

**AHRQ Quality Indicators Prioritization Worksheet**

	Section 1- Blue		Section 2-Green						Section 3-Purple			Section 4-Orange				
	Own Rate and National Comparator		Estimate Annual Cost and Cost To Implement						Rate Strategic Alignment and Regulatory Mandates Rate on scale of 10 (agree/high) to 0 (disagree/low)			Barrier Assessment (indicate Yes or No)				
			Volume of Cases at Risk	Cost of Single Event	Total Cost	Cost To Implement	Penalties and Incentives	Proxies for Cost	Strategic Alignment	External Mandates	Public Perception	Executive-Level Support	Staff Capability	Staff Willingness	Time and Effort	Ability To Monitor Progress
	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
<b>List of PSIs/IQIs/PDIs</b>	Own Rate	National Comparator	Annual volume of this event	Anticipated average cost for one case with this event	The total annual cost of this event to our organization	Anticipated cost to investigate/ implement new process is less than annual cost of event	Anticipated costs and benefits from HAC Reduction, VBP, etc.	Additional information that could be used instead of or in addition to cost estimates in columns F-H	Aligned with established organizational goals and priorities	<ul style="list-style-type: none"> <li>Regulatory</li> <li>Value-based purchasing</li> <li>Sentinel event</li> </ul>	<ul style="list-style-type: none"> <li>Publicly reported</li> <li>Public perception</li> <li>Marketing</li> <li>Competitive pressure</li> </ul>	Do we have the committed support of our senior leadership?	Do we have staff with the needed skills for this PI team?	Are affected staff willing to change?	Will the added demand on staff time and effort be reasonable?	Do we have a method to review PI progress on a regular basis?
Patient Safety																

**AHRQ Quality Indicators Prioritization Worksheet**

		Section 1- Blue		Section 2-Green					Section 3-Purple			Section 4-Orange					
		Own Rate and National Comparator		Estimate Annual Cost and Cost To Implement					Rate Strategic Alignment and Regulatory Mandates Rate on scale of 10 (agree/high) to 0 (disagree/low)			Barrier Assessment (indicate Yes or No)					
				Volume of Cases at Risk	Cost of Single Event	Total Cost	Cost To Implement	Penalties and Incentives	Proxies for Cost	Strategic Alignment	External Mandates	Public Perception	Executive-Level Support	Staff Capability	Staff Willingness	Time and Effort	Ability To Monitor Progress
		C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
List of PSIs/IQs/PDIs		Own Rate	National Comparator	Annual volume of this event	Anticipated average cost for one case with this event	The total annual cost of this event to our organization	Anticipated cost to investigate/ implement new process is less than annual cost of event	Anticipated costs and benefits from HAC Reduction, VBP, etc.	Additional information that could be used instead of or in addition to cost estimates in columns F-H	Aligned with established organizational goals and priorities	<ul style="list-style-type: none"> <li>Regulatory</li> <li>Value-based purchasing</li> <li>Sentinel event</li> </ul>	<ul style="list-style-type: none"> <li>Publicly reported</li> <li>Public perception</li> <li>Marketing</li> <li>Competitive pressure</li> </ul>	Do we have the committed support of our senior leadership?	Do we have staff with the needed skills for this PI team?	Are affected staff willing to change?	Will the added demand on staff time and effort be reasonable?	Do we have a method to review PI progress on a regular basis?
	PSI 14 Postoperative Wound Dehiscence																
	PSI 15 Accidental Puncture or Laceration																
Obstetric	PSI 17 Birth Trauma-Injury to Neonate																
	PSI 18 Obstetric Trauma-Vaginal Delivery With Instrument																
	PSI 19 Obstetric Trauma-Vaginal Delivery Without Instrument																
Death	PSI 02 Death in Low-Mortality DRGs																
	PSI 04 Death Among Surgical Inpatients																
Sentinel Events (Adults)	PSI 05 Retained Surgical Item or Unretrieved Device Fragment Count																
	PSI 16 Transfusion Reaction																
AHRQ Inpatient Mortality for Selected Conditions Quality Indicator Composite	Conditions Composite																
	IQI 15 AMI Mortality																
	IQI 16 Heart Failure Mortality																
	IQI 17 Acute Stroke Mortality																

**AHRQ Quality Indicators Prioritization Worksheet**

	Section 1- Blue		Section 2-Green						Section 3-Purple			Section 4-Orange				
	Own Rate and National Comparator		Estimate Annual Cost and Cost To Implement						Rate Strategic Alignment and Regulatory Mandates Rate on scale of 10 (agree/high) to 0 (disagree/low)			Barrier Assessment (indicate Yes or No)				
			Volume of Cases at Risk	Cost of Single Event	Total Cost	Cost To Implement	Penalties and Incentives	Proxies for Cost	Strategic Alignment	External Mandates	Public Perception	Executive-Level Support	Staff Capability	Staff Willingness	Time and Effort	Ability To Monitor Progress
	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
<b>List of PSIs/IQIs/PDIs</b>	Own Rate	National Comparator	Annual volume of this event	Anticipated average cost for one case with this event	The total annual cost of this event to our organization	Anticipated cost to investigate/ implement new process is less than annual cost of event	Anticipated costs and benefits from HAC Reduction, VBP, etc.	Additional information that could be used instead of or in addition to cost estimates in columns F-H	Aligned with established organizational goals and priorities	<ul style="list-style-type: none"> <li>Regulatory</li> <li>Value-based purchasing</li> <li>Sentinel event</li> </ul>	<ul style="list-style-type: none"> <li>Publicly reported</li> <li>Public perception</li> <li>Marketing</li> <li>Competitive pressure</li> </ul>	Do we have the committed support of our senior leadership?	Do we have staff with the needed skills for this PI team?	Are affected staff willing to change?	Will the added demand on staff time and effort be reasonable?	Do we have a method to review PI progress on a regular basis?
<b>AHRQ Inpatient Mortality for Selected Procedures Quality Indicator Composite</b>																
Procedures Composite																
IQI 08 Esophageal Resection Mortality																
IQI 09 Pancreatic Resection Mortality																
IQI 11 AAA Repair Mortality																
IQI 12 CABG Mortality																
IQI 13 Craniotomy Mortality																
IQI 14 Hip Replacement Mortality																
IQI 06 and IQI 30 Percutaneous Coronary Intervention																
IQI 07 and IQI 31 Carotid Endarterectomy																
<b>Neonatal</b>																
NQI 01 Neonatal Iatrogenic Pneumothorax																

**AHRQ Quality Indicators Prioritization Worksheet**

	Section 1- Blue		Section 2-Green						Section 3-Purple			Section 4-Orange				
	Own Rate and National Comparator		Estimate Annual Cost and Cost To Implement						Rate Strategic Alignment and Regulatory Mandates Rate on scale of 10 (agree/high) to 0 (disagree/low)			Barrier Assessment (indicate Yes or No)				
			Volume of Cases at Risk	Cost of Single Event	Total Cost	Cost To Implement	Penalties and Incentives	Proxies for Cost	Strategic Alignment	External Mandates	Public Perception	Executive-Level Support	Staff Capability	Staff Willingness	Time and Effort	Ability To Monitor Progress
	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
<b>List of PSIs/IQIs/PDIs</b>	Own Rate	National Comparator	Annual volume of this event	Anticipated average cost for one case with this event	The total annual cost of this event to our organization	Anticipated cost to investigate/ implement new process is less than annual cost of event	Anticipated costs and benefits from HAC Reduction, VBP, etc.	Additional information that could be used instead of or in addition to cost estimates in columns F-H	Aligned with established organizational goals and priorities	<ul style="list-style-type: none"> <li>Regulatory</li> <li>Value-based purchasing</li> <li>Sentinel event</li> </ul>	<ul style="list-style-type: none"> <li>Publicly reported</li> <li>Public perception</li> <li>Marketing</li> <li>Competitive pressure</li> </ul>	Do we have the committed support of our senior leadership?	Do we have staff with the needed skills for this PI team?	Are affected staff willing to change?	Will the added demand on staff time and effort be reasonable?	Do we have a method to review PI progress on a regular basis?
NQI 02 Neonatal Mortality Rate																
NQI 03 Neonatal Blood Stream Infection Rate																
<b>Pediatric</b>																
PDI 01 Accidental Puncture or Laceration Rate																
PDI 02 Pressure Ulcer Rate																
PDI 05 Iatrogenic Pneumothorax Rate																
PDI 06 RACHS-1 Pediatric Heart Surgery Mortality Rate																
PDI 07 RACHS-1 Pediatric Heart Surgery Volume																
PDI 08 Perioperative Hemorrhage or Hematoma Rate																
PDI 09 Postoperative Respiratory Failure Rate																
PDI 10 Postoperative Sepsis Rate																
PDI 11 Postoperative Wound Dehiscence Rate																

**AHRQ Quality Indicators Prioritization Worksheet**

		Section 1- Blue		Section 2-Green					Section 3-Purple			Section 4-Orange					
		Own Rate and National Comparator		Estimate Annual Cost and Cost To Implement					Rate Strategic Alignment and Regulatory Mandates Rate on scale of 10 (agree/high) to 0 (disagree/low)			Barrier Assessment (indicate Yes or No)					
		C	D	Volume of Cases at Risk	Cost of Single Event	Total Cost	Cost To Implement	Penalties and Incentives	Proxies for Cost	Strategic Alignment	External Mandates	Public Perception	Executive-Level Support	Staff Capability	Staff Willingness	Time and Effort	Ability To Monitor Progress
List of PSIs/IQIs/PDIs	Own Rate	National Comparator	Annual volume of this event	Anticipated average cost for one case with this event	The total annual cost of this event to our organization	Anticipated cost to investigate/ implement new process is less than annual cost of event	Anticipated costs and benefits from HAC Reduction, VBP, etc.	Additional information that could be used instead of or in addition to cost estimates in columns F-H	Aligned with established organizational goals and priorities	<ul style="list-style-type: none"> <li>Regulatory</li> <li>Value-based purchasing</li> <li>Sentinel event</li> </ul>	<ul style="list-style-type: none"> <li>Publicly reported</li> <li>Public perception</li> <li>Marketing</li> <li>Competitive pressure</li> </ul>	Do we have the committed support of our senior leadership?	Do we have staff with the needed skills for this PI team?	Are affected staff willing to change?	Will the added demand on staff time and effort be reasonable?	Do we have a method to review PI progress on a regular basis?	
PDI 12 Central Venous Catheter-Related Blood Stream Infection Rate																	
<b>Sentinel Events (Pediatric)</b>	PDI 03 Retained Surgical Item or Unretrieved Device Fragment Count																
	PDI 13 Transfusion Reaction Count																
<b>Pediatric Safety Composite Indicator</b>	PDI 19 Pediatric Safety for Selected Indicators																

Tool C.1