



NATIONAL
QUALITY FORUM

National Consensus Standards for Patient Safety

Standing Committee Meeting

Andrew Lyzenga
Jesse Pines
Kathryn Goodwin
Hiral Dudhwala
Desmirra Quinnonez

February 13, 2018

Agenda for the Call

- Welcome
- Introduction to NQF Prioritization
- Public Comment on Prioritization
- Next steps

Patient Safety Project Team



Andrew Lyzenga
Senior Director



Jesse Pines
Consultant



Kathryn Goodwin
Senior Project Manager



Hiral Dudhwala
Project Manager



Desmirra Quinnonez
Project Analyst

Patient Safety Standing Committee

* New Committee Members

- Ed Septimus, MD (Co-Chair)
- Iona Thraen, PhD, ACSW (Co-Chair)
- Jason Adelman, MD, MS
- Charlotte Alexander, MD
- Kimberly Applegate, MD, MS, FACR
- Laura Ardizzone, BSN, MS, DNP, CRNA
- Richard Brill, MD, FAAP, FCCM
- Curtis Collins, PharmD, MS*
- Christopher Cook, PharmD, PhD
- Melissa Danforth, BA
- Theresa Edelstein, MPH, LNHA
- Lillee Gelinas, MSN, RN, FAAN
- John James, PhD*
- Stephen Lawless, MD, MBA, FAAP, FCCM
- Lisa McGiffert
- Susan Moffatt-Bruce, MD, PhD
- Patricia Quigley, PhD, MPH, ARNP, CRRN, FAAN, FAANP
- Michelle Schreiber, MD
- Leslie Schultz, PhD, RN, NEA-BC, CPHQ
- Lynda Smirz, MD, MBA
- Tracy Wang, MPH
- Kendall Webb, MD, FACEP
- Albert Wu, MD, MPH, FACP
- Donald Yealy, MD, FACEP*
- Yanling Yu, PhD

Patient Safety Standing Committee

Expert Reviewers

- Jamie Roney, DNP, RN-BC, CCRN-K
 - *(Infectious Disease)*
- Pranavi Sreeramoju, MD, MPH, CMQ, FSHEA, FIDSA
 - *(Infectious Disease)*
- Bruno Digiovine, MD
 - *(Pulmonary)*
- Edgar Jimenez, MD, FCCM
 - *(Pulmonary)*
- David Stockwell, MD, MBA
 - *(Pulmonary)*



Prioritization

John Bernot, MD
Elisa Munthali, MPH
Madison Jung

February 13, 2018

Strategic Vision



Prioritize
measures



Reduce,
select, and
endorse
measures



Collect
and act on
feedback
from the
field



Accelerate
innovation

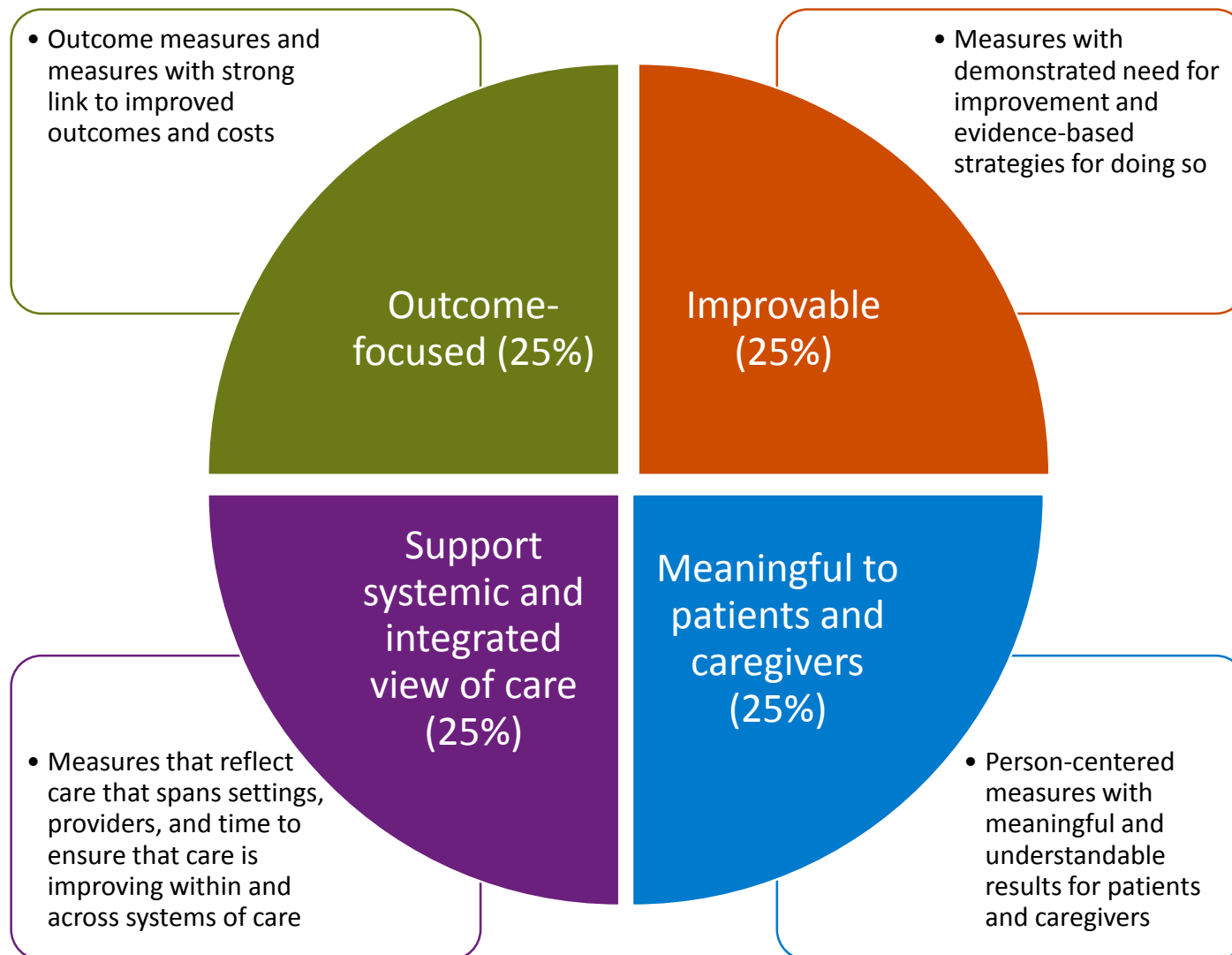
NQF Measure Prioritization Initiative



Prioritization Criteria: Environmental Scan

- National Quality Strategy
- IOM Vital Signs
- NQF Prioritization Advisory Committees
- Healthy People 2020 Indicators
- Kaiser Family Foundation Health Tracker
- Consumer priorities for Hospital QI and Implications for Public Reporting, 2011
- IOM: Future Directions for National Healthcare Quality and Disparities Report, 2010
- IHI Whole System Measures
- Commonwealth Fund International Profiles of Healthcare Systems, 2015
- OECD Healthcare Quality Project
- OECD Improving Value in Healthcare: Measuring Quality
- Conceptual Model for National Healthcare Quality Indicator System in Norway
- Denmark Quality Indicators
- UK NICE standards – Selecting and Prioritizing Quality Standard Topics
- Australia's – Indicators used Nationally to Report on Healthcare, 2013
- European Commission Healthcare Quality Indicators
- Consumer-Purchaser Disclosure Project – Ten criteria for meaningful and usable measures of performance

NQF Prioritization Criteria



NQF National Priorities

National Priorities	Translation into Patient Voice
Health outcomes (including mortality, functional status)	Are you getting better?
Patient experience (including care coordination, shared decision making)	How was your care?
Preventable harm/complications	Did you suffer any adverse effects from your care?
Prevention/healthy behaviors	Do you need more help staying healthy?
Total cost/low value care	Did you receive the care you needed and no more?
Access to needed care	Can you get the care you need when and where you need it?
Equity of care	Are you getting high quality care regardless of who you are or where you live?

Prioritization Criteria and Approach: Phased Implementation

Prioritization criteria and approach have been pilot tested with Standing Committees

Palliative and End-of-Life Care

Cancer

Renal

Neurology

Rubric for Measure Prioritization Score

Outcome-focused

- Process
- Intermediate Clinical Outcome
- Outcome/ CRU

Improvable

- Passed Performance Gap
- Majority of Votes for "High"

Meaningful to patients and family caregivers

- Patient-Reported Outcome
- Areas that reflect a change by the patient - including but not limited to change in symptoms, change in functional status, change in activities, wait times.

Support systemic/integrated view of care

- Composite
- Agnostic to setting/Applicable to multiple settings
- Agnostic to condition
- Readmissions/System Outcome

Patient Safety Portfolio Prioritization

#	Project	Title	Score	Prioritization rating
0141	2015	Patient Fall Rate	3.75	★ ★ ★ ★ ☆
0202	2015	Falls with injury	3.75	★ ★ ★ ★ ☆
0138	2014	Urinary Catheter-Associated Urinary Tract Infection for Intensive Care Unit (ICU) Patients	3.75	★ ★ ★ ★ ☆
0139	2014	Central Line Catheter-Associated Blood Stream Infection Rate for ICU and High-Risk Nursery (HRN) Patients	3.75	★ ★ ★ ★ ☆
0674	2015	Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)	3.44	★ ★ ★ ☆ ☆
0679	2015	Percent of High Risk Residents with Pressure Ulcers (Long Stay)	3.44	★ ★ ★ ☆ ☆
0450	2016	Postoperative Pulmonary Embolism or Deep Vein Thrombosis Rate (PSI 12)	3.13	★ ★ ★ ☆ ☆
2909	2016	Perioperative Hemorrhage or Hematoma Rate	3.13	★ ★ ★ ☆ ☆
0531	2015	Patient Safety for Selected Indicators	3.13	★ ★ ★ ☆ ☆
2723	2015	Wrong-Patient Retract-and-Reorder (WP-RAR) Measure	3.13	★ ★ ★ ☆ ☆
3000	2016	PACE-Acquired Pressure Ulcer-Injury Prevalence Rate	2.81	★ ★ ★ ☆ ☆
2940	2016	Use of Opioids at high Dosage in Persons without Cancer	2.81	★ ★ ★ ☆ ☆
2950	2016	Use of Opioids from Multiple Providers in Persons without Cancer	2.81	★ ★ ★ ☆ ☆
2951	2016	Use of Opioids from Multiple Providers and at High Dosage in Persons without Cancer	2.81	★ ★ ★ ☆ ☆
2993	2016	Potentially Harmful Drug-Disease Interactions in the Elderly	2.81	★ ★ ★ ☆ ☆
3001	2016	PACE Participant Fall Rate	2.81	★ ★ ★ ☆ ☆
3003	2016	PACE- Participants Falls with Injury	2.81	★ ★ ★ ☆ ☆
0347	2015	Death Rate in Low-Mortality Diagnosis Related Groups (PSI 2)	2.81	★ ★ ★ ☆ ☆
0352	2015	Failure to Rescue In-Hospital Mortality (risk adjusted)	2.81	★ ★ ★ ☆ ☆
0353	2015	Failure to Rescue 30-Day Mortality (risk adjusted)	2.81	★ ★ ★ ☆ ☆
0689	2015	Percent of Residents Who Lose Too Much Weight (Long-Stay)	2.81	★ ★ ★ ☆ ☆
0684	2014	Percent of Residents with a Urinary Tract Infection (Long-Stay)	2.81	★ ★ ★ ☆ ☆

Patient Safety Portfolio Prioritization

#	Project	Title	Score	Prioritization rating
3025	2016	Ambulatory Breast Procedure Surgical Site Infection (SSI) Outcome Measure	2.50	★ ★ ★ ☆ ☆
0556	2014	INR for Beneficiaries Taking Warfarin and Interacting Anti-Infective Medications	2.19	★ ★ ☆ ☆ ☆
0101	2015	Falls: Screening for Future Fall Risk	1.88	★ ☆ ☆ ☆ ☆
0205	2015	Nursing Care Hours Per Patient Day (RN, LPN, and UAP)	1.88	★ ☆ ☆ ☆ ☆
2720	2015	National Healthcare Safety Network (NHSN) Antimicrobial Use Measure	1.88	★ ☆ ☆ ☆ ☆
2337	2014	Antipsychotic Use in Children Under 5 Years Old	1.88	★ ☆ ☆ ☆ ☆
2983	2016	Potassium Sample Hemolysis in the Emergency Department	1.56	★ ☆ ☆ ☆ ☆
0687	2015	Percent of Residents Who Were Physically Restrained (Long Stay)	1.56	★ ☆ ☆ ☆ ☆
2726	2015	Prevention of Central Venous Catheter (CVC)-Related Bloodstream Infections	1.56	★ ☆ ☆ ☆ ☆
0541	2014	Proportion of Days Covered (PDC): 5 Rates by Therapeutic Category	1.56	★ ☆ ☆ ☆ ☆
2371	2014	Annual Monitoring for Patients on Persistent Medications (MPM)	1.56	★ ☆ ☆ ☆ ☆
2988	2016	Medication Reconciliation for Patients Receiving Care at Dialysis Facilities	1.25	★ ☆ ☆ ☆ ☆
0097	2015	Medication Reconciliation	1.25	★ ☆ ☆ ☆ ☆
0204	2015	Skill Mix (Registered Nurse [RN], Licensed Vocational/Practical Nurse [LVN/LPN], Unlicensed Assistive Personnel [UAP], and Contract)	1.25	★ ☆ ☆ ☆ ☆
0419	2015	Documentation of Current Medications in the Medical Record	1.25	★ ☆ ☆ ☆ ☆
2732	2015	INR Monitoring for Individuals on Warfarin after Hospital Discharge	0.94	★ ☆ ☆ ☆ ☆
0555	2014	Monthly INR Monitoring for Beneficiaries on Warfarin	0.94	★ ☆ ☆ ☆ ☆
0537	2015	Multifactor Fall Risk Assessment Conducted in Patients 65 and Older	0.31	☆ ☆ ☆ ☆ ☆

Public Comment

Next Steps

Activities and Timeline

Cycle 1/Fall 2017

Process Step	Timeline
Post-Meeting Call	Tuesday, February 13, 2018 1:00-3:00 pm EST
Draft Report posted for Public and NQF Member Comment	March 1- 30, 2018
Committee Post-Comment Web Meeting	Tuesday, April 17, 2018 1:00-3:00 pm, EST
CSAC Review and Approval	Tuesday, May 8, 2018 3:00-5:00 pm, EST
Appeals	June 6-July 5, 2018

Activities and Timeline

Cycle 2/Spring 2018

Process Step	Timeline
Committee Measure Evaluation Tutorial Web Meeting	Tuesday, May 1, 2018 1-3 PM EST
Committee In-Person Meeting (1 day) NQF Offices, Washington, DC	Tuesday, June 19, 2018
Committee Post-Measure Evaluation Web Meeting	Tuesday, July 10, 2018
Committee Post-Comment Web Meeting	Wednesday, September 12, 2018 1-3 PM EST

Project Contact Info

- Email: patientsafety@qualityforum.org
- NQF Phone: 202-783-1300
- Project page:
http://www.qualityforum.org/Patient_Safety.aspx
- SharePoint site:
http://share.qualityforum.org/Projects/patient_safety/SitePages/Home.aspx

THANK YOU