

Take the Measure and Run: Working with the HAB Performance Measures



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Learning Objectives



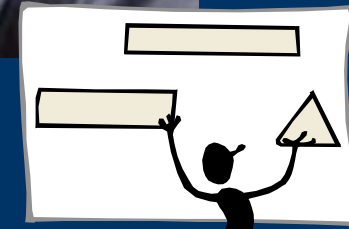
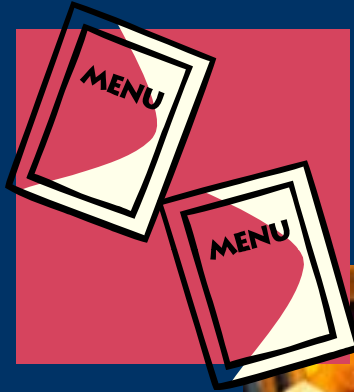
- Discuss how the HAB performance measures (PMs) can be utilized to improve the quality of care for the HIV-infected population.
- Identify the HAB PMs.
- Discuss how PMs can be used based on type of program, data and target population.
- Identify ways in which grantees have used the HAB PMs to improve their services.
- Identify tools & TA vehicles available to build QM capacity.

Role of Performance Measurement in Quality Management

- Identify & communicate priorities
- Drive improvement
- Provide a way to compare performance across programs and over time
- Build a community of providers focusing on the same elements of care



Role of HAB Performance Measures: A la Carte Dining



HAB Performance Measures

www.hab.hrsa.gov/special/habmeasures.htm

- Clinical (Groups 1-3)
- Medical Case Management
- Oral Health
- ADAP
- Systems-level (new!)
- Pediatrics (new!)

Elements of HAB PMs

- Performance Measure
- Numerator and Denominator Definitions
- Patient Exclusions
- Data Element
- Data Sources
- National Goals, Targets & Benchmarks
- US Public Health Service Guidelines
- References/notes
- Examples (Systems-level)



Pediatric Performance Measures: Overview

- Age of eligible population varies by measure
 - Refer to detail sheet for exact age range
 - Utilize table of PMs for quick reference
- Addresses clinical, social and system issues



Pediatric Performance Measures

- ARV Therapy
- CD4 Value
- Developmental Surveillance
- Disclosure of HIV Status to Child
- Health Care Transition for HIV-Infected Youth
- HIV Diagnostic Testing of Exposed Infants

Pediatric Performance Measures (cont.)

- Medical Visit
- MMR Vaccination
- Neonatal ZDV Prophylaxis
- PCP Prophylaxis
- Resistance Testing

Systems-Level Performance Measures

- Waiting Time for Initial Access to Outpatient/Ambulatory Medical Care
- HIV Tests Results for PLWHA
- Disease Status at Time of Entry into Care
- Quality Management Program
- System-Level Performance

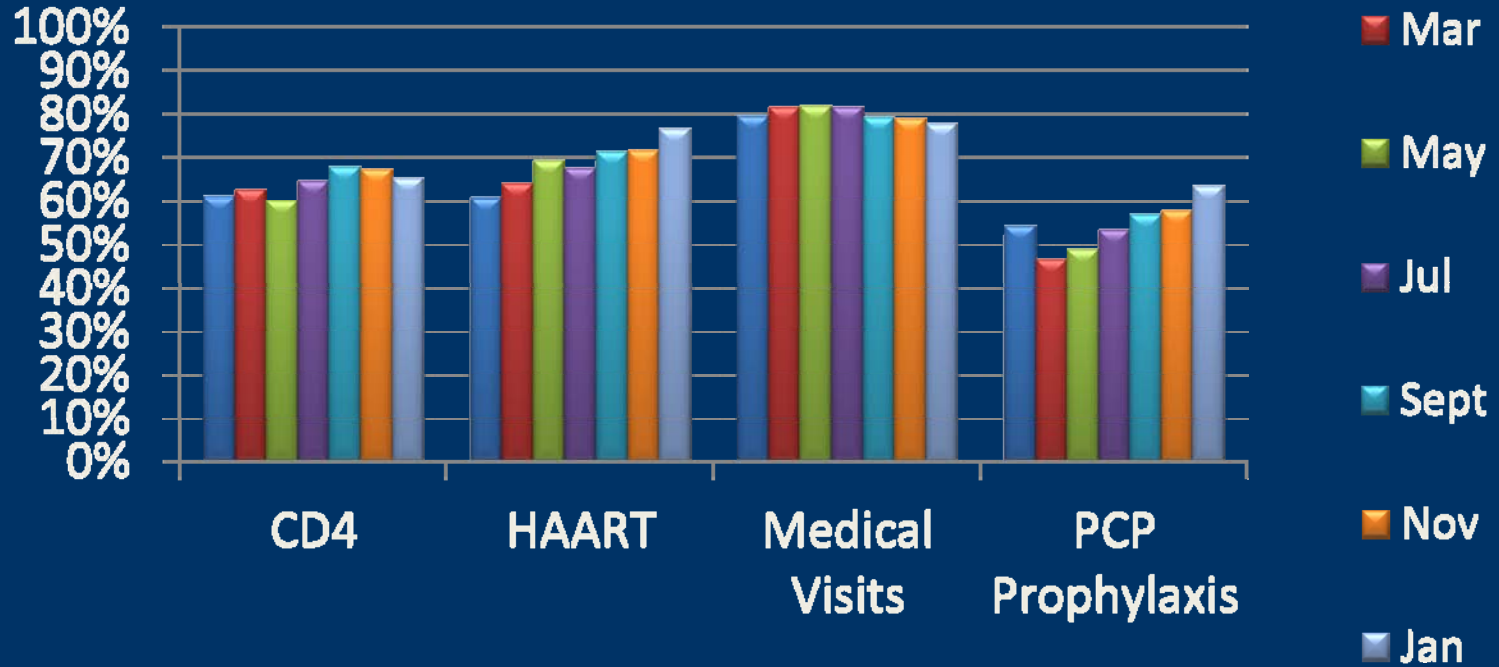


Utilization of Measures: Experience in the Bureau

- Used as standard measures for large quality initiatives such as Collaboratives
- Integrated into client level data
- Expanded the functions of CAREWare
- Threaded through program expectations & guidances
- Created ownership & buy-in

Cross Part Collaborative Performance Data

Average Scores Across 5 States



Utilization of Measures: Experiences in the Field

- Incorporation & integration into QM program
- Modification of measures
- Identification of specific QI projects
- Selection & prioritization of measures



What Would You Use?

- Providers in a small clinic anecdotally report an increasing number of patients refusing ARV therapy.
- A metropolitan area has identified a marked increase in syphilis infection every year for the past three years. Teen pregnancies are also on the rise.

What Would You Use? (cont.)

- A Ryan White funded clinic within a large city hospital system serves men and women, but it's a public hospital and faces constant budget and personnel problems. The clinic refers its female clients to the main hospital for all their gynecologic care, including Pap tests and all STD screenings. The clinic fights a constant battle to keep women from “falling between the cracks”.

Selecting & Prioritizing Measures

- Consider the following:
 - Epidemic
 - Primary modes of transmission
 - Change in trends
 - Subpopulations affected
 - Population served
 - Race/ethnicity
 - Gender
 - Age
 - Risk factors
 - Culture
 - Influencing Factors



Balanced Measures

- 1 or 2 measures are not sufficient
- Consider the purpose of the measures
 - Primary focus of your program will impact the set of measures selected
 - Family centered care network vs. primary care clinic
 - State or region-focus vs. stand alone clinic
 - Support services program vs. clinical program

Use the Data to Guide your Improvement Work



Look at the data

- Doing well, or not?
- Performance stable, or a trend?
- Compared to other grantees?

Decide how to act on the data

- Which areas need improvement?
- What are our priorities for improvement?

Begin improvement work

- Identify project team
- Define improvement goal



Annual Quality Review Data

Facility	Cases #	Sample #	HBV Vaccine Completed	Medical Visits q6mon	PCP Prophylaxis	HAART	ARVs in Pregnancy
			Results (% of eligible patients sampled)				
			%	%	%	%	%
1	14	14	79	75	100	100	100
2	1275	90	57	60	81	91	95
3	509	81	52	83	91	92	100
4	3392	110	51	77	82	88	97
5	214	41	77	88	99	100	100
6	2294	102	69	83	79	87	93
7	195	41	81	72	98	98	100
8	92	36	58	70	95	92	92
9	484	100	51	74	82	95	100
10	172	40	54	70	85	88	98
Median			58%	75%	88%	92%	99%



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Available Measures

- <http://hab.hrsa.gov/special/habmeasures.htm>
- <http://www.hivguidelines.org/Content.aspx?PageID=51>
- <http://nationalqualitycenter.org/>
- <http://www.cms.hhs.gov/PQRI/>

Available Resources & Technical Assistance

- National Quality Center
- HIVQUAL-US



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