#### NATIONAL QUALITY FORUM

# CALL FOR NOMINATIONS TO STEERING COMMITTEE END STAGE RENAL DISEASE

The National Quality Forum (NQF) is seeking nominations for members of a Steering Committee for a new project to endorse additional performance measures for End Stage Renal Disease (ESRD).

**BACKGROUND:** Currently, more than half a million American lives have been altered by a diagnosis of end state renal disease (ESRD), a serious condition that is almost always fatal unless treated with dialysis or transplantation. ESRD is the only disease-specific condition that is explicitly guaranteed Medicare coverage, with Medicare costs for the condition reaching \$24 billion in 2007. In the same year, all-cause mortality rates for ESRD were roughly 6-8 times higher for dialysis patients than for the general population.<sup>1</sup>

In 2007, the incidence rate of ESRD in Americans fell 2.1 percent to equal 354 per million population (more than 527,000 cases)—the first decline in the rate since 1995. Racial and ethnic differences persist: In 2007, rates in the African American and Native American populations were 3.7 and 1.8 times higher, respectively, than the rate in the Caucasian population, and the rate in the Hispanic population was 1.5 times higher than the rate in the non-Hispanic population.<sup>2</sup>

In 2008, NQF endorsed 25 measures for ESRD care in the areas of anemia; dialysis adequacy; mineral metabolism; vascular access; influenza immunization; mortality; and patient education, perception of care, and quality of life. These measures were intended to facilitate efforts to improve the quality of care delivered to ESRD patients in all care settings, including dialysis facilities, in-home settings, physician offices, and hospitals.

**STEERING COMMITTEE:** A Steering Committee will oversee the development of a draft consensus report, including recommendation of which measures should be endorsed as consensus standards for ESRD. Steering Committee members should not have a vested interest in the candidate standards. This includes employees or contractors of measure owners/developers; members of workgroups that developed the measures; and members of committees that approve measures, or direct or set policy for measure development. Please see the NQF website for additional information about the conflict of interest policy. All potential Steering Committee members must disclose any current and past activities during the nomination process.

NQF is seeking nominations for members of a Steering Committee with various stakeholder perspectives and expertise in ESRD care, specifically the transition from stage 4 chronic kidney disease (CKD) to ESRD and successful renal replacement therapy. Specific areas of expertise include, but are not limited to, mineral metabolism, vascular access-related infections, anemia management and fluid weight management. Additionally, there is a particular need for expertise in pediatric hemodialysis.

As with all NQF projects, the Steering Committee will work with NQF staff to develop specific project plans, provide advice about the subject, ensure input is obtained from relevant stakeholders, review draft products, and recommend specific measures and research priorities to NQF Members for consideration under the Consensus Development Process.

NOMINATIONS DUE BY SEPTEMBER 30, 2010, 6:00 PM EST

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**TIME COMMITMENT:** The Steering Committee will meet via conference call for orientation on *Thursday, December 2, 2010.* Dial-in instructions and materials will be sent at a later date.

The Steering Committee will also meet in person for a two-day meeting on **Tuesday and Wednesday, January 11 and 12, 2011,** in Washington, DC. Additionally, Steering Committee members may meet approximately three to four times by conference call for two hours each and be asked to review materials and provide feedback throughout the process. Follow-up conference calls may also be needed.

NQF will be initiating an endorsement maintenance project on the topic of renal disease in early 2011. Members of the Steering Committee appointed for the ESRD project may also be asked to continue to serve for the endorsement maintenance project if willing.

**CONSIDERATION AND SUBSTITUTION:** Priority will be given to nominations from NQF Members. Please note that nominations are to an individual, not an organization, therefore "substitutions" of other individuals from an organization at conference calls and meetings are not permitted.

**MATERIAL TO SUBMIT:** Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve. To be considered for appointment to the Steering Committee, please send the following information:

- a completed Nomination Form;
- confirmation of availability to participate on the December 2, 2010, orientation call **AND** the January 11-12, 2011, in-person meeting;
- a 2-page letter of interest and a 100-word maximum biography, highlighting experience/knowledge relevant to the expertise described above and involvement in candidate standard development;
- curriculum vitae or list of relevant experience (e.g., publications) up to 20 pages; and
- completed Disclosure of Interest form.

Materials should be submitted via e-mail only to <a href="mailto:esrd@qualityforum.org">esrd@qualityforum.org</a> with the subject line "ESRD Nominations."

**DEADLINE FOR SUBMISSION:** All nominations *must* be submitted electronically via the online submission form by **6:00 pm EST on September 30, 2010.** 

**CONTACT INFORMATION:** For more information, contact Lauren Richie at 202-783-1300 or esrd@qualityforum.org. Thank you for your assistance with this project!

#### NOTES:

 U.S. Renal Data System, USRDS 2009 Annual Data Report: Atlas of End-Stage Renal Disease in the United States, Bethesda, MD: National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda; 2009. Available at www.usrds.org/atlas.htm Last accessed July 2010.

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2. Vassalotti JA, Stevens LA, Levey AS, Testing for chronic kidney disease: A position

statement from the National Kidney Foundation, Am J Kidney Dis, 2007;50(2):169-344.