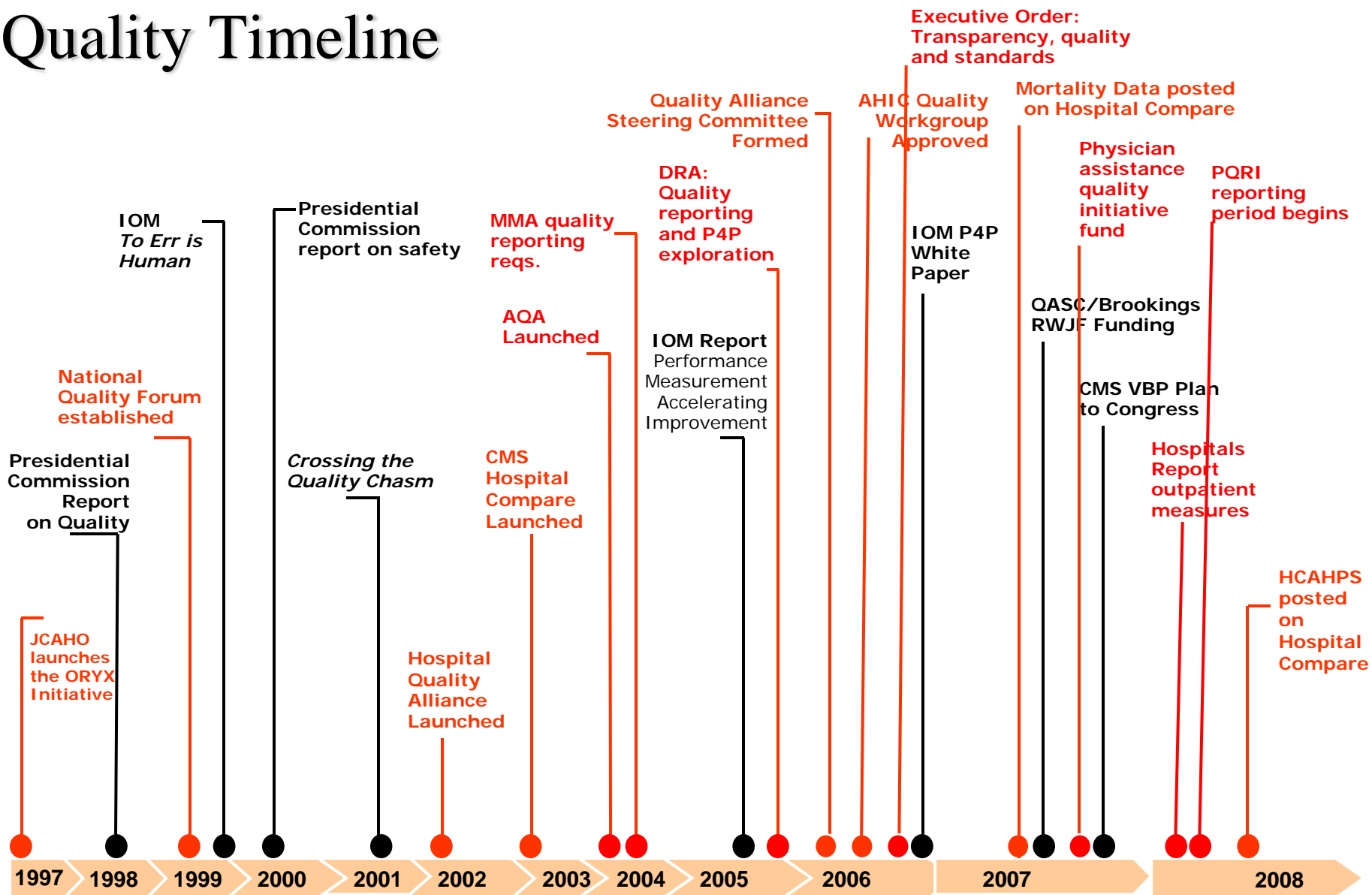


Improving Health Care Quality and Affordability: A Status Report

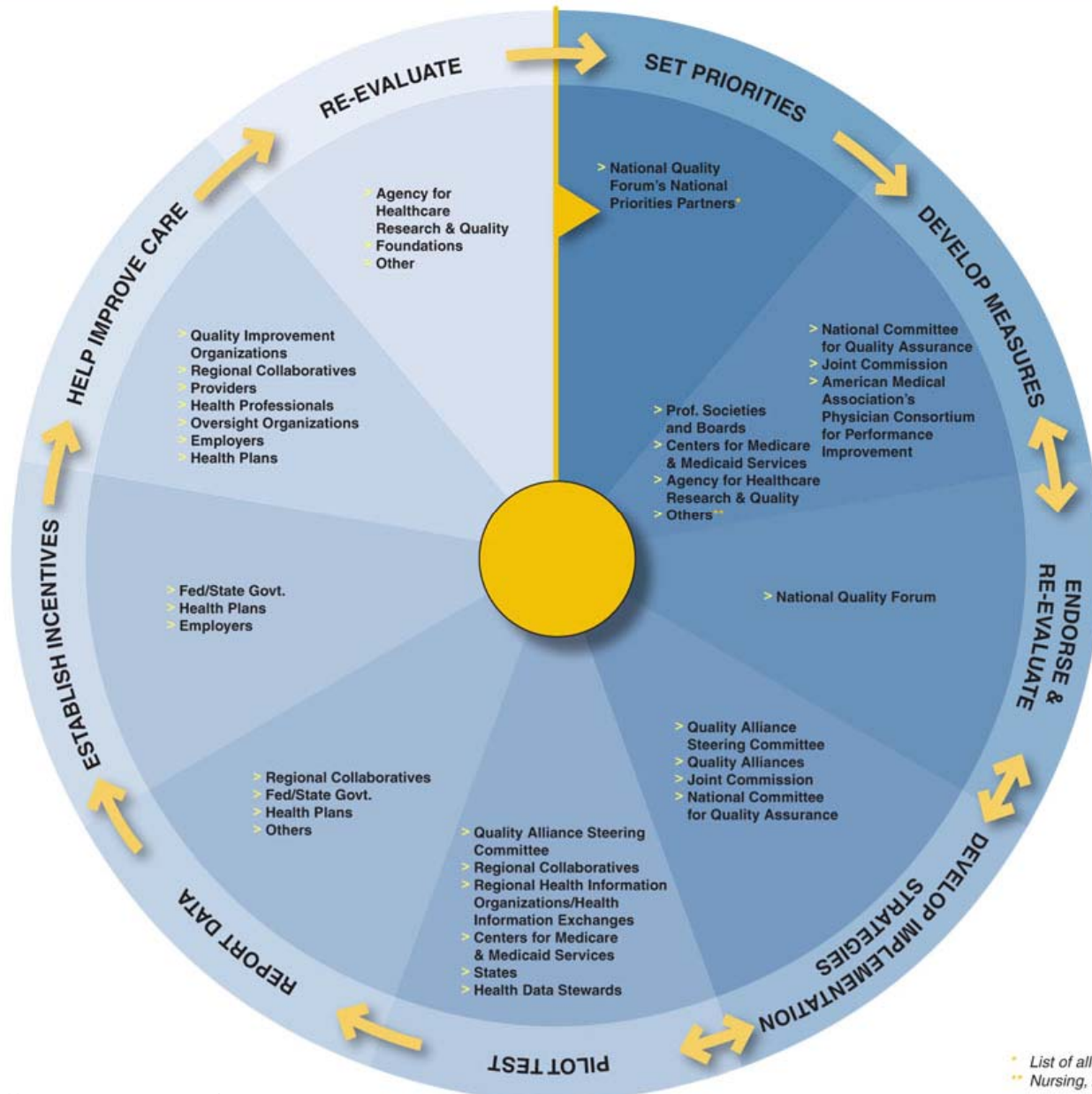
Janet M. Corrigan, PhD
President and CEO
National Quality Forum

Quality Timeline



- = Activities
- = Reports

Steps for Improving Health Care Quality & Value: Who's Making it Happen?



* List of all involved partners available.
 ** Nursing, Academic Communities, etc.

- **Who?** 28 national organizations representing the full spectrum of the healthcare system
Consumers, providers, practitioners, purchasers, government, accreditors and certifiers, quality alliances, and insurers.
- **What?** Six national priorities that meet criteria to reduce waste, eliminate harm, eradicate disparities, and relieve burden
- **Why?** A shared set of national priorities allows us to focus and align our efforts to accelerate change.

CONSUMERS

- National Partnership for Women and Families
- Consumers Union
- AARP
- AFL-CIO

PURCHASERS

- National Business Group on Health
- The Leapfrog Group
- Pacific Business Group on Health
- Chamber of Commerce

HEALTH PROFESSIONALS/PROVIDERS

- PCPI convened by the AMA
- American Nurses Association
- National Association of Community Health Centers

QUALITY ALLIANCES

- AQA
- Hospital Quality Alliance
- Quality Alliance Steering Committee
- Alliance for Pediatric Quality

PUBLIC SECTOR

- Centers for Disease Control and Prevention
- Centers for Medicare and Medicaid Services
- Agency for Healthcare Research and Quality
- National Institutes of Health
- National Governors Association

ACCREDITATION/CERTIFICATION

- American Board of Medical Specialties
- The Joint Commission
- National Committee for Quality Assurance
- Certification Commission for Healthcare Information Technology

OTHERS

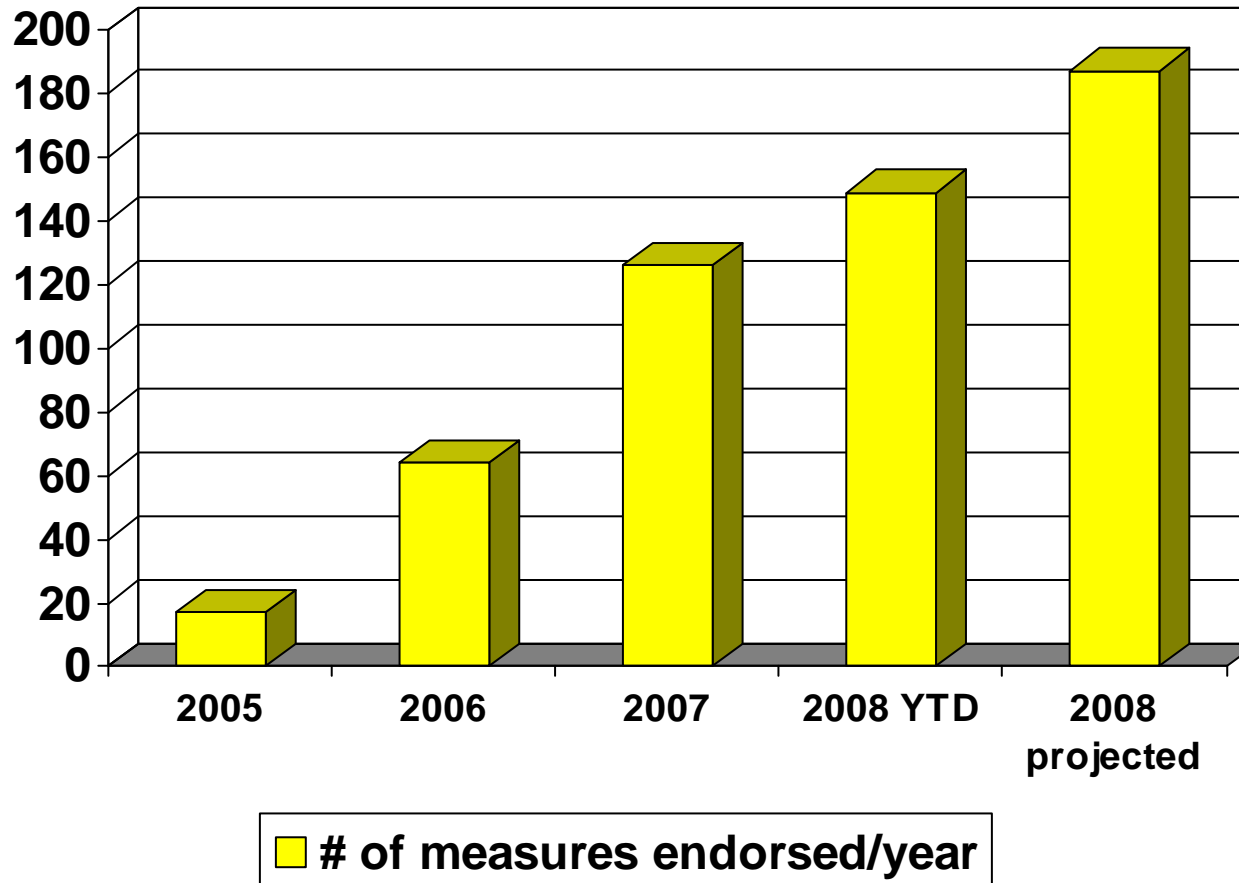
- America's Health Insurance Plans
- Institute for Healthcare Improvement
- Institute of Medicine
- National Quality Forum

- Population health
 - Key preventive services
 - Healthy lifestyle behaviors
- Safety
 - Hospital-level mortality rates
 - Serious adverse events
 - Healthcare-Acquired Infections
- Care Coordination
 - Medication reconciliation
 - Preventable hospital readmissions
 - Preventable emergency department visits
- Patient/family engagement
 - Informed decision-making
 - Patient experience of care
 - Patient self-management
- Palliative Care:
 - Relief of physical symptoms
 - Help with psychological, social and spiritual needs
 - Communication regarding treatment options, prognosis
 - Access to palliative care services
- Overuse
 - 9 major areas

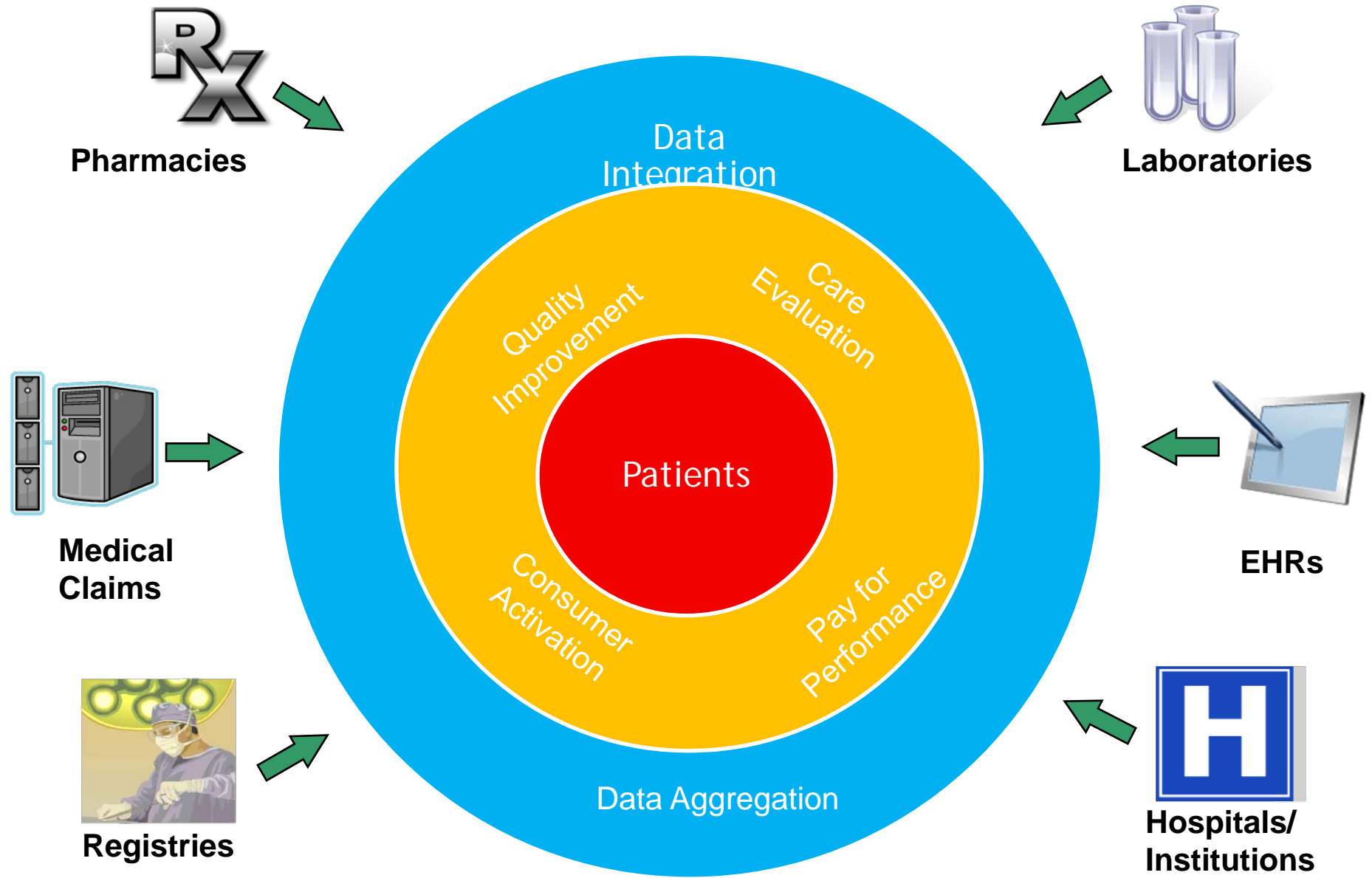
NQF 6-step Consensus Development Process:

1. Formation of a steering committee
2. Call for measures
3. Measure evaluation
4. NQF member review and voting
5. Consensus Standards Approval Committee and Board of Directors
6. Appeals

Growth in the Number of NQF-Endorsed Measures



- Producing performance information requires data aggregation and reporting
- Multiple sources of data required
- All-person, all payer data repositories
- Many local/regional efforts underway
 - Brookings Institution



Regional-National Collaboration is Essential

