



*Why Quality Matters:
Where You Sit
Determines
What You See*

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Goals/Objectives

Discuss quality from the perspectives of patients, providers and payers in evolving healthcare systems



Case

- You attend a hospital quality meeting, and the executive leaders report that the hospital mortality and readmission rates for patients with COPD is exceptionally high and they are looking to improve this to improve their 'pay for performance' incentive with the large payor.
- Your palliative care service that has limited resources is working diligently with the neuro ICU on a new initiative and feel stressed at the thought of changing directions to work on COPD.
 - How to you manage this tension?
 - Do you change directions?



Quality is in the Eye of
the Beholder



How a **patient**
might see
quality?

How Patients Might Define Quality

- Safe
- Timely
- Reliable
- Affordable
- Accessible
- Effective
- And More...

“

People don't care how much you know until they know how much you care.

THEODORE ROOSEVELT

GRACIOUSQUOTES.COM

Ways to hear the patient (and family) voice...

- Interviews
- Surveys
 - Structured
 - Unstructured
- Informal feedback

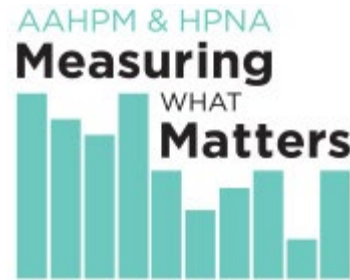




How the field of
Palliative Care
sees quality..

Palliative Care

Measuring What Matters



Special Article

Measuring What Matters: Top-Ranked Quality Indicators for Hospice and Palliative Care From the American Academy of Hospice and Palliative Medicine and Hospice and Palliative Nurses Association

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Steps in the Measuring What Matters (MWM) Process for Selecting the Initial Consensus Set of Quality Indicators

1. The MWM team identified existing indicators
 - a. Relevant to U.S. hospice and palliative care,
 - b. Available in the public domain as of October 2013, and
 - c. Developed through a rigorous process and/or tested for reliability and validity.
2. The Technical Advisory Panel (TAP) rated indicators on their scientific soundness and referred a set of indicators ($n = 34$) for review by the Clinical User Panel (CUP).
3. The CUP rated those indicators based on three dimensions:
 - a. How meaningful is this for patients/families?
 - b. How actionable is this for providers/organizations?
 - c. How large is the potential impact?
4. The CUP achieved consensus on the top 12 indicators for further input.
5. The draft set of 12 indicators was posted on the American Academy of Hospice and Palliative Medicine (AAHPM)'s web site to elicit feedback from AAHPM and Hospice and Palliative Nurses Association (HPNA) members and their interdisciplinary teams, and asked them to reduce the list of 12 measures down to 10 (or less) of the best measures.
6. The draft set of 12 indicators was distributed to key relevant external organizations and patient advocacy groups for a final set of ratings.
7. The MWM team compiled the input from the membership, teams, organizations, and advocacy groups for the final consensus set of 10 indicators.



How *hospitals*
might see
quality...

Hospitals and Quality

- **HCAPS (CMS)**
 1. During this hospital stay, how often did XXX treat you with courtesy and respect?
 2. During this hospital stay, how often did XXX listen carefully to you?
 3. During this hospital stay, how often did XXX explain things in a way you could understand?
- **Q-HIP (BCBS/Anthem)**
 - Meeting Incentives = \$\$\$\$
- **Vizient**
 - Mortality
- **US News and World Report**
 - Subspecialty Focus (Cancer, Heart...)
 - 30 Day Mortality (post discharge accountable)



How *payors*
might define
quality...

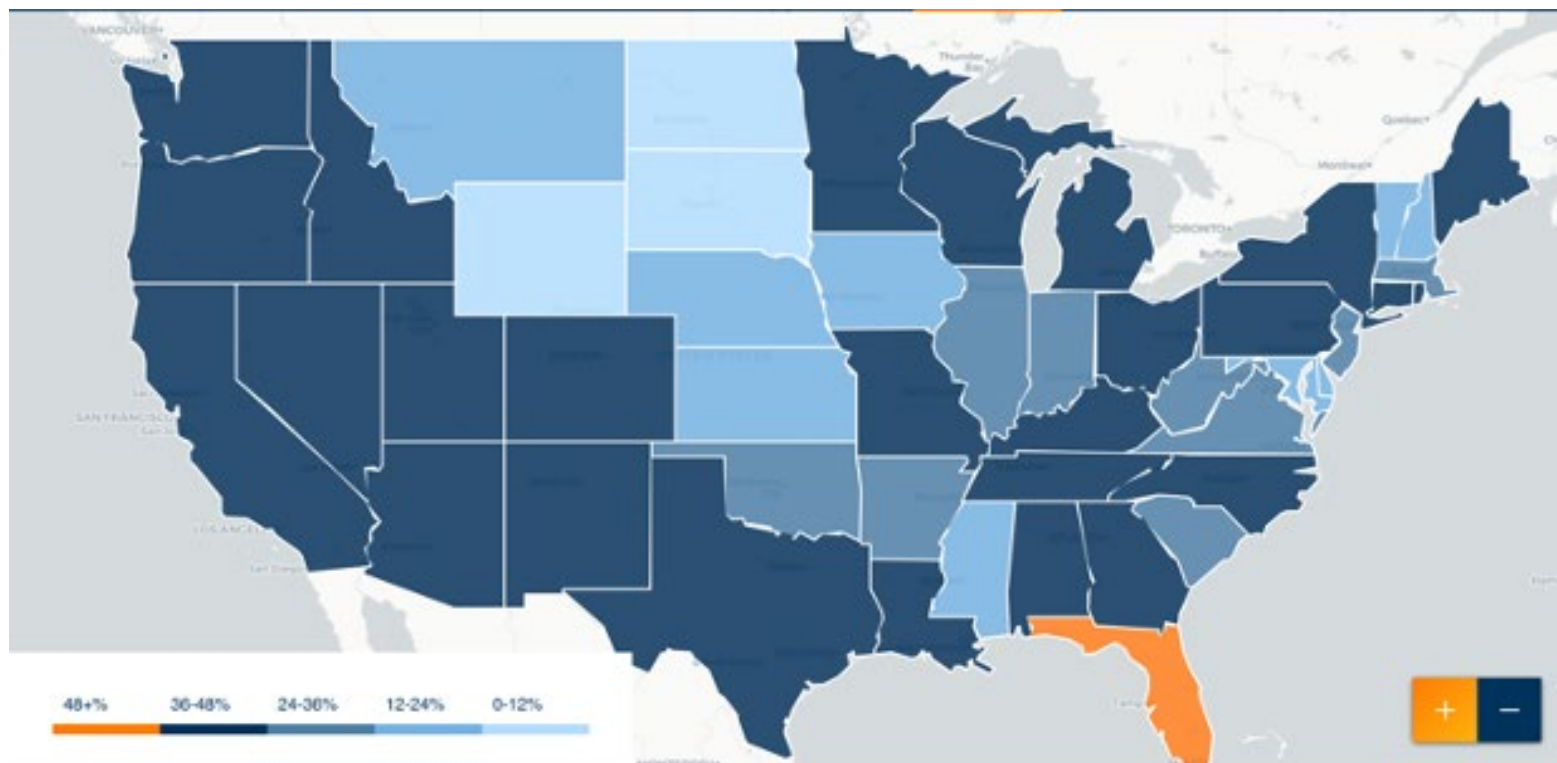


US Health Care is (largely) a For-Profit Business



Medicare Advantage Programs

2021



<https://bettermedicarealliance.org/news/bma-releases-2021-enrollment-heatmap-showing-medicare-advantage-enrollment-in-states-congressional-districts-and-counties-nationwide/>



PRO (Patient-Reported Outcomes)

What gets measured. The status of a patient's (or person's) health condition, health behavior, or experience with healthcare that comes directly from the patient (i.e., outcome data)



PROM (Patient-Reported Outcome Measures)

How PROs are measured. The tools/instruments used to collect data (e.g., PROMIS, HOS, FOTO)



PRO-PM (Patient-Reported Outcome-Based Performance Measures)

How PROs are calculated. A way to aggregate the information from patients into a reliable, valid (tested) measure of performance (aggregated PROs often collected through PROMs)



Additional Considerations

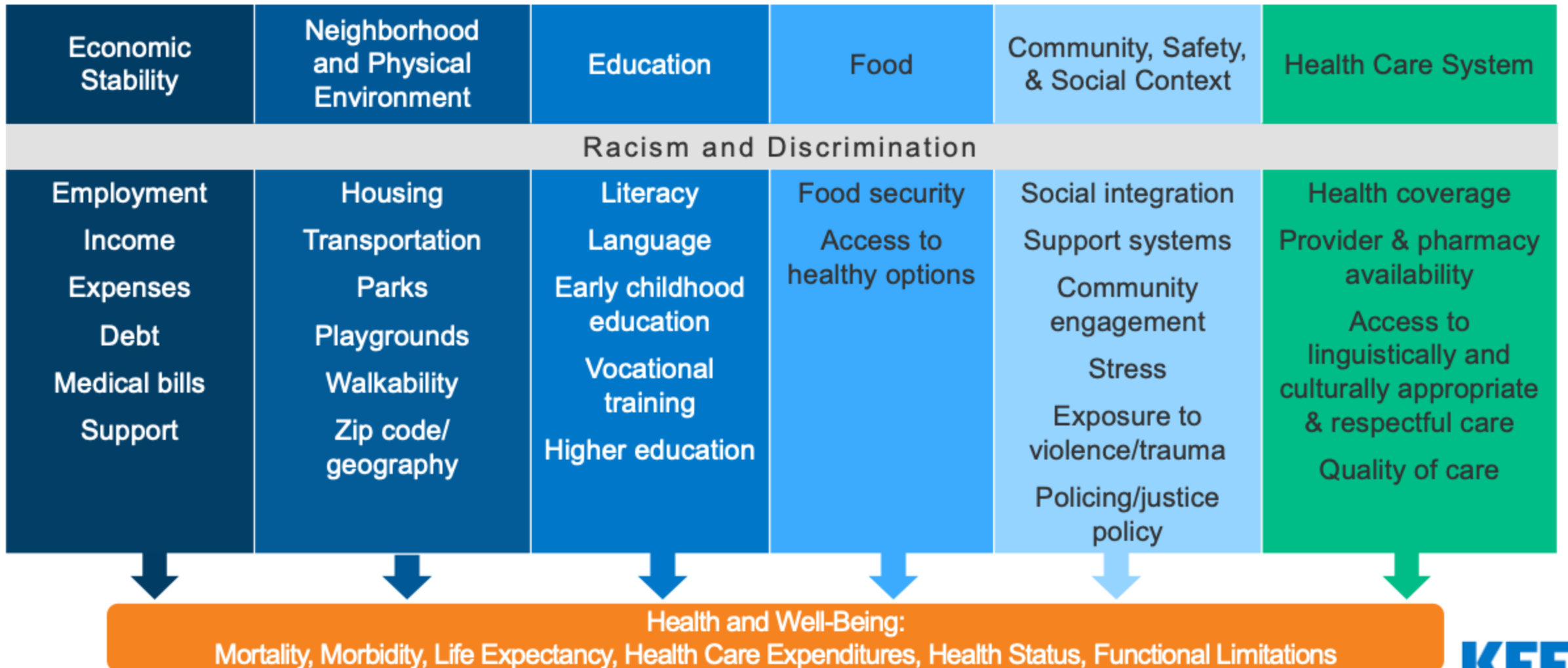


What about
patients and
families living
at the
margins?



Figure 1

Health Disparities are Driven by Social and Economic Inequities



Flexibility in Thinking

→ Depending on what your goals of quality measurement are, you need to consider multiple factors and drivers

- Patients/Families
- Hospitals
- Payors



Mortality Measurements as a Measure of Quality

→ Healthcare systems' focus on mortality performance can be used to drive BROAD positive outcomes for systems and programs.



Final Thoughts from a Baseball Team General Manager (From Tammie Quest - not Dusty Baker)

- Don't spend time disagreeing on what is quality, take time to listen and hear from the constituent their perspective
 - Help
 - Support
 - Guide
 - Respect
 - Lead
 - Partner
- Respect that their perspective and your perspective may differ on how the 'game' is played and won
 - All perspectives are typically valid
 - Understanding what is at stake and what matters most to them is key in being a good quality partner on the palliative care service
- Play to Win AND You need to know what sport you are playing....





DISCUSSION