

Technical Expert Panel (TEP) Nomination Form

Project Title: Development of the Long-term Care Hospital Experience of Care Survey

Project Overview

The Centers for Medicare & Medicaid Services (CMS) has contracted with RTI International to develop a patient experience of care survey for patients who receive care from long-term care hospitals (LTCHs). The contract name is *Development of the Long-term Care Hospital and Inpatient Rehabilitation Facility Experience of Care Surveys*. The contract number is No. HHSM-500-20130130115I, Task Order HHSM-500-T003. As part of its measure development process, CMS asked RTI International to convene a technical expert panel (TEP) consisting of stakeholders, experts, researchers, and patients who have received care from an LTCH (and their family members/caregivers) who can contribute direction and thoughtful input to RTI during the survey development process.

Project Objectives

The purpose of this project is to support the development of a patient experience of care survey that will be used to collect data from LTCH patients (and their family members/caregivers) that could be used to measure quality through patients' and surrogates' voices. Quality measures derived from these data will be incorporated into the LTCH quality reporting program, so that patients and families may consider the patients' perspective when choosing an LTCH. RTI is conducting an environmental scan and literature review to support the development of the LTCH patient experience of care survey and will also conduct focus groups with some LTCH patients and their family members/caregivers to determine domains of care that are of interest to consumers. Based on the results of the environmental scan, literature review, and focus groups, RTI will draft an initial set of survey items related to specific health care dimensions or domains about patients' experience of care with LTCHs.

The purpose of the TEP for this project is provide input to inform the direction and development of the patient experience of care survey of LTCH patients. The TEP will review and provide input about findings from the environmental scan to support the inclusion of survey items on specific domains of LTCH care, provide input on issues that might impact a sampling strategy and the survey data collection protocols, and review and provide input on the final set of survey items that will be included in the survey. TEP input will be needed throughout the survey development process.

TEP Requirements

We are seeking a TEP consisting of approximately 9 individuals with the following perspectives and areas of expertise:

- Subject matter expertise in LTCHs and LTCH health care
- Consumer/patient/family/caregiver perspective
- Survey item and composite measure development

- Quality improvement
- Purchaser perspective

TEP Expected Time Commitment

- TEP members will provide input throughout the survey development and refinement process, which will span the duration of the project through September 2017.
- Participate in one or two 6-hour in-person meetings. The first in-person TEP meeting will be held in the Baltimore, Maryland area in February or March 2016. Other in-person meetings may be required in calendar years 2016 and 2017.
- Participate in follow-up meetings via webinar or telephone as needed. Webinar and telephone meetings will be up to two hours in duration.

Instructions

All applicants/nominees except LTCH patients and family members/caregivers must submit the following documents with this completed and signed form:

- A letter of interest (not to exceed two pages) highlighting experience/knowledge relevant to the expertise described above and involvement in measure development.
- Curriculum vitae or a summary of relevant experience (including publications) for a maximum of 10 pages.
- Disclosure of any current and past activities that may indicate a conflict of interest. As a contractor for CMS, RTI International must ensure independence, objectivity, scientific rigor, and balance in its measure development activities.*
- Send the completed and signed TEP Nomination form, statement of interest, and CV to RTI International with “Nomination” in the subject line at LTCHPEC@RTI.ORG by close of business November 20, 2015 Eastern Time.

Note that LTCH patients and family members/caregivers applicants/nominees are not required to submit a curriculum vitae and letter of interest but must submit the completed LTCH TEP Nomination Form. Patient and family members/caregivers may elect to keep their names confidential in public documents.

Potential TEP members must be aware that participation on the TEP is voluntary. As such, individuals wishing to participate on the TEP should understand that their input will be recorded in the meeting minutes. In addition, project staff from CMS will attend and participate in all TEP meetings. Proceedings of the TEP will be summarized in a report that is disclosed to the general public. If a participant has disclosed private, personal data by his or her own choice, then that material and those communications are not deemed to be covered by patient-provider confidentiality. If potential patient participants wish to keep their names confidential, those requests can be accommodated. RTI International will answer any questions about confidentiality.

*All potential TEP members must disclose any significant financial interest or other relationships that may influence their perceptions or judgment. It is unethical to conceal (or fail to disclose)

conflicts of interest. However, the disclosure requirement is not intended to prevent individuals with particular perspectives or strong points of view from serving on the TEP. The intent of full disclosure is to inform RTI, other TEP members, and CMS about the source of TEP members' perspectives and how that might affect discussions or recommendations.

Applicant/Nominee Information (Self-Nominations Are Acceptable)

Person Recommending the Nominee:

Name:

Credentials:

Professional Role:

Organizational Affiliation:

City:

State:

Mailing address:

Telephone:

Email:

Person Recommending the Nominee

Complete this section only if you are nominating a third party for the TEP. You must sign this form and attest that you have notified the nominee of this action and that they are agreeable to serving on the TEP. The measure developer will request the required information from the nominee.

- Name, credentials, professional role
- Organizational affiliation, city, and state
- Contact information: (mailing address, telephone and email)

I attest that I have notified the nominee of this action and that the nominee is agreeable to serve on the TEP.

Signature: _____ Date: _____

Applicant/Nominee's Disclosure

This section addresses disclosure of any current and past activities that may indicate a conflict of interest. As a measure developer for CMS, RTI International must ensure independence, objectivity, scientific rigor, and balance in its measure development activities.

- Do you or any family members have a financial interest, arrangement, or affiliation with any corporate organizations that may create a potential conflict of interest?

☐ Yes ☐ No

If yes, please describe (grant/research support, consultant, speaker's bureau, and major stock shareholder, other financial or material support). Please include the name of the corporation/organization.

- Do you or any family members have intellectual interest in a study or other research related to the quality measures under consideration?

☐ Yes ☐ No

If yes, please describe the type of intellectual interest and the name of the organization/group.

Applicant/Nominee's Agreement

- If at any time during my service as a member of this TEP my conflict of interest status changes, I will notify the measure developer and the TEP chair.
- It is anticipated that there will be up to two 6-hour in-person TEP meetings that will be held in or near Baltimore, Maryland between February 2016 and September 2016 and potentially TEP meetings by webinar and telephone conference calls. I am able to commit to attending the TEP meetings in person, by teleconference, or by mutually agreed-upon alternative means.
- If selected to participate in the TEP and the measures are submitted to a measure endorsement organization (such as the National Quality Forum), I will be available to discuss the measures with the organization or its representatives and work with the measure developer to make revisions to the measures, if necessary.
- I understand that my participation on the TEP is voluntary. As such, I understand that my input will be recorded in the meeting minutes. Proceedings of the TEP will be summarized in a report that is disclosed to the general public. If I have disclosed private, personal data by my own choice, then that material and those communications are not deemed to be subject to any confidentiality laws.
- If selected to participate in the TEP, I will keep all materials and discussions confidential until such time that CMS authorizes their release. I have read the above and agree to abide by it.

Signature: _____ Date: _____

For patient and family member/caregiver participants only: I wish to keep my name confidential.

☐ Yes ☐ No