

#### Patient Experience and Function Committee Spring 2018 Orientation Web Meeting

*Kyle Cobb, MS, Senior Director Kathryn Goodwin, MS, Senior Project Manager Tara Rose Murphy, MPAP, Project Manager* 

May 21, 2018

## Welcome

#### **Project Team**



Kyle Cobb, MS Senior Director



Kathryn Goodwin, MS Senior Project Manager



Tara Rose Murphy, MPAP Project Manager

## Patient Experience and Function Committee Roster – Spring 2018 Cycle

- Gerri Lamb, PhD, RN, FAAN Co-Chair
- Lee Partridge Co-Chair
- Chris Stille, MD, MPH Co-Chair
- Richard Antonelli, MD, MS
- Beth Averback, MD
- Adrienne Boissy, MD, MA
- Rebecca Bradley, LCSW
- Jennifer Bright, MPA
- Ryan Coller, MD, MPH
- Sharon Cross, LISW
- Christopher Dezii, RN, MBA, CPHQ
- Barbara Gage, PhD, MPA
- Dawn Hohl, RN, BSB, MS, PhD
- Stephen Hoy
- Sherrie Kaplan, PhD, MPH

- Brenda Leath, MHSA, PMP
- Brian Lindberg, BSW, MMHS
- Ann Monroe
- Lisa Morisse, MA
- Terrence O'Malley, MD
- Lenard Parisi, RN, MA, CPHQ, FNAHQ
- Debra Saliba, MD, MPH
- Ellen Schultz, MS
- Lisa Gale Suter, MD
- Peter Thomas, JD

#### Agenda for the Call

- Standing Committee Introductions
- Overview of NQF, the Consensus Development Process, and Roles of the Standing Committee, co-chairs, NQF staff
- Overview of NQF's portfolio of measures
- Review of project activities and timelines
- Overview of NQF's measure evaluation criteria
- Discussion of measures previously in Care Coordination
- SharePoint Tutorial
- Measure Worksheet example
- Next steps

#### Patient Experience and Function – Spring 2018 Cycle Expert Reviewers & Inactive Members

- Samuel Biernier, MD
- Donald Casey, MD, MPH, MBA, FACP, FAHA
- Shari Erickson, MPH
- Russell Leftwich, MD
- Linda Melillio, MA, MS, CPHRM, CPXP
- Patricia Ohtake, PT, PhD
- Charissa Pacella, MD

# Spring 2018 Cycle

# Overview of NQF, the CDP, and Roles

#### Measure Review: Two Cycles Per Year

#### Consensus Development Process:

Two Cycles Every Contract Year



#### **15 New Measure Review Topical Areas**

	All Cause Admission/ Readmissions	Behavioral Health			All Cause Admission/ Readmissions	Behavioral Health & Substance Use	Cancer
Cancer	Cardiovascular	Care Coordination	Infectious Disease				
Cost and Resource Use	Endocrine	Eyes, Ears, Nose and Throat Conditions	Palliative and End-of Life Care		Cardiovascular	Cost and Efficiency <sup>A</sup>	Geriatric and Palliative Care <sup>B</sup>
Gastrointestinal	Genitourinary	Health and Well Being	Musculoskeletal		Neurology	Patient Experience & Function	Patient Safety <sup>c</sup>
Neurology	Patient Safety	Pediatrics	Perinatal		Pediatrics	Perinatal and Women's Health	Prevention and Population Health <sup>D</sup>
Person and Family- Centered Care	Pulmonary and Critical Care	Renal	Surgery		Primary Care and Chronic Illness	Renal	Surgery

Denotes expanded topic area

A Cost & Efficiency will include efficiency-focused measures from other domains

<sup>B</sup> Geriatric & Palliative Care includes pain-focused measures from other domains

<sup>C</sup> Patient Safety will include acute infectious disease and critical measures

 $^{\rm D}$  Prevention and Population Health is formerly Health and Well Being

#### Role of the Standing Committee *Measure Evaluation Duties*

- All members evaluate ALL measures
- Evaluate measures against each criterion
  Indicate the extent to which each criterion is met and rationale for the rating
- Make recommendations to the NQF membership for endorsement
- Oversee Patient Experience and Function portfolio of measures
  - Promote alignment and harmonization
  - Identify gaps

#### Role of the Standing Committee Co-Chairs

- Co-facilitate Standing Committee (SC) meetings
- Work with NQF staff to achieve the goals of the project
- Assist NQF in anticipating questions and identifying additional information that may be useful to the SC
- Keep SC on track to meet goals of the project without hindering critical discussion/input
- Represent the SC at CSAC meetings
- Participate as a SC member

## **Role of the Expert Reviewers**

- The expert reviewer pool serves as an adjunct to NQF standing committees to ensure broad representation and provide technical expertise when needed
- Expert reviewers will provide expertise as needed to review measures submitted for endorsement consideration by:
  - Replacing an inactive committee member;
  - Replacing a committee members whose term has ended; or
  - Providing expertise that is not currently represented on the committee.
- Expert reviewers may also:
  - Provide comments and feedback on measures throughout the measure review process
  - Participate in strategic discussions in the event no measures are submitted for endorsement consideration

#### Role of NQF Staff

- NQF project staff works with SC to achieve the goals of the project and ensure adherence to the consensus development process:
  - Organize and staff SC meetings and conference calls
  - Guide the SC through the steps of the CDP and advise on NQF policy and procedures
  - Review measure submissions and prepare materials for Committee review
  - Draft and edit reports for SC review
  - Ensure communication among all project participants (including SC and measure developers)
  - Facilitate necessary communication and collaboration between different NQF projects

#### **Role of Methods Panel**

- Scientific Methods Panel created to ensure higher-level and more consistent reviews of the scientific acceptability of measures
- The Methods Panel is charged with:
  - Conducting evaluation of complex measures for the Scientific Acceptability criterion, with a focus on reliability and validity analyses and results
  - Serve in advisory capacity to NQF on methodologic issues, including those related to measure testing, risk adjustment, and measurement approaches.
- The Methods Panel review will help inform the Standing Committee's endorsement decision. The Panel will not render endorsement recommendations.

#### **Scientific Methods Panel Members**

- David Cella, PhD, Co-Chair
- Karen Joynt Maddox, MD, MPH, Co-Chair
- J. Matt Austin, PhD
- Paul Kurlansky, MD
- Bijan Borah, MSc, PhD
- **Zhenqiu Lin**, PhD
- John Bott, MBA, MSSW
- Jack Needleman, PhD
- Lacy Fabian, PhD
- David Nerenz, PhD
- Marybeth Farquhar, PhD, MSN, RN
- Eugene Nuccio, PhD

- Jeffrey Geppert, EdM, JD
- Jennifer Perloff, PhD
- Paul Gerrard, BS, MD
- Sam Simon, PhD
- Laurent Glance, MD
- Michael Stoto, PhD
- **Stephen Horner**, RN, BSN, MBA
- Christie Teigland, PhD
- Sherrie Kaplan, PhD, MPH
- Ronald Walters, MD, MBA, MHA, MS
- Joseph Kunisch, PhD, RN-BC, CPHQ
- Susan White, PhD, RHIA, CHDA

# Questions?

# Project Charge

#### Project Timeline – Spring 2018 Cycle \*All times ET

Activity	Date			
Commenting & member support period on	May 1, 2018			
submitted measures opens				
Orientation Call	Monday, May 21, 3:00-5:00 PM			
Committee receives measures and preliminary	May 30, 2018			
analyses for review				
Measure Evaluation Meeting	Friday, June 22, 1:00-3:00pm			
Key Topics Web Meeting	Monday, June 25, 1:00-3:00pm			
Additional Web Meeting- HOLD	Friday, June 29, 1:00-3:00pm			
Report Posted for Public Comment	July 31- August 29			
Post Draft Report Comment Call	Friday, September 21, 1:00-3:00pm			
CSAC Review Recommendations	October 15-November 2			
Appeals Period	November 6- December 5			
Final Report Posted	January 2019			

#### **Committee Changes**

- The PEF Committee was formed as a combination of the previous Person and Family Centered Care and Care Coordination Committees.
  - One additional member from the Pulmonary Committee was also added.
- Due to a cap on the number of Committee members (25 members), NQF will rotate the active and inactive members based on the measures under review in any given cycle.
- Inactive members will not be required to attend meetings and will not vote in a project cycle but may participate in the project cycle as members of the public.

## Definitions

- Patient Experience: The range of interactions that patients have with the health care system, including health plans, providers, and health care facilities
- Patient Function: An individual's ability to perform activities of daily living to maintain health and well-being and meet basic needs.
- Care Coordination: The deliberate organization of patient care activities between two or more participants (including patient) involved in a patient's care to facilitate the appropriate delivery of healthcare services.
- Person and Family Centered Care: The extent to which care is provided to the patient, caregiver, and/or family, which is respectful of and responsive to individual patient preferences, needs, and values and ensuring that patient values guide all clinical decisions.

## **Committee Charge**

The portfolio currently has 56 endorsed measures

- The Committee will review measures related to:
  - Care coordination and Transitions
  - Communication and Cultural competency
  - Functional status and health-related quality of life
  - Experience of care
  - Shared decision making

#### **Project Charge Discussion**

- What are your thoughts on a new Committee charge?
- What concerns do you have regarding the merging of the two previous topical areas?

# **Questions?**

#### Spring 2018- Measures Under Review

#### Spring 2018 Measures Under Review

- 3420 Core Q: AL Resident Satisfaction Measure (American Health Care Association/National Center for Assisted Living)
- 3422 Core Q: AL Family Satisfaction Measure (American Health Care Association/National Center for Assisted Living)

## Spring 2018- Key Topics

## Key Topics-Spring 2018

- The extended Committee will the forum to discuss additional topics during the Spring 2018 cycle:
  - IMPACT act
    - » Overview of legislation and CMS measure pipeline
  - Care Coordination Measure Priorities
  - <sup>D</sup> Attribution
    - » Discuss attributions within the context of care coordination and patient experience measures.
  - Measure Prioritization
    - » Review new NQF criteria to prioritize the measures included in the PEF portfolio.
- The Committee will discuss these issues on the all-Committee meeting on Monday June 25<sup>th</sup>.

http://share.qualityforum.org/Projects/Patient%20Experience%20and%20Function/SitePages/H ome.aspx

#### Accessing SharePoint

- Standing Committee Policy
- Standing Committee Guidebook
- Measure Document Sets
- Meeting and Call Documents
- Committee Roster and Biographies
- Calendar of Meetings

#### Sample homepage:



- Please keep in mind:
- + and signs :



#### Measure Worksheet and Measure Information

#### Measure Worksheet

 Preliminary analysis, including eCQM Technical Review if needed, and preliminary ratings

Member and Public comments

- Information submitted by the developer
  - » Evidence and testing attachments
  - » Spreadsheets
  - » Additional documents

# Next Steps

#### Project Contact Info

- Email: <u>PatientExperienceandFunction@qualityforum.org</u>
- NQF Phone: 202-783-1300
- Project page: <u>http://www.qualityforum.org/Patient\_Experience\_and\_Function.aspx</u>
- SharePoint site: <u>http://share.qualityforum.org/Projects/Patient%20Experience%20and%20Function/SitePages/Home.aspx</u>

# **Questions?**



### Appendix A Patient Experience and Function Portfolio of Measures

## Functional Status Change and/or Assessment: 30 Measures

- 0422 Functional status change for patients with Knee impairments
- 0423 Functional status change for patients with Hip impairments
- 0424 Functional status change for patients with Foot and Ankle impairments
- 0425 Functional status change for patients with lumbar impairments
- 0426 Functional status change for patients with Shoulder impairments
- 0427 Functional status change for patients with elbow, wrist and hand impairments
- 0428 Functional status change for patients with General orthopedic impairments
- **0429** Change in Basic Mobility as Measured by the AM-PAC:
- **0430** Change in Daily Activity Function as Measured by the AM-PAC:
- **2286** Functional Change: Change in Self Care Score
- 2287 Functional Change: Change in Motor Score
- 2321 Functional Change: Change in Mobility Score

## Functional Status Change and/or Assessment: 30 Measures (continued)

- **2624** Functional Outcome Assessment
- 2631 Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function
- 2632 Long-Term Care Hospital (LTCH) Functional Outcome Measure: Change in Mobility Among Patients Requiring Ventilator Support
- 2633 Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients
- 2634 Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Change in Mobility Score for Medical Rehabilitation Patients
- 2635 Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients
- 2636 Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients
- 2643 Average change in functional status following lumbar spine fusion surgery
- 2653 Average change in functional status following total knee replacement surgery

## Functional Status Change and/or Assessment: 30 Measures (continued)

- 2769 Functional Change: Change in Self Care Score for Skilled Nursing Facilities
- 2774 Functional Change: Change in Mobility Score for Skilled Nursing Facilities
- 2775 Functional Change: Change in Motor Score for Skilled Nursing Facilities
- 2776 Functional Change: Change in Motor Score in Long Term Acute Care Facilities
- 2777 Functional Change: Change in Self Care Score for Long Term Acute Care Facilities
- 2778 Functional Change: Change in Mobility Score for Long Term Acute Care Facilities
- 0701 Functional Capacity in COPD patients before and after Pulmonary Rehabilitation
- **2612** CARE: Improvement in Mobility
- 2613 CARE: Improvement in Self Care

#### **Communication: 7 Measures**

- 0291 Emergency Transfer Communication Measure
- 1894 Cross-cultural communication measure derived from the cross-cultural communication domain of the C-CAT
- 1896 Language services measure derived from language services domain of the C-CAT
- 1898 Health literacy measure derived from the health literacy domain of the C-CAT
- 1901 Performance evaluation measure derived from performance evaluation domain of the C-CAT
- 1905 Leadership commitment measure derived from the leadership commitment domain of the C-CAT
- 1888 Workforce development measure derived from workforce development domain of the C-CAT

#### Long Term Services and Support: 4 Measures

- 0688 Percent of Residents Whose Need for Help with Activities of Daily Living Has Increased (long stay)
- 2614 CoreQ: Short Stay Discharge Measure
- 2615 CoreQ: Long-Stay Resident Measure
- 2616 CoreQ: Long-Stay Family Measure

#### **Shared Decision Making: 2 Measures**

- 2958 Informed, Patient Centered (IPC) Hip and Knee Replacement Surgery
- 2962 Shared Decision Making Process

#### Patient Experience: 12 Measures

- 0005 CAHPS Clinician & Group Surveys (CG-CAHPS)-Adult, Child
- 0006 Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey, Version 5.0 (Medicaid and Commercial)
- 0166 HCAHPS
- **0228** 3-Item Care Transition Measure (CTM-3)
- 0258 CAHPS In-Center Hemodialysis Survey
- **0517** CAHPS<sup>®</sup> Home Health Care Survey (experience with care)
- 0700 Health-related Quality of Life in COPD patients before and after Pulmonary Rehabilitation
- 0726 Patient Experience of Psychiatric Care as Measured by the Inpatient Consumer Survey (ICS)
- 1741 Patient Experience with Surgical Care Based on the Consumer Assessment of Healthcare Providers and Systems (CAHPS)<sup>®</sup> Surgical Care Survey
- 1892 Individual engagement measure derived from the individual engagement domain of the C-CAT
- 2548 Child Hospital CAHPS (HCAHPS)
- 2967 CAHPS<sup>®</sup> Home- and Community-Based Services Measures