

The Facts @ BIDMC – Promoting Transparency

The Problem

With a growing interest in hospital level data and outcomes by regulators, public and private purchasers, patients and clinicians/staff looking to benchmark for excellence and best practice, a number of internet based sites have become available over the past several years. Often the posted results are out of date or without context/definition to guide the reader to the importance, definition of the metric or relevance to any decision making.

Aim/Goal

Coincident to the rising attention and availability of clinical data through public sites and third party vendors, in FY07, 'transparency' was identified as a goal within BIDMC's Annual Operating Plan. The charge was to:

- **Inform the public:** Meet need for useful, understandable information on quality of care.
- **Improve quality:** Engage medical staff in recognizing and addressing performance issues.
- **Inform the medical community:** Educate referring physicians about BIDMC departments, capabilities.
- **Take the lead:** Position BIDMC as a leader in driving public accountability for health care quality in Massachusetts.
- **Manage the context:** Take control over the message and the presentation of our data.

The Team

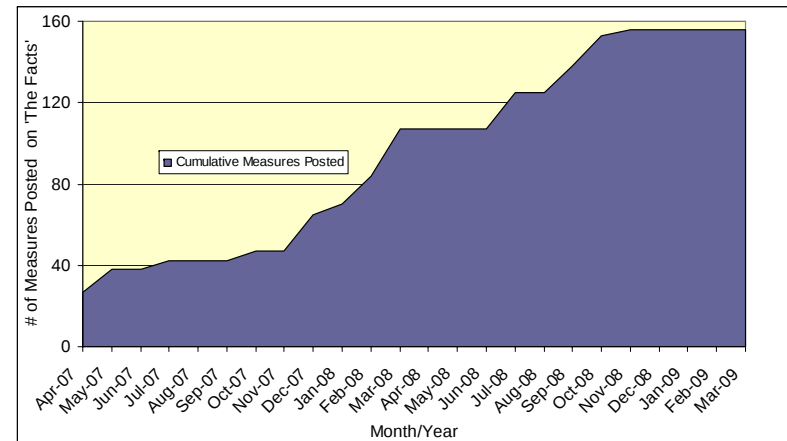
- Ken Sands, MD, MPH Sr. Vice President for Health Care Quality
- Kathy Murray, Director of Process Improvement - HCQ
- Margaret Bernier, Project Manager, Transparency - HCQ
- Judy Glasser, Sr. Vice President for Communications
- Jaime Lyons, Web/Marketing Manager
- Amy Barletta, Marketing Web Consultant

The Interventions

- Designed and posted a section dedicated to process and outcome measures prominently on BIDMC's Web site ([The Facts @ BIDMC](#))
- Worked with multiple departments and clinical areas to combined hospital-wide measures, department-specific measures and patient satisfaction scores that were understandable, relevant, and useful to a patient and met the following criteria:
 - Endorsed by National Quality Forum or recommended by national organizations (e.g., JCAHO, CMS, AHRQ)
 - Statistically valid and reliable
 - Substantive (i.e. linked to patient's outcome or safety)
 - Inclusive (i.e. affects large proportion of patients)
 - Interpretable information
 - Had data and benchmarks available (whether national, regional, or local)
- Whenever possible, provided a visual way for reader to easily evaluate performance as favorable or unfavorable

The Results/Progress to Date

Below is a review of the cumulative number of process/outcome metrics added to The Facts site during the past 2 years:



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