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QUALITY FORUM**

Driving measurable health  
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# Geriatrics and Palliative Care, Fall 2020 Measure Review Cycle

## Standing Committee Measure Evaluation Meeting

Katie Goodwin, Director

Erin Buchanan, Manager

Mike DiVecchia, Project Manager

Ngozi Ihenacho, Analyst

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# Welcome

## Housekeeping Reminders – RingCentral slide

- This is a RingCentral meeting with audio and video capabilities
- URL: <https://meetings.ringcentral.com/j/1488173137>
- Optional: Dial +1(470)-869-2200 and enter Meeting ID: 148 817 3137
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
  - ▣ Chat box: to message NQF staff or the group
  - ▣ Raise hand: to be called upon to speak
- We will conduct a Committee roll call once the meeting begins

If you are experiencing technical issues, please contact the NQF project team at [palliative@qualityforum.org](mailto:palliative@qualityforum.org)

## Project Team



**Kathryn  
Goodwin, MS  
Director**



**Erin  
Buchanan,  
MPH  
Manager**



**Ngozi  
Ihenacho,  
MPH  
Analyst**



**Mike  
DiVecchia,  
Project  
Manager**

## Agenda

- Introductions and Disclosures of Interest
- Overview of Evaluation Process and Voting Process
- Voting Test
- Measures Under Review
- Consideration of Candidate Measures
- NQF Member and Public Comment
- Next Steps
- Adjourn

# Introductions and Disclosures of Interest

## Geriatrics & Palliative Care Fall 2020 Standing Committee

- Sean Morrison, MD (co-chair)
- Deborah Waldrop, PhD, LMSW, ACSW (co-chair)
- Sree Batt, MD
- Samira Beckwith, LCSW, FACHE, LHD
- Amy Berman, BSN
- Cleanne Cass, DO, FAAHPM, FAAFP
- Jeff Garland, DMin, Ed.S, BCC - PCHAC
- Marian Grant, DNP, RN
- George Handzo, BCC, CSSBB
- Suzanne Johnson, MPH, RN
- Arif Kamal, MD, MBA, MHS, FACP, FAAHPM
- Kate Lichtenberg, DO, MPH, FAAFP
- Kelly Michelson, MD, MPH, FCCM, FAP
- Janice Knebl, DO, MBA, FACOI, FACP
- Christopher Laxton, CAE
- Douglas Nee, Pharm D, MS
- Laura Porter, MD
- Lynn Reinke, PhD, ARNP, FAAN
- Tracy Schroepfer, PhD, MSW
- Linda Schwimmer
- Christine Seel Ritchie, MD, MSPH
- Janelle Shearer, RN, BSN, MA, CPHQ
- Karl Steinberg, MD, CMD, HMDC
- Paul Tatum, MD, MSPH, CMD, FAAHPM, AGSF
- Sarah Thirwell, MSc, MSc(A), RN, CHPN, CHPCA, AOCNS

# Overview of Evaluation Process and Voting Process





## Roles of the Standing Committee During the Evaluation Meeting

- Act as a proxy for the NQF multistakeholder membership
- Evaluate each measure against each criterion
  - ▣ Indicate the extent to which each criterion is met and rationale for the rating
- Respond to comments submitted during the public commenting period
- Make recommendations regarding endorsement to the NQF membership
- Oversee the portfolio of Geriatrics and Palliative Care measures



## Meeting Ground Rules

### **During the discussions, Committee members should:**

- Be prepared, having reviewed the measures beforehand
- Base evaluation and recommendations on the measure evaluation criteria and guidance
- Remain engaged in the discussion without distractions
- Attend the meeting at all times
- Keep comments concise and focused
- Allow others to contribute



## Process for Measure Discussion and Voting

- Brief introduction by measure developer (3-5 minutes)
- Lead discussants will begin Committee discussion for each criterion by:
  - ▣ Briefly explaining information on the criterion provided by the developer
  - ▣ Providing a brief summary of the pre-meeting evaluation comments
  - ▣ Emphasizing areas of concern or differences of opinion
  - ▣ Noting, if needed, the preliminary rating by NQF staff
    - » This rating is intended to be used as a guide to facilitate the Committee's discussion and evaluation.
- Developers will be available to respond to questions at the discretion of the Committee
- Full Committee will discuss, then vote on the criterion, if needed, before moving on to the next criterion



## Endorsement Criteria

- **Importance to Measure and Report (Evidence and Performance Gap):** Extent to which the measure focus is evidence-based and important to making significant gains in healthcare quality where there is variation in or overall less-than-optimal performance (**must-pass**).
- **Scientific Acceptability (Reliability and Validity):** Extent to which the measure produces consistent (reliable) and credible (valid) results about the quality of care when implemented (**must-pass**).
- **Feasibility:** Extent to which the specifications require data that are readily available or could be captured and implemented without undue burden
- **Usability and Use:** Extent to which the measure is being used for both accountability and performance improvement to achieve the goal of high-quality, efficient healthcare (**must-pass** for maintenance measures).
- **Comparison to related or competing measures:** If a measure meets the above criteria and there are endorsed or new related measures or competing measures, the measures are compared to address harmonization and/or selection of the best measure.



## Voting on Endorsement Criteria

- Votes will be taken after the discussion of each criterion
- **Importance to Measure and Report**
  - ▣ Vote on Evidence (must pass)
  - ▣ Vote on Performance Gap (must pass)
  - ▣ Vote on Rationale - Composite measures only
- **Scientific Acceptability Of Measure Properties**
  - ▣ Vote on Reliability (must pass)
  - ▣ Vote on Validity (must pass)
  - ▣ Vote on Quality Construct - Composite measures only
- **Feasibility**
- **Usability and Use**
  - ▣ Use (must pass for maintenance measures)
  - ▣ Usability



## Voting on Endorsement Criteria (continued)

- **Related and Competing Discussion**
- **Overall Suitability for Endorsement**
- **Procedural Notes**
  - ▣ If a measure fails on one of the must-pass criteria, there is no further discussion or voting on the subsequent criteria for that measure; Committee discussion moves to the next measure.
  - ▣ If consensus is not reached, discussion continues with the next measure criterion.



## Achieving Consensus

- Quorum: 66% of active committee members (17 of 25 members).

Vote	Outcome
Greater than 60% yes	Pass/Recommended
40% - 60% yes	Consensus Not Reached (CNR)
<40% yes	Does Not Pass/Not Recommended

- “Yes” votes are the total of high and moderate votes.
- CNR measures move forward to public and NQF-member comment and the Committee will revote during the post-comment web meeting.
- Measures which are not recommended will also move on to public and NQF-member comment, but the Committee will not revote on the measures during the post comment meeting unless the Committee decides to reconsider them based on submitted comments or a formal reconsideration request from the developer.

## Committee Quorum and Voting

- Please let staff know if you need to miss part of the meeting.
- We must have quorum to vote. Discussion may occur without quorum.
- If we do not have quorum at any point during the meeting, live voting will stop, and staff will send a survey link to complete voting.
  - ▣ Committee member votes must be submitted within 48 hours of receiving the survey link from NQF staff.
- If a Committee member leaves the meeting and quorum is still present, the Committee will continue to vote on the measures. The Committee member who left the meeting will not have the opportunity to vote on measures that were evaluated by the Committee during their absence.





# Evaluation Process Questions?

# Voting Test

# Measures Under Review

## NQF Scientific Methods Panel

- The Panel, consisting of individuals with methodologic expertise, was established to help ensure a higher-level evaluation of the scientific acceptability of complex measures.
- The Panel's comments and concerns are provided to developers to further clarify and update their measure submission form with the intent of strengthening their measures to be evaluated by the Standing Committee.
- Certain measures that do not pass reliability and/or validity are eligible to be pulled by a standing committee member for discussion and revote.



## Fall 2020 Cycle Measures

### ■ 4 Maintenance Measures for Committee Review

- ▣ 0209: Comfortable Dying Pain Brought to a Comfortable Level Within 48 hours of Initial Assessment
- ▣ 0326: Advance Care Plan
- ▣ 3235: Hospice and Palliative Care Composite Process Measure
- ▣ 1623: Bereaved Family Survey

## NQF Scientific Methods Panel Review

- The Scientific Methods Panel independently evaluated the Scientific Acceptability of these measures:
  - ▣ 3235: Hospice and Palliative Care Composite Process Measure
  - ▣ 1623: Bereaved Family Survey
- Both measures passed the SMP Review

# Consideration of Candidate Measures

## Measure Sent Back to the Committee by Consensus Standards Approval Committee (CSAC)

### ■ **1623: Bereaved Family Survey**

#### ■ **Measure Steward:** U.S. Department of Veterans Affairs

» Maintenance

#### ■ **Brief Description of Measure:**

» This measure calculates the proportion of Veteran decedent's family members who rate overall satisfaction with the Veteran decedent's end-of-life care in an inpatient setting as "Excellent" versus "Very good", "good", "fair", or "poor".

- Although the Standing Committee recommended this measure for endorsement during the Fall 2019 cycle, CSAC raised concerns about how the Use criterion was applied.
- The CSAC voted to overturn the Committee's recommendation for continued endorsement and has returned 1623 to the Committee for reconsideration.
- The Committee will discuss and revote on the Use criterion and Overall Suitability for endorsement only.





## 0326: Advance Care Plan

- **Measure Steward:** National Committee for Quality Assurance
  - ▣ Maintenance
- **Brief Description of Measure:**
  - ▣ Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan.

# **NQF Member and Public Comment**

# Next Steps



## Measure Evaluation Process After the Measure Evaluation Meeting

- Staff will prepare a draft report detailing the Committee's discussion and recommendations
  - ▣ This report will be released for a 30-day public and member comment period
- Staff will compile all comments received into a comment table which is shared with developers and Committee members
- Post-comment call: The Committee will reconvene for a post-comment call to discuss comments submitted and responses
- Staff will incorporate comments and responses to comments into the draft report in preparation for the CSAC meeting
- CSAC meets to make final endorsement decisions
- Opportunity for public to appeal endorsement decision

# Activities and Timeline – Fall 2020 Cycle

\*All times ET

Meeting	Date, Time
Measure Evaluation Web Meeting #2	February 18, 2021 3:00-5:00PM
Draft Report Comment Period	April 1, 2021 – April 30, 2021
Committee Post-Comment Web Meeting	June 6, 2021 3:00-5:00PM
CSAC Review	June 29-30, 2021
Appeals Period (30 days)	July 7, 2021 – August 5, 2021



## Spring 2021 Cycle Updates

- No measures were submitted for the Spring 2021 cycle
- The Standing Committee will convene for a topical web meeting (topic to be determined)



## Project Contact Info

- Email: [palliative@qualityforum.org](mailto:palliative@qualityforum.org)
- NQF phone: 202-783-1300
- Project page: [www.qualityforum.org/Geriatrics and Palliative Care.aspx](http://www.qualityforum.org/Geriatrics_and_Palliative_Care.aspx)
- SharePoint site: <http://share.qualityforum.org/Projects/GeriatricsPalliativeCare/SitePages/Home.aspx>

# Questions?



**THANK YOU.**

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