Aligning Efforts to Improve Quality

Hospitals and health systems have made great strides to improve quality of care. Public policies need to be revised to promote – not impede – continuous improvement.

Significant Strides Have Been Made in Patient Care

- **Unplanned Readmissions (2011-2015):** 70,000 fewer
- **Occurrence of Early-elective Deliveries (2012-2016):** 77% decrease
- **Central Line-associated Blood Stream Infections (2009-2014):** 40% decrease
- **Hospital-acquired Conditions (2010-2015):** 21% decrease

Barriers to Improving Care: Conflicting and Uncoordinated Federal Policies

- Quality Measurement
- Quality Improvement (QI)
- Conditions of Participation (CoPs) / Standards

Quality Efforts Are Interconnected

Currently, policies impacting quality measurement, QI and Medicare CoPs/standards are viewed separately though, in practice, they are interrelated.

What's Needed: A Cohesive Framework

To sustain and accelerate progress, policymakers must think strategically about quality policies.

- Implement "measures that matter" the most to improving care.
- Adopt modern, meaningful and effective standards.
- Align measures and standards from all federal quality programs to support improvement.

In 2019, hospitals will be required to report more than 80 measures to CMS.

An average-sized hospital spends approximately $3.8 million annually on administrative aspects of quality reporting and complying with CoPs.

This data is from the AHA TrendWatch report, Aligning Efforts to Improve Quality. To learn more, visit [www.aha.org/quality](http://www.aha.org/quality).

©2018 American Hospital Association | October 2018