

MINUTES

Vermont Hospital Quality Framework

January 25, 2022

10:00 – 11:30 a.m.

Purpose: To design a framework of meaningful metrics that provides relevant information and accurately reflects the hospital system's quality of care within the healthcare reform environment in Vermont.

10:00-10:30 Welcome & Introductions

Themes:

- create a tool that can meet common goals
- measures and tool should be useful, consumer-friendly
- want to streamline reporting – opportunities for simplification
- importance of patient-reported and patient-centered outcomes
- what do people need from care?
- factor in employee experience
- promote quality across Vermont
- create a local standard to address small numbers issue
- measures should be aligned, rural-relevant, reliable, comparable
- framework should drive medical decision-making and health policy
- how to integrate mental health and mental health measurement?
- how does access to health care services factor into quality of care?
- how can this work inform Act 53 reporting?

10:30-10:40 Vision

Discussion:

- Will one of the project goals be to understand how various stakeholders use this information?

10:40-10:50 Work to Date

- Looking forward to making recommendations for an aligned core measure set for assessing quality of care across hospitals.

10:50-11:00 Scope of Work & Timeline

Action Items:

- Review draft charter; send feedback to [Ali](#).
- Review draft logic model; send feedback to [Ali](#).
- Review *Building a Vermont Hospital Quality Framework*, VPQHC, August 2021.
- Respond to [Doodle poll for February meeting](#).
- Share any additional resources or literature with [Ali](#).

11:00-11:05 Identify Additional Partners

- Xusana Davis, Executive Director of Racial Equity
- Disability Rights VT may help recruit people with disabilities.
- Susan Aranoff may have contacts or suggestions for soliciting perspectives from consumers with disabilities.
- Patient and family advisory councils may help recruit consumers.
- Consider honoraria, job title for consumer representatives.
- Justin Kenney (Agency of Administration) and/or Dru Roessle (Agency of Human Services) produce the *Annual Vermont Outcomes Report* for the Legislature.
- NAACP
- Adam Kunin can recommend a consumer representative.

11:05-11:25 Discussion

- Re. racial equity, do we have the data to evaluate various populations of focus?
- Process measures (within hospitals' control) preferred over outcome measures (e.g., CMS Hospital Compare).
- Want hospitals to collect and promote these data; need to consider any potential impacts and the larger context of GMCB's sustainability work.
- We do not pay enough attention to current metrics demonstrating that the quality of care in Vermont is high.
- Want to ensure we support each other, patients receive highest quality of care, and participation in quality framework is not punitive.
- Consider that quality trends could go down for some measures due to treating people in the right place at the right time (and, therefore, hospitals managing care for more acute situations than other settings).
- Could our framework include qualitative information to incorporate contextual information like this?
- Need to measure appropriateness of care.
- Want to keep the hospital quality metrics within the context of broader metrics (e.g., All Payer Model) without broadening the project scope.
- Interest in looking at measures of coordination of care across settings.

Further Reading:

- Martin L, Nelson E, Rakover J, Chase A. *Whole System Measures 2.0: A Compass for Health System Leaders*. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2016. (Available at ihi.org)
- Resources available in [VPQHC document portal](#). (password: framework123)