

This table is dedicated to performance measures that examine all patients, irrespective of diagnosis. These measures range in topics from, *communication of care* (addressing modifications in patient treatment plans and continuity of care with the goal of these indicators being to increase patient safety by improving communication between health professionals), to *access to care* (time spent in the ED not receiving appropriate care), to *ambulatory care satisfaction* (these measure patients' satisfaction levels; higher satisfaction levels often yield important behavioral changes), to *appointment no-show rates* (these measures elucidate reasons patients might not follow up with their care and can identify inefficient use of staff time and resources). These measures can be found in greater detail on the Overall Measures Spreadsheet.

Origin	Title	Description
NQF #0292	<a href="#">Vital Signs</a>	Percentage of patients transferred to another acute hospitals whose medical record documentation indicated that the entire vital signs record was communicated to the receiving hospital within 60 minutes of departure
NQF #0296	<a href="#">Nursing Information</a>	Percentage of patients transferred to another acute care hospital whose medical record documentation indicated that nursing information was communicated to the receiving hospital within 60 minutes of departure
NQF #0647	<a href="#">Transition Record with Specified Elements Received by Discharged Patients (Inpatient Discharges to Home/Self Care or Any Other Site of Care) (Inpatient Discharges to Home/Self Care or Any Other Site of Care)</a>	Percentage of patients, regardless of age, discharged from an inpatient facility to home or any other site of care, or their caregiver(s), who received a transition record (and with whom a review of all included information was documented) at the time of discharge including, at a minimum, all of the specified elements.
NQF #0648	<a href="#">Timely Transmission of Transition Record (Inpatient Discharges to Home/Self Care or Any Other Site of Care)</a>	Percentage of patients, regardless of age, discharged from an inpatient facility to home or any other site of care for whom a transition record was transmitted to the facility or primary physician or other health care professional designated for follow-up care within 24 hours of discharge
NQMC	<a href="#">Communication of changes in patient care: percentage of healthcare professionals who affirm that in their unit or area information affecting a patient diagnosis is always communicated clearly and rapidly to all professionals involved in the care of that patient.</a>	This measure is used to determine the percentage of healthcare professionals who affirm that in their unit or area information affecting a patient's diagnosis is always communicated clearly and rapidly to all professionals involved in the care of that patient. The following survey item may be added to the "Safety Culture" survey instrument: • <i>"Information affecting a patient's diagnosis is communicated clearly and rapidly to all professionals involved in the care of that patient."</i> <i>Possible replies: never / almost never / sometimes / almost always / always</i>
NQMC	<a href="#">Communication of changes in patient care: percentage of healthcare professionals who affirm that in their unit or area new prescriptions are always ordered revising all the medication being taken by the patient.</a>	This measure is used to determine the percentage of healthcare professionals who affirm that in their unit or area prescriptions are always ordered revising all the medication being taken by the patient. The following survey question may be added to the "Safety Culture" survey instrument: • <i>"Before a new prescription is ordered, the list of medication being taken by the patient is revised."</i> <i>Possible replies: never / almost never / sometimes / almost always / always</i>
NQMC	<a href="#">Communication of changes in patient care: percentage of healthcare providers who affirm that in their unit or area changes in patients medications are always communicated clearly and rapidly to all professionals involved in the care of those patients.</a>	This measure is used to determine the percentage of healthcare providers who affirm that in their unit or area changes in medications are always communicated clearly and rapidly to all professionals involved in patient care. The following survey item may be added to the "Safety Culture" survey instrument: • <i>"All changes in medications are communicated clearly and rapidly to all professionals involved in patient care."</i> <i>Possible replies: never / almost never / sometimes / almost always / always</i>

NQMC	<a href="#">Home health care patients' experiences: percentage of adult home health care patients who reported how often their home health care providers communicated well.</a>	<p>This measure is used to assess the percentage of adult home health care patients who indicated how often ("Never," "Sometimes," "Usually," or "Always" OR "Yes" or "No") their home health care providers communicated well.</p> <p>This measure summarizes answers to survey questions that asked people (a) how often their home health providers:</p> <ul style="list-style-type: none"> <li>•Kept them informed about their visits</li> <li>•Explained things in a way that was easy for them to understand</li> <li>•Listened carefully to them, and</li> </ul> <p>(b) whether someone from the agency told them what care and services they would get, whether they got the help or advice they needed, and how long it took them to get help or advice they needed.</p> <p>The "Communications between Providers and Patients" composite measure is based on six questions in the Home Health Care CAHPS Survey.</p> <p><i>Note: A composite score is calculated in which a higher score indicates better quality. Composite scores are intended for consumer-level reporting. Additionally, frequency distributions are available for home health agencies or home health providers to use for quality improvement purposes.</i></p>
NQMC	<a href="#">Health information: proportion of children whose parents received all health information.</a>	This measure is used to assess the proportion of children whose parents received all health information. This information could be provided outside/inside the health care provider's office by mail, clinic pamphlets, video, etc., and is focused on the following topics: safety, health care utilization, developmental information.
NQMC	<a href="#">Information about resources for parents in the community: proportion of parents who had their informational needs met.</a>	This measure is used to assess the proportion of children whose parents had their informational needs met on resources in the community for parents.
NQF #0649	<a href="#">Transition Record with Specified Elements Received by Discharged Patients (Emergency Department Discharges to Ambulatory Care [Home/Self Care])</a>	Percentage of patients, regardless of age, discharged from an emergency department (ED) to ambulatory care or home health care, or their caregiver(s), who received a transition record at the time of ED discharge including, at a minimum, all of the specified elements
NQMC	<a href="#">Information to address parental concerns: proportion of children whose parents had concerns about their child's learning, development and behavior and they received information to address their concerns.</a>	This measure is used to assess the proportion of children whose parents had concerns about their child's learning, development and behavior and if they received information to address their concerns.
NQMC	<a href="#">Language services: the percent of patient visits and admissions where preferred written language for health care is screened and recorded.</a>	This measure is used to assess the percent of patient visits and admissions where preferred written language for health care is screened and recorded.
NQF #0557	<a href="#">HBIPS-6 Post discharge continuing care plan created</a>	Patients discharged from a hospital-based inpatient psychiatric setting with a continuing care plan created overall and stratified by age groups: Children (Age 1 through 12 years), Adolescents (Age 13 through 17 years), Adults (Age 18 through 64 years), Older Adults (Age greater than and equal to 65 years). Note: this is a paired measure with HBIPS-7: Post discharge continuing care plan transmitted to next level of care provider upon discharge.
NQF #0297	<a href="#">Procedures and Tests</a>	Percentage of patients transferred to another acute care hospital whose medical record documentation indicated that procedure and test information was communicated to the receiving hospital within 60 minutes of departure
NQMC	<a href="#">Family-centered care (FCC): proportion of children whose parents routinely received all aspects of family-centered care.</a>	<p>This measure is used to assess the proportion of children whose parents indicated that they routinely received all aspects of family-centered care (FCC). Topics specifically focus on the following components of FCC:</p> <ul style="list-style-type: none"> <li>•whether the health care provider understands specific needs of child and concerns of parent,</li> <li>•builds confidence in the parent,</li> <li>•explains things in a way that the parent can understand, and</li> </ul>

		<ul style="list-style-type: none"> <li>•shows respect for a family's values, customs, and how they prefer to raise their child.</li> </ul>
NQMC	<a href="#">Family-centered care (FCC): average percentage of recommended aspects of family-centered care regularly received.</a>	<p>This measure is used to assess the average percentage of recommended of aspects of family-centered care (FCC) regularly received by the parent from the pediatric clinician. Topics specifically focus on the following components of FCC:</p> <ul style="list-style-type: none"> <li>•whether the health care provider understands specific needs of child and concerns of parent,</li> <li>•builds confidence in the parent,</li> <li>•explains things in a way that the parent can understand, and</li> <li>•shows respect for a family's values, customs, and how they prefer to raise their child.</li> </ul>
NQF #0497	<a href="#">Admit Decision Time to ED Departure Time for Admitted Patients</a>	Median time from admit decision time to time of departure from the emergency department for emergency department patients admitted to inpatient status
NQF #0495	<a href="#">Median Time from ED Arrival to ED Departure for Admitted ED Patients</a>	Median time from emergency department arrival to time of departure from the emergency room for patients admitted to the facility from the emergency department
NQF # 0328	<a href="#">Inpatient Hospital Average Length of Stay (risk adjusted)</a>	Overall inpatient hospital average length of stay (ALOS) and ALOS by medical service category.
NQF # 0719	<a href="#">Children Who Receive Effective Care Coordination of Healthcare Services When Needed</a>	This is a composite measure used to assess the need and receipt of care coordination services for children who required care from at least two types of health care services which may require communication between health care providers, or with others involved in child's care (e.g. school).
NQMC	<a href="#">Preventive and developmental health care for young children: average percentage of individual care components (assessed in the Promoting Healthy Development Survey [PHDS]) a child received.</a>	<p>This measure is used to assess the average percentage of individual care component measures in the Promoting Healthy Development Survey (PHDS) that a child received.</p> <p><i>Note: A composite score is calculated in which a higher score indicates better quality.</i></p>
NQMC	<a href="#">Preventive and developmental health care for young children: proportion of children who received all individual care components measures in the Promoting Healthy Development Survey (PHDS).</a>	<p>This measure is used to assess the proportion of children who received all individual care components measures in the Promoting Healthy Development Survey (PHDS).</p> <p><i>Note: A composite score is calculated in which a higher score indicates better quality.</i></p>
NQMC	<a href="#">Access block: percentage of mental health or critical care patients who waited greater than 4 hours in the emergency department (ED) after the time of decision to admit them, during the 6 month time period.</a>	This measure is used to assess the percentage of mental health or critical care patients who waited greater than 4 hours in the emergency department (ED) after the time of decision to admit them, during the 6 month time period.
NQMC	<a href="#">Access block: percentage of patients who were admitted or planned for admission but discharged from the emergency department (ED) without reaching an inpatient bed, transferred to another hospital for admission, or died in the ED whose total ED time exceeded 8 hours, during the 6 month time period.</a>	This measure is used to assess the percentage of patients who were admitted or planned for admission but discharged from the emergency department (ED) without reaching an inpatient bed, transferred to another hospital for admission, or died in the ED whose total ED time exceeded 8 hours, during the 6 month time period.

CQAIMH	<a href="#">Convenience of Location of Services</a>	
NQF #0327	<a href="#">Risk-Adjusted Average Length of Inpatient Hospital Stay</a>	Percentage of inpatient & outpatients with excessive in-hospital days
NQMC	<a href="#">Patients' satisfaction with care: patients' overall rating of their physician.</a>	<p>This measure is used to assess patients' or parents' or caregivers' assessment of the patient's satisfaction with the physician seen at the most recent visit. Patients rate the physician on a scale of "0" to "10," where "0" is the worst possible care and "10" is the best possible care on the following items:</p> <ul style="list-style-type: none"> <li>•Attitude: Physician's friendliness and caring attitude</li> <li>•Examination: Thoroughness of your examination or checkup</li> <li>•Time spent: Amount of time physician spent with you</li> <li>•Answers: How well physician answered all your questions</li> <li>•Instructions: Physician's instructions on how to take care of your illness or health condition</li> <li>•Includes: Extent that physician includes you in decisions about your care and treatment</li> <li>•Test results: Getting your test results back in a timely manner</li> <li>•Follows up: How well your physician follows up on any problems or concerns you have</li> <li>•Treatment success: Your treatment success</li> </ul> <p><i>Note: A mean scale score is calculated in which a higher score indicates better quality.</i>  <i>See the National Quality Measures Clearinghouse (NQMC) summary of the related DrScore measure Patients' satisfaction with care: patients' overall rating of their physician's office.</i></p>
NQMC	<a href="#">Inpatient satisfaction: mean section score for "Personal Issues" questions on Inpatient Survey.</a>	<p>This measure assesses the mean score for the questions in the "Personal Issues" section of the Inpatient Survey. The "Personal Issues" section is one of ten sections that comprise the Inpatient Survey. Mean section scores are reported for each section of the survey. In addition, an "Overall Facility Rating" score is reported.</p>
NQMC	<a href="#">Helpfulness of care provided to parents: proportion of children whose parents reported care provided was helpful or very helpful on core aspects of preventive and developmental health care.</a>	<p>This measure is used to assess the proportion of children whose parents reported care received was helpful or very helpful in specific areas of parenting such as understanding child's behavior, protecting child from injuries, and helping the parent learn to meet their own needs. The parent is questioned as to whether the care provided was helpful, very helpful, somewhat helpful, not helpful, or item was not discussed.</p>
NQF #0576	<a href="#">Follow-Up After Hospitalization for Mental Illness</a>	<p>This measure assesses the percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental health disorders and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported. Rate 1. The percentage of members who received follow-up within 30 days of discharge Rate 2. The percentage of members who received follow-up within 7 days of discharge.</p>
NQMC	<a href="#">Communication and experience of care: mean score on seven items asking about helpfulness of office staff, overall rating of care and whether doctor/other providers listen carefully, explain things clearly, respect you, spend enough time.</a>	<p>This measure assesses the mean score on seven items asking about the helpfulness of office staff, overall rating of care and whether doctor/other providers listen carefully, explain things clearly, respect you, and spend enough time.</p>
NQF #0725	<a href="#">Validated family-centered survey questionnaire for parents' and patients' experiences during inpatient pediatric hospital stay</a>	<p>This family-centered survey questionnaire consists of 62 questions that assess various aspects of care experiences during inpatient pediatric hospital stays. The dimensions that are included are overall impressions, interactions with nurses, interactions with doctors, the admission and discharge process, home care preparation, medications, pain management, parent involvement, hospital environment, support staff and food. Demographic questions are included at the end of the survey. The</p>

		majority of the survey questions are categorical in nature. Ordinal measures enable the rating of experiences, dichotomous measures are used to assess if subsequent questions apply to the experiences of parents and the patient but a small number of questions are open-ended to allow any additional or more detailed comments. Survey will be collected for a given time period, e.g. monthly. The target population is one of the parents, 18 years or older, of a child that stayed for at least one day in an inpatient unit at the hospital and was discharged during the previous time period, e.g. the last month. A random sample will be drawn of all discharged parent-patient units and receive the survey. The instrument is currently validated for mail and phone administration and is in English. All questions are asking about experiences during their last inpatient hospital stay. Further steps include validation for web administration and other languages.
NQF #0726	<a href="#">Inpatient Consumer Survey (ICS) consumer evaluation of inpatient behavioral healthcare services</a>	
CQAIMH	<a href="#">Intensity of Post-discharge Ambulatory Care (Psychiatric)</a>	
NQF # 0008	<a href="#">Experience of Care and Health Outcomes (ECHO) Survey (behavioral health, managed care versions)</a>	52 questions including patient demographic information. The survey measures patient experiences with behavioral health care (mental health and substance abuse treatment) and the organization that provides or manages the treatment and health outcomes. Level of analysis: health plan- HMO, PPO, Medicare, Medicaid, commercial
NQMC	<a href="#">Inpatient pediatric satisfaction: mean section score for "Your Child's Physician" questions on Inpatient Pediatric Survey.</a>	This measure is used to assess the mean score for the questions in the "Your Child's Physician" section of the Inpatient Pediatric Survey. The "Your Child's Physician" section is one of ten sections that comprise the Inpatient Pediatric Survey. Mean section scores are reported for each section of this survey. In addition, an "Overall Facility Rating" score is reported.
CQAIMH	<a href="#">Mental Health Appointment No-Show Rate</a>	
NQMC	<a href="#">Competency Assessment Instrument (CAI): provider's mean score on the "Family Education" scale.</a>	The Competency Assessment Instrument (CAI) measures 15 competencies needed to provide high quality care for those with severe and persistent mental illness (SPMI). This measure assesses the "Family Education" scale on the CAI; defined as "Educates family members and other caregivers about mental illness."  This measure is a component of a disaggregatable composite measure. The "Family Education" scale is one of 15 individual CAI scales. A summary total score (summary index) of all 15 scales is calculated.
NQF #0641	<a href="#">HBIPS-3 Hours of seclusion use</a>	The number of hours that all patients admitted to a hospital-based inpatient psychiatric setting were held in seclusion per 1000 psychiatric inpatient hours, overall and stratified by age groups:Children (Age 1 through 12 years), Adolescents (Age 13 through 17 years), Adults (Age 18 through 64 years), Older Adults (Age greater than and equal to 65 years).
CQAIMH	<a href="#">Medication Errors per Inpatient</a>	
CQAIMH	<a href="#">Patient Injury During Restraint or Seclusion</a>	
CQAIMH	<a href="#">Unplanned Departures from Inpatient Psychiatric Care</a>	

<b>CQAIMH</b>	<a href="#">Unplanned Departures from Inpatient Psychiatric Care (Adolescent)</a>	
<b>NQF #0203</b>	<a href="#">Restraint prevalence (vest and limb)</a>	Total number of patients that have vest and/or limb restraint (upper or lower body or both) on the day of the prevalence measurement episode.
<b>CQAIMH</b>	<a href="#">Physical Restraint Use in Nursing Homes</a>	
<b>CQAIMH</b>	<a href="#">Supported Employment for Individuals with SPMI</a>	
<b>CQAIMH</b>	<a href="#">Consumer Participation in Treatment Decisions</a>	
<b>CQAIMH</b>	<a href="#">Use of PACT for Individuals with SPMI</a>	
<b>CQAIMH</b>	<a href="#">Supported Housing for Individuals with SPMI</a>	
<b>NQMC</b>	<a href="#">Preventive screening and counseling on weight, healthy diet and exercise: average proportion saying "yes" to three items.</a>	This measure assesses the average proportion of "yes" responses to three items about whether provider(s) discussed/screened on weight, healthy diet and exercise among young adults.
<b>NQMC</b>	<a href="#">Behavioral health care patients' experiences: percentage of adult patients who reported whether anyone shared information regarding their counseling or treatment that should have been kept private.</a>	This single-item measure indicates the percentage of adult patients who reported whether ("Yes" or "No") anyone shared information regarding their counseling or treatment that should have been kept private.
<b>NQMC</b>	<a href="#">Ask about parental concerns (developmental surveillance): proportion of children whose parents were asked by their child's health care provider if they have concerns about their child's learning, development and behavior.</a>	This measure is used to assess the proportion of children whose parents were asked by their child's health care provider if they have concerns about their child's learning, development and behavior.
<b>NQMC</b>	<a href="#">Assessment of psychosocial well-being of parent(s) in the family: average percentage of recommended topics assessed.</a>	This measure is used to assess the average percentage of recommended psychosocial well-being issues in the family assessed by the health care providers, including depression, emotional support, changes or stressors in the home, and how parenting is working.
<b>NQMC</b>	<a href="#">Assessment of psychosocial well-being of parent(s) in the family: proportion of children whose parents were assessed for one or more topics related to psychosocial well-being.</a>	This measure is used to assess the proportion of children whose parents were assessed by a health provider on one or more of the recommended psychosocial well-being topics, including depression, emotional support, changes or stressors in the home, and how parenting is working.
<b>NQMC</b>	<a href="#">Standardized developmental and behavioral screening: proportion of children whose health care provider administered a parent-completed standardized developmental and behavioral screening tool.</a>	This measure is used to assess whether the child's health care provider administered a parent-completed, standardized developmental and behavioral screening tool. It is recommended that developmental surveillance be incorporated at every well-child preventive care visit. Any concerns raised during surveillance should be promptly addressed with standardized developmental screening tests. In addition, screening tests should be administered regularly at the 9-, 18-, and 30-month visits.
<b>The Joint Commission</b>	<a href="#">HBIPS-1: Admission Screening for Violence Risk, Substance Use, Psychological Trauma History, and Patient Strengths Completed</a>	Patients admitted to a hospital-based inpatient psychiatric setting who are screened within the first three days of admission for all of the following: risk of violence to self or others, substance use, psychological trauma history and patient strengths.

**NQF # 0027**

Smoking Cessation, Medical assistance: a. Advising Smokers to Quit, b. Discussing Smoking Cessation Medications, c. Discussing Smoking Cessation Strategies

Percentage of patients who received advice to quit smoking  
Percentage of patients whose practitioner recommended or discussed smoking cessation medications