



A Framework and Measures for Evaluating Clinical-Community Relationships for Health: The Clinical-Community Relationship Measures Project (CCRM)

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- For more information about AHRQ's work in this area, visit <u>http://www.innovations.ahrq.gov/linkingClinicalPractices.aspx</u> or contact: Dr. Janice Genevro janice.genevro@ahrq.hhs.gov





### **The CCRM Project Team**

### AHRQ

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#### Background

- Building the Evidence Base for Clinical-community Relationships:
  - What Do We Know? What Do We Need to Know?
  - How are partnerships among primary care and medical specialty providers, the community, and public health organizations developed, strengthened, and sustained to improve care and meet the needs of patients and families?

### **The CCRM Project**

 The CCRM project continued AHRQ's efforts to improve evaluation, research, and practice in this area

- September 2011-September 2013.
- Convened a panel of experts.
- Developed a measurement framework.
- Developed an Atlas of existing measures, and report on potential new measures.
- Developed an Evaluation Roadmap.
- Disseminated results through the AHRQ Web site, a webinar, and the AHRQ Health Care Innovations Exchange.



#### **AHRQ Health Care Innovations Exchange**

#### http://www.innovations.ahrq.gov/linkingClinicalPractices.aspx

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Building Relationships Between Clinical Practices and the Community to Improve Care

#### Introduction

As part of its mission to improve health care, from primary prevention to chronic care management, the Agency for Healthcare Research and Quality (AHRQ) is exploring how to develop, strengthen, and sustain relationships among primary care practices, the community, and public health organizations in order to meet the needs of patients and families.



#### **Measuring Clinical-Community Relationships**

In 2008 and 2010, AHRQ convened two summits that focused on how linkages between clinical practices and community organizations (such as local health departments and community organizations) can enhance the delivery of clinical preventive services. At the 2010 Summit, stakeholders identified strategies to support local efforts to develop such linkages, and recommended the development of metrics to support related research. In 2011, AHRQ launched the Clinical-Community Relationships Measures (CCRM) project, a collaborative effort to explore how to define, measure, and evaluate programs that support the delivery of clinical preventive services through clinical-community relationships.

#### What's New



Clinical-Community Relationships Measures Atlas A measurement framework and listing of

existing measures of clinical-community relationships to support research and evaluation

#### Spotlight on Vermont Blueprint for Health

Vermont's Blueprint for Health program provides comprehensive, coordinated care while improving health outcomes and reducing costs. The Innovations Exchange video series, Vermont Blueprint for Health: Working Together for Better Care, describes successful linkages among primary care, public health, and clinical community resources in the state of Vermont.

On September 25, 2012, the Innovations Exchange held





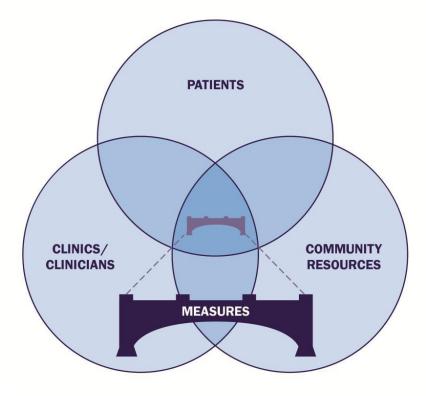


## The CCRM Measurement Framework and Evaluation Roadmap

AHRQ project focused on clinical preventive services Applicable USPSTF Recommendations Alcohol misuse counseling Breastfeeding counseling >Healthy diet counseling Obesity screening and counseling: adults Obesity screening and counseling: children STIs counseling Tobacco use counseling and interventions: nonpregnant adults Tobacco use counseling: pregnant women



#### **Measurement Framework**



- Elements: patients, clinics/clinicians, and community resources
- Relationships among the elements
- Measurement domains for each element and relationship
  - Structure
  - Process
  - Outcomes



#### **CCRM Measurement Framework**

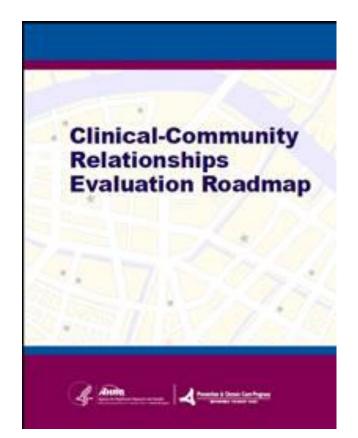






## **Clinical-Community Relationships Evaluation Roadmap**

- Published June 2013
- Focus on clinical interactions and integrating services
- Capture the context of care delivery
- Inform research development and design



http://www.ahrq.gov/professionals/preventionchronic-care/resources/clinical-communityrelationships-eval-roadmap/index.html#



## Measurement Framework Guided the Development of the Evaluation Roadmap

#### **Priority Research Areas**

- 1. Influence of element characteristics
- 2. Influence of relationships between the elements
- 3. Relative importance of elements and relationships in context
- 4. Best methods, strategies, and settings for studying and improving clinical-community relationships
- 5. Best measures for evaluating effectiveness of clinical-community relationships



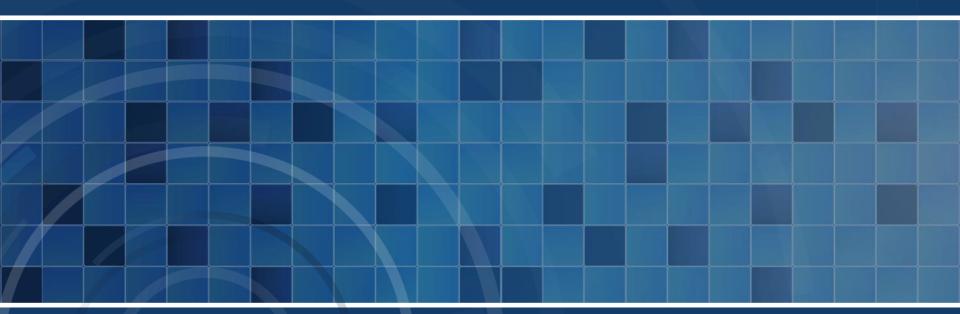
## Clinical-Community Relationships Evaluation Roadmap

#### Seven Recommendations

- 1. Use complex systems approaches
- 2. Accommodate/tailor for variability in design
- 3. Develop standard measures
- 4. Conduct rigorous, mixed methods approaches
- 5. Report findings more thoroughly in useful formats
- 6. Assess feasibility and sustainability of interventions for clinics, patients, and clinical-community relationships
- 7. Consider conceptual framework as a starting point

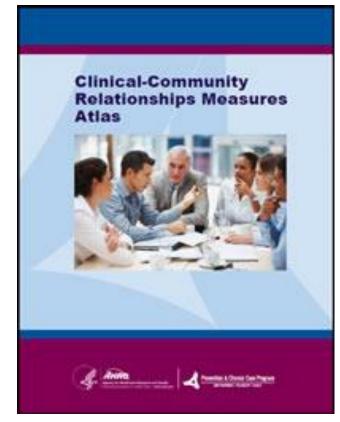






# **CCRM Measures**

### **Clinical-Community Relationships Measures Atlas**



<u>http://www.ahrq.gov/professionals/prevention-chronic-</u> <u>care/resources/clinical-community-relationships-</u> <u>measures-atlas/index.html</u>



- Includes 22 measures with citations, specifications and documentation where available.
- Includes the measurement framework and rationale.
- Aligns measures to the measurement framework.
- 10 out of the 56 measurement categories include at least one measure.



#### **Examples of Measures in CCRM Atlas**

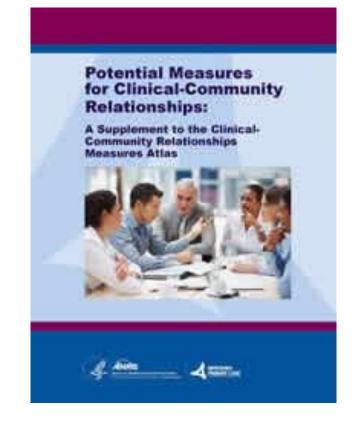
- Measure 8: Plan of care includes at least one public and/or private community service/resource (Wrap-Around Observation Form-2)
- Measure 18: Rate of patients that were ready to improve a targeted behavior
- Measure 12: Clinician receipt of treatment plan from the service coordinator (ASCP Physician Survey)
- Measure 13: Clinician discussion of treatment plan with patients or family caregivers (ASCP Physician Survey)



#### **Development of Potential Measures**

#### Published October 2013

- Iterative process involving staff, expert panel, and AHRQ to develop measurement concepts for the 46 empty categories in the framework.
- Measurement concepts need further development in the context of specific programs, data sources, and analytic objectives.



http://www.ahrq.gov/professionals/prevention-chroniccare/resources/ccrm-atlas-suppl/index.html



- The core set represents suggested priorities for further development and testing.
  - Drawn from both existing and candidate measures.
  - Focus on key structures, processes, and outcomes.
  - Broadly applicable across program types, services, and populations.
  - Limited in number.



#### **Structure Measures**

- Clinic/clinician and community resource infrastructure to maintain clinical-community relationships (H & AA)
- Community resource capacity to deliver preventive services (U)
- Strength of a clinical-community resource relationship (OO)



#### **Process Measures**

- Percentage of referrals to a community resource that are actionable (PP)
- Clinician receipt of treatment plan from the service coordinator (Measure 12)



#### **Outcome Measures**

- Percentage of clients referred to a community resource who received appropriate preventive services (UU)
- Percentage of patients who received appropriate preventive services (EE)
- Patient experience of care with community resource (XX)
- Utility of "bridging resources" / informational tools used by clinicians and community resources to foster clinicalcommunity relationships (JJ & LL)
- Costs to the clinic/clinician and a community resource to establish and maintain a clinical-community relationship (MM & NN)



#### **Questions & Discussion**

How might these measures and evaluation concepts be further developed, tested, and used for process improvement?



