

# CALL FOR NOMINATIONS TO the Prioritization and Identification of Health IT Patient Safety Measures Expert Panel

#### BACKGROUND

Implementation and adoption of health information technology (HIT) is widely viewed as essential to the transformation of health care, and a key to satisfying the diverse needs of stakeholders burdened by rising costs, inefficiency, preventable errors, and poor quality of care. While the use of HIT presents many new opportunities to improve patient care and safety, it can also create new hazards, and will fulfill its potential only if the risks associated with its use are identified and a coordinated effort is developed to mitigate those risks.

HIT-related safety events are often multifaceted, involving not only potentially unsafe technological features of electronic health records, but also user behaviors, organizational characteristics, and rules and regulations that guide most technology-focused activities. HIT-related errors can include HIT unavailability, HIT malfunction, incorrect use of HIT, or failures in communication or interaction between HIT systems, resulting in data being lost or incorrectly entered, displayed, or transmitted. As EHRs are adopted more widely throughout the healthcare system, there will be increased opportunities for both HIT-related harm and HIT-facilitated improvements in patient safety. Accordingly, there will also be an increased need to systematically assess the impact of HIT on patient care and patient safety.

Through this project, NQF will explore the intersection of HIT and patient safety in order to create a report that will provide a comprehensive framework for assessment of HIT safety measurement efforts, a measure gap analysis and recommendations for gap-filling, and best practices and challenges in measurement of HIT safety issues to-date.

#### **COMMITTEE CHARGE**

A multi-stakeholder Committee will be established to assess HIT safety measurement efforts, review best practices and challenges in measurement of HIT safety issues, and identify important considerations to guide the development of a conceptual framework for measurement of HIT-related safety events consistent with the AHRQ Common Formats and other relevant safety and quality measure initiatives or programs.

The Committee's primary work will be to provide input and guidance towards the development of a set of recommendations around the measurement of HIT-related safety events. The Committee will also:

- Synthesize the current evidence around health IT and safety;
- Identify all relevant and meaningful health IT patient safety measures;

# Nominations Due By Thursday, October 30, 2014, 6:00 PM ET

- Provide input and direction on the development of a conceptual framework for analyzing measures of safety in health IT;
- Identify priority measurement areas with the greatest potential for both improving the safety of HIT and using HIT to improve patient safety;
- Identify the highest priority measure gaps and make recommendations to address gaps in measures of health IT safety;
- Identify challenges to effective performance measurement, such as limited infrastructure for information exchange and lack of evidence to support performance measure development for particular topics;
- Identify best practices and challenges in performance measurement related to the use of adverse drug event measures at present, and as anticipated with their evolution by focusing on electronic health records;

# Committee

The Committee will be comprised of 15-20 individuals representing multiple stakeholders, including experts in business process measurement and evaluation; clinicians in private practice, institutional settings, and those providing care to underserved communities; health services delivery administration; and federal and state governments. Given the technical nature of this topic area, NQF will also be seeking experts in human factors and EHR usability testing, electronic health records, and patient safety issues related to the use of HIT.

Participation in the Committee requires a significant time commitment. To apply, potential Panel members must be available to participate in all currently scheduled calls/meetings. Occasionally, additional calls are scheduled or existing calls must be rescheduled; new dates are set based on the availability of a majority of the Committee members. This project will last approximately fifteen (15) months, but the bulk of the Committee's participation will be in the first twelve (12) months of the project.

### Committee participation includes:

- Participate in the orientation call (2 hours)
- Review materials prior to the meeting (2 hours)
- Attendance at two, one-day in-person meetings (2 full days in Washington, DC);
- Participate in two calls to review the environmental scan results and identify important considerations to guide the development of the conceptual framework (2 hours each)
- Review the draft recommendations and report (2 hours)
- Review comments received and assist with responses (2-4 hours depending on volume)
- Participate in the post-comment conference call to finalize recommendations (2 hours)
- Co-chairs participate in CSAC call to review final recommendations (2 hours)

### Table of scheduled meeting dates

Meeting	Date/Time
Orientation Call (2 hours)	Tuesday, December 16, 2014 3:00 PM-5:00 PM

In-person meeting (2-day meeting in Washington, DC)	February 18-19, 2015
Post-Meeting Webinar (2) (2 hours each)	Tuesday, April 21, 2015 3:00 PM-5:00 PM
	Tuesday, July 21, 2015 3:00 PM-5:00 PM
In-person meeting (2-day meeting in Washington, DC)	September 16-17, 2015
Post Draft Report Comment Call (2 hours)	Tuesday, January 26, 2016 3:00 PM-5:00 PM

### Preferred Expertise & Composition

Committee members are selected to ensure representation from a variety of stakeholders, including consumers, industry groups, purchasers, professionals, health insurers or plans, healthcare providers and practitioners, research entities, measure developers, and HIT experts. Because NQF attempts to represent a diversity of stakeholder perspectives on panels, a limited number of individuals from each of these stakeholder groups can be seated onto a panel.

Please review the NQF <u>Conflict of interest policy</u> to learn about how NQF identifies potential conflicts of interest. All potential Committee members must disclose any current and past activities prior to and during the nomination process in order to be considered.

# CONSIDERATION AND SUBSTITUTION

Priority will be given to nominations from NQF Members when nominee expertise is comparable. Please note that nominations are for individual, not organizations, so "substitutions" of other individuals from an organization at conference calls or meetings is not permitted. However, 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 Committee, please submit the following information:

- a completed <u>online nomination form</u>, including:
  - o a brief statement of interest
  - $\circ$  a brief description of nominee expertise highlighting experience relevant to the panel
  - a short biography (maximum 750 characters), highlighting experience/knowledge relevant to the expertise described above and involvement in candidate measure development;
  - o curriculum vitae or list of relevant experience (e.g., publications) up to 20 pages
- a completed disclosure of interest form. This will be requested upon your submission of the nominations form for Committees actively seeking nominees.
- confirmation of availability to participate in currently scheduled calls and meeting dates.
  Committees or projects actively seeking nominees will solicit this information upon submission of the online nomination form.

#### DEADLINE FOR SUBMISSION

All nominations *MUST* be submitted by **Thursday**, **October 30**, **2014 at 6pm EST**.

### QUESTIONS

If you have any questions, please contact Andrew Lyzenga, MPP, or Adeela Khan, MPH, at 202-783-1300 or via email at <u>safetyandhit@qualityforum.org</u>. Thank you for your interest.