September 9, 2013 – September 12, 2013

## **ECQM1 KAIZEN SUMMARY**

## Contracts

## Highlights:

- Brought a really dedicated group of people together
- Significantly reduced time/effort

Concurrent reviews	Pre-Lean: 4+ weeks Post Lean: 1.5 weeks
Signoff	Pre-Lean: 6 weeks Post Lean: 3 days
Eliminate	Unnecessary documentation

- Hit a watch-it indicator and needed to reassess processes
- Hard to effectuate changes outside of our direct control

## **Contracts**

#### Roadblocks:

- Getting buy-in and commitment to change from Offices outside of our control
- Timing of the changes

- Drafting updated documentation on new process
- Deploy for other contract types
- Work with other Center for Clinical Starndards and Quality (CCSQ) components
- Try to assess Office of Acquisition and Grants Management (OAGM) internal processes

# Research, Feasibility, TEP

## Highlights:

- Involving patients in Technical Expert Panels (TEPs)
- Started the groundwork for measure database
- CMS is producing a consolidated list of measures in development

- Getting group together is a challenge
- Less engagement
- Unpaid work

# Research, Feasibility, TEP

#### Roadblocks:

- Scope details and objectives not clear
- Privacy concerns and openness in the measure phase – external to CMS/ONC

- Create a system to house the measures (JIRA?)
- Re-do watch it indicators to match the scope
- Evaluate the TEP process with patients and do continuous improvement to the education of patients
- Create best practices for measure development research
- Determine how to get early input from stakeholders, e.g. National Quality Forum (NQF)

# Pre-Rule Making

## Highlights:

- Easy buy-in from measure policy council;
   1 pagers to get measures based on needs
- Good participation in stakeholder meetings
- JIRA implementation

- Early stakeholder engagement created a lot of anxiety
- Initial engagement of the team very difficult

# Pre-Rule Making

#### Roadblocks:

Measure Applications
 Partnership (MAP) might
 not support the measures in
 the Measures Under
 Consideration (MUC) list if
 they are not built out

- Collect and enter measures into JIRA
- Continue education
- Collect and evaluate watchit indicators
- Clearance process evaluation
- Documentation of process for internal and external
- NQF collaboration for MAP working with single piece flow

# Measure Authoring Tool (MAT)/Data Elements

#### Highlights:

- Major architecture release for MAT resolving a host of user concerns
- Value Set Authority Center (VSAC) is preparing to launch authoring environment in a couple months
- Importing external value set sources outside of Meaningful Use (MU)
- Creating a guide for creating value sets
- Starting work on harmonization

- Expedited Life Cycle (XLC) process not designed for agile
- U.S. National Library of Medicine (NLM) developer resources low to do VSAC work

## MAT/Data Elements

### Roadblocks:

- No contract or funding for value set harmonization
- No Quality Data Model (QDM) owner

- Get user feedback and incorporate for upcoming MAT release
- MAT and VSAC integration
- Execute on 6 value set pilot projects

## **Testing and Certification**

### Highlights:

- Highly engaged volunteer team and HHS rock busters
- Gained substantial amounts of knowledge to move forward
- Agreement with Office for Human Research Protections (OHRP) around Institutional Review Board (IRB) process

- All volunteer work and tough to keep folks engaged including EHR vendors
- Limited resourcing

## **Testing and Certification**

### Roadblocks:

- Engagement in pilot processes is limited
- Best practices not fully defined
- No resources to vet new testing tools assessment
- Testing tools not yet available
- Paperwork Reduction Act (PRA) hindrance

- Work on roadblocks to keep moving forward
- Clinical trials and how they approach testing protocols across different types of sites
- Continue to try to increase engagement across EHR vendors in pilot processes

# Rule Making

### Highlights:

- Public comment standardization work in progress within the Quality Measurement and Health Assessment Group (QMHAG)
- Engaged with Regs.gov owner to re-design the public comment system
- Good engagement by the rule writers

- Unaware of other improvement work covering the same scope
- Discovered part of the process we wanted to change, but we don't have control

# Rule Making

### Roadblocks:

 Unsure if/when we will be engaged in the other improvement work

- Look at pre-rule writing to add to scope and standardize
- Continue the work on public comment both near and further term

# Reflections from participants

- Process is informing us to do continuous improvement and not go back to the status quo. Celebrating the Horrors!!
- Increased engagement and support from other groups within CCSQ, HHS, federal partners; breaking silos.
- Disproved the stereotype of non-government and government folks ability to collaborate together.
- Understanding others' perspectives; bad systems beat good people.

## Reflections from participants cont'd

- OHRP agreement that IRB approval is not required for CQM testing efforts
- General excitement for tools that will help developers standardized their work (e.g. Bonnie)
- For testing and certification it was not as easy as we thought – it was tough to get vendors engaged and dedicate staff time and resources
- Appreciation of help from ONC and CMS staff to help move plans along (e.g. IRB, PRA)

## Reflections from participants cont'd

- Exposure to operations inside of government has been valuable and educational; empowering to know we can solve problems TOGETHER! Experience is mutually beneficial
- This has been a rewarding experience, but we still need engagement from other federal agencies
- Contracts
- Value set harmonization brings tears to my eyes

# Map it like it's HOT!

