

# Rhode Island Health Care Quality Performance Measurement and Reporting Program

## Health Care Quality Steering Committee

November 6, 2006

3:00 PM

John T. Tierney Health Policy Forum

### AGENDA

<b>Welcome &amp; Remarks</b>	David Gifford, MD, MPH HEALTH	3:00 - 3:05 PM
<b>Updates on:</b> <b>1) Public Reporting of Nursing Home Family and Resident Satisfaction</b> <b>2) Home Health Satisfaction Pilot</b> <b>3) Hospital Satisfaction</b> <b>3) Annual Core Nurse Staffing</b> <b>4) Subcontract</b>	Susan Oberbeck, MSW, MHA HEALTH	3:05 – 3:35 PM
<b>Summary Report and Updates on the Pressure Ulcer Pilot Study</b>  (Vote –see attached)	Meg Richards, PhD Qualidigm/ Quality Partners of Rhode Island	3:35-3:45 PM
<b>Recommendations for Program Activities</b>  (Vote –see attached)	Jay Buechner, PhD HEALTH	3:45-4:20 PM
<b>Open Forum</b>	David Gifford, MD, MPH HEALTH	4:20- 4:30 PM

## VOTES

### **Pressure Ulcers:**

- In January 2005, Hospital Measures Subcommittee was charged by the Steering Committee to develop a measure for publicly reporting pressure ulcers. After reviewing outcome measures endorsed by the National Quality Forum (NQF) and the National Database of Nursing Quality Indicators (NDNQI) the Subcommittee elected to conduct a pilot study of a process measure based on American Medical Directors Association (nursing home) clinical practice guidelines: Whether skin and risk assessments for pressure ulcers were completed within 24 hours of admission. As it was noted that pressure ulcers occur across the continuum of care, a work group with representation from hospitals, nursing homes, and home health agencies met to determine if there are common process and communication measures that could be used across settings to measure quality and improve care, and are eligible for public reporting. The workgroup recommended that the development of a measure for publicly reporting pressure ulcers be referred back to the Hospital Measures Subcommittee for continued review of other existing measures. The cross-setting group will continue to meet with Facilities Regulation and Quality Partners of Rhode Island to look at quality improvement efforts across the continuum of care.

*1) Does the Steering Committee approve the Hospital Measures Subcommittee's continued search for appropriate outcome measures for reporting pressure ulcers?*

*2) Does the Steering Committee recommend that the Subcommittee reporting back to the Steering Committee at the May 2007 Steering Committee meeting?*

### **Recommendations for Program Activities:**

- Each year, our legislative charge has been expanded, but not our budget. Since its inception, this program has chosen not to create Rhode Island - specific measures, as we do not have the adequate resources to do so. National organizations have expended financial and intellectual resources to develop clinical and satisfaction measures that have been validated through use. This program publicly reports CMS clinical measures for hospitals, nursing homes, home health care, and dialysis. Hospitals now participate in CMS' publicly reported satisfaction surveys (Hospital CAHPS), and there are indications that CMS will be expanding CAHPS into nursing homes, home health, and dialysis. It is our recommendation, that, whenever possible, we continue to use nationally endorsed measures for clinical measures and patient satisfaction.

*1) Does the Steering Committee agree that we use nationally endorsed, consensus measures wherever they exist rather than developing Rhode Island- specific measures?*

- Since the beginning of this program, no formal evaluation of its products has been conducted. Among the recommendations made by the Technical Expert Panel reviewing the program in October 2005 was the following:

Evaluate current and future public reporting formats to ensure they reflect expert recommendations for format (e.g., color, key message points). Experts recommend testing data reporting formats with focus groups and members of the target audience, to ensure that the data are interpreted consistently and are easily understood. In addition, formatting can help emphasize key points.

To date, we have posted numerous reports and quarterly clinical measures for hospitals, nursing homes, and home health care on HEALTH's website. We are now about to embark on producing an interactive web query tool for consumers seeking information regarding nursing homes. We are interested in knowing if we are presenting information in a manner that is of use to the public and can be readily understood, or whether there are other areas and other ways in which we can to improve our public reporting. We are proposing that we act on the recommendation to initiate an evaluation of our website and revise the consumer products using methods that include conducting focus groups of consumers.

*1) We are proposing that we act on the recommendation to initiate an evaluation of our website and revise the consumer products using methods that include conducting focus groups of consumers. Does the Steering Committee approve of this recommendation?*

- A new charge of the program is:

Consideration of measures associated with hospital-acquired infections with consultation of infections control experts

This information is currently being publicly reported in other states. It is recommended that the Hospital Measures Subcommittee be charged with identifying a workgroup of infection control experts, researching current hospital-acquired infection (HAI) public reporting efforts in other states, and making a recommendation for HAI public reporting measures to the Steering Committee.

*1) Does the Steering Committee agree with the recommendation for the Hospital Measures Subcommittee to identify a workgroup of infections control experts,*

*research current public reporting efforts in other states, and make a recommendation for HAI public reporting measures to the Steering Committee?*

*2) Does the Steering Committee recommend that the Hospital Measures Subcommittee report back to the Steering Committee with a proposed measure or measures for HAI at the November 2007 Steering Committee meeting?*

- Another charge of the program is:

Consideration of the relationship between human resources and quality, beginning with measurement and reporting for nursing

This is in addition to providing annual hospital core staffing plans. It is recommended that the Hospital Measures Subcommittee and the Nursing Home Measures Subcommittee be charged with developing public reporting measures for: Staff turnover, retention, use of agency staff, and use of overtime (elective and mandatory).

*1) Does the Steering Committee charge the Hospital and Nursing Home Subcommittees with developing measures for staff turnover, retention, use of agency staff, and use of overtime (elective and mandatory)?*

*2) Does the Steering Committee recommend the two Subcommittees report back to the Steering Committee with proposed measures for staff turnover, retention, agency use and overtime at the September 2007 Steering Committee meeting?*