

Improving Diagnostic Accuracy, 2016-2017

BACKGROUND

Diagnostic errors are defined as the failure to establish or communicate an accurate and timely assessment of the patient's health problem. Diagnostic errors persist through all care settings and can result in physical, psychological, or financial repercussions for the patient. While most people will experience at least one diagnostic error in their lifetime, the challenge in recognizing and defining a diagnostic error has left a gap in quality improvement and measurement. Recognizing that healthcare is an evolving, complex system performance, NQF will engage stakeholders from across the spectrum to explore the complex intersection of issues related to diagnostic error.

NQF will convene an expert panel to develop a conceptual framework utilizing the evidence, concepts, and models contained in the National Academies of Sciences, Engineering, and Medicine's (NASEM) *Improving Diagnosis in Health* report. The purpose of this work, funded by the U.S. Department of Health and Human Services, is to identify measures in development, testing, and in use and make recommendations for the development of priority measures to address measurement gaps in diagnostic accuracy.

COMMITTEE CHARGE

NQF will convene a multistakeholder Committee charged with providing guidance, and input to accomplish the project objectives:

- Develop a conceptual framework for measuring healthcare organization structures, processes, and outcomes that address the improvement of diagnostic accuracy
- Identify and create an inventory of measures consistent with the conceptual framework used to measure baseline status of improvement of health care organizational efforts to improve diagnostic accuracy
- Develop a written report with recommendations for developing priority measures that address gaps for the improvement of diagnostic accuracy

COMMITTEE STRUCTURE

The Committee will include no more than 20 individuals seated for one year.

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 may be scheduled or calls may be rescheduled based on project needs; new dates will be set based on the availability of the majority of the Committee.

Committee participation includes:

- Participation in the Committee Orientation Web Meeting
- Participation in two Committee In-Person Meetings, and
- Participation at four Committee Web Meetings in order to meet the goals and objectives of the project

Table of scheduled meeting dates

Meeting	Date/Time
Committee Web Meeting #1(1 hour)	December 5, 2016, 1:00-3:00PM ET
Committee In-Person Meeting #1 (2 days)	January 10 – 11, 2017, 8:30AM-5:00PM ET
Committee Web Meeting #2 (2 hours)	January 17, 2017, 2:00-4:00PM ET
Committee Web Meeting #3 (2 hours)	March 14, 2017, 1:00-3:00PM ET
Committee In-Person Meeting #2 (2 days)	April 11 – 12, 2017, 8:30AM-5:00PM ET
Committee Web Meeting #4 (2 hours)	April 18, 2017, 2:00-4:00PM ET
Committee Web Meeting #5 (2 hours)	June 27, 2017, 1:00-3:00PM ET

PREFERRED EXPERTISE & COMPOSITION

Committee members are selected to ensure representation from a variety of stakeholders, including consumers, purchasers, providers, health 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.

NQF is seeking nominees with relevant expertise in diagnostic accuracy, patient safety, medical errors, measurement, professional societies, including the Society to Improve Diagnosis in Medicine, Patient Safety Organizations, federal and state governments, , electronic health record development vendors, and across stakeholder perspectives including patients, consumers, clinicians and providers from various settings. NQF will also seek members of the NASEM Committee.

Please review the NQF <u>Conflict of Interest Policy</u> 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

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 is not permitted. Committee members are encouraged to engage colleagues and solicit input from colleagues throughout the process.

APPLICATION REQUIREMENTS

Nominations are sought for individual subject matter 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 Committee, please submit the following information:

- A completed <u>online nomination form</u>, including:
 - o a brief statement of interest
 - a brief description of nominee expertise highlighting experience relevant to the committee
 - o a short biography (maximum 100 words), highlighting experience/knowledge relevant to the expertise described above
 - o 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 October 19, 2016.**

QUESTIONS

If you have any questions, please contact Christy Skipper at 202-783-1300 or diagnosticaccuracy@qualityforum.org. Thank you for your interest.