NATIONAL QUALITY FORUM

CONFERENCE CALL FOR THE COMMON FORMATS EXPERT PANEL

April 12th, 2010

Panel Members: Henry Johnson Jr., MD, MPH (co-chair); John Clarke, MD; Peter Elkin, MD, MACP; Paul Gluck, MD; Matthew Grissinger, RPh, MS; Mark Keroack, MD, MPH; Helen Lau, RN, MHROD, BSN; Arthur Levin, MPH; William Munier, MD, MBA; Lori Paine, RN, MS; Shannon Phillips, MD, MPH; Nancy Ridley, MS; Prof. William B. Runciman; Heather Sherman, PhD

NQF Staff: Peter Angood, MD; Melinda Murphy, RN, MS; Lindsey Tighe, MS

Others Present: Diane Cousins, RPh; Peter Goldschmidt, MD, DrPH, DMS; Amy Helwig, MD; John Moquin CPHIMS; Debbie Perfetto; Sue Terrillion (AHRQ); Kathy Barberio (IFMC); Lisa McGiffert (Consumers Union); Patricia Sokol, RN, JD; Carol Vargo (AMA); Ira Yanowitz, MD (Social and Scientific Systems)

WELCOME AND INTRODUCTIONS

Dr. Johnson welcomed the Common Formats Expert Panel and thanked them for their continued participation. He also reviewed the agenda items with the panel and noted that Common Formats Version 1.1 has been posted, thanking AHRQ for the effort that went into producing this version. Dr. Johnson then asked Dr. Helwig and Dr. Munier to discuss Version 1.1.

COMMON FORMATS VERSION 1.1 STATUS REPORT

Dr. Helwig informed the Panel that Common Formats Version 1.1 was released on March 31st. The Common Formats include, in addition to the paper forms and event descriptions, sample aggregate reports, and technical specifications that allow for electronic implementation of Common Formats by vendors. Dr. Helwig directed the Panel to the PSO Privacy Protection Center (PSO PPC) website, www.psoppc.org , for links to Common Formats Version 1.1. As previously discussed, the technical specifications posted with Common Formats Version 1.1 will not be reviewed with the Panel.

In response to several questions, Dr. Helwig advised the Panel that in the upcoming weeks the Common Formats Version 1.1 will be combined into a single pdf document and posted on the PSO PPC website; currently the individual documents are posted.

Event Summary Report Sample

Dr. Munier reviewed a sample of an event summary report, noting that the document is intended for use as part of a patient safety event reporting system as well as a tool for local use for quality improvement within the reporting environment. It is intended that these reports will contain all the information necessary for review of an incident, including patient demographic information, event location, and description, and whether or not the event that occurred was an NQF Serious Reportable Event. The event information section in the summary report captures responses provided on the SIR and the HERF, displaying information regarding

what occurred and the patient outcome. The report also provides contact information for the individual who reported the event.

In response to a question from a panel member, Dr. Munier stated that though fields omitted by the event reporter will not be generated as non-response fields in the event summary, those omissions will be captured in aggregate reports. The submission form does not contain any optional fields; as such each question has response rules and requires some type of response, though it is not required to be an affirmative response.

Aggregate Report Sample
Dr. Munier then reviewed a sample of an aggregate report. The report contains aggregated event information which can be viewed at several levels of data stratification (e.g., national aggregate data broken down into reporting PSOs or total hospital data broken down into nursing units). The report includes a definition of event which details the event, inclusions, and processes of care. It also contains information on the circumstances of event, which includes descriptive information and contributing factors.

In response to a question from a Panel member, Dr. Munier advised the Panel that the data displayed in these reports is updated in real time; as it is entered into the system it is reflected in the report. As such, if data were to be altered after the initial data submission, reports generated subsequently would be corrected based on the revised submission.

In response to another question, Dr. Munier stated that the data can be used at the level of the reporting hospital for internal quality improvement. It can be broken down by department. It can also be used at the PSO level to view total incidents or incidents broken down by regions or hospitals and can be sorted by time periods (e.g., quarters, years). The technical specifications detail how to generate reports

Dr. Munier then asked the Panel members for input on the utility of these reports. The consensus of the members was that the Panel would like to see more in-depth information in the reports, but as this is the first report of its type it is an excellent starting point.

NEXT STEPS
Once sample aggregate reports are completed for each Common Formats event type, the NQF commenting tool, updated with Version 1.1 event descriptions and related reporting forms, will be opened for comment. A comment closing date has not been established since development of electronic reporting forms, enabled by the technical specifications, will take up to six months and experience with the Common Formats will be gained thereafter. At present, it is anticipated that NQF will accept comments on Version 1.1 through December 2010 and commenting could continue into 2011. Determinations regarding how to handle comments over a prolonged period will be determined jointly by NQF with the Expert Panel with AHRQ.

Panel Members were reminded of the AHRQ PSO Meeting in Baltimore on May 5-6, 2010 and the software developer meeting on May 4.

The next Common Formats Expert Panel call is scheduled to take place on Friday, May 14th from 10am-11:30am ET.

Adjourn.