



TO: Consensus Standards Approval Committee (CSAC)
FR: Jesse Pines and Jessica Weber
RE: *Patient Safety – Complications Endorsement Maintenance: Phase II* Member Voting Results*
DA: November 7, 2012

The CSAC will review recommendations from the *Patient Safety – Complications Phase II* project at its November 7-8, 2012 in-person meeting.

*The Member vote period for this report concluded on November 1, 2012. Voting results are now available and have been added to this revised memo. The results were also posted to the NQF website. Please refer to the memo dated October 29, 2012 for a summary of the project, recommended measures, themes identified from and responses to the public and member comments.

NQF MEMBER VOTING RESULTS

All fourteen recommended measures were approved with 75% approval or higher. Representatives of 20 member organizations voted; no votes were received from members of the Public/Community Health Agency, Purchaser or Supplier/ Industry councils. Members that submitted comments cited their desire for greater harmonization and that measures may not lead to an improvement in patient outcomes. Results for each measure are provided below. (Links are provided to the full measure summary evaluation tables.)

Individual Measure Voting Results

Measure #0035 Fall risk management

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	4	0	0	4	100%
Health Professional	6	0	1	7	100%
Provider Organizations	1	3	0	4	25%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	3	0	1	4	100%
Supplier/Industry	0	0	0	0	
All Councils	15	3	2	20	83%
Percentage of councils approving (>50%)					80%
Average council percentage approval					85%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted yes): This is a two part measure. The first element is a process measure that is weak. The second part on management is much stronger and is the reason for our vote.

Developer response: Thank you for the comment. NCQA believes that having two rates separate in this measure (discussing whether a fall has occurred and discussing ways to prevent future falls) provides health plans with the adequate information to identify where a quality problem is occurring (i.e. are consumers not being asked about falls/balance and gait problems OR are consumers with identified falls/balance and gait problems not being provided appropriate follow-up care). Both processes of care are recommended by the USPSTF.

Federation of American Hospitals (voted no): Patient reported data with no exclusion for dementia is inappropriate. This is good concept, but the measure is not ready in our opinion.

Developer response: Individuals with dementia and other cognitive disabilities may be unable to answer these questions. To address this limitation, the Health Outcomes Survey allows for a family member or “proxy” to fill out the survey. The survey is mailed to patients with the following instructions: “If you are unable to complete this survey, a family member or “proxy” can fill out the survey about you” At the end of the survey, the respondent is asked the following question: Q5 = Who completed this survey form? Answer = “Person to whom survey was addressed” or “Family member or relative of person to whom the survey was addressed” or “Friend of person to whom the survey was addressed” or “Professional caregiver of person to whom the survey was addressed”

This information is used to determine if information from proxy respondents is systematically biased or different from patient self-reported data.

Measure #0101 Falls: Screening risk-assessment and plan of care to prevent future falls

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	0	1	0	1	0%
Health Plan	4	0	0	4	100%
Health Professional	6	0	1	7	100%
Provider Organizations	3	1	0	4	75%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	3	0	1	4	100%
Supplier/Industry	0	0	0	0	
All Councils	16	2	2	20	89%
Percentage of councils approving (>50%)					80%
Average council percentage approval					75%

*equation: Yes/ (Total - Abstain)

Measure #0141 Patient fall rate

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	4	0	0	4	100%
Health Professional	6	0	1	7	100%
Provider Organizations	2	2	0	4	50%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	15	2	3	20	88%
Percentage of councils approving (>50%)					80%
Average council percentage approval					90%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted yes): This is limited to the hospital setting, so should become a subset of a harmonized composite measure on falls

NQF response: The Committee review included a discussion of whether measures were related or competing. They requested that several similar falls and pressure ulcer measures be combined in order to provide a more complete assessment of patient care. They also determined that several existing measures were related but not directly

competing, since none of the measures had precisely the same focus and target population. The Committee recommended that in the future harmonized measures should be developed that apply across populations, settings, and care transitions.

Measure #0202 Falls with injury

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	0	1	0	1	0%
Health Plan	4	0	0	4	100%
Health Professional	6	0	1	7	100%
Provider Organizations	3	1	0	4	75%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	15	2	3	20	88%
Percentage of councils approving (>50%)					80%
Average council percentage approval					75%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted yes): this measure has a very specific focus and while a good measure, really should be harmonized with others in this set for a composite falls measures

NQF response: The Committee review included a discussion of whether measures were related or competing. They requested that several similar falls and pressure ulcer measures be combined in order to provide a more complete assessment of patient care. They also determined that several existing measures were related but not directly competing, since none of the measures had precisely the same focus and target population. The Committee recommended that in the future harmonized measures should be developed that apply across populations, settings, and care transitions.

Measure #0266 Patient fall

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	4	0	0	4	100%
Health Professional	5	0	2	7	100%
Provider Organizations	1	3	0	4	25%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	13	3	4	20	81%
Percentage of councils approving (>50%)					80%
Average council percentage approval					85%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted yes): this measure has a very specific focus and while a good measure, really should be harmonized with others in this set for a composite falls measures

Developer response: We thank the commenter for their input. While we think the idea is an interesting one, we believe that the additional complexity associated with composite measures is unlikely to yield significant additional value for ASC providers and their patients.

NQF response: The Committee review included a discussion of whether measures were related or competing. They requested that several similar falls and pressure ulcer measures be combined in order to provide a more complete assessment of patient care. They also determined that several existing measures were related but not directly competing, since none of the measures had precisely the same focus and target population. The Committee recommended that in the future harmonized measures should be developed that apply across populations, settings, and care transitions.

Measure #0537 Multifactor fall risk assessment conducted in patients 65 and older

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	0	1	0	1	0%
Health Plan	4	0	0	4	100%
Health Professional	5	0	2	7	100%
Provider Organizations	3	1	0	4	75%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	14	2	4	20	88%
Percentage of councils approving (>50%)					80%
Average council percentage approval					75%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted yes): this measure has a very specific focus and while a good measure, really should be harmonized with others in this set for a composite falls measures

Developer response: CMS will continue to explore opportunities to harmonize future iterations of the home health falls risk assessment measure, within the restrictions imposed by the OASIS data set

NQF response: The Committee review included a discussion of whether measures were related or competing. They requested that several similar falls and pressure ulcer measures be combined in order to provide a more complete assessment of patient care. They also determined that several existing measures were related but not directly competing, since none of the measures had precisely the same focus and target population. The Committee recommended that in the future harmonized measures should be developed that apply across populations, settings, and care transitions.

Measure #0538 Pressure ulcer prevention and care

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	0	1	0	1	0%
Health Plan	4	0	0	4	100%
Health Professional	6	0	1	7	100%
Provider Organizations	2	1	1	4	67%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	14	2	4	20	88%
Percentage of councils approving (>50%)					80%
Average council percentage approval					73%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted yes): We are surprised that there is no risk adjustment as it would seem that in the home health setting that there are a variety of patients at risk.

Developer response: "Pressure ulcer prevention and care" reports whether agencies are implementing best practices related to pressure ulcers. Because it is a process measure, rather than an outcome measure that is potentially affected by patient characteristics, risk adjustment is not appropriate.

Measure #0337 Pressure ulcer rate (PDI 2)

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	4	0	0	4	100%
Health Professional	6	0	1	7	100%
Provider Organizations	3	1	0	4	75%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	16	1	3	20	94%
Percentage of councils approving (>50%)					100%
Average council percentage approval					95%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted yes): Unlike #538, this measure has a large number of exclusions. There should be harmonization between 538 and 337, recognizing the differences in home health and hospital care.

Developer response: We agree that this measure (PDI 2) has a large number of exclusions. These exclusions were recommended by our expert panel at the time that the measure was developed. However, subsequent analyses suggest that some of these exclusions may no longer be necessary, and may no longer serve their intended purpose. Therefore, we are currently in the process of reexamining all of these exclusions and identifying those that are candidates for elimination. A specific proposal to this end will be brought back to NQF through the Annual Update process.

Measure #0347 Death rate in low-mortality diagnosis related groups (PSI 2)

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	4	0	0	4	100%
Health Professional	4	0	3	7	100%
Provider Organizations	1	3	0	4	25%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	12	3	5	20	80%
Percentage of councils approving (>50%)					80%
Average council percentage approval					85%

*equation: Yes/ (Total - Abstain)

Measure #0204 Skill mix (Registered Nurse [RN] Licensed Vocational/ Practical Nurse [LVN/ LPN] Unlicensed Assistive Personnel [UAP] and contract)

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	3	1	0	4	75%
Health Professional	6	0	1	7	100%
Provider Organizations	1	3	0	4	25%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	13	4	3	20	76%
Percentage of councils approving (>50%)					80%
Average council percentage approval					80%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted no): We agree with the developer that in current configuration of staffing of most hospitals, that higher RN levels have been correlated with lower mortality. But this measure is a structural measure and not an outcomes measure. Additionally, there may be other structures or organizational developments which may independently improve patient outcomes. This measure may not get to the ultimate improvement in patient outcomes.

Measure #0205 Nursing hours per patient day

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	3	0	1	4	100%
Health Professional	6	0	1	7	100%
Provider Organizations	1	3	0	4	25%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	13	3	4	20	81%
Percentage of councils approving (>50%)					80%
Average council percentage approval					85%

*equation: Yes/ (Total - Abstain)

Measure #0206 Practice Environment Scale - Nursing Work Index (PES-NWI) (composite and five subscales)

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	0	0	1	1	
Health Plan	3	1	0	4	75%
Health Professional	6	0	1	7	100%
Provider Organizations	1	3	0	4	25%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	12	4	4	20	75%
Percentage of councils approving (>50%)					75%
Average council percentage approval					75%

*equation: Yes/ (Total - Abstain)

Voting Comments:

AmeriHealth Mercy Family of Companies (voted no): This measure is similar to #205. We agree with the developer that in current configuration of staffing of most hospitals, that higher RN levels have been correlated with lower mortality. But this measure is a structural measure and not an outcomes measure. Additionally, there may be other structures or organizational developments which may independently improve patient outcomes. This measure may not get to the ultimate improvement in patient outcomes.

Developer response: Measure #206 is a structural measure of the context or environment for professional nursing practice. It indicates to what extent a hospital values and support nurses as highly trained and skilled professionals. It encompasses five organizational domains that influence how every nurse functions. Measure #205 reports the hours of nursing care at various skill levels provided per patient day. These measures are related but distinct: one tells us about nurse availability (#205), the other about nurse potential for a high level of professional practice (206). Yes, other structures or organizational developments may independently improve patient outcomes but some of their success/failure is likely due to this fundamental context that surrounds every nurse in every hospital. Because the nurse has the most contact with the patient, supporting a high level of professional nursing practice is one overarching approach to yield the ultimate improvement in patient outcomes we all seek.

Measure #1716 National Healthcare Safety Network (NHSN) facility-wide inpatient hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) bacteremia outcome measure

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	4	0	0	4	100%
Health Professional	5	0	2	7	100%
Provider Organizations	4	0	0	4	100%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	16	0	4	20	100%
Percentage of councils approving (>50%)					100%
Average council percentage approval					100%

*equation: Yes/ (Total - Abstain)

Measure #1717 National Healthcare Safety Network (NHSN) facility-wide inpatient hospital-onset Clostridium difficile Infection (CDI) outcome measure

Measure Council	Yes	No	Abstain	Total Votes	% Approval*
Consumer	1	0	0	1	100%
Health Plan	4	0	0	4	100%
Health Professional	5	0	2	7	100%
Provider Organizations	4	0	0	4	100%
Public/Community Health Agency	0	0	0	0	
Purchaser	0	0	0	0	
QMRI	2	0	2	4	100%
Supplier/Industry	0	0	0	0	
All Councils	16	0	4	20	100%
Percentage of councils approving (>50%)					100%
Average council percentage approval					100%

*equation: Yes/ (Total - Abstain)