Step 6.4 - Change and Measure

Measure Development Worksheet Example

Use this Measure Development Worksheet to develop a measurement for an action plan.

Introduction

A measure will be created as part of the action plan based on the identified root cause of an event. Existing measures can be used when possible, but there may be times when a new measure/indicator needs to be created. There are three types of measures to consider:

- **Structural Measure:** Structural measures focus on the fixed characteristics of an organization, and its staff. These measures distinguish between a capability or asset and the activity that may rely on that structure. In addition, structural measures typically are based on the organization or professional as the unit of assessment in the denominator.
 - *Example:* The extent a nursing home has implemented electronic health records across the organization. Numerator = Number of departments with electronic health record; Denominator = Number of all departments in the organization.
- Process Measure: Process measures assess the steps or activities carried out in order to
 deliver care or services. These measures focus on the actions by staff. Consideration should
 be given to sample sizes for denominators, exclusion criteria, and alternative processes or
 work-arounds that may exist.
 - *Example:* The percentage of residents receiving admission skin assessments.
- Outcome Measure: Outcome measures focus on the product (or outcome) of a process or system of care or services, which can identify different or more complex underlying causes.

Example: The rate or incidence of nursing home acquired pressure ulcers.

How to Use

- 1. Name the measure
- 2. Identify the intent or purpose of the measure
- 3. Define the measure specifications
- 4. Define how the measure data will be collected

Measure Worksheet

Name of Measure

Example: Persons with a completed skin assessment within 12 hours of admission.

Type of Measure

Outcome measure

Purpose or Intent for Measure

The purpose of this measure is to make sure the plan we have put in place in our Decreasing Missed Therapy Appointment performance improvement project is working.

Defining the Measure Specifications

Numerator: The number of events, items, persons, etc., that meet the desired result – this is the top number of the fraction you will calculate.	Number of missed therapy appointments per month
Denominator: What is the total pool of persons or events you will be counting – this is the bottom number of the fraction you will calculate.	Total number of scheduled therapy appointments
Exclusion Criteria: Is there any reason you would exclude a particular person or event from the denominator count?	Exclude those residents that were not in the transitional care neighborhood for at least 24 hours
Result Calculation: Typically expressed as Numerator/Denominator x 100 = rate %.	144 missed appointments/450 total appointments=32% This is the baseline
Indicator/Measure Goal: The numerical goal aimed for – may be based on an already-established goal for the particular indicator.	Goal = ≤10%
Indicator/Measure Threshold: The minimum acceptable level of performance	Threshold≥20%

Measure Data Collection

Data Source:	Therapy Scheduling Program in electronic health record
Sample Size And Methodology: Will you measure the total population under study or draw a sample to represent the whole? If sampling, how large will the sample size be? How will you determine the sample?	The total population admitted in the last month that was in the transitional care neighborhood for at least 24 hours
Frequency Of Measurement: How frequently will the indicator result be calculated: daily, weekly, monthly, quarterly, annually?	Monthly
Duration: What is the timeframe for which the data will be collected: number of cases/events in the past weeks, months, quarters? This will depend on how frequently cases/events occur.	Will collect this data for three consecutive months; then, based on findings, will either develop additional actions and continue monitoring monthly, or consider decreasing frequency of monitoring.

Copyright © 2014 Stratis Health

Produced under contract with the Minnesota Department of Health

Produced with the use of Federal Nursing Home Civil Money Penalty Funds



