ORYX and Other Elusive Quality Animals

by Harry Rhodes, MBA, RRA, HIM practice manager

Edward I. Koch, former mayor of New York City, is known for asking, "How am I doing?" Koch, of course, was speaking of the positive progress of his administration. But he could have just as easily been talking about the state of performance measurement in healthcare today. Even though quality assurance and quality improvement have been around healthcare for some time now, one aspect of the process continues to elude most healthcare organizations. Although organizations may know that their efforts are improving the quality of care, they still cannot get a definitive answer about how they compare to similar facilities.

Without a doubt, one of the top 10 inquiries received by AHIMA's professional practice team is, "Where can I find benchmarking and best practice resources?" This information is available, though much of it can be unreliable or very expensive to purchase. The information often proves to be unreliable due to factors like insufficient sample size, lack of validity testing, lack of risk adjustment, and lack of data quality. It only takes a few "data quality" horror stories for most people to shy away from any attempt to seek out a reliable benchmarking source.

Attributes of Conformance

The six attributes of conformance for a performance measurement system as identified by the Joint Commission's Council on Performance Measurement. An acceptable performance measurement system:

- includes appropriate performance measures focusing on organizational performance or on patient care processes or outcomes
- has an automated, operational database
- ensures the accuracy and completeness of performance data
- uses risk adjustment or stratification methods to reduce or clarify the influence of confounding patient factors
- provides timely feedback of comparative data to participating organizations
- is useful and relevant to the accreditation process[1]

In Search of Standards

Healthcare organizations need a reliable, standardized outcomes measurement system that can be tailored to their organizational environments. The lack of national standards and a general state of confusion brought on by myriad performance measurement system vendor choices has hindered the establishment of reliable benchmarks and best practices. Enter the Joint Commission on Accreditation of Healthcare Organizations' ORYX Initiative, an organized performance and outcomes measurement methodology designed to standardize performance measurement for healthcare organizations. ORYX will allow an organization to compare its performance with that of peer organizations, using the same measures within the same performance measurement system. ORYX also is intended to help organizations seeking a positive direction for their performance activities to strengthen their efforts in identifying issues that require attention and verifying the effectiveness of corrective actions.

Through ORYX, the Joint Commission plans to offer a performance measurement activity that provides scientifically valid, data-driven methodologies that provide a continuous stream of performance information enabling healthcare organizations to:

- have continuous access to objective data to support their claims of quality
- receive early warning of problems or conditions that could lead to serious errors
- verify the effectiveness of corrective actions
- identify areas of excellence within the organization
- compare their performance with that of peer organizations using the same measures within the same performance measurement system[1]

Critical to the success of the ORYX Initiative will be data quality. Because of the major focus on data quality, health information professionals have a unique opportunity to play a valuable role in the success of the initiative. The majority of data that will be collected for the performance measurement systems will, without a doubt, be coded data or data abstracted directly from the medical record. Once organizations begin working on the ORYX Initiative, they are sure to begin questioning the integrity of their data. Individuals charged with carrying out the organization's ORYX Initiative will want assurances that the data being collected and reported is indeed valid. An effective template for evaluating the integrity of your organization's ORYX Initiative data are the Characteristics of Data Integrity, developed by AHIMA's Data Quality Task Force.

Characteristics of Data Integrity

- data accuracy
- data accessibility
- data comprehensiveness
- data consistency
- data currency
- data definition
- data granularity
- data precision
- data relevancy
- data timeliness[2]

In spring 1999 -- after the first measurement data sent to the Joint Commission is compiled, tabulated, and presented -- the key to the ORYX Initiative's success will be the data upon which it is based. The Joint Commission plans on reviewing data trends and initiating contact with healthcare organizations if warranted by their review of the initial data submitted. This initial contact could take the form of a phone call, request for a written progress report, or on-site survey, to be scheduled as early as the end of 1999.

Now is the time for organizations to begin their data quality efforts. This will ensure that the data trends revealed by their submitted data accurately reflect the processes occurring in their facilities. Health information professionals should -- and can -- make the following preparations for ORYX:

- initiate an organization-wide data quality model
- network with counterparts who are implementing ORYX
- review and refresh continuous quality improvement techniques
- initiate discussion of enterprise-wide measurement goals and resources

The System Solution

Another factor hindering the establishment of performance measurement systems is the myriad software vendors that offer performance measurement applications. The existence of so many choices actually creates a negative situation, in which an organization wishing to purchase a performance measurement system must take on the Herculean task of reviewing and comparing hundreds of software applications. The Joint Commission made this task slightly easier by identifying 306 vendors whose applications have met the six elements of its Attributes of Conformance.

The Joint Commission's Council on Performance Measurement, a panel of national experts in performance measurement, warns healthcare organizations to carefully assess any system before selection. Although all systems on the Joint Commission's

list met the initial screening criteria‹and are required to meet several additional criteria in the future -- organizations are advised to carefully review potential systems against internally developed criteria. This application selection process is an area where the expertise of the health information professional can significantly benefit the healthcare organization. Any potential performance measurement software application should be reviewed against the following system criteria:

- system security
- information retention
- patient confidentiality/privacy safeguards
- ease of information capture
- user ability to modify data dictionary
- user ability to customize application
- vendor willingness to work with end users
- assessment of vendor's past performance
- the "Wow Factor" (Does the application really meet the organization's needs?)

To ensure that all performance measurement systems being considered are thoroughly and consistently evaluated, a structured, point-based scoring and selection procedure should be established. Such a structured procedure will help the organization identify performance measurement systems that will allow for efficient data capture and reporting. It is important to begin this selection process by first identifying the organization's measurement goals.

The ORYX performance measurement initiative is a positive step toward the establishment of statistically valid and standardized healthcare benchmarks. Although at first glance ORYX may appear to be a totally new species of animal, upon closer examination one finds that its ancestry shares a common bloodline with traditional health information practices and principles.

Notes

1. Joint Commission on Accreditation of Healthcare Organizations. *ORYX Outcomes: The Next Evolution in Accreditation*. Oakbrook Terrace, IL: 1997.

2. Data Quality Task Force. "Practice Brief: Data Quality Management Model." *Journal of AHIMA* 69, no. 6 (1998): insert.

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