



## Home and Community-Based Services Quality

### Addressing Performance Measure Gaps in HCBS to Support Community Living

The National Quality Forum (NQF) is seeking nominations for a multistakeholder Committee to provide input on performance measurement gaps in home and community-based services (HCBS).

#### BACKGROUND

HCBS are vital to promoting independence, wellness, and self-determination for people with long-term care needs. A high-quality HCBS system is needed to support older adults and people with disabilities of all ages in optimizing independence, good health, and quality of life. Current efforts to measure and improve quality in HCBS are limited and need to provide better, more actionable information to policymakers, consumers and their families, program administrators, and other stakeholders.

Under contract with the Department of Health and Human Services (HHS), this two-year project offers a unique opportunity to address gaps in HCBS performance measures that support community living. NQF will collaborate with a multistakeholder Committee to:

- Create a conceptual framework for measurement, including a definition for HCBS;
- Perform a synthesis of evidence related to quality in HCBS;
- Conduct an environmental scan for measures and measure concepts;
- Identify gaps in HCBS measures based on the framework; and
- Make recommendations for HCBS measure development efforts.

#### COMMITTEE CHARGE

This project will be guided by a multistakeholder Committee of HCBS experts, including consumers. Through a series of meetings, the Committee will steer the project activities, including defining HCBS, developing an HCBS conceptual measurement framework, reviewing a staff-performed environmental scan of measures and measure concepts, and ultimately recommending priorities for HCBS measure development and use. As with all NQF projects, the Committee will work with NQF staff to provide topical expertise, ensure input is obtained from relevant stakeholders, and review draft products.

Each Committee member will contribute content knowledge and expertise over the course of the project, leading to the production of a final report with recommendations on HCBS performance measurement. Committee members will assist with the identification of existing research, measures, and resources to identify performance measure needs.

## COMMITTEE STRUCTURE

### **Terms**

The Committee will be composed of up to 20 individual members and will be appointed for the duration of the project, which ends in September 2016.

### **Participation on the Committee requires a significant time commitment.**

In addition to providing ongoing guidance to the project, Committee members are expected to commit to the following activities over the next two years:

1. Three, two-hour, web-based events, beginning in February 2015;
2. Two, two-day, in-person meetings in Washington, DC in April 2015 and March 2016;
3. Ad-hoc conference calls as needed;
4. Review and comment on draft materials; and
5. Follow-up e-mail communications including pre- and/or post-meeting work

Travel expenses associated with the project are reimbursed by NQF.

Meeting	Date/Time
2-hour Committee web meeting	February 20, 2015; 12-2pm ET
2-day Committee in-person meeting	April 29-30, 2015
2-hour Committee web meeting	August 2015; exact date and time TBD
2-day Committee in-person meeting	March 2016; exact dates TBD
2-hour public webinar	July 2016; exact date and time TBD

## PREFERRED EXPERTISE & COMPOSITION

NQF is seeking a variety of stakeholder perspectives that will reflect the diverse population of HCBS consumers, range of relevant services, and public/private payers. Committee members must be knowledgeable about quality measurement and/or quality improvement activities. The committee will include members from varied geographic areas. Committee composition will ideally incorporate:

- Individuals with personal experience receiving HCBS and/or family members/friends that serve or have served as caregiver for another person receiving HCBS
- Policy and research relevant to populations that use HCBS (e.g., persons of all ages with intellectual/developmental disability (ID/DD), mental/behavioral health conditions, physical disability, cognitive impairment/brain injury, HIV/AIDS, and/or multiple chronic conditions)
- Measurement and data infrastructure (e.g., measure development and implementation, Medicaid quality, HCBS data systems, health information technology related to care coordination, case management, and/or person-centered planning)

- Services that support independent living (e.g., personal care, adult day programs of all types, family caregiver supports, employment supports, housing supports, promotion of meaningful activities such as recreation, therapies of all types that support functional independence, support broker/agent)
- Agencies and providers of HCBS (e.g., direct service workers, local/ state disability/aging offices/agencies)
- Service delivery models (e.g., managed long-term supports and services, self-direction, peer supports)

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

## CONSIDERATION & SUBSTITUTION

When multiple similar nominations are received, priority will be given to nominations from NQF Members. To learn more about becoming an NQF Member organization, please review the “[Join NQF](#)” page on our website. Because of the diverse range of knowledge and expertise sought for the HCBS Committee, preference will be given to nominees who offer more than one stakeholder perspective or multi-disciplinary background. Nominees affiliated with associations or umbrella groups that represent a large constituency will be preferred over potential members from small, stand-alone organizations or independent representatives.

If selected, committee members will be expected to contribute a significant amount of time and effort to reviewing materials and participating in project activities. Members will serve as individuals and, as such, will not be permitted to send substitutes to meetings. However, committee members will be encouraged to engage colleagues and others with relevant knowledge to solicit their input throughout the project.

## APPLICATION REQUIREMENTS

Nominations are sought for individual experts. Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve. To nominate an individual to the Home and Community-Based Services 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 quality measurement
  - 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 submission of the nominations form.

- Confirmation of availability to participate in currently scheduled meetings.

Applicants must complete a [free registration](#) on the NQF website to gain access to the nomination form. When completing the online nomination form, indicate interest for this project by ticking the check-box next to the project name in the “Person and Family-Centered Care” section under the “Topic Areas of Interest” heading.

#### DEADLINE FOR SUBMISSION

All nominations **MUST** be submitted by **6:00 pm ET on Tuesday, December 16.**

#### QUESTIONS

If you have any questions, please contact Juliet Feldman, Project Manager, at 202-783-1300 or [HCBS@qualityforum.org](mailto:HCBS@qualityforum.org). Thank you for your interest.