



June 14, 2018

To: Perinatal and Women's Health Standing Committee
From: NQF Staff
Re: June 20 Spring 2018 Perinatal and Women's Health Standing Committee Web Meeting
Purpose: This memo provides the Perinatal and Women's Health Standing Committee with the relevant background information for the upcoming June 20 web meeting.

Background on Spring 2018 Cycle Work

The National Quality Forum (NQF) did not have any measures for maintenance review by the Perinatal and Women's Health Standing Committee, nor did it receive any new measure submissions for the Committee to evaluate. To continue the important work of the Perinatal and Women's Health Standing Committee during this cycle, the Committee will engage in a prioritization exercise of measures within the Committee's portfolio and receive an update from the University of California, San Francisco (UCSF) on its patient-reported outcome measure (PRO-PM) on patient-centered contraceptive counseling.

Committee Portfolio Prioritization Exercise

In July 2016, NQF began implementing a three-year strategic plan, with the goal of ensuring that healthcare providers, patients, and payers have access to high-value, comparable measures that enhance the quality, safety, and affordability of care. To drive a meaningful dialogue at the national level, NQF has promulgated a set of prioritization criteria and a hierarchical framework that highlight the most significant measures and gaps. Together, they will contribute to the identification and creation of a set of measures that matter and motivate improvement.

The four final criteria adopted by NQF are each equally weighted in a measure's final prioritization score:

- Outcome-focused (25 percent)
 - Outcome measures and measures with strong link to improved outcomes and costs
- Improvable (25 percent)
 - Measures with demonstrated need for improvement and evidence-based strategies for doing so
- Meaningful to patients and caregivers (25 percent)
 - Person-centered measures with meaningful and understandable results for patients and caregivers
- Support systemic and integrated view of care (25 percent)
 - Measures that reflect care that spans settings, providers, and time to ensure that care is improving within and across systems of care

The Committee will be presented with the initial scoring results for its portfolio and are asked to provide feedback.

UCSF Development of Contraceptive PRO-PM Measure

During the September 2017 Committee web meeting, UCSF presented an overview of its development and testing of a new PRO-PM on patient-centered contraceptive counseling. To develop the PRO-PM measure, the UCSF team began with the research-based Interpersonal Quality of Family Planning Care scale, an 11-item scale that previously had been demonstrated to be reliable and valid. To develop a PRO-PM measure based on this scale, the team reduced the 11 items to four using an iterative process with both qualitative and quantitative methods. After extensive testing, the team was able to refine the survey to the following four items:

- Respecting me as a person
- Letting me say what mattered to me about my birth control method
- Taking my preferences about my birth control seriously
- Giving me enough information to make the best decision about my birth control method

These items echo what previously had been found to be the most important domains of a patient's experience of contraceptive counseling: interpersonal connection, information sharing, and decision support. At the time of the 2017 presentation, UCSF was working to determine who should receive the survey at a given clinic or system when the measure is implemented.

As of fall 2017, the measure had completed face validity testing with patients, providers, and administrators. Currently, UCSF has begun field testing in sites across the country. During its June 20 presentation, UCSF will provide an update to the Committee on the testing to date and solicit feedback from the Committee. UCSF hopes to submit the measure to NQF for endorsement consideration in 2019.