Star Award for Excellence in Patient Care
Scoring Rubric

Section	Below the standard for excellence	Meets the standard for excellence	Above the standard for excellence	
1. Clear and Coherent Personal Statement with Description of Clinical Expertise (0 – 10 points)	**0-3**	**4-6**	**7-10**	
	• Personal statement is unclear, lacking structure, or does not adequately describe clinical expertise. • Personal statement may focus on irrelevant details or fail to align with professional goals	• Personal statement provides a reasonable description of clinical expertise but may be lacking in depth or clarity. • Some connection to professional goals may be present.	• Personal statement is clear and well-organized, providing a detailed, comprehensive, and insightful description of clinical expertise. • The narrative is engaging, integrates key achievements, and connects clinical practice to professional goals, showcasing the applicant's growth as a leader.	
2. Portfolio preparation (0 – 10 points)	**0-3**	**4-6**	**7-10**	
	• Disorganized and difficult to navigate. • Missing key sections, documents, or essential qualifications. • Poor formatting with frequent errors • Low readability; content is unclear and hard to follow.	• Organized but lacks smooth flow or clarity. • Some missing or unclear documents. • Minor inconsistencies. • Some errors, but they don't detract significantly from the content. • Functional, but could be improved for better readability and cohesiveness.	• Clear, logical flow with well-organized sections. • Complete, cohesive, and well-linked documentation. • Professional appearance with consistent formatting. • Minor errors may exist. • Easy to follow and error-free.	
3. Clinical Quality Documentation and Recognition (0 – 20 points)	**0-5**	**6-10**	**11-15**	**16-20**
	• Minimal or no recognition for clinical quality, patient safety, or practice improvements. • No benchmarking or outcomes provided.	• Some evidence of clinical quality, including awards or recognitions from local peers or institutions. • Limited benchmarking or patient safety outcomes.	• Strong recognition in clinical quality, patient safety, and practice change. • Evidence can include local or regional awards, specialty certification, significant benchmarking, or peer-reviewed outcomes.	• Exceptional and widely recognized clinical quality, with evidence of sustained impact on patient outcomes, national-level recognition, or expert-level consulting, and strong, measurable contributions to clinical practice improvements. • Strong, measurable contributions to clinical practice improvements with substantial evidence of external consultations and specialization.

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	0	**1-4**	**6-10**	**11-15**	**16-20**
4. Peer, Colleague, and Learner Evaluations of Clinical Expertise and Care Delivery (0 – 20 points)	• No evidence of feedback from peers, colleagues, learners, or referring providers. • Feedback provided is irrelevant, unfocused, or not applicable to the applicant's performance. • If evaluations are present, they may be overly general, lacking specific examples, and fail to reflect any meaningful insight into the applicant's abilities or areas for growth.	• Minimal evaluations (e.g., only one or two evaluations or brief feedback from a single source). • Feedback from peers, colleagues, or learners is inconsistent, with a lack of diversity in perspectives (e.g., feedback from one peer or only from learners). • Feedback may be generic or offers little insight into applicant's actual contributions or influence on others in a clinical or educational setting.	• Reasonable number of evaluations (e.g., feedback from multiple peers, colleagues, and learners). • Balance of feedback from different sources (e.g., peers, trainees, or referring physicians), offering a more comprehensive view of the applicant's capabilities. • Evaluations are somewhat specific, with examples of the applicant's clinical skills, leadership, or communication, but still lack depth or detailed illustrations of specific behaviors or impact	• Multiple evaluations from a range of stakeholders, including peers, colleagues, learners, and referring physicians. • Feedback comes from diverse sources/ perspectives, providing a well-rounded and comprehensive view of the applicant's performance and impact. • Feedback is specific and detailed, with concrete examples of strengths in clinical expertise, leadership, teamwork, and communication. • Feedback clearly demonstrates the applicant's positive impact on patient care, team dynamics, and learner development.	• Extensive, high-quality feedback from a wide range of stakeholders (e.g., peers, colleagues, learners, and referring physicians). • Evaluations are highly specific and detailed, with clear examples of clinical expertise, leadership, teamwork, and communication skills. • Feedback includes measurable outcomes (e.g., improved patient care, stronger team performance, enhanced learner achievement) directly linked to the applicant's contributions. • Consistently demonstrates significant, observable impact across clinical and educational settings.

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5. Dissemination of Knowledge (0 – 10 points)	**0-3** • Personal statement is unclear, lacking structure, or does not adequately describe clinical expertise. • Personal statement may focus on irrelevant details or fail to align with professional goals.	**4-6** • Limited evidence of scholarly activity, including publications or clinical presentations. • Occasional involvement in teaching or participation in clinical conferences. • Demonstrates emerging engagement in academic or educational activities.	**7-10** • Strong record of scholarly output, including publications, leadership roles in conferences or CME activities, and meaningful contributions to quality improvement initiatives. • Demonstrated teaching effectiveness with clear contributions to advancing professional knowledge and education.
6. Quality Improvement (QI), Patient Safety (PS), and Evidence-Based Care (0 – 10 points)	**0-3** • Minimal to no involvement in quality improvement, patient safety, or evidence-based practice. • No clear leadership or defined contribution. • No demonstrated outcomes or measurable impact. • Limited use of evidence or data to guide care improvement.	**4-6** • Limited involvement in quality improvement, patient safety, or evidence-based initiatives, with unclear scope, impact, and leadership roles. • Participation is evident; however, contributions lack clearly demonstrated outcomes or identifiable leadership responsibility.	**7-10** • Strong involvement and leadership in quality improvement initiatives, patient safety programs, and evidence-based practice efforts. • Clear, demonstrable contributions to improved patient care processes and outcomes.
7. Leadership, Business Development, and Innovation (0 – 10 points)	**0-3** • Minimal to no evidence of leadership, innovation, or engagement in business development activities. • No demonstrated contribution to strategic initiatives or organizational growth efforts.	**4-6** • Moderate leadership involvement in clinical settings, innovation initiatives, or professional organizations. • Demonstrates some contribution to leadership or organizational activities, though scope and impact may be variable.	**7-10** • Strong leadership and innovation in clinical programs, committees, and service development. • Active involvement in professional organizations and/or development of new technologies or strategies. • Demonstrates clear impact on clinical practice and organizational improvement.
7. Productivity (0 – 10 points)	**0-3** • Does not meet departmental productivity standards and shows limited evidence of effective resource management. • Performance reflects insufficient efficiency or optimization of available resources.	**4-6** • Meets select departmental productivity standards, but performance is inconsistent across expectations. • Limited but emerging evidence of efficiency and resource management improvement efforts.	**7-10** • Consistently exceeds departmental productivity standards. • Demonstrates strong efficiency in resource utilization and process improvement across multiple specialties.