

Quality Improvement Measures

Link a relevant measure to a learning objective. Measures could reflect structure, process or outcome around the topic. Whenever possible, incorporating standard measures ([Resources for Evidence-based Measures](#)) is a good way to assess against nationally benchmarked quality and/or performance data. If the topic emphasis is highly specific and no national standard measure exists, a measure can be developed so that participants are able to assess how well they meet a learning objective.

Example Learning Objective: Apply the 2014 American Academy of Family Physicians (AAFP) and the Advisory Committee on Immunization Practices (ACIP) catch-up immunization schedules in appropriate patient populations

Possible performance measures:

A STRUCTURE measure: Percentage of diabetic and asthmatic patient templates or flow sheets that contain a field that captures pneumococcal vaccine recommendation and administration.

A PROCESS measure: The percentage of diabetic/asthmatic patients that received a recommendation for a pneumococcal vaccine in the last 12 months.

OR The percentage of diabetic/asthmatic patients that received patient education about the pneumococcal vaccine in the last 12 months.

An OUTCOME measure: The percentage of diabetic/asthmatic patients that did not succumb to pneumonia in the last 12 months.

OR The percentage of diabetic/asthmatic patients who were very satisfied with the patient education about the pneumococcal vaccination they received at their last visit.

Measures are a critical piece of assessing and improving healthcare delivery. By providing ways of assessing the degree of success in implementing practice-based changes that learners take away from your educational activity, you improve the likelihood of improving patient outcomes.

Further Reading on Performance Measures:

<http://www.aafp.org/about/policies/all/performance-measures.html>