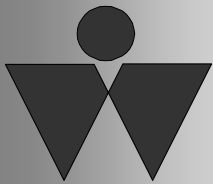


**Improved Quality and
Resource Redirection**



Factor 9: The potential for improved quality of care and the redirection of resources from supporting excess capacity toward reinvestment into productive health care purposes.

Research in measuring quality is not as advanced as in other areas of health care. Most adverse outcomes are associated with poorly designed processes, not poorly performing healthcare workers. There are two ways to measure quality – through outcomes and processes of care. Examples of measuring outcomes can be found in the Cardiac Reporting System data where risk adjusted mortality is measured by hospital and by physician. The Center for Medicare and Medicaid Services (CMS) and the Hospital Quality Alliance measures processes to show quality improvement and prevent adverse outcomes as in the case of Surgical Infection Prevention performance.

A multitude of quality measures exist, including using discharge data, AHRQ algorithms, NQF consensus standards, Leapfrog, and ORYX (core measures). Hospital context varies, influencing system processes and care management issues. For example, small and rural hospitals may not reach volume thresholds sufficient to yield reliable results in quality evaluation or improvement.

Current financial incentives are not aligned with quality improvement. Quality of care must be measured routinely at the national, state and provider level. Health care organizations must be committed to a culture of safety and quality across their system. Appropriate adherence to clinical guidelines and other desired performance is an effective way to improve quality, reduce variation in care and improve financial performance. Organizations need to pursue strategies to incentivize their use. The other key to improved quality is effective communication among the health care team and between providers and their patients. Health information exchange and interoperability are powerful tools, which can provide more complete information about a patient, reduce duplicate testing, reduce medication errors, increase communication among providers of care and provide patient centered care.

The future direction of performance measurement will focus on the following:

- Standardized measures
- Common data elements across care settings
- Uniform reporting across care settings
- Patient-centered infrastructure
- Movement from episodic care to a continuum of care
- IT infrastructure.