

Final Objectives 2022-23

Quality & Patient Safety Committee

Chair: Elaine Rabin, MD, FACEP

Vice Chair: Amber Sabbatini, MD, FACEP

Board Liaison: Rami R. Khoury, MD, FACEP

Staff Liaison: Pawan Goyal, MD, MHA, PMP

Measures Lifecycle Management

1. Manage the quality measure lifecycle at ACEP by:
 - a. Creating, prioritizing, and suggesting quality measure concepts that align with the CMS Meaningful Measures Initiative to the CEDR Data Validation Sub-Committee for development, testing, and implementation of new quality measures.
 - b. Developing quality measures focused on health care disparity gaps.
 - c. Identify the feasibility of developing measure concepts related to behavioral health care in the ED.
 - d. Performing maintenance on current ACEP measures and working with staff and vendors to make improvements or recommending measures for retirement.
2. Assist with the quality measure lifecycle on behalf of external organizations by monitoring quality initiatives and commenting on behalf of ACEP on the appropriateness of quality measures that impact the practice of emergency medicine, the emergency department, and the reimbursement of emergency physicians.
3. Provide oversight and feedback on new quality measures recommended for development.

Clinical Policies and Federal Review

4. Comment on the quality provisions of government and non-governmental proposals requiring review for their impact on the delivery of emergency care, including but not limited to the Inpatient Prospective Payment System (IPPS), Outpatient Prospective Payment System (OPPS), the Physician Fee Schedule (PFS), Medicare Access and CHIP Reauthorization Act (MACRA).
5. Serve as a resource to the Clinical Policies Committee to review any clinical policies under development or revision with potential implications on quality measurement, patient safety, or performance. (Clinical Policies Committee is the lead committee.)
6. Review the following policy per the Policy Sunset Review Process:
 - Clinical Emergency Data Registry Quality Measures – work with the Clinical Emergency Data Registry Committee (Quality & Patient Safety is the lead committee.)
 - Definition of “Admit Time”

Determine by December 15 if the policies should be reaffirmed, revised, rescinded, or sunsetted. Submit any proposed revisions to the Board for approval by the end of the committee year.

Nominations

7. Nominate emergency physicians to represent ACEP to internal and external bodies that are developing quality measures that have relevance to the practice of emergency care.
8. Maintain a process for ensuring representation of nominees from women and under-represented groups .

Education and Professional Development

9. Coordinate the Program Director Patient Safety and Quality (PDPQ) educators’ network.
10. Educate ACEP and Quality & Patient Safety Committee members in quality measurement and best practices to develop new leaders and awareness for quality measures.

Implementation

11. Continue to develop a process for collecting and collating successful local, regional, and national quality improvement and patient safety efforts in the specialty of emergency medicine by:
 - a. Partnering with the Quality Improvement & Patient Safety Section (QIPS) on coordinating the annual ACEP

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QI Challenge recognition and award program.

- b. Highlighting examples of these quality improvement and implementation efforts through various ACEP communication channels and national outlets.
- c. Consider how to facilitate more broadly dissemination of successful programs to feed quality improvement
- d. Spotlighting efforts within emergency medicine to reduce disparities in quality, patient safety, health outcomes, and efforts to improve behavioral health care in the ED.