



October 23, 2018

To: Consensus Standards Approval Committee (CSAC)
From: Patient Experience and Function Team
Re: Patient Experience and Function Spring 2018 Review Cycle

CSAC Action Required

The CSAC will review recommendations from the Patient Experience and Function project at its October 23-24 meeting and vote on whether to uphold the recommendations from the Standing Committee.

This memo includes a summary of the project, measure recommendations, responses to the public and member comment and the results from the NQF member expression of support. The following documents accompany this memo:

1. **Patient Experience and Function Spring 2018 Draft Report.** The draft report has been updated to include the comment received and the response. The complete draft report and supplemental materials are available on the project webpage.
2. [Comment Table](#). The comment table lists the one comment received during the post-meeting comment period and the Standing Committee response.

Background

Ensuring that all patients and family members are engaged partners in healthcare is one of the core priorities of the National Quality Strategy and NQF. The current healthcare system lacks necessary measures to support the new paradigm in which patients are empowered to participate actively in their own care. In this new healthcare paradigm, high-quality performance measures are essential to provide insight on how providers are responding to the needs and preferences of patients and families, and how healthcare organizations can create effective care practices that support positive patient experience and improved function.

Patient Experience and Function is a recently formed NQF measure topic area encompassing many of the measures previously assigned to the Person- and Family-Centered Care and Care Coordination topic areas. Measures included in this portfolio assess patient function and experience of care as they relate to health-related quality of life and the many factors that affect it, including communication, care coordination, transitions of care, and use of health information technology.

The 24-member [Patient Experience and Function Standing Committee](#) has been charged with overseeing the NQF patient experience and function measure portfolio and evaluating both newly submitted and previously endorsed measures against NQF's measure evaluation criteria, identifying gaps in the measurement portfolio, providing feedback on how the portfolio should evolve, and serving on any ad hoc or expedited projects in its designated topic areas.

On June 22 and 25, the Patient Experience and Function Standing Committee met via web to evaluate two newly submitted measures. The Standing Committee recommended both measures for endorsement. The measures recommended for endorsement are:

- 3420 CoreQ: AL Resident Satisfaction Measure
- 3422 CoreQ: AL Family Satisfaction Measure

Draft Report

The Patient Experience and Function Spring 2018 draft report presents the results of the evaluation of two measures considered under the Consensus Development Process (CDP). Both are recommended for endorsement.

The measures were evaluated against the 2017 version of the [measure evaluation criteria](#).

	Maintenance	New	Total
Measures under consideration	0	2	2
Measures recommended for endorsement	0	2	2
Measures recommended for inactive endorsement with reserve status	0	0	0
Measures approved for trial use	0	0	0
Measures not recommended for endorsement or trial use	0	0	0
Measures withdrawn from consideration	0	0	0
Reasons for not recommending	Importance - 0 Scientific Acceptability - 0 Use - 0 Overall - 0 Competing Measure - 0	Importance - 0 Scientific Acceptability - 0 Use - 0 Overall - 0 Competing Measure - 0	

Measures Recommended for Endorsement

- 3420 CoreQ: AL Resident Satisfaction Measure
 - Overall Suitability for Endorsement: Yes-18; No-2
- 3422 CoreQ: AL Family Satisfaction Measure
 - Overall Suitability for Endorsement: Yes-14; No-5

NQF received one comment on the spring 2018 Patient Experience and Function draft report. The comment supported the Committee's recommendations to endorse the two new measures under review, as well as the Committee's identification of priority gaps in the Patient Experience and Function portfolio. The commenter encouraged further work in the area of patient

experience and care coordination. A table with the comment submitted during the comment period, with the Patient Experience and Function Committee's response to the comment is posted to the project webpage.

Member Expression of Support

Throughout the 16-week continuous public commenting period, NQF members had the opportunity to express their support ('support' or 'do not support') for each measure submitted for endorsement consideration to inform the Committee's recommendations. No NQF members provided their expression of support.

Appendix A: CSAC Checklist

The table below lists the key considerations to inform the CSAC's review of the measures submitted for endorsement consideration.

Key Consideration	Yes/No	Notes
Were there any process concerns raised during the CDP project? If so, briefly explain.	No	
Did the Standing Committee receive requests for reconsideration? If so, briefly explain.	No	
Did the Standing Committee overturn any of the Scientific Methods Panel's ratings of Scientific Acceptability? If so, state the measure and why the measure was overturned.	No	
If a recommended measure is a related and/or competing measure, was a rationale provided for the Standing Committee's recommendation? If not, briefly explain.	Yes	<p>The two measures under review, 3420 and 3422, are related to similar endorsed measures by the same developer. The Committee had no concerns about the related measures.</p> <ul style="list-style-type: none"> • 2614 CoreQ: Short Stay Discharge Measure • 2615 CoreQ: Long-Stay Resident Measure • 2616 CoreQ: Long-Stay Family Measure
Were any measurement gap areas addressed? If so, identify the areas.	Yes	The Committee discussed the lack of endorsed Care Coordination measures and mentioned concerns that some Care Coordination measures are in other projects in the NQF portfolio.
Are there additional concerns that require CSAC discussion? If so, briefly explain.	No	

Appendix B: Details of Measure Evaluation

Measures Recommended

3420 CoreQ AL Resident Satisfaction

[Submission](#) | [Specifications](#)

The measure calculates the percentage of Assisted living (AL) residents, those living in the facility for two weeks or more, who are satisfied. This patient reported outcome measure is based on the CoreQ: AL Resident Satisfaction questionnaire that is a four-item questionnaire.

Numerator Statement: The numerator is the sum of the individuals in the facility that have an average satisfaction score of ≥ 3 for the four questions on the CoreQ: AL Resident Satisfaction questionnaire.

Denominator Statement: The denominator includes all of the residents that have been in the AL facility for two weeks or more regardless of payer status; who received the CoreQ: AL Resident Satisfaction Questionnaire (e.g. people meeting exclusions do not receive the questionnaire), who responded to the questionnaire within the two month time window, who did not have the questionnaire completed by somebody other than the resident, and who did not have more than one item missing

Exclusions: Exclusions made at the time of sample selection are the following: (1) Residents who have poor cognition (described below in S.9); (2) residents receiving hospice; (3) residents with a legal court appointed guardian; and (4) residents who have lived in the AL facility for less than two weeks. Additionally, once the survey is administered, the following exclusions are applied: a) surveys received outside of the time window (two months after the administration date) b) surveys that have more than one questionnaire item missing c) surveys from residents who indicate that someone else answered the questions for the resident. (Note this does not include cases where the resident solely had help such as reading the questions or writing down their responses.)

Adjustment/Stratification: None

Level of Analysis: Facility

Setting of Care: Assisted Living

Type of Measure: Outcome: PRO-PM

Data Source: Instrument-Based Data

Measure Steward: American Health Care Association/National Center for Assisted Living

STANDING COMMITTEE MEETING [06/22/2018]

1. Importance to Measure and Report: The measure meets the Importance criteria

(1a. Evidence, 1b. Performance Gap)

1a. Evidence: **Y-15; N-0**; 1b. Performance Gap: **H-0; M-13; L-4; I-0**

Rationale:

- The measure developer provided a logic model outlining the relationship between the outcome of assisted living resident satisfaction and drivers such as staff competency, concern, and responsiveness management based on eleven sources of evidence specific to patient satisfaction and the impact of patient-clinician relationships on healthcare outcomes.
- Structure and process drivers and their influence on assisted living resident satisfaction were submitted for review by the measure developer.
- Data from 483 assisted living facilities from multiple states indicated performance score variation between facilities demonstrating an opportunity for improvement.
- The Standing Committee discussed demographic limitations in the performance data (e.g. 90% white and 50% with a higher education). The measure developer confirmed that this is reflective of the current assisted living population. The Committee was concerned that these results may not generalize to a more diverse patient/facility population and agreed that they would like to see these performance data be more sensitive to potential disparities in care and diverse populations in future evaluations.
- The Committee agreed that the performance data indicated a gap in care.

2. Scientific Acceptability of Measure Properties: The measure meets the Scientific Acceptability criteria

(2a. Reliability - precise specifications, testing; 2b. Validity - testing, threats to validity)

2a. Reliability: **H-0; M-13; L-4; I-0** 2b. Validity: **H-0; M-16; L-2; I-1**

Rationale:

- The measure developer submitted data element, questionnaire-level, facility level reliability testing that showed that the data elements were highly repeatable and indicated measure score reliability at both the questionnaire and facility level.
- Validity testing included assessment of face validity and the relationship of satisfaction summary score with other variables.
- The measure was reviewed by the NQF Scientific Methods Panel and received an overall moderate rating for both reliability and validity, however there was some concern in regards to the correlation analyses.
- The Standing Committee had some concern about the reliability of the measure at the facility level, but agreed that since this is a new measure, future evaluations should focus on facility variation.
- The measure is not risk adjusted similar to CAHPS measures.

3. Feasibility: **H-5; M-14; L-2; I-0**

(3a. Clinical data generated during care delivery; 3b. Electronic sources; 3c. Susceptibility to inaccuracies/ unintended consequences identified 3d. Data collection strategy can be implemented)

Rationale:

- This measure is based on a patient / family reported information in either paper or electronic format.
- The overall measure is calculated on a sample of 20 responses.
- No fees, licensing or other requirements are associated with the measure.

- The Standing Committee considered whether a cognitive assessment should be included in the administration of the survey, but agreed that additional costs for this type of service to resident or family would be burdensome.

4. Usability and Use:

(Used and useful to the intended audiences for 4a. Accountability and Transparency; 4b. Improvement; and 4c. Benefits outweigh evidence of unintended consequences)

4a. Use: **Yes-16; No-3** 4b. Usability: **H-1; M-12; L-5; I-2**

Rationale:

- The measure developer is currently working to get this measure adopted for state level reporting in Oregon.
- This is a new measure and not publicly reported.

5. Related and Competing Measures

- 3422: CoreQ AL Family Satisfaction

Standing Committee Recommendation for Endorsement: **Y-18; N-2**

6. Public and Member Comment

7. Consensus Standards Approval Committee (CSAC) Vote: Y-X; N-X

8. Appeals

3422 CoreQ AL Family Satisfaction

[Submission](#) | [Specifications](#)

Description: The measure calculates the percentage of family or designated responsible party for assisted living (AL) residents. This consumer reported outcome measure is based on the CoreQ: AL Family Satisfaction questionnaire that has three items.

Numerator Statement: The numerator assesses the number of family or designated responsible party for AL residents that are satisfied. Specifically, the numerator is the sum of the family or designated responsible party for AL residents that have an average satisfaction score of ≥ 3 for the three questions on the CoreQ: AL Family Satisfaction questionnaire.

Denominator Statement: The target population is family or designated responsible party members of a resident residing in the facility for at least two weeks. The denominator includes all of the individuals in the target population who respond to the CoreQ: AL Family Satisfaction questionnaire within the two month time window who do not meet the exclusion criteria.

Exclusions: Exclusions made at the time of sample selection are the following: (1) Court-appointed guardian; (2) family of residents receiving hospice; (3) Family members who reside in another country and (4) family of residents who have lived in the AL facility for less than two weeks.

Additionally, once the survey is administered, the following exclusions are applied: a) surveys received outside of the time window (two months after the administration date) and b) surveys that have more than one questionnaire item missing.

Adjustment/Stratification: None

Level of Analysis: Facility

Setting of Care: Assisted Living

Type of Measure: Outcome: PRO-PM

Data Source: Instrument-Based Data

Measure Steward: American Health Care Association/National Center for Assisted Living

STANDING COMMITTEE MEETING [06/22/2018]

1. Importance to Measure and Report: The measure meets the Importance criteria

(1a. Evidence, 1b. Performance Gap)

1a. Evidence: **Y-15; No-5** 1b. Performance Gap: **H-0; M-17; L-3; I-1**

Rationale:

- The evidence submitted for this measure was the same as the CoreQ: AL Resident Satisfaction, measure 3420.
- The Standing Committee considered differences between family and resident satisfaction measures, but elected not to discuss the differences in detail, and proceeded to a vote.

2. Scientific Acceptability of Measure Properties: The measure meets the Scientific Acceptability criteria

(2a. Reliability - precise specifications, testing; 2b. Validity - testing, threats to validity)

2a. Reliability: **H-0; M-15; L-3; I-3** 2b. Validity: **H-0; M-11; L-3; I-3**

Rationale:

- The measure developer submitted data element, questionnaire-level, facility level reliability testing that showed that the data elements were highly repeatable and indicated measure score reliability at both the questionnaire and facility level.
- Validity testing included assessment of face validity and the relationship of satisfaction summary score with other variables.

- The measure was reviewed by the NQF Scientific Methods Panel and received an overall moderate rating for both reliability and validity, however there was some concern in regards to the correlation analyses.
- The Standing Committee considered differences between family and resident satisfaction measures, but elected not to discuss the differences in detail, and proceeded to a vote.

3. Feasibility: H-5; M-14; L-2; I-0

(3a. Clinical data generated during care delivery; 3b. Electronic sources; 3c. Susceptibility to inaccuracies/ unintended consequences identified 3d. Data collection strategy can be implemented)

Rationale:

- This measure is based on a patient / family reported information in either paper or electronic format.
- The overall measure is calculated on a sample of 20 responses.
- No fees, licensing or other requirements are associated with the measure.
- The Standing Committee considered differences between family and resident satisfaction measures, but elected not to discuss the differences in detail, and proceeded to a vote.

4. Usability and Use:

(Used and useful to the intended audiences for 4a. Accountability and Transparency; 4b. Improvement; and 4c. Benefits outweigh evidence of unintended consequences)

4a. Use: Y-16; N-5 4b. Usability: H-3; M-12; L-4; I-2

Rationale:

- The measure developer is currently working to get this measure adopted for state level reporting in Oregon.
- This is a new measure and not publically reported.
- The Standing Committee considered differences between family and resident satisfaction measures, but elected not to discuss the differences in detail, and proceeded to a vote.

5. Related and Competing Measures

- 3420: CoreQ AL Resident Satisfaction

Standing Committee Recommendation for Endorsement: **Y-14; N-5**

6. Public and Member Comment

7. Consensus Standards Approval Committee (CSAC) Vote: Y-X; N-X

8. Appeals