

AAPM&R Rolls Out New Quality Strategy



Thiru M. Annaswamy
MD, MA, FAAPMR

Thiru M. Annaswamy, MD, MA, FAAPMR
Evidence, Quality and Performance Committee, Chair

Your Academy's Evidence, Quality and Performance Committee (EQPC) is embarking on an initiative to develop and implement an overarching quality strategy to advance the mission of the Academy and promote value-based tactics to unite the specialty and make it stronger. This work will build upon and integrate current Academy quality-oriented projects, including the PM&R BOLD initiative. Anticipated outputs from this commitment to building value and alignment within the specialty include:

1. Identification of opportunities to demonstrate the evidence-based value of psychiatry to pertinent stakeholders (e.g., other specialties, payers);
2. Identification and optimization plans for data collection and utilization to augment and promote the value of psychiatry in specific clinical focus areas;
3. Engagement with the AAPM&R Registry for use in research, quality improvement, quality measurement and roll-out of registry data collection pilots in low-back pain and ischemic stroke in 2020 with more clinical areas in the future; and
4. Development of recommendations aimed at promoting alignment across psychiatry. This requires deploying and documenting a systematic assessment and analysis approach.

Essential components of this quality strategy include:

- i. What we currently know (evidence, clinical guidelines and recommendations)
- ii. What PM&R values (importance)
- iii. Identifying gaps (what we may not know)
- iv. How to address gaps (opportunities)
- v. Ideal future state of measures, quality improvement and implementation in each space
- vi. Key stakeholders and organizations for collaborative initiatives to address gaps. ❖

Work on new practice models and opportunities to expand impact of PM&R care



Data to Prove Your Value and Improve Your Care

AAPM&R's Registry is essential for the specialty and its future. By serving as a psychiatry-owned, single depository of data, the Registry will harness the combined power in numbers of the entire specialty. This mass of data can then aid the specialty by guiding efforts to reduce burnout and defend our scope of practice.

AAPM&R's Registry provides the data to *prove* your value and *improve* your care.



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Academy Liaison Update: National Quality Forum Trauma Outcomes Project



Kurtis M. Hoppe
MD, FAAPMR

The National Quality Forum (NQF) is a not-for-profit, nonpartisan, membership-based organization that works to catalyze improvements in health care. Created in 1999, NQF promotes and ensures patient protections and health care quality through measurement and public reporting. Through its consensus-based process, NQF-defined measures or health care practices are recognized by Federal and State governments, as well as private-sector organizations, as the best, evidence-based approaches to improving care. NQF's endorsed measures, which must meet rigorous criteria, seek to evaluate performance and share information with patients and their families. Ultimately, the organization's goal is to make health care in the U.S. better, safer, and more affordable. The Academy is currently a member of the NQF.

Last year, the NQF convened public-and private-sector stakeholders to begin assessing quality performance measurement of trauma care in the U.S. As your Academy's representative on this taskforce, our tasks included guiding and providing input and direction for an environmental scan of current trauma care measurement and concepts, and identifying measurement gaps. The environmental scan informed the development of a measurement framework that took into consideration accountability, attribution, and risk adjustment, in the context of a population or geographic region. The final project objective was to construct a final report, summarizing the current state of trauma outcome measurement in the U.S. and providing a conceptual framework and perspective to guide further work in this area of critical concern to patients and families.

The population-based trauma quality framework is comprised of 4 domains (i.e., access to trauma services, cost and resource use, trauma clinical care, and prevention of trauma). Each domain is divided into subdomains, 15 in total. Cross-cutting themes amongst the domains reflected key issues that, taken together, would advance trauma care for all in the U.S. Shared accountability and attribution would promote coordination and planning within regional trauma systems. Robust and appropriate data sources are essential for population-based measurement of quality, as is the aggregation of data across pre-hospital, hospital, and post-hospital settings. Finally, equity was emphasized as an important feature of trauma care organization and delivery, so as to reduce health care disparities that may disadvantage patients in the provision of care and lead to poor outcomes.

A draft report was released for comment this spring. The Academy provided comments, thanking the NQF for exploring this important component of health care in the U.S. The need for further work to understand the role of rehabilitation, particularly for the severely injured, was recommended. Access to PM&R services may be limited in less populated areas of the U.S., leading to health care disparities. Payers can also hamper necessary post-acute and rehabilitative care by denying outright payment for services or by restricting patient care to narrow provider network panels which may not offer the full array of outpatient and inpatient post-acute care services.

I invite you to review the final report (www.qualityforum.org/Publications/2019/05/Trauma_Outcomes_Final_Report.aspx) for a full discussion of the committee's work. As the NQF continues to explore this important area of health care, the Academy will provide appropriate and timely comments and recommendations to ensure that PM&R remains a valuable team member in the care of trauma patients. ❖

Reference: Trauma Outcomes. National Quality Forum. Accessed 6/2/19.

ACADEMY IN ACTION

- **Liaison Alert:** Jean De Leon, MD, FAAPMR, was selected as your Academy's representative to serve on the Centers for Medicare & Medicaid Services (CMS)/RTI International Technical Expert Panel (TEP) for the Development of Functional Outcome Quality Measures for Long-Term Care Hospitals (LTCHs).



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