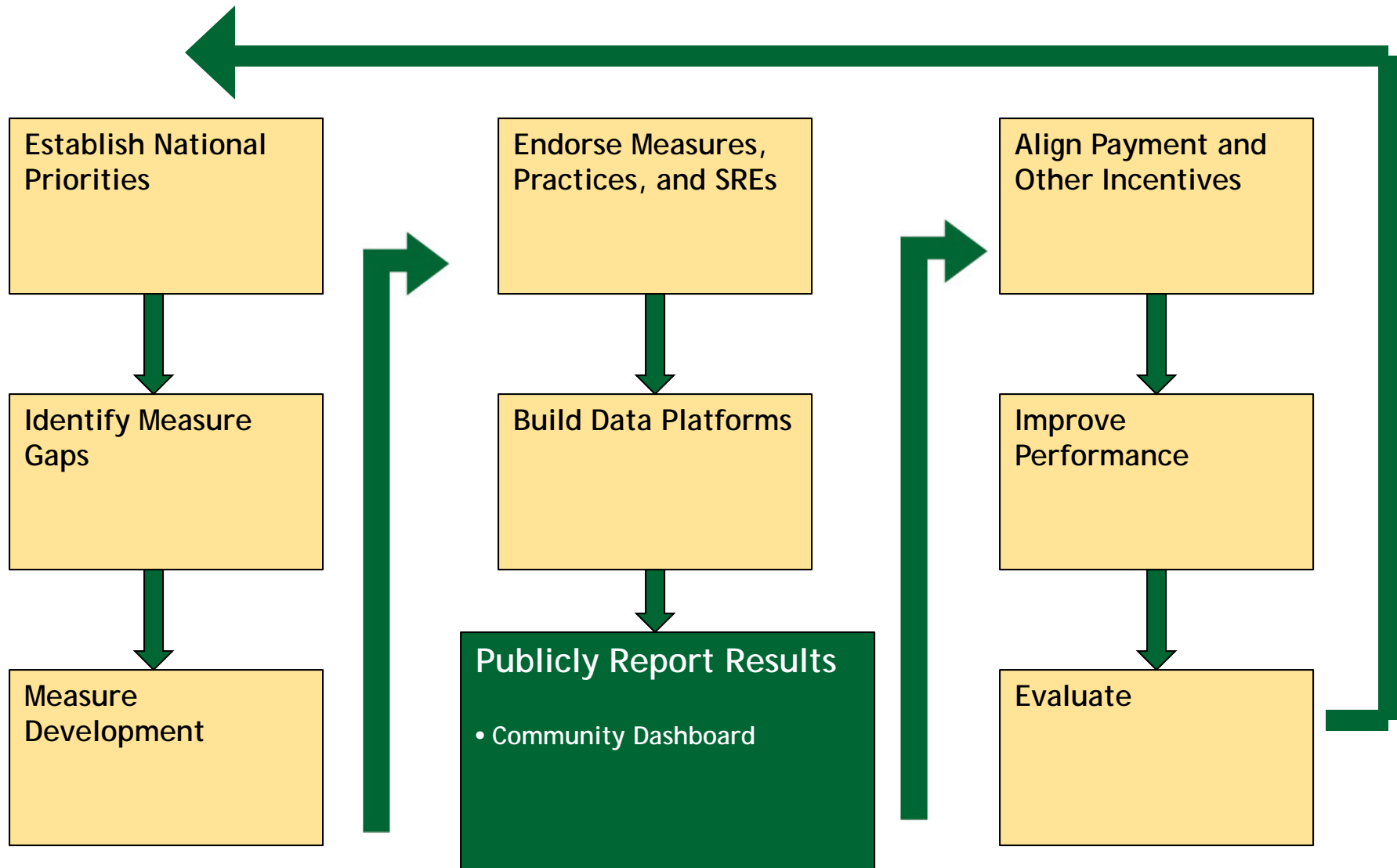


Community Public Reporting Dashboard

Workshop

October 12, 2010
9:00 am-4:30 pm ET

Quality Enterprise Functions: NQF Contributions



Why a Standardized Dashboard?

- Enables true quality comparisons of a core set of measures while providing community flexibility
- Gives consumers better information to make informed decisions

The charge of the Community Public Reporting Dashboard Workshop participants is to identify core domains and subdomains of a public reporting dashboard. Where possible, the group will also identify endorsed metrics.

Communities could then adapt around the core dashboard to reflect the issues specific to their constituents.

- Brief review of web meeting proceedings
- Discussion of key issues from web meeting
- Presentation of draft “core” dashboard from homework
- Selection of domains & subdomains for dashboard
- Brainstorm dashboard name
- Wrap-up and next steps

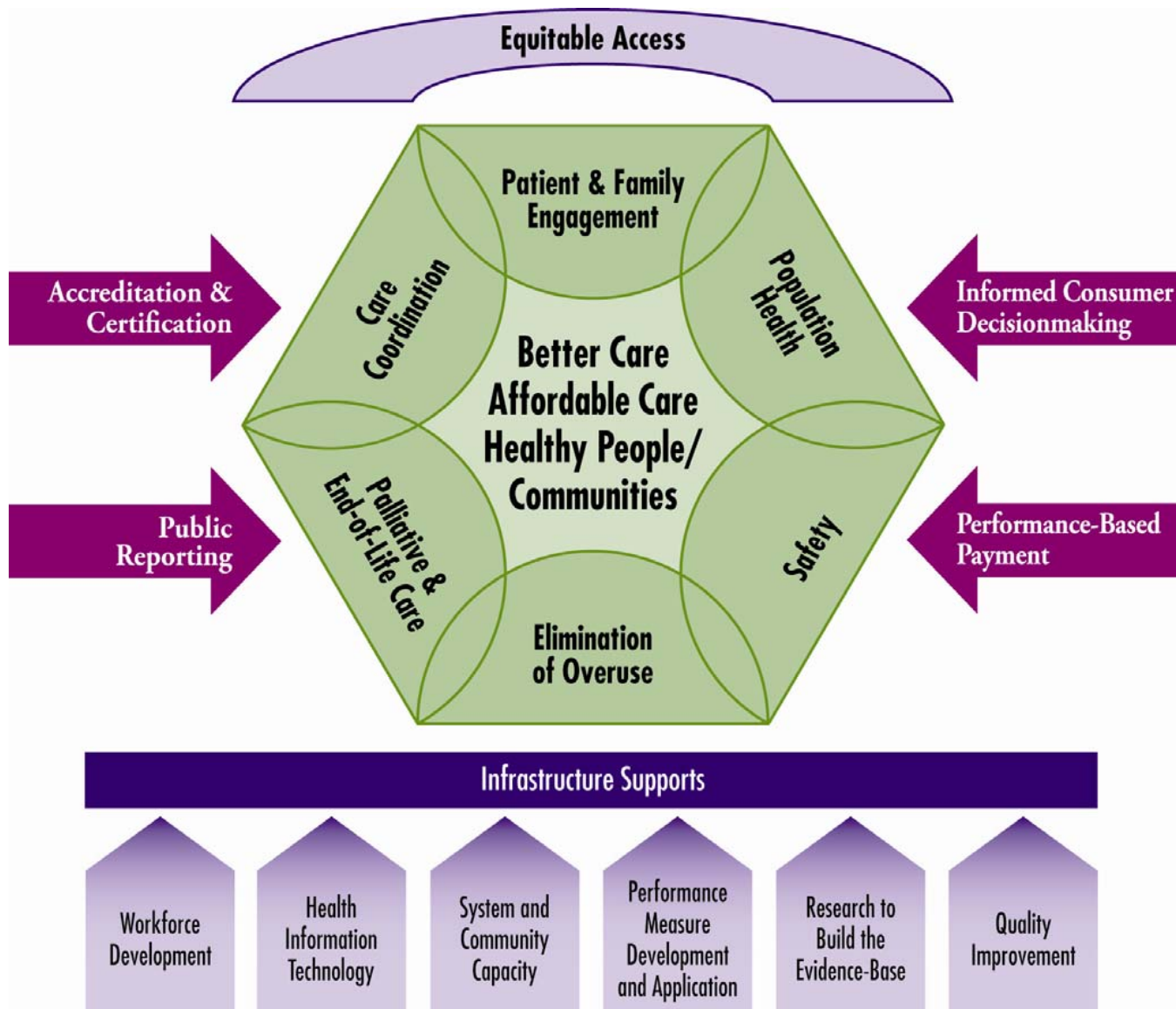
- “Right now” dashboard that can be implemented by communities in pilot program to begin early 2011
- “In the Future” dashboard that can be implemented by communities in three years

Questions & Discussion

- Is the scope of work for the group clear?

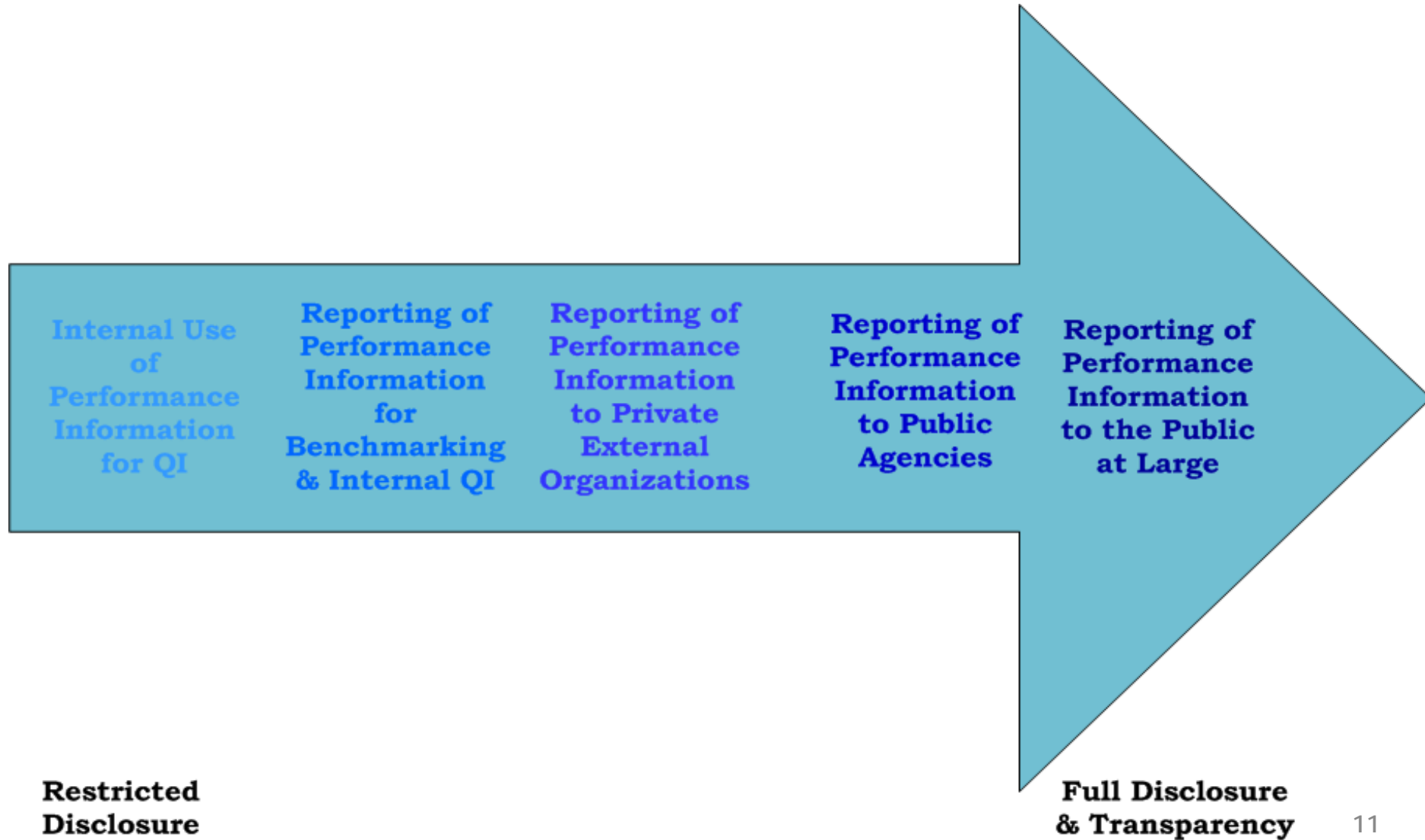
- Introduced the Community Public Reporting Dashboard project's charge and scope of work
- Laid the groundwork by talking about the NPP Priorities, the Episode of Care Framework, & the HHS-proposed national health strategy
- Discussed key issues that will impact the dashboard development
- Provided results of a public reporting environmental scan
- Asked participants to complete an initial voting exercise intended to help build a first cut dashboard

NPP Input to Secretary of HHS to Inform the National Strategy for Healthcare Quality



- Consumer-centric focus
- Accountability to inform consumers & purchasers
- Community-wide transparency

Continuum of Reporting Performance Results



- Standardization sets clear course
- Flexibility allows for innovation
- Result in a dashboard that is responsive to local markets & needs

- Outcomes
 - Most reporting on patient experience, safety outcomes, & mortality
 - Few on functional status & health-related quality of life
- Cost
 - Most reporting on utilization & cost of an episode
 - Few on total cost across an episode
- Population Health
 - Most reporting on preventive
 - Few on healthy lifestyles & social determinants
- Need for cross-setting measures

12 domains in rank order

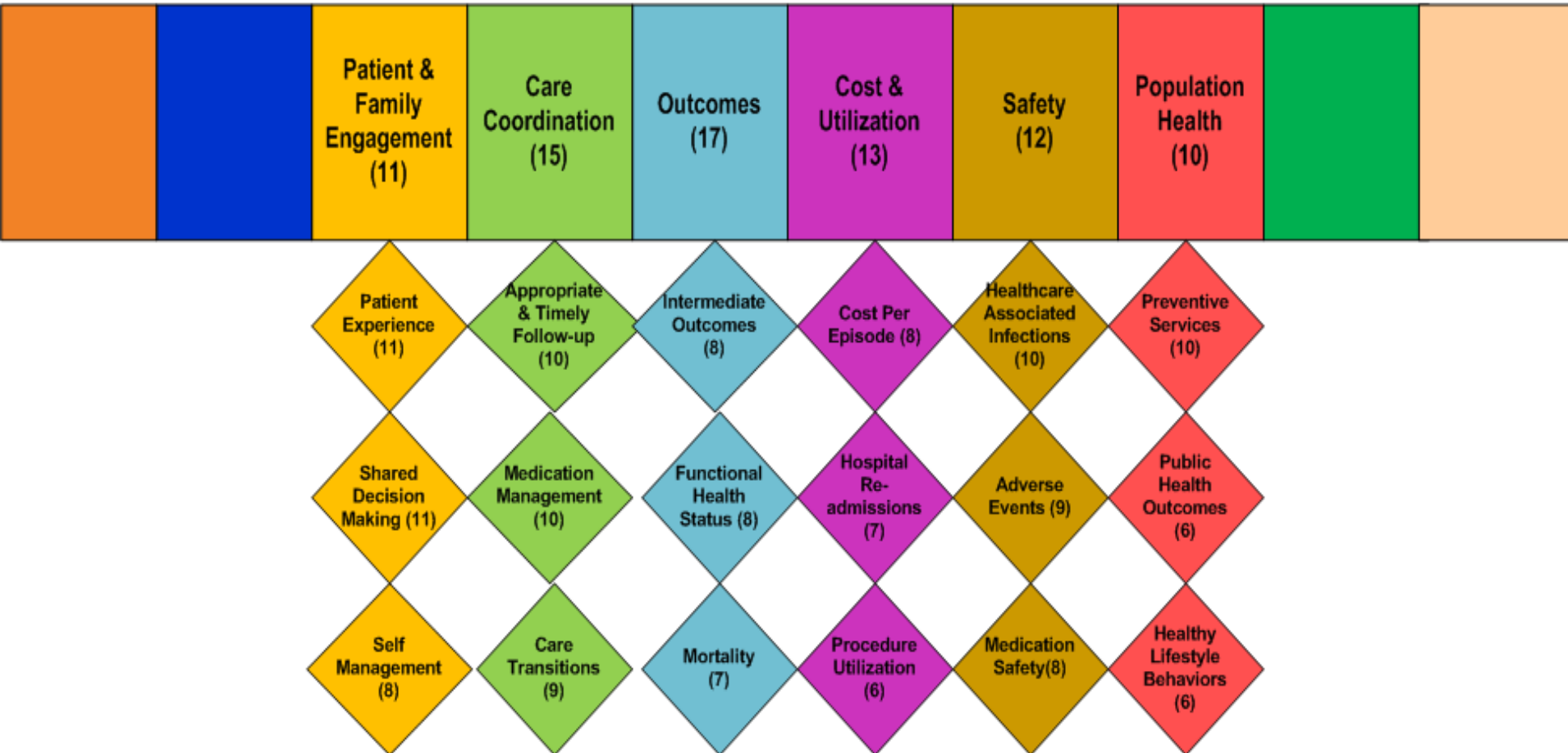
- Outcomes = 13 subdomains
- Care Coordination = 9 subdomains
- Cost & Utilization = 14 subdomains
- Safety = 7 sub-domains
- Patient & Family Engagement = 6 subdomains
- Population Health = 6 subdomains
- Process = 5 sub-domains
- Overuse = 9 sub-domains
- Access & Equity = 11 subdomains
- Structure = 3 sub-domains
- Palliative & End of Life = 4 subdomains
- Clinical Quality of Care = 3 subdomains

Example "Core" Dashboard

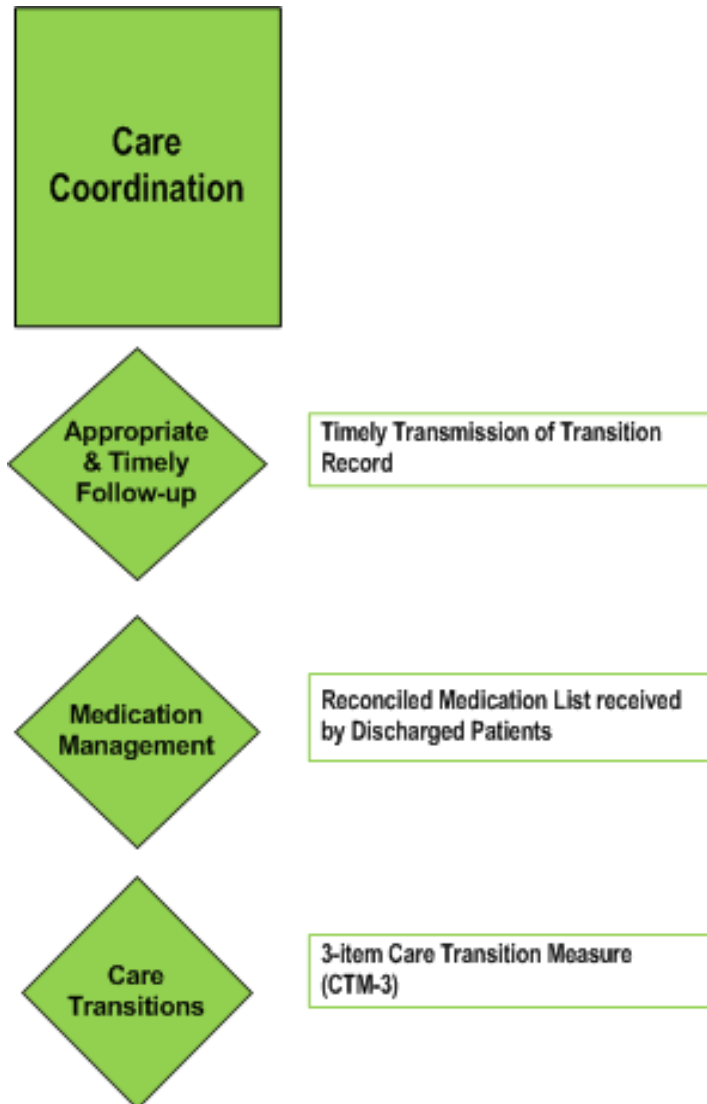
Future Dashboard Expansion



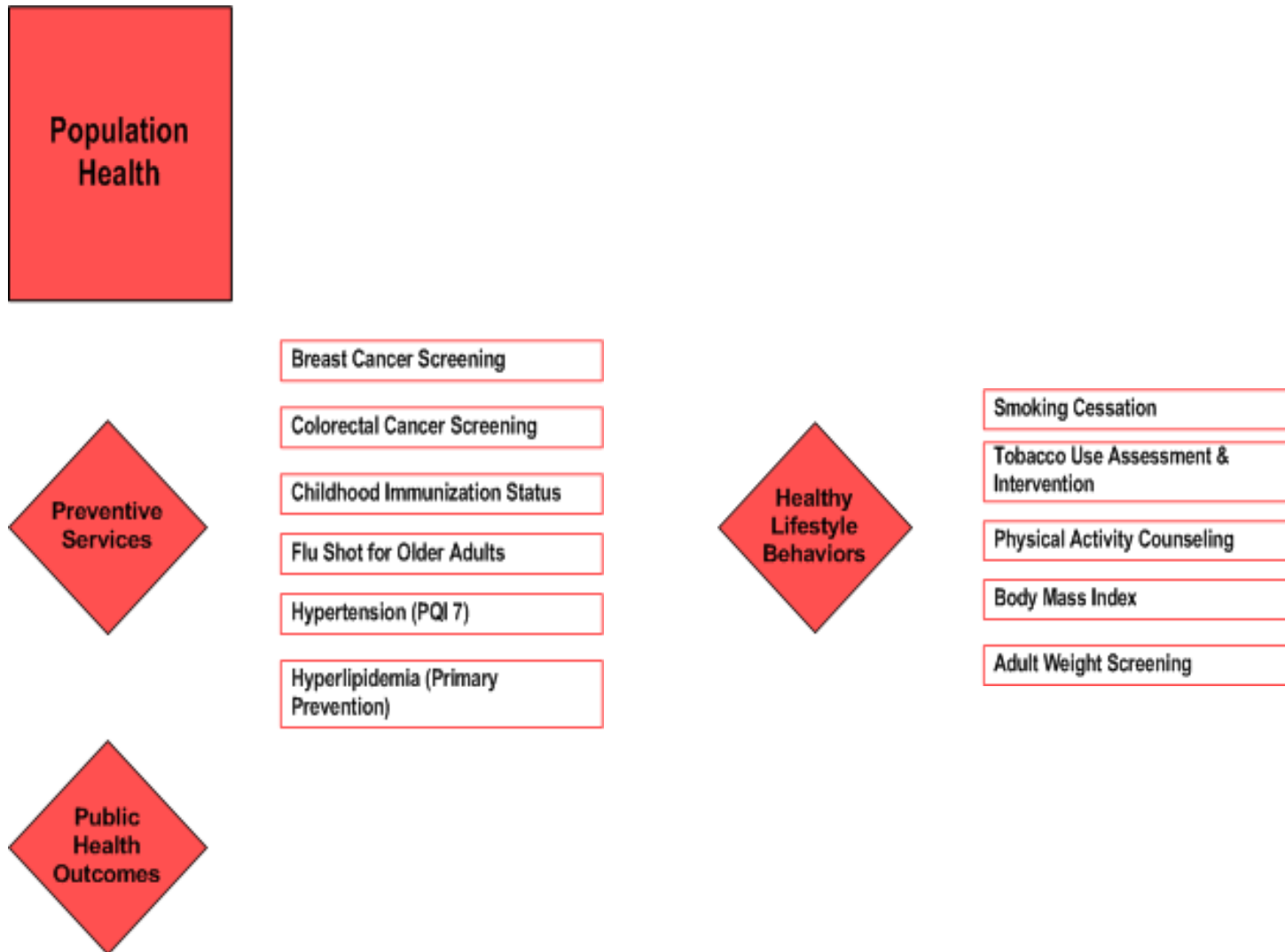
Flexibility for Additional Domains
Selected by Communities



Questions & Discussion



Potential Measure Example



Implications, Wrap-Up, and Next Steps

- Write-up of workshop results
- Pilot of “right now” dashboard with three communities
- Documentation of lessons learned from pilot

Final Questions?

Many thanks for your participation!

Any follow-up questions can be directed to: Christy Olenik at
colenik@qualityforum.org