



Improving Diagnostic Quality and Safety Web Meeting #5: Respond to and Adjudicate Comments

July 25, 2017

WELCOME

Committee Panel

- ***Mark Graber, MD, FACP***
- ***Missy Danforth***
- Jennifer Campisano, JD
- Michael Dunne, PhD
- David Grenache, PhD
- Helen Haskell, MA
- Carlos Higuera-Rueda, MD
- Marilyn Hravnak, RN, PhD, ACNP-BC, FCCM, FAAN
- Mira Irons, MD
- Nicholas Kuzma, MD
- Kathryn McDonald, PhD
- Prashant Mahajan, MD, MPH, MBA
- Lavinia Middleton, MD
- David Newman-Toker, MD, PhD
- Martha Radford, MD
- David Seidenwurm, MD
- Thomas Sequist, MD
- Hardeep Singh, MD, MPH

Agenda

- Welcome
- Review Comments Received on the Draft Report
- Update on Measure Concept Ratings
- Review of Framework Graphic
- Public and Member Comment
- Next Steps

Review Comments Received on the Draft Report

Comments Received

- 24 comments from 14 individuals/organizations
- Five major themes:
 - Evidence for measure concepts
 - Use of diagnostic quality and safety measures
 - Questions about the need/rationale for measurement of certain issues
 - Suggestions for New or Revised Measure Concepts
 - *Revisions to concepts*
 - *New concepts*
 - Requests for additional cross-cutting themes or emphasis on certain themes
 - *Patient Engagement*
 - *Opportunity for Diagnostic Experts and Patients Advocates to Provide Input*
 - *Physician Feedback and Satisfaction*

Theme 1: Evidence for Measure Concepts

- Commenters noted that there may be little or no evidence base for many of the proposed measure concepts.
- Proposed Response:
 - *Update report to clarify distinction between a measure and a measure concept*
 - *Add language explaining and clarifying the intent of this project: to provide guidance to the field on measurement of diagnostic quality & safety, not to recommend specific measures for immediate implementation and use*
- Committee Action Item: Does the Committee agree with the Proposed Response?

Theme 2: Use of Diagnostic Quality & Safety Measures

- Commenters suggested that many of the measure concepts identified in the report may not be suitable for performance measurement and accountability, but would be better suited for purposes such as quality improvement, certification, etc.
- Proposed Committee response:
 - *The Committee agrees that many of the suggested concepts may be more suited to certain applications than others; the Committee believes that as measures of diagnostic quality & safety are developed, they should be well-vetted and tested for reliability and validity before being used for accountability purposes.*

Theme 3: Questions about the need/rationale for measurement of certain issues

- Commenters raised questions about whether there is a sufficient rationale for measurement in certain areas.
- Among the commenters' concerns was the potential to add measurement burden, and whether measurement in these areas would improve diagnostic accuracy.
- Topics or measure concepts questioned by commenters include:
 - *Documentation of diagnostic confidence or certainty*
 - *Patients' understanding of their diagnoses/awareness of red flag symptoms*
 - *Assessment of whether an organization has a documentation system that captures informal caregiver's roles*

Theme 3: Questions about the need/rationale for measurement of certain issues (cont.)

- Proposed Response:
 - *Clarify that the Committee broadened the scope of this project beyond 'diagnostic accuracy' to include other issues related to diagnostic quality and safety;*
 - *reaffirm that communication with patients about their diagnosis is a critical part of diagnostic quality and safety*
- On documentation of diagnostic certainty:
 - *Does the Committee wish to retain language in the narrative section of the report suggesting that clinicians should document and inform patients of their level of certainty in the diagnosis?*

Theme 4: Requests for additional cross-cutting issues or emphasis on existing themes

- Patient Engagement – Commenters suggested that more emphasis is needed on the importance of the patient and his/her knowledge of their own medical history in the diagnostic process.
- Commenters suggested that the Committee should emphasize the importance of patient experience and patient input as diagnostic quality and safety measures are developed.
- Physician Feedback and Satisfaction – Commenters stressed the importance of assessing physician feedback and satisfaction with the “systems and functions involved in the diagnostic process.” It was noted that system level issues can lead to burn out and overwork which could affect a physician’s ability to make the correct diagnosis.
- Committee Action Item: Does the Committee agree that these issues warrant additional emphasis in the final report?

Theme 5: Additional Concepts

For each concept/idea, please discuss whether the Committee agrees to add to the report.

1. The number of emergent cardiac catheterizations performed on patients with no acute pathology due to a lack of a prior old EKG available on an emergency basis
2. A structure or process measure that would encourage the use of prospective learning
3. Structure measure assessing whether testing professionals have access to the differential diagnosis, the problem list, and the medication list for patients to increase the specificity of the supporting information provided
4. Measurement of the accuracy of diagnostic tests themselves—and, specifically, use of accuracy-based assessments rather than reproducibility-based assessments
5. Assessment of whether shared decision-making includes the discussion of new technologies in patient care

Theme 5: Additional Concepts (cont.)

For each concept/idea, please discuss whether the Committee agrees to add to the report.

6. Timeliness of access to medical diagnostic technologies from time of initial symptoms to time of diagnosis, staging, etc.
7. Ensuring that diagnostic testing aligns with the most current clinical guidelines and standards (Note that this concept is related to the concept Initial diagnostic accuracy for disease X referenced to gold standard...)

Theme - Revisions to Current Concepts

Concept/Idea – For each concept, please discuss whether the Committee agrees to the proposed revisions.

1. Timely patient access to medical records including notes and test results in and out of hospital, and a mechanism for patients to add their own feedback; records should be available to the patient electronically or otherwise (*Patients, Families, & Caregivers – Patient Engagement*)
2. Patient reported experience of diagnostic care – were problems explained and were all appropriate diagnostic options presented to the patient (*Diagnostic Process – Patient Experience*)
3. Clinical documentation should support quality in the diagnostic process and that all appropriate options are presented and are clear, complete, and accurate (*Diagnostic Process – Information Gathering and Documentation*)

Theme - Revisions to Current Concepts

Concept/Idea – For each concept, please discuss whether the Committee agrees to the proposed revisions.

4. Use of decision support: Availability of EHR-integrated, evidence-based decision support pathways **that provide all appropriate diagnostic options for diagnosis of common symptoms** for diagnosis of common symptoms (e.g., chest pain, dyspnea, headache, dizziness, abdominal pain) (*Diagnostic Process – Information Interpretation*)

5. Access to appropriate **options for** testing for the most common conditions encountered by the hospital, clinic, practices, or other care setting (*Organizational and Policy Opportunities – Access to Care and Diagnostic Services*)

6. Availability of **innovative state-of-the-art testing, including** rapid or point-of-care testing, for critical diagnostic decisionmaking (*Organizational and Policy Opportunities – Access to Care and Diagnostic Services*)

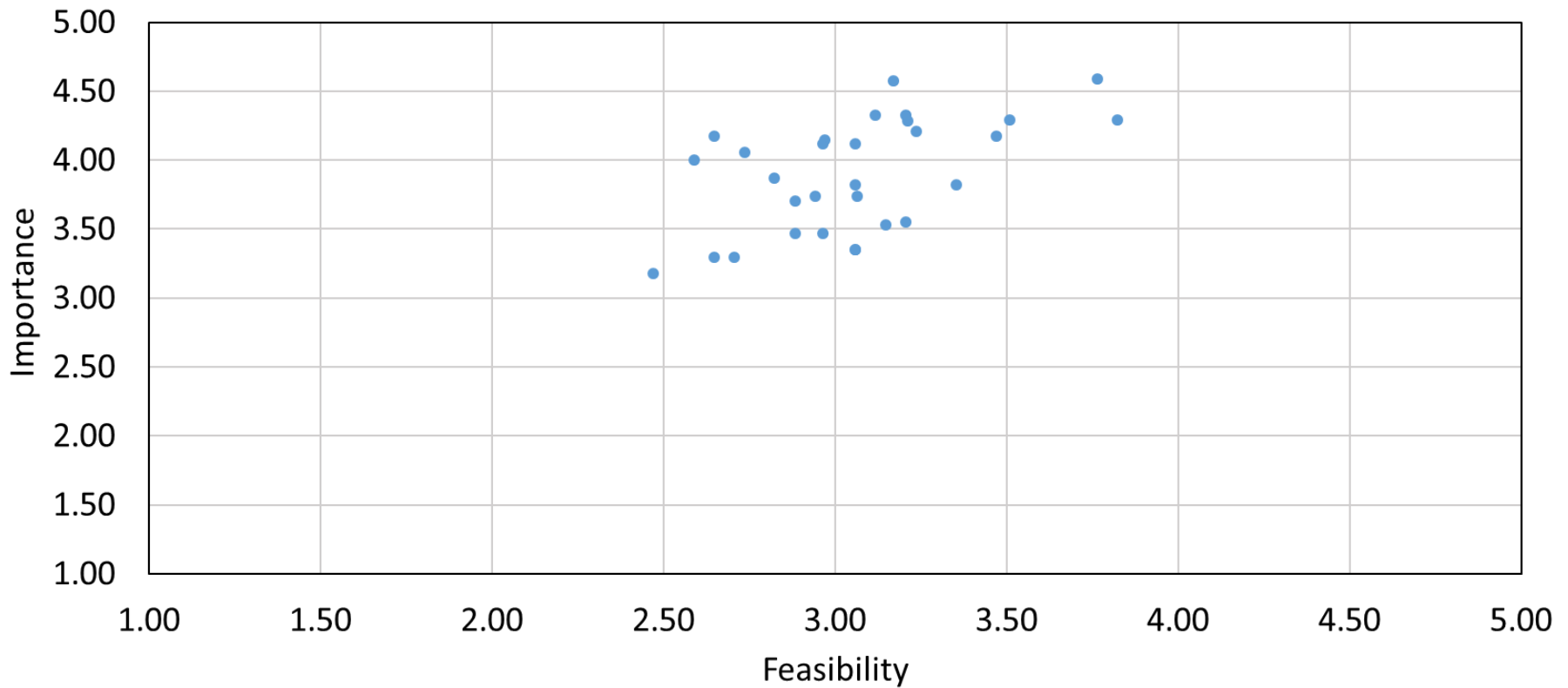
Theme - Revisions to Current Concepts

Concept/Idea – For each concept, please discuss whether the Committee agrees to the proposed revisions.

7. Proportion of diagnostic evaluations with appropriate patient and inter-professional team involvement (e.g., nurses, physicians, pharmacists, **laboratory professionals**) (*Diagnostic Process – Information Integration*)

Update on the Measure Concept Ratings

Measurement Theme Ratings



Measurement Theme Ratings by Importance

Top Measurement Themes	Importance
Timeliness of test result follow-up	4.59
Patient understanding of diagnosis	4.57
Timeliness of diagnosis	4.32
Diagnostic quality measurement	4.32
Root Cause Analysis (RCA) and continuous improvement practices	4.29
Patient access to information	4.29
Communication and hand-offs of test results	4.28
Diagnostic workload	4.21
Patient-reported diagnostic error	4.18
Handoffs	4.18

Measurement Theme Ratings by Feasibility

Top Measurement Themes	Feasibility
Patient access to information	3.82
Timeliness of test result follow-up	3.76
Root Cause Analysis (RCA) and continuous improvement practices	3.51
Handoffs	3.47
Appropriateness of testing	3.35
Diagnostic workload	3.24
Communication and hand-offs of test results	3.21
Diagnostic quality measurement	3.21
Decision support	3.21
Patient understanding of diagnosis	3.17

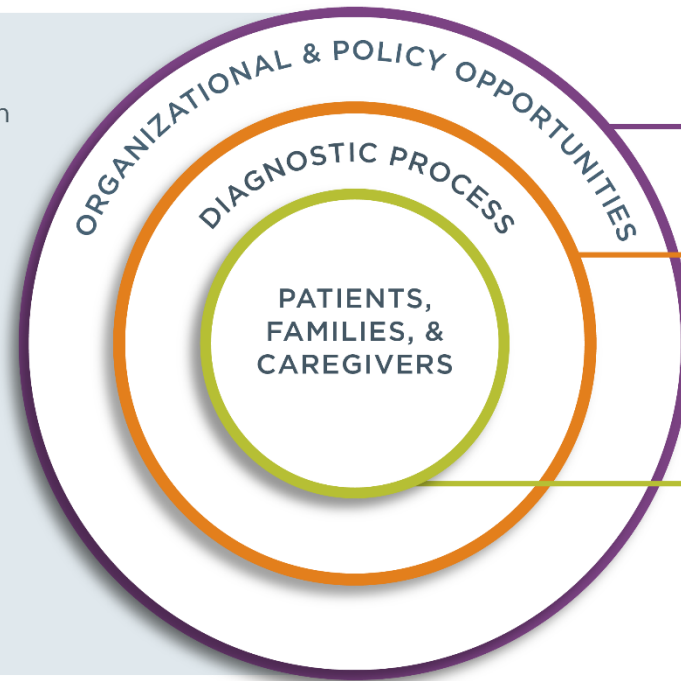
Overall Top 8 Measurement Themes

	Importance	Feasibility	Overall
Timeliness of test result follow-up	4.59	3.76	8.35
Patient access to information	4.29	3.82	8.12
Root Cause Analysis (RCA) and continuous improvement practices	4.29	3.51	7.80
Patient understanding of diagnosis	4.57	3.17	7.74
Handoffs	4.18	3.47	7.65
Diagnostic quality measurement	4.32	3.21	7.53
Communication and hand-offs of test results	4.28	3.21	7.49
Diagnostic workload	4.21	3.24	7.44

Review of Framework Graphic

CROSS CUTTING THEMES:

- The Impact of Electronic Health Records on Diagnostic Quality and Safety
- Transitions of Care
- Communication and Health Literacy
- The Opportunity for Medical Specialty Societies to Provide Guidance
- Interprofessional Education and Credentialing
- The External Environment



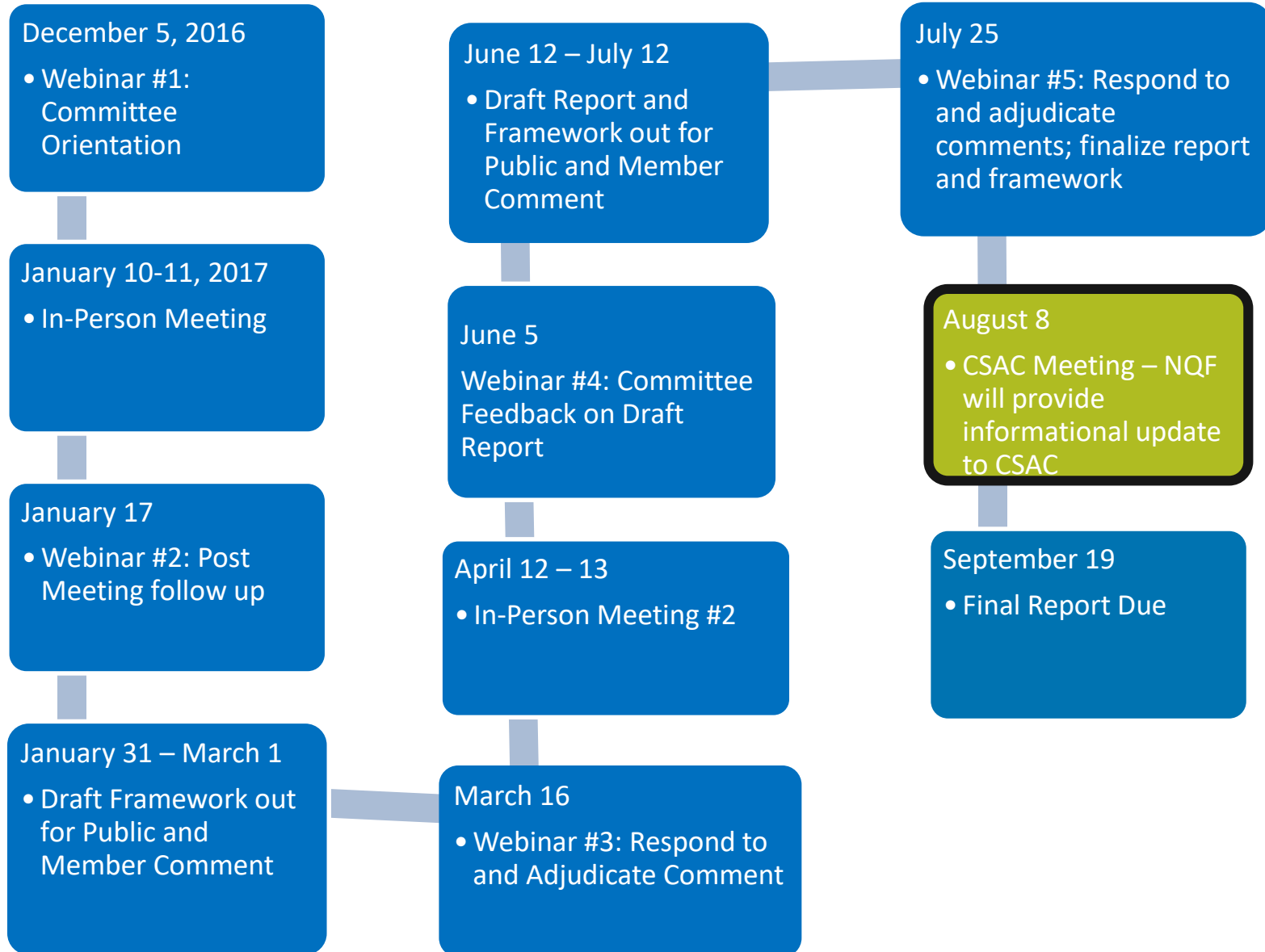
SUBDOMAINS

- Diagnostic Quality Improvement Activities
- Access to Care and Diagnostic Services
- Workforce
- Information Gathering and Documentation
- Information Integration
- Information Interpretation
- Diagnostic Efficiency
- Diagnostic Accuracy
- Follow Up
- Patient Experience
- Patient Engagement

Member and Public Comment

Next Steps

Next Steps



Project Contact Info

- Email: diagnosticaccuracy@qualityforum.org
- NQF Phone: 202-783-1300
- Project page:
[http://www.qualityforum.org/Improving Diagnostic Quality and Safety.aspx](http://www.qualityforum.org/Improving_Diagnostic_Quality_and_Safety.aspx)
- Share Point:
<http://share.qualityforum.org/Projects/Diagnostic%20Accuracy/SitePages/Home.aspx>

THANK YOU