

# Chief Complaint-Based Quality of Emergency Care

Committee Orientation Web Meeting

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# Welcome and Introductions

## National Quality Forum Project Staff

- Ashlie Wilbon, Senior Director
- Jean-Luc Tilly, Senior Project Manager
- Kirsten Reed, Project Manager
- Ameera Chaudhry, Project Analyst
- Jesse Pines, Consultant

## **Standing Committee**

- Margaret Samuels-Kalow, MD, MPhil, MSHP (Co-Chair)
- Arjun Venkatesh, MD, MBA, MHS (Co-Chair)
- Nishant "Shaun" Anand, MD, FACEP
- Jennifer Bacani McKenney, MD, FAAFP
- Stephen Cantrill, MD
- Emily Carrier, MD, MSc
- Patrick Dolan, MD
- Richard Griffey, MD, MPH, FACEP
- Helen Haskell, MA
- Steven Horng, MD, MMSc, FACEP
- John Keats, MD, CPE, CPPS, FACOG, FAAPL
- Naghma Khan, MD
- Kevin Klauer, DO, EJD, FACEP
- Joseph Kunisch, PhD, RN-BC Informatics, CPHQ

- Jamie Lehner, MBA, CAPM
- Michelle Lin, MD, MPH, MS
- James McClay, MD, MS, FACEP
- Abhishek Mehrotra, MD, MBA, FACEP
- Gregg Miller, MD, FACEP
- Sofie Morgan, MD, MBA
- David Morrill
- David Newman-Toker, MD, PhD
- David Thompson, MD, FACEP
- Anita Vashi, MD, MPH, MHS
- Andrew Zinkel, MD, MBA

## Agenda

- Introductions
- Overview of NQF
- Overview of Project
- Introduction to Environmental Scan
- Committee Discussion
- SharePoint Overview
- Opportunity for Public Comment
- Next Steps
- Questions

# **Overview of National Quality Forum**

NATIONAL QUALITY FORUM

## National Quality Forum: A Unique Role

Established in 1999, NQF is a nonprofit, nonpartisan, membership-based organization that brings together public- and private-sector stakeholders to reach consensus on healthcare performance measurement. The goal is to make healthcare in the U.S. better, safer, and more affordable.

**Mission**: To lead national collaboration to improve health and healthcare quality through measurement

- An Essential Forum
- Gold Standard for Quality Measurement
- Leadership in Quality

## **NQF** Mission

**Board of Directors** 

Standing Committees

8 Membership Councils

Measure Applications Partnership (MAP)

National Quality Partners (NQP)

Standing committees for clinical measures and information technology Neutral Convener

Standard Setting Organization Build Consensus

2 Endorse National Consensus Standards

**3** Education and Outreach

## Activities in Multiple Measurement Areas

- Performance Measure Endorsement
  - 600+ NQF-endorsed measures across multiple clinical areas
  - 15 empaneled standing expert committees
- Measure Applications Partnership (MAP)
  - Advises HHS on selecting measures for 20+ federal programs, Medicaid, and health exchanges

#### National Quality Partners

- Convenes stakeholders around critical health and healthcare topics
- Spurs action on patient safety, early elective deliveries, and other issues

#### Measurement Science

 Convenes private- and public-sector leaders to reach consensus on complex issues in healthcare performance measurement such as attribution, alignment, sociodemographic status (SDS) adjustment

## Roles of the Committee & Co-Chairs

- Serve as experts working with NQF staff to achieve the goals of the project
- Engage in meeting discussions and provide feedback on project deliverables
- Co-Chairs:
  - Group leaders of the Committee
  - Assist in facilitating Committee meetings and bringing the group consensus on decisions and recommendations
  - Keep the Committee on track to meet project goals without hindering critical discussion/input
  - Assist NQF staff in identifying key issues for Committee discussion

## NQF Project Team Staff

#### Work with the Committee to achieve project goals:

- Organize staff meetings and conference calls
- Guide the Committee according to NQF process and to meet the project goals
- Ensure communication and collaboration among all project participants and external stakeholders
- Respond to NQF member and public queries about the project
- Maintain documentation of project activities, including drafting and editing reports and preparing project and meeting materials

## NQF Members and the Public at Large

#### NQF membership and the public will engage in the work by:

- Reviewing the draft reports and providing feedback to NQF and the Committee through public commenting periods
- Participating in web meetings and in-person meetings during opportunities for public comment

# Chief Complaint-Based Measurement in the ED

## Current Landscape of Chief Complaint-Based Performance Measurement

- Why is this important?
  - Implications for insurance payment/reimbursement
  - Need for measures within the specialty that accurately measure quality based on how the plan of care is determined
  - Very few chief complaint-based measures, most ED measures are based on diagnosis of specific conditions
- Challenges
  - Chief complaint information collected from patients is usually recorded in a free-text field of the EMR
  - Lack of consensus on nomenclature and/or approach to standardize chief complaint data collected in the ED
  - Most EMRs lack the capability to standardize chief complaint data that can be aggregated for measurement

## Prior Related NQF Work: ED Transitions of Care Framework

- The framework's domains are organized into four interrelated components that are essential to a quality transition of care:
  - Provider information exchange;
  - Patient, family, and caregiver information exchange;
  - Engagement of broader community; and
  - Achievement of outcomes.
- Each domain includes a definition and a series of subdomains such as:
  - Accessibility of services
  - Shared decision making
  - Connection and alignment
  - Care coordination
  - Information sharing/communication

## Prior Related NQF Work: Diagnostic Accuracy Framework

#### Diagnostic Quality and Safety Framework



# Chief Complaint Project Overview and Scope

- Assess the current landscape of quality measures and measure concepts focused on chief complaints
- Evaluate the current approaches for standardizing chief complaint nomenclature
- Assess the strengths and weaknesses of various data sources for developing chief complaint-based eMeasures as well as data that incorporate the patient's perspective
- Develop a framework for chief complaint-based measurement
- Provide recommendations for a path forward based on findings of the environmental scan and literature review

## Approach

- Literature Review
- Environmental scan for measures & classification systems
- Key Informant Interviews
- Convene Expert Steering Committee
- Draft report

## **Project Deliverables**

#### Environmental Scan

- Catalogue of chief complaint measures and concepts
- Catalogue of chief complaint classification systems and approaches to standardizing chief complaint data
- Literature findings

#### Report

- Assessment and prioritization of measurement gaps
- Framework for approaching measurement of chief complaintbased care in the ED
- Assessment of mechanisms for standardizing the collection of chief complaints for performance measurement
- Recommendations for a path forward

## **Project Timeline**

Activity	Date/Time
Web Meeting #2	November 28, 2018, 12-2pm ET
In-Person Meeting	January 28-29, 2019
Web Meeting #3	February 20, 2019, 12-2pm ET
30-Day Comment Period	March 29-April 29, 2019
Web Meeting #4	May 22, 2019, 12-2pm ET
Final Report	June 24, 2019

#### **Measure Scan**

Focus on top 10 chief complaints based on 2015 CDC NHAMC Survey

- 1. Stomach and abdominal pain, cramps and spasms
- 2. Chest pain and related symptoms
- 3. Fever
- 4. Cough
- 5. Headache, pain in head
- 6. Back symptoms
- 7. Shortness of breath
- 8. Pain, site not referable to a specific body system
- 9. Vomiting
- 10. Symptoms referable to throat

- Measure Scan Sources
  - Peer-reviewed literature and grey literature
  - Specific measure inventories
     CMS Measures Inventory
  - NQF Measure Databases (CDP, MAP)
    - » NQF-endorsed measures
    - » AHRQ National Quality Measures Clearinghouse and National Guidelines Clearinghouse
    - » Health Indicators Warehouse
    - » CMS Measures Inventory
    - » HEDIS (NCQA)

- Classification System Scan
  - Informatics Journals, other literature
- Literature Review
  - Terms include naturallanguage processing, preprocessing, prospective analysis, diagnostic accuracy/uncertainty, chief complaint, classification system

#### Summary of results to date

- **36** measures, 14 measure concepts
  - » Stomach and abdominal pain, cramps and spasms 4
  - » Chest pain and related symptoms 32
  - » Fever 3
  - » Headache, pain in head 6
  - » Back symptoms 3
  - » Shortness of breath 2
  - » None for cough, pain (unspecified), vomiting, or symptoms related to throat
- 20+ classification systems

## **Committee Review of Environmental Scan**

- Are there any additional complaints that should be included in the scan?
- Are there other sources we should search for chief complaint-based measures or concepts?
  - Organizations or health systems?
  - Regional collaboratives or initiatives?
- Are there additional chief complaint classification systems or approaches to standardizing chief complaint data that should be included?

## **Committee Review of Environmental Scan**

- Additional complaints for consideration
  - Nausea
  - Problems in pregnancy
  - Injury, other and unspecified type-head, neck and face
  - Other symptoms or problems relating to physiological and mental disorders
  - Skin rash
  - Vertigo, dizziness
  - Accident, unspecified
  - Syncope, fainting
  - Laceration or cut of upper extremity
  - Leg symptoms
  - Symptoms of teeth and gums
  - General weakness

## **Key Informant Interviews**

- Up to 9 interviews with various experts to inform Committee deliberations
  - Seeking input:
    - » To help frame the key issues for Committee discussion
    - » On the environmental scan results
    - » From experts with unique perspectives
    - » On the draft report
  - Clinicians, informaticists, measurement specialists
  - Experience with chief complaint measurement
    - » Barriers, facilitators, IT approaches
  - One-hour guided interviews

## Committee Discussion of Key Informant Interviews

- Are there individuals you would recommend we consider for a key informant interview?
- Are there certain types of expertise or perspectives that should be represented in the interviews (that may not be captured on the Committee)?
- What key questions or topics should be addressed in the interviews?

## SharePoint Overview

## **SharePoint Overview**

- Accessing SharePoint
- Meeting and Call Documents
- Committee Roster
- Calendar of Meetings
- Reference Materials

## **SharePoint Overview**

#### Screenshot of Homepage

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# Public Comment

### **Next Steps**

- Finish review of background materials
- Send NQF staff any feedback on environmental scan and key informant interviews
- Web-Meeting #2: November 28, 2018, 12:00pm-2:00pm
   ET

## Questions?

## Project Contact Info

- Email: <u>ChiefComplaint@qualityforum.org</u>
- NQF Phone: 202-783-1300
- Project page: <u>http://www.qualityforum.org/Chief Complaint-</u> <u>Based Quality for Emergency Care.aspx</u>
- SharePoint: <u>http://share.qualityforum.org/Projects/ChiefComplaint-</u> <u>BasedQualityEmergencyCare/SitePages/Home.aspx</u>

# Thank you.