Better Care, Healthier People and Communities, More Affordable Care: 5 Years of the National Quality Strategy

May 17, 2016
Housekeeping

- Submit technical questions via chat
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Agenda

• **History of the National Quality Strategy (NQS)**
  Nancy Wilson, B.S.N., M.D., M.P.H., Executive Lead, National Quality Strategy

• **National Quality Strategy Progress: Data from the 2015 National Healthcare Quality and Disparities Report**
  Ernest Moy, M.D., M.P.H., Medical Officer, Center for Quality Improvement and Patient Safety, Agency for Healthcare Research and Quality

• **The National Quality Strategy in Action: Lourie Center for Children’s Social and Emotional Wellness**
  James Venza, Ph.D, Senior Director, Lourie Center for Children’s Social and Emotional Wellness

• **Discussion/Question and Answer**
HISTORY OF THE NATIONAL QUALITY STRATEGY

Nancy Wilson, B.S.N., M.D., M.P.H.
History of the National Quality Strategy

- Established by the Affordable Care Act to improve the delivery of health care services, patient health outcomes, and population health
- More than 300 groups, organizations, and individuals, representing all sectors of the health care industry and the general public, provided input that shaped the Strategy’s aims, priorities, and levers
- The Strategy was first published in 2011 and serves as a nationwide effort to improve health and health care across America and align quality measures and quality improvement activities
Timeline of the National Quality Strategy

- **2010**: Affordable Care Act signed into law
- **2011**: California DHCS Quality Strategy published
- **2012**: CMS Quality Strategy published
- **2013**: 11th QIO Statement of Work released
- **2014**: Quality Improvement Organizations
- **2015**: California DHCS Quality Strategy Update
- **2016**: National Quality Strategy Update

**Timeline Details:**
- **2010**: Input from multi-stakeholder organizations on National Quality Strategy
- **2011**: National Quality Strategy published
- **2012**: National Quality Strategy published
- **2013**: National Quality Strategy published
- **2014**: National Quality Strategy published
- **2015**: National Quality Strategy published
- **2016**: National Quality Strategy published

**Additional Information:**
- **National Quality Strategy 5 Year Anniversary**: 2011-2016
Aims, Priorities, and Levers

• Improving health and health care quality can occur only if all sectors—individuals, family members, payers, providers, employers, and communities—make it their mission. Members of the health care community can align to the NQS by doing the following:
  – *Adopt the three aims to provide* better, more affordable care for the individual and the community
  – *Focus on the six priorities to guide* efforts to improve health and health care quality
  – *Use one or more of the nine levers to identify* core business functions, resources, and/or actions that may serve as means for achieving improved health and health care quality
The Relationship Between the Institute for Healthcare Improvement’s Triple Aim and NQS Three Aims

**Improving the patient experience of care** (including quality and satisfaction)

**Healthy People/Healthy Communities:** Improve the health of the U.S. population by supporting proven interventions to address behavioral, social and, environmental determinants of health.

**Better Care:** Improve overall quality, by making health care more patient-centered, reliable, accessible, and safe.

**Affordable Care:** Reduce the cost of quality health care for individuals, families, employers, and government.
<table>
<thead>
<tr>
<th>Priorities</th>
<th>Improvement Initiatives</th>
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<tbody>
<tr>
<td><strong>Patient Safety</strong></td>
<td>Partnership for Patients, Hospital Readmission Reduction Program, Michigan Hospital Association Keystone Network</td>
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<td><strong>Person- and Family-Centered Care</strong></td>
<td>Consumer Assessment of Healthcare Providers and Systems, National Partnership for Women and Families, PatientsLikeMe</td>
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<td><strong>Effective Communication and Care Coordination</strong></td>
<td>Argonaut Project, Lourie Center for Children’s Social and Emotional Wellness</td>
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<td><strong>Prevention and Treatment of Leading Causes of Morbidity and Mortality</strong></td>
<td>Million Hearts®, Better Health Partnership</td>
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<td><strong>Health and Well-Being of Communities</strong></td>
<td>Let’s Move!, Minnesota State Health Improvement Program</td>
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<td><strong>Making Quality Care More Affordable</strong></td>
<td>Medicare Shared Savings Program, Pioneer Accountable Care Organization Model, Camden Coalition of Healthcare Providers</td>
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Ongoing Federal Implementation Activities

• Annual meetings of the Interagency Working Group on Health Care Quality, including senior representatives from 24 Federal Agencies

• Annual updates to the Agency-Specific Plans developed by HHS operating divisions, which are available on the Working for Quality Web site
Ongoing Implementation Activities

- The *Priorities in Focus* series—released in concert with the Agency for Healthcare Research and Quality (AHRQ) National Healthcare Quality and Disparities Report (QDR) Chartbooks — spotlights current issues, recent Federal initiatives to improve care quality, and recent data demonstrating relevant improvement in each of the six NQS priority areas.

- The *Priorities in Action* series, which examine some of our Nation’s most promising and transformative Federal, State, and local quality improvement programs and describes their alignment to the NQS’ six priorities.
5-Year Anniversary Stakeholder Toolkit

- Organizations can now use a special toolkit to showcase their alignment to and support of the National Quality Strategy in recognition of its 5-year anniversary.
- This toolkit offers new approved promotional materials, graphics, and Web content that organizations can tailor to their specific needs.
- Organizations are encouraged to celebrate this anniversary and share their successes and progress throughout 2016.
- To download the Toolkit and other related materials, visit [http://www.ahrq.gov/workingforquality/toolkit.htm](http://www.ahrq.gov/workingforquality/toolkit.htm).
Overview of the 5th Anniversary Update

Key findings in the report include:
- **Dramatic improvement in access** to health care, led by sustained reductions in the number of Americans without health insurance and increases in the number of Americans with a usual source of medical care.
- **Continued improvement in quality** of health care, but wide variation exists across the National Quality Strategy priorities.
- **Persistent disparities** related to race, ethnicity, and socioeconomic status among measures of access and all National Quality Strategy priorities, but some are getting smaller.

Features organizations putting the National Quality Strategy priorities into action to improve health and health care quality.
NATIONAL QUALITY STRATEGY PROGRESS: DATA FROM THE 2015 NATIONAL HEALTHCARE QUALITY AND DISPARITIES REPORT

Ernest Moy, M.D., M.P.H., Medical Officer, Center for Quality Improvement and Patient Safety Agency for Healthcare Research and Quality
National Healthcare Quality and Disparities Report

• Annual report to Congress mandated in the Healthcare Research and Quality Act of 1999 (P.L. 106-129)
• 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 in:
  – Access to health care
  – Quality of health care
• Submitted on behalf of the Secretary of Health and Human Services
QDR Role as a Resource in Improving Care

- **NQS**: Sets national priorities for healthcare quality improvement
- **QDR**: Tracks quality, access, and disparities along NQS priorities at national & State levels
- **Implementation Resources**: Support work to improve quality and reduce disparities
Quality of health care improved through 2013, but the pace of measure improvement varied by NQS Priority

There are insufficient numbers of reliable measures of Care Affordability to summarize in this way.
2015 QDR: Improvements in rates of uninsurance continue for all ages through 2015

Data Source: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey, 2010 -2015, Family Core Component.  
Note: For this measure, lower rates are better.
Disparities remained prevalent across a broad spectrum of quality measures

- AI/AN vs. White (n=142): 18 Better, 78 Same, 46 Worse
- Asian vs. White (n=217): 71 Better, 102 Same, 44 Worse
- Black vs. White (n=248): 30 Better, 116 Same, 102 Worse
- Hispanic vs. White (n=210): 44 Better, 89 Same, 77 Worse
- Poor vs. High Income (n=147): 7 Better, 52 Same, 88 Worse
Significant numbers of disparities in quality of care are starting to narrow

- **AI/AN vs. White (n=23)**
  - Improving: 5
  - No Change: 17
  - Worsening: 1

- **Asian vs. White (n=26)**
  - Improving: 8
  - No Change: 18
  - Worsening: 0

- **Black vs. White (n=80)**
  - Improving: 37
  - No Change: 37
  - Worsening: 6

- **Hispanic vs. White (n=64)**
  - Improving: 28
  - No Change: 33
  - Worsening: 3

- **Poor vs. High Income (n=87)**
  - Improving: 29
  - No Change: 53
  - Worsening: 5
THE NATIONAL QUALITY STRATEGY IN ACTION: THE LOURIE CENTER FOR CHILDREN’S SOCIAL AND EMOTIONAL WELLNESS

Building a Sustainable Model of Early Childhood Mental Health Intervention for Young Children & Their Families

James Venza, Ph.D., Senior Director, Lourie Center for Children’s Social and Emotional Wellness
Lourie Center Legacy

• Birth of a center: mission-driven
• Leaders in child development: Reginald S. Lourie, T. Berry Brazelton, Stanley Greenspan
• Evidence based from the beginning: National Institute of Mental Health research study transitioned into direct service programs
Quality Care

Lourie Center spotlighted in the 2011 as part of the National Quality Strategy Update (US Department of Health and Human Services).

• The Center spreads evidence-based practices through education, research, and training. Recent research in the Parent-Child Clinic has shown that within 6 to 9 months of a family's enrollment in the program, treatment significantly increased parental emotional availability and insightfulness into the child's emotional cues, improved child and parent relationships, and strengthened the foundation of lifelong healthy development.

• The Lourie Center provides technical training to Government Agencies, school systems, and national and international nonprofit organizations across the country and around the world.
Integrating Theory-Practice-Training-Research

• Lourie Center’s Attachment-centered Intervention Model (efficacy study)
  – Practicing Attachment in the Real World: Improving maternal insightfulness and dyadic emotional availability at an outpatient community mental health clinic. Ziv, Kaplan & Venza (2016): *Attachment and Human Development*

• Current studies also focus on efficacy from an attachment-based intervention lens
  – Lourie Center’s Special Education Elementary School: Academic achievement, social information processing, and classroom climate (initial results May 2016)
  – Early Head Start: Partnership grant with University of Maryland: Buffering toxic stress in toddlers through attachment-based intervention (initial results summer 2016)
  – Therapeutic Preschool Program: Relationship-based, trauma-informed intervention for families with preschool children (initial results 2017)
Layers of Challenge & Opportunities

• Community-based services have limited funding (relative to hospital-based)
• Mental health has limited funding (insurance limits)
• Programs for young children have even less funding (narrow range, less awareness of need)
• Lourie Center operates from multiple-source funding: Federal; State; Montgomery and Prince George’s counties, MD; private foundations; individual donors
• NQS provides important recognition to funders that the Lourie Center is worth the investment
Increasing Coordination of Care

- Circle of Security Parenting Intervention: Attachment-Based Reflection Program
- Lourie Center sponsored Circle of Security Parenting Intervention training for 110 professionals (2015); 60 additional (this week)
- Circle of Security Parenting Groups – All Lourie Center programs: School, clinic, and home
- Serving families experiencing homelessness
- Supporting frontline staff in shelters
Expanding Coordinated Care Across the State, Nation, and Globe

• Key steps:
  1) Federal Pre-K Expansion: Full-day therapeutic preschool program
  2) Technical assistance support
  3) International reach: Supporting children’s social and emotional development in the Kingdom of Lesotho in southern Africa
DISCUSSION/QUESTION AND ANSWER
Discussion/Question and Answer

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

- How has the National Quality Strategy impacted your organization in the 5 years since its publication?
- In what ways has your organization put the National Quality Strategy aims, priorities, and levers into action to improve health and health care quality?
- How has alignment to the National Quality Strategy shaped your organization’s strategic efforts to work toward a delivery system that provides better, more affordable care to individuals and the community?
- How is your organization planning to celebrate the fifth anniversary of the National Quality Strategy?
Thank you for attending today’s presentation!

The presentation archive will be available on www.ahrq.gov/workingforquality

To view the 5th Anniversary Update and other related materials, please go to http://www.ahrq.gov/workingforquality/reports.htm

For questions or high-resolution graphics, please email NQStrategy@ahrq.hhs.gov

All QDR data are posted at http://nhqrnet.ahrq.gov

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