



# The 2014 Quality and Disparities Report and the National Quality Strategy: Working Together to Improve Health Care

May 11, 2015



# Housekeeping

- Submit technical questions via chat
- If you lose your Internet connection, reconnect using the link emailed to you
- If you lose your phone connection, re-dial the phone number to re-join
- ReadyTalk support: 800-843-9166
- Closed captioning: <http://www.captionedtext.com/client/event.aspx?CustomerID=1159&EventID=61488691>



# Agenda

- **Importance of the National Quality Strategy**  
Nancy Wilson, Executive Lead, National Quality Strategy
- **Background on the Revised Quality and Disparities Report**  
Ernest Moy, Medical Officer, Center for Quality Improvement and Patient Safety, AHRQ
- **Highlights of the 2014 Quality and Disparities Report**  
Ernest Moy, Medical Officer, Center for Quality Improvement and Patient Safety, AHRQ
- **Spotlight: The Importance of Patient Safety**  
Nancy Wilson, Executive Lead, National Quality Strategy  
Ernest Moy, Medical Officer, Center for Quality Improvement and Patient Safety, AHRQ
- **Discussion/Question and Answer**  
Nancy Wilson, Executive Lead National Quality Strategy  
Ernest Moy, Medical Officer, Center for Quality Improvement and Patient Safety, AHRQ



# Importance of the National Quality Strategy

Nancy Wilson, B.S.N., M.D., M.P.H.

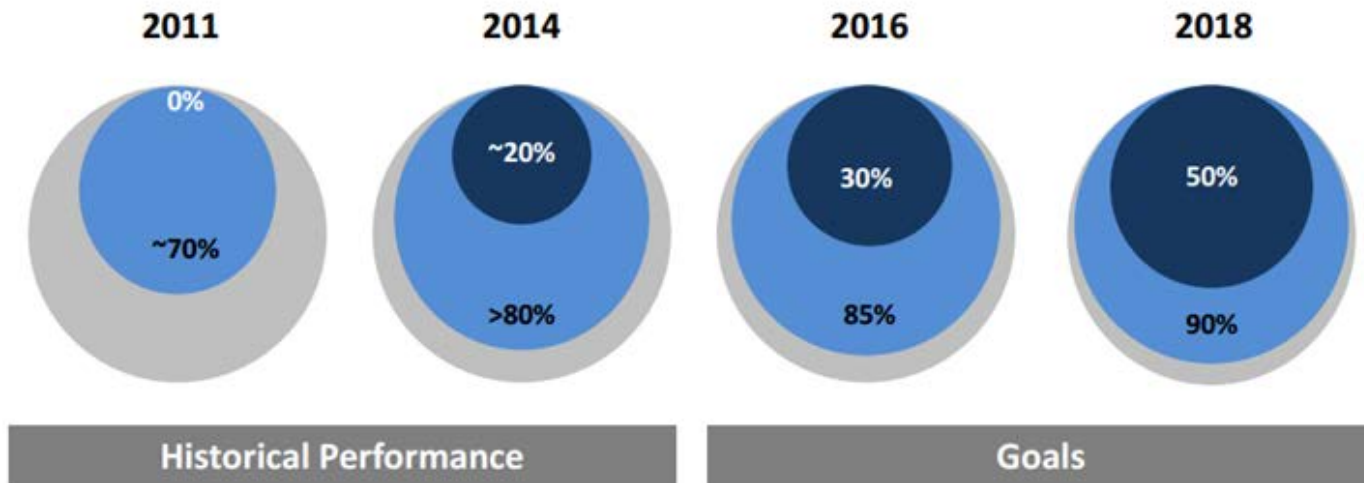
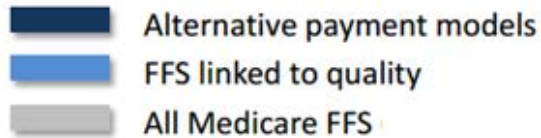


# Background on the National Quality Strategy

- Established by the Affordable Care Act to **improve the delivery of health care services, patient health outcomes, and population health**
- The Strategy was first published in 2011 and serves as a **nationwide effort** to improve health and health care across America
- The Strategy was iteratively designed by public and private stakeholders, and provides an opportunity to **align quality measures and quality improvement activities**
- Now in its 4<sup>th</sup> year, public and private organizations of all sizes have adopted the National Quality Strategy to drive health improvement



# HHS Delivery System Reform Goals



Press, Matthew. "CMS Innovation and Health Care Delivery System Reform." April 2015. Available from [http://www.allhealth.org/briefingmaterials/1-PRESSPRESENTATION\\_J9.PDF](http://www.allhealth.org/briefingmaterials/1-PRESSPRESENTATION_J9.PDF).



# HHS Delivery System Reform Goals



Using **incentives to motivate higher-value care**, by increasingly tying payment to value through alternative payment models

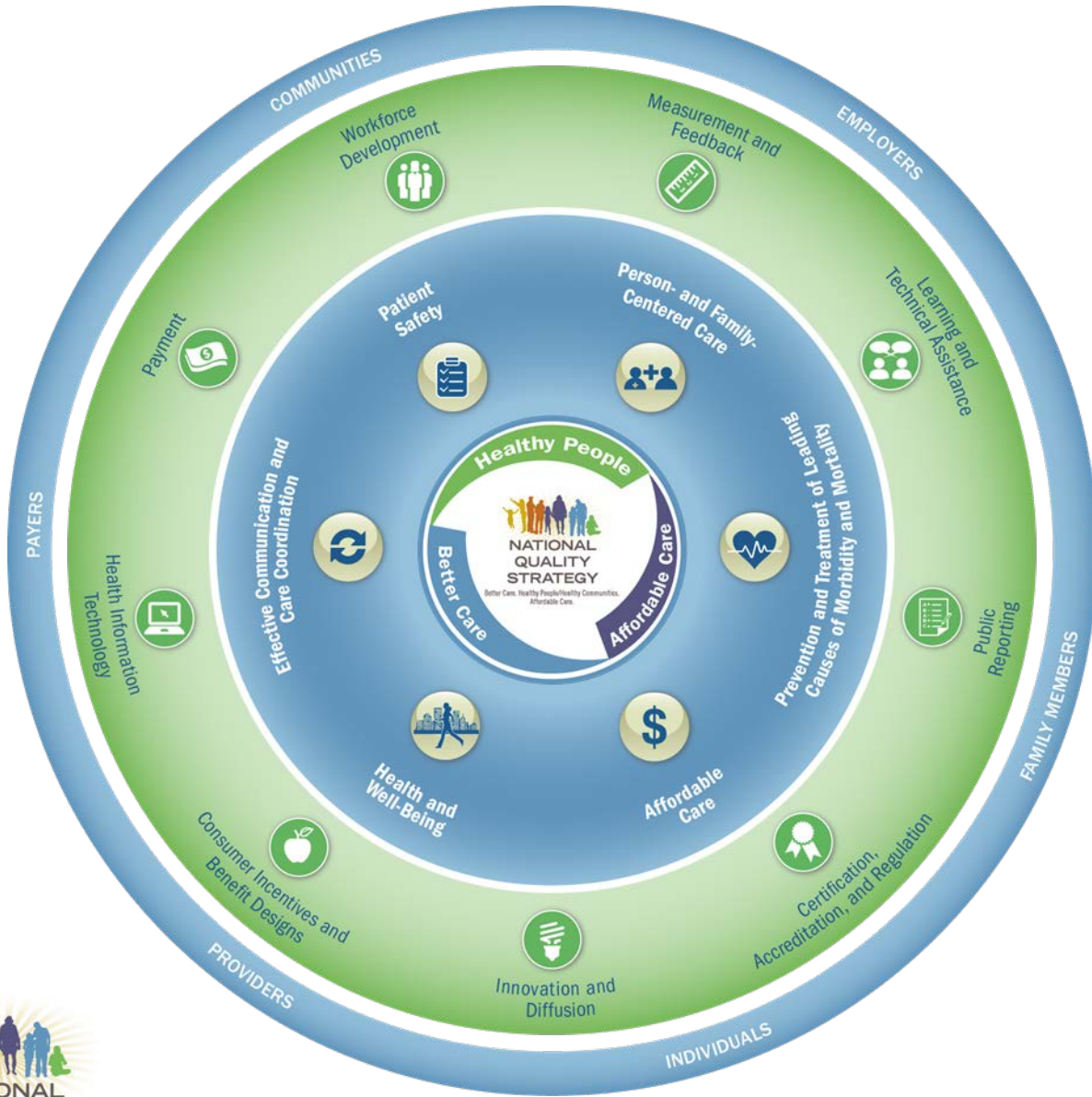


**Changing how care is delivered** through greater teamwork and integration, more effective coordination of providers across settings, and greater attention by providers to population health



Harnessing the **power of information** to improve care for patients







# Background on the Revised Quality and Disparities Report

Ernest Moy, M.D., M.P.H.



# Background on the National Healthcare Quality and Disparities Report

- Provides a comprehensive overview of:
  - Quality of health care received by the general U.S. population
  - Disparities in care experienced by different racial, ethnic, and socioeconomic groups
- Assesses the performance of our health system and identifies areas of strengths and weaknesses:
  - Access to and quality of health care
- Based on more than 250 measures of quality and disparities covering a broad array of health care services and settings, generally available through 2012



# The Structure of the 2013 Report

- Highlights: Summarize information for Policy Makers
- State Snapshots
  - Provide state contrasts for State Policy Makers
  - Add state comparisons of disparities by race, ethnicity, income, and insurance
- Appendices
  - Provide data tables and detailed methods for Researchers
  - NHQRnet supports customized tables



# Integrate Three Parts into Whole

<http://nhqrnet.ahrq.gov/inhqrdr/>

**National Healthcare Quality and Disparities Reports**  
Your source for the Reports, State Snapshots, and QR/DRnet

- Reports**  
Read and download the full reports
- National View**  
National summary across quality measures
- State View**  
State-level summaries and snapshots across measures
- Data Query**  
Search data across specific measures
- Resources**  
Resources to improve quality performance

**Welcome**

This newly integrated website provides a unified Web tool for investigating information presented in the National Healthcare Quality and Disparities Reports. It allows users to drill down from the broadest picture of healthcare quality and disparities on the national and state levels.

1 2 3 4 5 6



## Reasons for Recent Changes in the QDR

- Director Challenge
  - Can it be one document?
  - Can it be tied to the National Quality Strategy to be strengthened?
  - Can it make 2014 reports more visible and actionable?
- Feedback on integrated website
  - Interagency Work Group
  - AHRQ National Advisory Council
- AHRQ/NCHS HHS Ignite Award to learn design thinking
- AcademyHealth Translation and Dissemination Institute Innovator-in-Residency



## What's New in 2014

- The National Healthcare Quality and Disparities Report (QDR)
  - Focuses on summarizing information over the many measures that are tracked
  - Reorganized around Access to Health Care + NQS Priorities
  - Integrates findings on health care quality and health care disparities into a single document to highlight the importance of examining quality and disparities together
  - 30 pages instead of 2 x 250+
  - Rapid cycle production
    - NHIS quarterly data released 12/2014
    - Other data released 9/2014





# What's New in 2014



2014 National Healthcare  
Quality and Disparities Report  
**CHARTBOOK ON  
PATIENT SAFETY**

- A series of related chartbooks
  - Present information on individual measures of quality and disparities, such as hospital patients with heart failure who were given complete written discharge instructions
  - Organized around
    - Access to Health Care
    - National Quality Strategy Priorities x 6
    - Priority Populations
  - Primarily electronic
    - Posted on the QDR website (<http://nhqrnet.ahrq.gov>)
    - PowerPoint version for download
    - Released every two weeks for ~6 months



# NQS and QDR as Integrated Resources for Improving Care



- NQS: Sets national priorities for health care quality improvement ([www.ahrq.gov/workingforquality](http://www.ahrq.gov/workingforquality))
- QRDR: Tracks quality, access, & disparities along NQS priorities at national & State levels ([nhqrnet.ahrq.gov](http://nhqrnet.ahrq.gov))
- Implementation Resources: Support work to improve quality & reduce disparities

# Highlights of the 2014 Quality and Disparities Report

Ernest Moy, M.D., M.P.H.



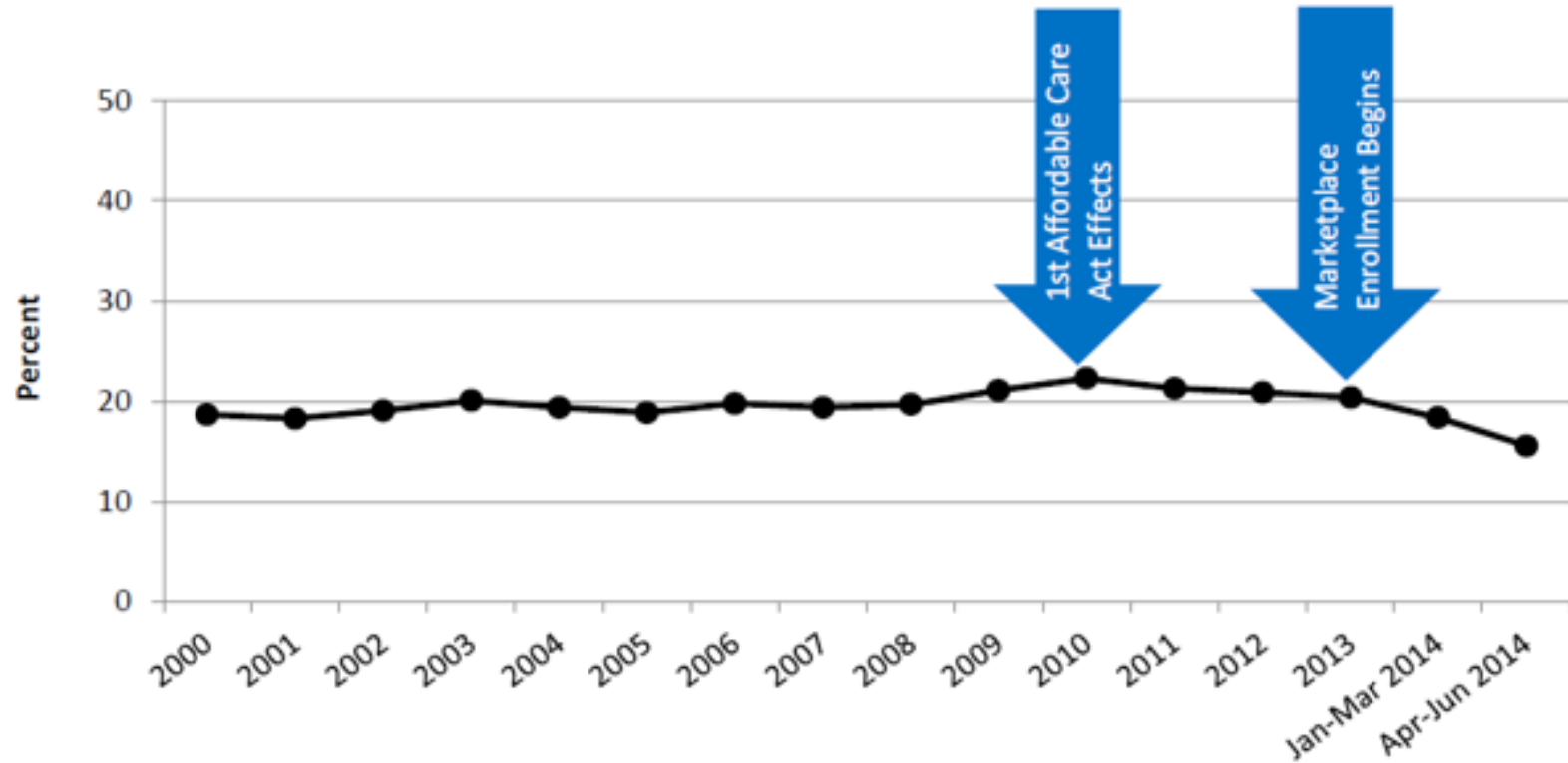
# Key Findings of the 2014 National Healthcare Quality and Disparities Report

The report demonstrates that the nation has made clear progress in improving the healthcare delivery system to achieve the three aims of better care, smarter spending, and healthier people, but there is still more work to do, specifically to address disparities in care.

- Access improved
- Quality improved for most National Quality Strategy priorities
- Few disparities were eliminated
- Many challenges in improving quality and reducing disparities remain



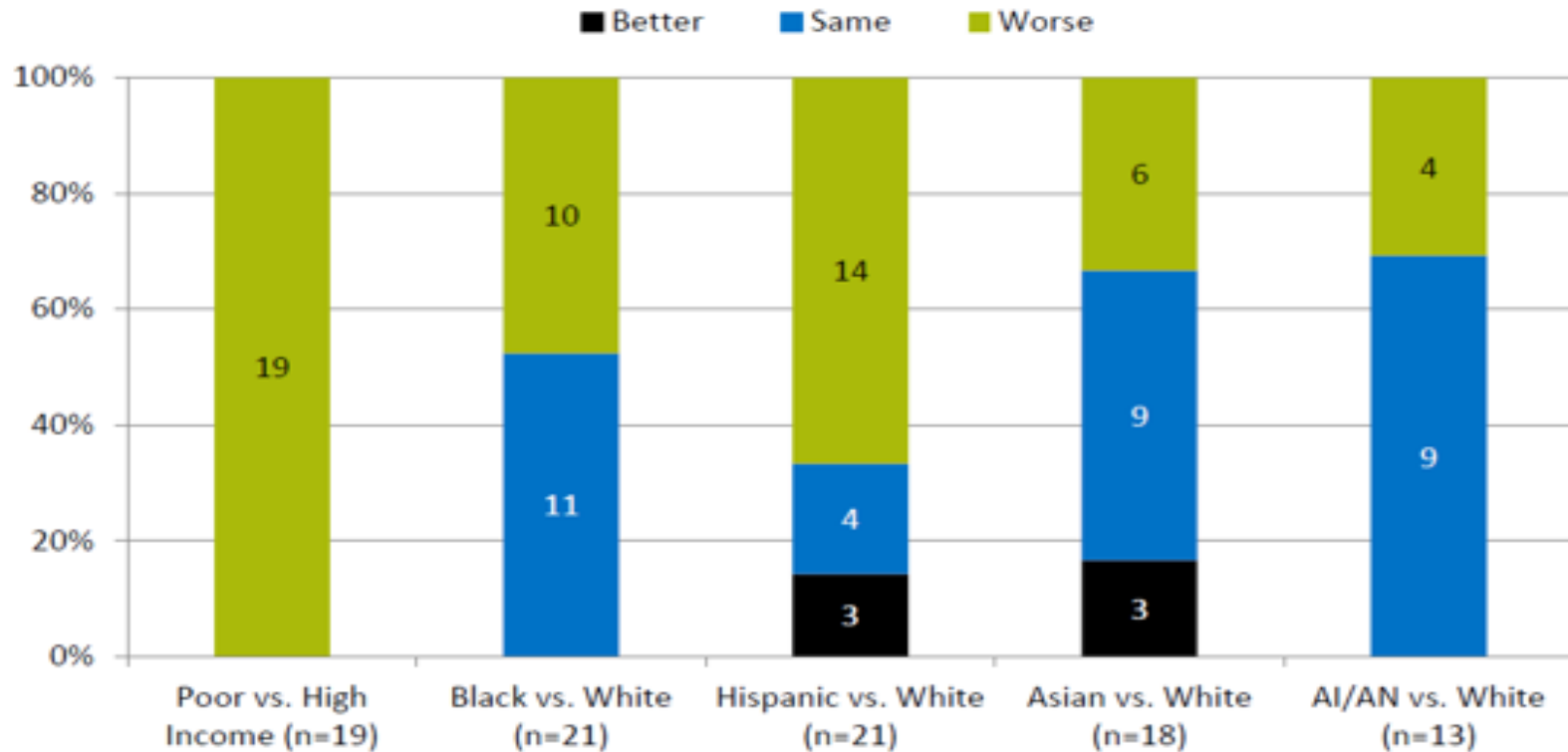
# Adults ages 18-64 who were uninsured at the time of interview, 2000-2014



Source: National Center for Health Statistics, National Health Interview Survey, 2000-June 2014.



# Disparities: Access measures for which members of selected groups experienced better, same, or worse access to care compared with reference group, 2012

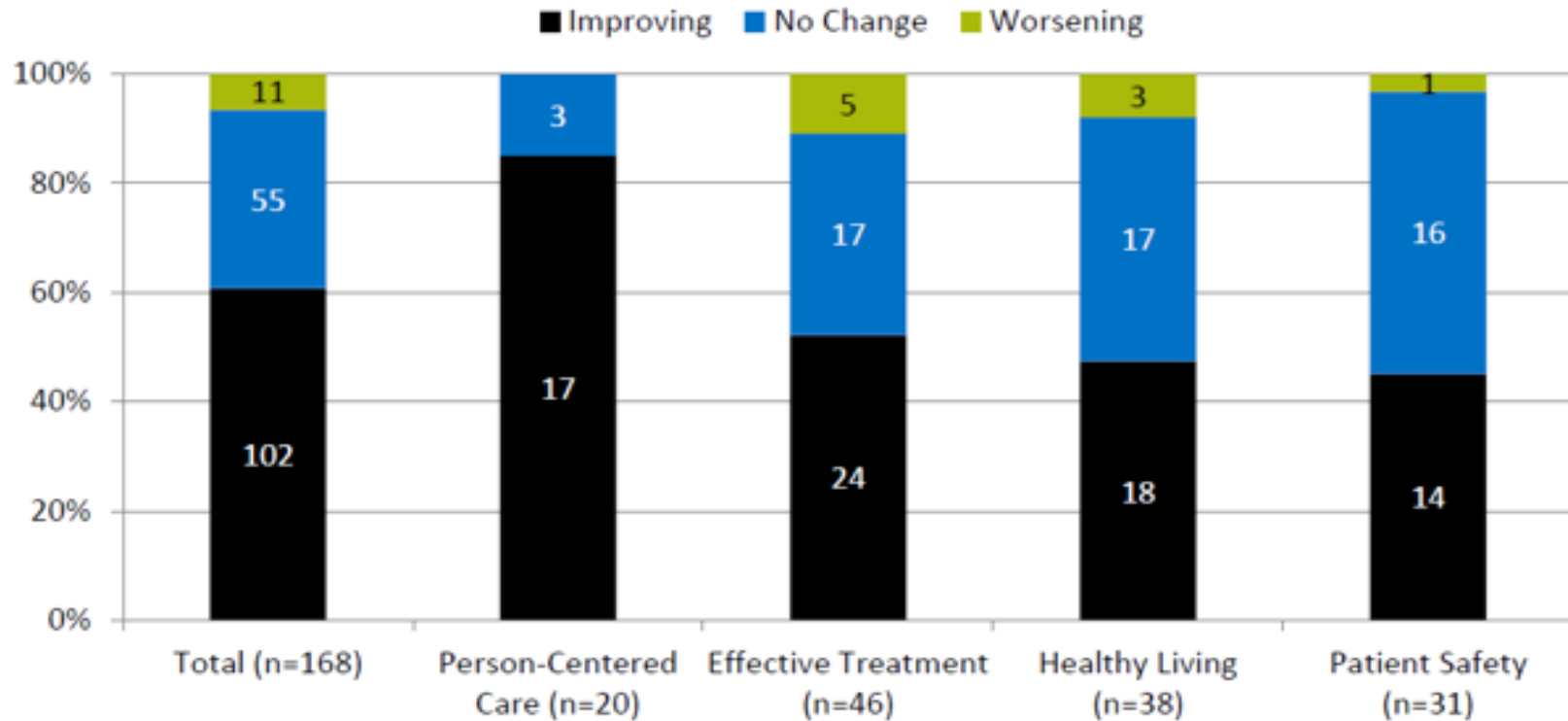


Key: AI/AN = American Indian or Alaska Native; n = number of measures.





# Number and percentage of all quality measures that are improving, not changing, or worsening through 2012, overall and by NQS priority

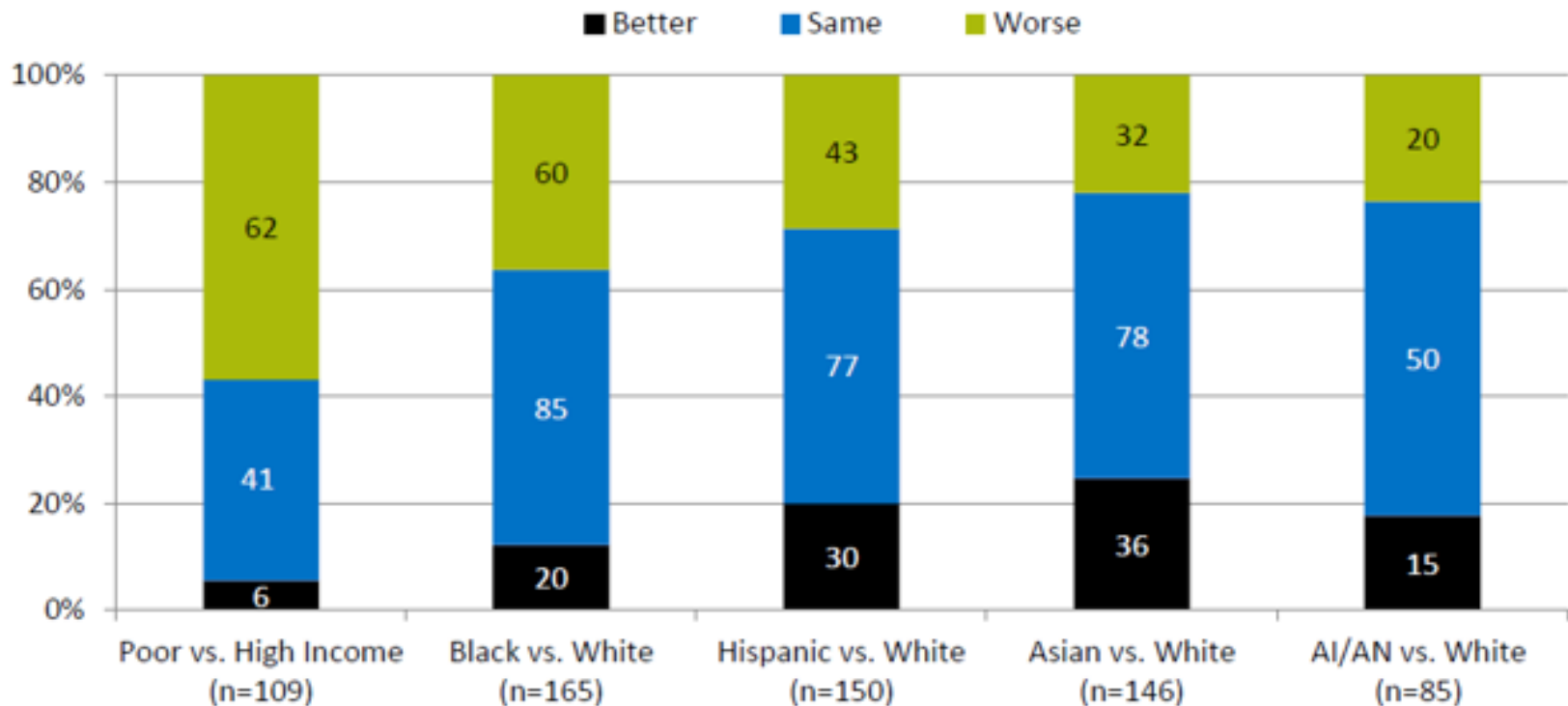


Key: n = number of measures.



The information on this slide relates to four of the six NQS priorities.

# Disparities: Number and percentage of quality measures for which members of selected groups experienced better, same, or worse quality of care compared with reference group

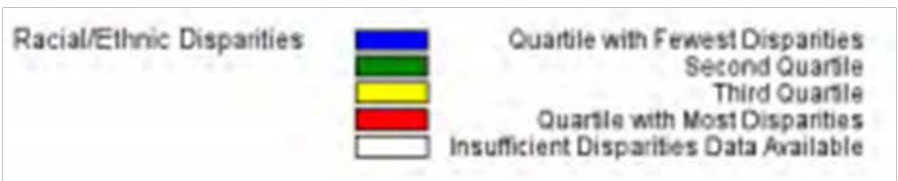


Key: AI/AN = American Indian or Alaska Native; n = number of measures.





# States Sorted by Racial/Ethnic Disparities



# Spotlight: The Importance of Patient Safety

Presenters



# Patient Safety Chartbook

Ernest Moy, M.D., M.P.H.





# Quality improvements in patient safety have saved 50 thousand lives and 12 billion dollars

Data shows...  
**17% ↓**  
 Hospital Acquired  
 Conditions

**50,000**  
 LIVES SAVED



**1.3 million**   
 Patient harm events avoided

**\$12 billion**  
 in savings

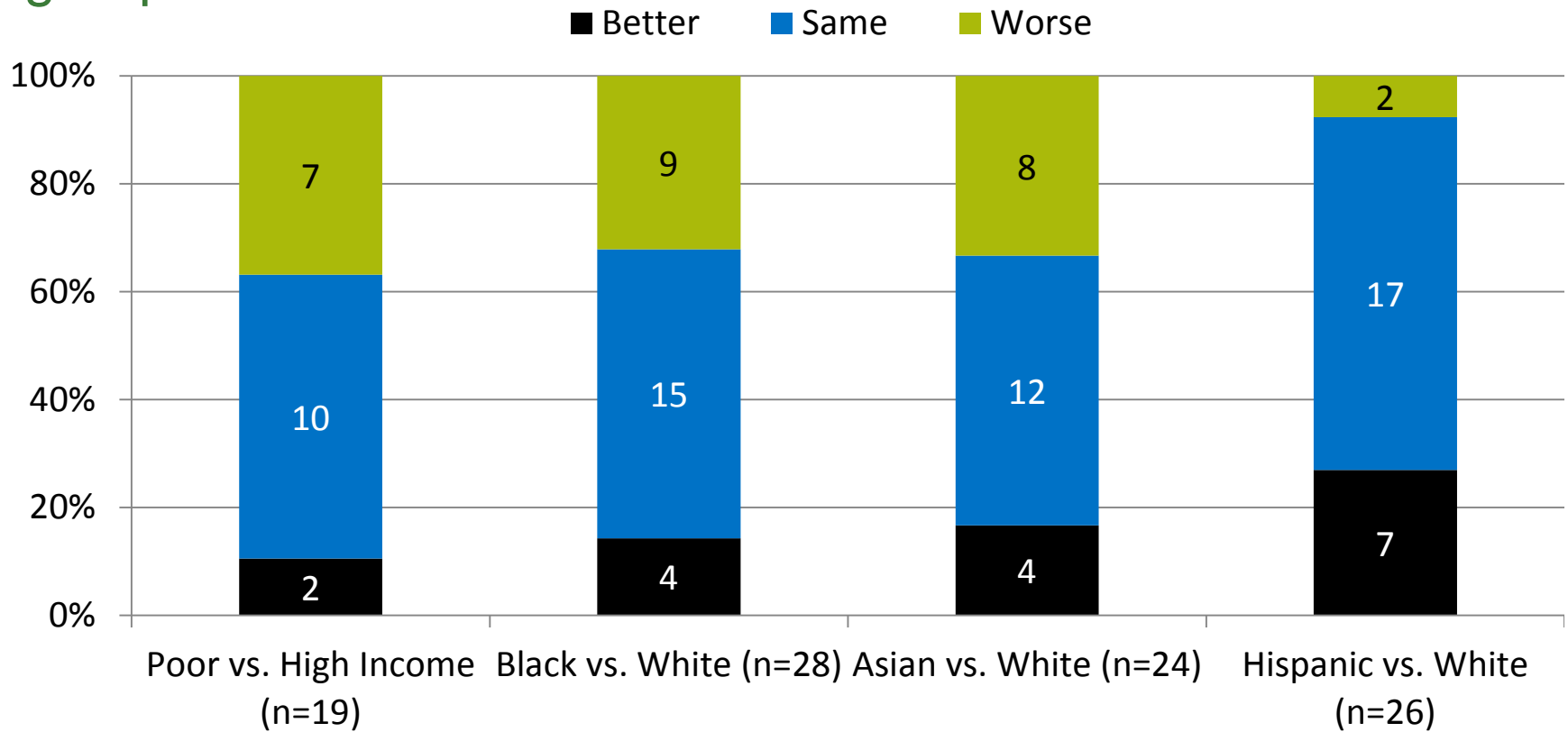
## Leading Indicators, change from 2010 to 2013

Ventilator-Associated Pneumonia	Early Elective Delivery	Central Line-Associated Blood Stream Infections	Venous thromboembolic complications	Re-admissions
62.4% ↓	70.4% ↓	12.3% ↓	14.2% ↓	7.3% ↓

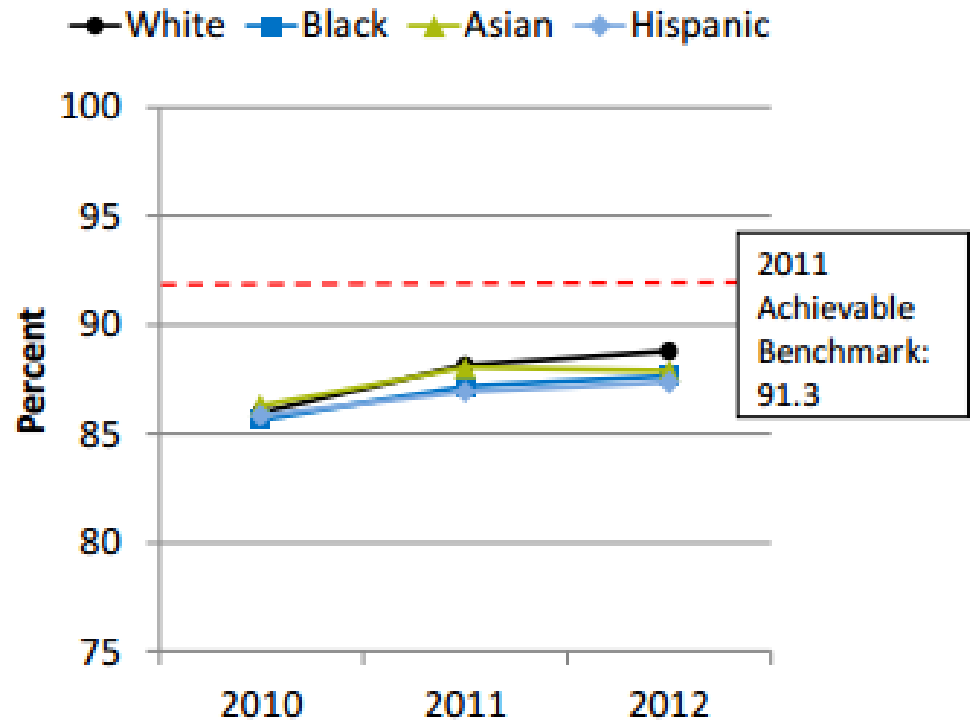
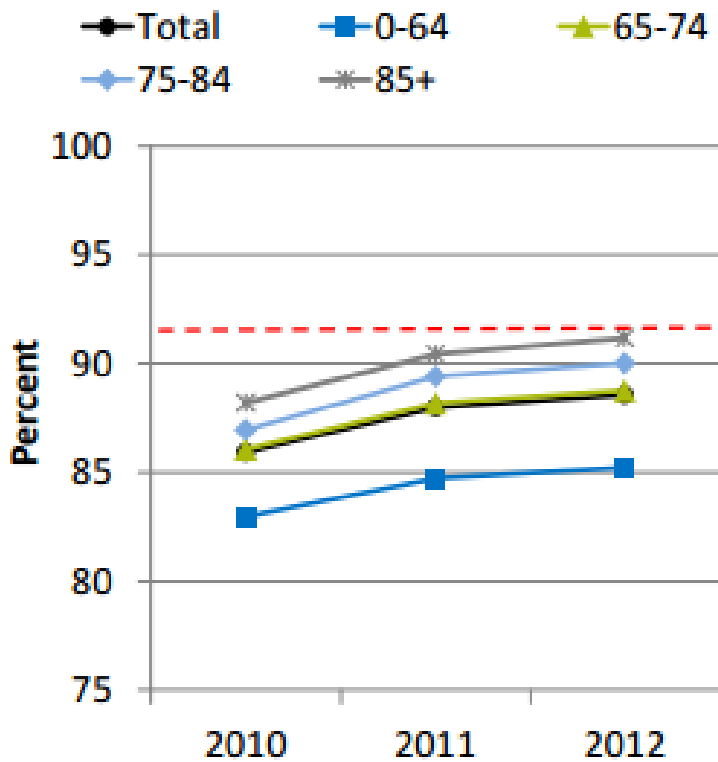


Press, Matthew. "CMS Innovation and Health Care Delivery System Reform." April 2015. Available from [http://www.allhealth.org/briefingmaterials/1-PRESSPRESENTATION\\_J9.PDF](http://www.allhealth.org/briefingmaterials/1-PRESSPRESENTATION_J9.PDF).

# Number and percentage of patient safety measures for which members of selected groups experienced better, same, or worse quality of care compared with reference group



# Home health patients with improvement in surgical wounds, by age and race/ethnicity, 2010-2012



**Key:** NHOPI = Native Hawaiian or Other Pacific Islander; AI/AN = American Indian or Alaska Native.

**Source:** Centers for Medicare & Medicaid Services, Outcome and Assessment Information Set, 2010-2012.

**Denominator:** Number of home health episodes during the measurement period in which the patient had a surgical wound and the episode ended with the patient discharged from home health care.

**Note:** In 2011, the top 5 State achievable benchmark was 91.3 percent. The States that contributed to the benchmark were Alabama, Mississippi, Nevada, Oklahoma, and South Carolina. White, Black, and Asian are non-Hispanic. Hispanic includes all races.



# Priorities in Action: Children's Hospital of Pittsburgh of UPMC

Nancy Wilson, B.S.N., M.D., M.P.H.



# Children's Hospital of Pittsburgh of UPMC



- This month's Priority in Action features the Children's Hospital of Pittsburgh of UPMC, which successfully implemented an electronic health record and process improvements that enabled the hospital to provide better care for its pediatric patients
- In the six years following implementation of the EHR, the hospital's medication safety event rate was reduced by 60 percent and serious medication errors were reduced by 92 percent
- <http://www.ahrq.gov/workingforquality/pias/chopittpia.htm>

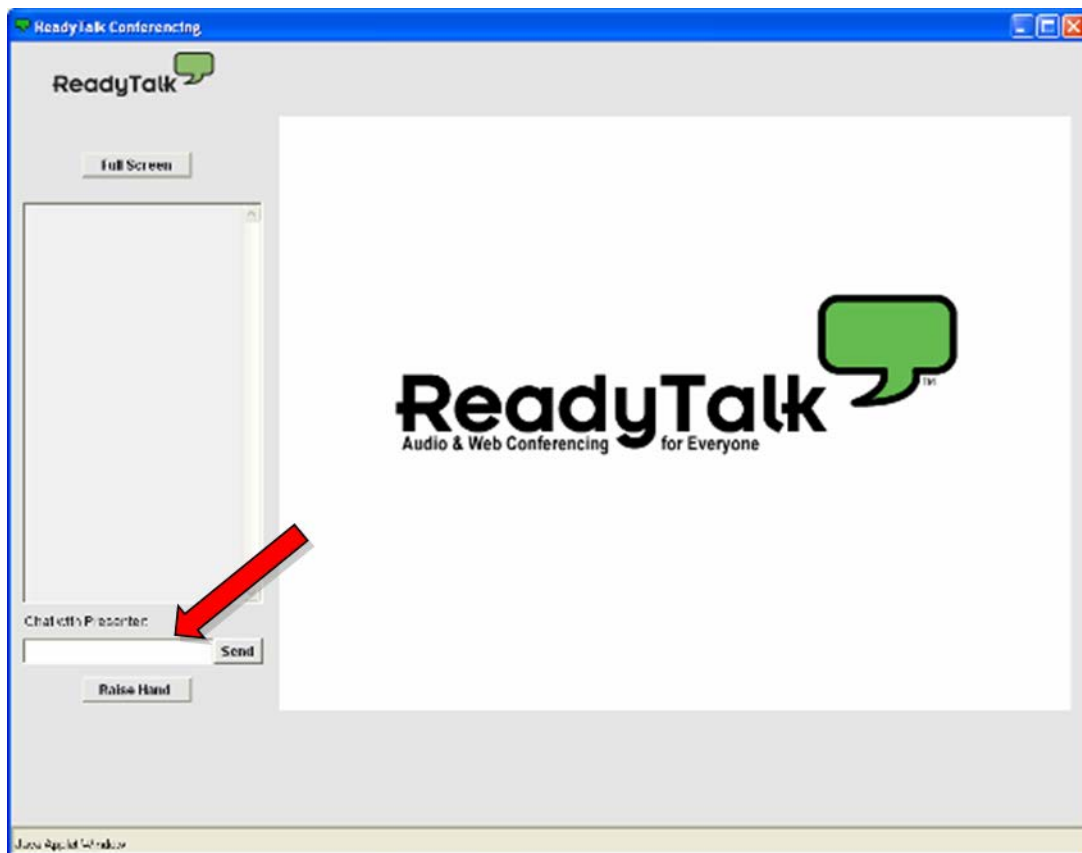
# Discussion/Question and Answer





## Questions and Answers

- For users of the audio broadcast, submit questions via chat
- For those who dialed into the meeting, dial 14 to enter the question queue



# Thanks for attending today's event

The presentation archive will be available on

[www.ahrq.gov/workingforquality](http://www.ahrq.gov/workingforquality)

To view the 2014 Quality and Disparities Report, visit

<http://nhqrnet.ahrq.gov/inhqrdr/>

For questions or high resolution graphics, please email

[NQStrategy@ahrq.hhs.gov](mailto:NQStrategy@ahrq.hhs.gov)

For the new NQS Stakeholder Toolkit, visit:

<http://www.ahrq.gov/workingforquality/nqs/nqstoolkit.pdf>

