



Information Integration at AHRQ

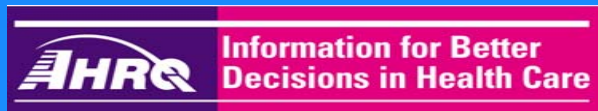


NITRD National Workshop on Information Integration

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Agency for Healthcare Research and Quality
U.S. Department of Health and Human Services

October 26, 2006





AHRQ's Mission

Improve the quality, safety, efficiency, and effectiveness of health care for all Americans.



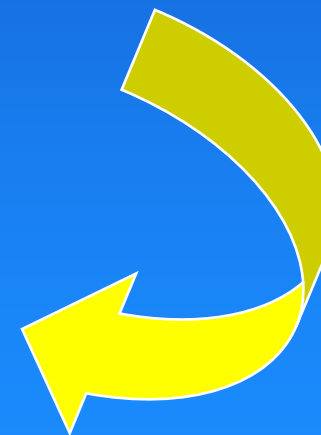


Clinical Decisions and Communication Science



Facilitate Informed
Transparent Health
Care Decisions by:

- Patients
- Providers
- Policymakers





Why Integrate Information?

- “In an ideal world, doctors and patients confronting an illness should be able to draw upon reliable scientific evidence to make treatment decisions,” said AHRQ Director Carolyn M. Clancy, M.D.
- “Unfortunately, renal artery stenosis is among those for which evidence is lacking. This new review serves an important purpose by identifying where research is needed.”
- “Authors of the systematic literature review [on RAS, narrowed kidney arteries] concluded that a shortage of direct comparisons between drug therapy and angioplasty has left important questions unanswered, including which therapy is more likely to improve kidney function.”
- “HHS’ National Institutes of Health has launched a large clinical trial to compare the benefits of angioplasty with stent placement versus drug treatment, but results are not expected until 2010.”

FOR IMMEDIATE RELEASE

Tuesday, October 24, 2006



My Message

- Scientific advancement requires information integration
- In health care, this information integration is critical
- It can improve quality of care, reduce medical errors, and improve economic incentives for effective care
- The mission of AHRQ depends fundamentally on information integration

AND SO DOES YOUR WELL-BEING



Scientific advancement requires information integration

- Clinical Trials—Scientists painstakingly work to have uniformity of observations: subject selection, data collection, methods of analysis
- Retrospective Trials—Scientists work for the same thing, but cannot control the environment. Yet, the environment is the community—where health care is delivered
- Meta-analyses—Scientists summarize and synthesize information from pertinent clinical trials and other studies—making the reader aware of the limits of their information integration. Sum information to get wisdom



In health care, this information integration is critical

- Requires linking patient information with medical knowledge
 - Computerized decision support for alerts, prompts, reminders
 - Description of presenting conditions
 - Allergies, drug contraindications
 - Conditions present on admission (POA)
 - Most current drug information, e.g., Viox
- Requires clear meanings of terms
 - BPH -- Hypertension -- Codes
- Requires clear ordering of drugs, tests, treatments
 - Similar sounds -- Illegible handwriting
- Knowing the right thing to do—and doing it



It can improve quality of care, reduce medical errors, and improve economic incentives for effective care

- Quality indicators—integrate administrative discharge abstract and claims information with clinical data
- Reduce medical errors—Analyze patient safety events and address root causes by providing appropriate remedies—>
 - Computerized physician order entry (drugs, lab tests), staff training, sticky notes
- Economics and Effectiveness—Which treatments are effective for which patients? How much do they cost? Can we pay more for quality performance and get it?



Conclusion One

- Achieving high quality and effective health care for all demands information integration

For evidence-based medical practice



Conclusion Two

- AHRQ relies **critically** on information integration for achieving its mission
 - Undertaking research, development, evaluation, translation, and dissemination

To improve **your** health



My Plea

- Tell us, show us
- How to integrate information—
Better and more effectively



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