

RFA #1207131049
Nursing Home Quality Improvement Projects:
Customer Satisfaction Survey

Questions and Answers and Modifications

The following has been updated/modified in the RFA. Strike-through indicates deleted text; underlined text is new.

Page 6, Section III C #5 is modified as follows:

The contractor must use MDS 3 items to screen residents to identify those who cannot be interviewed. To assess residents' satisfaction with their nursing homes, the contractor must use one of the following two surveys: (a) the Consumer Assessment of Health Provider Services – Nursing Home Long Stay Residents Survey (CAHPS), or (b) the My InnerView Skilled Nursing Resident Satisfaction Interview. The CAHPS survey is in the public domain and can be downloaded from:

<http://www.tahsa.org/html/2011%201A%20-%20part%204.pdf>. The My InnerView Skilled Nursing Resident Satisfaction Interview is a proprietary survey instrument. Applicants under this RFA who propose to use the My InnerView survey must obtain all required approvals from the National Research Corporation to use the survey in the proposed project and are responsible for paying National Research Corporation any fees it charges to use the survey. ~~If the applicant awarded this contract chooses to use the My InnerView survey, it will be required to submit documentation acceptable to the Department of Health that it has complied with all National Research Corporation requirements to use the survey.~~ Documentation to this effect must be included in the application. Applicants who propose to use My InnerView but who do not include such documentation in their application are not eligible to be awarded the contract. Such applications will be rejected without review.

Pages 18-19, Section V B is modified as follows:

Applicant's Organizational Experience: Page limit is three pages. This section addresses organizational experience, not individual employee experience. Provide your organization's vision and mission statements. Provide an overview of the services you provide, to whom, and how long you have provided these services. Next, provide information specific to your organization's experience, including the months (number of months, start date and end date) of experience, in each of the following five areas. If your organization does not have experience with any of the following, so state. This experience must have been acquired in the ten year period beginning September 1, 2003. Experience acquired prior to this date will not be considered in scoring applications on this criterion:

- (1) Administering the survey specified on the Application Cover Sheet. This experience need not be in New York nursing homes;
- (2) Administering in-person interviews with New York's long stay nursing home residents – both those with cognitive impairment and those without cognitive impairment;
- (3) Working with New York nursing homes to improve the day-to-day operations that have a discernible impact on residents;
- (4) Quality improvement in nursing homes. This experience need not be in New York nursing homes; and
- (5) Data collection, data processing and database development, and data analysis using data from the survey specified on the Application Cover Sheet. This experience need not be related to survey data collected in New York nursing homes.

Applicant's Staff Experience: Page limit is four pages. Copies of resumes are not included in this page limit. This section addresses the experience of individual named employees whose resumes are included in this section of the application and who will be assigned to the project if the applicant is awarded the contract. Describe the employee's role and responsibilities on the project, should your organization be awarded the contract, and the education and experience of that employee that qualifies him/her for those roles and responsibilities.

Next, provide information specific to this employee's experience, including the months (number of months, start date and end date) of experience, in each of the following five areas. If the employee does not have experience with any of the following, so state. This experience must have been acquired in the ten year period beginning September 1, 2003. Experience acquired prior to this date will not be considered in scoring applications on this criterion:

- (1) Administering the survey specified on the Application Cover Sheet. This experience need not be in New York nursing homes;
- (2) Administering in-person interviews with New York's long stay nursing home residents – both those with cognitive impairment and those without cognitive impairment;
- (3) Working with New York nursing homes to improve the day-to-day operations that have a discernible impact on residents;
- (4) Quality improvement in nursing homes. This experience need not be in New York nursing homes; and
- (5) Data collection, data processing and database development, and data analysis using data from the survey specified on the Application Cover Sheet. This experience need not be related to survey data collected in New York nursing homes.

Include current, legible resumes for each employee whose qualifications are described in this section, at the end of this section. Please remember: *Resumes cannot use smaller than 10 point font. They must be legible. This may mean that they must be retyped.*

Page 20, Section V B, Customer Satisfaction Survey Tool Documentation, is modified as follows:

Customer Satisfaction Survey Tool Documentation: The contractor must use the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Nursing Home Survey – Long Stay Resident or the My InnerView Skilled Nursing Resident Satisfaction Interview. The survey or interview proposed to be used must be indicated on the Application Cover Sheet (Attachment 3). ~~If the applicant awarded the contract proposes to use the My InnerView survey, the applicant will be required to submit documentation acceptable to the Department of Health that it complied with all terms of use imposed by the organization that owns the survey. If not included in this section of the application, this documentation must be submitted within two weeks of contract award notification. Failure to submit such documentation within two weeks of contract award notification may result in a Department determination that the applicant is not responsive to procurement requirements and the Department may award the contract to the next highest scoring applicant. Applicants who propose to use the My InnerView survey must include all required approvals from the National Research Corporation to use the survey in the proposed project in this section of the application. This section of the application is not applicable for applicants who propose to use the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Nursing Home Survey – Long Stay Resident interview.~~

Pages 21-22, Section V C 1, Pass/Fail Criteria, is modified as follows:

Applications will be reviewed on the following pass/fail criteria. Those that fail one or more pass/fail criteria will be rejected, will not be further reviewed, and are ineligible to be awarded the contract:

- a. Application not delivered to the address specified in this RFA by the date and time specified in this RFA; and/or
- b. Application Cover Sheet and Application Table of Contents are not used and completed as per the requirements of this RFA; and/or
- c. Application Table of Contents cannot be altered other than changing font or font size and entering page numbers; and/or
- d. Information on Application Cover Sheet must be identical to information in Vendor Responsibility Questionnaire; and/or
- e. On the Application Cover Sheet, applicant does not propose to use the CAHPS Nursing Home Long Stay Resident Survey or the My InnerView Skilled Nursing Resident Satisfaction Interview; and/or
- f. On the Application Cover Sheet, applicant does not include nursing home and resident/family sample size, or sample size(s) is less than the minimum sample size specified in the RFA; and/or
- g. If applicant proposes to use the My InnerView Skilled Nursing Resident Satisfaction Interview, required documentation not included in the application;
- h. Application is hand-written; and/or
- i. Applicant is a nursing home licensed under Article 28 of NYS Public Health Law; and/or
- j. Application does not include the screening tool and process used to determine whether the resident is interviewable; and/or
- k. After the separate sealed envelope containing the budget is opened:
 - o total two-year budget exceeds \$1,000,000; and/or
 - o Attachment 5 Budget Format is not used.

Questions and Answers:

Question That Cannot Be Answered Due to Confidentiality Concerns

Has National Research Corporation (NRC), owner of the My InnerView survey tool, expressed interest in

applying for this contract? Have they declined the opportunity?

Application Technical Requirements Questions

1. Attachment 5, Budget Format: The directions indicate that a separate budget must be submitted for each of the two years plus one that combines the two years. The header at the top of the first table reads "Summary Budget, Months 1 – 24." Should this header be changed for the two single year budgets and retained only for the two-year summary?

Answer: Yes.

2. Attachment 5, Budget Format: The Budget Format has a column for "Match Funds" which is not explained in the instructions. Please provide an explanation of what is included in this column? If no matching funds are available, what is the impact on the evaluation of a specific proposal? Also, there are columns for "Grant Funds" and "Other Funds." Please explain what the difference is between these two columns? Which column represents the vendor's total cost proposal for funds to be received from DOH under this contract?

Answer: The Budget Format is part of the newly-instituted and required Master Grant Contract, which is designed for use by all New York State agencies. Several items that may not apply to all state agencies were included in the template. Match funds are not required for this procurement so this column should be left blank. The Other Funds column is related to Match - other state agencies may require other funding (e.g., federal) to be included in the budget. As Other Funds are not required for this procurement, this column should also be left blank. Any funding an applicant is requesting should be included in the Grant Funds column.

3. Page 7, Section III C 9: The RFA requires follow-up by the contractor with the nursing home following implementation of interventions/recommendations and achievement of steady state. If the intervention/recommendation requires more time than what is available under the contract period, how should the follow-up be accounted for in the Work Plan and budget?

Answer: The work plan and budget should be based on the assumption that all deliverables are completed by the last day of the contract. Should circumstances justify it, and the Department approve it, the contractor's work plan and budget may be modified and/or a no-cost time extension of the contract may be executed.

4. Page 14, Section IV J addresses the Vendor Responsibility Questionnaire and Vendor ID. Can an applicant obtain the Vendor ID and submit the Vendor Responsibility Questionnaire after the contract is awarded?

Answer: No. The VRQ must be completed by the time an application is submitted unless the applicant is exempt (see Attachment 7 to the RFA which is an attestation that states the application has complied with this requirement). Every field in the VRQ must be completed. One of the fields is Vendor ID.

5. Pages 6-7, Section III C 5, Data Collection Instruments: This section states that entities (other than National Research Corporation) that wish to use the proprietary My InnerView survey instruments must obtain approval from National Research Corporation to do so.

However, the RFA does not speak to the possibility that an entity other than NRC might wish to respond to this RFA by proposing to employ the My InnerView survey instruments through a subcontracted arrangement under which NRC would conduct the time 1 and time 2 surveys using that firm's established capabilities. Does the Department regard such an arrangement as falling within the options that respondents are free to propose?

Answer: Yes.

6. Has NRC indicated that their My InnerView skilled nursing survey instrument is available for use by other firms?

Answer: Please review page 6 of the RFA. For additional information, you may contact NRC.

7. Master Contract for Grants, Withholding: This section states that up to 15% of the contract value may be withheld as security for the completion of services. Is this a statutory requirement?

Answer: No. This is not a statutory requirement. It is a contractual term and condition. All entities awarded a grant contract must agree to the standard terms and conditions in the State of New York Master Contract for Grants, included in the RFA as Attachment 8.

All applicants should understand that reimbursement to the contractor is based on the approved budget and work plan. The contractor will be reimbursed on a quarterly basis for approved budgeted expenses incurred in that quarter when all of the activity, work and deliverables scheduled for that quarter have been completed to the Department's satisfaction. Changes to the approved work plan and budget are not uncommon. *With the Department's approval in advance*, the contractor may modify the work plan to, for example, shift deliverables to a later date in order to accommodate unanticipated events and issues. The contractor may also, *with the Department's approval in advance*, modify the budget by moving funds between budget lines. Such budget modifications cannot increase the total amount of the grant award or contract value. The Department will likely not approve budget modifications that shift expenditures from one State fiscal year to another State fiscal year.

Questions Related To Required Customer Satisfaction Surveys

8. Page 4, Section II B: Does the State have a preference for the contractor to use CAHPS or MyInnerView?

Answer: No.

9. We are very familiar with the My InnerView skilled nursing survey instrument and scoring procedures, but have not actually administered the survey as we have a very similar tool of our own that we use for the same purpose. Does this qualify us as eligible applicants? We would be happy to attach our survey instrument and scoring to the application to demonstrate its similarity to the My InnerView instrument.

Answer: Please review page 6 of the RFA. The contractor must use one of the two surveys specified on this page.

10. Do applicants recommending the CAHPS survey be used need to be CAHPS certified to administer the tool for this project?

Answer: No. The Department is unaware of any certification process for the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Nursing Home Survey – Long Stay Resident Interview. The National Commission on Quality of Care does not offer certification for administering or analyzing the data collected with this particular CAHPS instrument.

11. Page 4, Section II B states that higher scores will be applied to organizations that have experience in administering the CAHPS or the My InnerView tools. Will experience in consumer assessment that uses tools other than these also be considered in the "higher score" category?

Answer: No.

12. Page 20, Section V B: The RFA requires “documentation” for the survey tool. The documentation required appears to be authorization to use the tool. Please confirm if this is correct. If not, please clarify what documentation should be included.

Answer: We assume this question concerns My InnerView. The documentation is a letter from the National Research Corporation stating that the applicant is authorized to use the tool for the purposes and in the manner described in the applicant's application. The letter should address who will administer the tool, how the tool will be administered, and who will analyze the data.

Questions Related To Who Must Be Interviewed

13. The RFA implies that the Department wishes the contractor to take all steps necessary to interview residents who have the capacity to understand and respond meaningfully to interview or survey questions. Is this correct?

Answer: Yes. Interviewing residents is preferable to interviewing their families. The Department seeks a contractor who will not look for reasons to not interview residents but rather will look for ways to enable them to participate. Participation by as many residents as possible in each nursing home is critical to this project and the contractor is expected to do everything possible to enable residents to participate, including offering on-site, in-person interviews if that is necessary to obtain participation. For eligible residents who do not decline to participate, the contractor is expected to make multiple attempts to gain their participation. If such residents need assistance to participate, the contractor is expected to arrange for the assistance or change the administration modality to accommodate the resident's needs. For example, some residents may not be able to hold a pencil or make accurate marks on a survey form. The contractor is expected to identify residents who cannot complete the survey in the primary modality used by the contractor, and to arrange for another modality that enables the resident to participate. If a resident has an appointment to complete an interview and misses the appointment, the contractor is expected to reschedule the appointment.

The Department will require the contractor to report facility-specific non-participation rates on a regular basis. It will closely monitor these rates to ensure that the contractor has implemented effective strategies to enable eligible residents to participate.

14. Page 6, Section III C 4: if the minimum number of completed surveys has been reached, but not all eligible residents in one or more nursing homes have been surveyed, can the activity be terminated or is the contractor required to continue to survey the remaining eligible residents and/or family members?

Answer: The contractor may not terminate the interviews but must continue to interview all residents (or their families) in the nursing home(s), and must provide all other deliverables/activities specified in the RFA to these nursing homes. This is why a minimum resident “sample” size and minimum nursing home sample is specified in the RFA. The Department anticipates that the contractor will have to interview more than the minimum number of residents specified in the RFA in order to provide the required services to every nursing home in which at least one resident or family is interviewed.

15. Page 6, Section III C 4 states that all residents (or their families) in each participating nursing home who meet a specific set of criteria must be interviewed. Does this mean they must be offered the opportunity to be interviewed?

Answer: Yes. Section III C 4 of the RFA states:

All residents in each participating nursing home who have lived in that nursing home at least 30 days and have established residency, who are not short stay residents, and who are sufficiently cognitively intact to communicate to the interviewer their levels of satisfaction with the nursing home, must be interviewed. In some cases, it may be necessary to interview family members rather than the resident.

Residents (or families) that meet these criteria must be offered the opportunity to participate via a modality that accommodates their special needs, if any..

16. What if a resident refuses to participate?

Answer: Residents, or their families, may decline to be interviewed and need not provide a reason for their declination. The contractor must document reasons for non-participation (e.g., resident declined), and report this information to the Department of Health.

17. If a resident, or a family, declines to be interviewed, does this disqualify the entire facility?

Answer: No.

18. Pages 7-8, Section III C 9: The RFA states that for time 2 surveys “All residents in each participating nursing home...must be interviewed regardless of whether they were interviewed at time 1 or baseline.” This suggests that a census is to be conducted at each nursing home that is selected, i.e., no random sampling within nursing homes regardless of the number of residents living in the nursing home. Is this correct? If so, does this also apply to the time 1 survey data collection?

Answer: There is neither sampling nor random sampling at either time 1 or time 2.

19. Page 6, Section III C 4: Does the Department have a goal for the percentage of interviews that must be conducted directly with residents as opposed to family members of residents?

Answer: No. However, as noted elsewhere in this document, resident interviews are preferable to family interviews.

20. Pages 7-8, Section III C9: Is there a minimum requirement for total number of completed interviews for time 2, similar to the required 2,565 required for time 1?

Answer: No. Time 2 requirements for who must be interviewed can be found on pages 7-8 of the RFA:

Regardless of whether they were interviewed at time 1 or baseline, all residents or their families who can be interviewed, must be interviewed at time 2. All residents in each participating nursing home who have lived in that nursing home at least 30 days and who have established residency, who are not short stay residents, and who are sufficiently cognitively intact to communicate to the interviewer their levels of satisfaction with the nursing home must be interviewed regardless of whether they were interviewed at time 1 or baseline. In some cases, it may be necessary to interview family members rather than the resident.

21. Pages 7-8, Section III C9, Schedule and Conduct Interviews – Follow-Up or Time 2 Data Collection: This provision is generally clear in explaining that time 2 data collection requirements are the same as those previously specified for time 1. However, there is no actual mention of the requirement of the contractor to conduct surveys or interviews of family members related to residents who are not determined to be eligible to participate in the resident surveys or interviews, though such a requirement is inferred since it is a time 1 requirement. *Is that the correct inference?*

Answer: Yes, the “inference” is correct. This section of the RFA explicitly states that families must be interviewed:

Time 2 interview requirements are the same as those for baseline data collection. Regardless of whether they were interviewed at time 1 or baseline, all residents or their families who can be interviewed, must be interviewed at time 2. All residents in each participating nursing home who have lived in that nursing home at least 30 days and who have established residency, who are not short stay residents, and who are sufficiently cognitively intact to communicate to the interviewer their levels of satisfaction with the nursing home must be interviewed regardless of whether they were interviewed at time 1 or baseline. *In some cases, it may be necessary to interview family members rather than the resident.* The contractor must use the same screening tool and resident satisfaction survey that it used at baseline or time 1. The screening and satisfaction interview tools should include the information required to match residents interviewed at baseline to residents interviewed at time 2. Participating nursing homes will work with the contractor to schedule resident (or family if appropriate) interviews.

Requests for Statistics

22. Does the Office of Primary Care and Health Systems Management (OPCHSM) have an estimate of the percentage of nursing home residents that do not have any known family members?

Answer: No.

23. Does OPCHSM have an estimate of the percentage of nursing home residents that are too cognitively impaired to participate in a CAHPS or My InnerView interview?

Answer: No.

24. Does OHSM have an estimate of the percentage of nursing home residents that are long-stay? If so, please provide the estimated percentages.

Answer: The Department does not have an estimate of the size of the short stay or long stay population. In any case, a statewide or regional average may be misleading as the proportions may vary significantly across nursing homes. Page 6, II. C. #4 of the RFA states: “All residents in each participating nursing home who have lived in that nursing home at least 30 days and have established residency, who are not short stay residents, and who are sufficiently cognitively intact to communicate to the interviewer their levels of satisfaction with the nursing home, must be interviewed. In some cases, it may be necessary to interview family members rather than the resident.”

Survey and MDS 3 Administration

25. Pages 6-9, Section III C 4, Residents To Be Interviewed and Section III C 6, Schedule and Conduct Interviews – Baseline or Time 1 Data Collection: In these sections and at other places in the RFA, the project is described variously as involving satisfaction “surveys” or, more frequently, as resident or family “interviews.” The latter are also sometimes described as “in-person interviews. Section III C 4 also refers to the ability of cognitively intact residents to communicate to the “interviewer”, implying the presence of a live interviewer.

At the same time, Section III C 6 makes explicit that the contractor may collect “survey” information through a variety of modalities or any combination of listed modalities. Is it correct to assume that Section III C 6 is the controlling specification with regard to survey modalities that can be employed by the contractor?

Answer: Yes. The contractor may collect survey or interview data through a variety of modalities.

26. Page 6, Section III C 4 appears to require in-person administration of the survey instrument, while Section III.C.6 appears to permit mail, phone or internet completion of surveys. Please confirm that the statement in Section III C 4 that “all residents must be interviewed” allows for the “interview” to be completed by mail, phone or internet survey and does not require an in-person interview.

Answer: The CAHPS or My InnerView interview can be administered or completed by mail, phone or internet. An in-person interview is not required unless that is the only way to obtain the information from a resident (or the resident’s family) who is eligible to participate in the interview process. The applicant should explain and justify the administration route it proposes to use. The applicant should also discuss how participation will be obtained from residents for whom that administration modality does not work. For example, phone interviews may not work for residents with hearing impairments.

27. Page 19, MDS 3 Screening Tool: The BMIS screening tool in the MDS and its approved scoring mechanism is a valid tool to determine cognitive impairment and ability to be interviewed. Can the facilities provide the latest BIMS score recorded on the most current MDS 3 to the contractor to determine ability to be interviewed, or will the contractor have access to the MDS data?

Answer: The BMIS is an acceptable tool for assessing cognitive impairment. However, the contractor may wish to modify the scoring suggested in CMS’s RAI Version 3.0 Manual, page C-14. High-scoring residents in the moderately impaired group may still have the capacity to understand and respond meaningfully to interview questions. The contractor should consider factors in addition to cognitive impairment in determining whether residents can be interviewed.

The contractor and nursing homes must maintain compliance with applicable CMS MDS data use requirements.

28. Can the MDS 3 questions be administered by mail or phone?

Answer: The contractor must use the most recent MDS 3 data collected by the nursing home.

29. Page 6, Section III C 5: Does the MDS 3 screening need to be administered in both time 1 and time 2 periods? If the MDS 3 needs to be administered in both time periods and if a resident was determined to be cognitively impaired in time 1, can it be assumed they remain cognitively impaired at time 2 or does the MDS 3 need to be administered again?

Answer: The contractor must use the most recently completed (by the nursing home) MDS 3 at both time 1 and time 2.

30. Page 6, Section III C 5: Does the MDS 3 screening need to be administered in both time 1 and time 2 periods? If the MDS 3 needs to be administered in both time periods and if a resident was determined to be cognitively impaired in time 1, can it be assumed they remain cognitively impaired at time 2 or does the MDS 3 need to be administered again?

Answer: The contractor must use the most recently completed (by the nursing home) MDS 3 at both time 1 and time 2.

Applicants should take care to distinguish cognitive impairment from dementia. They should also understand that neither a diagnosis of dementia nor cognitive impairment automatically excludes residents from being interviewed as they may still retain the capacity to understand interview questions and respond meaningfully to them. Applicants should also understand that cognitive

impairment may be due to factors other than a dementia, such as depression or pain. If the underlying cause of the cognitive impairment is effectively treated and managed, the level of cognitive impairment seen at time 2 may be significantly lower than that at time 1, or may not be present at all. Therefore, a resident's capacity to respond meaningfully to interview questions must be assessed at both time 1 and time 2.

Finally, applicants should propose a tested standardized approach to determine residents' capacity to understand and respond meaningfully to interview questions. Assessing this capacity requires attention to more than a diagnosis of dementia or cognitive impairment.

31. Page 7, Section III C 6: If a survey is mailed to residents for completion by the residents at the nursing home, the contractor will not be able to ensure that "in no event may nursing home staff administer the surveys or have access to identifiable resident data." Can the contractor meet this requirement by advising each nursing home in the sample, in advance of mailing the survey, that it must ensure that its staff does not assist the resident in responding to the survey or review the survey before it is mailed back to the contractor?

Answer: Yes. But some residents may need assistance. Applicants should describe the strategies they will use to ensure that residents who need assistance to complete the interview, are identified and get the assistance they need.

Community Involvement

32. Page 8, Section III C12: The RFA requires the involvement of "the entire community of the nursing home (residents, families and employees) in gathering and analyzing the data..." How does the Department envision the involvement of nursing home employees in gathering and analyzing the data? How does the Department envision the involvement of residents and families in analyzing the data?

Answer: Applicants should propose methods of involvement based on their experience.

33. Page 8, Section III C13: The RFA states that the "contractor must interact at least quarterly with participating nursing homes and Department-identified long term care stakeholders..." Please provide some examples of "Department-identified long term care stakeholders" that the contractor will be required to interact with. What is the purpose of the interaction with stakeholders? Will they need to be involved (as residents, families and nursing home staff are) with analysis of the data and development of interventions and recommendations?

Answer: The Department has not yet identified the long term care stakeholders. Among the purposes of such interaction, if the Department requires it, are to provide additional experience and perspectives that may help to develop recommendations and interventions. This may mean that stakeholders will need to be involved with data analysis as well.

Other Substantive Questions

34. Pages 8-9, Section III C 14, Sustainability: This provision requires the contractor to develop strategies by which nursing homes can continue to collect, analyze, and incorporate customer satisfaction findings into future quality improvement projects. The provision also requires the contractors to teach these strategies to nursing homes participating in the proposed project.

Should this requirement be understood as one that follows the intervention phase and is to be completed collaterally within the time 2 and post-time 2 phases of the project? The project time frame is unclear as to how this activity is to be fitted in.

As to the teaching of such strategies, it is assumed absent any particular specifications, that the contractor is free to devise the most efficient teaching methods to participating nursing homes. Is that a correct assumption?

Answer: Relying on their experience in these areas, applicants should schedule this on their work plans as they see fit and should propose teaching methods they think will be effective.

35. Page 4, Section III A, Time Frames/Term and Section III C 9, Schedule and Conduct Interviews: These sections include references to an “intervention” period and a second survey (time 2 data collection), the object being to provide a period for implementation of quality improvements in response to information identified in the baseline surveys. The RFA proposes a 5-month intervention period (months 14-18), but also says that the contractor has to allow sufficient time to elapse after the interventions have been implemented to allow “hypothesized” outcomes to occur at measurable levels, presumably prior to initiating time 2 data collection.

Given that time 2 processes are required to be completed by months 21-22, the availability of measureable levels of outcomes indicating significant improvement seems somewhat speculative in the constricted time frame specified.

Can the Department offer further comment on the suitability of this expectation and the meaning of “hypothesized”?

Answer: The time frames suggested in the RFA are not required. Applicants may propose different time frames.

A Merriam-Webster dictionary definition for hypothesis is “a tentative assumption made in order to draw out and test its logical or empirical consequences.” An Oxford dictionary definition is “a supposition or proposed explanation made on the basis of limited evidence as a starting point for further investigation.” Both definitions are appropriate in the context of this RFA and the required evaluation design which requires applicants to develop hypotheses concerning the impact of their recommended and implemented quality improvements and interventions on customer satisfaction.

36. Page 5, Section III C 3, Nursing Home Sample Selection: The RFA states that within 60 days of contract start date, the contractor will recruit the nursing homes. This presumably means within 60 days after the contract start date. Is that correct?

Answer: Day 1 is the contract start date. The day after the start date is day 2, etc. By day 60, the nursing home sample should have been recruited.

37. Page 18, Section V B, Applicant’s Organizational Experience: With respect to organizational experience of the applicant, is it acceptable if the applicant can demonstrate experience conducting interviews with nursing home residents, but not specific to nursing home residents in New York?

Answer: No. As stated in this section of the RFA, experience with administering the customer satisfaction survey that the applicant proposes to use need not be acquired in New York nursing homes, although it could be. However, the applicant’s experience administering other types of in-person interviews to long stay nursing home residents – both those with cognitive impairment and those without cognitive impairment, must be with residents of New York nursing homes licensed under Article 28 of the Public Health Law.

38. Page 21, Section V B References: The RFA states that a letter of reference is required from 6 New York nursing homes. Will you accept references from nursing homes outside of New York with whom the applicant has successfully worked?

Answer: No. All six references must be New York nursing homes licensed under Article 28 of the Public Health Law.

39. Page 18, Section V B, Applicant's Organizational Experience: This section requires New York State experience for only two of the five sub-criteria - administering in-person interviews with New York's long stay nursing home residents – both those with cognitive impairment and those without cognitive impairment, and working with New York nursing homes to improve the day-to-day operations that have a discernible impact on residents. However, the letters of reference from six New York nursing homes can document experience in any of the five areas, including those that are not restricted to New York. Is this an oversight?

Answer: No. This is correct; the six letters of reference should be from NYS nursing homes.

40. Page 9, Section III C 15: Will data contained in the quarterly reports be permitted in the aggregate to maintain nursing home confidentiality? Can the contractor utilize data use agreements to reassure facilities of confidentiality?

Answer: The Department may require quarterly report data both at the facility level and the aggregate level. It may (or may not) require that facility-level data be "de-identified" such that the facility from which it comes cannot be identified. The Department is prohibited from using such data in the survey and complaint investigation process. It cannot be used to support deficiencies nor will facility level data, where the facility can be identified, be shared with surveyors. No files that allow individual residents or facilities to be identified, will be shared with the public.

The contractor may use data use agreements to reassure facilities of confidentiality. The Department will also reassure facilities of confidentiality if this becomes a barrier to participation.

41. Page 3 refers to the contractor designing and implementing a simple evaluation of the project. This process is different from the evaluation described on page 5 #2. Is the process on page 3 already determined by the DOH? If not, does the page 3 process need to be described in detail in the proposal, If so, where?

Answer: Applicants must propose only one evaluation design. The evaluation design outlined on page 5 of the RFA is a simple evaluation design. For example, a control group is not required. It may appear to be complex because qualitative as well as quantitative data collection and analysis is required.

42. Has this project or a similar project been previously conducted in New York?

Answer: To the best of our knowledge, the New York State Department of Health has never conducted a similar project, although it has collected CAHPS data.

43. Page 7, Section III C 7: Does the Department have a target for the number of QI interventions expected to be offered to each participating nursing home?

Answer: No.

44. Page 7, Section III C 7: Can the Department provide an estimate of the level of effort expected from the contractor to provide technical assistance to the nursing homes to implement the quality improvement interventions?

Answer: No. In developing the budget for technical assistance expenses, applicants should rely on their experience in two areas: (1) working with New York nursing homes to improve the day-to-day operations that have a discernible impact on residents; and (2) quality improvement in nursing homes. Review the section on applicants' organizational experience on page 18 of the RFA.

Payments to Participating Nursing Homes

45. Pages 5-6, Section III C 3: Are nursing homes to be compensated, even minimally, for their participation in this project?

Answer: No. This is a quality improvement opportunity offered by the Department to nursing homes at no cost to the nursing homes. The Department considered charging nursing homes a nominal fee to participate in order to offset the high cost of this project. It decided against charging a nominal fee as that would be a barrier to participation for some nursing homes.

46. Page 7, Section III C7, Nursing Home Implementation of Options: The RFA states that the contractor must develop a range of options (from low cost to high cost) for operationalizing each intervention or recommendation and present these options to each nursing home and its residents, families and staff. Will there be any incentives, financial or otherwise, to encourage facilities to implement these interventions? In addition, or alternatively, would the Department consider and be able to provide a modest stipend to facilities that are selected and agree to participate in the project?

Answer: The answer to both questions is no. See question 45. Federal statute requires nursing homes to design and implement quality assurance and performance improvement (QAPI) projects. Federal rules and regulations also emphasize resident-centered care. Through the contract resulting from this RFA, the Department is providing at least 30 nursing homes with up to \$1 million in technical assistance to attain and maintain compliance with these requirements.