

Quality Improvement Organization (QIO) Program 9th Statement of Work (SOW): Patient Safety Theme

Measures to Determine the “Facilities Targeted for Improvement”

Measures used to determine those facilities targeted for improvement are endorsed by the National Quality Forum (NQF). The NQF began in 1995 and was created to develop and implement a national strategy for health care quality measurement and reporting.

- 1) Nursing Homes (NH): Two lists were developed; one with nursing homes meeting criteria for High Risk Pressure Ulcers and one with nursing homes meeting criteria for Daily Physical Restraints.
 - a. Measures: (these quality measures are publicly reported on Nursing Home Compare found at www.medicare.gov)
 - i. Percent of High-Risk Long-Stay Residents who Have Pressure Sores (Pressure Ulcers) (nursing home patients who get bed sores)
 - ii. Percent of Long-Stay Residents who Were Physically Restrained daily (Physical Restraints) (nursing home patients who were physically restrained)
 - b. Rationale: Quality intervention efforts have shown to be effective in improving the rates for both of these measures in nursing homes in both the 7th statement of work and the 8th statement of work.
 - c. Formulas used:
 - i. Pressure Ulcers: nursing homes with at least two of the most recent three quarters of data showing results of 14 or more percentage points away from the goal of 6% (based on consensus of experts; national average ~ 12%)
 - ii. Physical Restraints: nursing homes with at least two of the most recent three quarters of data showing results of 8 or more percentage points away from the goal of 3% (based on consensus of experts; national average ~5%)
- 2) Hospitals: Two lists were developed; one for hospitals meeting criteria for SCIP measures and one for hospitals meeting criteria for pressure ulcers.
 - a. Measures: (these quality measures [except for “pressure ulcers”] are publicly reported on www.hospitalcompare.hhs.gov)
 - i. SCIP Inf-1: Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision (Patient gets antibiotic in a timely fashion before surgery)
 - ii. SCIP Inf-3: Prophylactic Antibiotic Discontinued Within 24 Hours After Surgery Time Ends (Antibiotic stopped in a timely fashion)
 - iii. Hospital Pressure Ulcers: Patients With Hospital-Acquired Pressure Ulcers (Patients getting bed sores in the hospital)
 - b. Rationale:

- i. SCIP Inf-1 and SCIP Inf-3: these two measures have been in use since 2002 and have the highest rates of performance; hospitals who score low on these two measures are very likely to have scored low on the other SCIP measures
 - ii. Hospital Pressure Ulcers: This significant problem is receiving increased attention and is included in “Hospital-Acquired Conditions” initiative
- c. Formulas used:
 - i. SCIP: The SCIP Appropriate Care Measure (ACM) is a composite measure using both Inf-1 and Inf-3. Hospitals that have an ACM score 30 points or more below the Achievable Benchmarks of Care (ABC) for the two most recent quarters. The Achievable Benchmarks of CareTM method incorporates the mean of the best care for at least 10% of the measured population (<http://main.uab.edu/show.asp?durki=14527>).
 - ii. Hospital Pressure Ulcers: Hospitals listed were in the same county as those NH identified above that met criteria for pressure ulcers.