

Final Report

Model Public Report Elements: A Sampler

Prepared for:

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Invitation to Readers of Sampler To Suggest Additional Model Report Elements

The state of the art and science of public report design is rapidly evolving. We invite readers of this Sampler to e-mail us with other model report elements, which we will post in this section of the Sampler. E-mail model elements you come across to Jan De La Mare at Jan.DeLaMare@ahrq.hhs.gov, including the following information:

Name of Public Report:

URL of *specific* report *Web page* that features the model element:

Check the relevant report element or functionality being featured:

Landing page

Presentation of measure ratings

Consumer engagement tools

Place for consumer input on Web site design

Functionality (e.g., capacity to narrow selection, sort providers, e-mail content)

Layout

Other: _____

Discussion of why you like this specific element:

Your name:

Your e-mail address:

Introduction and Purpose

The purpose of this guide, *Model Public Report Elements: A Sampler* (Sampler), is to provide an illustrative menu of public report elements from health care provider performance reports from around the country. The example Web pages highlighted in the Sampler span five core Web pages (landing page, presentation of measure ratings, consumer engagement tools, place for consumer input on Web site design, and other resources) that constitute a public report and are present on nearly all public reporting Web sites. Additional examples illustrate functional possibilities of Web sites (such as sorting by performance) and demonstrate how to facilitate use by consumers and how to engage consumers in their care.

Who Is the Audience?

Community quality collaboratives—such as Chartered Value Exchanges (CVEs)—and organizations hosting or beginning development of a public report on health care provider performance.

What Kinds of Web Sites Are We Highlighting?

Those that convey provider-specific quality scores to an audience of consumers, although certain collaboratives may want to reach multiple audiences, including consumers, providers, health plans, and employers and other purchasers, such as labor unions.

What Is Meant by a Sampler?

The Sampler addresses important topics in creating a public reporting Web site, with the goal of facilitating Web site design or improvement by community quality collaboratives or other report sponsors. It should be noted that examples included are “better practices” or “common practices.” It is not yet possible to delineate best practices in the area of public reporting. Such programs are relatively novel and evaluative data regarding both their impact and our understanding of how to maximize this practice are still evolving. Any Web site included in the Sampler may have some features that are good and other features that could be improved. The red arrows on the screenshots identify the specific better practice elements being featured.

Without definitive evidence about best practices, it is likely that the most effective public reporting Web sites will be those that are, at least for a while, continually in a state of growth. These are sites that are actively reevaluating, refining, and enhancing their offerings.

What Other Tools Related to Public Reporting Are Available From AHRQ?

In addition to this Sampler, AHRQ has seven other resources related to public report design:

1. **Selecting Quality and Resource Use Measures: A Decision Guide for Community Quality Collaboratives:** Expert answers to 26 questions posed by community quality collaboratives on data and measures (quality and efficiency) selection issues. The resource includes examples from community quality collaboratives.
 - **Lead author:** Patrick Romano
 - **How to access:** www.ahrq.gov/qual/perfmeasguide/ or AHRQ Clearinghouse (Publication No. 09(10)-0073)

2. **White Paper: Methodological Considerations in Generating Provider Performance Scores for Use in Public Reporting:** A set of 20 key methodological decisions associated with producing provider (e.g., hospital, physician, physician group) performance scores for use in public reporting. It includes an explanation of the practical importance of each decision, a review of alternative decision paths, and a discussion of the pros and cons of each option. The resource includes examples from community quality collaboratives.
 - **Lead authors:** Cheryl Damberg and Mark Friedberg
 - **How to access:** www.ahrq.gov/qual/value/perfscoresmethods/
3. **TalkingQuality Web site (rerelease):** A comprehensive, interactive Web site to guide planning, producing, and evaluating a comparative report on health care quality for consumers. The Web site includes the Report Card Compendium, which provides links to more than 200 consumer reports.
 - **Lead investigator:** Lise Rybowski
 - **How to access:** www.TalkingQuality.ahrq.gov
4. **Public Report Design: A Decision Guide for Community Quality Collaboratives:** Expert answers to 25-30 questions posed by community quality collaboratives on public report design and sustainability. The resource includes examples from community quality collaboratives.
 - **Lead author:** Adams Dudley
 - **Expected:** 2012
 - **How to access:** CVE and AHRQ Web sites and AHRQ Clearinghouse
5. **Best Practices in Public Reporting No. 1: How To Effectively Present Health Care Performance Data to Consumers:** A report that provides practical strategies to designing public reports that make health care performance information clear, meaningful, and usable by consumers. The report focuses on the challenges involved in designing a public report card so that the performance information is easily understood by consumers. It also describes strategies to make it easier for consumers to understand and use comparative health care quality reports.
 - **Lead authors:** Shoshanna Sofaer and Judith Hibbard
 - **How to access:** <http://www.ahrq.gov/qual/pubrptguide1.htm>
6. **Best Practices in Public Reporting No. 2: Maximizing Consumer Understanding of Public Comparative Quality Reports: Effective Use of Explanatory Information:** A report that provides practical strategies to designing public reports that make health care performance information clear, meaningful, and usable by consumers. The report focuses on the explanatory information in public reports, beyond the performance data, that helps to accurately communicate quality ratings to consumers and motivate them to use the ratings in making informed health care decisions.
 - **Lead authors:** Shoshanna Sofaer and Judith Hibbard
 - **How to access:** <http://www.ahrq.gov/qual/pubrptguide2.htm>

7. **Best Practices in Public Reporting No. 3: How To Maximize Public Awareness and Use of Comparative Quality Reports Through Effective Promotion and Dissemination Strategies:**

A report that provides practical strategies to designing public reports that make health care performance information clear, meaningful, and usable by consumers. The report applies social marketing and other principles to explore how to target reports to specific audiences, develop messages to promote the report with key audiences, engage consumer advocacy and community groups in promoting reports and helping people use them, disseminate reports through trusted channels, and ensure that consumers see and use comparative quality reports.

- **Lead authors:** Shoshanna Sofaer and Judith Hibbard
- **How to access:** <http://www.ahrq.gov/qual/pubrptguide3.htm>

I. Early Strategic Decisions: Options and Examples

A. Types of Providers and Measures

In developing public reports, it is important to make some decisions early. For example:

- Will your report feature quality ratings for more than one type of provider, such as hospitals and physician organizations?
- Will you start with condition-specific reports and expand to other conditions, procedures, and/or populations from there?
- Will your report group individual measures into categories of quality, such as patient experience and provider safety?

If you are currently reporting on or plan to report on multiple types of providers, it is optimal to have all provider categories on one site. It is typically easier for the consumer to navigate if you use a similar format and approach for displaying comparative data for each type of provider. Similarly, if your report begins with one condition and then later expands to other conditions, it is preferable to have all the condition-specific information available on one site. Because families may be coping with multiple conditions within the same household or same individual family member, integrating the information will make it easier to use.

Organizing individual quality measures into categories that represent dimensions of quality also helps consumers learn that quality is multidimensional. Refer to Sections II A and B.

This example shows how to report performance data on two provider types at one site.

Tool: MyCareCompare.Org

Sponsor: Greater Detroit Area Health Council

URL: <http://www.mycarecompare.org/site>



This example lets the user choose condition-specific quality indicators.

Tool: Partner for Quality Care

Sponsor: Oregon Health Care Quality Corp

URL: <http://www.partnerforqualitycare.org/selection.php>

Partner for Quality Care

Tips for You Quality Scores About this Work

You are here: Home > Quality of care ratings for Oregon clinics and medical groups

Step 1: Choose one or more regions

Portland Metro West (checked)
Portland Metro East
North Coast
Willamette Valley
Central Oregon
Eastern Oregon
South Coast
Southern Oregon

Portland Metro West Willamette Valley
 Portland Metro East Southern Oregon
 North Coast Central Oregon
 South Coast Eastern Oregon

Step 2: Choose a topic

Diabetes
 Heart Disease Care
 Women's Health
 Asthma Medication

Step 3: Choose doctors' offices or medical groups

Doctors' offices
 Medical groups

A medical group includes all the doctors' offices within that system.

View Quality Scores

B. Separate Information for Consumer vs. Provider

The data needs of consumers, on the one hand, and providers on the other, are different, as is their ability to interpret technical, clinical, and statistical details. In particular, research shows that consumers may not understand clinical terms such as “hemoglobin A1C” or statistical concepts such as confidence intervals. Community quality collaboratives might consider having different reporting formats and reporting sources for consumers versus providers.

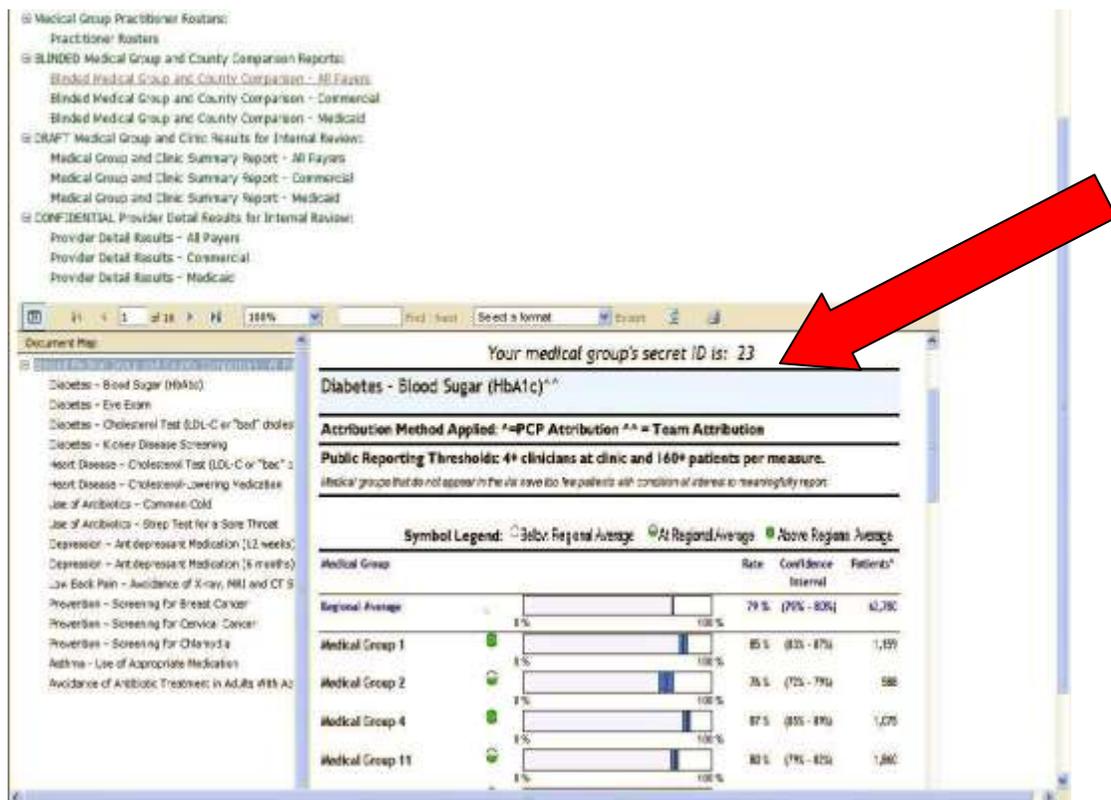
In the example below, the Puget Sound Health Alliance uses a report for medical groups that includes many clinical and statistical terms. However, they also have a Web site targeting consumers that uses more everyday language and provides less clinical detail (shown in the second screenshot below). The report is available to participating providers through a password-restricted Web site. It provides performance rates with 95 percent confidence intervals and sample sizes on a variety of process measures, allowing the groups to benchmark themselves against regional averages.

Tool: Blinded Medical Group and County Comparison Reports—All Payers

Sponsor: Puget Sound Health Alliance

URL: <http://www.wacommunitycheckup.org/>

[URL is for community site; this page is an example from the restricted access site]



This consumer-oriented report presents a simple three-tiered rating system for level of diabetes care (above, at, or below regional average), although more details are available.

Tool: Health Alliance Community Checkup

Sponsor: Puget Sound Health Alliance

URL:

<http://www.wacommunitycheckup.org/?p=viewreports&orgname=all&county=All+Counties>

The screenshot shows the 'COMMUNITY CHECKUP' website interface. At the top, there is a navigation bar with the logo and links for 'VIEW RESULTS', 'ABOUT OUR REPORTS', 'RESOURCES', 'ABOUT US', and 'OWN YOUR HEALTH'. Below the navigation bar, there are search filters: 'Search by medical group name' (set to 'All medical groups'), 'by county' (set to 'All Counties'), and 'within' (set to '1 mile'). A 'View results for:' dropdown is set to 'Diabetes', with a red arrow pointing to the 'Search' button. To the right of the search button, there is a legend for the rating system: 'BETTER than average' (yellow circle), 'AVERAGE' (grey square), 'BELOW average' (purple inverted triangle), and a star icon for 'Means there was not enough data to report'. Below the search filters, there are four tabs for 'VIEW & COMPARE': 'Medical Groups', 'Clinics', 'Hospitals', and 'Health Plans'. The 'Medical Groups' tab is selected. Below the tabs, there are options for 'Sort by:' (set to 'Name'), 'SHOW:' (radio buttons for 'All', 'Only Commercial', 'Only Medicaid'), and 'Hide if not enough data to report'. A table displays comparison results for four metrics: 'Cholesterol Test (LDL-C or HDL-cholesterol)', 'Blood Sugar (HbA1c) Test', 'Eye Exam', and 'Flu/Influenza Screening'. The table shows a 'Regional Average' and data for four medical groups: 'Associated Valley (B/E/S)', 'Bellevue Pediatric Clinic', 'Bellevue Center for Natural Health', and 'Bellevue Family Medicine Associates'. All groups show a rating of 'BELOW average' (purple inverted triangle) for all metrics.

	Cholesterol Test (LDL-C or HDL-cholesterol)	Blood Sugar (HbA1c) Test	Eye Exam	Flu/Influenza Screening
Regional Average	82%	90%	67%	85%
Associated Valley (B/E/S)	BELOW average	BELOW average	BELOW average	BELOW average
Bellevue Pediatric Clinic	BELOW average	BELOW average	BELOW average	BELOW average
Bellevue Center for Natural Health	BELOW average	BELOW average	BELOW average	BELOW average
Bellevue Family Medicine Associates	BELOW average	BELOW average	BELOW average	BELOW average

This is another example of a report specifically targeted to providers, allowing them to look at their performance at the patient level. Access to this type of information—data reports and patient-level detail—requires secure sign-in to protect patient confidentiality.

Tool: Partner for Quality Care for Practitioners

Sponsor: Oregon Health Care Quality Corporation

URL: <http://www.partnerforqualitycareforpractitioners.org/practitioners.php>



I want to see my data reports and patient-level detail

I have questions about accessing my data reports

I have questions about this initiative

Partner for Quality Care for Practitioners

Welcome to *Partner for Quality Care for Practitioners*, a web page created specifically for primary care practitioners, medical group administrators, and clinic managers. Patients' privacy and security is of great concern to the initiative. For this reason, your online quality measurement reports and patient-level data are housed on a separate, secure website. Please follow the instructions below to find out how to access the secure site and give feedback to the initiative. We have also provided more information that you may find helpful.

Process for accessing online quality measurement reports

1. Read instructions:

- [Medical group administrator instructions](#) (116Kb .pdf)
- [Practitioner instructions](#) (108Kb .pdf)

2. Fill out these forms:

- [Business Associate Agreement \(BAA\)](#) (48Kb .pdf)
- [Participating Practitioner Organization Agreement](#) (52Kb .pdf)

3. Submit forms:

Via email: [info\(don't steal email addresses\)@partnerforqualitycareforpractitioners.org](mailto:info(don't steal email addresses)@partnerforqualitycareforpractitioners.org)

Fax: (503) 548-4849

US Oregon Health Care Quality Corp

Mail: Attn: Partner for Quality Care initiative
619 SW 11th Avenue, Suite 221
Portland, OR 97205

4. Receive username by email and password in a separate email from Milliman, the data services vendor.

5. Go to the secure website at <https://qcorp.medinsight.milliman.com> and follow instructions provided.

Give us feedback:

Feedback due February 5, 2010

- Provide detailed feedback on patient-level data
 [Instructions for Reviewing Data and Providing Feedback](#)
- Request reconsideration of performance categories for the public report
 [Reconsideration Process and Policy](#)
- Request exclusion from the public report
 [Policy for Exclusion from Public Reporting](#)
- Provide general comments:
 info@partnerforqualitycareforpractitioners.org



Another option is to provide a common portal and public access, but to separate consumer reports from provider reports. The data presentation may be the same, but the tips, tools, resources, and advice on using the site can be tailored to each audience.

The report below is designed for both consumers and providers. However, the Patient Guide differs from the Practitioner Guide in its tips, tools, resources, and advice.

Tool: Maryland Hospital Performance Evaluation Guide

Sponsor: Maryland Health Care Commission

URL: <http://mhcc.maryland.gov/consumerinfo/hospitalguide/index.htm>

Hospital Guide **Patient Guide** **Practitioner Guide** **Hospital Leader Guide**

Welcome to the Hospital Guide!

The Hospital Guide is a tool for comparing and monitoring performance in Maryland hospitals.

If you are a Patient, our **Patient Guide** helps you find a hospital that provides a high quality of care for a specific medical condition or to compare hospital performance. Click any of the topics below to get started:

- [Heart Conditions](#)
- [Lung Conditions](#)
- [Surgeries](#)
- [Other Conditions](#)
- [Maternity Care](#)
- [Newborn Care](#)

If you are a Health Care Practitioner, The **Practitioner Guide** shows you where hospitals are performing well and where they can improve, as well as how you can provide quality care.

If you are a Hospital Leader, The **Hospital Leaders Guide** allows you to assess your hospital's performance and verify the data reported on your hospital.

If you are interested in Pricing information, try the [Maryland Hospital Pricing Guide](#).

The tabs in the top banner provide you access to the guides and the specific information. To get started, choose the guide that best reflects your interest.

Hospital Guide

- Comparison Reports
- Find a Hospital
- Find a Medical Condition
- Find a Quality Measure
- Find a Patient Experience Measure
- Healthcare-Associated Infections

Web site SURVEY

MHC | MARYLAND HEALTH CARE COMMISSION

[click here to begin](#)

Below is an example where the data available for selection are simplified for the consumer and more detailed for the professional or researcher. This report is intended for consumers and providers. However, selecting the “researchers and professionals” link allows the user to access much more detailed information. For example, on the researchers and professionals portal for hospital inpatient data, the user can search by International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) Principal Diagnosis Code and then select the desired demographics, including race, sex, county, payer type, admission source, and admission type. A link is also provided to download administrative data. By contrast, on the consumer portal for hospital inpatient data, the user can select only the age group, subgroup of hospitals to compare, and a general condition category such as asthma.

Tool: FloridaHealthFinder.gov

Sponsor: Florida Agency for Health Care Administration

URL: <http://www.floridahealthfinder.gov/about-ahca/Sitemap.shtml>

FloridaHealthFinder.gov Site Map

<p>Florida Consumers</p> <p>Look up a Medical Condition or Procedure</p> <ul style="list-style-type: none"> ▶ Health Encyclopedia ▶ Symptom Navigator <p>Find and Compare</p> <ul style="list-style-type: none"> ▶ Compare Health Plans ▶ Compare Hospice Providers ▶ Compare Hospitals and Ambulatory Surgery Centers ▶ Compare Nursing Homes ▶ Compare Prescription Drug Prices 	<p>Topic Listing</p> <p>Hospitals</p> <ul style="list-style-type: none"> ▶ Compare Hospitals (volume, charges, length of stay, readmissions, mortality, complications, demographics, license information, emergency actions, etc.) ▶ A Patient's Guide to a Hospital Stay ▶ Emergency Department Care ▶ Patient Safety ▶ Health Care Advance Directives ▶ Hospital Locator ▶ Patient's Bill of Rights and Responsibilities ▶ Query Hospital Inpatient Data ▶ Florida Hospital Financial Data 	<p>Researchers and Professionals</p> <p>Search Health Data</p> <ul style="list-style-type: none"> ▶ Ambulatory (Outpatient) Surgery ▶ Emergency Department Data ▶ Hospital Inpatient Data ▶ Order Data / Data Dictionary <p>Reports and Guides</p> <ul style="list-style-type: none"> ▶ Brochures and Guides ▶ Quick Data Summaries ▶ Research Studies and Reports
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II. Five Basic Elements (Web Pages) of a Public Report: Options and Examples

A. Landing Page or Information Accessible From Landing Page

The landing page—the first view of the Web site—is key and can either invite users in or drive them away. It can motivate use of the information, help consumers understand the benefits of comparative performance data, and help consumers understand how to apply the information to their choices.

Because using comparative information on provider quality is new to most health care consumers, they need to understand what the information means, how it may help them, and what they can do to improve their chances for excellent care and improved health outcomes. Assume that your target audience of consumers has a limited understanding of the concept of health care quality. You have an opportunity to provide a definition of quality to consumers when they are eager to learn about it, given that they have initiated access to the site. Being clear about what is meant by “health care quality” and explaining that it is now possible to measure and compare health care providers on their quality of care will help set the context for using the information.

1. Motivating use of the information and defining the benefits

It is important to help consumers see how they can use comparative quality information to select a provider or engage providers in a discussion of quality. Making links between consumer concerns and comparative data is one way to achieve this goal. Consumers also may be more motivated to use comparative data if the degree of variability in quality is made explicit and the dangers of receiving poor quality care are clear.

2. Explaining possible uses of the data

Provider quality ratings are new to most consumers, so the report offers an opportunity to help them understand the different ways they can use the information to their benefit.

This site highlights for consumers both how to use the information (top) and the benefits of doing so (bottom excerpt).

Tool: Clinical Quality in Primary Care

Sponsor: Massachusetts Healthcare Quality Partners

URL: <http://www.mhqp.org/quality/whatisquality.asp?nav=030000>

The screenshot shows the MHQP website with a dark blue header and navigation bar. The MHQP logo is in the top left, and a celebratory message is in the top right. The navigation bar includes links for home, quality reports, guidelines, gbqc, and about us, along with a printer-friendly view icon. A sidebar on the left contains links for clinical quality, patient experiences, and letters of support, a sign-up form for the email list, and a Facebook link. The main content area is titled 'quality reports' and contains sections on 'QUALITY INSIGHTS: HEALTHCARE PERFORMANCE IN MASSACHUSETTS', 'What Is Quality Healthcare?', and 'How can healthcare quality data help patients and their family members?'. A red arrow points to the 'quality reports' link in the navigation bar. Another red arrow points to the 'How can people help improve the quality of their healthcare?' section.

MHQP
MASSACHUSETTS
HEALTH QUALITY PARTNERS
trusted information. quality insights.

*Celebrating 15 years of
promoting quality health care*

home | **quality reports** | guidelines | gbqc | about us | printer friendly view

clinical quality
patient experiences
letters of support

Sign Up For
MHQP's Email List

Enter Your Email:

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quality reports

QUALITY INSIGHTS: HEALTHCARE PERFORMANCE IN MASSACHUSETTS

What Is Quality Healthcare?

Massachusetts Health Quality Partners (MHQP) is an independent organization that looks at the quality of healthcare in Massachusetts. It does so through the use of claims-based [clinical data](#) that compares side-by-side how different medical groups across Massachusetts treat the same type of illness or health condition.

MHQP also looks at the quality of healthcare through the [patient experience](#). Patients complete surveys and tell us what it is like to work with their doctors. This information is then used to compare patients' experiences across the state.

MHQP healthcare quality data has been shared with doctors and health plans since 2004. Since 2005, MHQP has been pleased to share this data with patients, their family members, and the general public.

How can healthcare quality data help patients and their family members?

Patients and their family members can use MHQP information to:

- Learn about differences in the quality of healthcare. This is important because not all doctors' offices treat patients the same way.
- Choose a doctor. This may happen when people move to Massachusetts, doctors retire and move away, or people just want to change doctors.
- Feel empowered. This is when patients and their family members feel more in control of their healthcare.

How can people help improve the quality of their healthcare?

- **Ask questions.** Make a list of all the questions you want to ask. Bring this list to each appointment and write down the doctor's answer. If you do not understand, ask again until you do.
- **Give your doctor complete and accurate health information.** This includes your health history (diseases you or others in your family have); medication history (medicines, over-the-counter drugs, and herbals you take); and lifestyle (whether you smoke, drink, or use street drugs).
- **Talk with your doctor about what matters to you.** This includes your values about medical treatment and quality of life.
- **Speak up when there are problems.** Tell your doctor if, at any time, you feel that you are not getting quality healthcare.

3. Communicating about a shared responsibility

Consumers do not always understand what their role is in the care process or that their active participation can increase their chances of a good health outcome. Explicitly communicating that care is a shared responsibility between patients and providers is an important way to reinforce this behavior.

These next examples show strategies for communicating about the different ways consumers can use and benefit from information. The following example uses video to discuss the shared responsibility that patients and providers have in determining quality.

Tool: Doctor Ratings

Sponsor: Maine Health Management Coalition

URL: <http://www.mhmc.info/interviews/>

The screenshot displays the website for the Maine Health Management Coalition. At the top, there are navigation buttons for "Maine Doctor Ratings", "Maine Hospital Ratings", "Major Surgery Ratings", and "How Do I Get Quality Care?". The main content area is divided into several sections:

- Maine Doctor Ratings:** Includes a "View Results" button and a "NEW - Specialists" badge. A link for "Doctor Ratings Explained" is also present.
- Maine Hospital Ratings:** Features a "View Results" button and a "Hospital Ratings Explained" link. A date stamp indicates "New, April 2010".
- Major Surgery Ratings:** Includes a "View Results" button and a "Surgery Ratings Explained" link.
- Watch the Consumer Videos:** A section with a video player showing two thumbnails. Two large red arrows point from the "Maine Doctor Ratings" section to these two video thumbnails. The first thumbnail is titled "MAINE CANCER PATIENT CHESLEY TALKS ABOUT HER EXPERIENCE" and the second is "MAINE ASTHMA PATIENT RICK TALKS WITH HIS DOCTOR".
- Dr. Charlie Burger:** A profile section with a photo and text: "Making the health care system accountable for the care it provides, increases its credibility with patients, purchasers and regulators. Measuring and reporting the quality of the health care patients receive has enormous potential to improve care and increase both patient and physician satisfaction."
- Dr. Barbara Crowley:** A profile section with a photo and text: "Find a health care provider with whom you feel comfortable talking. Prepare yourself before seeing your health care provider by writing down your concerns and questions. At the visit, ask your questions until you understand, knowing..."

Here is an example of a disease-specific report that speaks to the importance of the patient's role in the care process.

Tool: D5

Sponsor: Minnesota Community Measurement

URL: http://www.thed5.org/index.php?p=about_the_d5

the D5

HOME ABOUT THE D5 VIEW CLINICS WHO WE ARE

ABOUT THE D5

Text Size: A- A A+

- 1 CONTROL BLOOD PRESSURE**
BP LESS THAN 130/80 mmHg
- 2 LOWER BAD CHOLESTEROL**
LDL LESS THAN 100 mg/dl
- 3 MAINTAIN BLOOD SUGAR**
A1c LESS THAN 7%
- 4 BE TOBACCO-FREE**
✓ YES
- 5 TAKE ASPIRIN DAILY**
✓ YES

The D5 was created to make it easier for people with diabetes and their health care providers to work together to set and achieve goals to better manage the disease. The D5 goals are based on clinical guidelines developed by the [Institute for Clinical Systems Improvement](#). The same goals are promoted by the [American Diabetes Association](#).

The D5 goals are the most critical for preventing the dangerous cardiovascular complications associated with the disease. Heart disease and stroke are the leading causes of early death among people with diabetes.

The D5 focuses on the five goals that have the greatest health impact. For instance, people who achieve the D5 greatly reduce their risk of heart attack, blood vessel damage and other cardiovascular diseases. Patients achieving the D5 also experience fewer problems with their kidneys, eyes and nervous system. In addition to the D5, it is also important to receive other regular care like foot and eye exams.

4. Defining quality of care and providing consumers with a framework for understanding quality

Research shows that when consumers have a better understanding of the larger concept of quality and the elements that make up good quality care, they also tend to have a better understanding of individual quality indicators and view comparative information as more useful.

The example below provides a brief description of what high quality care is, which is referred to as “care that works best.”

Tool: Partner for Quality Care

Sponsor: Oregon Health Care Quality Corporation

URL: www.partnerforqualitycare.org/getcare.php

The screenshot shows the top navigation bar of the Partner for Quality Care website. It includes the logo on the left and three tabs: "Tips for You" (brown), "Quality Scores" (green), and "About this Work" (blue). Below the navigation bar, a breadcrumb trail reads "You are here: Home > Getting care that works". A large red arrow points to the main heading "Are you getting care that works the best?".

Are you getting care that works the best?

Care that "works the best" is care that gets the best results for your health and is as safe as possible. Doctors and scientists do a lot of research to find out:

- ✓ What works best to catch health problems early
- ✓ What tests are best for finding out what's wrong
- ✓ Which treatments help the most and have the fewest side effects

Doctors who are national experts use this information to develop quality standards or "guidelines" that you can read and use to help you know what kind of care you need.

Tips to help you get care that works the best

- ✓ **Use a consumer guide**
The federal Agency on Health Care Research and Quality has produced a series of helpful consumer guides that tell which kinds of care work best for certain health conditions.
Call (800) 358-9295 for a printed copy or visit www.effectivehealthcare.ahrq.gov
- ✓ **Do your own search to find out which kinds of care work best**
For practical advice and recommended sources for reliable health information, read this government guide: [Next steps after diagnosis: Finding information and support](#)
If you are looking for health information on the internet, be very careful about which websites you use. For tips, read our brochure:
[How can you find trustworthy health information on the web?](#)

On the right side of the screenshot, there is a preview of a brochure titled "Getting care that works". The brochure features an image of a doctor and a patient, and includes the text: "Helping you get quality health care. Getting the kind of care that works the best." Below the brochure preview is a button that says "View this brochure for more tips and information on getting care that works the best."

5. Describing the collaborative membership

Some visitors will be interested in who funds, designs, and produces the report. Some sources are more trusted than others. Having an “About Us” section showing multistakeholder input may help establish credibility. Below are three examples.

The About Us page on the Maine Health Management Coalition (MHMC) site below includes a comprehensive list of “the employers, doctors, health plans, and hospitals who are members of MHMC.”

Tool: Maine Doctor Ratings, Maine Hospital Ratings, Major Surgery Ratings

Sponsor: Maine Health Management Coalition (MHMC)

URL: <http://www.mhmc.info/about/>

Maine Health Management Coalition

Maine Doctor Ratings | Maine Hospital Ratings | Major Surgery Ratings | How Do I Get Quality Care?

Maine Doctor Ratings

Find out which Maine doctors do the best.

[View Results](#)

NEW - Specialists

Improving the way we rate Maine doctors >
[Doctor Ratings Explained](#)

Maine Hospital Ratings

Information you can use to choose a hospital.

[View Results](#)

New, April 2010
[Hospital Ratings Explained](#)

Major Surgery Ratings

Facing a high-risk procedure? Which New England hospital is best?

[View Results](#)

[Surgery Ratings Explained](#)

How Do I Get Quality Care? Ask. Learn. Decide.

MHMC (Maine Health Management Coalition) is a group working to improve the safety and quality of Maine healthcare.

We are your neighbors – Maine employers, doctors, health plans and hospitals – working together to improve the safety and quality of healthcare in Maine.

Elizabeth Mitchell, CEO

Lisa Letourneau, MD, Medical Advisor

Ted Rooney, RN MPH, Project Leader

Sue Butts-Dion, Project Leader

Sue Stableford

We are staffed by an Executive Director who is supported by a Medical Adviser, Project Leaders, and several [Steering Committees](#). As of winter 2008, the Coalition has **over 50 members** and represents **over 200,000 Maine workers**.

MHMC brings diverse views together on how to improve healthcare quality and safety.

Maine employers, doctors, health plans, and hospitals all have a stake in

Watch the Consumer Videos

This “About” page allows the user to find out about the membership, activities, and goals of the organization.

Tool: Performance & Progress Report

Sponsor: The Wisconsin Collaborative for Healthcare Quality

URL: <http://www.wchq.org/about/>

About WCHQ

Who We Are

The Wisconsin Collaborative for Healthcare Quality (WCHQ) is a voluntary consortium of organizations learning and working together to improve the quality and cost-effectiveness of healthcare for the people of Wisconsin.

Our [members](#) represent a diverse and dynamic group of healthcare organizations: physician groups, hospitals and health plans. They include two of Wisconsin’s largest health systems: Aurora Health Care and the University of Wisconsin Hospital and Clinics / University of Wisconsin Medical Foundation.

We also partner with other [organizations](#), including healthcare purchasers, governmental agencies, foundations and healthcare associations. We value the different perspectives that come from these multiple sources. By working together, we achieve a more balanced, holistic understanding of healthcare in its current state and how it can be improved.

For more about us, [download the WCHQ brochure](#) (PDF, 1.9 MB) or [request printed copies](#)

What We Collaborate To Do

- Develop performance measures for assessing the quality of healthcare services.
- Guide the collection, validation and analysis of data related to these measures.
- Publicly report measurement results for healthcare providers, purchasers and consumers.
- Share the best practices of healthcare organizations that demonstrate high-quality service, enabling all providers to adopt successful methods.

What We Aspire To Be

We seek to be a national leader in the public reporting of healthcare quality measures, one that is respected for its integrity and trust, recognized for its transparency and inclusive governance, and willing to innovate and improve continuously.

How We Began

In early 2003, chief executives from healthcare provider organizations in Wisconsin gathered to discuss forming a collaborative. Recognizing the importance of performance measurement, these leaders joined together in partnership with healthcare purchasers to form the Wisconsin Collaborative for Healthcare Quality (WCHQ). They began developing a unique set of ambulatory care measures that enable physician groups to collect and report data on all the patients under their care. WCHQ members actively use the measures to drive internal improvement efforts and work across organizations to share their knowledge and learn from higher performing organizations.



This page provides clearly categorized links to each stakeholder organization. The Board of Directors page provides additional details on represented organizations.

Tool: Virginia Health Information: From Numbers to Knowledge

Sponsor: Virginia Health Information (VHI)

URL: http://www.vhi.org/about_stakeholders.asp

FROM NUMBERS TO KNOWLEDGE

ABOUT US CONTACT US SITE MAP RESEARCHERS AND PROFESSIONALS

Virginia Health Information
FROM NUMBERS TO KNOWLEDGE

FROM NUMBERS TO KNOWLEDGE

Search

ABOUT US

- ANNUAL REPORT
- BOARD OF DIRECTORS
- OUR MISSION
- STAKEHOLDERS
- VHI SERVICES

STAKEHOLDERS
The following organizations are named in VHI's Bylaws to nominate Board Members and play very active and supportive roles in VHI's projects and accomplishments.

Business

- [The Virginia Chamber of Commerce](#)
- [Virginia Business Council](#)
- [Virginia Manufacturers Association](#)

Hospital

- [Virginia Hospital and Healthcare Association](#)

Insurance

- [Anthem Blue Cross and Blue Shield](#)
- [Virginia Association of Health Plans](#)

Nursing Facility

- [Virginia Association of Nonprofit Homes for the Aging](#)
- [Virginia Health Care Association](#)

Physician

- [Medical Society of Virginia](#)
- [Old Dominion Medical Society](#)

State

- [Joint Commission on Health Care](#)
- [Virginia Department of Health](#)

OB GUIDE
Available Now

102 N. 5th Street | Richmond, VA 23219 | Phone (804) 643-5573 | Fax (804) 643-5375 | Toll Free 1-877-VHI-INFO (844-4636)

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6. Explaining rules concerning use of information by other organizations

Some collaboratives have developed “Rules of Use” for other organizations that may be interested in using some or all of the information. For example, others may be interested in using the data for other public reports, provider advertisements, or provider negotiations. Rules of Use statements may include restrictions about the business use of the data, changes in how the data are presented, ways to cite the data, and steps to get approval of use of a collaborative’s data or logo.

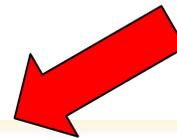
The following three examples illustrate Rules of Use with varying levels of detail and emphasis.

The following example includes a brief statement on the intended uses of publicly reported data.

Tool: Take Charge for Better Health, Using Information To Get Good Care

Sponsor: Healthy Memphis Common Table

URL: <http://www.healthymemphis.org/> (organization) and <http://www.healthymemphis.org/assets/docs/Reports/HMCT%20report%202%20111609R.pdf> (document)



The **TAKE CHARGE** for *Better Health* series of reports should be used solely for educational purposes with the primary intent of stimulating multi-stakeholder discussions around variation in care and quality improvement efforts. This information is not intended to be used for business purposes such as marketing/advertising, negotiating third party payer contracts or employee benefit planning.

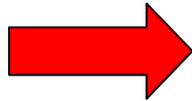
Notify the Healthy Memphis Common Table (HMCT) of misuse. Individuals and organizations that identify any use of HMCT-produced results that is outside of these guidelines and rules should notify the HMCT via phone, email or a form on the HMCT website. The HMCT will review all contested uses and determine necessary action.

The guidelines below provide recommendations for acknowledging data limitations, using publicly reported performance results for marketing, and using results for financial and business purposes. Specific examples of what is and is not appropriate are also provided.

Tool: Partner for Quality Care, Guidelines for Using Performance Results

Sponsor: Oregon Health Care Quality Corp

URL: <http://www.partnerforqualitycare.org/index.php> (organization) and http://www.partnerforqualitycare.org/pdf/guidelines_performance.pdf (document)



Recommendation 3 - Use of *Partner for Quality Care* performance results for marketing
Health plans and participating clinics are encouraged to communicate their participation and support of *Partner for Quality Care*. References must be precise in terms of measures compared, avoid naming or comparing other organizations, and avoid generalizations. Examples include:

Appropriate	Not Appropriate
Clinic X received "above average (better)" on breast cancer screening	Clinic X scored the best on breast cancer screening or Clinic X is top rated in breast cancer screening
Clinic Y scored "above average (better)" in 3 out of 4 measures of effective diabetes care	Clinic Y outperforms all others on diabetes care
Clinic Z scored above average in monitoring cholesterol levels among selected patients with a history of heart disease.	Clinic Z performs above average in heart disease management.
5 out of 6 "above average (better)" clinics for monitoring HbA1c among patients with diabetes are in Health Plan A's network	Health Plan A's network out-performs Plan B's network in Women's Health.



Recommendation 4 – Use of results for quality improvement and financial purposes
Results may be used by health plans, purchasers, employers and provider organizations for establishing baseline quality of care, assessing variation among clinics and providers, and quality improvement purposes. Results may also be used for achievement recognition and innovative payment redesign only if mutually agreed upon between the parties. Outside of such mutual agreements, medical groups, clinics, or individual providers should not be excluded from networks or negatively impacted financially based on results from the Round 2 data.

Appropriate	Not Appropriate
Targeted bonuses to medical groups related specifically to <i>Partner for Quality Care</i> measures.	Performance scores on the <i>Partner for Quality Care</i> measures are the sole source of information used in contracting or creating conversion factors.
Data are used as part of evaluation of a Medical Home pilot	Patient steering occurs through differential co-pays or deductibles based on the <i>Partner</i> measures.
Patient directed sorting on the public website using multiple, transparent criteria.	Health plan forced sorting of clinics and medical groups.

The file available from the Rules of Use link below includes four pages describing optimal uses of the results; restrictions on use during report development; a guide to interpretation of results; directions for submission for review before use; specific guidelines for citations and logo use; prohibition on composite measures; and insistence that reporting conventions be upheld.

Tool: Community Checkup Report

Sponsor: Puget Sound Health Alliance

URL: <http://www.pugetsoundhealthalliance.org/> (organization) and www.pugetsoundhealthalliance.org/resources/documents/RulesforUse_2009.pdf (document)

Text: 100% A-AA+

SHARE

Health Alliance Community Checkup

Important Legal Notice and Disclaimer

THE COMMUNITY CHECKUP REPORT IS NOT MEDICAL ADVICE AND IS NOT A SUBSTITUTE FOR MEDICAL ADVICE, DIAGNOSIS OR TREATMENT. NEVER DISMISS OR DELAY SEEKING MEDICAL ADVICE OR HELP BECAUSE OF THIS REPORT.

The medical group and clinic results in the Community Checkup report are the opinion of the Puget Sound Health Alliance, based on our analysis of a significant amount of data, reflecting care provided to more than two million residents in our region. The results in this report were calculated based on technical decisions that require the judgment of many experts, and experts sometimes disagree about the best approach. Others who use their own technical processes to apply the same measures to their own data may reach different conclusions than the results in this report. The hospital and health plan results were calculated by groups other than the Alliance, also using judgment of technical experts. Medical science changes constantly, and healthcare quality performance measurement is a newly emerging field. Therefore, we do not warrant that the information in this report is complete, accurate, current or reliable or that it will be suitable for your specific needs.

Any use of the report for contracting, marketing or other business purposes must comply with the Rules for Use at: www.pugetsoundhealthalliance.org/resources/documents/RulesforUse_2009.pdf

We want your feedback. Send your comments to us.
© 2010 Puget Sound Health Alliance

Puget Sound Health Alliance

Rules of Use for Performance Results in the Community Checkup Report

This document is intended to guide users of results included in the Alliance's Community Checkup reports. Any use of report results produced by the Alliance should be consistent with and supportive of the philosophy, guidelines and rules described below. These rules apply to Community Checkup results and reports released in calendar year 2009 and beyond. The guidelines are subject to revision by direction from the Alliance Board of Directors.

7. Providing legal notices and disclaimers

Some collaboratives add a legal disclaimer when allowing users to access data. Most often, such disclaimers state that the collaborative cannot be liable for the accuracy of the data. In some cases, the user is required to go to the disclaimer before accessing provider scores. In other cases, the disclaimer is simply available on the Web site.

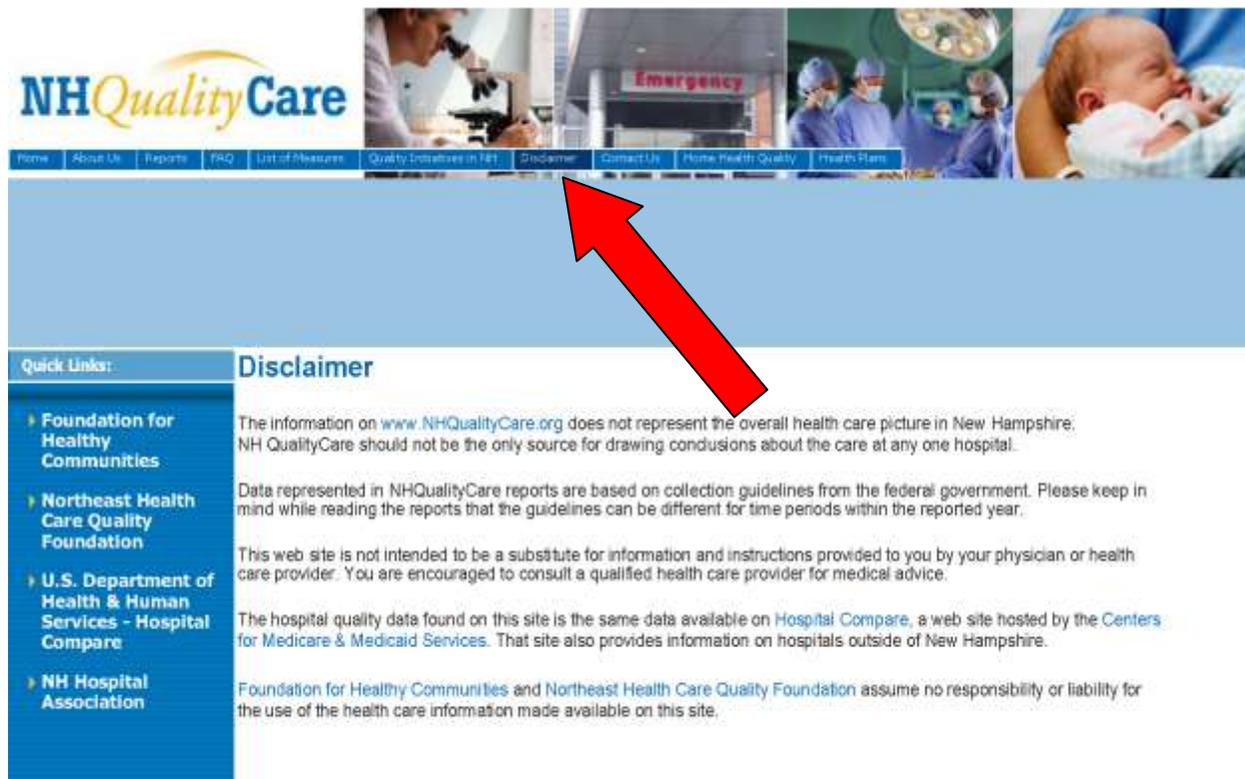
The following three examples illustrate a disclaimer that is just available as a link, a disclaimer that asks users to accept certain terms of use when they select the search button, and a disclaimer that appears in a popup box that with an Accept button that users must select before any data are displayed.

The legal disclaimer below can be found by selecting the “Disclaimer” link at the top of the NH QualityCare Web site.

Tool: NH QualityCare

Sponsor: Foundation for Healthy Communities and Northeast Health Care Quality Foundation.

URL: <http://www.nhqualitycare.org/disclaimer.php>



The screenshot shows the NH QualityCare website. The top navigation bar includes links for Home, About Us, Reports, FAQ, List of Measures, Quality Initiatives in FET, Disclaimer, Contact Us, Home Health Quality, and Health Plans. A red arrow points to the 'Disclaimer' link. Below the navigation bar, the 'Disclaimer' page is displayed. On the left, there is a 'Quick Links' section with links to the Foundation for Healthy Communities, Northeast Health Care Quality Foundation, U.S. Department of Health & Human Services - Hospital Compare, and NH Hospital Association. The main content area is titled 'Disclaimer' and contains the following text:

The information on www.NHQualityCare.org does not represent the overall health care picture in New Hampshire. NH QualityCare should not be the only source for drawing conclusions about the care at any one hospital.

Data represented in NHQualityCare reports are based on collection guidelines from the federal government. Please keep in mind while reading the reports that the guidelines can be different for time periods within the reported year.

This web site is not intended to be a substitute for information and instructions provided to you by your physician or health care provider. You are encouraged to consult a qualified health care provider for medical advice.

The hospital quality data found on this site is the same data available on [Hospital Compare](#), a web site hosted by the [Centers for Medicare & Medicaid Services](#). That site also provides information on hospitals outside of New Hampshire.

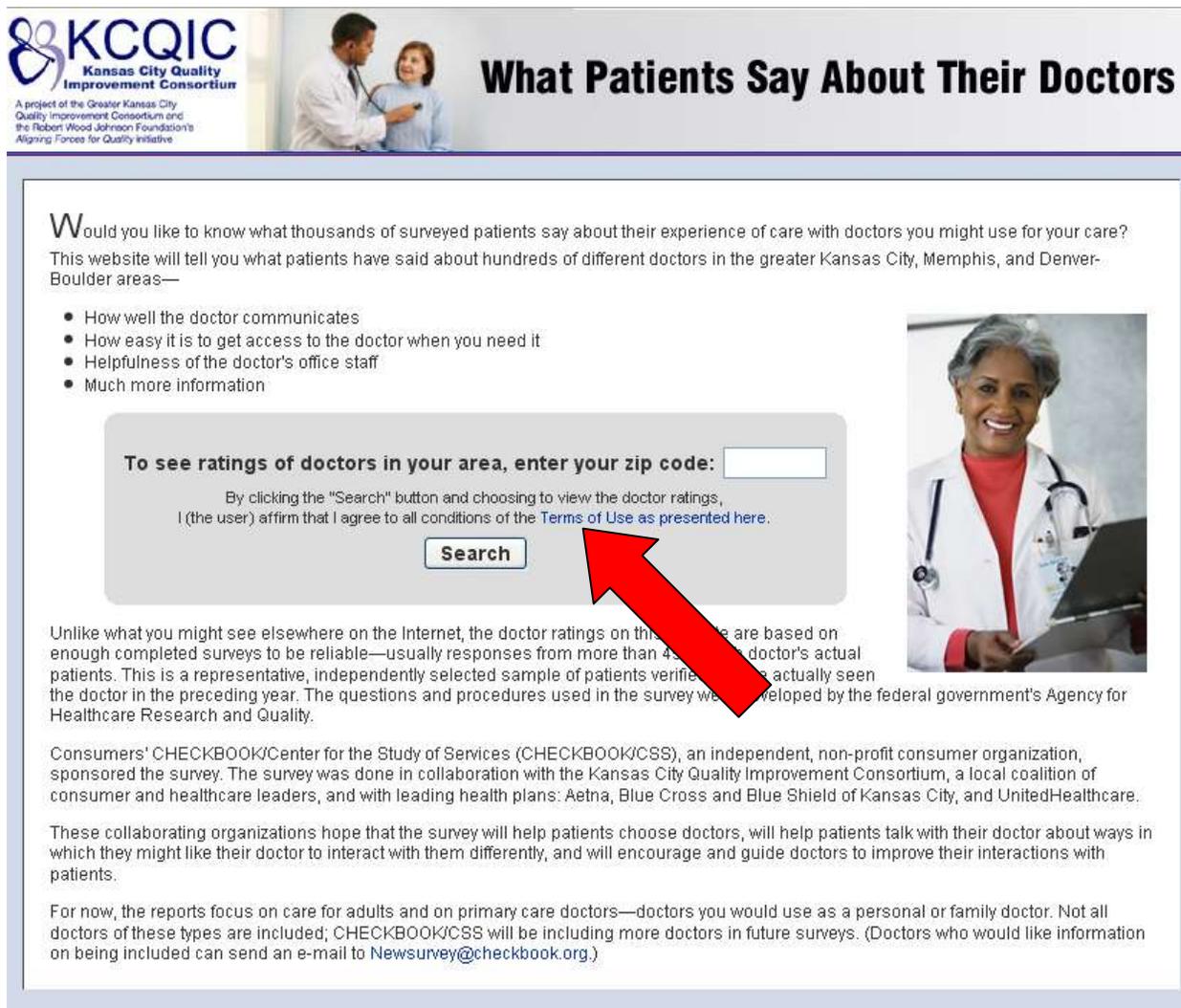
Foundation for Healthy Communities and Northeast Health Care Quality Foundation assume no responsibility or liability for the use of the health care information made available on this site.

The search page below links to terms of use, which consumers are asked to accept in order to search by ZIP Code for patient experience data.

Tool: What Patients Say About Their Doctors

Sponsor: Consumers' CHECKBOOK/Center for the Study of Services (CHECKBOOK/CSS), in collaboration with the Kansas City Quality Improvement Consortium and health plans

URL: <http://www.checkbook.org/patientcentral/?cb=kcqic&ref=xxx>



KCQIC
Kansas City Quality Improvement Consortium
A project of the Greater Kansas City Quality Improvement Consortium and the Robert Wood Johnson Foundation's Aligning Forces for Quality initiative

What Patients Say About Their Doctors

Would you like to know what thousands of surveyed patients say about their experience of care with doctors you might use for your care? This website will tell you what patients have said about hundreds of different doctors in the greater Kansas City, Memphis, and Denver-Boulder areas—

- How well the doctor communicates
- How easy it is to get access to the doctor when you need it
- Helpfulness of the doctor's office staff
- Much more information

To see ratings of doctors in your area, enter your zip code:

By clicking the "Search" button and choosing to view the doctor ratings, I (the user) affirm that I agree to all conditions of the [Terms of Use as presented here](#).

Unlike what you might see elsewhere on the Internet, the doctor ratings on this site are based on enough completed surveys to be reliable—usually responses from more than 400 of a doctor's actual patients. This is a representative, independently selected sample of patients verified to have actually seen the doctor in the preceding year. The questions and procedures used in the survey were developed by the federal government's Agency for Healthcare Research and Quality.

Consumers' CHECKBOOK/Center for the Study of Services (CHECKBOOK/CSS), an independent, non-profit consumer organization, sponsored the survey. The survey was done in collaboration with the Kansas City Quality Improvement Consortium, a local coalition of consumer and healthcare leaders, and with leading health plans: Aetna, Blue Cross and Blue Shield of Kansas City, and UnitedHealthcare.

These collaborating organizations hope that the survey will help patients choose doctors, will help patients talk with their doctor about ways in which they might like their doctor to interact with them differently, and will encourage and guide doctors to improve their interactions with patients.

For now, the reports focus on care for adults and on primary care doctors—doctors you would use as a personal or family doctor. Not all doctors of these types are included; CHECKBOOK/CSS will be including more doctors in future surveys. (Doctors who would like information on being included can send an e-mail to Newsurvey@checkbook.org.)



This popup box appears with Terms of Use and an Accept button that users must select in order to access the data. The Terms of Use include a detailed legal disclaimer.

Tool: CalHospitalCompare.org

Sponsors: California Hospital Assessment and Reporting Taskforce, the California HealthCare Foundation, and the University of California, San Francisco

URL: <http://www.calhospitalcompare.org/profile.aspx?h=147>

The screenshot shows the CalHospitalCompare.org website interface. At the top, the site logo and navigation menu are visible. The main content area displays "Woodland Healthcare" with a search bar and a "View Ratings by:" sidebar. A large white popup box is centered on the screen, containing the following text:

CalHospitalCompare.org
RATING HOSPITAL QUALITY IN CALIFORNIA

Looking for the hospital that best fits your needs? This site helps you find hospitals and gives quality ratings. The site is not affiliated with any health facility or agency. This service is free of charge. To see the ratings, you must "ACCEPT" the Terms of Use below.

TERMS OF USE

Use of CalHospitalCompare.org constitutes acceptance of these Terms of Use and the Privacy Policy.

CalHospitalCompare.org is a project of the California HealthCare Foundation (CHCF) that is funded as part of its commitment to provide consumers and the health care industry with relevant, reliable information to help improve the quality of medical care in the state.

Learn more ▶

ACCEPT

A service of the California HealthCare Foundation
In partnership with the University of California, San Francisco and
California Hospital Assessment and Reporting Taskforce (CHART)

A red arrow points to the "ACCEPT" button.

B. Presentation of Measure Ratings

An effective presentation of measure ratings is based on the following principles:

- Consumers do not define or understand quality in the same way that it is typically measured and reported.
- A framework can help consumers understand the larger concept of quality, as well as better comprehend the individual quality indicators.
- A framework may enable consumers to more effectively participate in the quality discussion.
- If a consistent framework is used in all reports, consumers will expect to see performance ratings in all categories of the framework.

A few existing quality frameworks might be considered as an organizing concept for individual measures within a quality report:

- The Institute of Medicine (IOM) developed a framework consisting of six categories: **Effective, safe, patient centered, timely, equitable, and efficient.**¹
- The IOM also developed these three categories: **overuse, underuse, and misuse.**²
- Donabedian developed a framework consisting of three categories: **structure, process, and outcome.**³

A framework to communicate about health care quality should:

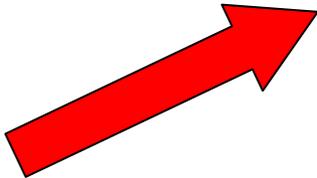
- Indicate clearly what quality of care is;
- Contain no more than three or four categories; and
- Be consistent with how quality is measured and conceptualized within the policy and industry arenas (that is, the major categories that are used to define quality by experts and the industry should be reflected in some way in the framework provided to consumers).

The following examples use a framework in communicating what quality of care means.

Tool: Health Matters

Sponsor: Colorado Business Group on Health

URL: <http://www.cbghealth.org/cbgh/index.cfm?LinkServID=E0FEA580-D721-5B0E-DA115CC5582742B9&showMeta=0> (PDF; page 2)



What is quality health care?

Quality health care is more than just having a health plan, a certain provider or a particular treatment. It's more than a matter of cost. Quality means getting what benefits you most—balancing risk, cost, and quality of life.

***It's effective*—the right kind of care for your health condition based on up-to-date scientific knowledge about what works best.**

***It's efficient*—using precious resources wisely, not wasting time and effort.**

***It's safe*—delivered without error and avoiding harmful results.**

***It's timely*—getting the most effective care without delays.**

***It's focused on the individual*—provided in a manner respecting a person's individual characteristics, needs and concerns.**

***It's equitable*—delivered without discrimination based on income, ethnicity, culture, or beliefs.**

Important aspects of quality health care are measured in different ways. *Health Matters* provides you with the information necessary to make decisions regarding your health care.

Tool: Community Checkup Report

Sponsor: Puget Sound Health Alliance

URL:

http://www.wacommunitycheckup.org/editable/files/CommunityCheckup_Nov2008/FAQs_AboutQualityHealthCare_Nov2008.pdf



Puget Sound Health Alliance

Frequently Asked Questions About the Community Checkup

About Quality Health Care

1. Q: What is “quality” health care?

A: Good quality healthcare is the right care at the right time in the right way. The Institute of Medicine describes quality care as “safe, effective, patient-centered, timely, efficient and equitable.” The Community Checkup does not cover all those aspects of quality, or every aspect of health care. This version of Community Checkup focuses mostly on *effective* care, or care that the medical community agrees works best to promote better health, especially for chronic conditions such as asthma, depression, diabetes and heart disease. Some of the hospital measures in the Community Checkup also look at the patient-centered part of quality, for example, whether patients get information that they can understand about their medications, and at safety, for instance whether surgery patients get treatments to prevent dangerous blood clots. The Puget Sound Health Alliance, along with doctors, hospitals, employers, unions, the government and many others are working to improve health care quality. You have a very important role too: you can use the information in the Community Checkup to make sure that you and your family get the best quality care possible.

2. Q: What is the quality of health care like in the Puget Sound region?

A: Although Washington state has some of the finest doctors and hospitals around, there is room for improvement in the quality of our health care. We spend too much on care that doesn't improve health, such as unnecessary tests; we don't always get the care that can improve health, such as cancer screenings; and sometimes we get care that can make us worse, such as the wrong medications. A RAND study estimated that Americans receive care that is proven to be effective only 53% of the time. In this region, we were somewhat better than the national average, at 59%, but we can still dramatically improve. The Community Checkup is helping everyone take an initial step toward improving health care in our region.

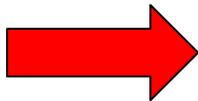
3. Q: How will the Community Checkup report improve health care quality?

A: The Community Checkup helps us to recognize that there are differences in the care provided across the community. It enables us to identify areas where we can get better and provides a common yardstick against which we all can measure our progress. Research shows that when reports on health care performance are public, there is even more improvement than if reports are kept private. The current Community Checkup report looks at just a subset of

This next example, which is *not* from an existing Web report, shows an abbreviated IOM framework for communicating what quality is, which has the advantages of using only three categories and having undergone cognitive testing. With this kind of framework, quality indicators can be displayed within each of the three categories of performance. This approach can make each quality indicator easier to understand while also conveying that “quality” incorporates three different but important dimensions.

Source: Study funded by the Robert Wood Johnson Foundation on Giving Consumers a Framework for Understanding Quality.

Reference: Hibbard JH, Greene J, Daniel D. What is quality anyway? Performance reports which clearly communicate the meaning of quality of care. *Med Care Res Rev* 2010; 67:275; originally published online January 21, 2010.



The Best Quality Medical Care is When Providers and Patients Work Together to Ensure the Use of Practices that are:

- **EFFECTIVE- PROVEN TO WORK.** Doctors and hospitals are providing high quality care when they work in partnership with patients and use medical practices proven to work
- **SAFE - PROTECTS FROM MEDICAL ERRORS.** Medical errors that harm patients are all too common. High quality medical care builds in safeguards to protect patients from medical errors.
- **PATIENT FOCUSED - RESPONSIVE TO PATIENTS' NEEDS AND PREFERENCES.** : High quality providers are responsive to patients' needs and their preferences.

As noted above, the most effective way to use a framework is to actually show the quality indicators arrayed under the main categories of the framework, as in the example below. The framework categories tell the user what the individual indicators mean.

Source: Study funded by the Robert Wood Johnson Foundation on Giving Consumers a Framework for Understanding Quality.

Reference: Hibbard JH, Greene J, Daniel D. What is quality anyway? Performance reports which clearly communicate the meaning of quality of care. *Med Care Res Rev* 2010; 67:275; originally published online January 21, 2010.



Doctor	Effective Uses treatments proven to get results		Safe Uses safeguards to protect patients from medical errors		Patient Focused Responsive to patients' needs and preferences	
	Uses best practices for treating chronic illness	Uses best practices for screening for diseases	Has procedures to prevent medication errors	Has a system to prevent lab results from getting lost	Communicates well with patients	Spends enough time with patients
Dr. Allard	average	average	better	better	average	average
Dr. French	below	average	better	average	below	below
Dr. Cain	average	average	below	below	better	average
Dr. Emory	better	better	average	average	average	average
Dr. Castle	average	average	average	average	better	better

better = scored above average
 average = scored average
below = scored below average

How does one select quality indicators for each element of a framework? The decision to use a framework implies making some early choices about the types of performance measures to include in your report. The table below shows examples of indicators to include if using the Structure, Process, and Outcome framework; the IOM framework of six domains; or the Hibbard-abbreviated IOM framework.

Reference: Romano PS, Hussey P, Ritley D. Selecting Quality and Resource Use Measures: A Decision Guide for Community Quality Collaboratives. Rockville, MD: Agency for Healthcare Research and Quality; May 2010. AHRQ Publication No. 09(10)-0073.

Matrix of Quality Measure Typologies With Examples

IOM Domains	Structure	Process	Outcome
Effective	Cardiac nurse staffing, nursing skill mix (RN/total)	Use of angiotensin-converting enzyme (ACE) inhibitor or angiotensin receptor blocker (ARB) for patients with systolic heart failure	30-day readmissions (or mortality) for heart failure
Patient Centered	Use of survey data to improve patient-centered care	Did the nurses treat you with courtesy and respect?	Overall rating of care
Timely	Physician organization policy on scheduling urgent appointments	Received beta blocker at discharge and for 6 months after AMI	Potentially avoidable hospitalizations for angina (without procedure)
Safe	Computerized physician order entry with medication error detection	Use of prophylaxis for venous thromboembolism in appropriate patients	Postoperative deep vein thrombosis or pulmonary embolism
Efficient	Availability of rapid antigen testing for sore throat	Inappropriate use of antibiotics for sore throat	Dollars per episode of sore throat
Equitable	Availability of adequate interpreting services	Use of interpreting services when appropriate	Disparity in any other outcome according to primary language

1. Displaying measures so that consumers can understand them

Using comparative data to make a choice can be cognitively burdensome. People are more likely to use data if the information is easy to understand and process. Making it easier actually increases the individual's motivation to use the data. There are multiple ways to make the data more evaluable (that is, easier for the user to quickly see better and worse options without much effort).

Strategies to make comparative data more evaluable and less cognitively burdensome include:

- Use data display approaches that do not require users to hold information in their mind as they look from page to page or at different points on the same page:
 - Make relevant choices visible on one screen.
 - Use symbols instead of numbers (many people have limited numeric skills).
 - Use symbols that do not require a legend to understand what they mean.
 - Use language and terms that consumers understand (avoid language that requires the user to look up the definition).
 - Do not assume people will understand advanced statistical concepts, such as using confidence intervals in data displays. Consumers do not understand them, and they introduce ambiguity that can result in consumers being less likely to rely on or trust the data.

- Do some of the cognitive work for the user:
 - Summarize information. Providing an overall summary measure of all the other measures helps the end users by doing some of the work for them.
 - Order by performance (or have a function that allows this). This makes it easy to quickly see top and bottom performers.
 - Use affective labels (e.g., excellent, good, fair, poor) that interpret the information for the user.
 - Highlight high performers.

Here is an example of using symbols instead of numbers. These symbols use color and have words embedded in the symbol to make them easy to use without consulting a legend.

Tool: CalHospitalCompare

Sponsors: California Hospital Assessment and Reporting Taskforce, California HealthCare Foundation, and University of California, San Francisco

URL: www.calhospitalcompare.org/comparison.aspx?c=&h=210&h=218&h=155&h=146&h=256



Critical Care: ICU Mortality Rate		
	St. Mary's Medical Center - San Francisco	8.90% (lower is better)
	Kaiser Permanente San Francisco Medical Center	9.13% (lower is better)
	California Pacific Medical Center - St. Luke's Campus	10.75% (lower is better)
	California Pacific Medical Center - Pacific Campus	12.73% (lower is better)
	UCSF Medical Center - Moffit/Long	13.53% (lower is better)
Patient Safety		
	Kaiser Permanente San Francisco Medical Center	98%
	St. Mary's Medical Center - San Francisco	94%
	California Pacific Medical Center - Pacific Campus	95%
	California Pacific Medical Center - St. Luke's Campus	96%

Here is another example that uses symbols instead of numbers. In this example, the symbols use a color, a shape, and a word embedded in the symbol. Average scores are faded so that the higher and lower performers “pop” out more. Thus, users can discern a pattern in the data. The use of colors and shapes helps the user easily see patterns in the data. The embedded words in the symbols mean that the user does not need to rely as much on a legend. The embedded words also help the user by interpreting the information for them (e.g., better, worse).

Source: Study funded by the Robert Wood Johnson Foundation on Giving Consumers a Framework for Understanding Quality.

Reference: Hibbard JH, Greene J, Daniel D. What is quality anyway? Performance reports which clearly communicate the meaning of quality of care. *Med Care Res Rev* 2010; 67:275; originally published online January 21, 2010.

Hospital	Effective Uses treatments proven to get results		Safe Has safeguards to protect patients from medical errors		Patient Focused Responsive to Patients' Needs and Preferences	
	Uses best practices to prevent heart attacks	Uses best practices to treat pneumonia	Uses procedures to prevent medical mistakes	Has procedures to prevent surgical infections	Controls patients' pain well	Explains what to do at home to recover
Evergreen Hospital		average				
Lakeview Hospital			average		average	average
Woodland Hospital		average		average		
Sierra Vista Hospital					average	

The next example shows a report format that helps the user by providing two overall summary measures: one based on clinical standards and the other based on patient ratings. This approach greatly reduces the cognitive burden of using multiple data points to compare multiple options.

Tool: Medical Group Ratings

Source: California Office of the Patient Advocate

URL: http://www.opa.ca.gov/report_card/medicalgroupating.aspx?County=KERN

The screenshot displays the California Office of the Patient Advocate website. The main content area is titled "Kern Medical Group Ratings". It includes a legend for star ratings (1-5 stars) and a table comparing medical groups based on two criteria: "Meeting National Standards of Care" and "Patients Rate Medical Groups".

Medical Group	Meeting National Standards of Care	Patients Rate Medical Groups
Bakersfield Family Medical Center / Heritage Physician Network	★★★	★★★
Golden Empire Medical Group	★★★	★★★★★
High Desert Medical Group	★★★	★★★
High Desert Medical Group - California Desert IPA	★★★	★★★
Independence Medical Group	★	Not rated
Southern California	★★★★★	★★★★★

Additional content on the page includes a sidebar with "Page tools" (Print this chart, Print all Medical Group Ratings charts for Kern County), "Related links" (About the Medical Group Ratings, What Is a Medical Group?, How to Choose a Medical Group, California Association of Physician Groups (CAPG), Integrated Healthcare Association (IHA), IHA Top Rated Medical Groups), and a "Meeting National Standards of Care" section with a list of care areas (Asthma Care, Checking for Cancer, Chlamydia Screening, Diabetes Care, Heart Care, Treating Children: Getting the Right Care, Treating Bronchitis with Antibiotics, Testing for Cause of Back Pain, Checking Patients on Long-Term Medications). A "Patients Rate Medical Groups" section describes the patient rating process and lists criteria (Communicating with Patients, Coordinating Patient Care, Helpful Office Staff, Timely Care and Service, Health Promotion).

Here is an example of a report that uses symbols that have inherent meaning. Words are embedded in the symbol to make it less necessary to use a legend.

Tool: Partner for Quality Care – Quality of Care Ratings

Sponsor: Oregon Health Care Quality Corp

URL: <http://www.partnerforqualitycare.org/selection.php>

Partner for Quality Care

Tips for You | **Quality Scores** | **About this Work**

You are here: Home > Quality scores for Oregon doctors' offices > Diabetes care

Diabetes care

Oregon is above the national average on these 4 types of recommended care for people with diabetes.
[Learn more about diabetes care](#)

Legend:

- Better** (Yellow circle): Scored well above (better than) the average statewide score.
- Average** (Grey square): Scored in the middle.
- Below** (Blue triangle): Scored well below (worse than) the average statewide score.

Some doctors' offices are not included in quality scores on this page - learn why.
[See details on data and scoring](#)

Results found for **44** doctors' offices in: *West Portland Metro* [Change your search selections](#)

	"Dilated" eye exam (checks for blood vessel damage in the eyes) (what is this?)	"A-1-C" blood sugar test (measures level of blood sugar during past 3 months) (what is this?)	Cholesterol test (checks the level of "bad" cholesterol) (what is this?)	Kidney disease test (urine test for signs of kidney disease) (what is this?)
Pacific Medical Group Tigard Clinic	Average	Better	Better	Better
Providence Mercantile	Average	Better	Better	Better
Sunset Medical Group	Average	Better	Better	Better
Kaiser Beaverton Medical Office	Better	Average	Average	Better

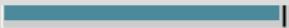
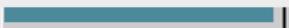
Sort: By score Alphabetically

The next example uses a summary measure and orders hospitals by performance, with highest quality providers listed first. Ordering is a powerful way of helping the user quickly discern better and worse options.

Tool: Partner for Quality Care – Quality of Care Ratings

Sponsor: Oregon Health Care Quality Corp

URL: http://www.partnerforqualitycare.org/care.php?region_name=portland_metro

Hospital	Overall Score
Providence St Vincent Medical Center Portland 97225	95% 
Providence Portland Medical Center Portland 97213	95% 
Legacy Emanuel Hospital Portland 97227	93% 
OHSU Hospital and Clinics Portland 97239	93% 
Legacy Good Samaritan Hospital Portland 97210	93% 
Tuality Community Hospital Hillsboro 97123	93% 
Legacy Mt Hood Medical Center Gresham 97030	93% 



Highest quality providers are listed first.

2. Using consumer-friendly language for measures

Using everyday language and terms familiar to consumers is key to making public reports understandable and usable. Using technical terms and expecting consumers to look them up (even if the definition is only a click away) will discourage use. Writing at a 6th grade level will make the information accessible to a wider audience.

Here are some examples of translating technical labels into plain language.

Source: AHRQ Model Quality Reports (available at http://www.qualityindicators.ahrq.gov/Downloads/Modules_Non_Software/QI%20Reporting/Model%20Report%20Health%20Topics.pdf)

The screenshot shows a web browser window displaying a report titled "Compare hospital scores on operations for cancer of the esophagus & pancreas". The report includes a legend and a data table. A red arrow points to the legend box.

Compare hospital scores on operations for cancer of the esophagus & pancreas

When you are choosing a hospital, you should look for the hospital that does **Better than average** on the topics that are most important to you, or on as many items as possible.

Click on the indicator names for detailed results on how each hospital performed.

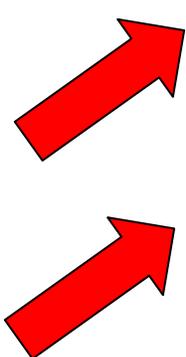
Death rate is the percent of patients who had a particular procedure who died while in each hospital during [insert year].	A hospital's score is calculated in comparison to the average of hospitals across the state. Average is about the same as the average of hospitals across the state. Better than average is better than the average of hospitals across the state. Worse than average is worse than the average of hospitals across the state.
--	---

Operations for cancer of the esophagus & pancreas	Hospital A	Hospital B	Hospital C	Hospital D
Death rate for operations to remove part or all of the esophagus The average rate of death for hospitals across the state is <u>9</u> for every 1,000 patients.	Better than average	Worse than average	Better than average	average
Death rate for operations to remove part or all of the pancreas The average rate of death for hospitals across the state is <u>7</u> for every 100 patients.	average	Worse than average	Better than average	average

In the next example, the original “untranslated “ technical version of the ambulatory care quality performance indicators is shown, as well as the plain language translation of those technical labels.

Source: Study funded by the Robert Wood Johnson Foundation on Giving Consumers a Framework for Understanding Quality.

Reference: Hibbard JH, Greene J, Daniel D. What is quality anyway? Performance reports which clearly communicate the meaning of quality of care. *Med Care Res Rev* 2010;67:275; originally published online January 21, 2010.



Untranslated	Percent of patients with diabetes who had A1c test	Percent of women receiving breast cancer screening	Provider uses electronic prescribing to prevent medication errors
Translated	Diabetes patients receive recommended tests	Women receive recommended cancer screenings	Has procedures to prevent medication errors

3. Presenting comparative information on costs and resource use

Consumers have had very little access to comparative information on costs and resource use, and until recently, we have known very little about how to present this information effectively. A 2011 AHRQ-funded study led by Judith Hibbard of the University of Oregon and Shoshanna Sofaer of Baruch College used focus groups, cognitive tests, and a randomized laboratory study to identify:

- Cost/resource use measures that resonated with the public; and
- Displays of such measures that were most accurately understood, led to “high value” choices, and gave people the most confidence in their choices.

An overarching recommendation of this study is to present cost information in displays that include a strong quality signal (easy to understand and use quality information). In addition, displays work better if they help consumers understand the meaning of the measures by using labels and other strategies that interpret the information for consumers. We present three sample displays with specific recommended features.

Presenting Comparative Costs for Doctor's Office Visit

Doctor	Uses Treatments Proven to Get Results	Has Safeguards to Protect Patients from Medical Errors	Responsive to Patients' Needs and Preferences	Average Cost for Office Visit
Dr. Hunt	better	better	better	\$90
Dr. ...	below	below	better	\$105
Dr. Garrett	average	better	better	\$175
Dr. Seidman	average	better	below	\$145
Dr. Friedman	better	better	better	\$190
Dr. Houten	better	average	better	\$135

Average cost includes what is paid by your health plan and by you.

Recommended features:

- Present cost data in the same display as quality data.
- Present exact cost information.
- Use a “word icon” for quality, which is highly “evaluable” and thus represents a **strong** quality signal.

Presenting Comparative Hospital Cost, Quality, and Value Information

Hospital	Driving Distance	Electronic Records and Prescribing	Quality Of Care	Average Costs	High Value (High Quality and Low Cost)
Evergreen Hospital	5 miles	Yes	better	\$\$\$	
Lakeview Hospital	15 miles	Yes	better	\$	✓
Woodland Hospital	7 miles	Yes	average	\$\$\$	
Sierra Vista Hospital	5 miles	Yes	better	\$	✓
Parkdale Hospital	6 miles	Yes	better	\$\$	

\$ costs were less than average, \$\$ costs were average, \$\$\$ costs were above average
Costs include what is paid by your health plan and by you.

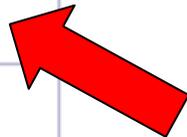
Recommended features:

- Combine information on quality, cost, and value in the same display.
- Call out value using a familiar signal (checkmark), which is present only for those with high quality and low cost.

- Use a “word icon” for quality, which is highly “evaluable” and thus represents a **strong** quality signal.
- Use dollar signs to represent comparative costs.

Presenting Comparative Information About Resource Use (Imaging)

Doctor	Weekend Hours	Driving Distance	Same Day Office Visits	Uses MRIs and CAT Scans Only When Appropriate
Dr. Gray	None	10 miles	Yes	☆☆
Dr. Ballard	Saturday (9am-noon)	7 miles	Yes	☆☆
Dr. Gains	Saturday (9am-3pm)	5 miles	Yes	☆☆☆
Dr. Miles	None	8 miles	No	☆
Dr. Dorsey	Saturday (9am-3pm)	5 miles	Yes	☆
Dr. Wolsey	Saturday (9am-noon)	6 miles	No	☆☆☆



☆☆☆ Very appropriate use of tests ☆☆☆ Often appropriate use of tests ☆ Less appropriate use of tests

Recommended features:

- Use labels and symbols to characterize use of imaging, rather than giving numeric levels.
- Use labels that interpret numeric imaging scores so that consumers do not need to determine for themselves which provider is providing more appropriate care.
- Whenever possible, merge resource use and quality into one highly interpretable score.

4. Encouraging providers to report accurate and complete data

In some cases, significant effort is required by providers to collect, clean, and submit the required data. In these instances, collaboratives may choose to recognize that effort specifically.

In the underlined text and blue box below, Colorado Business Group on Health helps the visitor recognize the commitment made by participating hospitals.

Tool: Health Matters 2009

Sponsor: Colorado Business Group on Health

URL: <http://www.cbghhealth.org/cbgh/index.cfm?LinkServID=E049392D-D33F-F20A-D2ED70858A72E914&showMeta=0>

Colorado Rural Hospitals

There are 44 rural hospitals in the state of Colorado, which serve about 20 percent of Coloradans. These hospitals represent approximately half of all of the hospitals in Colorado. Twenty-six of these rural hospitals are Critical Access Hospitals (CAHs). The Colorado Business Group on Health asked rural hospitals to complete the Leapfrog Quality Index of the Leapfrog survey. This is the fifth year rural hospitals have been asked to complete the index. Does your hospital report its results to the Leapfrog Group?



What is a Critical Access Hospital (CAH)?

A CAH is a hospital that is certified to receive cost-based reimbursement from Medicare. The reimbursement that CAHs receive is intended to improve their financial performance and thereby reduce hospital closures. CAHs must be located in a rural area and meet one of the following criteria: 1) over 35 miles from another hospital; 2) 15 miles from another hospital in mountainous terrain or areas with only secondary roads; 3) state-certified as a necessary provider of health care services to residents in the area. □



Thank you to all rural hospitals who participated in the LEAPFROG survey. We appreciate your time and commitment to quality care.

In most cases, those providers who choose to participate in public reporting will have to invest significant resources just in collecting and sharing the data and making sure it is accurate; they will have made a significant commitment to transparency. However, if the program is voluntary, other providers may elect not to provide the data. To recognize the additional contributions of those providers who share accurate data about their performance, some community collaboratives have instituted penalties for nonparticipation or incomplete or inaccurate data submission.

The following examples illustrate ways to denote or call attention to a lack of transparency, effort, or completeness. The report below specifically notes the facility's refusal to sign off on the accuracy of the data submitted.

Tool: Hospital Performance Report

Sponsor: State of New Jersey Department of Health and Senior Services

URL: Sample screen shown no longer available online.

Basic Facts on Cardiac Surgery Mortality Measures

*The Mortality rates are the number of deaths per 100 surgeries. Example: On average, 2.0 out of 100 patients who had CABG surgery died while in the hospital or within 30 days after being discharged from the hospital. **Lower mortality rate is better and means fewer deaths.** Data is from 2006.*

Click on hospital's name to view the hospital's performance summary.

 = Significantly higher than the state average mortality based on 95 percent confidence interval.

Hospital Name	County	<u>Number of Cases</u>	<u>Mortality Rate</u>	<u>95% Confidence Interval</u>
New Jersey Statewide		5,211	2.00	
<u>Medical Center[^]</u>		299	2.00	(0.86, 3.93)

If the hospital you have chosen is not on this list, it is not licensed to perform CABG surgery.

[^] Facility refused to sign-off on its data

This report describes levels of participation both in terms of the data submitted and actual level of performance.

Tool: Clinical Outcomes Assessment Program

Sponsor: Foundation for Health Care Quality

URL: Sample screen shown no longer available online.

CLINICAL **OUTCOMES ASSESSMENT PROGRAM**
A PROGRAM OF THE FOUNDATION FOR HEALTH CARE QUALITY

- [About Us](#)
- [Contact Us](#)

What is the Foundation?

Improving Quality

Participating Hospitals

Management Committee

For the Public

For Members

Search Site

COAP All Foundation Sites

Levels of Participation

with COAP Quality Improvement Standards

Auburn
Olympia
Wenatchee
Spokane
Kirkland
Puyallup
Seattle
Bremerton
Burien
Richland
Tacoma
Seattle
Bellevue
Spokane
Everett
Spokane
Olympia
Mount Vernon
Gig Harbor

[Everett](#)
[nter](#)

The COAP Quality Improvement Plan describes [two levels of participation](#). A hospital that is "participating in full compliance with community QI standards" has met community standards for data completeness, timeliness and reliability. Additionally, if one or more process or outcome measures are significantly outside the state mean, an acceptable improvement plan is in place, and outliers have not exceeded the threshold upon re-measurement. A hospital that does not meet all of these criteria is considered to be "participating in partial compliance with community QI standards." Participation status is assessed and updated twice a year.

[The Puget Sound Health Alliance](#), "strongly encourages hospitals' and physicians' voluntary participation in COAP/SCOAP for quality improvement purposes." --Puget Sound Health Alliance Board of Directors, January 2008

In this report, “NR” (measure not reported) is distinguished from nonparticipation as a whole.

Tool: Focus on Hospitals

Sponsor: Missouri Hospital Association

URL: No longer available online

Hospital	ACGI Inpatient/201 for LYD	Admission at Arrival	Admission at Discharge	Area at Risk of Discharge	ED Within 90 Minutes of Arrival	Franklin Compliance Score	Diagnostic Medication	30 Day Mortality Rate
A	90	94	92	93	73	94	41	NR
B	87	88	89	93	80	97	52	NR
C	100	100	100	100	94	100	100	NR
D	NR ³	NR ³	NR ³	NR ³	NR ³	NR ³	NR ³	✓
E	This hospital did not participate in this report.							
F	This hospital did not participate in this report.							
G	100 ¹	100	100	100	92 ¹	100 ¹	NR	✓
H	93 ²	98 ²	99 ²	99 ²	88 ²	100 ²	100 ^{1,2}	✓

In this report, a notation is made when data are presented for only some patients with a given condition, but not all.

Tool: New York State Hospital Profile

Sponsor: New York State Department of Health

URL: http://hospitals.nyhealth.gov/measure.php?measure_id=103

New York State State Agencies

Department of Health
Information for a Healthy New York

You are Here: [Home Page](#) > [Hospitals in New York State](#) > [Hospital Profile](#) > Compare hospitals

Compare Hospitals

Heart Conditions Infectious Disease Cardiac Surgery

Appropriate pneumonia care | [Appropriate surgical care improvement](#)

Pneumonia Patients Assessed and Given Influenza Vaccination Printable version

What these numbers mean: Flu shots reduce the risk of influenza, a serious and sometimes deadly lung infection that can spread quickly in a community or facility. Hospitals should check to make sure that pneumonia patients, particularly those who are age 50 or older, get a flu shot during flu season to protect them from another lung infection and to help prevent the spread of influenza. Higher percentages are better.

Date: These data cover the period October 1, 2009 to September 30, 2010.

Hospital	Success/Cases
Buffalo General Hospital	92.92% (512/551) †
Millard Fillmore Hospital	92.92% (512/551) †
Millard Fillmore Suburban Hospital	92.92% (512/551) †
State Average	90.48% (17119/18920)
Mercy Hospital	89.87% (71/79) **
Erie County Medical Center	70.64% (77/109)

Note: Hospitals participating in the HQA are required to report this measure.
 † Indicates that this hospital is part of a hospital group that reports to Medicare as a single unit. Please take care in interpreting this information.
 ** Indicates that this hospital's submission was based on a sample of its relevant discharges.

My Hospitals

Compare Hospitals

- [Buffalo General Hospital](#) Remove
- [Erie County Medical Center](#) Remove
- [Mercy Hospital](#) Remove
- [Millard Fillmore Hospital](#) Remove
- [Millard Fillmore Suburban Hospital](#) Remove
- [Remove All Hospitals From List](#)

This Site

- [Understanding Your Financial Aid Rights](#)
- [Guide to Using Hospital Profile](#)
- [About Hospital Quality](#)
- [Choosing a Hospital](#)
- [Maternity Information Brochure](#)
- [Data Collection and Usage](#)

5. Noting in a report that “sample sizes are too small”

Sometimes a provider has too few patients with a particular condition or undergoing a specific procedure to calculate a quality measure. In such cases, a performance label should not be assigned. It is important, however, to let the consumer know that the lack of a measure or performance label does not reflect poorly on the provider’s quality of care.

Some sites simply indicate that there are “too few cases.”

In the example below, the site provides a warning to the reader, “* Too few patients (<160) with condition of interest to meaningfully report for this clinic.”

Tool: Health Alliance Community Checkup

Sponsor: Puget Sound Health Alliance

URL:

<http://www.wacommunitycheckup.org/index.php?p=viewreports&orgname=all&county=All+Counties>

Medical Center Heart Disease

County: Search by ZIP code: Within Miles:

Heart Disease?
 Heart Disease Important?
 Heart Disease
 Do (Patients, Doctors, Purchasers, Health Plans)
 Heart Disease Resources

Symbol Legend	
	BETTER than average Above Regional Average
	AVERAGE At Regional Average
	BELOW average Below Regional Average
*	Not enough data to report

Medicaid All Sort by: Name

	Cholesterol Test (LDL-C or "bad" cholesterol) View Details >>	Cholesterol-Lowering Medication View Details >>
Regional Average: 82%	82%	68%
Family Medicine Associates View Details >>	*	*
Medical Group Redmond View Details >>	*	*
Internal Medicine Associates View Details >>	BETTER than average	BETTER than average

* Too few patients (<160) with condition of interest to meaningfully report for this clinic. The results for this clinic are included in the summary results for their larger medical group.

6. Using consumer-friendly phrases to replace clinical and technical terms

It is better to use consumer-friendly language (that has undergone cognitive testing), rather than technical terms even if they are linked to a glossary.

The following glossaries may serve as a starting place for report sponsors who seek lay definitions of technical terms. Use of terms that are found in one or more glossaries is not a substitute for cognitive testing.

- <http://www.wchq.org/utility/glossary.php>
- http://mhcc.maryland.gov/consumerinfo/hospitalguide/patients/consumer_help/glossary.html
- <http://info.kyha.com/qualitydata/FAQ.htm#Glossary>
- <http://web.doh.state.nj.us/apps2/hpr/mortalityfacts.shtml>
- <http://www.mihospitalinform.org/Definition.aspx>

C. Consumer Engagement Tools

An important focus of any public report should be to help consumers become more engaged in managing their health and health care. Consumers can become more educated and active participants in their care when they have concrete tools and tips to help them effectively use information and navigate the health care system.

The range of behaviors expected of consumers has grown dramatically in recent years. For example, advances in medical technology and pharmaceuticals make it possible for people with chronic conditions to live longer and better lives, but only if they can effectively manage the demands of complex medication and lifestyle regimens. The increasing specialization of care and expanding number of tests and treatments have led to significant improvements in care but have increased the burden on patients for coordinating services from multiple providers and keeping track of complicated information about their medical history.

Public reports cannot possibly meet all the growing demands on consumers to become more knowledgeable and engaged in managing their health and medical care. But by even partially addressing the need for practical guidance and tools for engagement, sponsors of public reports can play an important educational role. They also can make their Web sites more relevant to the needs and concerns of their target audience.

This section identifies tools and other engagement strategies that public report sponsors can use to help consumers in three key areas:

1. Evaluating and selecting a high-quality provider,
2. Preparing for a visit to a doctor or hospital, and
3. Partnering with doctors to manage a chronic disease.

For each of these engagement areas, specific examples are provided that illustrate approaches or provide resources and tools that the authors consider to be effective and consistent with good public reporting practice.

1. Evaluating and selecting a high-quality provider

Public report sponsors focused on a consumer audience need to understand that simply publishing quality data is not enough to engage consumers in using information to make health care decisions. Quality information is only one of many considerations, and perhaps not the primary one, entering into a consumer's choice of a provider. Therefore, public reports should help consumers easily access and use the information most relevant to them and should present the information in terms that resonate with their concerns and preferences. In this sense, reports should aim to *meet consumers where they are*, which may require sponsors to segment their audiences so that they can target different groups with different needs.

Another important consideration in providing guidance on selecting providers is that most consumers, when asked, would prefer comparative performance information on individual practitioners. However, most report sponsors do not have access to physician-level information and instead are limited to information about hospitals or medical groups. In the absence of physician-specific performance information, reports can still provide guidance on steps that consumers can take to gather available information and make good decisions.

The following examples demonstrate tools and strategies to help consumers evaluate and select a high-quality provider.

Below is an example of a guide that helps consumers make health care decisions using information about quality. The guide is based on research about the information people want and need when choosing health plans, doctors, treatments, hospitals, and long-term care providers. It shows how consumers can use information about quality to improve the health care services they and their families receive. It also describes quality measures, including consumer ratings, clinical performance measures, and accreditation—what they are, where to find them, and how to use them. In addition, the guide has checklists, questions, charts, and other tools to help users make appropriate health care decisions. The “Choosing a Doctor” section features a step-by-step worksheet to walk through the process of selecting a doctor.

Title: Your Guide to Choosing Quality Health Care

Sponsor: Agency for Healthcare Research and Quality

URL: <http://www.ahrq.gov/consumer/qnt/qntdr.htm>



AHRQ Agency for Healthcare Research and Quality
Advancing Excellence in Health Care

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Your Guide to Choosing Quality Health Care

Choosing a Doctor

Contents

- [Decide What You Want and Need in a Doctor](#)
- [Make a List of Doctors](#)
- [Check on Quality](#)
- [Contact the Doctors' Offices](#)
- [Talking with Your Doctor](#)
- [Your Personal Health History](#)
- [Urgent or Emergency Care Centers](#)
- [Sources of Additional Information](#)

It is important to choose your doctor with care, because quality varies. For example, the Pacific Business Group on Health asked patients of California doctors' groups how they rated their care. The results? More than 80 percent of the patients said they were satisfied with their care. But fewer than two-thirds were happy with the ease of getting that care.

This chapter can help you choose a primary care doctor who will meet your needs and give you quality care. The information also may be useful in choosing any specialists you might need. Primary care doctors are specially trained to serve as your main doctor over the long term. They provide your medical and health care, help you stay healthy, and help to manage your care. Your primary care doctor can refer you to specialists (doctors who treat only certain parts of the body, conditions, or age groups) if you need them.

The following example is a step-by-step guide to choosing a doctor. This guide encourages patients to take several steps in researching their physician options, starting with seeking a referral from a trusted source and checking physician qualifications. The tool also emphasizes the importance of patients learning more about their specific medical issues.

Tool: How To Choose a Doctor

Sponsor: Consumer Reports

URL: <http://www.consumerreports.org/health/doctors-hospitals/your-doctor-relationship/how-to-choose-a-doctor/getting-started/getting-started.htm>



The screenshot shows the Consumer Reports Health.org website. The main navigation bar includes links for News, Blogs, Video, and Health. The secondary navigation bar features categories: Healthy Living, Conditions & Treatments, Prescription Drugs, Natural Health, and Doctors & Hospitals. The breadcrumb trail reads: Home > Doctors & Hospitals > Your Doctor Relationship > How to Choose a Doctor. The main heading is 'Your Doctor Relationship', with sub-sections: Overview, How to Choose a Doctor, How to Talk to Your Doctor, and Check up on Your Doctor. A red arrow points to the 'How to Choose a Doctor' sub-section, which contains a list of topics: Getting started, Generalist or specialist?, How to check credentials, Questions to ask, and When to get a second (or third) opinion. A 'Print' button is visible in the top right corner of the content area.

Below is an example of a guide designed to help consumers understand the birth process, review comparative information on hospitals and physicians, and promote an open dialogue about their wishes with their physician and other care providers. Information is included on all Virginia hospitals providing obstetric services and includes rates of cesarean delivery and episiotomy, as well as descriptions of hospital obstetric programs, services available, and quality practices. Similar information on close to 600 physicians includes their performance rates, education, location, foreign languages spoken, and other information. The guide is endorsed by the National Partnership for Women and Families and the Virginia Section of the American College of Obstetrics and Gynecology.

Title: Obstetrical Services: A Consumer's Guide

Sponsor: Virginia Health Information

URL: http://vhi.org/ob_guide/ob_intro.asp

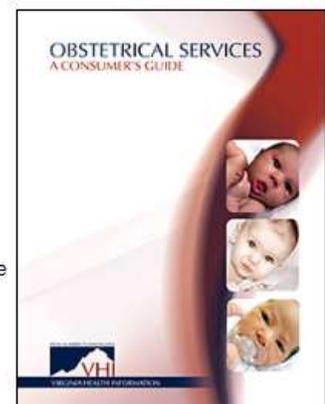
Are You Having a Baby?

It's hard to imagine a more exciting time. How you feel, changes at home and work seem to be happening all at once. Even so, take the time to learn about Obstetric Care and choices you can make when planning to have your baby. The more you know, the better decisions you and your physician can make.

Physicians and hospitals are different in their capabilities, services and performance. Learn about these differences and choose the best physician and hospital for your needs.

This guide can help you:

- Learn about the different types of delivery.
- Decide what is important to you. Then you can talk about it with your physician or other health care providers.
- Compare physicians and hospitals, based on where they are, what services they offer, their performance and hospital charges.



[Compare Hospitals](#)



[Compare Physicians](#)



2. Preparing for a visit to a doctor or hospital

A central part of engaging consumers to be active participants in their health care is emphasizing the importance of preparing for medical encounters. Consumers need to know that taking charge of their care, planning what they would like to achieve, and asking questions of their provider is not only acceptable, but also critical to achieving good health care outcomes. In helping to make these behaviors normative, it is important to provide tools that will assist consumers in planning for their medical encounter in an easy-to-use, step-by-step fashion.

The following examples demonstrate tools and strategies to encourage consumers to prepare for their medical encounters.

The following is an example of a patient education campaign featuring television public service announcements (PSAs) developed by the Ad Council to encourage patients to ask their providers questions. The campaign highlights a list of 10 key questions for patients to ask and provides an online tool for patients to build a customized list of questions to bring to their medical visit. Additional tips are provided for patients getting medical tests, planning for surgery, and getting prescriptions. Report sponsors may want to embed the PSA in their Web-based report.

Tool: Questions Are the Answer

Sponsor: Agency for Healthcare Research and Quality

URL: <http://www.ahrq.gov/questionsaretheanswer/>

Getting Medical Tests

Planning For Surgery

Getting a Prescription

Build Your Question List

Resources

Glossary

Questions are the Answer

Get More Involved With Your Health Care.

Improve Your Health Care TEXT SIZE: A A A

Clinicians, the Government, and many other groups are working hard to improve the quality of health care, but it's a team effort. You can improve your care and the care of your loved one by taking an active role in your health care. Ask questions. Understand your condition. Evaluate your options.

Check Out Our Videos

Questions Are the Answer

Medical errors cause tens of thousands of deaths each year. But you can help. Get more involved with your health care.

[Check It Out >](#)

Learn More

[5 Steps to Safer Health Care](#)

[20 Tips to Prevent Medical Errors](#)

[Be Prepared for Medical Appointments](#)

Do You Know ? the Right Questions to Ask

- 1 What is the test for?
- 2 How many times have you done this procedure?
- 3 When will I get the results?
- 4 Why do I need this treatment?
- 5 Are there any alternatives?
- 6 What are the possible complications?
- 7 Which hospital is best for my needs?
- 8 How do you spell the name of that drug?
- 9 Are there any side effects?
- 10 Will this medicine interact with medicines that I'm already taking?

Build Your Own List of Questions

Ad Council

Below is a Web site that advises patients on three basic questions to ask every time they talk with a doctor, nurse, or pharmacist. The questions are: (1) What is my main problem? (2) What do I need to do? (3) Why is it important for me to do this? The Web site also includes brief tips on communicating clearly with a provider.

Title: Ask Me 3

Sponsor: National Patient Safety Foundation

URL: http://www.npsf.org/askme3/for_patients.php



The graphic features the 'Ask Me 3' logo in a blue rounded rectangle on the left. Below it is a vertical list of five topics: 'When To Ask?', 'Who Needs to Ask?', 'What If I Still Do Not Understand?', 'Your Doctor Wants to Answer', and 'Tips for Clear Health Communication'. In the center is a photograph of a female doctor in a white coat with a stethoscope, talking to a patient. On the right, the text 'Good questions for your good health' is displayed. Below this are three numbered questions: '1 What is my main problem?', '2 What do I need to do?', and '3 Why is it important for me to do this?'. A large red arrow points from the top right towards the 'Good questions' text.

Ask Me 3™

- ▶ When To Ask?
- ▶ Who Needs to Ask?
- ▶ What If I Still Do Not Understand?
- ▶ Your Doctor Wants to Answer
- ▶ Tips for Clear Health Communication

Good questions
for your **good health**

- 1** What is my main problem?
- 2** What do I need to do?
- 3** Why is it important for me to do this?

The following is a guide for how to prepare for a doctor's visit, including things to do prior to and during the visit. Videos are featured, including physicians talking about how to make the most of your time with your doctor (one version with an English-speaking physician and another with a Spanish-speaking physician) and a consumer talking about being an engaged patient. A downloadable tool to track medications also is included.

Tool: Preparing for Your Doctor's Appointment

Sponsor: The Partnership for Healthcare Excellence

URL:

http://www.partnershipforhealthcare.org/patients_and_caregivers/preparing_for_your_doctors_appointment/

THE PARTNERSHIP FOR
HEALTHCARE EXCELLENCE

Text Size: A A A

ABOUT US NEWS & MEDIA CONTACT US GET INVOLVED

PATIENTS & CAREGIVERS PHYSICIANS HOSPITALS EMPLOYERS COMMUNITY ORGANIZATIONS

Preparing for Your Doctor's Appointment
The time you have with your doctor is very important to your health. So be sure to ask questions, explain any new symptoms or problems and share your concerns.

- Choosing a Doctor
- Preparing for Your Doctor's Appointment
- How to Take Your Medications Safely
- Preventing Infection
- Preparing for your Hospital Stay
- Comparing Hospitals & Nursing Homes
- End of Life Planning

Preparing for Your Doctor's Appointment

You and your doctor are a team, and working closely with him or her—asking questions, listening carefully and following his or her advice—is good for your health.

Videos:

- [Preparing for a Doctor's Visit](#)
- [La Visita al Medico](#)
- [Engaged Patient](#)

Bob Kogman, MD
Medical Director of Hospital Care at Ohio National Health

OUR PERSPECTIVE: RELATED POSTS

QUALITYBUZZ

An Important Milestone in Patient Safety
This month marks the tenth anniversary of the release of "To Err is Human" by the Institute... [READ MORE](#)

Below is a three-step tool for consumers to create an action plan, including: (1) Prepare for your appointment, featuring a customizable checklist of questions to print; (2) Ask questions and understand the answers, featuring tips on how to interact with your doctor during your visit; and (3) Follow up and follow through, featuring activity log tools and links to many other resources.

Title: Take Charge

Sponsor: Healthy Memphis Common Table

URL: http://www.healthymemphis.org/take_charge.php?s=consumers

The image displays a vertical three-step tool for consumers. Each step is represented by a colored card with a red arrow pointing to it from the left. Step 1 is a light blue card titled '1 PREPARE for your appointment' with a play button icon. It includes an image of a man and a woman looking at a laptop, and text: 'Educate yourself and write down any concerns or questions you have. Make sure you are also prepared to answer your doctor's questions.' Step 2 is a yellow card titled '2 ASK questions and understand the answers' with a play button icon. It includes an image of a doctor talking to a patient, and text: 'Don't be afraid to talk candidly with your doctor or health care professional and make sure everything they're saying makes sense to you.' Step 3 is a light green card titled '3 FOLLOW UP and follow through' with a play button icon. It includes an image of a woman talking to a child, and text: 'Keep the conversation going after your appointment, and do your part to take charge for better health!' Each card has a 'Click here >' link at the bottom.

1 PREPARE
for your appointment

Educate yourself and write down any concerns or questions you have. Make sure you are also prepared to answer your doctor's questions.

Click here >

2 ASK questions and understand the answers

Don't be afraid to talk candidly with your doctor or health care professional and make sure everything they're saying makes sense to you.

Click here >

3 FOLLOW UP
and follow through

Keep the conversation going after your appointment, and do your part to take charge for better health!

Click here >

Other examples of resources for preparing for a visit to a doctor or hospital

Title: Making the Most of Your Medical Appointments

Sponsor: Partner for Quality Care, an initiative of Oregon Health Care Quality Corp

URL: <http://www.partnerforqualitycare.org/appointments.php>

Description: Tips for what to do before, during, and after a medical appointment. This downloadable brochure is consumer friendly and features two frames of a patient/doctor interaction - contrasting a scenario where the patient does not ask any questions with another modeling the patient asking questions.

Title: Quick Tips for Talking With Your Doctor

Sponsor: Puget Sound Health Alliance

URL: <http://www.pugetsoundhealthalliance.org/resources/documents/QuickTipsChecklist.pdf>

Description: A worksheet to assist patients in preparing for their medical visit. Includes areas to list questions and another to outline personal health goals. An area to record notes during the visit also is included.

3. Partnering with doctors to manage a chronic disease

Successful management of a chronic disease requires a daily commitment from patients to monitor their health status and to work toward achieving health goals. A strong partnership between patients and their providers is vital to this process. Consumers can benefit from tips and tools that help them understand what their role is in managing their disease and how to work with their providers to make sure their care plan is a good fit for their unique circumstances.

The following examples show tools and strategies to help patients partner effectively with their providers in managing chronic disease. The D5 for Diabetes example further illustrates how a report focused on addressing consumer needs for support in managing chronic disease can be designed to effectively introduce performance information on medical groups. It presents scores on various providers and shows how they vary in helping their patients manage this condition.

Below is a site for patients, family members, and health care providers who want to work together to improve health, health care, and quality of life for people with chronic conditions. The site provides support for those who want to work together, in a new health partnership, to improve patient self-management. The site features a number of articles for patients on being active in health care and self-managing conditions. A recent guide for providers contains a number of practical tips and resources for engaging patients in self-management: Partnering in Self-Management Support: A Toolkit for Clinicians is available at <http://www.newhealthpartnerships.org/provider.aspx?id=1544>.

Title: New Health Partnerships

Sponsor: Institute for Healthcare Improvement

URL:

<http://www.newhealthpartnerships.org/PatientsPuzzlePiecePrint.aspx?id=40&linkidentifier=id&itemid=40>

The screenshot shows the New Health Partnerships website. At the top, the logo reads "NEW HEALTH PARTNERSHIPS" with the tagline "IMPROVING CARE BY ENGAGING PATIENTS" and a diamond-shaped icon. Below the logo is a navigation bar with five tabs: "About Us", "Patients & Families" (which is highlighted), "Health Care Providers", "Best Practices", and "Idea Exchange". The main content area has a breadcrumb trail: "Home > Patients & Families > Patients & Families". The section title is "Patients & Families" with "Email" and "Print" links to its right. On the left side, there is a vertical menu with the following items: "Introduction", "Being Active in Healthcare", "You're Not In This Alone", "Getting Started with Self-Management", "Staying on Track", "Helping Others Self-Manage", and "Improving Health Care for Others". The main content area features an illustration of an open book with a green cover and yellow pages, set against a background of stylized trees. To the right of the book, the text reads: "If you have a chronic or long-term condition, you and your family have to manage it all day, every day. If you do, you can maintain a healthy, positive, productive life. If you don't, you and your family may suffer unnecessarily. Self-management involves three different kinds of tasks - caring for your body, adapting your activities to your condition, and dealing with the emotions that illness brings." Below this, another paragraph states: "Self-management often involves medical treatments and therapies. It can also mean making lifestyle changes, such as eating better, reducing stress, or increasing exercise. You might also need to make changes in your life, like improving work or family relationships or changing how you interact with health care providers." A final paragraph at the bottom of the main content area says: "Whether you are a person with a chronic or long-term condition, or a family member, this section of New Health Partnerships will provide information, resources, and support you need."

The D5 Web site shown below was born out of consumer focus group findings indicating that consumers with diabetes would be more likely to pay attention to health care quality data if they were presented information specifically concerning their chronic condition. The D5 brand frames Minnesota Community Measurement's five-part diabetes quality measure as goals that patients should be working toward in partnership with their doctor. Quality ratings are available on an inside tab for consumers ready to use them, but the emphasis is on raising patients' awareness of the five goals for managing their own diabetes. In addition, a catalog of free, downloadable communications tools was added to the site to assist stakeholders in delivering this campaign message (<http://thed5.org/catalog/index.php>).

Title: The D5 for Diabetes

Sponsor: Minnesota Community Measurement (MNCM)

URL: <http://thed5.org>

the D5

HOME ABOUT THE D5 VIEW CLINICS WHO WE ARE

THE FIVE GOALS FOR LIVING WELL WITH DIABETES

LIVING WITH DIABETES. SIMPLIFIED.

Text Size: A- A A+

- 1 CONTROL BLOOD PRESSURE
- 2 LOWER BAD CHOLESTEROL
- 3 MAINTAIN BLOOD SUGAR
- 4 BE TOBACCO-FREE
- 5 TAKE ASPIRIN DAILY

The D5 represents the 5 goals you need to achieve to reduce your risk of heart attack or stroke when you have diabetes.

You achieve the D5 when you meet all five goals:

1. Your blood pressure is less than 130/80
2. Your bad cholesterol, LDL, is less than 100
3. Your blood sugar, A1c, is less than 7%
4. You are tobacco-free
5. You take a daily aspirin (age 40 and older)

SEE HOW CLINICS IN YOUR AREA ARE DOING

In Minnesota, clinics are measured by how many of their patients achieve the D5.

Find a clinic in your area or see how your clinic measures up.

VIEW CLINICS >>

The site below features written patient story vignettes, accompanied by images of the narrator. The videos discuss taking control and partnering with doctors when living with diabetes.

Title: Patient Stories

Sponsor: Better Health Greater Cleveland

URL: <http://www.betterhealthcleveland.org/For-Patients/Diabetes/Patients--Stories.aspx>

Better Health Greater Cleveland
An Alliance for Improved Health Care

An independent organization dedicated to improving the health of people in Northeast Ohio living with chronic disease.

Home | Provider Resources | Patient Resources | Checkup Report | About Us

"Generally, patients see their physicians once every three months. But the decisions they make on a daily basis – what they eat, whether they exercise, medications they take and monitoring their blood sugars – are going to determine whether their diabetes is kept in good control."

– Denise Kaiser
Registered Dietician

Check Your Health
For Men Only

Some men with diabetes have impotence, also called erectile dysfunction, or ED, because of damage to blood vessels and nerves in the penis. ED does not happen to all men with diabetes, and there are ways to treat it. Talk to your health care team.

Patient Stories

- A Journey for Better Health**
"I have a responsibility to deal with my disease. Doctors have a responsibility to give me all the information I need."[...more](#)
- Learning to live with diabetes**
The more you know about diabetes, the more you can help yourself.[...more](#)
- The Power to Take Control**
"Thank God," Lily recalled saying. "Of anything I could have had, this is the one thing I could control and keep on track."[...more](#)
- A Family Matter**
Each day, he asks, "How are you feeling?" and "What are your blood sugars?"[...more](#)
- It's all on me**
"We make the choice to take control or let it have its way."[...more](#)
- Forging Partnerships**
"It helps to have a partner who's strong – not someone who feels sorry for you -- who helps you over the bumps, who praises you fo"[...more](#)

Another example of a resource for partnering with doctors to manage a chronic disease

Title: I Can! Challenge

Sponsor: Aligning Forces for Quality South Central Pennsylvania

URL: <http://www.icanchallenge.com/home-page.html>

Description: A targeted health improvement challenge for those with diabetes or heart disease in York and Adams Counties. The challenge features five citizens who were followed weekly via the local Fox station on a 12-week program to self-manage their health and is an example of modeling a popular reality TV show (i.e., The Biggest Loser). This video link tells the story of the final week: <http://www.icanchallenge.com/fox43-videos/celebrating-success-during-the-final-week.html>

D. Place for Consumer Input on Web Site Design

1. Place for consumers to to ask questions or share suggestions

Most consumers are just beginning to use the Web to find information about provider performance. Therefore, they may not know how to access or interpret the data. Collaboratives could give Web site users an opportunity to provide feedback, ask questions, or ask for help.

A simple feedback form from a New York-based site is shown below. Only the comments field is required, so anonymous feedback can be submitted.

Tool: New York State Hospital Profile

Sponsor: New York State Department of Health

URL: <http://hospitals.nyhealth.gov/feedback.php>

Department of Health
Information for a Healthy New York

A-Z Index Help Contact Home

You are Here: [Home Page](#) > [Hospitals in New York State](#) > [Hospital Profile](#) > Feedback

Send Us Your Feedback

Please use this form to report any problems, comments, or concerns about the Hospital Profiles section of this site. If you fill in your name and email address, we can get back to you, but only the comments field is required.

Your name:	<input type="text"/>
Your E-mail address:	<input type="text"/>
Comments:	<input type="text"/>

submit comments

For this site, an e-mail address is required, along with a security step, but not a name, to provide comments and suggestions. Users are directed to address technical issues to a separate e-mail address.

Tool: Illinois Hospital Report Card

Sponsor: Illinois Department of Public Health

URL: <http://healthcarereportcard.illinois.gov/>

Illinois Hospital Report Card and consumer guide to health care



[Return to IDPH Online Home](#) [About](#) [Glossary](#) [Contact](#) [Methodology](#) [Help](#)

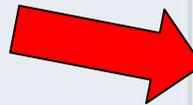
Find Your Health Care Facility

Find facilities by county

Welcome!

Consumers have a right to access information about the quality of health care provided in Illinois. This Web site can help you to become a more informed consumer and to make better health care choices.

This Web site will continue to grow as the department completes new information and implements regular updates; [your comments and suggestions](#) for improving the site are welcomed. [Read more](#) about the Report Card and Consumer Guide.



Selecting “your comments and suggestions” above leads the user to the following window:

[Return to IDPH Online Home](#) [About](#) [Glossary](#) [Contact](#) [Methodology](#) [Help](#)

Contact Us

Please use this form to submit your comments to the Illinois Department of Public Health. If you are having technical problems with the site, please contact IPRO eServices at idph-support@ipro.us.

Your name

Your e-mail*

Organization

Phone #

Comment*

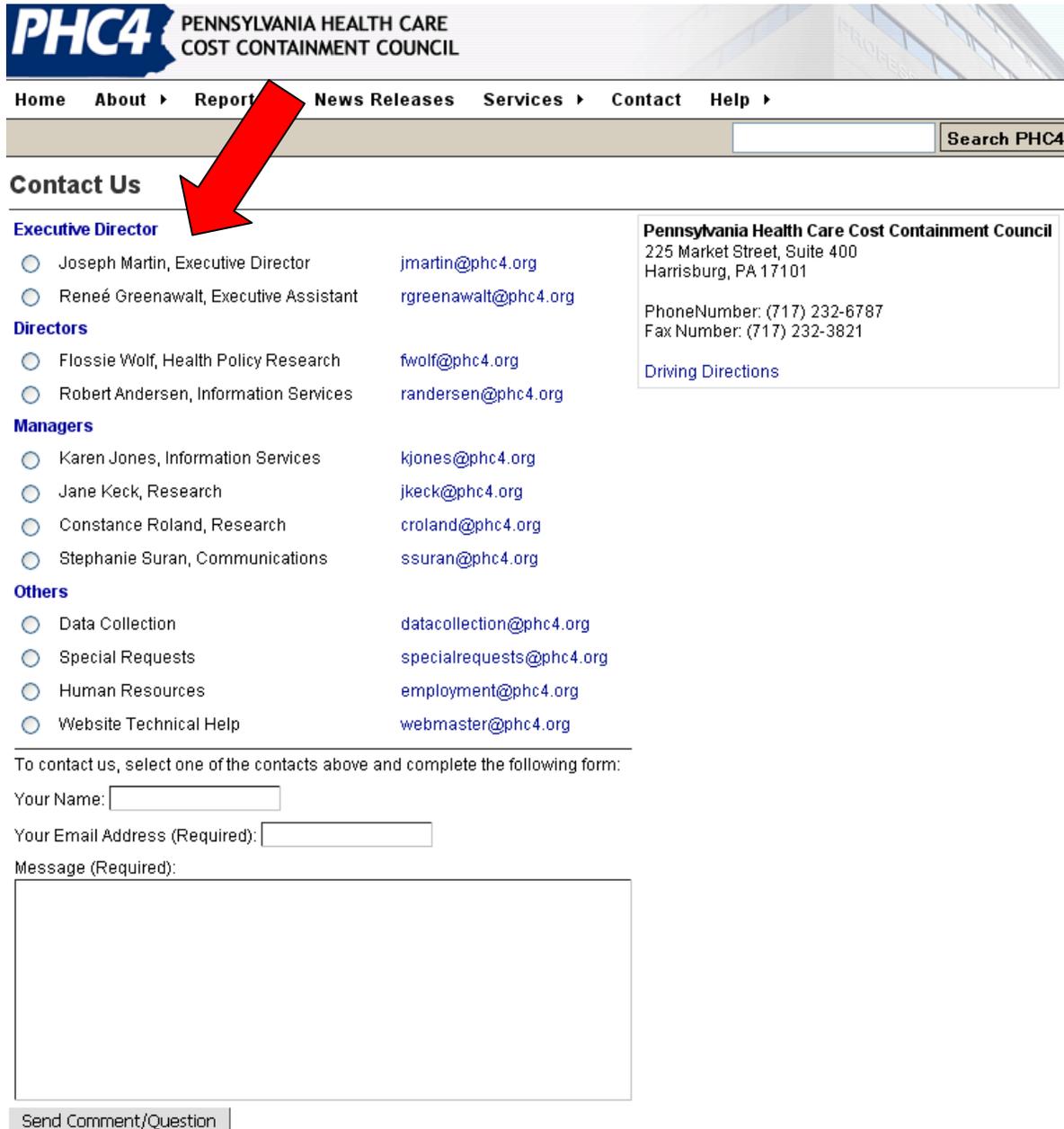
Confirm value from image above*

The following Web site offers users a high level of accessibility to directors, managers, and staff.

Tool: PHC4

Sponsor: Pennsylvania Health Care Cost Containment Council

URL: <http://www.phc4.org/council/contact.htm>



PHC4 PENNSYLVANIA HEALTH CARE COST CONTAINMENT COUNCIL

Home About ▶ Report News Releases Services ▶ Contact Help ▶

Search PHC4

Contact Us

Executive Director

- Joseph Martin, Executive Director jmartin@phc4.org
- Reneé Greenawalt, Executive Assistant rgreenawalt@phc4.org

Directors

- Flossie Wolf, Health Policy Research fwolf@phc4.org
- Robert Andersen, Information Services randersen@phc4.org

Managers

- Karen Jones, Information Services kjones@phc4.org
- Jane Keck, Research jkeck@phc4.org
- Constance Roland, Research croland@phc4.org
- Stephanie Suran, Communications ssuran@phc4.org

Others

- Data Collection datacollection@phc4.org
- Special Requests specialrequests@phc4.org
- Human Resources employment@phc4.org
- Website Technical Help webmaster@phc4.org

Pennsylvania Health Care Cost Containment Council
225 Market Street, Suite 400
Harrisburg, PA 17101
PhoneNumber: (717) 232-6787
Fax Number: (717) 232-3821
[Driving Directions](#)

To contact us, select one of the contacts above and complete the following form:

Your Name:

Your Email Address (Required):

Message (Required):

2. Consumer survey to provide information on how data were used

Little is known about who uses public reporting Web sites and how they use the data. Some collaboratives have added surveys to their sites to learn more about who their customers are and what their needs are.

Some surveys are relatively short and simple. The following survey feature allows users who did not find what they were looking for or did not understand the data or information presented to provide open-ended feedback. The advantage of this approach is that users may provide feedback about unanticipated or unrecognized issues. On the other hand, it may be difficult to summarize and draw conclusions from this type of feedback.

Tool: Colorado Hospital Report Card

Sponsor: Colorado Hospital Association

URL: <http://www.chachart.com/rptcard/ReportCardSurvey/default.asp>

Colorado - Report Card Survey

Colorado Hospital
Report Card



1) Did you find the information you were looking for? Yes No

If no, what information were you seeking?

2) Were you able to understand the data and information on the report card? Yes No

If no, could you give us an example of what you did not understand?

3) Were you able to view the definitions/descriptions of the measures? Yes No

4) Additional comments or suggestions for improvement?

5) How did you hear about the Hospital Report Card website?

Submit

Reset

Other surveys are more specific about the response options allowed and attempt to categorize possible answers, providing fewer opportunities for open-ended user input. This survey adds the incentive of eligibility for a gift certificate.

Tool: VHI Cardiac Care

Sponsor: Virginia Health Information

URL: http://www.vhi.org/thesurvey.asp?page_Id=7&page_name=Cardiac%20Care

Virginia Health Information
FROM NUMBERS TO KNOWLEDGE

Cardiac Care Survey

Please complete this brief survey to help VHI serve you better.

Answer the questions below for a chance to win a \$50 gift certificate

1 in 100 persons completing a survey will win!
Include your contact information at the end so we can notify the winners. We won't sell or give anyone else your information.

1. Is this information helpful?
 Yes
 No

2. Did you find that this cardiac care information (pick all that apply):
 Increased my knowledge about cardiac care options or hospitals providing cardiac care
 A handy reference
 Reduced my concerns
 Helped me choose a hospital for cardiac care

3. I'd really be helped if you had information on:

4. For the purpose of this visit to www.vhi.org I consider myself a (pick one):
 General consumer
 Health care provider
 Health insurance representative
 Business user
 Physician
 Health care researcher
 Government employee

5. I learned about www.vhi.org from (pick all that apply):
 Newspaper
 Advertisement
 Employer
 Family member
 Friend
 Professional Association

Although much of the content of this survey is similar to the one above, this site draws attention to its survey with a prominent icon on the home page and adds questions on the site's ease of use.

Tool: Maryland Hospital Performance Evaluation Guide

Sponsor: Maryland Health Care Commission

URL: http://mhcc.maryland.gov/consumerinfo/hospitalguide/hospital_guide/survey/index.htm

The screenshot shows the 'Hospital Guide' section of the Maryland Hospital Performance Evaluation Guide website. The page features a dark blue header with the title 'Hospital Guide' and a navigation menu with links for 'Hospital Guide Home', 'Patient Guide', 'Practitioner Guide', and 'Hospital Leader Guide'. A search bar is located in the top right corner. The main content area is titled 'We Want to Hear From You!' and contains a survey introduction: 'We value our visitors' opinions. Please take a few minutes to complete our short questionnaire! This questionnaire is completely confidential. We will use your responses to continually improve our Website.' The survey questions are as follows:

Is this the first time you have visited our Website?

- Yes
- No
- Not sure

This Website:

1. Is easy to navigate

- Strongly agree
- Agree somewhat
- Disagree somewhat
- Strongly disagree

2. Is written in language that is easy to understand

- Strongly agree
- Agree somewhat
- Disagree somewhat
- Strongly disagree

3. Provides useful information that I will use

- Strongly agree
- Agree somewhat
- Disagree somewhat

The left sidebar contains a list of navigation links: 'Hospital Guide Home', 'Comparison Reports', 'Find a Hospital', 'Find a Medical Condition', 'Find a Quality Measure', 'Find a Patient Experience Measure', 'Healthcare-Associated Infections', 'About MHCC', 'Project Philosophy', 'Letter From The Chairmen', 'Legal Disclaimer', and 'Site Map'. The footer includes the Maryland Health Care Commission logo and the copyright notice: '© Copyright Maryland Health Care Commission'.

E. Other Resources

1. Links/tools/libraries (national and community resources)

Some consumers may have informational needs beyond what is included in the report. Examples—not elsewhere included in the Sampler—include additional information on health conditions, treatment options, other health care quality organizations at the State and national levels, and patients' rights.

The following Web site enables consumers to select links to other organizations that provide quality of care and cost data, patient's rights information, and other services.

Tool: New York State Hospital Profile

Sponsor: New York State Department of Health

URL: <http://hospitals.nyhealth.gov/more-quality.php>

NEW YORK STATE
Department of Health
Information for a Healthy New York

You are Here: [Home Page](#) > [Hospitals in New York State](#) > [Hospital Profile](#) > [Additional resources](#)

Additional Resources

Health Care Profiles

- [New York State Physician Profiles](#)
- [Nursing Homes in New York State](#)
- [New York State HMO Guide](#)

Patient Rights

- [Patient's Rights in New York State](#)
- [Your Right to See Your Medical Records](#)
- [Health Care Proxy](#)

Regional Resources

- [Connecticut Hospitals Performance Comparisons](#)
- [New Jersey Hospital Performance Report](#)
- [Massachusetts Health Care Quality and Cost Information](#)
- [New Hampshire QualityCare](#)
- [Pennsylvania Hospital Performance Comparisons](#)
- [Vermont Hospital Community Reports](#)

Related Web Sites and Information

- [AARP Research Center](#)
- [Administrators in Medicine \(AIM\) - Association of State Medical Board Executive Directors - DocFinder](#)
- [Agency for Healthcare Research and Quality \(AHRQ\)](#)
- [IPRO, Quality Improvement Organization](#)
- [Institute for Healthcare Improvement \(IHI\)](#)
- [Institute for Safe Medication Practices \(ISMP\)](#)
- [Joint Commission on Accreditation of Healthcare Organizations \(JCAHO\)](#)
- [Leapfrog Group](#)
- [National Quality Forum \(NQF\)](#)

My Hospitals

No hospitals have been selected to compare.

Add hospitals to this list by clicking the add icon next to the hospital name.

Remove hospitals by clicking the remove icon.

About This Site

- [Understanding Your Financial Aid Rights](#)
- [Guide to Using Hospital Profile](#)
- [About Hospital Quality](#)
- [Choosing a Hospital](#)
- [Maternity Information Brochure](#)
- [Data Collection and Usage](#)
- [Complaints About Hospital Care Call: 1-800-804-5447](#)
- [Frequently Asked Questions](#)
- [Site News](#)
- [Additional Resources](#)
- [NYS Physician Profiles](#)
- [Glossary of Terms](#)
- [Send Us Your Feedback](#)

2. Links to provider Web pages

Some consumers come to public reporting Web sites looking for a provider, so it may help to provide them with direct Web links. Providers also may appreciate having links to their Web sites included. Below are examples of a provider selection page and a hospital information page.

Tool: MI Hospital Inform

Sponsor: Michigan Health & Hospital Association

URL: <http://www.mihospitalinform.org/PickHospital.aspx>

The screenshot shows the MI Hospital Inform website. The header features the Michigan Health & Hospital Association (MHA) logo and the site title "MI Hospital Inform PRICE AND QUALITY DATA". A navigation menu includes links for Home, Hospital Charge Information, Hospital Quality Information, Definitions, Links, Contact, and About MHA. On the left, an "Important Information" sidebar lists links for Frequently Asked Questions, Choosing a Hospital, About the MHA, MHA Member Toolkit, and What's New on the Web Site. The main content area is titled "Specific Hospital Information" and provides instructions for viewing average payment/charge data. It offers buttons for "Inpatient Services" and "Outpatient Services", with definitions for each. Below this, it provides a "Quality Information" button for viewing quality data. A second section, "Specific Inpatient Service Information", offers a "Data by Service" button for viewing average payment/charge data for specific services across all Michigan hospitals. The footer contains the copyright notice: "Copyright © 2007-2010 Michigan Health & Hospital Association. All Rights Reserved."

This screenshot shows a detailed view of a hospital's information on the MI Hospital Inform website. The navigation menu is the same as in the previous screenshot. The main content area is a blue box with a black border containing the following text: "Bronson Methodist Hospital", "One Healthcare Plaza", "Kalamazoo, MI 49007", and the website URL "<http://www.bronsonhealth.com>". A large red arrow points to the URL. Below the blue box are three buttons: "Select a New Hospital", "Charge Data", and "Quality Data".

Tool: Hospital Consumer Assist

Sponsor: Arkansas Hospital Association

URL: <http://www.hospitalconsumerassist.com/profile.htm?provid=040016>

HOSPITAL CONSUMER ASSIST

REPORTS
MAP SEARCH HOSPITAL LIST PROFILE INPATIENT PRICING QUALITY

PROFILE

Information in this report is taken from several sources / Definitions:
Operating statistics from hospital cost report for period ending 06/30/2008.
Accreditation status from Medicare Provider of Services data at 05/31/2009.
Medicare inpatient billing data are for the 12 months ending 09/30/2007.
Medicare outpatient billing data are for the 12 months ending 12/31/2007.

University of Arkansas for Medical Sciences (UAMS) Medical Center
4301 West Markham Street
Little Rock, AR 72205
(501) 686-7000

Hospital Characteristics

Hospital Website:	www.uamshealth.com/
Type of Control:	Governmental, State
County:	Pulaski
Metropolitan Area (CBSA):	Little Rock-North Little Rock, AR
Accreditation Status:	JCAHO / 10/12/2002 - 10/12/2005

III. Functionality and Layout

A. Capacity To Narrow Selection of Providers Based on Consumer Preferences

Information included in a public report can be overwhelming to consumers. One strategy to reduce the cognitive burden for consumers is to enable them to systematically reduce the fields of information to the subset that is pertinent to them. By taking advantage of the functionalities available in a Web-based format and letting users narrow their choices based on their preferences and needs, you can restrict information to the data points of interest.

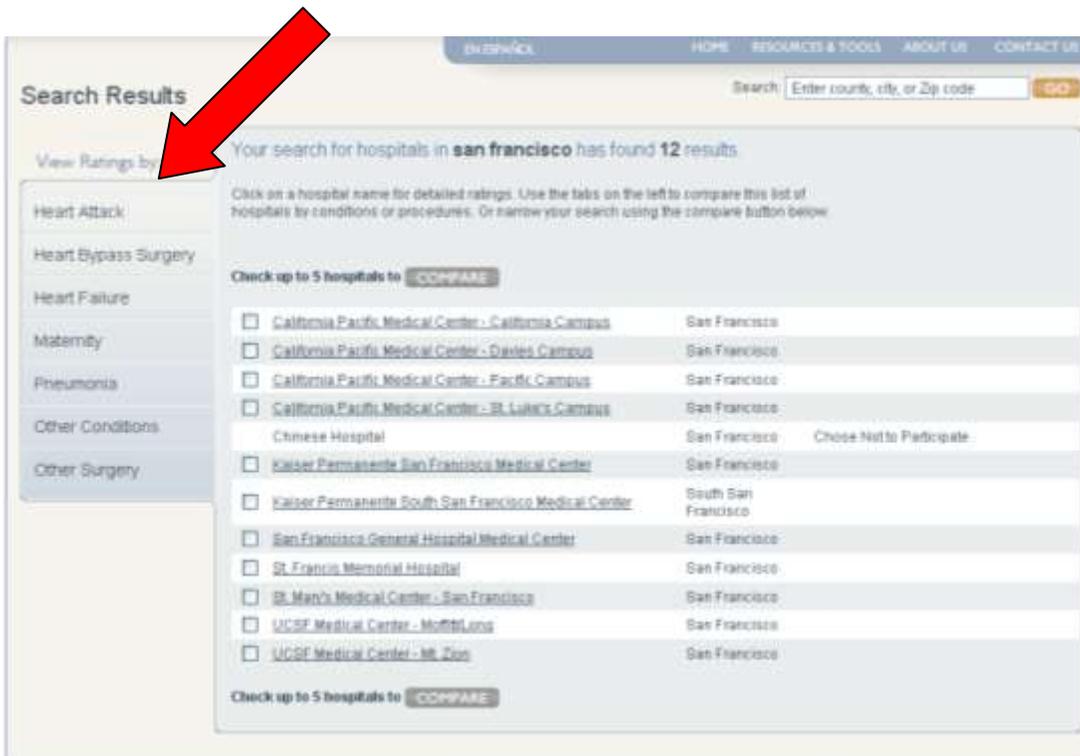
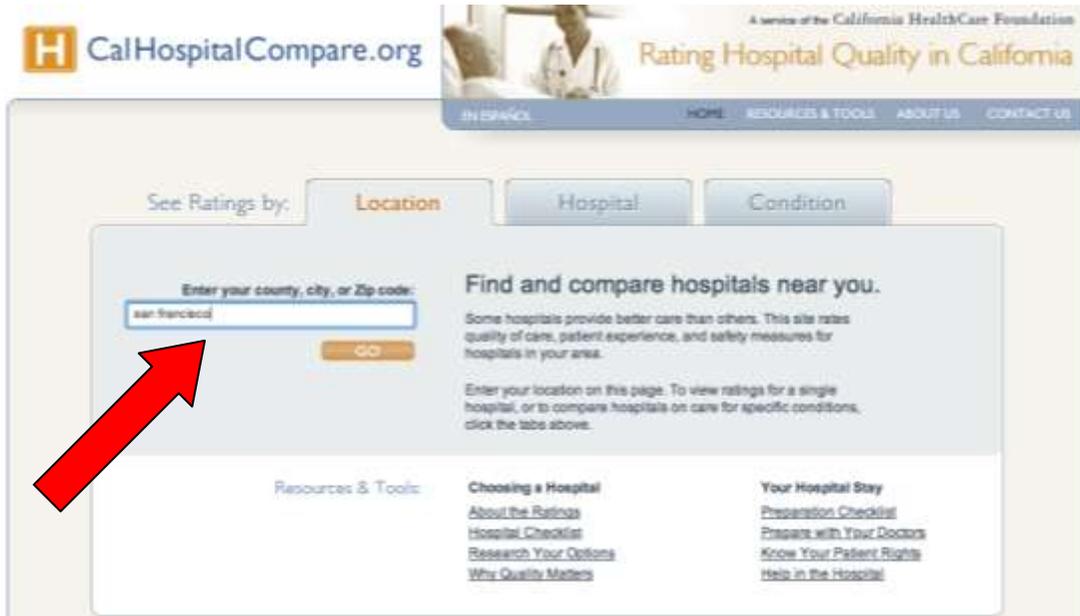
Report sponsors can enable consumers to narrow the fields by geography, level of quality of care (e.g., high-quality providers), or health condition or procedure. Then consumers can focus on the information most important to them.

The next examples show a report that allows users to narrow their search to a subset of participating providers based on geography, as well as condition. The main search page is shown with the location tab selected, followed by a results page showing hospitals in the selected location and options to search further by condition.

Tool: CalHospitalCompare

Sponsors: California Hospital Assessment and Reporting Taskforce, the California HealthCare Foundation, and the University of California, San Francisco

URL: <http://www.calhospitalcompare.org> (main page);
<http://www.calhospitalcompare.org/results.aspx?l=san%20francisco&v=1> (results page)



B. Capacity To Sort Providers Based on Performance

In this example, a table of performance data is produced, and the user can sort hospitals based on any of the aspects of performance reported. The site allows the user to rearrange the hospitals presented by selecting the column headings. Doing so then sorts the hospitals by performance on the indicator named in the column heading. The table below is sorted by mortality rating.

Tool: PHC4

Sponsors: Pennsylvania Cost Containment Council

URL: <http://www.phc4.org/hpr/Results.aspx?Years=20081-20084&CC=Septicemia&CID=0&Facilities=4610%2c0900%2c1660%2c1860%2c1610>

PHC4 PENNSYLVANIA HEALTH CARE COST CONTAINMENT COUNCIL

Home About Reports News Releases Services Contact Help

Hospital Performance Query Results

Selected Area: Statewide

Septicemia

Legend

- Significantly higher than the expected rate
- ⊕ Not significantly different than the expected rate
- Significantly lower than the expected rate
- NR Not Reported. Had fewer than five cases evaluated
- NA Not Available. Not reported due to missing/incomplete data

If a selected year does not appear in the results below, then no data exists for that year for the selected treatment.

Year	Facility Name	Cases	Mortality Rating	Length of Stay (LOS)	%	Short LOS		Doubt Cases		Long LOS	Avg Charge
						Rating	%	Rating	%		
Winter	UPMC McKeesport	402	○	7.0	8.1	●	2.9	⊕		\$31,700	
Winter	UPMC Northwest	147	⊕	9.3	2.5	⊕	0.8	○		\$16,087	
Winter	UPMC Bedford	69	⊕	5.3	4.9	⊕	0.0	⊕		\$12,058	
Winter	UPMC St Margaret	184	⊕	8.1	5.3	⊕	3.3	⊕		\$41,788	
Winter	UPMC Draddock	59	●	7.2	0.8	⊕	2.3	⊕		\$34,823	

New Treatment Download To Excel County Map

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Arrows under all column headings in the following example allow the user to sort in either direction (i.e., from highest to lowest or lowest to highest cases or rates). The table below is sorted by risk-adjusted mortality rate from lowest to highest rates.

Tool: Kentucky Hospital Association Quality Reports

Sponsor: Kentucky Hospital Association

URL:

<http://info.kyha.com/qualitydata/igisite/SelectReport.asp?IndID=IQI12&TimePeriod=5&SortOrder=RValue&SortDir=ASC&GroupOpt=none&ACLimit>

Disclaimer

Kentucky Hospital Association Quality Data

If a link does not work, please make sure your pop-up blocker is turned off!

AHRQ Inpatient Quality Indicator: **IQI 12 - Coronary Artery Bypass Graft (CABG)**

Time Period: **Oct 2007 - Sept 2008**

Grouping Options: **No Groupings** **Run!**

[Printable Version](#) [PSI Indicators](#)

AHRQ Indicator IQI12: In-Hosp Mortality CABG
Time Period: Oct 2007 - Sept 2008

AHRQ Definition	Technical Documentation	Medical Definition	Graph			
Hospital  (Click an arrow to sort column)	Qualifying Cases	Total Cases	Observed Rate	Risk Adjusted Rate	BA Low	BA High
National Rate				3.07%		
Statewide	144	5364	2.68%	1.72%	1.38%	2.09%
ARH Regional Medical Center	0	76	0.00%	0.00%	0.00%	2.97%
Saint Joseph London	0	174	0.00%	0.00%	0.00%	1.97%
University of Louisville Hospital	0	27	0.00%	0.00%	0.00%	7.64%
St. Elizabeth Covington	0	94	0.00%	0.00%	0.00%	3.37%
The Medical Center/Bowling Green	1	242	0.41%	0.46%	0.00%	2.79%
Norton Hospital	2	210	0.95%	0.83%	0.00%	2.23%
Owensboro Medical Health System, Inc.	4	332	1.20%	0.85%	0.00%	2.41%
Jeniah Hospital	17	751	2.26%	1.29%	0.36%	2.22%
Regional Medical Center	2	145	1.38%	1.20%	0.00%	4.09%
Rikeville Medical Center	2	69	2.90%	1.54%	0.00%	4.44%
Saint Joseph Hospital	19	784	2.42%	1.68%	0.67%	2.68%
Baptist Hospital East	9	224	4.02%	1.86%	0.38%	3.35%
Western Baptist Hospital	7	230	2.94%	1.93%	0.22%	3.63%
King's Daughters Medical Center	20	666	3.00%	1.94%	0.90%	2.98%
Lake Cumberland Regional Hospital	4	97	4.12%	1.94%	0.00%	4.23%
Norton Audubon Hospital	15	308	4.90%	2.49%	1.14%	3.85%
Central Baptist Hospital	17	446	3.81%	2.73%	1.37%	4.09%
Lourdes	9	229	3.93%	3.14%	1.15%	5.13%

Quality Links

- About these Reports
- KHA AHRQ Reports
- AHRQ State Snapshots
- Hospital Charge Data
- Hospital Compare
- National Quality Forum
- Contact Us
- KHA Home

AHRQ

Comments/Questions For KHA? [Contact Us](#)

C. E-Mail Capability

Some consumers will want to share data with family or friends or send an excerpt of the report to themselves for their personal file. This can be done either by permitting outgoing e-mails that link to a particular Web page or by actually allowing the selected data to be forwarded. Report sponsors pursuing the latter are encouraged to test this function to ensure that the graphics display properly and that the user can select only the performance measures he or she wants to share.

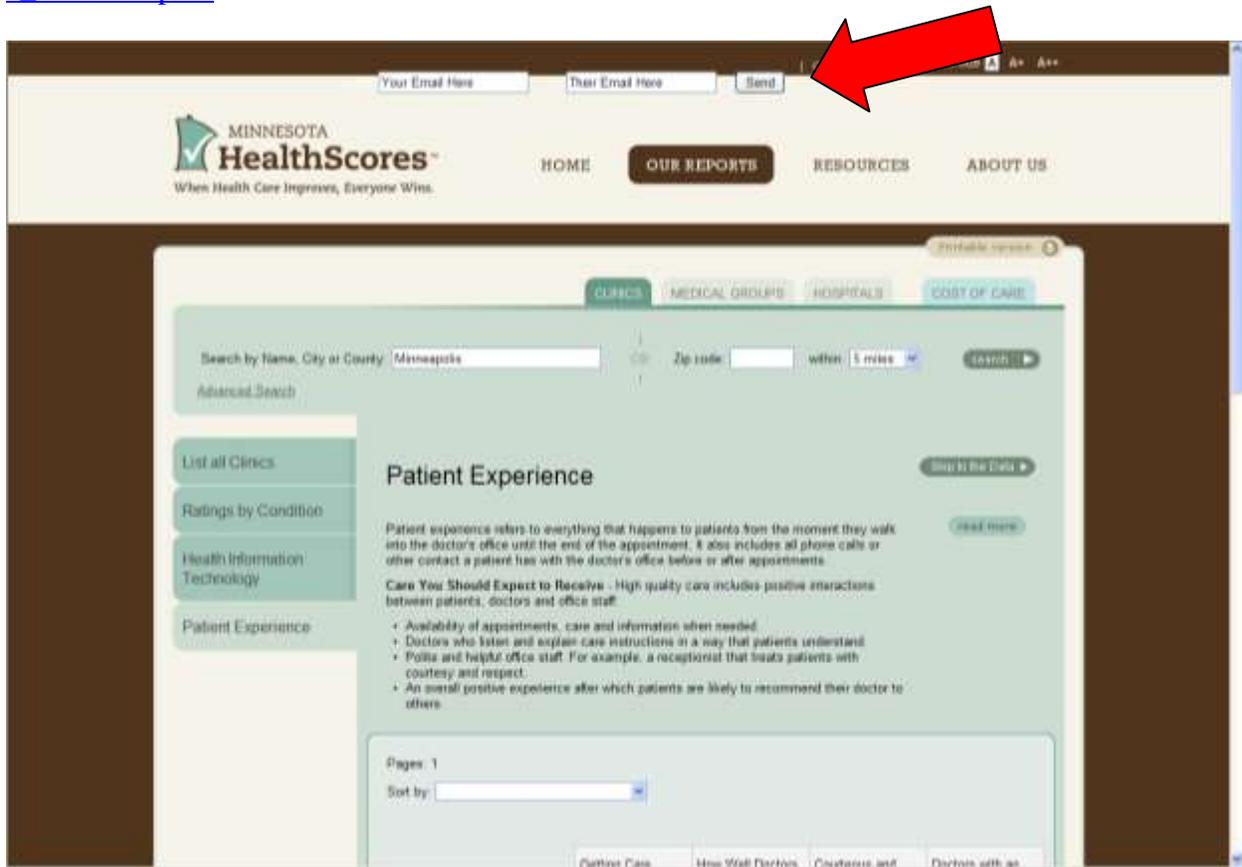
The following site allows the user to send an e-mail, but the e-mail can include only the link to the site, not any data.

Tool: Minnesota HealthScores

Sponsor: MN Community Measurement

URL:

http://www.mnhealthscores.org/?p=our_reports&sf=clinic&search_phrase=&category=16&name_id=&compare=



The site below allows selected performance data to be included in the email.

Tool: CHECKPOINT

Sponsor: Wisconsin Hospital Association

URL: http://www.wicheckpoint.org/report_topic_heartattack.aspx

Heart and Vascular - Heart Attack Report

116 matches
 Death and volume information are from 2009. All Other Measure Data are from 1/1/2010 - 12/31/2010.
 Generated: Nov 7 2011 2:56 PM

KEY

- No data collected at this time or no cases met criteria. [MORE INFO](#)
- + Data collected, but not enough cases to be representative of care provided in this reporting period. As CheckPoint adds data, more hospitals will report this measure. [MORE INFO](#)
- n/a Not applicable
- nt Hospital opted not to report data for this measure

Click [here](#) for definitions of Better, As Expected and Worse, with regard to Deaths.

[Download to Excel](#) [Email this Report](#) [New Search](#)

Benchmark Name	Heart Attack (%)									
	Heart Attack Index	Aspirin at Arr	Aspirin at DC	Block at DC	ACEI/VS	Stroke Counsel	PCI <90 min	Throm Med <30 min	Deaths in Hospital	Deaths in ER
National Average	—	99	99	99	97	100	92	—	6.87	7.32
State Average	95	99	99	99	97	99	99	—	5.85	6.41
State Benchmark	100	100	100	100	100	100	100	—	n/a	n/a

Report Hints

Hospital Name and City	Heart Attack Index	Aspirin at Arr	Aspirin at DC	Block at DC	ACEI/VS	Stroke Counsel	PCI <90 min	Throm Med <30 min	Deaths in Hospital	Deaths in ER
Advent Regional Medical Center (Limerick)	—	—	—	—	—	—	—	—	—	—
Appleton Medical Center (Appleton)	95	100	99	99	96	97	93	—	As Expected	As Expected
BayCare Health System (Hawthorn)	99	100	100	100	+	100	100	—	As Expected	As Expected
Baylor Scott & White Medical Center (Green Bay)	84	100	99	99	97	93	+	—	As Expected	As Expected
Baylor University Medical Center (Elkhorn)	+	+	+	+	+	+	—	—	—	—
Baylor Medical Center (Hawthorn)	93	100	+	+	+	+	—	—	As Expected	As Expected
Baylor Medical Center (Kalamazoo)	+	+	+	+	+	+	—	—	—	—
Baylor Medical Center (Marquette County) (Two Rivers)	+	+	+	+	+	—	—	—	As Expected	As Expected
Baylor Medical Center (Oshkosh)	93	98	100	100	+	+	+	—	As Expected	As Expected
Baylor Medical Center (Summit)	91	98	91	99	94	91	99	91	nt	nt
Baylor Medical Center (Waukesha)	97	99	+	+	+	+	—	—	—	—

D. Web Page Layout

The design of your Web site's appearance matters. Many report sponsors err on the side of inclusion and the result, unfortunately, can be a visual overload for consumers. To enhance understanding, interest, and visual appeal, the Web site layout should have adequate white space, that is, not too much clutter of text or pictures. A streamlined layout helps to efficiently direct the user's attention to what is important on the page. In addition, the search function should be quick and easy to locate from the landing page. Below are several examples with specific advantages.

The following search page is readily accessible from the landing page. It has plenty of white space, a minimum of text, and a clear sequence of steps leading to an easy-to-find "View Quality Scores" box.

Tool: Partner for Quality Care

Sponsor: Oregon Health Care Quality Corporation

URL: <http://www.partnerforqualitycare.org/selection.php>

The screenshot displays the Partner for Quality Care website interface. At the top, there is a navigation bar with three tabs: "Tips for You" (brown), "Quality Scores" (green), and "About this Work" (blue). The "Quality Scores" tab is active. Below the navigation bar, the breadcrumb trail reads "You are here: Home > Quality of care ratings for Oregon clinics and medical groups".

The main content area is divided into three steps:

- Step 1: Choose one or more regions:** A map of Oregon is shown, divided into seven regions: Portland Metro West, Portland Metro East, North Coast, Willamette Valley, Central Oregon, Eastern Oregon, South Coast, and Southern Oregon. Below the map is a legend with color-coded squares corresponding to each region.
- Step 2: Choose a topic:** A list of topics with radio buttons: Diabetes (selected), Heart Disease Care, Women's Health, and Asthma Medication.
- Step 3: Choose doctors' offices or medical groups:** A list of options with radio buttons: Doctors' offices (selected) and Medical groups. Below this is a note: "A medical group includes all the doctors' offices within that system."

A red button labeled "View Quality Scores" is positioned at the bottom right of the selection area.

At the bottom of the page, there is a footer with the following text: "Terms of Use Partner for Quality Care: Information for a Healthy Oregon is an initiative of the Oregon Health Care Quality Corp 619 SW 11th Avenue, Suite 221 Portland, OR 97205 Phone: (503) 241-3571 Email: info@PartnerForQualityCare.org Fax: (503) 548-4849".

The same site maintains a balanced look on its data pages, keeping space between information points. Also, the large, clearly-labeled tabs at the top, the same as those on the search page, allow for quick navigation to other pages of interest.

Tool: Partner for Quality Care

Sponsor: Oregon Health Care Quality Corporation

URL: <http://www.partnerforqualitycare.org/selection.php>

The screenshot shows the Partner for Quality Care website interface. At the top, there are navigation links for HOME, CONTACT, ABOUT, and NEWSLETTER, along with social media icons. Below this is a header with the logo and four main navigation tabs: Tips for Your Care, Compare Doctors' Offices, Compare Hospitals, and What Patients Say. The main content area is titled "Diabetes care" and includes a sub-header "Diabetes care" and a paragraph stating "Oregon is above the national average on these 4 types of recommended care for people with diabetes." It also provides links to learn more about quality scores and diabetes basics. A legend defines the performance levels: Better (yellow circle), Average (grey square), and Below (green triangle). Below the legend, it shows results for 45 doctors' offices in the West Portland Metro area, sorted by score. The results are presented in a table with columns for Dilated eye exam, Blood sugar test, Cholesterol test, and Kidney disease test. Each office is listed with its name and performance level for each test.

Diabetes care

Oregon is above the national average on these 4 types of recommended care for people with diabetes.

[Learn more about quality scores for diabetes](#)

[Diabetes basics and getting quality care](#)

Results found for 45 doctors' offices in: *West Portland Metro* [Change your search selections](#)

Doctors' Offices	Dilated eye exam	Blood sugar test	Cholesterol test	Kidney disease test
Sort: <input checked="" type="radio"/> By score <input type="radio"/> Alphabetically	The "Dilated" eye exam checks for blood vessel damage in the eyes (what is this?)	The "A-1-C" blood sugar test measures level of blood sugar during past 3 months (what is this?)	A Cholesterol test checks the level of "bad" cholesterol (what is this?)	A kidney disease test samples urine for signs of kidney disease (what is this?)
Lake Oswego Family Physicians	Better	Average	Better	Better
Pacific Medical Group Tigard Clinic	Average	Better	Better	Better
Sunset Medical Group	Average	Better	Better	Better
Kaiser Beaverton Medical Office	Better	Average	Average	Better
Kaiser Murrayhill Medical Office	Average	Average	Better	Better
Kaiser Sunset Medical Office	Better	Average	Average	Better

The site below is an example of providing ease in starting a search and creating a customized report by combining multiple items on a single page:

Tool: VHI Cardiac Care: Compare Hospitals

Sponsor: Virginia Health Information

URL: http://www.vhi.org/cardiac_reports.asp

The screenshot shows the Virginia Health Information website interface. At the top, there is a navigation bar with links for 'ABOUT US', 'MEDIA ROOM', 'CONTACT US', 'SITE MAP', and 'RESEARCHERS AND PROFESSIONALS'. The main header includes the VHI logo and the tagline 'FROM NUMBERS TO KNOWLEDGE'. Below the header, there is a secondary navigation menu with 'HOME', 'HEALTH INSURANCE', 'HOSPITALS', 'LONG TERM CARE', and 'PHYSICIANS'. A search bar is located on the right side of this menu.

The main content area is titled 'CARDIAC CARE: COMPARE HOSPITALS'. It includes a breadcrumb trail: 'Home > Virginia Hospitals > Cardiac Introduction > Compare Hospitals'. The central text reads: 'Compare hospitals on how they treat heart patients and their mortality and readmission rates.' Below this is a 'METHODOLOGY' link.

To the right of the main text is a form for selecting search criteria. It is divided into three steps:

- Step 1: Choose 1 or more Service Lines**
 - Cardiology - Medical
 - Congestive Heart Failure
 - Cardiology - Invasive
 - Cardiac Cath
 - Percutaneous Cardiac Procedures
 - Cardiology - Open Heart
 - CABG
- Step 2: Choose Year**
 - 2005
 - 2006
 - 2007
 - 2008
 - 2009
- Step 3: EITHER**
 - Enter 5 digit VA zip code: within miles
 - OR
 - Choose All or some facilities
 - All
 - Augusta Health
 - Beth County Community Hospital
 - Bedford Memorial Hospital
 - Bon Secours DePaul Medical Center
 - Bon Secours Mary Immaculate Hospital
 - Bon Secours Maryview Medical Center
 - Bon Secours Memorial Regional Medical Center
 - Bon Secours Richmond Community Hospital
 - Bon Secours St. Francis Medical Center

Total Hospitals: 94
Hold the ctrl key and click each hospital you want to include in your report.

A 'View Facilities' button is located at the bottom of the form.

On the left side of the page, there is a vertical navigation menu with links for 'INTRODUCTION', 'COMPARE HOSPITALS', 'STATEWIDE SUMMARIES', 'TYPES OF CARDIAC CARE', 'PHYSICIANS', 'HEART ATTACK WARNING SIGNS & PREVENTION', and 'METHODOLOGY'. At the bottom left, there is a banner for the 'ANNUAL 2010 LICENSURE SURVEY DATA' with a 'Click here to view' link and 'Utilization Data' text.

The icons used on the page below quickly transmit important information about services available, while the overall layout is simple and easy to understand:

Tool: New York State Hospital Profile

Sponsor: New York State Department of Health

URL: http://hospitals.nyhealth.gov/browse_view.php?id=218

New York State State Agencies

Department of Health
Information for a Healthy New York

You are Here: [Home Page](#) > [Hospitals in New York State](#) > [Hospital Profile](#) > Hospital details

Overview Quality Surveillance Procedures Services Beds

Elmhurst Hospital Center

Printable version

+ Add this hospital to My Hospitals

State designations:

- AIDS Center
- Level 3 Perinatal Center
- Regional Trauma Center
- SAFE Center
- Stroke Center

Hospital Contact

Elmhurst Hospital Center
79-01 Broadway
Elmhurst, NY 11373
Tel: 718-334-4000
Web: nyc.gov/html/hhc/html/facilities/elmhurst.shtml

NYSDOH PFI: 1626
NYSDOH Operating certificate #7003000H
NYSDOH regional office: [NY Metro - New York City](#)

This facility must offer services and [discounts](#) to financially eligible residents of Bronx, Kings, Nassau, New York, Queens, and Richmond counties.

To learn more about financial aid policies, please read [Understanding Your Financial Aid Rights](#)

This hospital is a teaching hospital affiliated with: Mount Sinai School of Medicine.

This hospital is a member of the following hospital system(s): [New York City Health and Hospitals Corporation](#).

Quality Measures [\[see all performance data\]](#)

My Hospitals

No hospitals have been selected to compare.

+ Add this hospital to My Hospitals.

Remove Remove hospitals by clicking the remove icon.

About This Site

- [Understanding Your Financial Aid Rights](#)
- [Guide to Using Hospital Profile](#)
- [About Hospital Quality](#)
- [Choosing a Hospital](#)
- [Maternity Information Brochure](#)
- [Data Collection and Usage](#)
- [Complaints About Hospital Care Call: 1-800-804-5447](#)
- [Frequently Asked Questions](#)
- [Site News](#)
- [Additional Resources](#)
- [NYS Physician Profiles](#)
- [Glossary of Terms](#)

The page below is easy to read and uses a presentation that draws the eyes to the ratings.

Tool: Get Better Maine

Sponsor: Maine Health Management Coalition

URL: <http://www.mhmc.info/compare/hospitals>

The screenshot shows the 'Compare Hospital Ratings' page on the Get Better Maine website. It features a navigation bar with links to 'COMPARE MAINE DOCTORS', 'COMPARE MAINE HOSPITALS', 'FREE HEALTH RESOURCES', 'JOIN OUR BOOKCLUB', and 'ABOUT US'. The main content area is titled 'Compare Hospital Ratings' and includes a 'View on map' link and a 'Change My Selections' button. Below this, there are four columns representing different hospitals: St Joseph Hospital, Eastern Maine Medical Center, Blue Hill Memorial Hospital, and Maine Coast Memorial Hospital. Each column provides the hospital's name, address, phone number, and a 'See details' link. The ratings are presented in a table format, categorized into three main sections: Effective, Safe, and Patient Experience. Each section includes a brief description and a table of ratings for various services. The ratings are color-coded: Best (yellow), Better (green), Good (blue), and Poor (red). A 'Would you like us to ask your doctor or hospital to report?' link is located at the bottom of the table.

Category	Service	St Joseph Hospital	Eastern Maine Medical Center	Blue Hill Memorial Hospital	Maine Coast Memorial Hospital
Effective <i>Provides the care that experts recommend</i>	Heart Attack Care	Best	Better	Unable to Determine	Good
	Heart Failure Care	Best	Better	Unable To Determine	Poor
	Pneumonia	Good	Better	Good	Poor
Safe <i>Has systems to prevent medical errors</i>	Preventing Surgical Infection	Best	Better	Best	Better
	Medication Safety	Best	Best	Best	Best
	National Safe Practice Score	Good	Better	Good	Better
Patient Experience <i>What patients say about the hospital</i>	Overall Patient Experience	Better	Good	Good	Best

References

1. Institute of Medicine. Crossing the quality chasm: a new health system for the 21st century. Washington, DC: National Academies Press; 2001.
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3. Donabedian A. Evaluating the quality of medical care. Milbank Mem Fund Q 1966 Jul;44(3):Suppl:166-206.