

Meeting Summary

Improving Diagnostic Quality and Safety/Reducing Diagnostic Error: Measurement Considerations Project:

Committee Web Meeting 2

The National Quality Forum (NQF) convened a web meeting for the Improving Diagnostic Quality and Safety/Reducing Diagnostic Error: Measurement Considerations Project on October 9, 2019.

Welcome, Introductions, and Review of Web Meeting Objectives

Jean-Luc Tilly, NQF senior project manager, opened the call and welcomed participants. NQF staff introduced themselves and reviewed the purpose and objectives for the Committee orientation web meeting. Desi Quinnonez, NQF project analyst, called roll to ascertain which Committee members were present.

Andrew Lyzenga, NQF senior director, reviewed the meeting objectives, including:

- Complete revisions to the Diagnostic Process and Outcomes Domain of the Measurement Framework
- Identify any remaining gaps in the environmental scan, if needed
- Agree on an approach to selecting Use Cases, and review suggested Use Cases
- Begin outlining Use Cases

Committee Discussion

The Committee reviewed a set of slides provided by Dr. David Newman-Toker, Committee co-chair. The slides proposed an approach to selecting the Use Cases and presenting their resolutions. These slides were revised from those presented during the Orientation call, in order to better align with the project objectives and the appropriate level of analysis of the given diagnostic errors. The Committee also agreed with Laura de Nobel, CMS Government Task Lead (GTL), who indicated that Use Cases should not be narrowly targeted to particular settings or clinicians, but rather be broadly applicable and with additional setting-specific considerations as needed (e.g., rural considerations). Likewise, the Use Cases are intended to be focused on a type of error, and not necessarily a particular condition; however, the clinical vignette and other descriptive/narrative elements of the application of the Use Cases will necessarily involve a specific condition.

Dr. Newman-Toker suggested choosing diagnostic errors with broad representation along multiple dimensions, including different patient demographics, disease groups, clinical settings, encounter types, adverse events, contributions and causes of the diagnostic error, and with differentials in the anticipated possible solutions. The Committee agreed to prioritize diagnostic errors that are clinically uncontroversial, relevant to public health, and with evidence-based solutions, including possible performance measures or measure concepts.

Mr. Lyzenga reviewed five possible "starting point" Use Cases, tied to a specific cause of diagnostic error and applicable to various conditions. Although only four Use Cases will be developed, a fifth was

included to help give the Committee additional options from which to choose. Each Use Case was analyzed in terms of its clinical context, diagnostic challenge, causal factors underlying the diagnostic error, potential solutions, and a particular case exemplar. The five Use Cases were: 1) information overload in complex, critically ill patients; 2) atypical clinical presentations of dangerous diseases; 3) failure to "close the loop" on diagnostic test results; 4) prolonged diagnostic odyssey for chronic symptoms; and 5) delayed screening for early manifestations of disease.

The Committee noted that the fifth Use Case, delayed screening, may be a somewhat challenging Use Case, as these may not be strictly diagnostic errors. Instead, delayed or missing screening may be due to factors outside of the control of the medical system. Others suggested that the "early manifestations" component of the use case may provide sufficient justification to consider this as a diagnostic error. The Committee suggested that missed diagnosis of iron deficiency may be an applicable example. Additionally, the fifth Use Case might be conflated with the third Use Case, where diagnostic results are not immediately followed up on. The Committee agreed the fifth Use Case would be rephrased, and applications to behavioral health may be considered.

Next Steps

Ms. Quinnonez presented next steps. NQF will host the third web meeting on December 11, 2019. The third web meeting will review a set of draft Use Cases, and finalize the outline for the same.