



Perinatal and Reproductive Health Measures

NQF is seeking nominations for a new Standing Committee for Perinatal and Reproductive Health. This multi-stakeholder Standing Committee will evaluate both newly submitted and previously endorsed measures against NQF's measure evaluation criteria and make recommendations for which measures should be endorsed.

BACKGROUND

Despite the fact that the US spends more on perinatal healthcare than any other health sector (\$111 billion in 2010), the US is ranked last in maternal outcomes among all industrialized nations. With nearly four million births in 2014 and great disparities in care and outcomes among different racial and ethnic groups, reproductive and perinatal healthcare are major topics of interest for quality measurement. This project seeks to identify and endorse performance measures for accountability and quality improvement that specifically address conditions, treatments, interventions, or procedures relating to reproductive health, pregnancy planning and contraception, pregnancy, childbirth, and post-partum and neonatal care.

Measures of interest to NQF for this project include: outcome measures; measures of patient engagement and shared decision-making; measures of appropriate use of medical procedures; patient safety measures; population health measures; and eMeasures. As part of this project, twenty four (24) NQF-endorsed measures that are due for maintenance of endorsement review will be re-evaluated against the most recent NQF measure evaluation criteria. Specific conditions and topics addressed by these endorsed measures include: cesarean section rates, early elective deliveries, maternal and newborn infection rates, access to prenatal and postpartum care, screening measures, and breastfeeding measures.

COMMITTEE CHARGE

A multi-stakeholder Standing Committee will be established to evaluate newly submitted measures and measures undergoing maintenance of endorsement review and make recommendations for which measures should be endorsed by NQF.

The Standing Committee's primary work is to evaluate measures against NQF's standard [measure evaluation criteria](#) and make recommendations for endorsement. The Committee will also:

- oversee the Perinatal and Reproductive Health portfolio of measures
- identify and evaluate competing and related measures and identify opportunities for harmonization
- provide advice or technical expertise about the subject to other committees (e.g., cross cutting committees or the Measure Applications Partnership)
- ensure input is obtained from relevant stakeholders
- review draft documents

To learn more about the work of NQF's CDP Standing Committees, review our [Committee Guidebook](#).

STANDING COMMITTEE STRUCTURE

This Committee will be comprised of 20-25 individuals, with members serving terms that may encompass multiple measure review phases.

Terms

Standing Committee members will initially be appointed to a 2 or 3 year term. Each term thereafter would be a 3 year term, with Committee members permitted to serve two consecutive terms. After serving two terms, the Committee member must step down for one full term (3 years) before becoming eligible for reappointment. For more information, please reference the [Standing Committee Policy](#).

Participation on the Committee requires a significant time commitment.

To apply, Committee members should be available to participate in all currently scheduled calls/meetings (dates below). Over the course of the Committee member's term, additional calls will be scheduled or calls may be rescheduled; new dates will be set based on the availability of the majority of the Committee. The measure review phase runs about 7 months in length.

Committee participation includes:

- Reviewing measure submission forms during each cycle of measure review
 - Each committee member will be assigned a portion (1-5) of the measures to fully review (approximately 1-2 hours/measure) and provide a preliminary evaluation on a workgroup call
 - All committee members should familiarize themselves with all measures being reviewed (approximately 15-30 minutes per measure)
- Participating in the orientation call (2 hours)
- Optional attendance at one of two NQF staff-hosted measure evaluation Q &A calls (1 hour)
- Reviewing measures with the full Committee by participating in one of 4 workgroup calls (2 hours); workgroup assignments will be made by area of expertise
- Attending in-person meeting (2 full days in Washington, DC)
- Completing measure review by attending the post-meeting conference call (2 hours)
- Attending conference call following public commenting to review submitted comments (2 hours)
- Completing additional measure reviews via webinar
- Participating in additional calls as necessary
- Completing surveys and pre-meeting evaluations
- Presenting measures and lead discussions for the Committee on conference calls and in meetings

TABLE OF SCHEDULED MEETING DATES

Meeting	Date/Time
Orientation Call (2 hours)	March 16, 2016 from 2PM – 4PM ET
Measure Evaluation Q &A (Attend one of the two)	April 6, 2016 from 4PM – 5PM ET April 8, 2016 from 3PM – 4PM ET
Workgroup Call (2 hours) (Attend one of the four calls. Committee members will be assigned to a workgroup based on expertise and availability.)	April 13, 2016 from 3PM – 5PM ET April 14, 2016 from 12PM – 2PM ET April 15, 2016 from 2PM – 4pm ET April 20, 2016 from 1PM – 3PM ET
In-person Meeting (2 days in Washington, DC)	May 2, 2016 – May 3, 2016
Post-meeting Follow-up Call (2 hours)	May 9, 2016 from 1PM – 3PM ET
Post Draft Report Comment Call (2 hours)	July 26, 2016 from 3PM – 5PM ET

PREFERRED EXPERTISE & COMPOSITION

Standing 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 on committees, a limited number of individuals from each of these stakeholder groups can be seated on a committee.

Nominees should possess relevant knowledge and/or proficiency in process and outcome quality measurement and/or clinical expertise in the evaluation, treatment, diagnostic studies, imaging, interventions, or procedures associated with reproductive and perinatal conditions. NQF is seeking nominees with a variety of clinical experience, including obstetricians, gynecologists, perinatologists, neonatologists, midwives, and nurses. We are also seeking consumers, health plans, patients, purchasers, and methodologists, as well as members with expertise in disparities.

Please review the NQF [conflict of interest policy](#) to learn about NQF's guidelines for actual or perceived conflicts of interest. All potential Standing Committee members must complete a Disclosure of Interest form during the nomination process in order to be considered for a Committee.

NQF will require Committee members who have a conflict of interest with respect to a particular measure to recuse themselves from discussion and any voting associated with those measures. A potential or current member may not be seated on a Committee if the conflict of interest is so pervasive that the member's ability to participate would be seriously limited. For purposes of this

Policy, the term "conflict of interest" means any financial or other interest that could (1) significantly impede, or be perceived to impede, a potential or current member's objectivity, or (2) create an unfair competitive advantage for a person or organization associated with a potential or current Member.

CONSIDERATION & SUBSTITUTION

Priority will be given to nominations from NQF Members when nominee expertise is comparable. Please note that nominations are for an individual, not an organization, so "substitutions" of other individuals from an organization at conference calls, meetings, or for voting is not permitted. Committee members are encouraged to engage colleagues and solicit input from colleagues throughout the process.

APPLICATION REQUIREMENTS

Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve. To be considered for appointment to the Standing 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 and involvement in candidate measure development;
 - curriculum vitae or list of relevant experience (e.g., publications) *up to 20 pages*
- a completed disclosure of interest form which will be requested upon your submission of the nominations form
- confirmation of availability to participate in currently scheduled calls and meeting dates

DEADLINE FOR SUBMISSION

All nominations *MUST* be submitted by **6:00 pm ET on January 26, 2016**.

QUESTIONS

If you have any questions, please contact Suzanne Theberge, Senior Project Manager, or Nadine Allen, Project Manager, at 202-783-1300 or Perinatal@qualityforum.org. Thank you for your interest.