Performance data as risk indicators: CQC's Quality and Risk Profile (QRP)

Jennifer Yang-Meslet – Senior Analytical Advisor at the Care Quality Commission, UK

Part 2 and CQC – registration

2000/01 – 2004/05 NHS star ratings	2005/06 – 2009/10 NHS periodic review ('annual health check')	2010/11 – Registration, QRPs and ongoing monitoring of compliance
• Annual retrospective rating on the scale of 0 to 3 stars • Small number of key targets to be achieved • Predominantly absolute measures (i.e. set thresholds to achieve) •Rewards for 3 star trusts; 'naming and shaming' of 0 star trusts • By 2004/05, 72% of trusts were 2 or 3 stars	• Annual retrospective rating on the scale of 'poor' to 'excellent' • Increased breadth and depth, mixing performance indicators and standards • Predominantly absolute measures (i.e. set thresholds to achieve) • 'Naming and shaming' of persistently poor or adequate trusts • By 2008/09, 63% of trusts were good or excellent	• Ongoing, evolving system of evidence and risk based assessment and inspection • No limit to breadth and depth, able to incorporate any data or information • Predominantly relative measures (i.e. comparative indicators of performance) • Updated monthly, and shared with trusts, commissioners and other stakeholders

Registration timeline

April 2010	**NHS provider trusts (c.380 QRPs)**
Oct 2010	**Adult social care and independent healthcare providers (c.25,000 QRPs)**
April 2011	**Primary dental services e.g. dental practices (c.8,000 QRPs)**
April 2012	**Primary medical services e.g. GP practices (c.9,000 QRPs)**

Regulations and outcomes

Health and Social Care Act 2008

28 regulations

28 ‘outcomes’

16 outcomes related to quality and safety

1. Respecting & involving service users

2. Consent to care & treatment

4. Care & welfare of service users

5. Meeting nutritional needs

6. Co-operating with other providers

7. Safeguarding

8. Cleanliness & infection control

9. Management of medicines

10. Safety & suitability of premises

11. Safety & suitability of equipment

12. Requirements relating to workers

13. Staffing

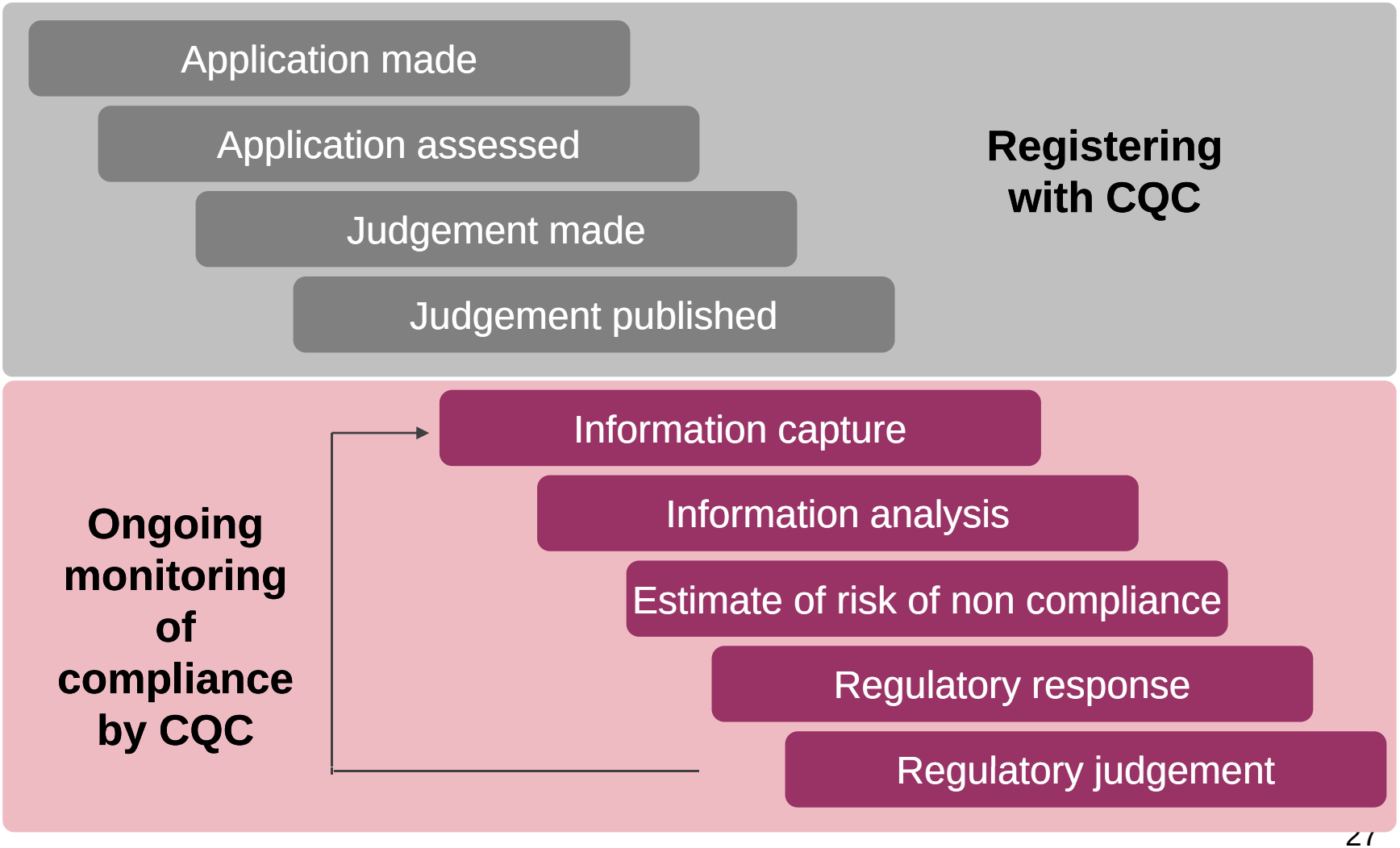
14. Supporting staff

16. Assessing & monitoring quality

17. Complaints

21. Records

Registration process



Overview of QRPs

- Bring together information about a care provider so as to ***estimate risk*** and ***prompt*** front line regulatory activity
- Act as a ***guide*** and ***aid*** CQC's inspectors
- ***Not a judgement*** (or a rating, or a league table) in themselves
- ***Build*** over time (and are never 'perfect')
- Capable of using both ***numeric*** (quantitative) and ***textual*** (qualitative) data
- Essential ***tool*** to ***support*** monitoring of compliance
- ***Help*** inform subsequent judgements and add to the ***knowledge base*** about a care provider

How it works

Takes available data, qualitative and quantitative, and aligns these to the 16 essential standards

Uses a range of analytic techniques to produce z scores on the data – these are categorised and presented

Weights these according to data quality, relevance to the standard and relevance to patient experience

Aggregates the weighted data to allow for colinearity and overdispersion and categorises these into a “dial point”

QRP risk estimates

10 possible dial positions:

Reducing risk of non-compliance

Increasing risk of non-compliance

Some data is available, but it is not sufficient to calculate a risk estimate.

There is no data available to inform this outcome / section.

Key of data items

Quantitative (numeric) data items

Risk estimate category	Description
Much worse than expected	The provider's result is statistically **much worse** than expected – roughly this equates to the provider being outside the 97.5% confidence interval
Worse than expected	The provider's result is statistically **noticeably worse** than expected – roughly this equates to the provider being outside the 95% confidence interval
Tending towards worse than expected	The provider's result is **somewhat worse** than expectation, but not at a level that would mean the observation is notable on its own. However, a pattern of items appearing in this category will increase our estimate of the likelihood of undeclared non-compliance
Similar to expected	The provider's result is broadly in line with expectation
Tending towards better than expected	The provider's result is **somewhat better** than the expected level
Better than expected	The provider's result is statistically **noticeably better** than expectation – roughly this equates to the provider being outside the 95% confidence interval
Much better than expected	The provider's result is statistically **much better** than expected – roughly this equates to the provider being outside the 97.5% confidence interval

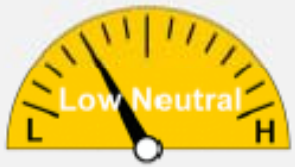
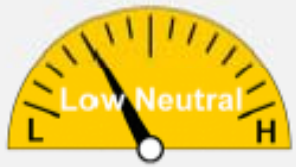
Negative comment

Positive comment

Qualitative (textual) data items

The QRP risk dials

Section 3:Safeguarding and safety

Safeguarding people who use services from abuse	Cleanliness and infection control	Management of medicines
Outcome 7 (R11)	Outcome 8 (R12)	Outcome 9 (R13)
		

Safety and suitability of premises	Safety, availability and suitability of equipment
Outcome 10 (R15)	Outcome 11 (R16)

The underlying information

Underlying Information for: Outcome 8 (R12) Cleanliness and infection control									
Item ID	Description	Data Source	Time Period Start	Time Period End	Comparison with Expected	Value	Numerator Value	Denominator Value	Expected Value
11249	The proportion of respondents to the adult inpatient survey who stated they did not see any posters or leaflets on the ward asking patients and visitors to wash their hands or to use hand-wash gels -	Care Quality Commission , Survey of adult inpatients	01/06/2009	31/08/2009	Much better than expected	0.011	4.83	427.15	0.03
-26	Intelligence from Other Third Party Groups -		01/02/2010		Positive comment	NA	1.00	NA	NA
-26	Intelligence from Other Third Party Groups -		01/02/2010		Positive comment	NA	1.00	NA	NA
-22	Intelligence from NHS Choices -	Patient comments, NHS Choices	15/05/2010		Positive comment	NA	1.00	NA	NA

The additional information

Additional Item Information

Item:	-22
Description:	Intelligence from NHS Choices -
Rationale:	Not given
Datasource:	Patient comments, NHS Choices
Time Period:	15-05-2010
Notes:	Not given
Data Type:	Comments
Comment	Liked - My son was an emergency admission to ward 10, with appendicitis. Positively I can say that the standard of cleanliness was outstanding, and the care and dedication of the night staff and his named nurse was excellent. However I find it difficult to acknowledge as an RGN that the medical staff showed more compassion and empathy than the nurses. Frequently my son's and my request for analgesics were ignored and I felt I was seen as an annoyance as opposed to a concerned parent. - Disliked - Communication with parents and patients within other trusts they have "being with patients" training days, this is to improve empathy and care standards, I feel the nursing sisters and staff should attend! - Advice - I would like to thank his nurse, as his care for my son was excellent, and also the consultant in a & e.
Nature of Comment	Positive comment

Back to Previous Page

Quantitative data sources

- Audit Commission
- CQC
- Counter Fraud and Security Management Service
- Department of Health
- Dr Foster
- East Midlands Ambulance Service
- Endoscopy Global Rating Scale
- Health Protection Agency
- Healthcare Commission
- Information Centre
- Ministry of Justice
- National Cancer Peer Review Programme
- National Patient Safety Agency
- NHS Institute for Innovation and Improvement
- NHS Litigation Authority
- Royal College of Psychiatrists
- UK Newborn Screening Programme
- UK Transplant

Qualitative data sources

- Audit Commission
- CQC – engagement forms, investigations/interventions
- CQC/Ofsted – children's services inspections
- Foundation trust boards of governors
- Learning disability partnership boards
- Local improvement networks (LINks)
- Local safeguarding children boards
- Other service user groups
- Overview and scrutiny committees
- NHS Choices – patient comments

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
- Latest Judgements

Download QRP (PDF)

Quality and Risk Profile (QRP)

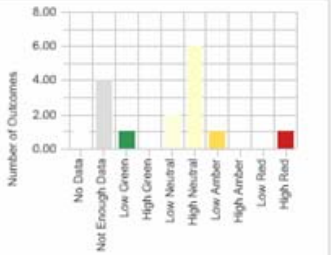
The Care Quality Commission's quality and risk profiles (QRPs) bring together information about a care provider and provide an estimate of risk of non compliance against each of the 16 essential standards of quality and safety.

They are primarily intended as a tool to support the day to day work of CQC's inspectors. Clicking the boxes below provides more detail concerning that aspect of the QRP.

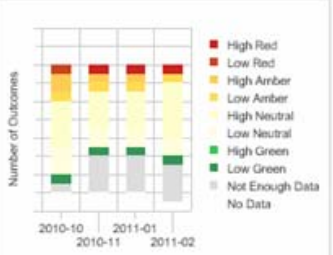
Summary Information

Provider Type	NHS Healthcare Organisation
Date registered with CQC	01/04/2010
Number of regulated activities	6
Number of locations	2
Total no. of data items in QRP	507
No. of qualitative data items	127
No. of quantitative data items	380

Latest Risk Estimates



Risk Estimates Over Time



For Internal Use Only

CQC's Monitoring Programme

No. open cases	0
No. closed cases	16

Notifications Received by CQC

16-1 Unexpected death	1
16-1 Expected death	1
18-2e Abuse or allegation	2
18-2a,b Serious injury	6
18-2f Police incident	1

Contextual Risk

Inherent Risk	N/A
Population Risk	Amber
Situational Risk	Green
Uncertainty Risk	N/A

Latest Judgements

Number of judgements of compliance	11
Number of judgements of minor concern	3
Number of judgements of moderate concern	1
Number of judgements of major concern	1

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
  - Outcome 1
  - Outcome 2
  - Outcome 4
  - Outcome 5
  - Outcome 6
  - Outcome 7
  - Outcome 8
  - Outcome 9
  - Outcome 10
  - Outcome 11
  - Outcome 12
  - Outcome 13
  - Outcome 14
  - Outcome 16
  - Outcome 17
  - Outcome 21
- Risk Estimates Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
- Latest Judgements

Download QRP (PDF)

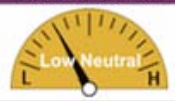
Latest Risk Estimates

The Care Quality Commission's quality and risk profiles (QRPs) bring together information about a care provider and provide an estimate of risk of non compliance against each of the 16 essential standards of quality and safety.

They are primarily intended as a tool to support the day to day work of CQC's inspectors. The table below lists the two most recent risk estimates for each of the 16 standards.

Section | Outcome Name | Go

Section1 - Involvement and information

Outcome Name	Previous Risk Estimate	Latest Risk Estimate	Latest Data Summary
Outcome 1 (R17) Respecting and involving people who use services			Total number of data items = 75 Number of qualitative data items = 5 Number of quantitative data items = 70
Outcome 2 (R18) Consent to care and treatment			Total number of data items = 0 Number of qualitative data items = 0 Number of quantitative data items = 0

Section2 - Personalised care

Outcome Name	Previous Risk Estimate	Latest Risk Estimate	Latest Data Summary
Outcome 4 (R9) Care and welfare of people who use services			Total number of data items = 128 Number of qualitative data items = 38 Number of quantitative data items = 90
Outcome 5 (R14) Meeting nutritional needs			Total number of data items = 9 Number of qualitative data items = 1 Number of quantitative data items = 8
Outcome 6 (R24) Cooperating with other providers			Total number of data items = 9 Number of qualitative data items = 4 Number of quantitative data items = 5

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
  - Outcome 1
  - Outcome 2
  - Outcome 4
  - Outcome 5
  - Outcome 6
  - Outcome 7
  - Outcome 8
  - Outcome 9
  - Outcome 10
  - Outcome 11
  - Outcome 12
  - Outcome 13
  - Outcome 14
  - Outcome 16
  - Outcome 17
  - Outcome 21
- Risk Estimates Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
- Latest Judgements

Download QRP (PDF)

Item ID | Comparison with Expected | Data Source

Data Quality | Patient Experience | Strength of Outcome Mapping | Go

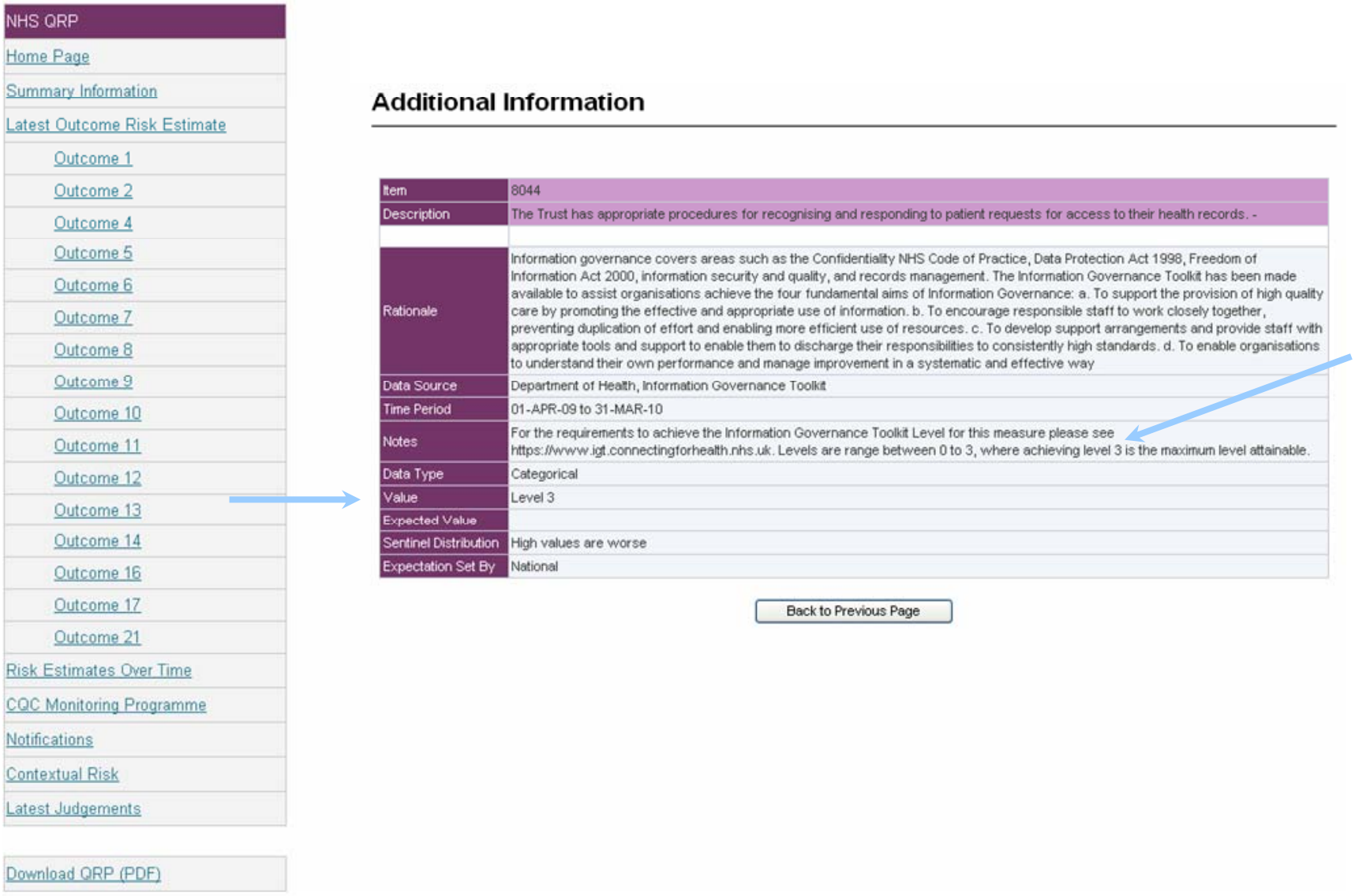
Outcome 1 (R17) Respecting and involving people who use services

These are details of the individual pieces of data that contribute towards the risk estimate for the outcome. Further information can be found on an item by clicking on the "Item ID" number. The data can also be filtered using the prompts.

Much worse than expected	Worse than expected	Tending towards worse than expected	Similar to expected	Tending towards better than expected	Better than expected	Much better than expected
3	8	9	46	3	0	1

Negative comment	Positive comment
3	2

Item ID	Description	Data Source	Time Period Start	Time Period End	Comparison with Expected	Data Quality	Patient Experience	Relevance	EQ.Div & HR Flag	Shared Ext.
7518	PEAT scores for access and external areas - information - Data	National Patient Safety Agency (NPSA), Patient Environment Action Team (PEAT)	04/01/2010	26/03/2010	Similar to expected	Med	Med	Med	TBC	TBC
7531	PEAT score for Privacy and Dignity - confidentiality - Data for	National Patient Safety Agency (NPSA), Patient Environment Action Team (PEAT)	04/01/2010	26/03/2010	Similar to expected	Med	High	High	TBC	TBC
7532	PEAT score for Privacy and Dignity - modesty, dignity and respect -	National Patient Safety Agency (NPSA), Patient Environment Action Team (PEAT)	04/01/2010	26/03/2010	Tending towards better than expected	Med	High	High	TBC	TBC
	The Trust ensures that patients are	Department of								


NHS QRP
Home Page
Summary Information
Latest Outcome Risk Estimate
Outcome 1
Outcome 2
Outcome 4
Outcome 5
Outcome 6
Outcome 7
Outcome 8
Outcome 9
Outcome 10
Outcome 11
Outcome 12
Outcome 13
Outcome 14
Outcome 16
Outcome 17
Outcome 21
Risk Estimates Over Time
CQC Monitoring Programme
Notifications
Contextual Risk
Latest Judgements
Download QRP (PDF)
Additional Information
Item 8044
Description The Trust has appropriate procedures for recognising and responding to patient requests for access to their health records. -
Rationale Information governance covers areas such as the Confidentiality NHS Code of Practice, Data Protection Act 1998, Freedom of Information Act 2000, information security and quality, and records management. The Information Governance Toolkit has been made available to assist organisations achieve the four fundamental aims of Information Governance: a. To support the provision of high quality care by promoting the effective and appropriate use of information. b. To encourage responsible staff to work closely together, preventing duplication of effort and enabling more efficient use of resources. c. To develop support arrangements and provide staff with appropriate tools and support to enable them to discharge their responsibilities to consistently high standards. d. To enable organisations to understand their own performance and manage improvement in a systematic and effective way
Data Source Department of Health, Information Governance Toolkit
Time Period 01-APR-09 to 31-MAR-10
Notes For the requirements to achieve the Information Governance Toolkit Level for this measure please see https://www.igt.connectingforhealth.nhs.uk. Levels are range between 0 to 3, where achieving level 3 is the maximum level attainable.
Data Type Categorical
Value Level 3
Expected Value
Sentinel Distribution High values are worse
Expectation Set By National
Back to Previous Page

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
- Latest Judgements

Download QRP (PDF)

Quality and Risk Profile (QRP)

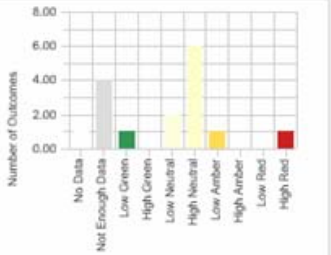
The Care Quality Commission's quality and risk profiles (QRPs) bring together information about a care provider and provide an estimate of risk of non compliance against each of the 16 essential standards of quality and safety.

They are primarily intended as a tool to support the day to day work of CQC's inspectors. Clicking the boxes below provides more detail concerning that aspect of the QRP.

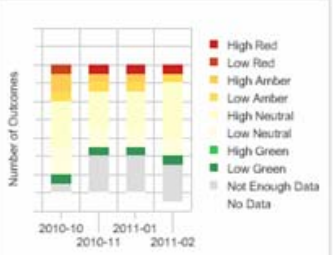
Summary Information

Provider Type	NHS Healthcare Organisation
Date registered with CQC	01/04/2010
Number of regulated activities	6
Number of locations	2
Total no. of data items in QRP	507
No. of qualitative data items	127
No. of quantitative data items	380

Latest Risk Estimates



Risk Estimates Over Time



For Internal Use Only

CQC's Monitoring Programme

No. open cases	0
No. closed cases	16

Notifications Received by CQC

16-1 Unexpected death	1
16-1 Expected death	1
18-2e Abuse or allegation	2
18-2a,b Serious injury	6
18-2f Police incident	1

Contextual Risk

Inherent Risk	N/A
Population Risk	Amber
Situational Risk	Green
Uncertainty Risk	N/A

Latest Judgements

Number of judgements of compliance	11
Number of judgements of minor concern	3
Number of judgements of moderate concern	1
Number of judgements of major concern	1

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
  - Outcome Risk Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
- Latest Judgements

Download QRP (PDF)

Risk Estimate Over Time

	Number of Outcomes with each Score							
Dial	2010-03	2010-07	2010-08	2010-09	2010-10	2010-11	2011-01	2011-02
High Red	4	0	1	1	0	1	1	1
Low Red	1	1	0	0	1	0	0	0
High Amber	1	0	1	1	2	1	1	0
Low Amber	2	2	2	2	1	1	1	1
High Neutral	2	4	3	4	5	4	4	6
Low Neutral	3	4	5	4	3	2	2	2
High Green	0	1	1	1	0	0	0	0
Low Green	1	1	0	0	1	1	1	1
Not Enough Data	2	3	1	1	1	4	4	4
No Data	0	0	2	2	2	2	2	1

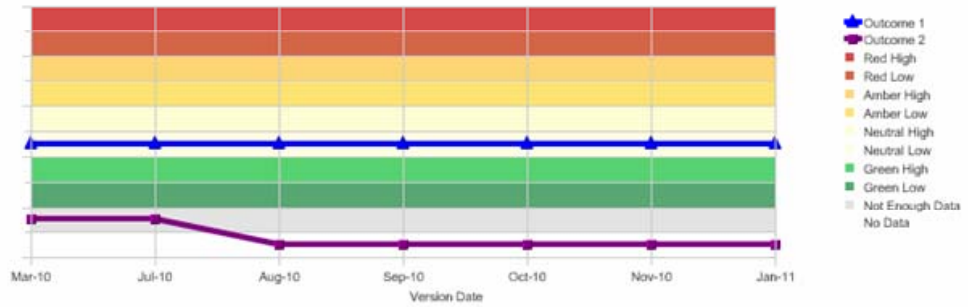
NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
- Outcome Risk Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
- Latest Judgements

Download QRP (PDF)

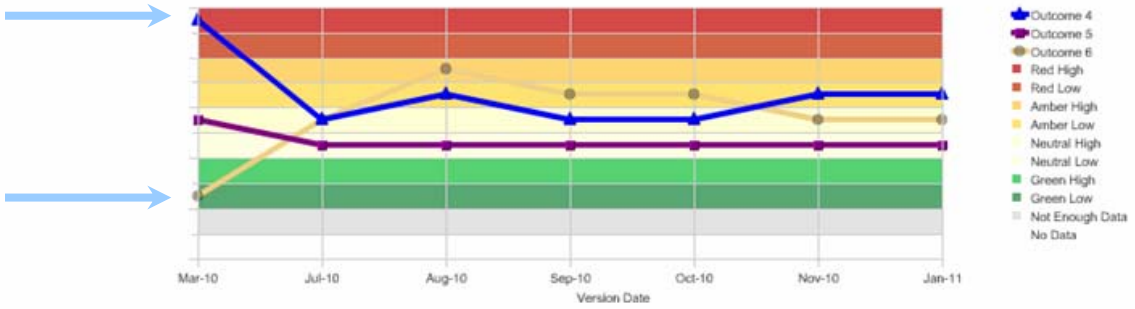
Risk Estimate Over Time (Outcome Level)

Section 1 - Information & Involvement



	Mar-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Jan-11
Outcome 1 Text	Low Neutral	Low Neutral	Low Neutral	Low Neutral	Low Neutral	Low Neutral	Low Neutral
Outcome 2 Text	Not Enough Data	Not Enough Data	No Data	No Data	No Data	No Data	No Data

Section 2 - Personalised Care & Treatment



	Mar-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Jan-11
Outcome 4 Text	High Red	High Neutral	Low Amber	High Neutral	High Neutral	Low Amber	Low Amber
Outcome 5 Text	High Neutral	Low Neutral	Low Neutral	Low Neutral	Low Neutral	Low Neutral	Low Neutral
Outcome 6 Text	Low Green	High Neutral	High Amber	Low Amber	Low Amber	High Neutral	High Neutral

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
- Latest Judgements

Download QRP (PDF)

Quality and Risk Profile (QRP)

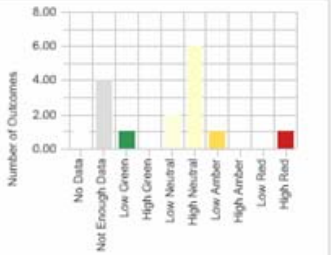
The Care Quality Commission's quality and risk profiles (QRPs) bring together information about a care provider and provide an estimate of risk of non compliance against each of the 16 essential standards of quality and safety.

They are primarily intended as a tool to support the day to day work of CQC's inspectors. Clicking the boxes below provides more detail concerning that aspect of the QRP.

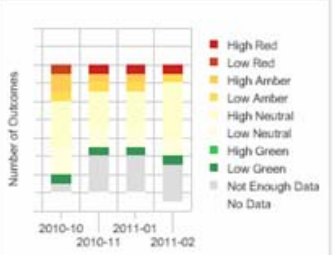
Summary Information

Provider Type	NHS Healthcare Organisation
Date registered with CQC	01/04/2010
Number of regulated activities	6
Number of locations	2
Total no. of data items in QRP	507
No. of qualitative data items	127
No. of quantitative data items	380

Latest Risk Estimates



Risk Estimates Over Time



For Internal Use Only

CQC's Monitoring Programme

No. open cases	0
No. closed cases	16

Notifications Received by CQC

16-1 Unexpected death	1
16-1 Expected death	1
18-2e Abuse or allegation	2
18-2a,b Serious injury	6
18-2f Police incident	1

Contextual Risk

Inherent Risk	N/A
Population Risk	Amber
Situational Risk	Green
Uncertainty Risk	N/A

Latest Judgements

Number of judgements of compliance	11
Number of judgements of minor concern	3
Number of judgements of moderate concern	1
Number of judgements of major concern	1

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
  - Inherent Risk
  - Situational Risk
  - Population Risk
  - Uncertainty Risk
- Latest Judgements

Download QRP (PDF)

Contextual Risk

This section provides risk attributable to an organisation not by its performance but by its inherent and situational nature, the population it serves and the completeness of the information we hold for these three areas. Further details can be obtained by selecting the specific risk type below.

Organisations are not evaluated on their contextual risk estimates, rather they are intended to provide information to support the understanding of the outcome and section level risk estimates.

Inherent Risk	The risk attributable to the care provider by virtue of its organisational context	Green
Situational Risk	The risk attributable to the care provider by virtue of its organisational context	Neutral
Population Risk	Features in the local population that have been shown to affect care outcomes or access to care	Green
Uncertainty Risk	Assessment of the completeness of population, situational and inherent risk	N/A

NHS QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
- CQC Monitoring Programme
- Notifications
- Contextual Risk
  - Inherent Risk
  - Situational Risk
  - Population Risk
  - Uncertainty Risk
- Latest Judgements

Download QRP (PDF)

Inherent Risk

The items below indicate how likely it is a trust will be risky due to its inherent attributes. The description and rationales for each item is shown along with the risk posed by each activity.

Inherent Risk	Green

Likely to be risky	Somewhat likely to be risky	Unlikely to be risky	Not Applicable
3	2	12	1

Item ID	Description	Data Source	Rationale	Time Period	Value
IRADM001	An organisation's ratio of elective to nonelective admissions. This indicator separates out specialist from non-specialist acute hospitals.	Hospital Episode Statistics (HES)	Elective procedures have been shown to be less risky than nonelective ones as elective patients are more likely to be in better condition when admitted, be treated by a more experienced physician and have higher long term survival rates.	01/10/2009 - 30/09/2010	Likely to be risky
IRHRP001	The number of children's (0-17) admissions as a proportion of total admissions. This indicator is a member of the "high risk patients" suite of indicators and should be considered in conjunction with IRHRP001-IRHRP003.	Hospital Episode Statistics (HES)	Hospitals without dedicated paediatric facilities should only admit children as day cases or one night surgical care. Children under three years of age must only be accepted in an inpatient or outpatient unit with full paediatric nursing and medical staff	01/10/2009 - 30/09/2010	Unlikely to be risky
IRHRP002	The number of admissions for trauma to head, thorax and abdomen as a proportion of total admissions. This indicator is a member of the "high risk patients" suite of indicators and should be considered in conjunction with IRHRP001-IRHRP003.	Hospital Episode Statistics (HES)	Trauma injuries are one of the leading causes of death and secondary morbidity in western societies. Additionally, these injuries are very difficult to diagnose, and often require prompt treatment, and thus patients with head, thorax or abdomen injuries are considered to be high risk.	01/10/2009 - 30/09/2010	Somewhat likely to be risky

Combined QRP

- Home Page
- Summary Information
- Latest Outcome Risk Estimate
- Risk Estimates Over Time
- Notifications
- Latest Judgements

Download QRP (PDF)

Provider Code	Provider Name	Version	Version Date
RDD	Basildon and Thurrock University Hospitals NHS Foundation Trust	3.0	01/03/2011

Latest Judgements

Details of our inspectors view on the level of compliance for each regulated activity at each location.

Location Assessment: Stewart House

Outcome	Regulated Activities	Outcome Compliance	Assessment Date
Outcome 1	Personal care	Compliant	29/07/2010
Outcome 2	Personal care	Minor Concern	29/07/2010
Outcome 4	Personal care	Compliant	29/07/2010
Outcome 5	Personal care	Minor Concern	29/07/2010
Outcome 6	Personal care	Compliant	29/07/2010
Outcome 7	Personal care	Compliant	29/07/2010
Outcome 8	Personal care	Compliant	29/07/2010
Outcome 9	Personal care	Compliant	29/07/2010
Outcome 10	Personal care	Compliant	29/07/2010
Outcome 11	Personal care	Major Concern	29/07/2010
Outcome 12	Personal care	Compliant	29/07/2010
Outcome 13	Personal care	Compliant	29/07/2010
Outcome 14	Personal care	Compliant	29/07/2010
Outcome 16	Personal care	Moderate Concern	29/07/2010
Outcome 17	Personal care	Minor Concern	29/07/2010
Outcome 21	Personal care	Compliant	29/07/2010

Updating and sharing the QRPs

- QRPs are updated regularly - monthly or more often depending upon data feeds

- **Currently shared** with NHS providers in pdf format
  - shared with providers as they are updated – so that we are all working from the same data
  - NHS trusts have had access to their QRP since September 2010 via a .pdf. This has been made available to commissioners, other regulators and the Department of Health.

- To be shared via the web from **summer 2011**, as part of '**QRP on-line**' project.

- Aim is to make QRPs more ***accessible*** and ***interactive***

Key messages

Two very different ways of using information and data

Culture and history can affect how a country uses data

It is crucial to communicate to the wider public on care
Content - Format - User Voice

It is crucial to work alongside providers to improve quality of care

Thank you
Any questions?