



## CALL FOR NOMINATIONS TO HEALTH AND WELL-BEING<sup>1</sup> STANDING COMMITTEE

### BACKGROUND

Social, environmental, and behavioral factors can have significant impact on health outcomes and economic stability, and these along with other upstream determinants contribute to 60 percent of deaths in the United States; yet only 3 percent of national health expenditures is spent on prevention, while 97 percent is spent on healthcare services. Population health includes a focus on health and well-being, along with disease and illness, prevention and health promotion, and disparities in outcomes and improvement activities within a group and/or among groups. Developing strategies to strengthen the measurement and analysis of health and well-being given its multi-dimensional focus can be best accomplished using a collaborative approach that includes public health, healthcare delivery systems, and other key sectors whose policies, practices, and procedures influence health. Using the right measures can determine how successful initiatives are in reducing mortality and excess morbidity and to help focus future work on improving population health in appropriate areas.

As an extension of NQF's most recent Population Health Endorsement Maintenance project, which was informed by the National Quality Strategy's (NQS) three-tiered approach to working with communities to promote healthy living and well-being and the Jacobson and Teutsch commissioned paper, "[Integrated Approaches for Defining and Measuring Total Population Health](#)" this current Health and Well-being project seeks to identify and endorse measures that can be used to assess health and well-being at all levels of analysis, including healthcare providers and communities. The project will evaluate measures that assess health-related behaviors, community-level indicators of health and disease, primary prevention and screening, practices to promote healthy living, community interventions; and modifiable social, economic, environmental determinants of health with demonstrable relationship to health and well-being.

### COMMITTEE CHARGE

A multi-stakeholder Standing Committee will be established to evaluate newly submitted measures and measures undergoing maintenance review and make recommendations for which measures should be endorsed as consensus standards. This Committee will work to identify and endorse new performance measures for accountability and quality improvement that specifically address health and well-being. Measures, including those focused on outcomes or processes that assess health-related behaviors, community-level indicators of health and disease, primary prevention and screening, practices to promote

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<sup>1</sup> To more closely align to the [National Quality Strategy](#) (NQS), NQF is renaming the Population Health project to "Health and Well-Being," which is defined in the NQS as "working with communities to promote best practices for healthy living."

**Nominations Due By FRIDAY, DECEMBER 20, 2013 6:00 PM ET**

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healthy living, community interventions; and modifiable social, economic, environmental determinants of health with demonstrable relationship to health and well-being. Additionally, the Committee will evaluate consensus standards previously endorsed by NQF under the maintenance process.

The Standing Committee's primary work is to evaluate the submitted measures against NQF's standard [measure evaluation criteria](#) and make recommendations for endorsement. The Committee will also:

- oversee the Health and Well Being portfolio of measures
- identify and evaluate competing and related measures
- identify opportunities for harmonization of similar measures
- recommend measure concepts for development to address gaps in the portfolio
- provide advice or technical expertise about the subject to other committees (i.e. cross cutting committees or the Measures Application Partnership)
- ensure input is obtained from relevant stakeholders
- review draft documents
- recommend specific measures and research priorities to NQF Members for consideration under the Consensus Development Process (CDP)

To learn more about the work of NQF's CDP Standing Committees, review our [Committee Guidebook](#).

### STANDING COMMITTEE

This Committee will be seated as a standing committee comprised of 20-25 individuals, with members serving terms that may encompass multiple measure review cycles.

#### *Terms*

**Standing Committee members will initially be appointed to a 2 or 3 year term.** Each term thereafter would be a 3 year term, with Committee members permitted to serve two consecutive terms. After serving two terms, the Committee member must step down for one full term (3 years) before becoming eligible for reappointment. For more information, please reference the Standing Committee Policy.

**Participation on the Committee requires a significant time commitment. To apply, Committee members should be available to participate in all currently scheduled calls/meetings.** Over the course of the Committee member's term, additional calls will be scheduled or calls may be rescheduled; new dates will be set based on the availability of the majority of the Committee.

Each measure review cycle generally runs about 7 months in length.

#### **Committee participation includes:**

- Review measure submission forms during each cycle of measure review
  - Each Committee member will be assigned a portion (1-5) of the measures to fully review (approximately 1-2 hours/measure) and provide a preliminary evaluation on a workgroup call

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- Each Committee member should familiarize themselves with all measures being reviewed (approximately 30-60 minutes per measure)
- Participate in the orientation call (2 hours)
- The option to attend one of two NQF staff-hosted measure evaluation Q &A calls (1 hour)
- Review measures with the full Committee by participating in one of 4 workgroup calls (2 hours); workgroup assignments will be made by area of expertise;
- Attendance at initial in-person meeting (2 full days in Washington, DC);
- Complete measure review by attending the post-meeting conference call (2 hours)
- Attend conference call following public commenting to review submitted comments (2 hours)
- Complete additional measure reviews via webinar
- Participate in additional calls as necessary
- Complete surveys and pre-meeting evaluations
- Present measures and lead discussions for the Committee on conference calls and in meeting

**Table of scheduled meeting dates**

Meeting	Date/Time
<b>Orientation Call (2 hours)</b>	February 19, 2014 1:00-3:00pm EDT
<b>Measure Evaluation Q &amp;A (1 hour)</b>	March 4, 2014 10:00-11:00am EDT March 17, 2014 12:00-1:00pm EDT
<b>Workgroup Call (2 hours)</b>	March 12, 2014 1:00-3:00pm EDT March 13, 2014 12:00-2:00pm EDT March 25, 2014 1:00-3:00pm EDT March 31, 2014 2:00-4:00pm EDT
<b>In-person meeting (2 days in Washington, DC)</b>	April 29, 2014 8:30am-5:00pm EDT to April 30, 2014 8:30am-3:00pm EDT
<b>Post meeting conference call (2 hours)</b>	May 6, 2014 3:00-5:00pm EDT
<b>Post Draft Report Comment Call (2 hours)</b>	August 6, 2014 1:00-3:00pm EDT

### ***Preferred Expertise & Composition***

Standing Committee members are selected to ensure representation from a variety of stakeholders, including consumers, purchasers, providers, professionals, plans, suppliers, community and public health, and healthcare quality experts. Because NQF attempts to represent a diversity of stakeholder perspectives on committees, a limited number of individuals from each of these stakeholder groups can be seated onto a committee.

Nominees should possess relevant knowledge and/or proficiency in process and outcome quality measurement and/or clinical expertise in the evaluation, treatment, diagnostic studies, interventions, or procedures associated with health and well-being, across multiple care settings. NQF is seeking nominees with a variety of clinical experience, including physicians, nurses, therapists, case managers,

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unit managers, and executives. We also are seeking expertise in community-based organizations, public health agencies, school health programs, disparities and care of vulnerable populations.

Please review the NQF [Conflict of Interest policy](#) to learn about how NQF identifies potential conflicts of interest. All potential Steering Committee members must disclose any current and past activities prior to and during the nomination process in order to be considered.

### CONSIDERATION AND SUBSTITUTION

Priority will be given to nominations from NQF Members when nominee expertise is comparable. Please note that nominations are to an individual, not an organization, so “substitutions” of other individuals from an organization at conference calls, meetings or for voting is not permitted. Committee members are encouraged to engage colleagues and solicit input from colleagues throughout the process.

### APPLICATION REQUIREMENTS

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 submit the following information:

- a completed [online nomination form](#), including:
  - a brief statement of interest
  - a brief description of nominee expertise highlighting experience relevant to the Committee
  - a short biography (maximum 100 words), highlighting experience/knowledge relevant to the expertise described above and involvement in candidate measure development;
  - curriculum vitae or list of relevant experience (e.g., publications) *up to 20 pages*
- a completed disclosure of interest form. This will be requested upon your submission of the nominations form for Committees actively seeking nominees.
- confirmation of availability to participate in currently scheduled calls and meeting dates. Committees or projects actively seeking nominees will solicit this information upon submission of the online nomination form.

### DEADLINE FOR SUBMISSION

All nominations *MUST* be submitted by **6:00 pm ET on Friday, December 20, 2013**.

### QUESTIONS

If you have any questions, please contact or Adeela Khan, Project Manager, or Farhia Mussa, Senior Project Manager at 202-783-1300 or email at [healthandwellbeing@qualityforum.org](mailto:healthandwellbeing@qualityforum.org).

Thank you for your interest.