

DEVELOPMENT OF A CROSS-SETTING QUALITY MEASURE FOR PRESSURE ULCERS

CMS: Sec. 3004 CORs

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Purpose

- In an effort to align quality measures around patient-centered outcomes that span across settings, CMS contracted with RTI International to develop and implement a cross-setting quality measure for pressure ulcers
- CMS Quality Strategy
 - Goal 1: Make care safer by reducing harm caused in the delivery of care
 - Goal 3: Promote effective communication and coordination of care
- The CMS Blueprint for Measures Management System (v10.0) identifies alignment and harmonization as key priorities for measure development

Context: National Quality Landscape

- In 2008, the NQF steering committee stated:
 - *“To understand the impact of pressure ulcers across settings, quality measures addressing prevention, incidence, and prevalence of pressure ulcers must be harmonized and aligned.”*
- In their 2014 report, The NQF MAP stated:
 - *“promotes alignment, or use of the same or related measures, as a critical strategy for accelerating improvement in priority areas, reducing duplicative data collection, and enhancing comparability and transparency of healthcare information”*
- NQF MAP: 4 Goals
 - High-impact
 - Stimulates gap-filing for high priority measure gaps
 - Promotes alignment amongst HHS, other public and private sectors
 - Involves stakeholders

Context: National Quality Landscape

- **HHS Strategic Plan, FY 2014-2019**
 - Goal 1: Strengthen Health Care
 - Goal 3: Advance the Health, Safety, and Well-Being of the American People
 - Goal 4: Ensure Efficiency, Transparency, Accountability, and Effectiveness of HHS Programs
- **HHS Partnership for National Patient Safety Initiative**
 - Pressure Ulcers (One of the nine Healthcare Associated Conditions (HACs))
- **National Quality Strategy**
 - 3 Aims*
 - Better Care
 - Healthy People and Communities
 - Affordable Care
 - 3 of 6 Priorities*
 - Make Care Safer
 - Promote Effective Communication and Coordination of Care
 - Promote Wide Use of Best Practices

Goals for the Pressure Ulcer Measure

CMS hopes to develop and maintain a measure that ...

- Can be implemented and collected using standardized data elements across multiple healthcare settings
- Evaluates whether coordinated care has taken place
- Accounts for the vast trajectory of care points where the worsening, or development, of pressure ulcers, could have been mitigated
- Facilitates the implementation of best practices to improve patient outcomes

Goals for the Pressure Ulcer Measure

CMS hopes to develop and maintain a measure that ...

- Reduces unintended consequences
- Is EHR compatible
- Works within providers' workflows
- Supports real time surveillance
- Informs providers and the public

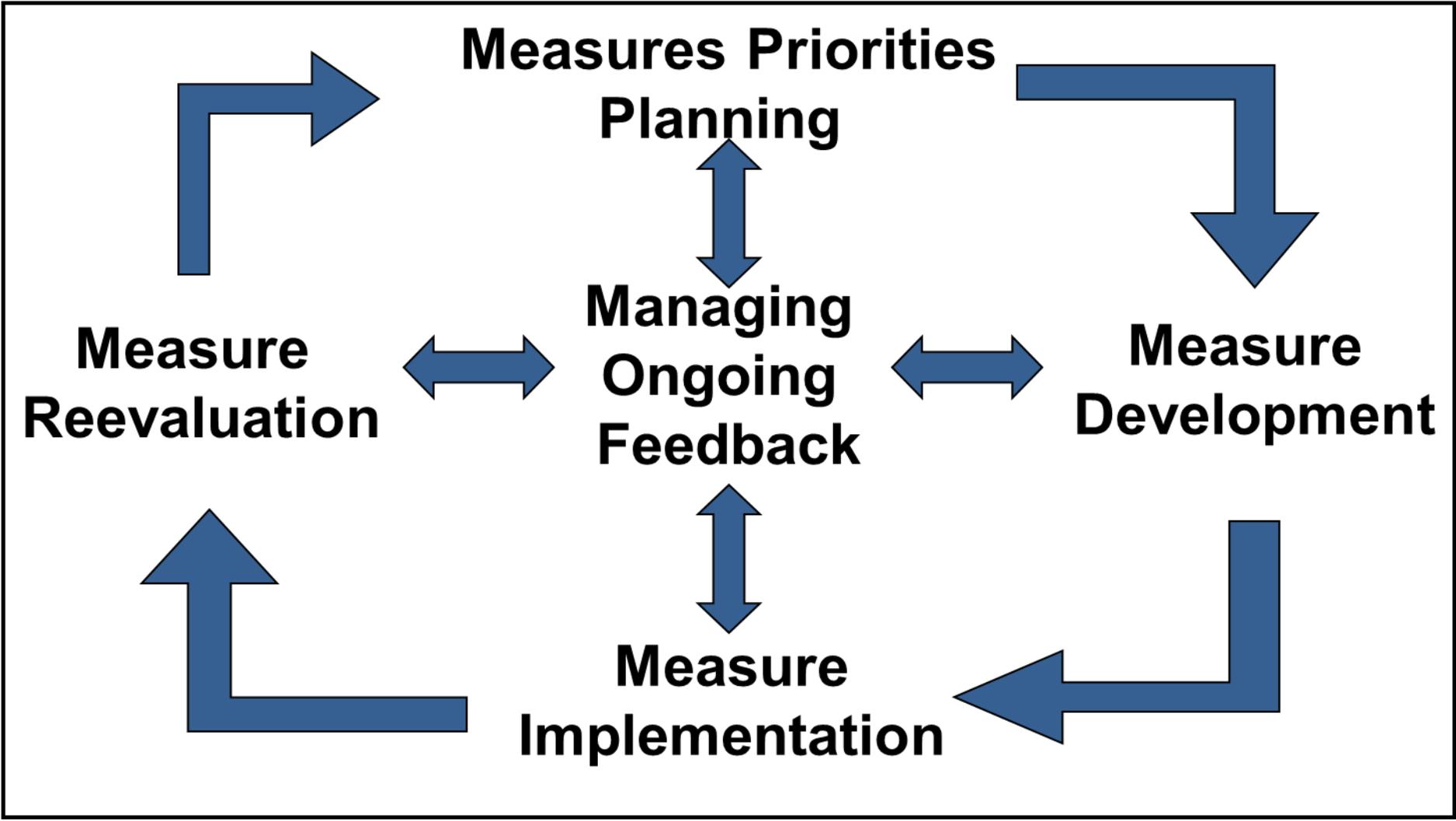
#0678: Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (short-stay)

- 2010: Implemented in NH/SNF setting
- 2012: Implement in Long Term Care Hospitals and Inpatient Rehabilitation Facilities
- Use of standardized data elements across the three settings
- 2013: Items added to OASIS-C to support future implementation in Home Health Agencies

Why Expand this Measure?

- Aligns with CMS and NQF goals of measure harmonization
- Successfully expanded into two additional settings
- NH/SNF data indicates validity and reliability of this quality measure
- Stakeholder feedback has been positive
- Stakeholder consensus on recommendations for improvement

CMS Measures Refinement Model



Accomplishments to Date

- Identified key issues surrounding the development of a harmonized pressure ulcer measure, including: measurement, risk adjustment, and data collection
- Identified setting specific and content area specific concerns regarding pressure ulcer quality measurement
- Developed a set of recommendations for the improvement and expansion of NQF #0678
- Explored successful strategies for prevention and management of pressure ulcers

Exploration of Strategies for Pressure Ulcer Prevention and Management

- Literature Scan: Effective (demonstrated by evidence) pressure ulcer prevention and management programs
- Key Informant Interviews: Organizations that implemented successful programs for pressure ulcer prevention or management
- Identified themes across literature and interviews
- Recommendation: Post findings, encourage facilities to learn from others' success

Development of recommendations regarding the improvement and expansion of NQF #0678

Process: October 2012 – Present

- Environmental Scan*
- Interviews*
- Technical Expert Panel*
- Meeting with NPUAP
- Upcoming: LTCH CARE Data Set, IRF-PAI, MDS 3.0, Data Analysis as part of NQF Annual Maintenance

**Findings available in Schwartz, M., Nguyen, K. H., Swinson Evans, T. M., Ignaczak, M. K., Thaker, S., & Bernard, S. L. (2013, November). Development of a cross-setting quality measure for pressure ulcers: OY2 information gathering, final report. Prepared for Centers for Medicare & Medicaid Services.*

Environmental Scan

- Review of quality measures related to pressure ulcers
- Review of previously obtained feedback

NQF Reviews

MAP
Recommendations

TEP Feedback –
NH/SNF, LTCH, IRF

Public comments
received during
federal rulemaking

Search of PubMed
and gray literature

CMS Helpdesk
inquiries

Interviews

- 5 technical advisors: Worked with CMS during the development and implementation of NQF #0678, or pressure ulcer-related projects
- Staff at 1 LTCH and 1 IRF
- Representatives from Home Health Quality Initiative and Acute Inpatient Quality Reporting Program
- **Findings from environmental scan and interviews used to develop TEP meeting agenda**

Cross-Setting Pressure Ulcer TEP

Healthcare Settings

- NHs/SNFs, LTCHs, IRFs, Acute Inpatient

Expertise

- Wound care, nutrition, quality measure development, quality improvement, plastic surgery, implementation of cross-setting initiatives

National Clinical Experts

- NPUAP, ANA

Geographic Diversity

- Experts from across the U.S.

Patient /Consumer Voice

- Patient representative

Findings

- Identified themes across environmental scan, interviews, and TEP recommendations
- Several recurring areas of concern throughout the history of the quality measure (see handout)
- Developed recommendations for both high priority and future measure development
- Reviewed feedback with NPUAP
 - An ongoing partnership has been established

Recommendations for the Development of NQF #0678

High Priority Recommendations

- Align all staging definitions with the NPUAP staging definitions
- Include new unstageable pressure ulcers and new sDTIs
- Do not assign sDTIs a stage
- If a Stage 1 or 2 pressure ulcer becomes unstageable due to slough or eschar, include as a worsened pressure ulcer
- Continue to provide training and resources to support ongoing implementation in NH/SNFs, LTCHs, and IRFs

In the Future Consider ...

- Develop a quality measure to assess “healed” pressure ulcers
- Update risk adjustment covariates
- Identify setting-specific risk factors
- Exclude patients or residents at the end of life
- Explore approaches to better align with existing data collection systems and EHR
- Integrate data collection and reporting with providers’ workflow
- E-specify the measure

Environmental Scan and Stakeholder Input

- Staging and etiology of sDTIs
- Definition of “healed” pressure ulcers
- Indicators of malnutrition
- Indicators of end-of-life
- Reliability of assessing Stage 1 pressure ulcers and the use of Stage 1 pressure ulcers
- Conduct empirical analysis using LTCH CARE Data Set, IRF-PAI, and MDS 3.0 Data

High Priority Recommendations

- Include new unstageable pressure ulcers and new sDTIs (reported separately)
- Do not assign sDTIs a stage
 - Monitor literature on staging and etiology of sDTIs
- If a Stage 1 or 2 pressure ulcer becomes unstageable due to slough or eschar, include as a worsened pressure ulcer

High Priority Recommendations

- Either
 - Align all staging definitions with the NPUAP staging definitions** or
 - Change the staging classification used in the quality measure to full versus partial thickness
- Continue to provide training and resources to support ongoing implementation in NH/SNFs, LTCHs, and IRFs

In the Future Consider ...

- Development of a quality measure to assess “healed” pressure ulcers
 - “Healed” and “Healing” are different concepts
 - Report separately
 - Consider data collection and reporting burden
 - Environmental scan and stakeholder input to define “healed”
- Exclude patients or residents at the end of life
 - Environmental scan and stakeholder input to define end of life
 - Minimize unintended consequences of this exclusion

In the Future Consider ...

- Update the risk adjustment
 - Identify setting-specific risk factors
- Explore approaches to better align with existing data collection systems and electronic health records
- Integrate data collection and reporting with providers' workflow
- E-specify the measure

Environmental Scan & Stakeholder Input

- Staging and etiology of sDTIs
- Definition of “healed” pressure ulcers
- Indicators of end-of-life
- Reliability of assessing Stage 1 pressure ulcers and the use of Stage 1 pressure ulcers
- Indicators of malnutrition and malnutrition as a risk factor for pressure ulcers
- Conduct empirical analysis using LTCH CARE Data Set, IRF-PAI, and MDS 3.0 Data

Next Steps

- RTI and CMS will finalize decisions and next steps regarding the development of NQF #0678
- NQF #0678 annual maintenance review in Fall 2014
 - RTI will conduct pressure ulcer data analysis using LTCH CARE Data Set, MDS 3.0, and IRF-PAI

Conclusions

- The development and maintenance of a cross-setting quality measure for pressure ulcers addresses a high priority condition, while achieving the goal of aligning measures and standardized data elements across the continuum of care
- This work aligns with goals set forth by:
 - CMS Quality Strategy and Measure Development Blueprint
 - HHS Strategic plan
 - HHS Partnership for National Patient Safety Initiative
 - National Quality Strategy
 - NQF Steering Committee and NQF MAP
- There are several areas for potential measure development
- Integrate stakeholder feedback with findings from environmental scan, and empirical analysis

Questions?

