Delfini Health Care System Tools
Evidence- & Value-based Health Care Quality System Assessment Tool

Health Care System:
Evaluator:
Date:

Background

There is a great deal of poor quality research and misleading information even in the highest quality medical journals. Health care organizations rarely recognize this and/or rarely have systems in place and staff with skills to do needed evaluations of scientific evidence. Health care should be provided by organizations that both understand the need for evaluating science, know how to do so and provide resources for doing this work.

Individual circumstances apply. Your actual findings need to take account of the whole or other factors which may serve as reasonable substitutions.

Evaluation Tool

Part I. Scientific Evaluation Capabilities	Desired Outcome	Problem	General Advice
1. Organizational Understanding Can the organizational or quality improvement leadership articulate a **true** understanding of the need for a rigorous and systematic evaluation of the quality of scientific evidence before applying it? **Note:** Leadership is vitally important to help create an evidence- and value-based system. Many leaders may be able to sound like they understand, but not actually have a true understanding.	Yes:	No:	Red flag
2. Systematic Processes for Evaluating Health Care Technologies Does the organization have a system in operation for routine rigorous and systematic evaluation of new drugs, devices and procedures through rigorous and systematic evaluation of scientific quality? ▪ Can they demonstrate that they have created evidence-based work processes – meaning do they have in place the methods, tools and staff to identify potential work areas for quality improvement, critically appraise the medical literature and create evidence-based clinical improvement initiatives based on valid, relevant evidence of effectiveness and value? ▪ Does the organization have staff who possess the needed skills to critically appraise medical literature (e.g., epidemiology skills) and are these staff utilized for these assessments? ▪ Is there a formal structure and mechanism for regularly reviewing new drugs, devices and procedures through these processes? For example,	Yes:	No:	Fails assessment Reminder of potential savings estimated at 15 to 30% of drugs and over 30 percent of new technologies Reminder of considerable increase in care quality and reduction of patient harms

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does the organization have some or all of the following committees that use evidence-based processes for evaluating the strength of the evidence by evaluating interventions by looking at both study type and methodology?
 	
    o   Quality or Value Oversight Committee
    o   Pharmacy & Therapeutics Committee
    o   Technology Assessment Committee
    o   Guidelines/pathways department
 	
  ▪ Is the system functioning successfully?			

3. Understanding of Study Types Does the organization use observational studies or case series for questions of the efficacy of therapy, screening or prevention? If yes, is this done only in absence of evidence from valid randomized controlled trials (RCTs) and is this information labeled in such a way that clinicians and others understand that the evidence is weak and maybe misleading?	No:	Yes:	Fails assessment
4. Performance of Rigorous Critical Appraisal Does the organization rely on randomized controlled trials or systematic reviews of randomized controlled trials that have not undergone a rigorous critical appraisal?	Yes:	No:	Fails assessment
5. Critical Appraisal of Clinical Recommendation Content If the organization uses clinical guidelines, pathways, performance measures or other clinical recommendations, do they have a rigorous and evidence-based process for successfully evaluating the quality of that information? **Note:** There are enormous problems with medical content and recommendations. Many are labeled evidence-based, when actually they are not – they may refer to a scientific study, but do not reflect the body of science or may be based on a poor and misleading study. Consensus guidelines are highly prone to bias regardless of the developers. Medical content has to be evaluated for validity and usefulness.	Yes:	No:	Fails assessment

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Health Care System:

Evaluator:

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	No:	Yes:	Problem
6. Critical Appraisal Core Competencies Do most of the organization's individual clinicians and clinical pharmacists have an understanding of the core principals of critically appraising research studies for validity and usefulness? ▪ Is there some way that clinicians and clinical pharmacists are evaluated for this knowledge? ▪ Is there a training program for them? **Note:** This is an enormous problem in health care. Much that is published in the medical literature is poor or misleading. Most physicians and clinical pharmacists cannot tell. This affects health care decisions daily. Applying a systems approach, without ensuring that their individual physicians and clinical pharmacists possess, as a core competency, basic skills in critical appraisal and results assessment, can be likened to trying to stop a flood without creating a solid barrier.			Reminder that well over 70% of physicians fail a simple literature evaluation quiz High risk for patient harms, inappropriate care and higher costs

Part II. Application of Valid Science	**Desired Outcome**	**Problem**	**General Advice**
7. Clinical Improvement Implementation Skills Can the organization provide evidence of successful implementation of quality improvement projects? **Note:** Many organizations put efforts into creating quality improvement projects, but lack understanding of how to effectively implement them and create practitioner behavior change.	Yes:	No:	Problem
8. Health Care Staff Access to Quality Information Can the organization demonstrate that physicians and other clinical staff have ready access to the quality improvement information that is to be applied for patient care? This is especially effective when the information is available at point-of-care.	Yes:	No:	Problem
9. Consumer Access to Quality Information Can the organization demonstrate that it makes this information readily available to consumers and patients?	Yes:	No:	Medium problem

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		Desired Outcome	Problem	General Advice
10.	**Performance Measures & Quality Indicators** Can the organization demonstrate improvement through performance measures or quality indicators – or a focus on quality through use of such indicators? **NOTE:** Unless high quality research is done, improved health outcomes is not a valid measurement. Look for improvement in processes or services or evidence that a quality improvement has been successfully implemented. **This is a complicated area which may require evaluation by experts understanding the pitfalls of such measurement**.	Yes:	No:	May be only a minor problem (and this is a complicated area which may require evaluation by experts understanding the pitfalls of such measurement)
Part III. Organizational Commitment		**Desired Outcome**	**Problem**	**General Advice**
11.	**Mission Statement Reflects Priorities** Is a commitment to evidence-based quality improvement acknowledged in the organization's mission statement?	Yes:	No:	Minor problem
12.	**Leadership Support** Is there concrete evidence that the organization's leaders are committed to supporting clinical improvements based on the best available scientific evidence? a. Statements in the mission statement, business plan, quality plan, etc.? b. Other?	Yes:	No:	Minor problem
13.	**Aligned Incentives** Are incentives aligned for quality? Example: In many organizations pharmacy budgets and inpatient budgets are viewed separately (silo'd). If budgets are silo'd, one department may get penalized for rising costs in their department which actually represent quality overall. Or if performance measures are used, physicians might be penalized if the measure does not take clinical judgment into account.	Yes:	No:	Could be a major problem

Assessment Outcomes

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Part I. Summary of Assessment of Scientific Evaluation Capabilities:

Part II. Summary of Assessment of Application of Valid Science:

Part III. Summary of Assessment of Organizational Commitment:

Recommendations:

Other Comments:

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