



Patient Safety

Background

Addressing patient safety is central to advancing healthcare quality and improving healthcare delivery. It has been more than 20 years since the Institute of Medicine published a series of seminal reports that ushered in the modern era of patient safety with a focus on transparency and eliminating harm in healthcare settings. Since that time, the National Quality Forum (NQF) has led various initiatives to measure patient safety performance, promote safe practices, and identify and reduce serious reportable events (SREs) and hospital-acquired conditions (HACs). These efforts have also involved expanding the number of high-quality patient safety measures across settings as well as promoting alignment of existing measures.

With the guidance of the Patient Safety Standing Committee, NQF evaluates both novel and existing quality performance measures related to patient safety that can be used for accountability and public reporting for all populations and in all settings of care. This project addresses various aspects of patient safety including, but not limited to, medication safety, falls, pressure ulcers, and workforce issues.

Committee Charge

The Patient Safety Standing Committee evaluates newly submitted measures and measures undergoing maintenance review against [NQF's standard measure evaluation criteria](#) and makes recommendations for endorsement.

The Committee's other responsibilities include:

- Overseeing the portfolio of measures
- Identifying and evaluating competing and related measures
- Identifying opportunities for harmonization of similar measures
- Recommending measure concepts for development to address gaps in the portfolio
- Providing advice or technical expertise about the subject to other committees (i.e., cross-cutting Committees or the Measure Applications Partnership)
- Ensuring input is obtained from relevant stakeholders
- Reviewing draft documents
- Recommending specific measures to NQF members for consideration under the Consensus Development Process (CDP)

Committee Structure

The Committee will include no more than 25 individuals.

Terms

New Standing Committee members are appointed to a two- or three-year term with the ability to extend for one additional term of two years. Committee members may serve two consecutive terms for a total of five years (or 10 evaluation cycles). The Committee member's term on a Standing Committee begins upon selection to the committee, immediately following the close of the roster commenting period.

Participation on the Committee requires a significant time commitment.

Committee members are expected to participate in all scheduled meetings. Over the course of the committee member's term, additional meetings will be scheduled, or meetings may be rescheduled.

Committee participation includes:

- Participating in the scheduled Orientation Web Meeting (2two hours)
- Identifying and disclosing potential biases (real or perceived)
- Reviewing all measure submission forms (approximately two hours per measure)
- Completing all surveys and evaluations
- Attending all scheduled evaluation meetings. These may be in-person meetings (one full day in Washington, DC) or a series of webinars (typically two hours each)
- Leading discussion of some measures at calls or meetings and participating in the discussion and vote on ratings and recommendations for all measures
- Reviewing meeting summaries and/or draft reports
- Completing measure evaluation by reviewing the comments received on the draft report and then participating on the post-comment webinar (two hours)
- Completing additional measure evaluations by conference call or webinar if needed
- Participating in additional calls or webinars as necessary

Table of Scheduled Meeting Dates: Fall 2020

Meeting	Date/Time
Standing Committee Orientation Web Meeting	January 5, 2021 11 AM TO 1 PM
Standing Committee Measure Evaluation Web Meeting 1	February 10, 2021 9-5 PM
Standing Committee Measure Evaluation Web Meeting 2	February 11, 2021 1 TO 5 PM
Standing Committee Post-Comment Web Meeting	June 4, 2021 1-3 PM

Preferred Expertise and Composition

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, a limited number of individuals from each of these stakeholder groups can be seated onto a Committee.

NQF is seeking **up to nine nominees** for the Patient Safety Standing Committee with relevant expertise in or experience and/or expertise in healthcare quality and patient safety, including medication safety.

Additionally, NQF is looking representatives from the following stakeholder groups:

- Patients and caregivers (e.g., consumer groups, patient advocacy groups)
- Health system patient safety directors and/or patient safety officers
- Healthcare payers (e.g., health plans)
- Healthcare quality improvement program implementers
- Healthcare data informaticists
- Clinicians in the field of general surgery, longterm care, hospital medicine – including hospitalists, or emergency department physicians, pharmacists, and nurses
- Clinicians and researchers/epidemiologists in various healthcare settings, including health systems, inpatient rehabilitation, and skilled nursing facilities

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 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 are not permitted. Committee members are encouraged to engage colleagues and solicit input from them 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 Patient Safety 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

- 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 Monday, November 2, 2020**.

Questions

If you have any questions, please contact Chris Dawson, at 202-783-1300 or patientsafety@qualityforum.org. Thank you for your interest.