Indian Health Service
Fact Sheet

National Quality Accountability Dashboard

The National Quality Accountability Dashboard will enable the Indian Health Service to report key performances on key performance data in a succinct and easily viewed display to monitor and improve quality of care.

Background: The mission of the Indian Health Service is to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. Quality of care is an agency priority, and IHS is committed to continuing our efforts to assure a high-performing health care delivery system for American Indian and Alaska Native people. Quality measurement is an essential part of providing safe and effective, patient-centered care. Dashboards are a useful tool for easily displaying and monitoring key performance indicators across the organization.

In 2016, the IHS assessed options for implementing a system-wide data monitoring process to strengthen quality assurance and improvement activities, while developing the IHS 2016-2017 Quality Framework. Within the Framework, IHS set out to design and implement a quality dashboard to define key areas of performance to support the agency’s oversight and quality management functions. A core set of quality measures in a dashboard format would set agency-wide standards, improve the oversight of quality of care, enable the agency to make evidence-based, strategic decisions, and demonstrate transparency to the public.

The National Quality Accountability Dashboard is the result of a collaborative process that reflects input from a diverse group of subject matter experts from across IHS in the areas of clinical and public health care, quality improvement, and health informatics.

Dashboard Overview: The quality dashboard identifies key domains of quality for healthcare systems:

- Quality (efficient, effective, and equitable)
- Accreditation
- Workforce
- Patient-centered care
- Safety
- Timely care

The dashboard utilizes the following measures within these domains:

- Ambulatory Accreditation
- Hospital Accreditation
- Patient Centered Medical Home Designation
- Ambulatory facilities with a Quality Improvement program
• Employee Influenza Vaccination
• Facilities Improving Safety
• Facilities Reporting on Access to Care in the Emergency Department
• Facilities with an Emergency Preparedness Plan
• Facilities with an Opioid Prescribing Policy
• Participation in the Federal Employee Viewpoint Survey
• Participation in the Hospital Improvement and Innovation Network Participation in the Quality Improvement Organization (Planned for future reporting)
• Facilities Improving Patient Experience (Planned for future reporting)
• Facilities Meeting Access Standards (Planned for future reporting)

**Reporting:** These measures will require quarterly, semi-annual, or annual reporting. Reporting for all measures is required for IHS-run hospitals, and reporting for a subset of measures is required for ambulatory health centers and Youth Regional Treatment Centers. Each of the IHS Area Offices with IHS direct service facilities will report and validate data for those sites.

**Monitoring:** Progress will be monitored at the service unit, Area and Headquarters levels. Technical assistance using quality improvement science, principles, and practices will be provided by subject matter experts to improve performance.

**Communication and Transparency:** The dashboard will eventually be made available on the ihs.gov website for public viewing.