

# <u>Regionalized Emergency</u> <u>Medical Care Services:</u> Phase I

**Voting Webinar** 

Wednesday, September 28, 2011 4:00 p.m. to 5:00 p.m. EDT

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#### **Welcome and Introductions**

- Arthur Kellermann, MD, MPH, REMCS Steering Committee co-chair
- Timothy Ferris, MD, MPH, Co-Chair, NQF Consensus Standards Approval Committee
  - Eric Colchamiro, MPA, Project Analyst, NQF



#### **Project Overview**

• Mr. Colchamiro

#### Quality Enterprise Functions: Contributions of NQF





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## Steering Committee Roster



• Arthur Kellermann, MD (Co-Chair) University of Pennsylvania School of Medicine, Philadelphia, PA

• Andrew Roszak, JD, MPA, EMT-P (Co-Chair) HHS\HRSA, Rockville, MD (through September 23, 2011)

• Brendan Carr, MD, MA, MS University of Pennsylvania School of Medicine, Philadelphia, PA

• Arthur Cooper, MD, MS, FACS, FAAP, FCCM, FAHA Harlem Hospital Center, New York, NY

• John Fildes, MD, FACS, FCCM UNLV Medical Center, Las Vegas, NV

• Kristi Anne Henderson, DNP, NP-BC, FAEN University of Mississippi Medical Center, Jackson, MS

• Howard Kirkwood, MS, JD, EMPT-P, EFO National EMS Management Association, Wake Forest, NC

• John Kusske, MD University of California-Irvine Medical Center

• Thomas Loyacono, MPA, NREM T-P, CMO City of Baton Rouge & Parish of East Baton Rouge, Baton Rouge, LA

• **M. Allen McCullough, PhD** Fayette County Division of Public Safety, Fayette, GA • Ronald Maier, MD, FACS Harborview Medical Center, Seattle, WA

• Ricardo Martinez, MD, FACEP Emory University School of Medicine, Atlanta, GA

• Nick Nudell, BA, NREMT-P, CCEMT P FirstWatch Solutions, Inc., Encinitas, CA

• Jesse M. Pines, MD, MBA, MSCE George Washington University Medical Center

• Kathy Rinnert, MD, MPH, FAAP University of Texas Southwestern Medical Center, Dallas, TX

• Michael Sayre, MD The Ohio State University, Columbus, OH

• Robin Shivley, AA, EMT Michigan Department of Health, EMS, and Trauma Systems, Lansing, MI

• Gary Wingrove Mayo Clinic Medical Transport, Buffalo, MN

• Joseph Wright, MD, MPH, FAAP Children's National Medical Center, Washington, DC

Richard Zane, MD, FAAEM
Brigham Women's Hospital, Boston, MA

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## **REMCS** Project Overview



- Began November 2010
  - Funded under NQF's contract with the Department of Health and Human Services
- Project Deliverables:
  - <u>Environmental scan</u> fully developed or pipeline measures (completed Feb 2011)
  - <u>Measurement framework report</u> conceptual framework to guide measure development

## **REMCS Project Status**



- Member and public comment period has closed
- Comments have been addressed by Steering Committee
- Voting opens 9/28/11 for the framework being recommended for endorsement
- Report and comment table available on the project page

## Webinar Goals



This webinar:

- Provides opportunity for clarification prior to voting
- Provides information about requirements of the Steering Committee and how the framework was considered
- Audience Questions/Input?



#### Review of Process and Phase I Draft Framework Report, Comments Received and Committee's Response

• Dr. Kellermann

#### Framework Objectives



- Provide guidance to policymakers, healthcare leaders, and other key stakeholder toward a high-performing healthcare system
- Identifies critical gaps in measurement and as a springboard for defining performance metrics
- Signal what type (category, not clinical area) and where performance metrics are needed through use of EOC model and domains/subdomains



By analyzing the effectiveness of systems in place and identifying gaps in measurement of regionalized emergency medical care services, NQF aims to establish roadmap to systematic regionalization of emergency services at the national, state, and regional levels.

## **Committee Overarching Issues**



- Use of the Episodes of Care model
  - Based on patient experiences as they move through the system; yet "an individual's health care can not occur independent of established regionalized systems of emergency care."

- Set a path for cross-cutting measure development
  - Use of guiding principles

## **Committee Overarching Issues**



- Importance of domains (and subdomains):
- 1) Capability, Capacity, and Access
- 2) Recognition and Diagnosis
- 3) Resource Matching and Use
- 4) Medical Care
- 5) Coordination of Care
- 6) Outcomes

## Comments



- 43 comments from 22 organizations/individuals
  - Health Professionals: 7; Purchasers: 5; Public Health/Community:1; Health Plans: 2 Quality Measurement, Research, and Improvement:4; Providers: 6; Non-members: 18
- Comment Themes
  - Need to measure individual populations and systems can this be accomplished within the episodes of care model?
    - While limitations, best model for the framework purposes
  - Need to measure all aspects of regionalized emergency medical care systems - framework is meant to support individuals, populations, and systems;
    - Importance of developing structure, process, and outcome measures
    - Recognize concerns expressed about feasibility/cost of measure implementations
  - Need to clarify purpose and goals of the framework
    - "this framework does not contain a catalog or evaluation of specific measures. It does not introduce...specific performance measures, nor does it endorse or prioritize specific clinical areas or metrics for care."
    - Clearly articulating next steps

#### Impact of Comments



- Revisions to the report
  - Added sections to the executive summary and introduction to better emphasize purposes of REMCS framework
    - "The purposes of this framework for REMCS measurement are to guide the identification and subsequent improvement of performance measures and to identify where gaps exist in measures and measure concepts, thereby designating areas for future research and measure development."
  - Renamed and updated a section on systemness entitled: "Additional Importance of Measuring the Performance of Underlying Systems."
  - Changed the acronym from RECS to REMCS to address concerns about confusion of RECS with REC (Regionalized Extension Centers). This inclusion is consistent with the interchangeable use of "regionalized emergency medical care systems" and "regionalized emergency care systems" throughout the main body of the report.



#### NQF Public and Member Comment/ Question and Answer Session



#### **Next Steps**

• Mr. Colchamiro



#### Adjourn

#### Questions?



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