



## Get With The Guidelines About Composite, Defect-free and Perfect Care Measures

The enhanced Get With The Guidelines Patient Management Tool™ (PMT) introduces three new measures for more robust benchmarking.

The newly enhanced PMT, debuting in Fall 2006, includes a variety of improvements to make Get With The Guidelines<sup>SM</sup> (GWTG) work even harder for participating hospitals and their patients. Among the new offerings are three measures that allow hospitals to better assess and report their quality of care.

### Composite Performance Measure

This calculation, developed by CMS, gives hospitals a sense of their overall average performance. Scores are calculated by counting the number of times patients received GWTG performance interventions and dividing the sum by the total number of interventions for which these patients were eligible. Calculations for CAD, Heart Failure and Stroke follows:

#### CAD

$$\frac{\begin{aligned} &\# \text{ receiving discharge ASA} + \# \text{ receiving early ASA} + \# \text{ receiving discharge BB} + \# \text{ receiving discharge ACE/ARB} \\ &\text{(LVSD patients only)} + \# \text{ receiving discharge smoking counseling} + \# \text{ receiving discharge lipid-lowering therapy} \end{aligned}}{\begin{aligned} &\# \text{ eligible discharge ASA} + \# \text{ eligible early ASA} + \# \text{ eligible discharge BB} + \# \text{ eligible discharge ACE/ARB} \\ &\text{(LVSD patients only)} + \# \text{ eligible discharge smoking counseling} + \# \text{ eligible discharge lipid-lowering therapy} \end{aligned}}$$

#### Heart Failure

$$\frac{\begin{aligned} &\# \text{ receiving discharge instructions} + \# \text{ receiving LVF assessment} + \# \text{ receiving discharge ACE/ARB (LVSD patients} \\ &\text{only)} + \# \text{ receiving discharge smoking counseling} + \# \text{ receiving discharge BB} \end{aligned}}{\begin{aligned} &\# \text{ eligible discharge instructions} + \# \text{ eligible LVF assessment} + \# \text{ eligible discharge ACE/ARB (LVSD patients only)} + \\ &\# \text{ eligible discharge smoking counseling} + \# \text{ eligible discharge BB} \end{aligned}}$$

#### Stroke

$$\frac{\begin{aligned} &\# \text{ receiving Lytic within 3 hours of symptom onset} + \# \text{ receiving antithrombotics within 48 hours} + \# \text{ receiving} \\ &\text{discharge antithrombotics} + \# \text{ receiving discharge anticoagulants} + \# \text{ receiving DVT prophylaxis by second day} + \\ &\# \text{ receiving discharge lipid-lowering therapy} + \# \text{ receiving discharge smoking advice or medication} \end{aligned}}{\begin{aligned} &\# \text{ Lytic within 3 hours of symptom onset} + \# \text{ eligible antithrombotics within 48 hours} + \# \text{ eligible discharge} \\ &\text{antithrombotics} + \# \text{ eligible discharge anticoagulants} + \# \text{ eligible DVT prophylaxis by second day} + \# \text{ eligible} \\ &\text{discharge lipid-lowering therapy} + \# \text{ eligible discharge smoking advice or medication} \end{aligned}}$$

### Defect-free Care Measure

This measure shows what percentage of patients receive **all interventions** for which they are eligible, i.e. the percentage of "defect-free" care.

Defect-free care can be calculated for an individual patient, or for a hospital.

A patient received defect-free care if they received all interventions for which they were eligible. A hospital's defect-free care measure shows the percentage of patients who received defect-free care.

To calculate a hospital's defect-free care measure, use this formula:

$$\frac{\# \text{ patients who received defect-free care}}{\# \text{ eligible patients}}$$

### **Example: Defect-free Care for Stroke**

As an example, here are two patients treated using GWTG-Stroke.

Performance Measure (PMT Measure Name)	Patient A Eligible?	Patient A Care Received?	Patient B Eligible?	Patient B Care Received?
Lytic within 3 hours of symptom onset (Acute Lytic)	No, arrived 6 hours after symptom onset	N/A	No, family refused	N/A
DVT prophylaxis by 2nd hospital day (DVT risk)	Yes	No	Yes	Yes
Antithrombotics within 48 hours (% RxASA48)	Yes	Yes	Yes	Yes
Discharge Lipid-lowering Therapy (LDL100RxDC)	Yes	Yes	Yes	Yes
Discharge Antithrombotics (WAR-ASA-RxDC)	Yes	Yes	Yes	Yes
Discharge Anticoagulation in Patients with Atrial Fibrillation (WAR-AF-RxDC)	No, not in Atrial Fibrillation	N/A	No, not in Atrial Fibrillation	N/A
Discharge Smoking Cessation (SmokeRxDC)	Yes	Yes	Yes	Yes

Patient A was eligible for 5 interventions and received 4 of those 5. Since  $4 \div 5 = 0.8$ , **Patient A did not receive defect-free care.**

Patient B was eligible for 5 interventions and received all 5. Since  $5 \div 5 = 1$ , **Patient B did receive defect-free care.**

If this hospital only had these two patients, their defect-free score would be  $1 \div 2$ , or 50%.

*(Note—if this same example were used to calculate the composite score, it would be  $(4+5) \div (5+5) = 90\%$ )*

### **Perfect Care Measure**

This measure, first designed by JCAHO and only applicable to acute myocardial infarction (AMI), helps hospitals evaluate the quality of care they provide to AMI patients. The score is based on seven interventions:

- early administration of aspirin
- aspirin at discharge
- beta blocker at discharge
- early administration of beta blocker
- ACE-inhibitor or ARB at discharge
- timely administration of thrombolytics or PCI
- smoking-cessation counseling

The calculation for AMI diagnosis as follows:

$$\frac{\% \text{ of AMI patients receiving all seven interventions}}{\# \text{ of components provided or documented as contraindicated}}$$

Hospitals that do not provide all seven interventions should base their calculations on the ones they do provide.

### **Maximizing the Value of the Measures**

Using the PMT, hospitals can track their composite performance, defect-free care and perfect care scores over time. The data can be used to create graphs showing changes in performance levels and evaluating score in relation to other variables. The measures provide additional tools hospital teams can use to analyze, to pinpoint and correct problems, to demonstrate success. We at Get With The Guidelines never lose sight of the true value of the measures we provide: saving more lives.

### **More Information**

To learn more about the enhanced Patient Management Tool and the Get With The Guidelines program, contact your GWTG representative or visit [americanheart.org/getwiththeguidelines](http://americanheart.org/getwiththeguidelines).



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