

NATIONAL QUALITY FORUM

Patient Safety Measures Complications Endorsement Maintenance

Table of Measures—Phase II

As of October 25, 2011

Measure ID Number/ Title	Measure Description	Measure Steward
0035 Fall risk management	a) Discussing Fall Risk. The percentage of Medicare members 75 years of age and older, or 65–74 years of age with balance or walking problems or a fall in the past 12 months, who were seen by a practitioner in the past 12 months and who discussed falls or problems with balance or walking with their current practitioner. b) Managing Fall Risk. The percentage of Medicare members 65 years of age and older who had a fall or had problems with balance or walking in the past 12 months, who were seen by a practitioner in the past 12 months and who received fall risk intervention from their current practitioner.	National Committee for Quality Assurance
0101 Falls: Screening for future fall risk	Percentage of patients aged 65 years and older who were screened for fall risk (2 or more falls in the past year or any fall with injury in the past year) at least once within 12 months	National Committee for Quality Assurance
0141 Patient fall rate	All documented falls, with or without injury, experienced by patients on eligible unit types in a calendar quarter. Reported as Total Falls per 1,000 Patient Days and Unassisted Falls per 1000 Patient Days. $(\text{Total number of falls} / \text{Patient days}) \times 1000$ Measure focus is safety. Target population is adult acute care inpatient and adult rehabilitation patients.	American Nurses Association

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Measure ID Number/ Title	Measure Description	Measure Steward
0202 Falls with injury	All documented patient falls with an injury level of minor or greater on eligible unit types in a calendar quarter. Reported as Injury falls per 1000 Patient Days. (Total number of injury falls / Patient days) X 1000 Measure focus is safety. Target population is adult acute care inpatient and adult rehabilitation patients.	American Nurses Association
0266 Patient fall	Percentage of ASC admissions experiencing a fall in the ASC.	Ambulatory Surgical Center Quality Collaboration
0298 Central line bundle compliance	Percentage of intensive care patients with central lines for whom all elements of the central line bundle are documented and in place. The central line bundle elements include: <ul style="list-style-type: none"> •Hand hygiene , •Maximal barrier precautions upon insertion •Chlorhexidine skin antisepsis •Optimal catheter site selection, with subclavian vein as the preferred site for non-tunneled catheters in patients 18 years and older •Daily review of line necessity with prompt removal of unnecessary lines 	Institute for Healthcare Improvement

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0302 Ventilator bundle	Percentage of intensive care unit patients on mechanical ventilation at time of survey for whom all four elements of the ventilator bundle are documented and in place. The ventilator bundle elements are: <ul style="list-style-type: none"> •Head of bed (HOB) elevation 30 degrees or greater (unless medically contraindicated); noted on 2 different shifts within a 24 hour period •Daily “sedation interruption” and daily assessment of readiness to extubate; process includes interrupting sedation until patient follow commands and patient is assessed for discontinuation of mechanical ventilation; Parameters of discontinuation include: resolution of reason for intubation; inspired oxygen content roughly 40%; assessment of patients ability to defend airway after extubation due to heavy sedation; minute ventilation less than equal to 15 liters/minute; and respiratory rate/tidal volume less than or equal to 105/min/L(RR/TV< 105) •SUD (peptic ulcer disease) prophylaxis •DVT (deep venous thrombosis) prophylaxis 	Institute for Healthcare Improvement
0337 Pressure ulcer rate (PDI 2)	Percent of discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM code of pressure ulcer in any secondary diagnosis field and ICD-9-CM code of pressure ulcer stage III or IV (or unstagable) in any secondary diagnosis field	Agency for Healthcare Research and Quality

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0347 Death rate in low-mortality diagnosis related groups (PSI 2)	Percent of discharges with disposition of “deceased” (DISP=20) among cases meeting the inclusion and exclusion rules for the denominator	Agency for Healthcare Research and Quality
0530 Mortality for selected conditions (IQIs) <ul style="list-style-type: none"> • Acute myocardial infarction (AMI) mortality rate (IQI #15) • Acute stroke mortality rate (IQI #17) • GI hemorrhage mortality (IQI #18) • Hip fracture mortality (IQI #19) • Pneumonia mortality (IQI #20) 	A composite measure of in-hospital mortality indicators for selected conditions.	Agency for Healthcare Research and Quality
0531 Patient safety for selected indicators (PSIs) <ul style="list-style-type: none"> • Pressure ulcer (PSI #03) • Central venous catheter-related bloodstream infections (PSI #07) • Postoperative hip fracture (PSI #08) • Postoperative respiratory failure (PSI #11) • Postoperative DVT or PE (PSI #12) 	A composite measure of potentially preventable adverse events for selected indicators	Agency for Healthcare Research and Quality
0532 Pediatric patient safety for selected indicators (PDIs) <ul style="list-style-type: none"> • Postoperative sepsis (PDI #10) • Central venous catheter-related bloodstream infections (PDI #12) 	A composite measure of potentially preventable adverse events for selected pediatric indicators	Agency for Healthcare Research and Quality
0537 Multifactor fall risk assessment conducted in patients 65 and older	Percentage of home health episodes of care in which patients 65 and older had a multi-factor fall risk assessment at start/resumption of care.	Centers for Medicare & Medicaid Services

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0538 Pressure ulcer prevention included in plan of care	Percentage of home health episodes of care in which the physician-ordered plan of care includes interventions to prevent pressure ulcers.	Centers for Medicare & Medicaid Services
0539 Pressure ulcer prevention implemented during short term episodes of care	Percentage of short term home health episodes of care during which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented.	Centers for Medicare & Medicaid Services
0540 Pressure ulcer risk assessment conducted	Percentage of home health episodes of care in which the patient was assessed for risk of developing pressure ulcers at start/resumption of care.	Centers for Medicare & Medicaid Services
1716 National healthcare safety network (NHSN) facility-wide inpatient hospital-onset methicillin-resistant staphylococcus aureus (MRSA) bacteremia outcome measure	Standardized infection ratio (SIR) of hospital-onset unique blood source MRSA Laboratory-identified events (LabID events) among all inpatients in the facility	Centers for Disease Control and Prevention
1717 National healthcare safety network (NHSN) facility-wide inpatient hospital-onset clostridium difficile infection (CDI) outcome measure	Standardized infection ratio (SIR) of hospital-onset CDI Laboratory-identified events (LabID events) among all inpatients in the facility, excluding well-baby nurseries and neonatal intensive care units (NICUs)	Centers for Disease Control and Prevention
1730 Falls: Risk assessment for falls	Percentage of patients aged 65 years and older with a history of falls who had a risk assessment for falls completed within 12 months	National Committee for Quality Assurance
1733 Falls: Plan of care for falls	Percentage of patients aged 65 years and older with a history of falls who had a plan of care for falls documented within 12 months	National Committee for Quality Assurance

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