Promoting Knowledge Transfer for Quality Improvement Interventions: QI-Minimum Quality Criteria Set (QI-MQCS) Validity and Reliability LV Rubenstein^{1,2}, S Hempel¹, MS Danz^{1,3}, JL Liu¹, R Foy⁵, YW Lim⁴, A Motala¹, PG Shekelle^{1,2,3} from ¹RAND Corp.; ²University of California LA; ³US Veterans Affairs; ⁴National University of Singapore; ⁵University of Leeds, UK

Objectives

Develop valid & reliable methods for Quality Improvement Intervention (QII) evidence synthesis: search, screening, & critical appraisal

QI-MQCS Critical Appraisal Tool



Minimum Quality Criteria Set (MQCS) – Version 1.0

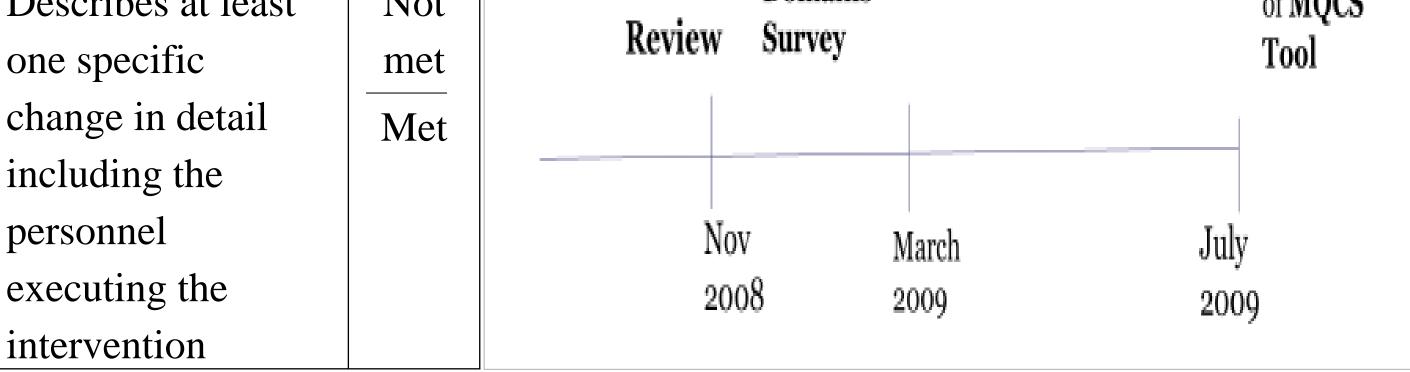
Intervention:

ID: _____

Reviewer:

ntervention:	Outcome:		
Domain	Minimum standard	Score	Validation Process
 <u>1. Organizational Motivation:</u> Organizational problem, reason, or motivation for the intervention Consider quality of care problems; organizational problems; regulations, legal constraints, and external financial incentives at the target organization; or organizational 	Names or describes at least one motivation for the organization's participation in the intervention	Not met Met	Survey & Survey & Telephone Telephone Face to Face Consensus Panel Consensus 9 Month Panel Panel Panel Process
 motivation. <u>2. Intervention Rationale:</u> Rationale linking the intervention to its expected effects Consider citations of theories, logic models, or existing empirical evidence that links the intervention to its expected effects. 	Names or describes a rationale linking at least one central intervention component to	Not met Met	QII DefinitionElectronic Search, Screener, Strategy & Preliminary CriteriaQuality CriteriaStudy Team ProcessImage: Construction of the second
<u>3. Intervention Description:</u> Change in organizational or provider behavior	intended effects Describes at least one specific	Not met	Existing SQUIREQualityIterativeCriteriaDomainsCriteriaDevelopmentOf MQCSSurveyTool

• Consider the presented details that describe the change in the delivery of care, provider behavior, or structure of the organization needed to replicate the evaluated intervention including the involved key personnel.



16 QI-MQCS Domains:

organizational motivation, intervention rationale, intervention description, organizational characteristics, implementation, study design, comparator, data source, timing, adherence-fidelity, health outcomes, organizational readiness, penetration/reach, sustainability, spread, and limitations

Reliability Results

- Used 54 diverse electronically searched, hand screened articles
- Median inter-rater agreement (all items and articles) K = 0.57; reviewer agreement = 83%
- Items conceptually independent: correlation mean 0.19, all below 0.60
- Two domains were low outliers for reliability:
 - \succ Spread (K = 0.13; Agreement 67%)

 \succ Adherence/Fidelity (K = 0.9; Agreement 56%)

onclusions



QI-MQCS is the first set of tools for QII evidence synthesis article selection

- and quality review that is rigorously tested for both reliability and validity
- QI-MQCS tools and training materials:
 - \succ Provide a basis for more comprehensive, less biased evidence review of QII's
 - \succ Can help target and improve article quality in the identified areas of weakness