

# THE NATIONAL QUALITY FORUM

## STANDARDIZING CARDIAC SURGERY PERFORMANCE MEASURES

### **PURPOSE**

This project seeks to achieve national consensus on a comprehensive set of standardized cardiac surgery performance measures that can be used to assess the quality of cardiac surgery in the United States.

### **BACKGROUND**

Heart disease is the leading cause of death and disability in the United States and one of the 20 healthcare quality improvement priorities that the Institute of Medicine has recommended for focused national attention. Coronary artery bypass graft (CABG) surgery is now performed over 700,000 times per year in U.S. hospitals, while heart valve surgery is performed over 100,000 times per year. Improving the outcomes of these procedures would have major public health implications.

Cardiac surgery performance and outcomes have been of considerable public interest and have featured heavily in a number of efforts aimed at public reporting of healthcare quality, beginning with CABG mortality data reported by the federal government and the state of New York in the 1980s. More recently, public reporting efforts in states such as Pennsylvania, California, and Texas include CABG outcome measures. Likewise, numerous healthcare purchasers have also begun using these measures. At the same time, groups such as The Society of Thoracic Surgeons (STS) have been developing and using more detailed cardiac surgery performance measures based on the data submitted to their national database. Thus, both the demand for valid cardiac surgery performance measures, and the availability of a broad array of measures, is growing rapidly.

### **SCOPE**

This project will identify a comprehensive set of performance measures consisting of two groups of measures:

- One group that is appropriate for purposes of external accountability and public disclosure; and
- A second group to be used for purposes of internal reporting and quality improvement.

The two groups of measures may share common data elements. Measure specifications, definitions and risk adjustment methods will be standardized so that data can be reliably compared if collected and/or maintained by different entities. The project will also seek to achieve consensus on a standard data collection instrument and a standardized approach to the collection and maintenance of data.

### **THE NQF PROCESS**

This project, like all NQF activities, involves the active participation of representatives from across the spectrum of healthcare stakeholders. The project will be guided by a Steering Committee and assisted by a Technical Advisory Panel. Agreement around the recommendations will be developed through NQF's formal consensus development process.

### **FUNDING**

Funding for this project has been provided by the Department of Veterans Affairs, Guidant Foundation, Agency for Healthcare Research and Quality, Centers for Medicare and Medicaid Services, and the Society for Thoracic Surgery.

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