

PCQC Program Surveys

This guide provides an overview of how the annual program surveys are structured and step-by-step instructions for filling out an annual program survey.

Covered in this guide are the steps necessary to:

- 1. Access the surveys applicable to your program(s) and previously entered surveys.
- 2. Add a new hospital setting survey
- 3. Add a new community setting survey

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Annual Program Survey Structure

To start, it is best to understand how the program surveys are structured. The surveys are split into two main categories:

- **Hospital Survey**: questions applicable to programs that provide inpatient palliative care at one or multiple hospitals.
- **Community-Based Survey**: questions applicable to programs that provide community-based palliative care at an office practice or clinic, long-term care facility, and/or in a patient's home.

Each of the above categories have two survey components:

- Site and Setting-Specific Surveys: these contain questions that are to be answered for an individual hospital site, or community-based setting.
- Site and Setting-Specific Staffing Surveys: these contain questions about the palliative care program staff at an individual hospital site, or community-based setting.

Figure 1 depicts the relationship of the surveys described above. The surveys applicable to your program are determined by the community settings and/or hospital sites where your program provides palliative care. Two examples are provided to show the surveys applicable to:

Example 1: inpatient palliative care program that services two hospitals. \checkmark indicates the surveys this program would fill out.

Example 2: community-based palliative care program that provides care in an office/clinic and sees patients in-home. \checkmark indicates the surveys this program would fill out.



Figure 1



Accessing Surveys

- Scroll to the bottom of the Program Profile page (i.e., Home page) and click the button for the appropriate setting.
 View Community Setting Surveys
 View Hospital Setting Surveys
- 2. A new page will load with a list of all surveys completed for your program(s). Each row in the list denotes a year in which a survey was completed for a given program. Therefore, if a survey was completed in three different years for your program, three rows will appear. If you have not participated previously, no surveys will be displayed in this section.

| Program | Years Submitted | Last Updated | City | State |
|----------------------------|-----------------|--------------|-----------|-----------|
| Q | Q | ÷ | Q | Q |
| Metrix Program (Adults) | 2019 | 12/09/2020 | Ann Arbor | MI |
| letrix Program (Pediatric) | 2019 | 12/14/2020 | Ann Arbor | МІ |
| - 2 of 2 items | t t | | | A 4 1 1 A |

3. Click a row to view/edit the survey responses entered for a particular survey.



Adding a New Hospital Setting Survey



- 3. A blank Hospital Setting survey will load. The Hospital Setting survey tab can be answered the same whether you provide palliative care in one or multiple hospitals, whereas the hospital site surveys are entered for each individual hospital where your program provides palliative care.
- 4. Select the Program to fill out a survey and enter the survey year. If you are part of multiple programs (e.g., a pediatric and adult palliative care program), you will see both programs in the dropdown. If your account should be associated with a program that does not show up in the drop down, please ask someone from that program with an account to invite you. Note, a survey can only be completed at the end of the year and not during the current year. For example, a 2020 survey can only be completed beginning in 2021.

| Hospital Setting Surveys / Add Record | | 0 |
|---|---|----------------------------------|
| Hospital Setting | | |
| ≚- Hospital Setting Unsaved | | Save |
| Setting Level The questions in the Hospital Setting survey can be answ multiple hospitals. After completing the hospital setting survey as a Staffing survey. The site and staffing surveys are to Please continue to the Hospital Site(s) and Staffing survey | vered the same if you provide palliative care in one urvey, tabs for the Hospital Site survey will appear, be completed for each of the hospitals you provide ey(s) after completing and saving this page. | e or as well e care in. |
| Note - if the program you are submitting data for does no site and staffing surveys will not appear. If this is an error you need to go back to your Program Profile to enable the hospital site is associated with your program. | t provide care in a hospital setting the additional ho and your program does provide care in hospital se e hospital setting and to the Site List to confirm at l | ospital ettings, least one |
| Program * | Survey Year * 🕜 | |
| Metrix Program (Adults) × • | 2019 | ~ |

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5. Fill out the rest of the Hospital Setting survey and click save in the upper right corner. All questions with an asterisk require an answer to save the survey. Tabs for the Hospital Site and Staffing surveys will then appear. Proceed to the Hospital Site survey.

If the Hospital Site tab does not appear, you may not have selected hospital as a care setting in your Program Profile. Please go back to your home screen and make sure hospital is selected under Care Settings.

| Hospital Setting Surveys | / Details | |
|--------------------------------------|---------------|----------|
| Hospital Setting | Hospital Site | Staffing |

 Click "Add Row" to start a survey for an individual hospital site. A blank Hospital Site survey form will load.

| == | Hospital | Site |
|----|----------|------|
|----|----------|------|

cito *

| Site (Click 'Add Row' to start your survey) | |
|---|----|
| Add Row 🖑 🕀 |)_ |

 Select the hospital to fill out the Hospital Site survey in the Site dropdown. All questions with an asterisk require an answer to save the survey. Fill out the rest of the survey form and save.

| Site | |
|------------|---|
| Select | • |
| Q Search | |
| | |
| Hospital A | R |
| Hospital B | |



 A row for the saved survey will appear in the Hospital Site survey list to the left. Repeat steps 6 & 7 to fill out surveys for all hospitals served by your palliative care program.

Hospital Site

| Site (Click 'Add Row' to start your survey) | * |
|---|---|
| Add Row | |
| Hospital A | ~ |

 After all hospital surveys are completed proceed to the Staffing survey tab. Click "Add Row" to start a Staffing survey. A blank Staffing survey form will load.

Staffing

Hospital Site *

Site (Click 'Add Row' to start your survey)
 Add Row

10. Select the hospital from the dropdown menu that you will be completing the staffing tab for. Only hospitals with a completed Site survey will appear in the dropdown. Fill out the rest of the form and save.

| Hospital A | × | • |
|--|---|-----|
| Administrative Support, Assistant, or Data Analyst SELECT ONE | | |
| ✓ Yes | | |
| | | |
| No | | |
| No | | |
| Head Count * 🕐 | | |
| Head Count * ? | | ~ |
| No Head Count * 🝞 | | |
| Head Count * 🕜 | | ~ ~ |
| No Head Count * ② 5 FTE * ② | | ~ > |
| No Head Count * ? 5 FTE * ? 4 5 | | ~ ~ |



11. A row for the saved survey will appear in the Staffing survey list to the left. Repeat steps 9 & 10 to fill out surveys for all hospitals served by your palliative care program.

| Staffing | |
|---|---|
| Site (Click 'Add Row' to start your survey) | • |
| Add Row 🕀 | |
| Hospital A | ~ |

12. If your program(s) also provides community-based palliative care, proceed to the Community Setting surveys. Instructions for the community surveys can be found in the <u>next section</u> of this user guide.

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Adding a New Community Setting Survey

- Scroll to the bottom of the Program Profile page (i.e., Home page) and click "View Community Setting Surveys".
 View Community Setting Surveys".
 View Community Setting Surveys
 View Hospital Setting Surveys
 At the top of the list, click the Add Survey button to start a new survey.
- 3. A blank Community Setting survey will load. The Community Setting survey can be answered the same if for one or multiple community-based sites.
- 4. Select the Program to fill out a survey and enter the survey year. If you are part of multiple programs (e.g., a pediatric and adult palliative care home program), you will see both programs in the dropdown. If your account should be associated with a program that does not show up in the dropdown, please ask someone from that program with an account to invite you. Note, a survey can only be completed at the end of the year and not during the current year. For example, a 2020 survey can only be completed, beginning in 2021.

| mmunity Setting Surveys / Add Record | | | G |
|--|--|---|---|
| Community Setting Survey | | | |
| Community Setting Survey Unsaved | | | Save |
| ✓ Community Setting | | | |
| | | | |
| These questions can be answered the same for community-based setting, tabs for the setting sp setting survey, please continue to setting-specif where your program provides palliative care. | one or multiple site pecific surveys will a ic and staffing surve | es. After completing this suppear. After completing a ays to answer questions s | urvey for your program in a and saving the community specific to the care settings |
| These questions can be answered the same for community-based setting, tabs for the setting sp setting survey, please continue to setting-specif where your program provides palliative care. Note - if the program you have selected does no appear. If this is an error and your program doe your Program Profile to enable the community o | one or multiple site becific surveys will a ic and staffing surve of provide care in a s provide care in co care settings to enal | es. After completing this s appear. After completing a ays to answer questions s community setting the ad mmunity-based settings, ole the community based | urvey for your program in a and saving the community specific to the care settings ditional surveys will not you need to go back to surveys. |
| These questions can be answered the same for community-based setting, tabs for the setting sp setting survey, please continue to setting-specif where your program provides palliative care. Note - if the program you have selected does no appear. If this is an error and your program doe your Program Profile to enable the community of Program * | one or multiple site becific surveys will a ic and staffing surve of provide care in a s provide care in co care settings to enal Surv | es. After completing this s appear. After completing a ays to answer questions s community setting the ad mmunity-based settings, ole the community based rey Year * ? | urvey for your program in a and saving the community specific to the care settings ditional surveys will not you need to go back to surveys. |

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5. Fill out the rest of the Community Setting survey and click save. All questions with an asterisk require an answer to save the survey. Additional tabs will appear for the individual community-based settings (Office Practice or Clinic, Patient Home, and Long-term Care) and Staffing surveys will appear. Proceed to the first setting-specific survey.

If the community settings that you serve do not appear in the tabs, you need to add them to your Program Profile. Please navigate back to the homepage to make sure that you have selected the appropriate setting types served by your program.



6. Fill out each setting-specific survey tab and save. Completed survey tabs are indicated with a green dot. Once all setting-specific surveys are complete, proceed to the Community Staffing survey tab.

| | Community Setting Surveys / Det | tails | | | |
|----|--|---|---|----------------------------------|--------------------|
| | Community Setting Survey | Patient Home Survey | Long Term Care Survey | Office Practice or Clinic Survey | Community Staffing |
| 7. | On the Community Sta Row" to start a Staffing survey form will load. | ffing survey tab, survey. A blank | click "Add Staffing | Staffing | |
| | | | | Site (Click 'Add Row' to sta | rt your survey) |

 Select the setting for which you are completing the staffing survey tab. Only the settings a setting-specific survey was completed for will appear as options. Fill out the rest of the form and save.

Select the setting you would like to fill out a staffing survey for. A setting survey must be completed prior to filling out a staffing survey for a specific setting. Only fill out one staffing survey per setting for a given year. * SELECT ONE

Add Row



 \oplus



- A row for the saved survey will appear in the Staffing survey list to the left. Repeat steps 7 & 8 to fill out staffing surveys for all communitybased settings the palliative care program provides services.
- Community Staffing

| Site (Click 'Add Row' to start your survey) | - |
|---|---|
| Add Row 🕀 | |
| Patient Home | |

10. If your program(s) also provides inpatient palliative care, proceed to the Hospital Setting survey. Instructions for the hospital surveys can be found in the <u>previous section</u> of this user guide.

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Data Entry Features

This section covers various features that are useful to be aware of when answering the program surveys in the Registry. Features covered here include: Required Fields, Help Text, Skip Logic, Field Validation, and Tabbed Browsing.

Required Fields

Any field with an asterisk (*) next to the label is a required field. All required fields must be answered for the form to be saved/submitted and to proceed through the survey tabs. When required fields are missing a response, error messages will appear highlighting the required fields along with a count of the number of required fields left blank.

Help Text

Help text is available throughout the application anywhere the help icon (a circle with a question mark) is present. Clicking the icon will display help text that provides further detail on the survey question.

Do you track patient/family satisfaction? * SELECT ONE Yes No Required

Does your palliative care program currently measure or track patient and family satisfaction with the care your team provides.

itient/family satisfaction? * 🎧



Skip Logic

Skip logic is an application feature that changes what question(s) a user sees based on how other questions in the survey were answered. Questions that have skip logic applied will only be displayed if the trigger criteria is met in a preceding question(s). For example, if the question "Is your palliative care program reporting on a full 12 months of data?" is answered "No", a follow-up question will appear that asks for the number of months of data being entered. If the question was answered 'Yes,' the follow-up question would not be applicable and therefore not displayed.

Example - Trigger Criteria Not Met

| Is your palliative care program reporting on a full 12 months of data (either calendar year or fiscal year)? * SELECT ONE | 0 |
|---|---|
| No | |
| Ves Yes | |

Example – Trigger Criteria Met

| Is your palliative care program reporting on a full 12 months of data (either calendar year or fiscal year)? * SELECT ONE | ? |
|---|----------|
| V No | |
| Yes | |
| | |
| If not 12 months, how many months of data are you reporting? * | |
| 10 | ~ |



Field Validation

Validation is used to ensure information is entered in the correct format and within the established parameters. If information is entered in an incorrect format or outside the established parameters an error message will appear with an explanation of the required format/parameters. The example below is validation that ensures the breakdown of initial consults by patient gender identity does not exceed the total number of initial consults entered earlier in the survey.

| Please provide a Indicate the number reporting period. | a breakdown of your program's initial palliative c er of patients, by their gender identity, that were <u>1 Problem</u> | are consults by the patient's stated gender identity. seen in your outpatient palliative care practice during the | ÷ |
|--|---|--|----------|
| Male | | Female | |
| 250 | × × | 251 | ^ |
| Su | m cannot exceed total consults (500). Current sum: 501 | | |

Tabbed Browsing

From within an individual hospital or community survey, the tabs across the top can be used to navigate through the survey. Completed forms have green indicators, incomplete forms have orange indicators.



- Complete: indicates at least one of the forms for the tab had at least all the required questions answered, and the form was saved.
- Incomplete: indicates a form was not saved for the tab.