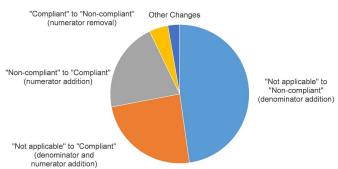


Strength in numbers shown in ambulatory care metrics

7 May 2021, by Paul Govern



in payment for <u>health care services</u>, the authors note.

More information: John D D'Amore et al. Clinical data sharing improves quality measurement and patient safety, *Journal of the American Medical Informatics Association* (2021). DOI: 10.1093/jamia/ocab039

Discrepancies in quality measure calculations. Credit: Journal of the American Medical Informatics Association (2021). DOI: 10.1093/jamia/ocab039 Provided by Vanderbilt University

The difference made to health care quality measurement by voluntary data sharing across a region's health systems and ambulatory care practices is examined in the *Journal of the American Medical Informatics Association* by Adam Wright, Ph.D., and colleagues.

The team studied 14 ambulatory care metrics at 53 health care organizations participating in the Kansas Health Information Network, a health information exchange (HIE) operating in part as a multisource registry for quality measurement. With reference to 5,295 patients, the team contrasted quality calculations using data from a single electronic health record with calculations using data from the whole network.

During 2018, 79% of these 5,295 patients received care at more than one network facility. Some 15% of all quality measure calculations changed when including HIE data sources, affecting 19% of patients. The changes were observed across measures and organizations.

Beside their use in directing quality and safety improvement, outcome metrics increasingly figure



APA citation: Strength in numbers shown in ambulatory care metrics (2021, May 7) retrieved 14 June 2021 from https://medicalxpress.com/news/2021-05-strength-shown-ambulatory-metrics.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.