



NATIONAL
QUALITY FORUM

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Workshop Materials

Mastering the Basics of Quality Measurement

Hosted by NQF Member Education

June 21, 2016

This packet includes:

- Agenda
- Draft slides

Please note: A follow-up packet of slides, additional resources, and handouts will be sent immediately after the event.

For questions, contact membereducation@qualityforum.org.



NATIONAL QUALITY FORUM

Mastering the Basics of Quality Measurement

Hosted by NQF Member Education

Tuesday, June 21, 2016

Stay Connected

Wifi username: **guest**

Wifi password: **NQFguest**

Tweet about this event: @NatQualityForum or #NQF

Learning Objectives

By the end of the day, participants will:

- (1) Know the basic terminology of quality measurement.
- (2) Understand the lifecycle of quality measurement.
- (3) Describe specific examples of how measures are used in the field (when, where, why and how).

Agenda

- | | |
|----------------|---|
| 8:30am | Breakfast and coffee
<i>Compliments of NQF Member Relations</i> |
| 9:00am | Introduction and Icebreaker
<i>Camille Espinoza, MSW, MSPH, Director, Member Education, NQF</i> <ul style="list-style-type: none">• Welcome and opening activity• Member recognition• Overview of objectives and agenda |
| 9:30am | Why is quality measurement important?
<i>Marcia Wilson, MBA, PhD, Senior Vice President, NQF</i> <ul style="list-style-type: none">• The bigger picture of quality improvement – why do we measure?• Measurement as a critical tool for improvement |
| 10:00am | Break |
| 10:15am | What is a quality measure?
<i>Debjeni Mukherjee, MPH, Senior Director, NQF</i> <ul style="list-style-type: none">• Parts of a measure: numerator, denominator and exclusions• Types of measures: structure, process, outcome• Incorporating the patient experience into measurement |

11:00am	Break
11:15am	What makes a great quality measure? <i>Karen Johnson, MS, Senior Director, NQF</i> <ul style="list-style-type: none"> • Scientific standards for measures • Evaluating measures within the appropriate context
12:15pm	Lunch <i>Compliments of NQF Member Relations</i> <ul style="list-style-type: none"> • Optional: join a roundtable conversation about NQF membership in Room B
1:00pm	What is the cycle of measurement? <i>Sarah Sampsel, MPH, Senior Director, NQF</i> <ul style="list-style-type: none"> • Concept and ideation • Measure development and testing • Implementation and monitoring • Maintenance
2:15pm	Break
2:30pm	How are measures used in the field? <i>Michael Phelan, MD, FACEP, Emergency Services Institute and Medical Director Quality Measurement and Reporting, Enterprise Quality, Cleveland Clinic</i> <ul style="list-style-type: none"> • Who uses measures • Example from emergency medicine: measuring door to balloon time • Q and A
3:15pm	Tying it all together and taking it home <i>Camille Espinoza, MSW, MSPH, Director, Member Education, NQF</i> <ul style="list-style-type: none"> • Closing activity
3:30pm	End

Mastering the Basics of Quality Measurement

Introduction and Icebreaker



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Camille Espinoza
Director, Member Education
National Quality Forum

June 21, 2016

WELCOME

TO NATIONAL QUALITY FORUM

Over 430 Members Strong

Introduction



Camille Espinoza, MSPH, MSW
Director, Member Education
National Quality Forum

No conflicts to disclose.

How Many Here Have...



Examples of Quality



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Audience Activity: Reflections on Quality

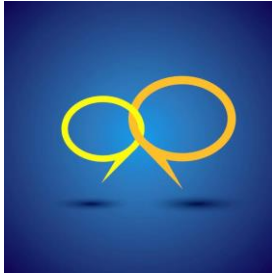


Put on your “quality lens” and look for quality

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Audience Activity: Reflections on Quality



- 1) Find another person at your table that you do not know
- 2) Introduce yourselves
- 3) Think back to the last time you or a loved one interacted with the health care system: where do you see quality, or not?

Quality and Measurement

How do we get to quality?

There is only one way: **Measurement!**



Quality and Measurement



Today's Objectives

By 3:30pm today, you will:

- Know the basic terminology of quality measurement
- Understand the lifecycle of quality measurement
- Describe specific examples of how measures are used in the field (when, where, why, and how)



Agenda and Housekeeping

Today's packed agenda includes:

- Learning from five quality experts
- Plenty of interactive activities
- Ample time for breaks and networking
- Opportunity to earn continuing medical education credits



Obtaining Continuing Education Credits

- Has been approved for **4.5 hours** of prescribed credits by the American Academy of Family Physicians
- AAFP credits are recognized by many other organizations – check with your professional society or licensing board
- At the end, you can pickup your certificate of completion
- Exclusive benefit for NQF Members



Mastering the Basics of Quality Measurement

What Is a Quality Measure?



Debjani Mukherjee
Senior Director, Quality Measurement

June 21, 2016

Featured Speaker



Debjani Mukherjee
Senior Director,
Quality Measurement
National Quality Forum

No conflicts to disclose

Session Objectives

By the end of this session, participants will be able to:

- Name the main components of a performance measure
- Identify at least three different types of measures, and describe the differences between them
- Describe how the patient experience can be incorporated into measurement



What Do We Mean by Measurement?



Meas•ure

n. A standard: a basis for comparison; a reference point against which other things can be evaluated; “they set the measure for all subsequent work.”

v. To bring into comparison against a standard.*

*Source: [*The ABC's of Measurement*](#)

What Is a Healthcare Performance Measure?

Healthcare performance measures are tools used to **quantify** the quality or cost of care provided to patients and their families.

They allow us to **gauge** the quality of care that is provided and help us understand whether and how much improvement activities **improve** care and outcomes .



What Are the “Key Ingredients” of a Measure?

To understand a measure, we need to know :

- **What** should happen?
- **Who** is the target group?
- **Where** should it take place?
- **When** should it take place?
- **How** should it occur?
- What, Who, Where, When, & How should **NOT** be measured?

“Measure specifications” is the term used to describe how to build and calculate a measure

How is a Measure Calculated?

Numerator

People who actually receive the action

Denominator – Exclusions

People who are eligible to receive the action (such as treatment or screening)

People who are not eligible for the action for specific, defined reasons

What Are The Types of Healthcare Performance Measures?

- A. Structure
- B. Process
- C. Outcome
 - i. Intermediate clinical outcomes
 - ii. Health outcomes (mortality, complications, etc.)
 - iii. *Patient-reported outcomes* (experience, functional status, engagement, quality of life, etc.)
- D. Resource use
- E. Efficiency

Types of Performance Measures To Be Discussed

- A. Structure
- B. Process
- C. Outcome
 - i. *Patient-reported outcomes* (experience, functional status, engagement, quality of life, etc.)

Structure Measures

What do structure measures do?

- Assess healthcare infrastructure
- Reflect conditions in which providers care for patients
- Provide valuable information about institutional capacity, staffing and the volume of procedures performed by a provider

Examples of structure measures:

- Nursing care hours per day per patient
- Adoption of medication e-prescribing



Table Activity

What are examples of **structure** measures for these clinical areas? Measures can be about prevention, treatment, or anything else related to the topic.



Influenza: Tables 1-2



Breast cancer: Tables 3-4



30-day hospital readmissions : Tables 5-6

Examples of Structure Measures



Influenza

- How many doses of the flu vaccine are available?
- How many qualified vaccine providers are there within a geographic area?



Breast cancer

- How many hospitals within a geographic area have digital mammography machines?
- How many qualified radiologists are within a geographic area?



30-day hospital readmissions

- How many nursing hours per patient in the intensive care unit?

Process Measures

What do process measures do?

- Assess steps that should be followed to provide good care
- Show whether steps proven to benefit patients are followed correctly by a provider

Examples of process measures:

- Documentation and verification of current medications and dosages in the medical record
- Initial antibiotic received within 6 hours of hospital arrival for patients with pneumonia
- Screening (cervical cancer) rates



Table Activity

What are examples of **process** measures for these clinical areas? Measures can be about prevention, treatment, or anything else related to the topic.



Influenza: Tables 1-2



Breast cancer: Tables 3-4



30-day hospital readmissions : Tables 5-6

Examples of Process Measures



Influenza - How many adults got the flu shot immunization during a certain time period? (NQF #0039)

Numerator

People who received the flu shot

Denominator – Exclusions

People who are eligible to receive the flu shot

People who could not receive the shot for medical reasons

Examples of Process Measures



Breast cancer - How many eligible women received a mammogram? (NQF #2372)

Numerator

Women who received a mammogram

Denominator – Exclusions

Women who should have received a mammogram

Women who cannot receive a mammogram due to history of mastectomy

Examples of Process Measures



30-day hospital readmissions - How many patients received a discharge plan?

Numerator

People who received a discharge plan

Denominator – Exclusions

People who were discharged during the measurement time period

People who left the hospital early, before discharge

Outcome Measures

What do outcome measures do?

- Assess the *results* of healthcare, not the inputs or processes
- Assess endpoints like well-being, ability to perform daily activities, or death

Examples of outcome measures:

- Injury during a hospital stay
- Infections following surgery
- Blood pressure under control
- Mortality rate after heart attack



Table Activity

What are examples of **outcome** measures for these clinical areas?
Measures can be about prevention, treatment, or anything else related to the topic.



Influenza: Tables 1-2



Breast cancer: Tables 3-4



30-day hospital readmissions : Tables 5-6

Examples of Outcome Measures



Influenza - How many adults within a geographic area got the flu?

Numerator

People who got the flu

Denominator — Exclusions

People who could have gotten the flu

People who did not spend the entire measurement year living in the geographic area

Examples of Outcome Measures



Breast cancer - How many women with breast cancer no longer have evidence of cancer (remission), five years after diagnosis?

Numerator

Women whose breast cancer is in remission during the specified time period

Denominator – Exclusions

Women with history of breast cancer

Women without a documented follow up visit five years after diagnosis

Examples of Outcome Measures



30-day hospital readmissions - How many patients were readmitted within 30-days of discharge?

Numerator

People who were readmitted to the hospital within 30 days

Denominator – Exclusions

People who were discharged in the last 30 days

People who returned to the hospital for an unrelated issue

How Are Measures Used?



Internal QI **Versus** Accountability

Quiz Game: What Type of Measure is This?

This measure asks: what percentage of people with diabetes had at least two prescriptions for a statin medication, in a 12 month period?

- a. Structure
- b. Process
- c. Outcome



Quiz Game: What Type of Measure is This?

This measure asks: what percentage of patients with a serious mental illness were screened for unhealthy alcohol use during their healthcare visit?

- a. Structure
- b. Process
- c. Outcome



Quiz Game: What Type of Measure is This?

This measure asks: has the provider adopted a qualified e-prescribing system?

- a. Structure
- b. Process
- c. Outcome



Quiz Game: What Type of Measure is This?

This measure asks: of the patients admitted to a hospital for stroke, what percentage died during that hospital stay?

- a. Structure
- b. Process
- c. Outcome



Quiz Game: What Type of Measure is This?

This measure asks: how many children have had a toothache, decay, or cavities in the past 6 months?

- a. Structure
- b. Process
- c. Outcome



Quiz Game: What Type of Measure is This?

This measure asks: what percentage of work hours do nurses spend tending to residents in a nursing care facility? This is reported in number of hours spent per resident per day.

- a. Structure
- b. Process
- c. Outcome



Incorporating the Patient Perspective



- Surveys & Tools
- Importance
- Translation of Patient Reported Experience into Measurement



Mastering the Basics of Quality Measurement

Why is quality measurement
important?



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Marcia Wilson
Senior Vice President
National Quality Forum

June 21, 2016

Introduction

Marcia Wilson, MBA, PhD
Senior Vice President, Quality Measurement
National Quality Forum

No conflicts to disclose.

Session Objectives

By the end of this session, participants will:

- Understand where measurement fits into the bigger picture of quality improvement
- Recognize the importance of measurement as a vital tool for improvement



Where We Have Been—The Journey to Quality

'95

'00

'10

EARLY 1990's
Healthcare Effectiveness Data and Information Set (HEDIS)

1998
Report from President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry.

GOOGLE LAUNCHES

1999
NQF launches in September
Institute of Medicine publishes *To Err is Human*

2001
Institute of Medicine publishes *Crossing the Quality Chasm*

2004
CMS value-based purchasing

FACEBOOK LAUNCHES

TWITTER LAUNCHES

2010
Patient Protection and Affordable Care Act

Growth of value-based purchasing



qual·i·ty *noun*

Character with respect to fineness, or grade of excellence.

Quality is how good something is. For healthcare, it is often expressed in a range. When a person receives high-quality healthcare, he or she has received the right services, at the right time, and in the right way to achieve the best possible health.

meas·ure *verb*

To estimate the relative amount, value, etc., of, by comparison with some standard.

meas·ure *noun*

The extent, dimensions, quantity, etc., of something, ascertained especially by comparison with a standard.

Healthcare performance measurement tells you whether the healthcare system does what it should.

Improvement Models

Plan, Do, Study, Act (PDSA) Cycle

1. What are you trying to accomplish?
2. How will you know a change is an improvement?
3. What change can be made to result in an improvement?



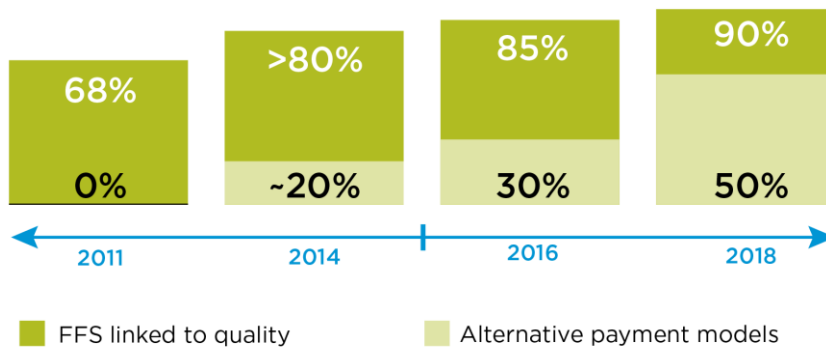
val·ue *noun*

Equivalent worth or return in money, material, services, etc.

The value of healthcare is subjective. It weighs costs against the health outcomes achieved, including patient satisfaction and quality of life.

CMS: From Volume to Value

All Medicare Fee-For-Service (FFS) payments



Q and A

Comments? Questions?



THANK YOU

Mastering the Basics of Quality Measurement

What Makes a Great Measure?



Karen Johnson
Senior Director, Quality Measurement, NQF

June 21, 2016

Featured Speaker



Karen Johnson
Senior Director, Quality Measurement
National Quality Forum

No conflicts to disclose

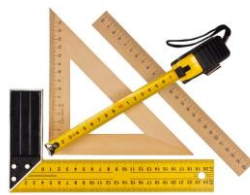
Session Objectives

By the end of this session, participants will:

- Be able to identify **12** qualities that make a measure “great”



Why Do We Measure?



The primary goal of healthcare performance measurement is to **improve the quality of healthcare** received by patients (and ultimately, to **improve health**)

*Measurement is a quality improvement tool,
not an end in and of itself*

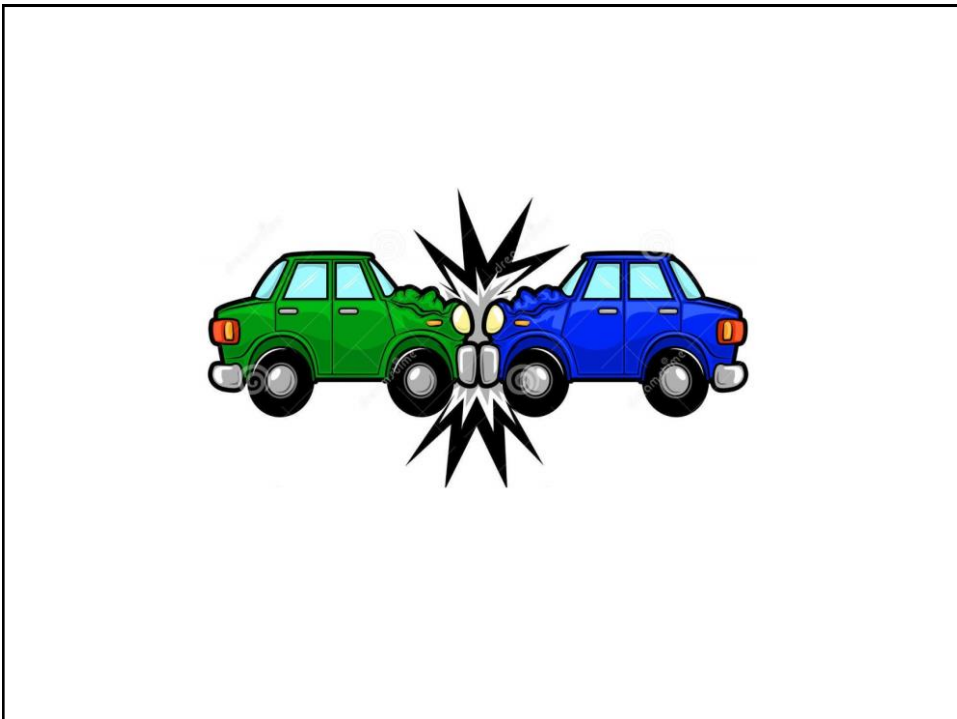
Activity:
Group cards, then arrange

5

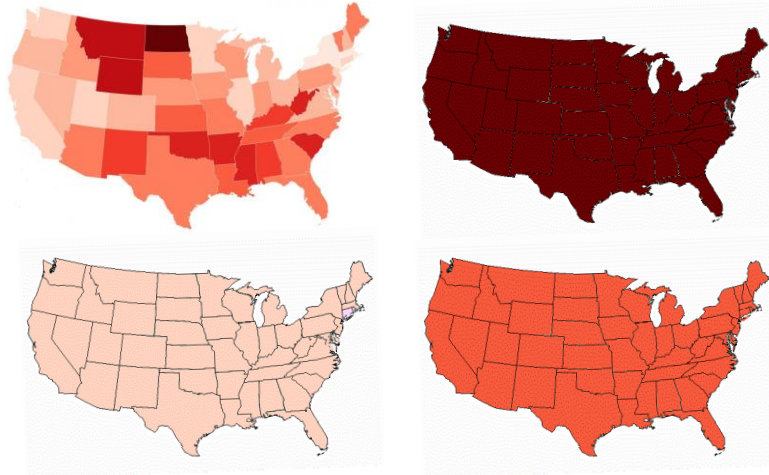


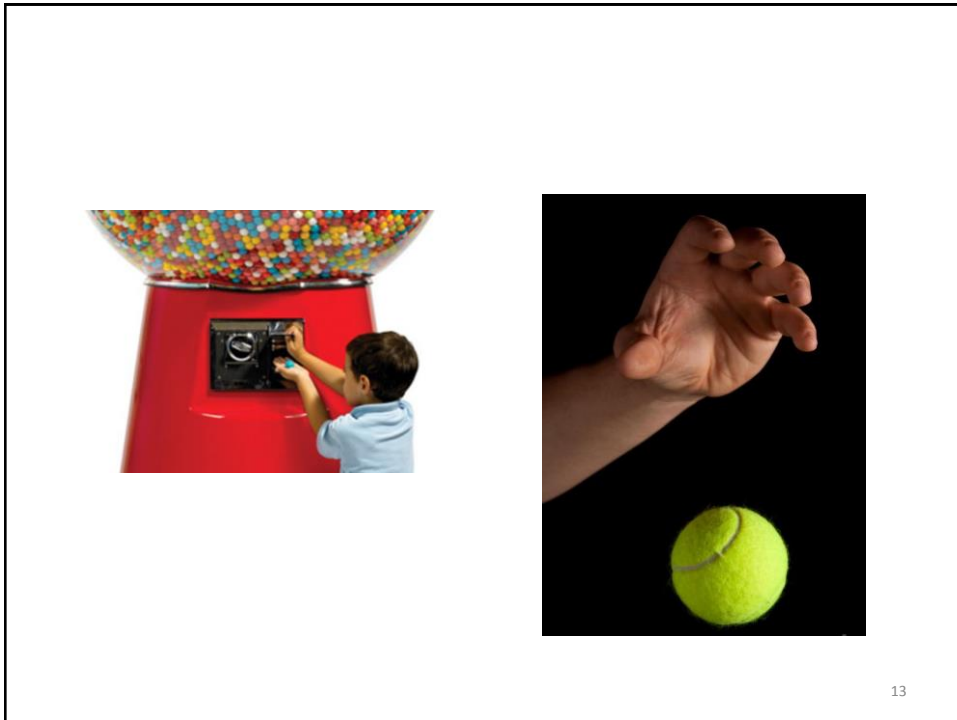
**9 out of 10 dentists
recommend Crest!**





Car crash deaths per 100,000 population





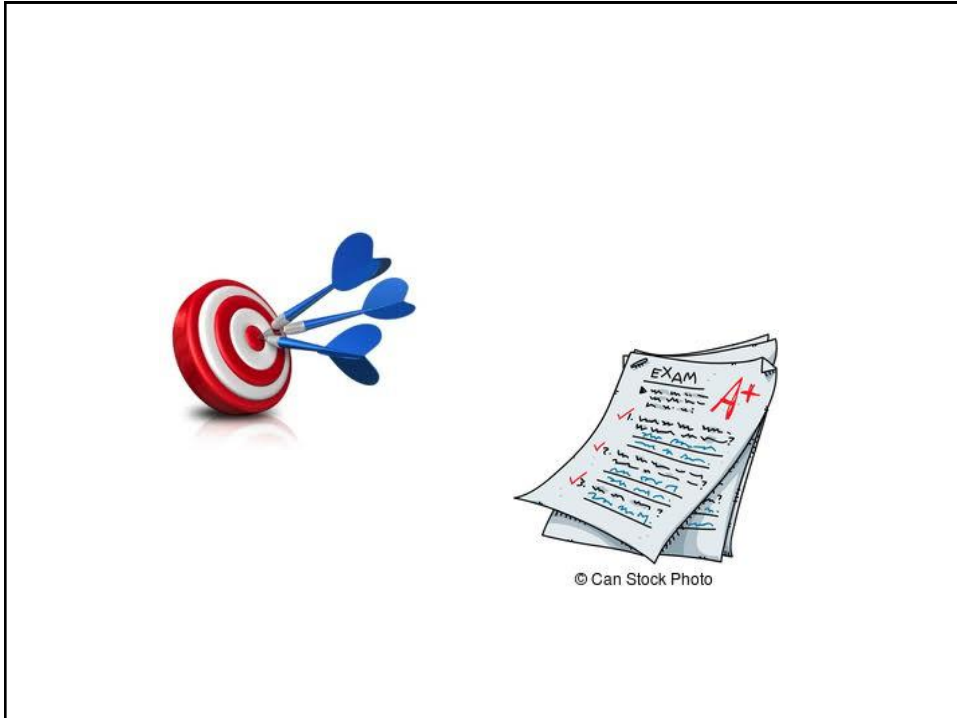
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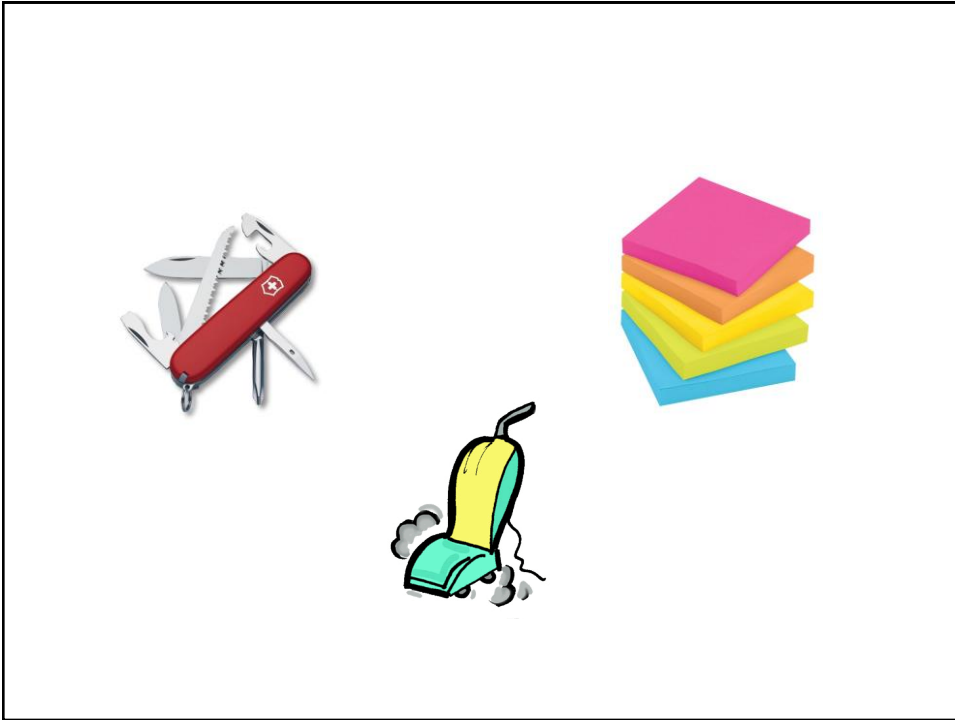


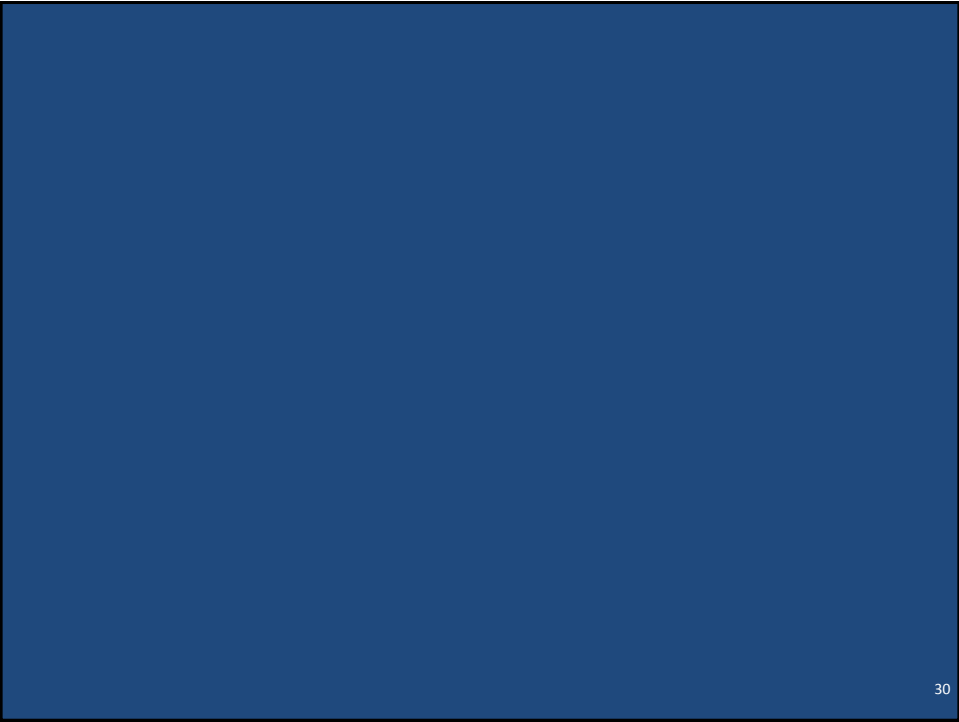
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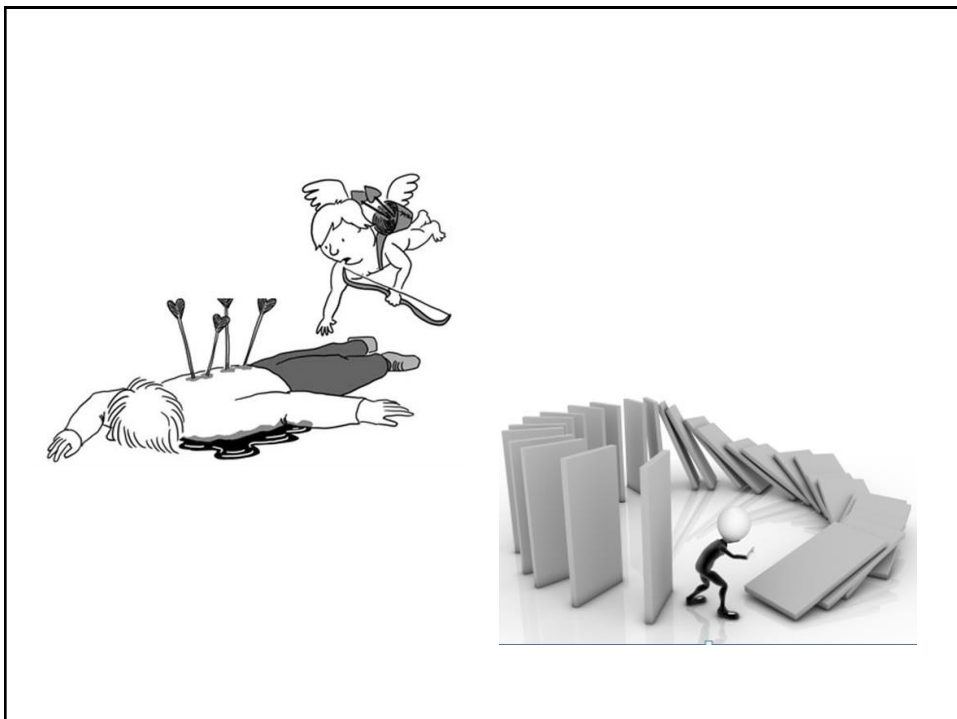
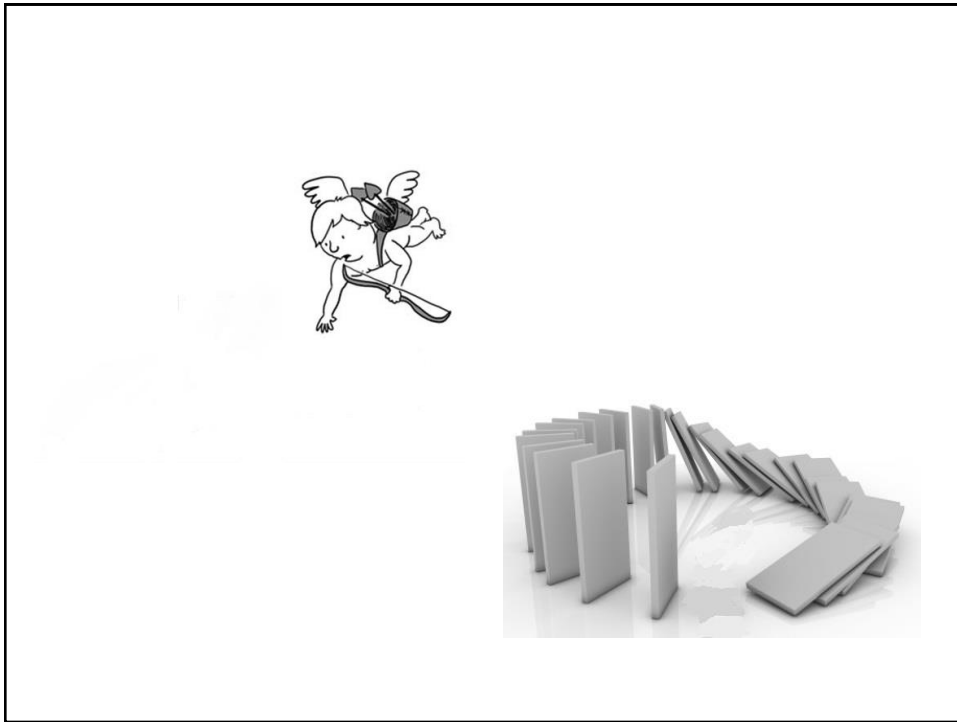














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Fun!!

*But what does all this have
to do with great
performance measures???*

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What Makes a Great Measure? NQF's Measure Evaluation Criteria



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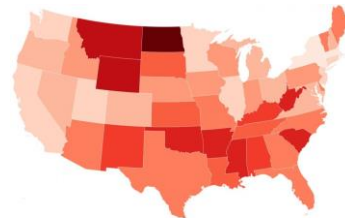
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What Makes a Great Measure? NQF's Measure Evaluation Criteria



1 IMPORTANCE TO MEASURE AND REPORT

✓ **Opportunity for Improvement**



✓ **Evidence**



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What Makes a Great Measure? NQF's Measure Evaluation Criteria



1 IMPORTANCE TO MEASURE AND REPORT



2 SCIENTIFIC ACCEPTABILITY OF MEASURE PROPERTIES



3 FEASIBILITY



4 USABILITY AND USE



5 ASSESS RELATED AND COMPETING MEASURES

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What Makes a Great Measure? NQF's Measure Evaluation Criteria

✓ Repeatable



2 SCIENTIFIC ACCEPTABILITY
OF MEASURE PROPERTIES

✓ Distinguish differences



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What Makes a Great Measure? NQF's Measure Evaluation Criteria

✓ Accurate



✓ Correct



2 SCIENTIFIC ACCEPTABILITY
OF MEASURE PROPERTIES

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What Makes a Great Measure? NQF's Measure Evaluation Criteria

✓ Exclusions



- ✓ Risk-adjustment
- ✓ Meaningful differences
- ✓ Comparability



✓ Missing data



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What Makes a Great Measure? NQF's Measure Evaluation Criteria



1 IMPORTANCE TO MEASURE AND REPORT



2 SCIENTIFIC ACCEPTABILITY OF MEASURE PROPERTIES



3 FEASIBILITY



4 USABILITY AND USE



5 ASSESS RELATED AND COMPETING MEASURES

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What Makes a Great Measure? NQF's Measure Evaluation Criteria

✓ Burden



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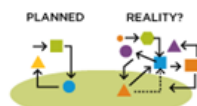
What Makes a Great Measure? NQF's Measure Evaluation Criteria



1 IMPORTANCE TO MEASURE
AND REPORT



2 SCIENTIFIC ACCEPTABILITY
OF MEASURE PROPERTIES



4 USABILITY AND USE



5 ASSESS RELATED AND
COMPETING MEASURES

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What Makes a Great Measure? NQF's Measure Evaluation Criteria

✓ Useful



✓ Unintended consequences



✓ Improvement



4 USABILITY AND USE

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What Makes a Great Measure? NQF's Measure Evaluation Criteria



1 IMPORTANCE TO MEASURE
AND REPORT



2 SCIENTIFIC ACCEPTABILITY
OF MEASURE PROPERTIES



3 FEASIBILITY



4 USABILITY AND USE



5 ASSESS RELATED AND
COMPETING MEASURES

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What Makes a Great Measure? NQF's Measure Evaluation Criteria

✓ **Similar**



✓ **Identical**



What Makes a Great Measure? NQF's Measure Evaluation Criteria



1 IMPORTANCE TO MEASURE
AND REPORT



2 SCIENTIFIC ACCEPTABILITY
OF MEASURE PROPERTIES



3 FEASIBILITY



4 USABILITY AND USE



5 ASSESS RELATED AND
COMPETING MEASURES

NQF's Measure Evaluation Criteria

1. **Importance to measure and report (must-pass)**
 - 1a. Evidence to Support the Measure Focus (must-pass)
 - 1b. Performance Gap, including disparities (must-pass)
 - 1c. For composite measures: quality construct and rationale (must-pass)
2. **Scientific acceptability of measure properties (must-pass)**
 - 2a. Reliability [includes additional subcriteria] (must-pass)
 - 2b. Validity [includes additional subcriteria] (must-pass)
 - 2c. Disparities (addressed in 1b)
 - 2d. For composite measures: empirical analysis supporting composite construction (must-pass)
3. **Feasibility**
 - 3a. Required data elements routinely generated and used during care delivery
 - 3b. Availability in electronic health records or other electronic sources OR a credible, near-term path to electronic collection is specified
 - 3c. Data collection strategy can be implemented
4. **Usability and Use**
 - 4a. Accountability and Transparency
 - 4b. Improvement
 - 4c. The benefits to patients outweigh evidence of unintended negative consequences to patients
5. **Comparison to Related or Competing Measures**
 - 5a. Measure specifications are harmonized OR differences are justified
 - 5b. Superior measure is identified OR multiple measures are justified

Sources for Clipart and Pictures

- <https://www.youtube.com/watch?v=CQUWtdnx2gQ>
- <http://www.kanyetothe.com/forum/index.php?topic=5197977.0>
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Mastering the Basics of Quality Measurement

Understanding the Measure Lifecycle



Sarah Sampsel, MPH
Senior Director
National Quality Forum

June 21, 2016

Introduction



Sarah Sampsel, MPH
Senior Director, Quality Measurement
National Quality Forum

No conflicts to disclose.

Session Objectives

By the end of this session, participants will:

- Be able to identify the key stages of measure development
- Understand how the stages of the measure lifecycle are continuous and essential for sustainability



Session Goal: Understand the Principles of Sustainable Measurement (Lifecycle)

- Brief overview of the importance of a measure lifecycle
- Stage 1: Conceptualization
 - Group Discussion – What do we want to measure?
- Stage 2: Development and Testing
 - Group Discussion – What goes into defining each aspect of a specification? What does “our” measure look like? What do we want to gain from testing?
- Stage 3: Implementation
 - Group Discussion – What do we need to know about implementation plans? Challenges/Opportunities?
- Stage 4: Use, Monitoring and Maintenance
 - Group Discussion – What tools are used for assessing use, monitoring and measure maintenance? What do we want to consider once a measure has been implemented?
- Final Questions and Discussion

Debjani discussed “What is a Measure....”



Meas•ure

n. A standard: a basis for comparison; a reference point against which other things can be evaluated; “they set the measure for all subsequent work.”

v. To bring into comparison against a standard.*

Karen discussed “What Makes a Great Measure?” NQF’s Measure Evaluation Criteria



**1 IMPORTANCE TO MEASURE
AND REPORT**



**2 SCIENTIFIC ACCEPTABILITY
OF MEASURE PROPERTIES**



3 FEASIBILITY

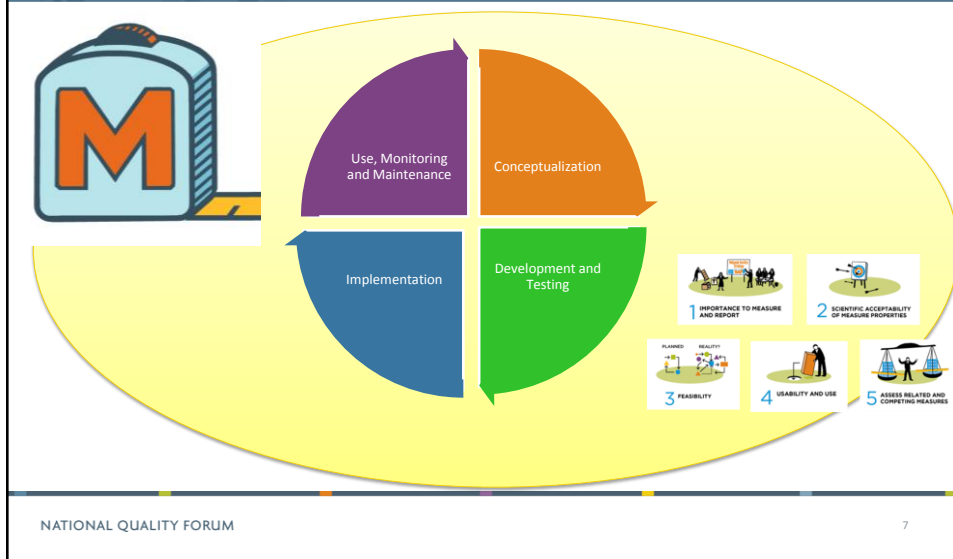


4 USABILITY AND USE



**5 ASSESS RELATED AND
COMPETING MEASURES**

Continuing the Discussion...Understanding the Quality Measurement Lifecycle

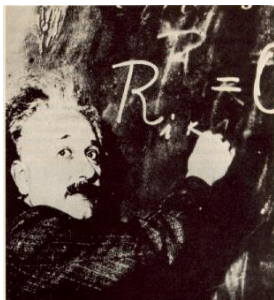


The Quality Imperative

Not everything that counts can be counted, and not everything that can be counted counts

~Albert Einstein

(William Bruce Cameron)



But.....

You can't improve what you don't measure

~ W. Edwards Deming

Conceptualization



9

Measure Conceptualization: Steps



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National Quality Strategy

Better Care

**Healthier People,
Healthier Communities**

Smarter Spending

PRIORITIES

Make care safer by reducing harm caused in the delivery of care.

Strengthen person and family engagement as partners in care.

Promote effective communication and coordination of care.

Promote effective prevention and treatment of chronic disease.

Work with communities to promote best practices of healthy living.

Make care affordable.

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- Life expectancy
- Well being
- Overweight and obesity
- Addiction behavior
- Unintended pregnancy
- Healthy communities
- Preventive services
- Care access
- Patient safety
- Evidence based care
- Care match with patient goals
- Personal spending burden

Clinical/Medical Evidence: Knowing the Difference Between Guidelines and Measures

- National, trusted sources – rate evidence and develop guidelines
 - Guidelines--indicate what to do, based on the best evidence, to achieve the desired result
 - Measures--indicate what result you have achieved (threshold, bands, absolute values)
 - Indicator
 - Fully developed measure
- The progression from evidence to fully developed measure is NOT assured

Resource: Clinical/Medical Evidence

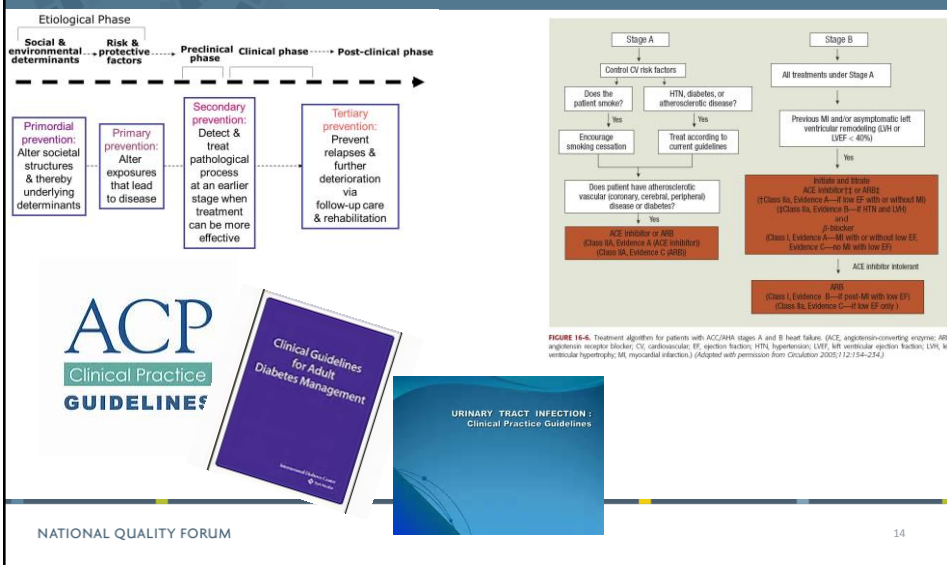


FIGURE 16-6. Treatment algorithm for patients with ACC/AHA stages A and B heart failure. (ACE, angiotensin-converting enzyme; ARB, angiotensin receptor blocker; CV, cardiovascular; EF, ejection fraction; HTN, hypertension; LVEF, left ventricular ejection fraction; LVH, left ventricular hypertrophy; MI, myocardial infarction.) (Adapted with permission from Circulation 2005;112:154-234.)

General Purposes of Quality Measures (Marcia discussed this....)



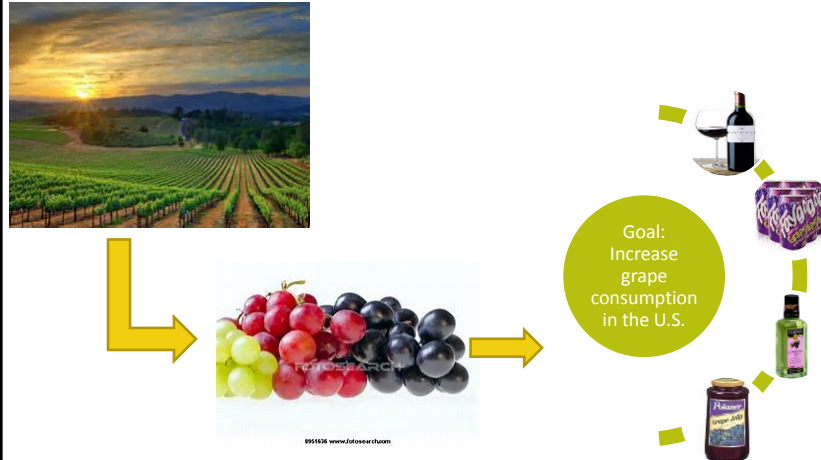
- Quality Improvement
 - Promote understanding of a quality problem, provide motivation for change, and establish a basis for comparison across institutional units or over time.
 - Baseline results also enable prioritization of areas for quality improvement.
- Accountability
 - Use in purchaser and/or consumer decision making, variation in payment in relation to the level of performance and/or certification of professionals or organizations.
 - » The requirements for validity and reliability are higher when using measures for accountability.
- Research
 - Develop or produce new knowledge about the health care system that is generalizable to a wide range of settings and valuable in setting health policy.
 - » Quality-of-care research is often conducted to evaluate programs and assess the effect of policy changes on health care quality.

Measures Have a Beginning...

Questions to answer during conceptualization:

- Who has funded the work? What are the objectives for measure development?
- Who is going to use the measure?
 - Will they feel the measure will add value?
- Are there other measures that are addressing the same issue?
- Is there sufficient evidence to support moving a concept forward?
- Is there opportunity for improvement?
- How is the measure going to be used?

Assignment: Assess the potential for developing a measure for the U.S. Grape Growers Association



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Small Group Exercise

Answer the following in your groups:

- 1-3 ideas of process measures that could lead to increased grape consumption
- 1-3 ideas of outcome measures that could lead to increased grape consumption
- How would you support the importance criterion?
- What is your evidence for gap or opportunity for improvement?
- How will you incorporate consumer input?
- Who is going to use the measure?

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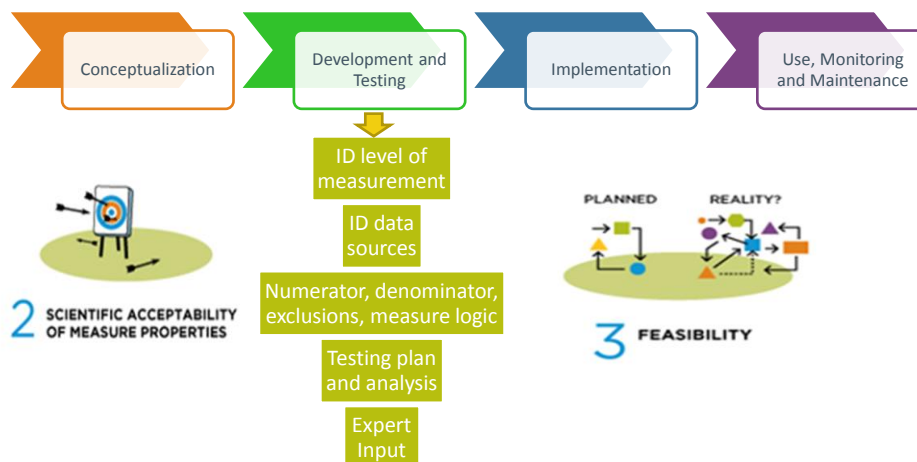
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Development and Testing



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Development and Testing: Steps



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Big Picture: Pilot Testing

- Pilot testing: small scale implementation of a quality measure
 - Allows assessment of the effectiveness of the measure specification prior to finalization and implementation
 - May consist of an alpha test (qualitative input)
 - Beta testing (data collection and analysis of proposed measure specifications and logic)
- Opportunity to identify challenges
- Opportunity to empirically test (reliability and validity) and refine measure
- Reconvene TEP to review pilot test results and assess face validity

What can testing tell us about a quality measure?

- Is it feasible to collect?
 - Is the data available?
 - What are the costs? Resource impacts?
- Is there room for improvement (i.e., gap and variation)?
- Can the measure be consistently implemented across entities?
- Is the measure logic clear? Do adjustments need to be made?
- Is the measure actually assessing what we wanted it to assess?

Full Group Discussion: Which grape consumption measure will we develop?

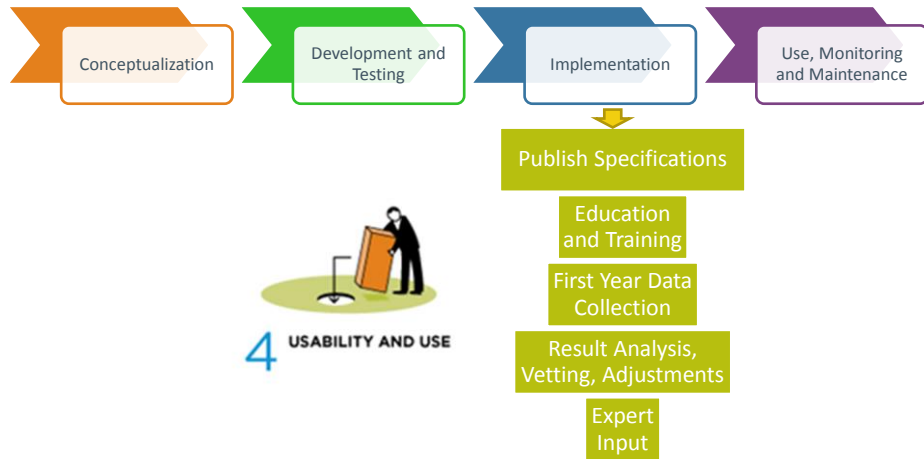
- What is our numerator?
- Denominator?
- Do we have any exclusions?
- What time period should the measure collect data for?
- Are there any regional/ implications?
- What setting are we testing?
- What would we want to know from a field test?
- How many sites should be involved?
- Are there things we need to control for?
- Other research questions that require data?

Implementation



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Implementation: Steps



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Implementation Considerations

- Did the first year of data collection match pilot testing results?
- What challenges did users face?
- Were unintended consequences identified?
- Do any adjustments need to be made to the specifications?
- Is additional training needed?

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Implementing our grape consumption measure...

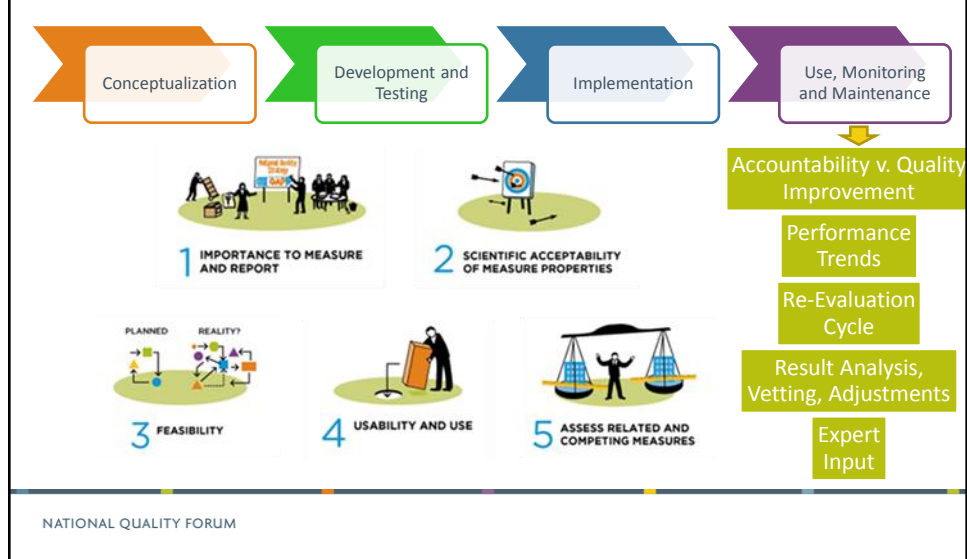
- What kind of training do we think will be necessary?
- Are there any circumstances we didn't expect or consider in our specification/logic?
 - What to do in a drought? What if the sun doesn't come out (so you live in Ohio.....)
- Are we re-thinking the usefulness of the measure?
- Are there any conclusions or thoughts about what the data tells us about quality improvement opportunities?
- What are the ideal measure "conditions"? Where is variation introduced?

Use, Monitoring and
Maintenance



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Use, Monitoring and Maintenance: Steps



Use, Monitoring and Maintenance Considerations

- Return on Investment
- Lives saved
- Complications prevented
- Clinical practice improvements
- Enhanced person and caregiver experiences
- Measure Use
- Performance trends – topped out? No improvement?
- Changes in evidence supporting measure?
- New/Better measures? Need for harmonization?

Use, Monitoring and Maintenance of our Vegetable Plan Productivity Measure

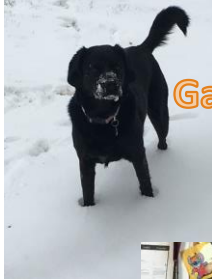
- What have we learned that might require measure adjustments?
- Is there any new evidence that would improve our specifications?
 - New planting techniques?
 - Minimum threshold for sun?
 - Thresholds for watering?
 - Any biases that weren't expected? (do pets have any impact? Pests?)
 - Unintended consequences?

Themes Across Lifecycle

- Importance of Stakeholder Input: TEP, subject matter experts and stakeholders, including consumers, patients and caregivers
- Constant monitoring of evidence and performance
- Understanding opportunities and challenges from measure users
- Continuous process....



Special thanks to the New Mexico
inspiration/production team...



Gabby

Brin



Josey Wales



Murphy



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Questions?



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Mastering the Basics of Quality Measurement

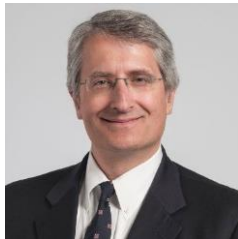
How are measures used in the field?

Michael Phelan, MD, FACEP
Emergency Services Institute and
Medical Director Quality Measurement
and Reporting, Enterprise Quality
Cleveland Clinic

June 21, 2016



Introduction



Michael Phelan, MD, FACEP
Emergency Services Institute and
Medical Director Quality Measurement
and Reporting, Enterprise Quality
Cleveland Clinic

No conflicts to disclose.

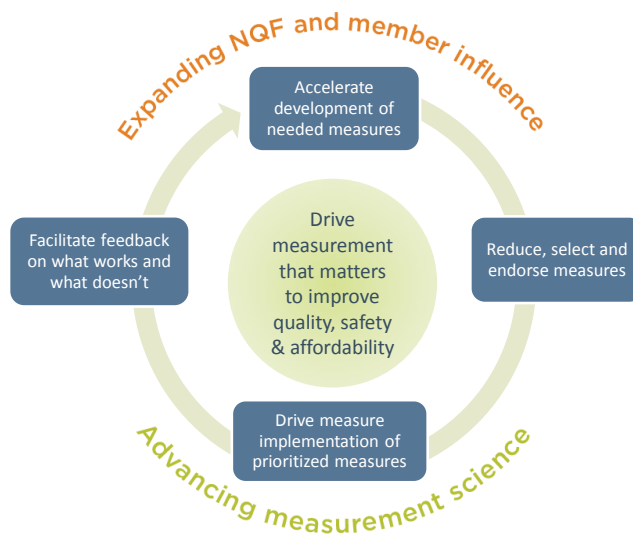
Session Objectives



Session Objectives

- Explain where measures are used throughout healthcare
- Demonstrate where to find measures in publicly available databases
- Discuss how measures are used on the frontline of care through an illustrative example from emergency medicine

NQF: Lead. Prioritize. Collaborate.



Dual Role of NQF

NQF



Partnerships Driving Innovation

Measure Applications Partnership (MAP)
National Quality Partners Action Teams
Measure Incubator

Measure Endorsement

Technical Expert Panel (TEP)
Endorsement Committees

NQF Endorsement Criteria



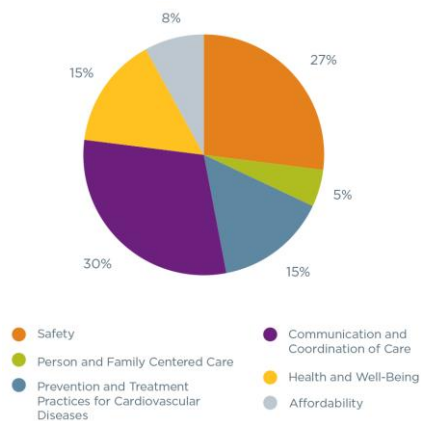
NQF Consensus Development Process



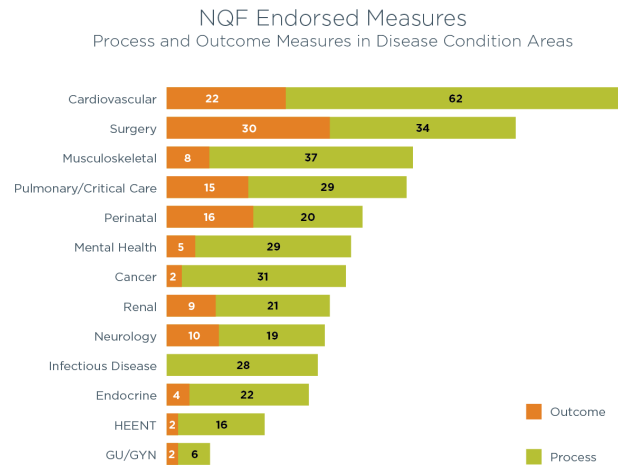
More info about [NQF's CDP Process](#)

How and Where are Measures Used?

Measures in HHS Programs by NQS Priority Area 2014



What Kind of Measures are Endorsed?

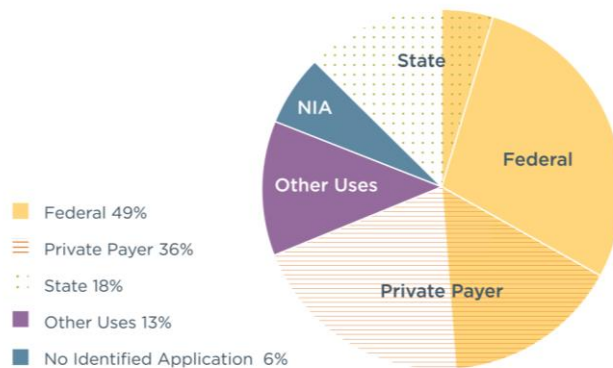


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How and Where are Measures Used?

Uses of NQF Endorsed Measures in Leading Accountability and Quality Improvement Programs

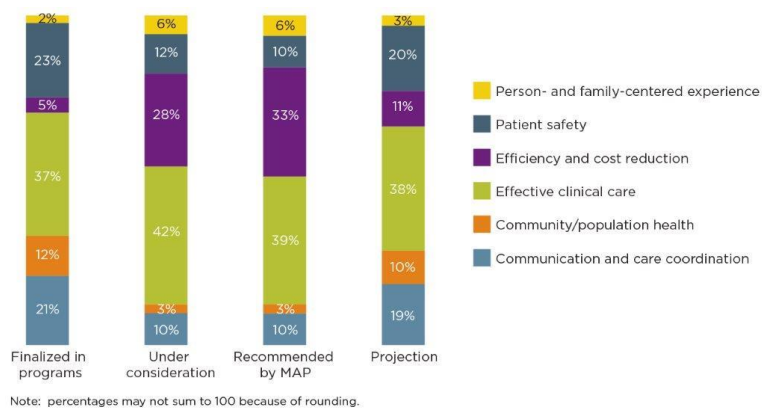


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How and Where are Measures Used?

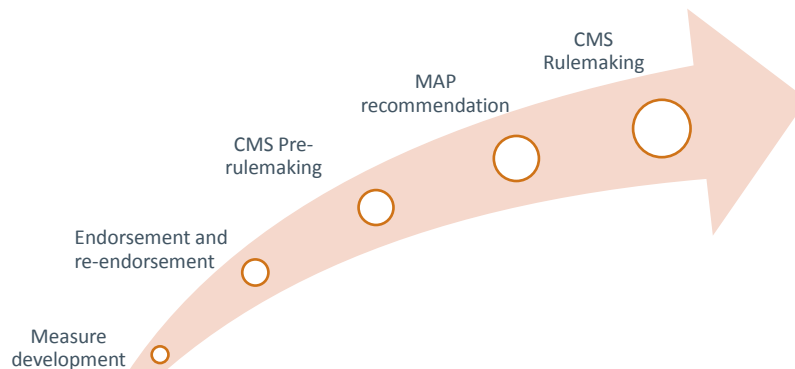
Measures in HHS Programs by NQS Priority Area 2014



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A Measure's Path to Medicare



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Where to Find NQF Endorsed Measures – Quality Positioning System (QPS)

www.qualityforum.org/qps

NQF ID	Title	Update
0036	30-day all-cause in-hospital mortality rate following percutaneous coronary intervention (PCI) for patients with ST-segment elevation myocardial infarction (STEMI) or high-risk non-STEMI	Sep 28, 2015
0035	30-day all-cause in-hospital mortality rate following percutaneous coronary intervention (PCI) for patients without ST-segment elevation myocardial infarction (STEMI) and without high-risk non-STEMI	Sep 28, 2015
0098	30-day Post-Hospital AHA Discharge Care Transition Composite Measure	Feb 04, 2014
0099	30-day Post-Hospital HF Discharge Care Transition Composite Measure	Feb 04, 2014
0107	30-day Post-Hospital PNA Discharge Care Transition Composite Measure	Feb 04, 2014
0204	30-day Hospitalizations per 1000 Medicare Fee-for-Service (FFS) Beneficiaries	Nov 03, 2015
0228	3-Year Care Transition Measure (CTM-3)	Jan 07, 2015
0259	Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate (30-1)	Jan 05, 2015
0257	Abdominal Aortic Aneurysm (AAA) Repair Volume (30-4)	Jan 05, 2015
0244	Accidental Puncture or Laceration Rate (P2-1)	Jan 05, 2015
0251	Age-Related / Angiotensin Receptor Blocker Use and Persistence Among Medicare with Chronic Kidney Disease at High Risk for Common Events	Aug 01, 2012

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Hospital Compare

www.medicare.gov/hospitalcompare

Medicare.gov | Hospital Compare
The Official U.S. Government Site for Medicare

About Hospital Compare

- What is Hospital Compare?
- What information can I get about hospitals?
- About the data
- Resources
- Help

What is Hospital Compare?

Hospital Compare has information about the quality of care at over 4,000 Medicare-certified hospitals across the country. You can use Hospital Compare to find hospitals and compare the quality of their care.

The information on Hospital Compare:

- Helps you make decisions about where you get your health care
- Encourages hospitals to improve the quality of care they provide

In an emergency, you should go to the nearest hospital. When you can plan ahead, discuss the information you find here with your health care provider to decide which hospital will best meet your health care needs.

Learn more in the Guide to Choosing a Hospital.

Hospital Compare was created through the efforts of the Centers for Medicare & Medicaid Services (CMS), in collaboration with organizations representing consumers, hospitals, doctors, employers, accrediting organizations, and other federal agencies.

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Example from Emergency Medicine



Measures saving lives for patients experiencing heart attack

Measures at Work in the Field

Type of Measure	Example from cardiology
Structural	Participation in a systematic database for cardiac surgery
Process	Primary PCI* received within 90 minutes of hospital arrival ("door to balloon" time)
Outcome	30-day mortality AMI*

AMI = Acute Myocardial Infarction, or heart attack
 PCI = Percutaneous Coronary Intervention
 EKG or ECG = Electrocardiogram

Measuring Heart Attack Care

Focus Area	Measure Steward	Example of NQF Endorsed Measure	Example of Hospital Compare Measure	Type of Measure
Time from door to EKG	CMS	#0289 Median time to ECG – <i>Endorsement Removed in 2014</i>	OP-5 Median time to ECG	Process
Time from door to balloon	CMS	#0163 Primary PCI received within 90 minutes of hospital arrival	AMI-8a Primary PCI received within 90 minute of hospital to arrival	Process
AMI readmissions	CMS	#0230 Hospital 30-day, all-cause, risk-standardized mortality rate following AMI hospitalization	READM-30-AMI AMI 30-day readmission rate	Outcome (notice the move toward outcomes)
AMI mortality	AHRQ	#0730 Acute myocardial infarction mortality rate	MORT-30-AMI AMI 30-day mortality rate	Outcome

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Reducing Door to EKG Time

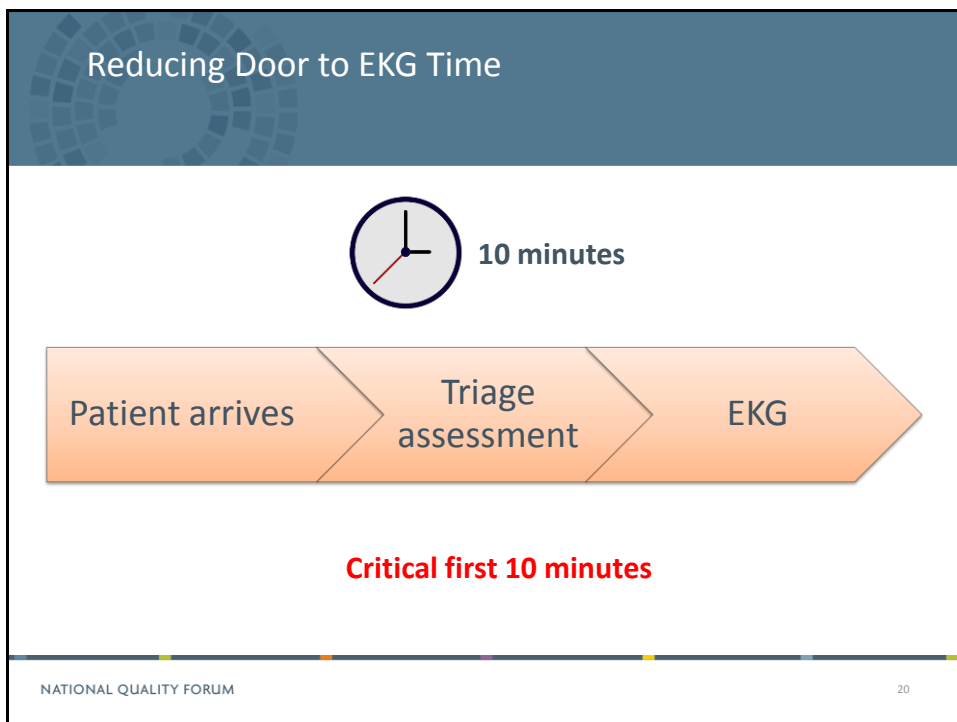
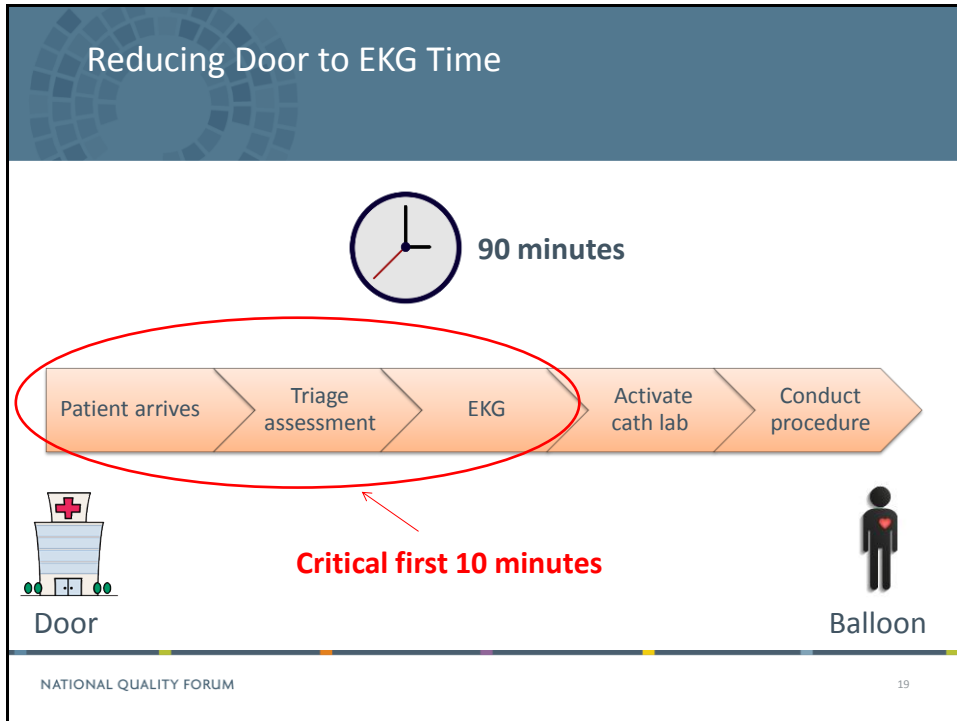
Success story from the field: Driving change with measure #0163



Measure NQF #0163:
Primary Percutaneous Coronary Intervention (PCI) Received within 90 Minutes of Hospital Arrival

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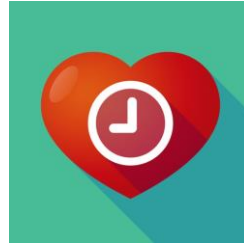
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Reducing Door to EKG Time

The challenges:

- Quick triage
- Data collection
- Working as a team
- Getting data in real time



Reducing Door to EKG Time

The solutions:

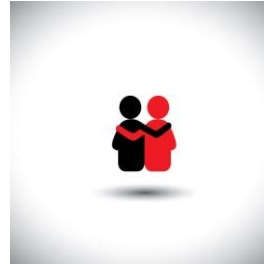
- Prioritize speed over data collection for patients with chest pain
- Work together as a team
- Provide real time data to nurses



Reducing Door to EKG Time

The results:

- Rapid triage and assessment
- Saving lives
- Becoming a leading hospital



Measures making an impact

Q and A

Comments? Questions?





THANK YOU

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Mastering the Basics of Quality Measurement

Tying it all together and taking it home

Camille Espinoza
Director, Member Education
National Quality Forum

June 21, 2016



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Audience Activity: Reflections on Quality



Think back to the activity from this morning. Recall what you thought about quality, and apply your new *measurement* lens.

In the same pairs as this morning, talk about how you might measure those aspects of quality.

Where To Go From Here

NQF Membership: Supporting Your Next Steps



Member exclusive resources

Special events

20+ projects at NQF

Member communications

Member webpage

THANK YOU