Prioritization and Identification of Health IT Patient Safety Measures

HIT Safety Web-Meeting

NATIONAL QUALITY FORUM

Andrew Lyzenga
Jesse Pines
Adeela Khan

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Agenda at a Glance

- Welcome and Introductions
- Committee discussion
    - Proposed conceptual framework
    - Proposed measure concepts
    - Key informant interviews
- Public and Member Comment
- Next Steps

Meeting Objectives

- Discuss draft conceptual framework and make any modifications

- Review measure concepts proposed during the February in-person meeting, as refined by NQF staff

- Review preliminary project plan for key informant interviews and identify possible key informants

Proposed Conceptual Framework

Three-Level Health IT Quality and Safety Improvement Model

Level 1 / Safe Health IT: Address Safety Concerns Unique to Technology

- Data Availability (**DA**) – Health IT is accessible and usable upon demand by authorized individuals.
- Data Integrity (**DI**) – Health IT data or information is accurate and created appropriately and has not been altered or destroyed in an unauthorized manner
- Data Security (**DS**) – Health IT data or information is secure, protected, and available or disclosed only to authorized persons or processes

Level 2 / Using Health IT Safely: Optimize the Safe Use of Technology

- Health IT System Usability (**SU**) – Health IT features and functionality are designed and implemented so that they can be used effectively, efficiently, and to the satisfaction of the intended users to minimize the potential for harm.
- Organizational Planning and Preparation for Health IT (**OP**)
- Complete/Correct Health IT Use (**CCU**) – Health IT features and functionality are implemented and used as intended
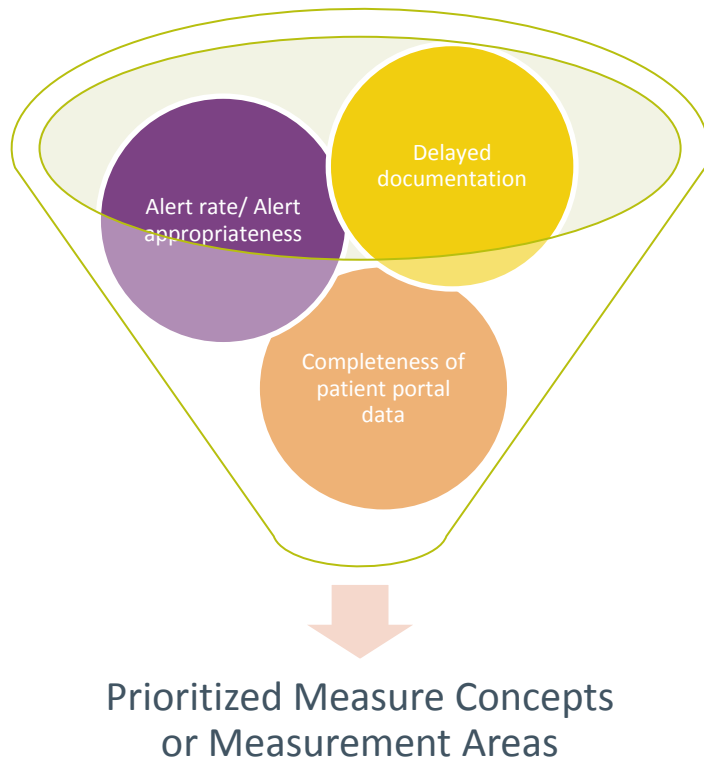
Level 3 / Monitoring Safety: Use Technology to Monitor and Improve Patient Safety

- Surveillance and Optimization (**SO**)– As part of ongoing quality assurance and performance improvement, mechanisms are in place to monitor, detect, and report on the safety and safe use of health IT, and leverage health IT to reduce patient harm and improve safety
- Health IT Facilitates Patient Engagement (**PE**)

Crosswalk: Draft HIT Safety Conceptual Framework and Measure Concepts Identified by the HIT Safety Committee

Prioritization of Measure Concepts or Measurement Areas

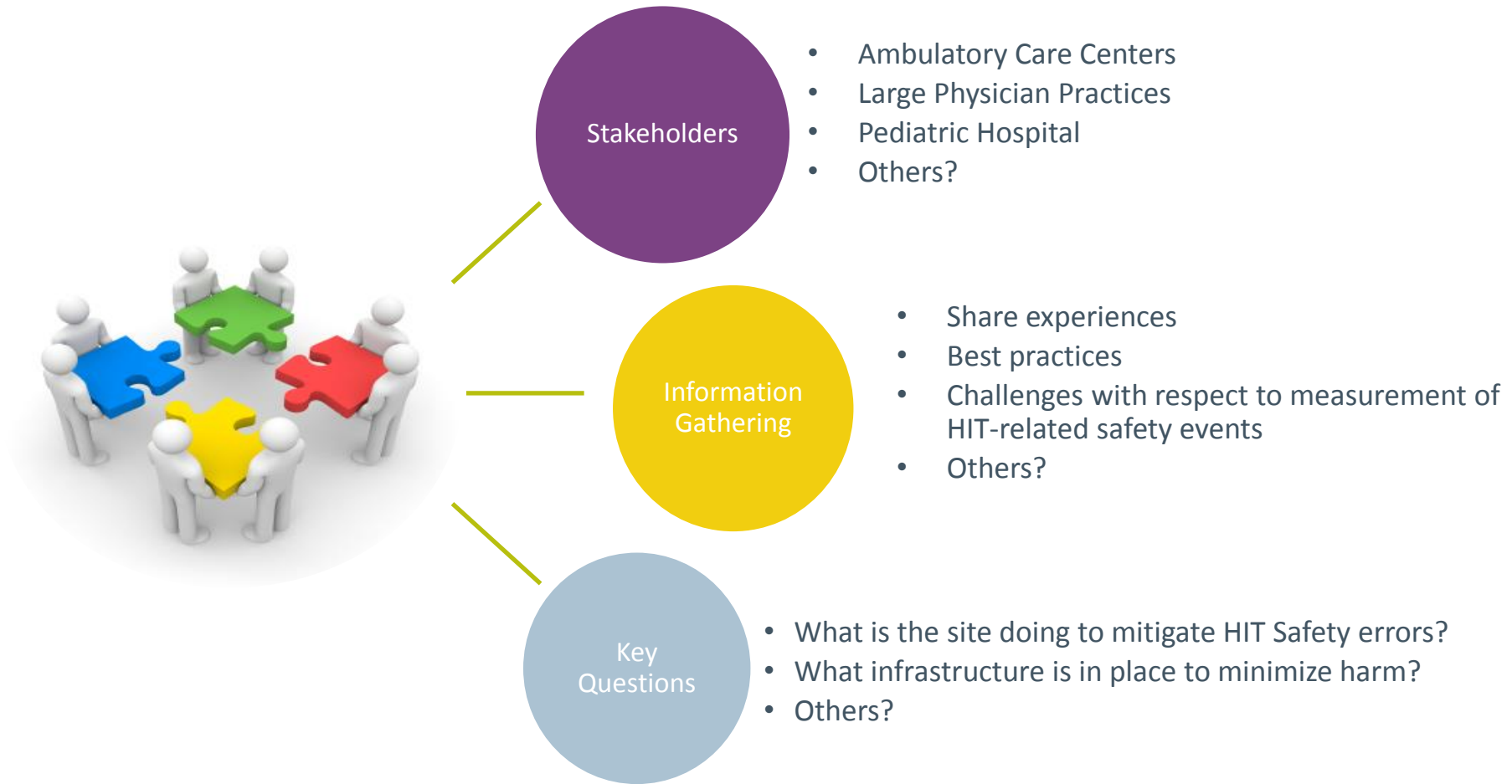Prioritized Measure Concepts or Measurement Areas

Possible Criteria

Importance to Measure and Report

- related to measures that have the greatest potential of driving improvement (i.e., high impact on patients and workflow, strong evidence base and gap in care, with variation across providers)

Feasibility

- related to ease of implementation
- may be influenced by concerns about the ability to obtain data due to the presence or absence of EHRs, standardized diagnostic codes, standardized descriptions as well as other concerns.

Key Informant Interviews

Stakeholders
- Ambulatory Care Centers
- Large Physician Practices
- Pediatric Hospital
- Others?

Information Gathering
- Share experiences
- Best practices
- Challenges with respect to measurement of HIT-related safety events
- Others?

Key Questions
- What is the site doing to mitigate HIT Safety errors?
- What infrastructure is in place to minimize harm?
- Others?

Public and Member Comment

Next Steps

- NQF will take the feedback heard today and revise the draft framework

- NQF will begin compiling criteria for measure prioritization exercise to share with the Committee

- NQF will conduct key informant interviews to fill in gaps for the environmental scan

- Next Meeting is July 21, 2015 3-5pm EST

- In-Person Meeting September 16-17, 2015

Project Contact Info

- Andrew Lyzenga: alyzenga@qualityforum.org
- Adeela Khan: akhan@qualityforum.org
- Ann Philips: aphillips@qualityforum.org

- NQF Phone: 202-783-1300