

Helpful Definitions of Key Terms

National Quality Forum

The National Quality Forum (NQF) is a not-for-profit membership organization created to develop and implement a national strategy for health care quality measurement and reporting. A shared sense of urgency about the affect of health care quality on patient outcomes, workforce productivity, and health care costs prompted leaders in the public and private sectors to create the NQF as a mechanism to bring about national change.

Established as a public-private partnership, the NQF has broad participation from all parts of the health care system, including national, state, regional, and local groups representing consumers, public and private purchasers, employers, health care professionals, provider organizations, health plans, accrediting bodies, labor unions, supporting industries, and organizations involved in health care research or quality improvement. Together, the organizational members of the NQF work to promote a common approach to measuring health care quality and fostering system-wide capacity for quality improvement.

Hospital Compare (see also Hospital Quality Alliance)

A website tool developed to publicly report credible and user-friendly information about the quality of care delivered in the nation's hospitals, debuted on April 1, 2005 at www.hospitalcompare.hhs.gov. This website was created through the efforts of the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (DHHS) along with the Hospital Quality Alliance (HQA). The HQA is a public-private collaboration established to promote reporting on hospital quality of care. The HQA consists of organizations that represent consumers, hospitals, doctors, employers, accrediting organizations, and Federal agencies. The information on this website can be used by anyone needing hospital care.

Hospital Quality Alliance

The Hospital Quality Alliance: Improving Care Through Information (HQA) is a public-private collaboration to improve the quality of care provided by the nation's hospitals by measuring and publicly reporting on that care.

This collaboration includes the Centers for Medicare & Medicaid Services (CMS), the American Hospital Association, the Federation of American Hospitals, and the Association of American Medical Colleges, and is supported by other organizations such as the Agency for Healthcare Research and Quality, the National Quality Forum, the Joint Commission on Accreditation of Healthcare Organizations, American Medical Association, American Nurses Association, National Association of Children's Hospitals and Related Institutions, Consumer-Purchaser Disclosure Project, AFL-CIO, AARP, U.S. Chamber of Commerce, America's Health Insurance Plans, Blue Cross and Blue Shield Association, and the National Business Coalition on

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Health. The goal of the program is to identify a robust set of standardized and easy-to-understand hospital quality measures that would be used by all stakeholders in the health care system in order to improve quality of care and the ability of consumers to make informed health care choices. An important element of the collaboration is Hospital Compare (see above).

Nurse Sensitive Measures

Nationally standardized performance measures that provide a framework for how to measure the quality of nursing care and assess the extent to which nurses in hospitals contribute to patient safety, health care quality, and a professional work environment. Consumers can use them to assess the quality of nursing care in hospitals; providers use them to identify opportunities for improvement of critical outcomes and processes of care.

Falls

All documented falls with or without injury, experienced by patients on an eligible patient care unit. In this report, the rate of patient falls is reported, which is the number of falls for every 1,000 days of inpatient hospital care in the unit types reported. A fall is defined as an unplanned descent to the floor or an extension of the floor.

Falls with injuries (see also Falls)

All documented falls with an injury level of "minor" or greater experienced by patients on an eligible patient care unit. In this report, the rate of patient falls is reported, which is the number of falls for every 1,000 days of inpatient hospital care in the unit types reported. An injury level of minor is one that resulted in the application of a dressing, ice, cleaning of a wound, limb elevation, or topical medication.

Smoking cessation counseling for heart failure, heart attack, pneumonia

A measure of the extent to which patients who smoke are hospitalized for heart attack, heart failure, or pneumonia and who receive counseling from medical professionals about the need to quit smoking. Smoking is linked to heart attacks, heart failure, and pneumonia, and quitting may prevent future occurrences of help improve a patient's current condition.

Pressure ulcer prevalence

A pressure ulcer is a localized injury to the skin and/or underlying tissue usually over a bony prominence, as a result of pressure in combination with shear and/or friction. A less-specific, general term for pressure ulcers is bed sores.

A pressure ulcer is an area of skin that breaks down when a person stays in one position for too long without shifting weight. This often happens with wheelchair use or if a person is bedridden, even for a short period of time (for example, after surgery or an injury). The constant pressure against the skin reduces the blood supply to that area, and the affected tissue dies.

A pressure ulcer starts as reddened skin but gets progressively worse, forming a blister, then an open sore, and finally a crater. The most common places for pressure ulcers are over bony prominences (bones close to the skin) like the elbow, heels, hips, ankles, shoulders, back, and the back of the head.