

Priority Setting for Health Care  
Performance Measurement:  
Addressing Performance Measure  
Gaps in Priority Areas



NATIONAL  
QUALITY FORUM

Person-Centered Care and  
Outcomes Web Meeting

January 30, 2014

*Welcome*

## Person-Centered Care and Outcomes Web Meeting Objectives

- Review project scope and timeline
- Gain consensus on proposed definition and core concepts
- Seek input on the measurement framework
- Review the environmental scan and identify performance measures

### COMMITTEE MEMBERS

Sally Okun, RN (Co-Chair)	PatientsLikeMe
Uma Kotagal, MBBS, MSc (Co-Chair)	Cincinnati Children's Hospital Medical Center
Ethan Basch, MD, MSc	University of North Carolina at Chapel Hill
Dave deBronkart, Jr.	Society for Participatory Medicine
Joyce Dubow, MUP	AARP
Jennifer Eames-Huff, MPH	Consumer-Purchaser Disclosure Project
Troy Fiesinger, MD	Memorial Family Medicine Residency
Christopher Forrest, MD, PhD	The Children's Hospital of Philadelphia, University of Pennsylvania
Lori Frank, PhD	Patient-Centered Outcomes Research Institute
Priti Jhingran, BPharm, PhD	GlaxoSmithKline
Lisa Latts, MD, MSPH, MBA, FACP	LML Health Solutions, LLC
Bruce Leff, MD	Johns Hopkins University School of Medicine
Michael Lepore, PhD	Planetree
Mary MacDonald, MS, BA	American Federation of Teachers
Mary Minniti	Institute for Patient and Family-Centered Care
Eugene Nelson, MPH, DSc	Dartmouth Institute for Health Policy and Clinical Practice
Mark Nyman, MD, FACP	Mayo Clinic
Laurel Radwin, RN, PhD	Veterans Administration
Anne Walling, MD, PhD	University of California-Los Angeles

## *Background*

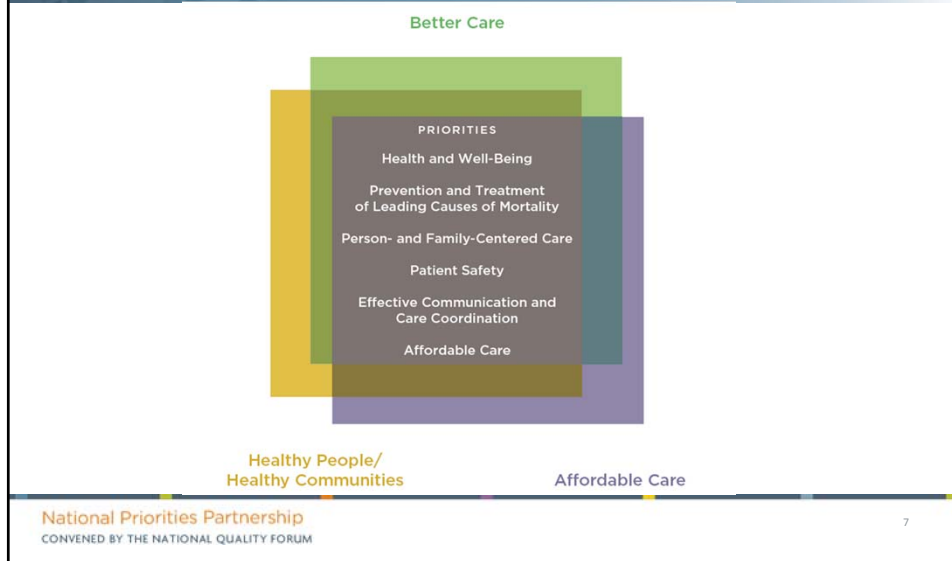
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### The Affordable Care Act: A Framework and Resources for Measurement-Based Improvement

- Section 3014 amended Section 1890 of the Social Security Act requiring the consensus-based entity (NQF) to “synthesize evidence and convene key stakeholders to make recommendations...on...priorities for health care performance measurement in all applicable settings,” to include:
  - gaps in endorsed quality measures, including measures within priority areas identified by the Secretary under the national strategy;
  - areas in which quality measures are unavailable or inadequate to identify or address such gaps; and
  - areas in which evidence is insufficient to support endorsement of quality measures in priority areas identified by the Secretary.

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## The National Quality Strategy: Three Aims and Six National Priorities



## Priority Setting for Health Care Performance Measurement: 2013 Focus Areas

- Adult Immunizations
- Alzheimer's Disease and Related Dementias
- Care Coordination
- Health Workforce
- Person-Centered Care and Outcomes

## Project Purpose

To provide HHS with recommendations on concrete priorities for performance measurement by:

- Providing multistakeholder guidance on high-leverage measurement areas in each topic area
- Identifying existing measures and measure concepts that may be useful for performance measurement
- Prioritizing opportunities and next steps for measure development and endorsement

## *Project Overview*

## Specific Tasks for Person-Centered Care and Outcomes Priority Setting Project

1. Convene a multistakeholder committee of experts including patients and patient advocates
2. Identify existing models and core concepts as a basis for envisioning the ideal state or “north star” of person-centered care
  - Draft definition and draft core concepts
3. Seek input from patients (and families) on what information (i.e., performance measures) would be useful for assessing person-centered care (i.e., “nutrition label” or dashboard of person-centered care).
  - Explore what already has been done by groups such as the Institute for Patient and Family Centered Care and Patients Like Me to find out what matters most to patients and families
  - Explore whether there are any existing measures/tools used by patient advocacy groups for assessing person centered care

## Specific Tasks for Person-Centered Care and Outcomes Priority Setting Project

4. Conduct an environmental scan of potential performance measures, status of development, and alignment with concepts of person-centered care
  - Draft environmental scan
  - Input of this committee and prior PRO Expert Panel to identify examples where measurement of performance on person-centered care is occurring
5. At the in-person meeting, review the above inputs and create the vision of the ideal state or “north star” of person-centered care and identify how best to measure performance and progress in the delivery of person-centered care.
6. Based on the ideal person-centered care, recommend specific measures for implementation or specific concepts for development of performance measures
  - Short-term and intermediate-term recommendations
7. Obtain public comment, and then finalize recommendations.

Website Link

The screenshot shows the National Quality Forum website. The main heading is "Prioritizing Measure Gaps: Person-Centered Care and Outcomes". Below the heading, there is a "Project Status: Current" indicator. The page features a list of events and meetings related to the project, including a "WEB MEETING: DRAFT CONCEPTUAL FRAMEWORK AND ENVIRONMENTAL SCAN" on JAN 30, 2014, and a "CALL FOR NOMINATIONS" on SEP 16, 2013. The website navigation includes tabs for "Setting Priorities", "Measuring Performance", "Topics", "News & Resources", "Events", and "Membership".

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[http://www.qualityforum.org/projects/prioritizing\\_measures/person\\_centered\\_care/#](http://www.qualityforum.org/projects/prioritizing_measures/person_centered_care/#)

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*Draft Conceptual Framework*

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## Status of Framework

- Major task of in-person meeting is to envision ideal state of person-centered care
- Draft definitions and core concepts provide a starting point for that work

## Key Inputs for Definition and Core Concepts

- The IOM's 2001 Crossing the Quality Chasm definition of patient-centeredness and the 2013 Best Care at Lower Cost key characteristics of a continuously learning healthcare system
- The Institute for Patient- and Family-Centered Care definition and core concepts for patient- and family-centered care
- Patient-reported outcome (PRO) domains developed through the NQF Patient-Reported Outcomes and Performance Measurement Project
- The National Quality Strategy (NQS) Priorities of patient and family engagement and effective communication and coordination of care



## Definition for Person- and Family-Centered Care

*Person- and family-centered care is an approach to the planning, delivery, and evaluation of healthcare that is anchored by, respectful of, and responsive to the individual's preferences, needs, and values (including involvement of family) to ensure that individual values guide all clinical decisions.*

## Core Concepts



## Crosswalk of Core Person- and Family- Centered Care Concepts

## Performance Measurement Framework

- Challenges associated with performance measurement for person and family centered care
  - Attributes/characteristics are abstract concepts; not easily defined by one data point
  - Different definitions and interpretations
  - Multiple strategies or approaches for achieving the desired experience; lack of strong evidence base
  - Although associated with outcomes, outcome measurement alone does not provide a sufficient indicator of person- and family-centeredness
  - Structures that support person-centered care (e.g., extended office hours, email communication) may be better suited to standard information than a formal performance measure

## Performance Measurement Framework

- Key principles for person-centered performance measures:
  - Meaningful to consumers and built with consumers
  - Focused on their entire care experience, rather than a single setting or program
  - Measured from the person's perspective and experience (i.e., patient-reported unless not necessary such as information on extended office hours)

## Performance Measurement Framework

- Patient-Reported Outcomes (PROs) is defined as:  
*Any report of the status of a patient's health condition that comes directly from the patient, without interpretation of the patient's response by a clinician or anyone else.*
- PRO Domains
  - Health-related quality of life (HRQoL) including functional status
  - Symptom and symptom burden
  - Experience with care (including patient engagement, shared decisionmaking, communication)
  - Health-related behaviors (e.g., smoking, diet)
- Some PROs may not be an explicit indicator of person-centered care (e.g., performance measures on function or symptoms could be indicator of treatment effectiveness)

## Draft Measurement Framework

## Discussion

- Do definition and core concepts capture the essential elements of person- and family-centered care?
  3. Seek input from patients (and families) on what information (i.e., performance measures) would be useful for assessing person-centered care (i.e., “nutrition label” or dashboard of person-centered care).
    - Explore what already has been done by groups such as the Institute for Patient and Family Centered Care and Patients Like Me to find out what matters most to patients and families
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## *Draft Environmental Scan of Measures*

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### Draft Environmental Scan of Measures and Measure Concepts

Person- and Family-Centered Care Domain	Number of Measures
Experience with Care (including engagement, shared decisionmaking, and communication)	464
Health-Related Quality of Life (including Functional Status)	180
Symptom and Symptom Burden	163
Other	13

## Draft Environmental Scan of Measures and Measure Concepts

- Experience with Care
  - Individual elements of the CAHPS survey tools: cover a variety of care settings, types of care, and disease-specific populations
  - Private sector survey tools: include information sharing, goal setting, communication and concepts such as respect, dignity, cultural competency, participation, and collaboration
- Health Related Quality of Life
  - Majority of measures address functional status and limitation in activities or personal care
  - Some focus on health status more generally (e.g., mentally unhealthy days: work/school absenteeism)
- Symptom and Symptom Burden
  - Measures focused on assessment and management of pain and depression across types of care and disease populations, including many outcome measures

## Continuation of Scan for Measures and Measure Concepts

- Identify examples where measurement of performance on person-centered care is occurring
  - Committee members
  - Previously convened NQF PRO Expert Panel
- Comments/Questions

## *Next Steps*

What do Committee members think they need to be prepared for the in-person meeting?

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## Timeline

- Send additional thoughts or resource to NQF
- Person-Centered Care and Outcomes Committee in-person meeting April 7-8, 2014
- Draft final report will be available for public comment in June/July 2014
- Final Report due to HHS in August 2014

## *Opportunity for Public Comment*

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### For More Information

Name and Title	Role	Contact Information
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