative data sources current with changing needs. These cycles of improvement are aimed at keeping approaches responsive to changing data requirements and evolving business needs.
- SF uses the Performance Review System (Figure 4.1-2) to review organizational performance and capabilities. The system outlines daily, monthly, quarterly and annual meetings to review performance and capabilities. Comparative, trend, and pareto analyses are performed on the data provided through the Balanced Plate Scorecard (Figure 4.1-1). The Board of Directors, senior leaders, board committees, and employees use the Monthly and Annual Harvest, SWOT Analysis and Environmental Scan, and Board of Directors’ Review to evaluate key indicators and assess performance relative to operational and strategic goals.

#### **OPPORTUNITIES FOR IMPROVEMENT**

- While SF states that during Step 9 of the SPP it selects comparative data relevant to the local, regional, and national food banking industries, it is not clear how SF selects and ensures the effective use of key comparative data to support operational and strategic decision making and innovation. For example, comparative data are selected during the SPP to track performance against goals; however, it is not apparent how the comparative data used in reviews address all organizational key success factors, such as the optimization of human, financial, food, and other resources and organizational learning,

collaboration, and innovation. Without an effective, systematic approach, SF may not fully understand its performance relative to other providers or effectively use comparative data when making decisions that affect performance in these key areas.

- It is not evident how SF ensures that its performance measurement system is sensitive to rapid or unexpected organizational or external changes. For example, SF uses an annual process to review performance measures; however, it is not clear how this approach enables timely identification and response to rapid or unexpected changes occurring between reviews. The absence of a systematic approach in this area may make it difficult for SF to accurately assess its data requirements, as well as its current performance, and make adjustments as needed.
- **It is not clear how SF translates organizational performance review findings into priorities for continuous and breakthrough improvement and into opportunities for innovation. For example, senior leaders use walk-arounds to identify and set priorities for improvement; however, it is not clear how this approach is used with analyses from performance reviews (Figure 4.1-2). Further, it is not clear how priorities and opportunities are deployed to suppliers, partners, and collaborators, when appropriate. Without a systematic approach, SF may find it difficult to focus precious resources on stakeholder requirements and key processes to achieve organizational goals.**
- It is not apparent how SF incorporates the results of organizational performance reviews into the systematic evaluation and improvement of key processes. While SF states that it uses the PDCA Process (Figure 6.1-3) to accomplish this task, it is not clear how the incorporation takes place or how the information is used in the PDCA Process to influence the improvement of core processes.

## 4.2 Management of Information, Information Technology, and Knowledge

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- SF makes data and information available through five software systems (Figure 4.2-1): Donation Tracker, Rapid Inventory and Control Enterprise (RICE), Expense Tracker, FoodAnswers, and Training and Volunteer Tracker. Access to information is provided on an as-needed basis to employees, volunteers, suppliers, partners, collaborators, and member agencies. Protection of sensitive information is facilitated by limiting access to it (e.g., access to member agency information is given only to employees who have been trained regarding privacy laws). Maturational cycles of improvement include the implementation of FoodAnswers in 2003-2004 and RICE in 2005.
- SF keeps its information availability mechanisms current with business needs and directions and technological changes through the SWOT Analysis during the SPP. The results are deployed using annual action plans.
- Industry-specific software and validation processes are used to ensure that SF’s electronic data, information, and knowledge are accurate, have integrity and reliability, are timely, and are secure and confidential. Figure 4.2-2 outlines how SF ensures the quality of electronic data and information. Validation processes include, but are not limited to, training, limited data entry fields, audits, drop-down menus, field validation, bar codes, beta testing, policies and procedures, an off-site system backup, 24/7 Web access, passwords, and limited administrator rights. SF accomplishes much of this work through a pro bono partnership with a local technology firm.
- Workforce knowledge is shared with employees, member agencies, and food donors through a variety of processes, including orientation for employees and volunteers, e-mails, an organizational newsletter, training and materials, routine supply chain interactions, industry-specific software, job rotations, visual process descriptions, and daily walk-arounds. Senior leaders facilitate the identification and sharing of best practices using daily walk-arounds, FoodAnswers, Monthly Harvest Reviews, and participation in FBA, IFBA, and FBLC activities.

### OPPORTUNITIES FOR IMPROVEMENT

- **It is not apparent how SF ensures that its hardware and software are reliable and secure. For example, SF relies on a few core volunteers and pro bono services from a local IT provider to maintain hardware and software; however, the processes to ensure that these key information systems are maintained to achieve reliability and security are not evident.**

- **A systematic process is not apparent to ensure the functionality of critical information systems in the event of an emergency. Without an effective, systematic approach, problems in this area may limit SF in meeting its community requirement of responsiveness in time of need.**
- While SF has established methods to validate electronic data (Figure 4.2-2), it is not clear how the accuracy, integrity and reliability, timeliness, and security and confidentiality of nonelectronic data, information, and knowledge are addressed in these or other processes. The absence of a comprehensive, systematic approach in this area may hamper SF's ability to ensure that decisions are based on reliable information in its efforts to respond to member agency needs.
- A systematic process is not described for managing organizational knowledge to accomplish the assembly and transfer of relevant knowledge for use in the SPP. For example, SF has established several mechanisms, such as daily walk-arounds and Monthly Harvest reviews, to collect and share best practices; however, it is not clear how these or other methods are employed to transfer and use the best practices or other relevant knowledge in the SPP. Without an effective, systematic approach, SF may have difficulty developing innovative solutions that add value for customers and the organization.

## Category 5 Workforce Focus

### 5.1 Workforce Engagement

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### STRENGTHS

- SF uses the SPP to determine key factors that affect workforce engagement, satisfaction, and well-being. As part of the 2004 SPP, senior leaders developed an initial set of key factors affecting employee and volunteer engagement. These factors continue to be identified through surveys, qualitative data gathered through walk-arounds, annual performance reviews of employees, quarterly informal briefings with employee and volunteer teams (V-teams), and event- and project-based orientation and debriefing. Validation of these factors has been incorporated into the SPP, using the employee and volunteer survey, which can be segmented by role and length of service.
- The Leadership System Model fosters an organizational culture conducive to high performance and engagement. For example, employee/volunteer teams throughout the organization, including the V-teams, cross-functional teams, and Process Improvement Teams (PITs), motivate workers to take initiative and allow teams to benefit from the diverse ideas of all members. This team-based culture serves as the basis for communication and information collection through the frequent information exchanges that occur during the shift changes and walk-arounds, and it forms the basis for team decision making, identification of training needs and improvement opportunities, and senior leader and SPP decision making.
- SF’s Job Rotation Program and cross-training initiatives allow it to meet its identified strategic goal of increasing capacity, to facilitate the transfer of knowledge across the workforce, and to increase flexibility in staffing. This approach helps address the strategic challenge of optimizing human resources. It also reduces the learning curve for new employees and volunteers, which may be an important issue in an organization of this size.
- SF provides career development and progression opportunities through development plans for each employee, training opportunities, a mentoring program for volunteer development, and inclusion of employees and volunteers in the Leadership System Model activities. Successors are designated and prepared for each senior leadership position. The Training and Volunteer Tracker captures special skills and interests, and information about training needs is collected through team exchanges, quarterly briefings, information boards, and other mechanisms. The effectiveness of the education delivered is evaluated through pre- and post-training surveys and performance metrics, such as satisfaction with

training (Figure 7.4-3) and the percentage of cross-trained employees and volunteers (Figure 7.4-7).

## OPPORTUNITIES FOR IMPROVEMENT

- SF recognizes that many volunteers and employees are intrinsically motivated to contribute to its mission; however, it is unclear how SF's workforce performance management system considers compensation, reward, recognition, and incentive practices for its employees and many volunteers. The lack of an effective workforce performance management system may impede SF's efforts to address its strategic challenges of optimizing human resources and recruiting volunteers in competition with other nonprofit organizations.
- **While an approach to senior leadership succession planning is in place, it is not evident how SF's development and learning system for leaders addresses the development of personal leadership attributes, the development of organizational knowledge, ethical business practices, core competencies, strategic challenges, accomplishment of action plans, or improvement and innovation.**
- It is not clear how SF relates assessment findings to key business results to identify opportunities to improve workforce engagement and business results. For example, while the Executive Director and the Volunteer and Outreach Manager call volunteers and discuss workforce issues with leaders, it is not clear how they systematically aggregate and assess the multitude of information collected through surveys, shift reports, quarterly debriefings, and walk-arounds to drive innovation and improvement. Also, systematic approaches are not evident to determine workforce satisfaction or to transfer information from departing volunteers. These gaps may be important in light of the strategic challenge of optimizing human resources.

## 5.2 Workforce Environment

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- SF uses various processes to assess its current workforce capability and capacity needs, including skills, competencies, and staffing levels. For example, these issues are addressed during the biennial SPP, which includes human resource planning activities and uses data sources such as surveys, shift-to-shift communications, quarterly reviews, Balanced Plate Scorecard results, surveys of member agencies, and information from the FBLC and FBA. With the help of student interns, SF created process maps for critical skills and task descriptions for all jobs in 2004, and it updates task descriptions annually in alignment with regulatory requirements (Figure 5.2-1).
- SF uses a variety of recruitment approaches (Figure 5.2-2), with community outreach and word-of-mouth being the most powerful volunteer recruitment platforms. Program/Operations Committee members also have used focus groups to improve volunteer recruitment in the growing Hmong and Hispanic communities.
- Various teams are used to manage and organize the workforce, capitalize on core competencies, reinforce a customer focus, address strategic challenges and action plans, and achieve the agility to address changing business needs. On V-teams, for example, the skills and abilities of individual employees and volunteers are matched to the work that needs to be accomplished. All employees and volunteers take part in cross-training and job rotation to provide job variety and new learning and to encourage improvements. Cross-functional, diverse teams help prepare employees, volunteers, and the organization for changing capability and capacity needs.

### OPPORTUNITIES FOR IMPROVEMENT

- Assessment of workforce capability and capacity occurs within the SPP as human resources are considered. However, this assessment deals primarily with current strategies and needs of the organization, and there is no evidence of a systematic approach to assess or plan for future and changing capacity and capability needs. This may be important to SF in order to ensure its ability to meet the requirements of its longer-term strategic directions, such as increasing employee and volunteer retention and volunteer hours.
- While SF has developed a variety of recruitment mechanisms (Figure 5.2-2), most of them appear to focus on volunteer recruitment; it is not clear whether these or other mechanisms target potential employees. In addition, while focus groups help recruit volunteers from the Hmong and Hispanic communities, it is not clear how other diversity

factors are addressed (e.g., diversity in volunteers' ages). Further, a systematic approach to retain SF's employees and volunteers is not evident. The lack of a systematic process in these areas may limit SF's ability to recruit volunteers from a broad range of age segments and consistently optimize human resources, two of its five strategic challenges.

- No performance measures are provided for workplace security, even though SF notes a security concern related to court-ordered placements. In addition, no improvement goals for workplace health and safety are provided. Further, other than segmented measures for transportation and warehouse accidents and injuries, there are no segmented or different measures for the safety and health requirements of differing groups of employees and volunteers. Without a fact-based, systematic approach to organizational health, safety, and security, SF may be challenged in addressing its workforce's key requirements (Figure P.1-2a).
- While SF provides health and dental insurance, as well flexible work schedules, for its employees, it is not apparent what policies and services, if any, support the organization's volunteers, including its core volunteer team. This may hamper SF's ability to build an effective and supportive workforce environment and to support its key success factor of dedicated and experienced employees and volunteers.



## Category 6 Process Management

### 6.1 Work Systems Design

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### STRENGTHS

- During the 1997 strategic planning retreat, senior leaders identified four core competencies based on member agency needs. These core competencies were determined to be the four hunger-reducing processes of Collection Management, Sort and Package Management, Inventory Management, and Distribution Management (Figure 6.1-2). They relate to SF’s mission by securing, producing, and delivering nutritional and balanced food products and services. In each subsequent SPP cycle, SF reevaluates its core competencies to ensure that they still meet customer and stakeholder needs.
- SF’s key work processes include its hunger-reducing and support processes (Figures 6.1-1, 6.1-2, and 6.2-1). These relate to its core competencies by enabling SF to effectively and efficiently supply and distribute food products to member agencies, which, in turn, distribute them to the food-insecure. Key process requirements, or CTQ indicators, are related to the value each brings to member agencies, profitability, organizational success, and sustainability.
- SF uses its CTQ Determination Process to determine and validate key work process requirements (Figures 6.1-2 and 6.2-1), incorporating input from customers, suppliers, and partners. The Program/Operations Committee and the Program Director/CFO use input gathered in the SPP, the CTQ Determination Process, and the PDCA Process to design work processes to meet key requirements. Recent refinements, including the current development of a scorecard and the mapping of key processes and subprocesses, are evident for these approaches.
- SF participates in mock regional disaster drills and quarterly mock emergency events to help ensure work system and workplace preparedness for emergencies and disasters. For example, employee and volunteer drills measure and ensure readiness for power outages, product spills, and warehouse, kitchen, and transportation accidents. Key lessons and improvements are documented and shared with employees and volunteers through quarterly debriefings, e-mails, newsletters, and board postings. Drills began in 2001, and SF serves as a command center, designated by the Federal Emergency Management Agency, and as a regional distribution center. Improvements include reduced accidents, increased safety awareness, and increased regional FBLC cooperation.

## OPPORTUNITIES FOR IMPROVEMENT

- While senior leaders and the Board of Directors identified key hunger-reducing processes as SF's core competencies during a 1997 strategic planning retreat, it is not clear what systematic approach was used at that time or whether a systematic method currently is used to assess and revalidate the core competencies. The lack of a systematic approach to determine core competencies that provide an advantage in the organization's service environment may make it difficult for SF to consistently achieve the outcomes of its mission.
- While SF states that it uses the PDCA Process (Figure 6.1-3) to design and innovate its work systems, it is not clear how the steps within this improvement cycle are used to design how work will be accomplished (work systems), including establishing the roles of the workforce, suppliers, and partners in producing and delivering products and services and coordinating internal work processes and external resources. The lack of a systematic, comprehensive design process may limit SF's ability to ensure that it consistently provides the best foods, at the right time, to the right place.
- It is not apparent how SF's disaster and emergency preparedness system fully considers prevention, management, continuity of operations, and recovery. For instance, while SF's warehouse is situated in an area protected from wind and flood damage from the prevalent tornadoes in the area, in the event that a tornado or other disaster prevented a significant numbers of volunteers, or all lead volunteers, from coming to work, a process is not evident for ensuring the continuity of operations of its volunteer-dependent processes. Without a well-deployed approach that considers all aspects of disaster and emergency preparedness, SF may find it difficult to accomplish its mission and address a key strategic challenge to ensure that food reaches those most in need when they need it most.

## 6.2 Work Process Management and Improvement

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- SF uses the PDCA Process to help ensure its work processes meet the design requirements identified in its CTQ indicators. In addition, SF has identified both outcome and in-process measures to control and improve its hunger-reducing and support processes (Figures 6.1-2 and 6.2-1). In-process measures are tracked daily, weekly, and monthly and updated on the Daily Harvest or Monthly Harvest Dashboards and/or the Balanced Plate Scorecard. All measures are evaluated regularly by senior leaders.
- SF uses the PDCA Process (Step 6) to minimize overall costs and eliminate rework. Employees, volunteers, senior leaders, and PITs use the PDCA Process to review, evaluate, and measure processes. Improvements include streamlined and/or improved processes, such as new sanitation and food handling processes, as well as improved fuel efficiency in the delivery fleet. In addition, process improvements through training, posting processes, sharing metrics, and implementing the RICE system have contributed to a 25% reduction in inspection and audit times.
- **SF uses Step 7 of its PDCA Process and a semiannual review to improve its work processes to achieve better performance. The planning portion of the PDCA Process was enhanced through extensive senior leader and stakeholder participation to design and deploy each key work process. A senior leader involves employees, volunteers, and partners in an informal, semiannual process review that reflects on performance and identifies key learnings and improvement opportunities. For example, in 2006, SF conducted a redesign of each key work process to ensure appropriate CTQ indicators.**

### OPPORTUNITIES FOR IMPROVEMENT

- While a focus group of partners, donors/suppliers, core volunteers, and member agencies provides annual input on process requirements through the CTQ Determination Process, a process is not evident for using the input of these groups in the day-to-day management of the key processes, as appropriate.
- While the CTQ Determination Process is used to determine process requirements and the PDCA Process is used to improve processes, it is not clear how SF’s day-to-day operation of work processes ensures that they meet key process requirements.
- While SF documents lessons learned and process improvements to include in process diagrams, it is not clear how these improvements and lessons are shared with other organizational processes and work units to drive organizational learning and innovation.

Without a systematic, well-deployed approach, SF's efforts to achieve its vision and optimize the use of resources may be restricted.

## Category 7 Results

### 7.1 Product and Service Outcomes

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### STRENGTHS

- **Product and service results for food availability and distribution (Figures 7.1-1 through 7.1-4) show positive trends from 2003 to 2006. SF’s 2006 fill rate of 95% (Figure 7.1-4) was the best in the IFBA (state) and the FBLC (region) for this Balanced Plate Scorecard and key process measure (Figures 4.1-1 and 6.1-2). SF distributed 7.5 million pounds of food in 2006 (Figure 7.1-1), which makes it the largest food bank in the IFBA, and it is nearing the 2007 projected best in the IFBA for this measure. In addition, the amount of food distributed from 2003 to 2006 increased in both rural and urban counties (Figure 7.1-2). These favorable results demonstrate that SF is progressing toward its mission to feed the hungry residents of its communities.**
- Results for several key customer requirements demonstrate positive trends for the past three years. Nutritional value and overall food variety (Figure 7.1-5) improved from a rating of 6 (on a 10-point scale) in 2005 to approximately 7 in 2006, approaching the state-best level of 8. From 2003 to 2006, SF’s On-Time Food Delivery to Member Agencies (Figure 7.1-6) increased from approximately 45% to more than 90%, while the Number of Emergency Food Boxes Distributed Per Week (Figure 7.1-7) increased from 180 to 729; these results are the best for the IFBA in 2006 and are approaching the FBA best. These positive results are linked to the customer requirements of quality and variety of food, timeliness, and continuity of service, as well as to the key success factor of food availability and quality.
- Demand for service, as represented by the number of unduplicated food-insecure client contacts (Figure 7.1-8), has grown by about 75% between 2003 and 2006, with increases in all age-group segments of the population. This increase in demand has been met with a corresponding rise in the Pounds of Food Distributed per Person (Figure 7.1-9), which increased from approximately 90 pounds per person in 2003 to 100 pounds per person in 2006. SF’s results on this strategic action plan and key process metric (Figures 2.2-2 and 6.1-2) demonstrate improved productivity and progress toward SF’s vision to make Iowa’s heartland hunger-free.

## OPPORTUNITIES FOR IMPROVEMENT

- While in some cases SF's product and service outcomes exceed those of regional and state comparisons, its performance is below that of the national comparisons (the FBA and the FBA best). Additionally, comparisons are not presented for more than the current year, which may make it difficult for SF to evaluate how it is performing over time in relation to other food banks.
- While results for a few product and service measures include some segmented data (e.g., Figures 7.1-2 and 7.1-3), most results lack segmentation, which may make it difficult for SF to identify and understand changing or emerging market segments, changing requirements of specific customer groups, or the potential obsolescence of services in certain areas.
- Although SF provides results for some measures relevant to its key product and service features, such as nutritional value, overall food variety, and on-time food delivery, results related to the customer requirements of consistency and dependability are not provided. Without data on the performance of its products and services in these areas, SF may be limited in its ability to assess whether it is meeting the requirements of its key customers (i.e., its member agencies) and to implement any needed improvements.

## 7.2 Customer-Focused Outcomes

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- Results demonstrate generally improving performance levels for member agencies’ satisfaction with SF’s timeliness/dependability, communications, hours of operation, and food selections and nutritional quality, as well as their overall satisfaction and the communities’ satisfaction that SF is “meeting growing needs” (Figures 7.2-1 through 7.2-5 and Figure 7.2-11). Workforce satisfaction with communications at the Assist Each Other member agency, at 90%, was the IFBA (state) best in 2006; satisfaction gaps among the three agencies presented are narrowing, and in 2006 variability in overall satisfaction was eliminated when all three agency levels reached a three-year high of 90%. Similarly, the gap in satisfaction between new donors and major donors has been closing steadily as the satisfaction of all groups rises toward 2006 IFBA and FBLC (regional) best levels (Figure 7.2-9).
- Results for the Overall Number and Type of Complaints Received (Figure 7.2-6), an indicator of customer dissatisfaction, show that in 2006 SF reversed an unfavorable trend for the number of complaints associated with the availability of food items stocked; this reversal may demonstrate the favorable impact of the RICE inventory tracker, which was implemented in 2005. Complaint data are segmented by several key customer requirements, and results vary from 2002 to 2006, with several trending favorably. Despite a doubling in demand for services in the past three years, the number of complaints overall declined to a five-year low in 2006.
- Results for the likelihood to refer others to SF (Figure 7.2-7) demonstrate steady, favorable increases from 2003 to 2006 for each of the three agencies shown, while the variability of these results among the agencies is diminishing. Results related to providing information to the food-insecure (Figure 7.2-8) also show steady improvement from 2003 to 2006 for four of the five communication mechanisms shown, with the effectiveness of flyers and announcements made at churches increasing from approximately 83% to 90%.

### OPPORTUNITIES FOR IMPROVEMENT

- While results for several customer requirements in Overall Number and Type of Complaints Received (Figure 7.2-6) improved from 2003 to 2006, results for hours of access show variable levels and results for location show a small but steady rise since 2003. Problems in access and location may limit food availability for customers, a key success factor important to SF’s challenge of ensuring that food reaches those most in need when they need it most.

- Comparisons are not provided for many customer-focused results (Figures 7.2-6, 7.2-7, 7.2-8, 7.2-10, and 7.2-11). Additionally, because only the 2006 level is shown for best-in-class results (Figures 7.2-1 through 7.2-5 and Figure 7.2-9), it is not possible for SF to compare its trends with those of top performers in order to address its key success factor of organizational learning and innovation (Figure 4.1-1).
- Customer-focused performance results are shown for only 3 of 58 member agencies, and results are not segmented by groups important to the organization, such as its customer/market/stakeholder groups or the counties and demographics related to its end-users—the food-insecure. Additionally, while SF’s Segmentation Process defines member agency segments according to the size of agencies, frequency of service, and urban or rural location and it defines community segments according to various service organizations and leaders, results for these segments are not provided.



### 7.3 Financial and Market Outcomes

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

#### STRENGTHS

- Results for Organizational Capacity (Figure 7.3-1), an indicator of financial performance, show steady, favorable rating increases from 2002 to 2006. This broad indicator consists of primary revenue growth, program expenses growth, and working capital ratio. Results for Organizational Efficiency (Figure 7.3-2), which includes program, administrative, and fundraising expenses, as well as fundraising efficiency, demonstrate steady, favorable rating increases from 2002 to 2006 (indicating the success of the Corporate Contributor Program). In addition, these results attained the Assistance Now Finder “Good” range from 2003 to 2006. Combined overall results (Figure 7.3-3) reached the “Good” range in 2005.
- Financial performance results for direct Program Expenses (Figure 7.3-4) as a percentage of budget increased favorably by about 15 percentage points from 2002 to 2006, approaching the Assistance Now Finder best-in-class level of 90%. SF’s Administrative Expenses (Figure 7.3-5) as a percentage of budget have remained just under 10% from 2002 to 2006, meeting or near the “Exceptional” maximum of approximately 9%. During this time frame, Fundraising Expenses (Figure 7.3-6) per dollar improved within the “Exceptional” range from approximately \$0.04 to \$0.03, and Fundraising Efficiency (As a Percentage of Operating Expenses) (Figure 7.3-7) improved from 15% in 2003 to 3% in 2006, entering the “Exceptional” range in 2004.
- Results for SF’s income (Figure 7.3-9) demonstrate a favorable, steady increase from just over \$5 million in 2003 to more than \$6 million in 2006. In addition, results for Performance to Budget (Figure 7.6-8) indicate consistent performance of better than 99% from 2004 to 2006. The 2006 level of 99.85% compares favorably to the federal government average of 98.62%. These positive financial performance results may contribute to the management of SF’s strategic challenge of obtaining and maintaining adequate financial resources.

#### OPPORTUNITIES FOR IMPROVEMENT

- While ratings for Organizational Capacity (Figure 7.3-1) have improved since 2002, as of 2006 they remain below the minimum for a rating of “Good” by the Assistance Now Finder. Increased performance on this measure might assist SF in maintaining adequate financial resources so that it can respond to member agency needs and more effectively address the rapidly changing needs of the food-insecure.

- Levels and trends are not provided for several key indicators of financial performance. For example, the composite measure for organizational capacity shows improvement over time; however, results for two of the measures that make up this composite—primary revenue growth and working capital—are not shown over time.
- Results are not provided for several measures that may provide insight into organizational sustainability, such as current liabilities (included in the Balanced Plate Scorecard in Figure 4.1-1), reserve funds (if applicable), and cost savings. The absence of results for these measures may limit SF’s ability to assess its financial performance.
- **Limited comparisons are provided for measures of financial and market performance. For example, no comparative data are provided for SF’s income results (Figure 7.3-9). Results related to organizational capacity and efficiency (Figures 7.3-1 through 7.3-7) include comparisons only to the national Assistance Now Finder, and results for Overall Peer Comparison (Figure 7.3-8) include comparisons to only four food banks in the region. A more comprehensive use of comparisons may assist SF in better judging its financial and market position relative to other nonprofit organizations providing the same or similar products and services.**

## 7.4 Workforce-Focused Outcomes

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- Results for several indicators of workforce engagement and capacity show favorable levels and trends, supporting the strategic goal to increase volunteer retention by 5% each year (Figure 2.2-2). For example, the number of former clients who became volunteers increased from 3 in 2004 to 15 in 2006 (Figure 7.4-5), the number of court-ordered placements who were retained as volunteers doubled from 2004 to 2006 (Figure 7.4-9), the number of volunteer groups has increased each year from 2003 to 2006 (Figures 7.4-12 and 7.4-13), and core volunteers contributed more hours than the regional average each year from 2003 to 2006 (Figure 7.4-11). In addition, volunteer referrals of family and friends increased from 4 in 2003 to 15 in 2006 (Figure 7.4-8).
- Workforce and leader development results demonstrate favorable performance. For example, from 2003 to 2006, the annual number of training hours for employees increased from approximately 100 hours to about 350 hours and for volunteers from approximately 900 hours to 4,500 hours (Figure 7.4-1), meeting the strategic goal to increase volunteers’ hours by 10% each year (Figure 2.2-2). Additionally, in 2006, 80% of employees and more than 60% of volunteers were cross-trained, and SF’s workforce and leader development was ranked the best in the regional FBLC (Figure 7.4-7). Further, employee and volunteer satisfaction with training increased from approximately 5 in 2003 to about 9 in 2006 (on a 10-point scale), and the 2006 rating approaches the regional benchmark (Figure 7.4-3).
- Workplace health and safety results demonstrate favorable performance trends. Sanitation ratings improved from 80% in 2003 to approximately 92% in 2006, and the food handling and disposal compliance rating improved from 80% in 2004 to approximately 93% in 2006, with both measures meeting the 2006 regional benchmark and approaching the national benchmark (Figure 7.4-14). In addition, employee and volunteer injuries have decreased from approximately 26 in 2003 to 5 in 2006, approaching the regional best performance for that year (Figure 7.4-4). These results indicate the effectiveness of training and education in these areas.

### OPPORTUNITIES FOR IMPROVEMENT

- No comparative data are provided for many of the reported workplace-focused outcomes, including safety measures of workplace incidents (Figures 7.4-16 and 7.4-17), absenteeism (Figure 7.4-18), volunteer recruitment and retention (Figures 7.4-6, 7.4-9, 7.4-12, and 7.4-13), annual total training hours (Figure 7.4-1), and volunteer segmentation (Figure 7.4-10). In addition, the comparisons provided are for one year only

(2006). Without relevant comparisons tracked over time, SF may have difficulty effectively assessing its progress in addressing its strategic challenges of optimizing human resources and recruiting volunteers from a broad range of age segments.

- **Results are not reported for several key employee and volunteer requirements and expectations, including a focus on SF's MVV, respectful and nondiscriminatory communications and actions, a spirit of collaboration and teamwork, and supervision/mentoring/guidance from SF's senior leaders or assigned employee/volunteer leaders (a requirement of students, fellows, and court-ordered community service placements). Without this information, SF may not be able to determine its progress in meeting the key requirements and expectations of its workforce.**
- Limited or no results are provided for several measures related to the annual employee and volunteer survey. For example, while SF notes that it received a rating of 9 in 2006 for overall employee satisfaction (Figure 2.2-2), no trended data are provided for this measure. In addition, results are not presented for issues included in the survey amendment for employees, such as pay equity and support for career development. These gaps may make it difficult for SF to evaluate the effectiveness of its workforce services and benefits; to address its key success factor of dedicated, experienced employees and volunteers; or to meet its strategic challenge to optimize human resources.
- Most of the workforce-focused results that are provided include limited or no data segmented to address the diversity of SF's workforce or its various workforce groups. For example, no segmentation is provided for employee and volunteer injuries (Figure 7.4-4), for satisfaction with training (Figure 7.4-3), or for absenteeism (Figure 7.4-18). In addition, no results are presented for the engagement or satisfaction of workforce segments such as employees, university students, and government and foundation fellows—or for various age segments. This lack of segmented data may limit SF's ability to assess its progress in addressing its strategic challenges of optimizing human resources and recruiting volunteers from a broad range of age segments and to prioritize improvement efforts.

## 7.5 Process Effectiveness Outcomes

Your score in this Criteria Item for the consensus stage is in the 50–65 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- Several results for the operational performance of key work systems show good to excellent performance levels and trends and favorable comparisons. From 2003 to 2006, the Inventory and Resource Effectiveness Index improved from 4 to approximately 7.5 out of 10 (Figure 7.5-13), while the percentage of suppliers’ products utilized increased from approximately 78% to 93% and the percentage of suppliers reengaged improved significantly from approximately 54% to 96%, with the latter two levels approaching those of the 2006 regional FBLC and national FBA best (Figure 7.5-14). In addition, the satisfaction rating from key suppliers/donors of services and food (Figures 7.5-15 and 7.5-16) shows improvement from 2003 to 2006, with the 2005 and 2006 IFBA-best rating from suppliers/donors of services. Workplace preparedness results indicate significant improvement for Mock Disaster Drill Effectiveness (Figure 7.5-17) from 80% in 2003 to approximately 95% in 2006—the regional FBLC-best level.
- From 2004 to 2006, the percentage of food products that required repackaging improved from approximately 47% to 23%, while the percentage of product waste during repackaging significantly improved from approximately 25% to 7% (Figure 7.5-5). Likewise, the Average Percentage of Packaging Waste (Figure 7.5-6) improved from approximately 17% in 2004 to about 7% in 2006, approaching the FBLC-best level. The percentage of food labeling errors (Figure 7.5-7) improved significantly from approximately 35% in 2004 to 10% in 2006.
- Several results for the operational performance of key work processes show good to excellent performance levels and trends, as well as favorable comparisons. Results for the Average Pounds of Food Collected (Figure 7.5-1) improved from slightly over 4 million pounds in 2003 to about 8 million pounds in 2006, approaching the 2006 FBLC-best level. In addition, during this time period, the percentage of edible food collected from drives improved from approximately 70% to about 92%, the percentage from salvage improved from about 50% to 81%, and the percentage from drop-offs improved from approximately 77% to 82%, with levels approaching the 2006 FBLC- and FBA-best comparisons in all areas (Figure 7.5-2). Further, the nutritional value of the food collected (Figure 7.5-3) improved from approximately 3.75 in 2004 to about 4.5 (on a 10-point scale) in 2006, and the effectiveness rating to meet food demands (Figure 7.5-4) significantly improved from 40% in 2003 to about 90% in 2006, the FBLC-best level.
- From 2003 to 2006, the Number of Inventory Turns per Year (Figure 7.5-8) steadily improved from about 7 to 10, approaching the FBLC-best level of approximately 11, and the inventory for both perishable and nonperishable food (Figure 7.5-9) improved, with

the total increasing from about 30 days to nearly 100 days. SF's results for meeting seasonal demand (Figure 7.5-10) significantly improved from 20% in 2003 to 80% in 2006, the FBLC-best level. In addition, the percentage of food spoilage and waste improved from about 13% in 2003 to 5% in 2006, and inventory errors decreased from about 27% in 2004 to 15% in 2006 (Figure 7.5-11).

- From 2003 to 2006, the Fleet Maintenance Index (Figure 7.5-20) improved from about 7.5 to approximately 9.3 (out of 10), while the refrigeration accuracy index improved from 7 to approximately 9.2 and the ground maintenance index improved from 8 to 10 (Figure 7.5-21). In addition, from 2003 to 2006, Annual "Drive the Limit" Audit Results increased from 60% to 90% compliance, approaching the 99% state target (Figure 7.5-22) (Figure 7.5-22), and fleet miles per gallon (MPG) improved from an average of 10 MPG to about 17 MPG, approaching the 20 MPG state target (Figure 7.5-23).

#### OPPORTUNITIES FOR IMPROVEMENT

- Results are not provided for several key indicators of process effectiveness important to SF (Figures 6.1-2 and 6.2-1), such as the percentage of repackaging time, the food storage compliance index, accounts receivable days outstanding, the warehouse equipment maintenance expense ratio, and process improvement team results. The lack of results for these indicators of process effectiveness may inhibit SF's ability to assess its process management and make improvements as needed.
- Comparisons are missing for some key indicators of process effectiveness related to the Strategic Plan and Balanced Plate Scorecard, such as the Inventory and Resource Effectiveness Index (Figure 7.5-13), RICE Percentage of Uptime and User Interface Accuracy (Figure 7.5-19), Fleet Maintenance Index (Figure 7.5-20), and Key Refrigeration and Grounds Maintenance Metrics (Figure 7.5-21). Without comparative data, SF may find it difficult to assess its relative performance and set achievable goals as it strives to provide the best foods, at the right time, to the right place.
- Although supplier/donor satisfaction ratings (Figures 7.5-15 and 7.5-16) are available by segments on site and results for inventory days on hand (Figure 7.5-9) are segmented by perishable and nonperishable food, no other segmentation is used to address key product and service types and market segments. For example, the effectiveness of meeting food demands (Figure 7.5-4) is not segmented geographically to ensure that the two counties with above-state-average food insecurity are equitably served, and data for satisfaction (Figure 7.5-12) and other member agency metrics are not segmented by the 58 member agency characteristics or locations.

## 7.6 Leadership Outcomes

Your score in this Criteria Item for the consensus stage is in the 30–45 percentage range. (Please refer to Figure 5, “Scoring Guidelines.”)

### STRENGTHS

- Several key indicators of stakeholder trust show improving performance from 2004 to 2006. Scores from a survey of member agencies, corporate contributors, volunteers, donors, and suppliers on a variety of confidence and trust issues (Figure 7.3-10) show improvement in all but one issue (member agencies’ trust in managing grant dollars). In addition, results for donations and grants show increases that also may reflect stakeholder trust; the cumulative increases in the top 10% of donors’ funding (Figure 7.6-3) improved significantly from approximately 28% to 38% from 2004 to 2006, with relatively static annual increases. Annual grants (Figure 7.6-7) increased from three in 2004 to four in both 2005 and 2006, with a corresponding increase in the aggregate grant dollars from \$17,000 in 2004 to \$32,000 in 2006.
- Favorable fiscal accountability results include Performance to Budget (Figure 7.6-8), which has been sustained at a high level (above 99%) from 2004 to 2006. Results for SF’s Volunteer and External Audit Programs (Figures 7.6-11 and 7.6-12) show a decreased number of findings since 2002 (with no findings in the external audit program since that time) and decreasing discrepancies in both Volunteer and External Audits since 2004 and 2003, respectively. These favorable trends may reflect the rigor of the internal audit program, which is intended to address issues prior to external audits.
- Regulatory compliance ratings indicate improvement in food safety and employee and facility certifications, which are identified as regulatory issues in Figure P.1-3. Sanitation and Food Handling and Disposal Compliance Ratings (Figure 7.4-14) improved in 2005, nearing or reaching FBLC (regional) and FBA (national) best ratings in 2006. From 2003 to 2006, Safety Audit Compliance Ratings improved from 60% to better than 90%, employee and facility certifications increased from almost 75% to 90%, and the Record Compliance Index improved from about 55% to more than 90%. These measures are approaching the 2006 FBLC (regional) and FBA (national) best performance (Figure 7.4-15).
- Several organizational citizenship results demonstrate favorable performance. From 2003 to 2006, employee participation in the Community Ways of Connection efforts (Figure 7.6-13) increased from approximately 75% to 100%. Results for Recycled Paper and Pallets (Figure 7.6-14) show a favorable trend, with the amount of recycled paper growing from approximately 3,000 pounds in 2002 to about 11,000 pounds in 2006. In addition, SF’s support for FEED Iowa Partnership development proposals (Figure 7.6-15) has increased from one proposal in 2004 to four in 2006, which represents the IFBA (state) best performance.

## OPPORTUNITIES FOR IMPROVEMENT

- While results related to ethical conduct are shown for hotline calls (Figure 7.6-4) and the number of volunteers conducting ethics self-assessments (Figure 7.6-5), SF does not provide results for other indicators that would identify violations of ethical conduct, such as instances of ethical conduct breaches and responses, survey results on workforce perceptions of organizational ethics, and results of ethics reviews and audits. There is no indication of a similar assessment for board members or for ensuring and monitoring ethical behavior in all interactions with customers, partners, and other stakeholders. Without assessing organizational performance to high ethical standards, SF may find it difficult to build and keep stakeholder trust.
- Results for corporate contributors' donations (Figure 7.6-9) do not show a favorable trend from 2004 to 2006; donations declined by about \$10,000 from 2005 to 2006. In addition, both overhead and the related Assistance Now Finder rating show an unfavorable increase during this time period. Considering that SF notes a commitment to its contributors to demonstrate prudent fiscal accountability by reducing overhead costs, these unfavorable results may negatively impact SF's efforts to address its strategic challenge of maintaining adequate financial resources.
- While the current status of performance for regulatory compliance is shown in Figure 7.6-6, with six of nine indicators at their goal of zero, pass, or 100% adherence, these data represent the performance of only one year, which does not allow for an understanding of trends over time. In addition, relevant comparisons are not provided for most of the leadership and social responsibility results, and, when comparative data are provided (e.g., in Figure 7.6-15), the comparison is presented for only one year. The lack of relevant comparative data over time may make it difficult for SF to assess its progress in relation to comparable organizations.
- Leadership and social responsibility results are not segmented to allow analysis of performance by groups. For example, Performance to Budget (Figure 7.6-8) results are not shown by budget grouping, Recent Increases in Funding (Figure 7.6-3) are not presented by contributor type, and results for Volunteers Completing Ethics/Values Self-Assessments (Figure 7.6-5) are not segmented by volunteer type (e.g., core volunteer, event volunteer).



## **APPENDIX**

By submitting a Baldrige 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 key themes of the application 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 the receipt of the Award applications, the first step of the Award Process review cycle (shown in Figure 1) begins with the independent review, in which members of the Board of Examiners are assigned to each of the applications. Assignments are made according to the Examiners' areas of expertise and to avoid potential conflicts of interest. Each application is evaluated independently by Examiners who write observations relating to the scoring system described on page 51 of the Criteria for Performance Excellence (page 53 in the Health Care Criteria and page 55 in the Education Criteria).

## Award Process Review Cycle

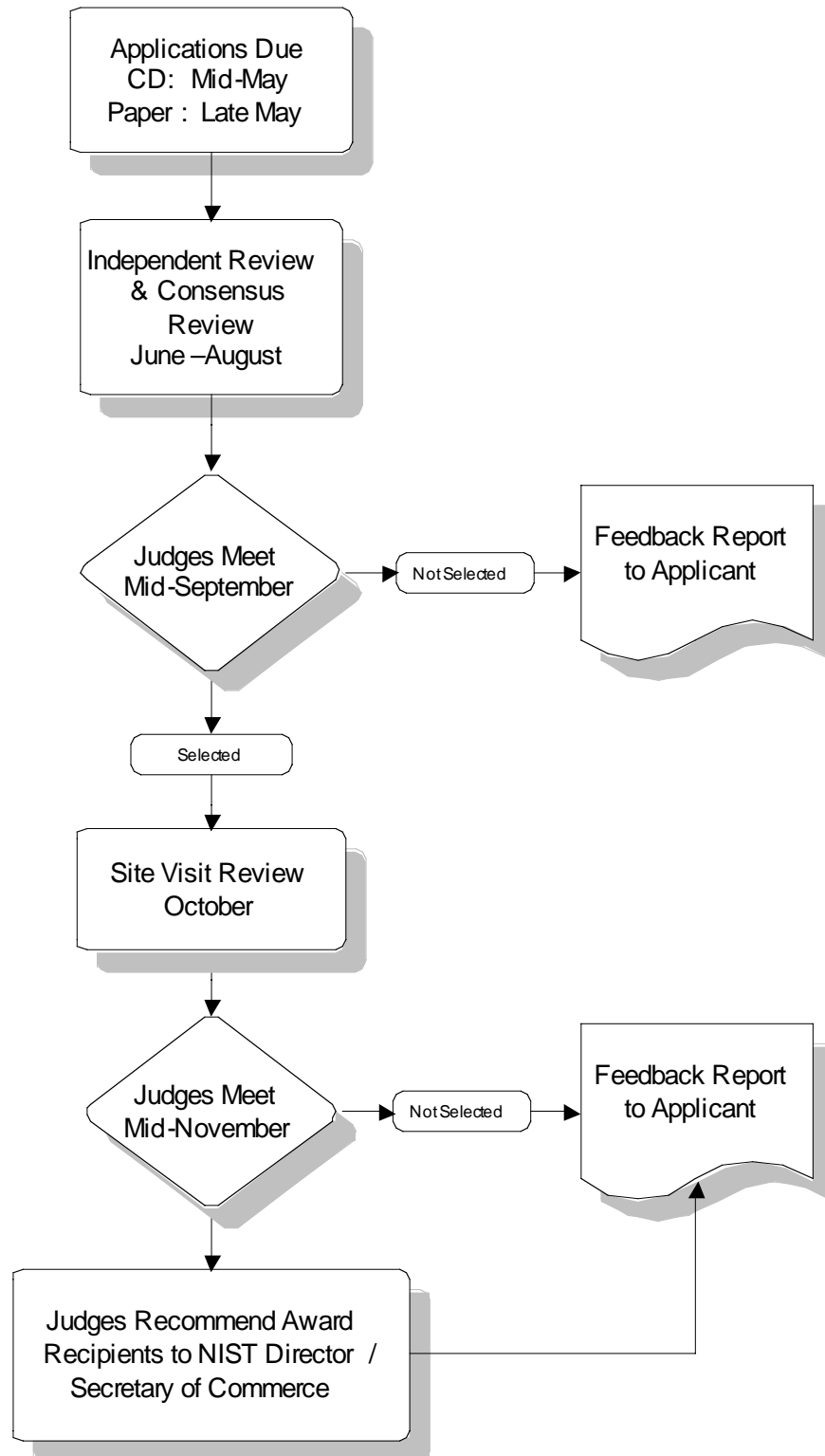


Figure 1—Award Process Review Cycle

## Consensus Review

Beginning in 2007, all applicants are benefiting from consensus review. A team of Examiners, led by a Senior Examiner, conducts a series of reviews, first managed virtually through a secure website, 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. The consensus review process is shown in Figure 2.

Step 1	Step 2	Step 3	Step 4
<p><b>Consensus Planning:</b></p> <ul style="list-style-type: none"> <li>• Clarify the timeline for the team to complete its work</li> <li>• Assign Category/Item discussion leaders</li> <li>• Discuss key business/organization factors</li> </ul>	<p><b>Virtual Consensus:</b></p> <ul style="list-style-type: none"> <li>• Review all independent review evaluations—draft consensus comments and propose scores</li> <li>• Post consensus review worksheets for the team to review</li> <li>• Address feedback, incorporate inputs, and propose a resolution of differences on each worksheet</li> <li>• Review updated comments and scores</li> </ul>	<p><b>Consensus Calls:</b></p> <ul style="list-style-type: none"> <li>• Discuss a limited number of issues related to specific comments or scores, and discuss all Key Themes</li> <li>• Achieve consensus on comments and scores</li> </ul>	<p><b>Post-Consensus Call Activities:</b></p> <ul style="list-style-type: none"> <li>• Revise comments and scores to reflect consensus decisions</li> <li>• Prepare final consensus scorebook</li> <li>• Prepare feedback report</li> </ul>

**Figure 2—Consensus Review Process**

## Site Visit Review

After the consensus review process, the Panel of Judges selects applicants to receive site visits based upon the scoring profiles. If an applicant is not selected for site visit review, one of the Examiners on the Consensus Team edits the final consensus report that 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. After the site visit is completed, the team of Examiners prepares a final site visit scorebook. The site visit review process is shown in Figure 3.

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

**Figure 3—Site Visit Review Process**

Application reports, consensus scorebooks, and site visit scorebooks for all applicants receiving site visits are forwarded to the Panel of Judges, which makes final recommendations on which applicants should receive an Award. The Judges discuss applications in each of the six Award categories separately, and then they vote to keep or eliminate each applicant. If more than three applicants remain in a particular Award category, the Judges rank order the applicants and eliminate those that rank lowest. This process is repeated until the top three applicants remain. 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 and the appropriateness of the applicant as a national role model. The process is repeated for each Award category; there may be as many as three recipients in each of the categories. The Judges’ review process is shown in Figure 4.

Step 1	Step 2	Step 3
<b>Panel of Judges’ Review:</b> <ul style="list-style-type: none"> <li>• Application reports</li> <li>• Consensus scorebooks</li> <li>• Site visit scorebooks</li> <li>• Feedback reports</li> </ul>	<b>Evaluation by Category:</b> <ul style="list-style-type: none"> <li>• Manufacturing</li> <li>• Service</li> <li>• Small Business</li> <li>• Education</li> <li>• Health Care</li> <li>• Nonprofit</li> </ul>	<b>Assessment of Top Organizations:</b> <ul style="list-style-type: none"> <li>• Overall strengths/opportunities for improvement</li> <li>• Appropriateness as national model of performance excellence</li> </ul>

**Figure 4—Judges’ Review Process**

Judges do not participate in discussions or vote on applications 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 recommendations of Award recipients, the Site Visit Team leader edits the final site visit scorebook that 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. The Scoring Guidelines shown in Figure 5 are based on (1) evidence that a performance excellence system is in place; (2) the maturity of its processes as demonstrated by Approach (A), Deployment (D), Learning (L), and Integration (I); and (3) the results it is achieving.

In the feedback report, the applicant receives a percentage range. The percentage range is based on the Scoring Guidelines, which describe the characteristics typically associated with specific percentage ranges.

An applicant's total score falls into one of eight scoring bands. Each band corresponds to a descriptor associated with that scoring range. Figure 6 provides scoring information on the percentage of applicants scoring in each band at Consensus Review. Scoring adjustments resulting from the site visit review are not reflected in the distribution.

<b>SCORE</b>	<b>PROCESS (For Use With Categories 1–6)</b>
<b>0% or 5%</b>	<ul style="list-style-type: none"> <li>▪ No systematic approach to Item requirements is evident; information is anecdotal. (A)</li> <li>▪ Little or no deployment of any systematic approach is evident. (D)</li> <li>▪ An improvement orientation is not evident; improvement is achieved through reacting to problems. (L)</li> <li>▪ No organizational alignment is evident; individual areas or work units operate independently. (I)</li> </ul>
<b>10%, 15%, 20%, or 25%</b>	<ul style="list-style-type: none"> <li>▪ The beginning of a systematic approach to the basic requirements of the Item is evident. (A)</li> <li>▪ The approach is in the early stages of deployment in most areas or work units, inhibiting progress in achieving the basic requirements of the Item. (D)</li> <li>▪ Early stages of a transition from reacting to problems to a general improvement orientation are evident. (L)</li> <li>▪ The approach is aligned with other areas or work units largely through joint problem solving. (I)</li> </ul>
<b>30%, 35%, 40%, or 45%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, responsive to the basic requirements of the Item, is evident. (A)</li> <li>▪ The approach is deployed, although some areas or work units are in early stages of deployment. (D)</li> <li>▪ The beginning of a systematic approach to evaluation and improvement of key processes is evident. (L)</li> <li>▪ The approach is in the early stages of alignment with your basic organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>
<b>50%, 55%, 60%, or 65%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, responsive to the overall requirements of the Item, is evident. (A)</li> <li>▪ The approach is well deployed, although deployment may vary in some areas or work units. (D)</li> <li>▪ A fact-based, systematic evaluation and improvement process and some organizational learning are in place for improving the efficiency and effectiveness of key processes. (L)</li> <li>▪ The approach is aligned with your organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>
<b>70%, 75%, 80%, or 85%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, responsive to the multiple requirements of the Item, is evident. (A)</li> <li>▪ The approach is well deployed, with no significant gaps. (D)</li> <li>▪ Fact-based, systematic evaluation and improvement and organizational learning are key management tools; there is clear evidence of refinement and innovation as a result of organizational-level analysis and sharing. (L)</li> <li>▪ The approach is integrated with your organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>
<b>90%, 95%, or 100%</b>	<ul style="list-style-type: none"> <li>▪ An effective, systematic approach, fully responsive to the multiple requirements of the Item, is evident. (A)</li> <li>▪ The approach is fully deployed without significant weaknesses or gaps in any areas or work units. (D)</li> <li>▪ Fact-based, systematic evaluation and improvement and organizational learning are key organization-wide tools; refinement and innovation, backed by analysis and sharing, are evident throughout the organization. (L)</li> <li>▪ The approach is well integrated with your organizational needs identified in response to the Organizational Profile and other Process Items. (I)</li> </ul>

**Figure 5—Scoring Guidelines for the Criteria for Performance Excellence**

<b>SCORE</b>	<b>RESULTS (For Use With Category 7)</b>
<b>0% or 5%</b>	<ul style="list-style-type: none"> <li>▪ There are no organizational performance results or poor results in areas reported.</li> <li>▪ Trend data are either not reported or show mainly adverse trends.</li> <li>▪ Comparative information is not reported.</li> <li>▪ Results are not reported for any areas of importance to your organization’s key mission or business requirements.</li> </ul>
<b>10%, 15%, 20%, or 25%</b>	<ul style="list-style-type: none"> <li>▪ A few organizational performance results are reported; there are some improvements and/or early good performance levels in a few areas.</li> <li>▪ Little or no trend data are reported, or many of the trends shown are adverse.</li> <li>▪ Little or no comparative information is reported.</li> <li>▪ Results are reported for a few areas of importance to your organization’s key mission or business requirements.</li> </ul>
<b>30%, 35%, 40%, or 45%</b>	<ul style="list-style-type: none"> <li>▪ Improvements and/or good performance levels are reported in many areas addressed in the Item requirements.</li> <li>▪ Early stages of developing trends are evident.</li> <li>▪ Early stages of obtaining comparative information are evident.</li> <li>▪ Results are reported for many areas of importance to your organization’s key mission or business requirements.</li> </ul>
<b>50%, 55%, 60%, or 65%</b>	<ul style="list-style-type: none"> <li>▪ Improvement trends and/or good performance levels are reported for most areas addressed in the Item requirements.</li> <li>▪ No pattern of adverse trends and no poor performance levels are evident in areas of importance to your organization’s key mission or business requirements.</li> <li>▪ Some trends and/or current performance levels—evaluated against relevant comparisons and/or benchmarks—show areas of good to very good relative performance.</li> <li>▪ Organizational performance results address most key customer, market, and process requirements.</li> </ul>
<b>70%, 75%, 80%, or 85%</b>	<ul style="list-style-type: none"> <li>▪ Current performance levels are good to excellent in most areas of importance to the Item requirements.</li> <li>▪ Most improvement trends and/or current performance levels have been sustained over time.</li> <li>▪ Many to most reported trends and/or current performance levels—evaluated against relevant comparisons and/or benchmarks—show areas of leadership and very good relative performance.</li> <li>▪ Organizational performance results address most key customer, market, process, and action plan requirements.</li> </ul>
<b>90%, 95%, or 100%</b>	<ul style="list-style-type: none"> <li>▪ Current performance levels are excellent in most areas of importance to the Item requirements.</li> <li>▪ Excellent improvement trends and/or consistently excellent performance levels are reported in most areas.</li> <li>▪ Evidence of industry and benchmark leadership is demonstrated in many areas.</li> <li>▪ Organizational performance results fully address key customer, market, process, and action plan requirements.</li> </ul>

**Figure 5—Scoring Guidelines for the Criteria for Performance Excellence (continued)**

## 2007 Scoring Band Descriptors

Band	Band Number	% Applicants in Band <sup>1</sup>	Descriptors
0–275	1	X	The organization demonstrates the early stages of developing and implementing approaches to Item requirements, with deployment lagging and inhibiting progress. Improvement efforts focus on problem solving. A few important results are reported, but they generally lack trend and comparative data.
276–375	2	X	The organization demonstrates effective, systematic approaches responsive to the basic requirements of the Items, 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. The organization obtains results stemming from its approaches, with some improvements and good performance. The use of comparative and trend data is in the early stages.
376–475	3	X	The organization demonstrates effective, systematic approaches responsive to the basic requirements of most Items, although there are still areas or work units in the early stages of deployment. Key processes are beginning to be systematically evaluated and improved. Results address many areas of importance to the organization’s key requirements, with improvements and/or good performance being achieved. Comparative and trend data are available for some of these important results areas.
476–575	4	X	The organization demonstrates effective, systematic approaches responsive to the overall requirements of the Items, 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 organizational needs. Results address key customer/stakeholder, market, and process requirements, and they demonstrate some areas of strength and/or good performance against relevant comparisons. There are no patterns of adverse trends or poor performance in areas of importance to the organization’s key requirements.
576–675	5	X	The organization demonstrates effective, systematic, well-deployed approaches responsive to the overall requirements of the Items. The organization demonstrates a fact-based, systematic evaluation and improvement process and organizational learning that result in improving the effectiveness and efficiency of key processes. Results address most key customer/stakeholder, market, and process requirements, and they demonstrate areas of strength against relevant comparisons and/or benchmarks. Improvement trends and/or good performance are reported for most areas of importance to the organization’s key requirements.
676–775	6	X	The organization demonstrates refined approaches responsive to the multiple requirements of the Items. These approaches are characterized by the use of key measures, good deployment, evidence of innovation, and very good results in most areas. Organizational integration, learning, and sharing are key management tools. Results address many customer/stakeholder, market, process, and action plan requirements. The organization is an industry <sup>2</sup> leader in some results areas.
776–875	7	X	The organization demonstrates refined approaches responsive to the multiple requirements of the Items. It also demonstrates innovation, excellent deployment, and good-to-excellent performance levels in most areas. Good-to-excellent integration is evident, with organizational analysis, learning, and sharing of best practices as key management strategies. Industry <sup>2</sup> leadership and some benchmark leadership are demonstrated in results that address most key customer/stakeholder, market, process, and action plan requirements.
876–1000	8	X	The organization demonstrates outstanding approaches focused on innovation, full deployment, and excellent, sustained performance results. There is excellent integration of approaches with organizational needs. Organizational analysis, learning, and sharing of best practices are pervasive. National and world leadership is demonstrated in results that fully address key customer/stakeholder, market, process, and action plan requirements.

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 6—Scoring Band Descriptors**



## Baldrige National Quality Program

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**Technology Administration**  
**United States Department of Commerce**  
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