## Going to PROM – learn to dance with the community and measure what moves them most

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## Disclosures



• None of the presenters has relevant financial interests to disclose.

## **Meet Your Presenters**





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## Learning Objectives



- 1. Describe the importance of customer experience outcomes as drivers of performance excellence.
- Explain how to develop relevant patient reported outcomes measures (PCN 15-02) using service unit definitions (PCN 16-02) and social determinants of health frameworks (e.g. US-EHE, US-FTC, NHAS, etc).
- 3. List the components of community involvement in the measure development process.



# Quantitative & Qualitative CQM Performance Measures in the Dallas EMA/HSDA

What we considered in our overall approach to CQM performance measure specification for our region

### **HIV Care Continuum**



- 2011: One of the most important innovations we've had in our field
- Quantitative care markers that can be used to describe outcomes
  - Testing, Linkage, Retention, ARV Prescription, Viral Suppression
  - Implications for "left" or "prevention" side continuum
  - Includes status- and payor-neutral applications
- Allows for easy segmentation to identify disparities and other inequity in care funding, access, and outcomes
- Applies more neatly to clinical services than to supportive services

## Face vs Heart of the Matter



- Quantitative data are reliably countable
  - Clinical data
  - Demographic data
  - Financial data
- Qualitative data are not readily countable, but can be coded in a way that can make them measurable in an objective way
  - Key Stakeholder Interview data
  - Focus group data
  - Comment cards
  - Survey data (because lends itself to interpretation)

## SDOH Emphasis Needed



- In order to End the HIV Epidemic (EHE), we need to have a sense of how social determinants of health intersect in key populations
- Again, without REAL data, we are making assumptions = prejudice
- We need a scientific process that allows us to specify PROM/PREM in an efficient manner that involves the community at each step
- Evidence-based co-design (EBCD) methods are the answer
  - EBCD is the concept that the community is an essential planning partner
  - EBCD means that the providers and potential consumers are included in the creation and testing of our measures
  - Our CQM consultants have a full toolkit on EBCD for EHE and this is a part of it

## Validating PROMs & PREMs



- How do you know when a measure is good / valid?
- Validity testing has 4 components professionally assessed by experts
  - Face validity, Content validity, Concurrent Criterion, Interrater Reliability
  - Similar assessment steps are used in "psychometric testing"
- What is psychometric testing?
  - Focus group process involving the "experts" the COMMUNITY
  - Primer training is needed to ensure a common baseline understanding
  - NQF has resources to support this process, in your toolkit for this session
  - Ideally take on consumers trained on a conveyor by an EHE agency but for now working through the planning council to establish a new relationship



## Developing PROMs & PREMs in Dallas EMA/HSDA

How we used the PCN 15-02 and PCN 16-02 frameworks to create our CQM performance measure specification process

## PCN 15-02 Application



- PCN 15-02 provides a formula basis to determine which service categories require CQM PMs and how many measures are required
  - Utilization data from "last year" is used to setup performance measurement work groups "this year" to develop measures that will be in place for "next year" – workflow image on next few slides!
- Ties to infrastructure, performance measurement, stakeholder involvement, and more!
- PROM/PREM process is part of standard CQM program evaluation
  - The AA CQM Program uses the Part B OA adapted by Texas to evaluate itself
  - The AA CQM team uses the Part C/D OA it adapted to evaluate subrecipient uptake of the PROM/PREM process

## Workgroup Processes



- When a service category is identified as requiring measures, hold a workgroup meeting of all Part A/B funded providers for that service
  - 1 hour meeting to review the purpose of the service category based on PCN 16-02, local and state service standards, and how it's used by agencies
  - Review all available data on utilization, demographics, etc
  - Additional meetings are scheduled as needed.
  - All meetings are recorded with notes to show action steps, rationales
- Once specified, the providers have time to test and provide feedback
- This happens annually. If a measure already exists, the workgroup also considers existing CQM data and whether to change measures

## Full 2-Year Process Explained



#### Baseline Year – Yr0

Report on Prior Year Utilization by Funded Service Cateogry

#### Measure Planning Year - Yr1

Identify Service Categories with Emerging and Retiring Measures Convene Funded Provider
Workgroup to Specify Emerging &
Review Existing Measures

Publish New Measures for Quarterly Reporting by Funded Providers

#### Validation Year – Yr2

Collect 1 Quarter of Data Using Newly Specified Measures Create Focus Groups for Psychometric testing of data Save Data for Next Workgroup Process

### Our Measures



#### 2022 DALLAS EMA/HSDA QUANTIATIVE CQM PERFORMANCE MEASURES (EMR and TCT data)

#### **HAB Measure: Annual Retention**

Source: OAHS services report EHR data (excel report). MCM/RHSS services report in TCT (no action required by providers).

Numerator: Denominator patients with 2 medical encounters in 12-month period where at least 1 is with prescriber.

Denominator: Number of HIV patients receiving above services with at least 1 medical encounter in 12-month period.

Exclusions: patients who died in the measurement year.

#### **HAB/NQF Measure: Viral Suppression**

Source: APA/OAHS services report EHR data (excel report). RHSS services report in TCT (no action required by providers).

Numerator: Denominator patients with a viral load less than 200 copies/mL at last HIV viral load test in 12-month period.

Denominator: Number of HIV patients receiving above service with at least 1 medical encounter in 12-month period.

Exclusions: None.

#### **HAB/NQF Measure: ARV Prescription**

Source: TCT (no action required by providers).

Numerator: Denominator patients prescribed antiretroviral therapy for HIV treatment in 12-month period.

Denominator: Number of HIV patients receiving above services with at least 1 medical encounter in 12-month period.

Exclusions: None.

## Our Measures 2



#### 2022 DALLAS EMA/HSDA QUALITATIVE CQM PERFORMANCE MEASURES (patient-reported outcome measures)

#### **Dallas PROM: Addressing Client Care Concerns (nMCM)**

Source: Qualtrics (providers responsible for disseminating survey link).

Survey Timing: Within 2 days of first non-medical case management visit in measurement period (once per quarter per patient).

#### Dallas PROM: Addressing Client Barriers to Care (MCM)

Source: Qualtrics (providers responsible for disseminating survey link).

Survey Timing: Within 2 days of first medical case management visit in measurement period (once per quarter per patient).

#### **Dallas PROM: Practical Value of Transportation Assistance (MedTrans)**

Source: Qualtrics (providers responsible for disseminating survey link).

Survey Timing: At end of quarters where the client received the transportation assistance.

#### Dallas PROM: Oral Health Self-Efficacy (Oral Health)

Source: Qualtrics (providers responsible for disseminating survey link).

Survey Timing: Within 2 days of first oral health encounter in measurement period (once per quarter per patient).

#### **Dallas PROM: Identification of Barriers (Outreach)**

Source: Qualtrics (providers responsible for disseminating survey link).

Survey Timing: Within 2 days of first outreach encounter in measurement period (once per quarter per patient).

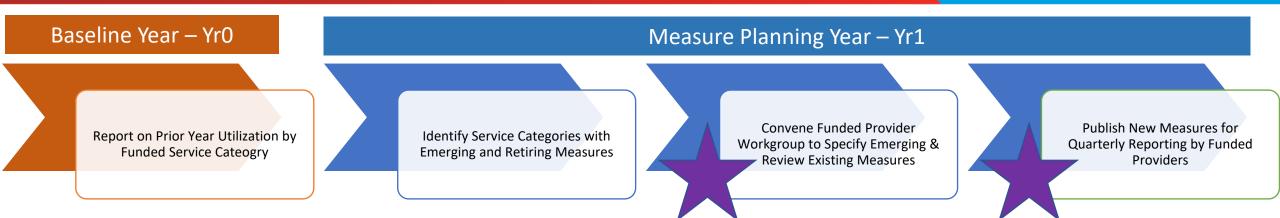


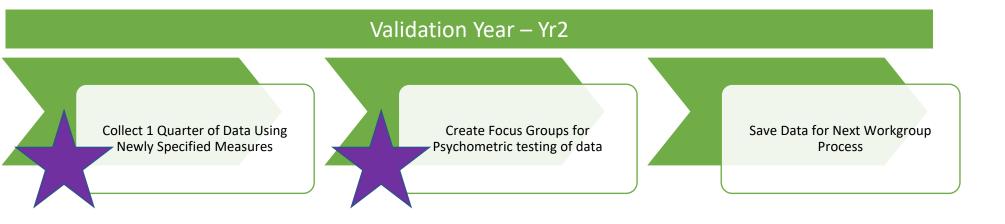
## It's All About Community!

How to lean in on bringing in the voice of the consumer and broader community

## 2-Years of Community Input







## **Applications Beyond RWHAP**



- There are MASSIVE implications for this activity beyond RWHAP scope
  - Ending the HIV Epidemic and Rapid Start
  - Achieving Together TX (and other local/regional plans)
  - Fast-Track Cities US (use as a way to realign activity by stakeholder category)
- Opportunity to engage trained/knowledgeable consumers and limit moral injury tied to a lack of opportunity for meaningful involvement
- As mentioned, the National HIV/AIDS Strategy heartily supports this method and in fact pushes us all to identify how better to let the HIV community self-determine its service systems

## Sources & References



- HRSA PCNs and Program Letters Webpage
- National HIV/AIDS Strategy 2022-2025
- NQF PROM/PREM and other measure development resources
- Scholarly articles on PROM/PREM creation
  - A Systematic Review of the Validity and Reliability of PREMS
  - O Psychometric Evaluation of PREMS: is it Valid?
- ASQ articles on measure development and community involvement
  - Statistics with Confidence (6/2022)
  - Lessons from a Guru (2/2022)
- IHI measure development resources

## To Obtain Credit



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