



**Department
of Health**

DSRIP Independent Assessor Mid-Point Assessment Report

Central New York Care Collaborative PPS

Appendix 360 Survey

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Prepared by the DSRIP
Independent Assessor

Appendix 360 Survey - Central New York Care Collaborative PPS

DSRIP 360 Survey

As part of the Mid-Point Assessment, the Independent Assessor (IA) prepared and disseminated a survey to Performing Provider Systems' (PPS') network partners, to assess the experience and involvement of network partners with the PPS lead entity. The name of the survey was the DSRIP 360 Survey. The IA utilized an electronic survey product to submit and collect survey responses. The survey release date was August 15, 2016 and the close date was September 30, 2016. Weekly reminder notices were sent to every recipient that didn't respond to the survey. The survey was sent to a random sample of the PPS' network partners identified as participating with the PPS lead entity.

The survey consisted of twelve multiple choice questions focusing on four primary areas around three themes. The areas of focus were network partners' experience with *i*) governance, *ii*) contracting and funds flow, *iii*) performance management and *iv*) information technology (IT) solutions. The three themes were engagement, communication and effectiveness. See below for the summary results by question for all responders. The survey instructions asked the survey recipient to answer all questions and to provide comments to each question. The survey responders were anonymous to the PPS lead entity.

Survey Results

Central New York Care Collaborative PPS sample size to be surveyed was calculated to be 45 individual network partner organizations that were identified as participating partners with the PPS lead entity based on the size of their Provider Import/Export Tool (PIT) report. A total of 14 (31%) survey samples were received. Respondents' answers overall were positive with 55% of all respondents' answers were either "Strongly Agree" or "Agree." Below is the breakdown summary of all answers. Not every responder completed every questions.

<u>Survey Answers</u>	<u>Total of all Responders' Answers</u>	<u>Percentage</u>
Strongly Agree	20	12.20%
Agree	70	42.68%
Disagree	19	11.59%
Strongly Disagree	30	18.29%
N/A	25	15.24%
	<u>164</u>	<u>100.00%</u>

Survey responders were requested to leave comments after each question, and to also provide additional overall comments regarding any other aspects of the network partners' experience with DSRIP and the PPS lead entity. Details of responders' comments are included in the appendix. Examples of overall comments are below:

- *“We would like to participate in a follow up survey on the same questions within the next 6-12 months. The follow up could be done twice—once each six months. We have no issue with taking the time to respond as we would expect progress will occur over time. We would have concern if no follow up is done, or it is done too far into the future—thus, limiting the ability to pivot as needed to meet DSRIP goals.”*

The numbers of survey recipients and responders included the following provider categories as listed in the PPS’ own Provider Import/Export Tool (PIT) report that was delivered with the PPS’ quarterly reports:

	<u>Survey Recipients</u>	<u>Survey Responders</u>
1 Hospital	1	1
2 Nursing Home	3	1
3 Clinic	1	0
4 Hospice	2	2
5 Substance Abuse	2	2
6 Pharmacy	2	0
7 Mental Health Practitioner:	2	1
8 Primary Care Provider (PCP)	4	1
9 Non-Primary Care Provider	8	0
10 Case Manager / Health Home	2	0
11 Community Based Organization	5	1
12 All Other	<u>13</u>	<u>5</u>
	<u>45</u>	<u>14</u>

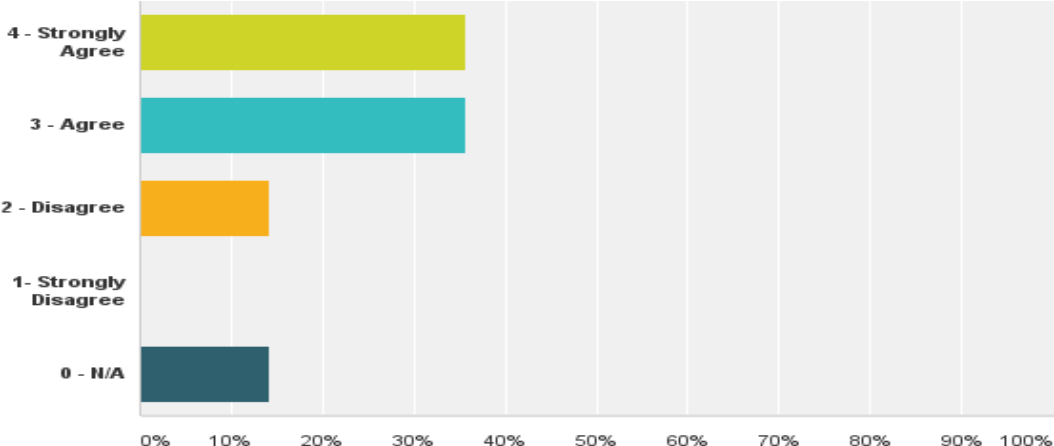
Sampling Methodology

The Independent Assessor (IA) utilized the same sampling plan for selecting network partners for the DSRIP 360 Survey that the IA has used for other sampling processes throughout DSRIP. The universe of network partners to be included in the survey was limited to each individual PPS’ Provider Import / Export Tool (PIT) report, where the PPS marked individual network partners as participating. The sample generated was intended to capture all provider types using a stratified random method. Not every PPS’ sample selected list of network partners included every provider type.

Every PPS delivered to the IA the applicable names and e-mail addresses or mailing addresses for the network partners’ names selected from the random sample generator for each PIT report. In this initial random sample, some PPS’ identified one or more network partners that were not participating with the PPS, or had otherwise left the PPS’ DSRIP project.

Below are each of the 12 questions included in the survey, with corresponding charts showing the variety of responses from partners. Included for each question are comments from partners related to their response to that particular question.

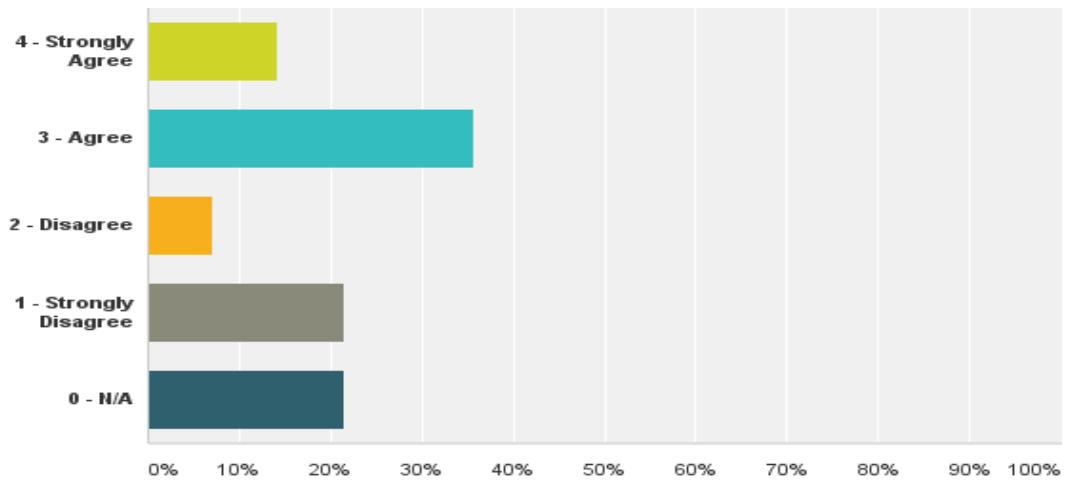
Q1: Governance: The PPS engaged you in its governing board, committees and/or solicited input from you as a network partner.



Sample of comments for question 1:

- *“The PPS has done an extraordinary job with its outreach to the partner organizations.”*
- *“The PPS has done a poor job in meeting with partners one on one at the partner sites in order to enhance communication and partner engagement.”*

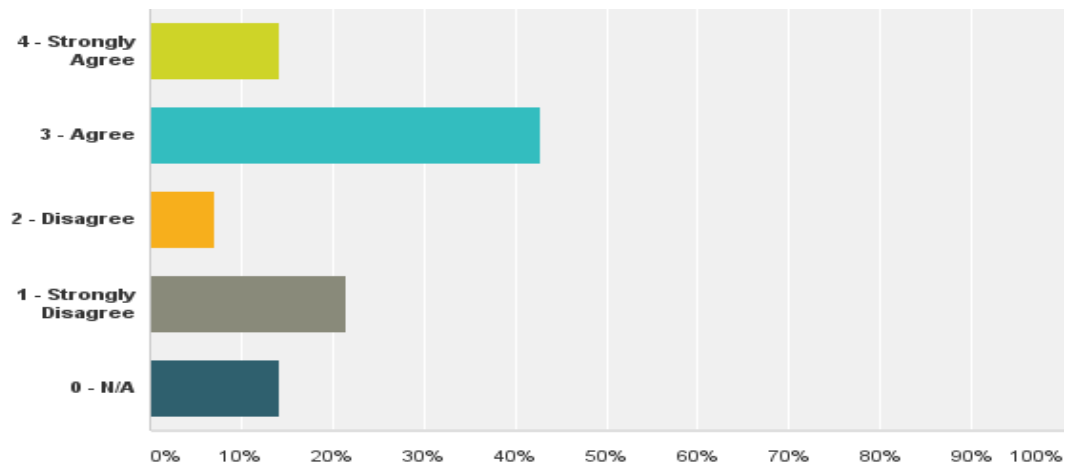
Q2: Contracting and/or Funds Flow: The PPS engaged you in the development of your contract and/or the funds flow/budgeting process.



Sample of comments for question 2:

- *“Our organization is represented on the Finance Committee. Funds flow to the organization has been slow.”*
- *“The contracting process was very complex and expensive due to legal review costs at the partner level. Funds flow processes have been recently streamlined and have improved greatly. However, we did not receive any kind of fund flow from the PPS until very late February 2016.”*

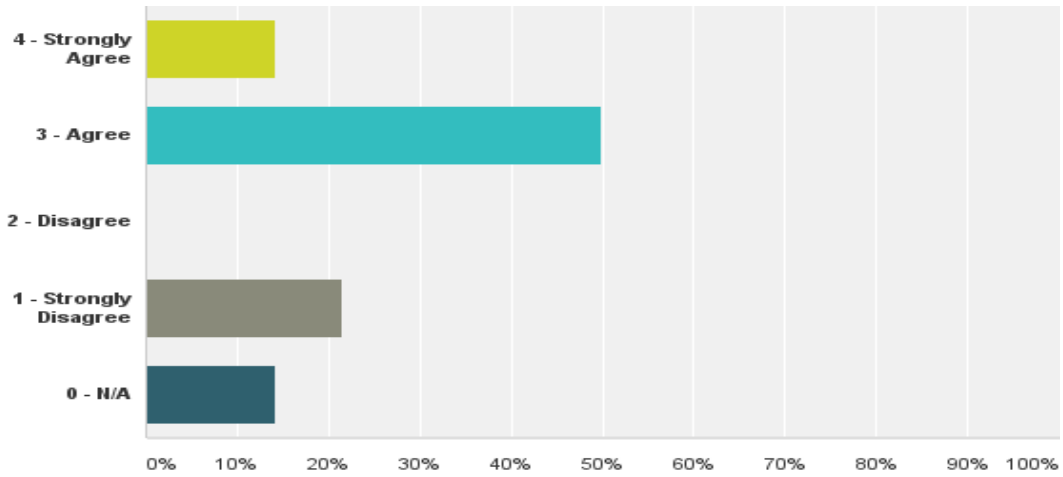
Q3: Performance Management: The PPS engaged you in project implementation efforts (planning and execution) for the projects in which you participate as a network partner.



Sample of comments for question 3:

- *“The PPS has done a good job in engaging the partner organizations in the selected projects. The PPS openly seeks feedback from its partners. The PPS has organized along the concept of “Learning Collaborative” to provide greater focus on the specific requirements of the project efforts.”*
- *“Implementation planning templates were generated and distributed with little to no partner input. Execution of projects is largely left to each partner to achieve as long as project due dates are met. The PPS has not met one on one with partners to understand challenges. Partners are left to problem solve on their own methods to achieve patient engagement.”*

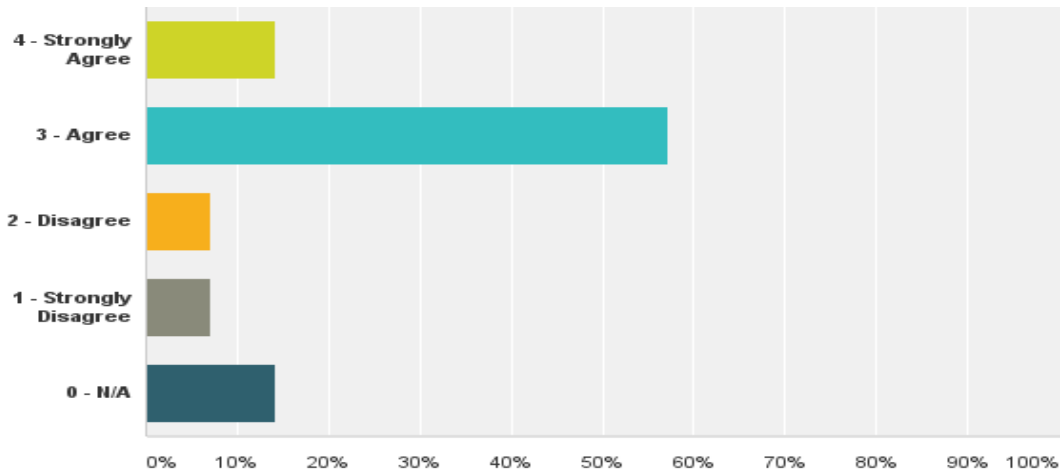
Q4: IT Solutions: The PPS has sought to understand your organization’s IT capabilities and your IT needs to support the DSRIP effort.



Sample of comments for question 4:

- *“The PPS has conducted several surveys and made requests for information with the goal of understanding the information technology capabilities of the organization—and partners. Further guidance will be needed on the specific requirements to create the interoperability necessary for population health, alerts, and analytics.”*

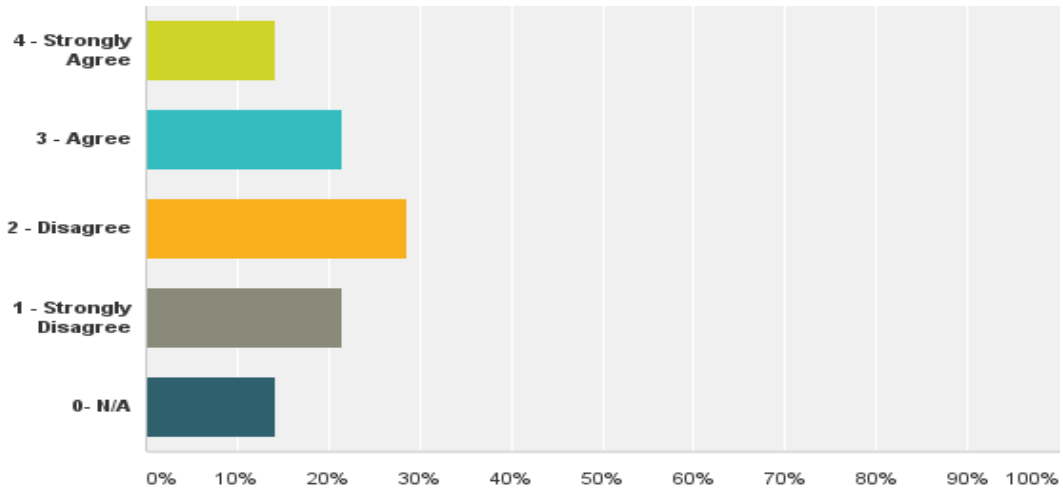
Q5: Governance: The PPS communicated its governance activities and/or changes to the governance plan to you as a network partner.



Sample of comments for question 5:

- *“Governance activities are reported via the CNYCC webpage/newsletter as well as via communications to the Board membership. The CNYCC should consider more proactive communication to the partners on Board activities and remind all members that Board meetings are open and all are welcome.”*

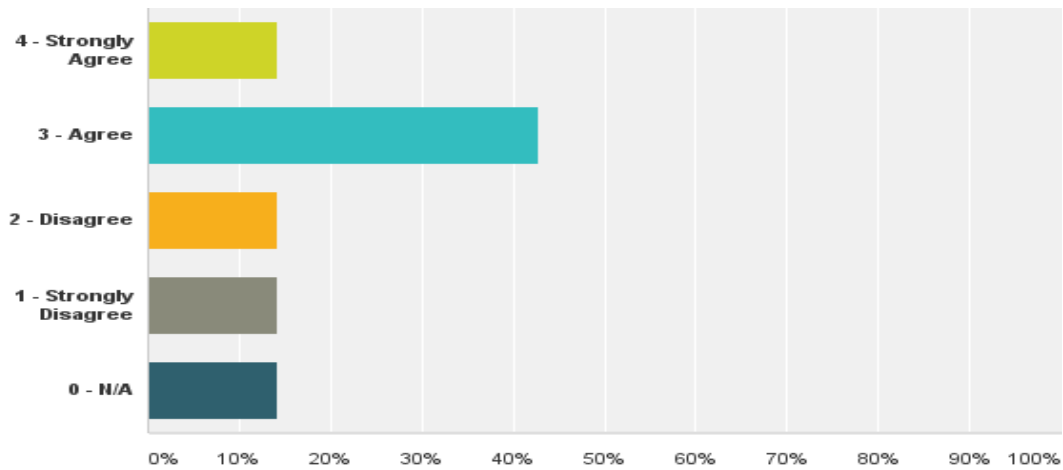
Q6: Contracting and/or Funds Flow: The PPS communicated its funds flow distribution plan and described how this plan pertains to network partners and their involvement in projects.



Sample of comments for question 6:

- *“Funds flow to the organization has been slow. However, this condition is seen to be outside the control of the PPS (i.e. timeliness factor at the NYS level).”*
- *“No year 2 plan developed, decided, or discussed”*
- *“While this was communicated, it still isn't clear to us under what circumstances, during what time period, and how much funding we stand to earn in the short and long-terms.”*
- *“This communication has greatly improved. However, it has taken the PPS a long time to get this process streamlined. Funds flow detail per engaged patient (whether paid or not paid) is absent.”*

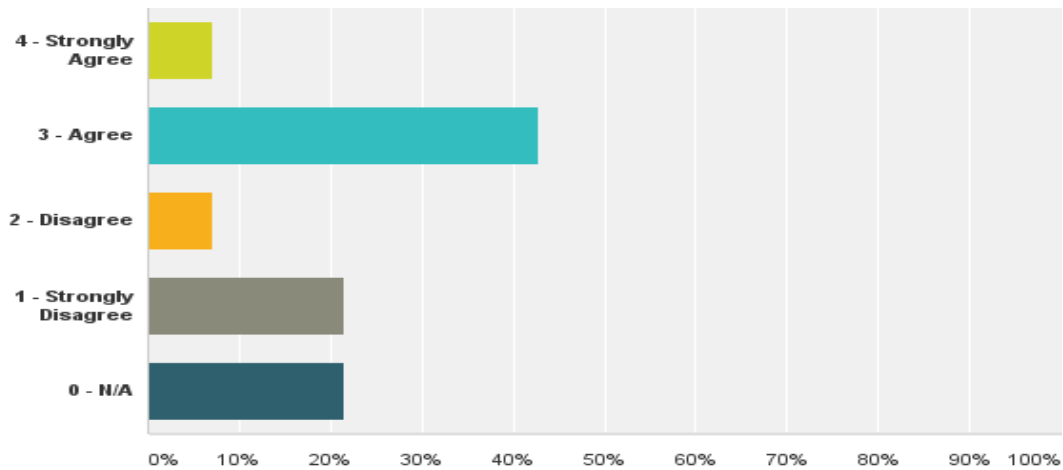
Q7: Performance Management: The PPS communicated it's plans to share performance data with you as its network partner.



Sample of comments for question 7:

- *“Limited. A level of reporting and analytics will be made available to network partners. Further information and specifics are necessary.”*
- *“Performance data is available upon request. It is communicated within the governance structure but the plan to communicate this data via available venues to all PPS partners has not been shared.”*

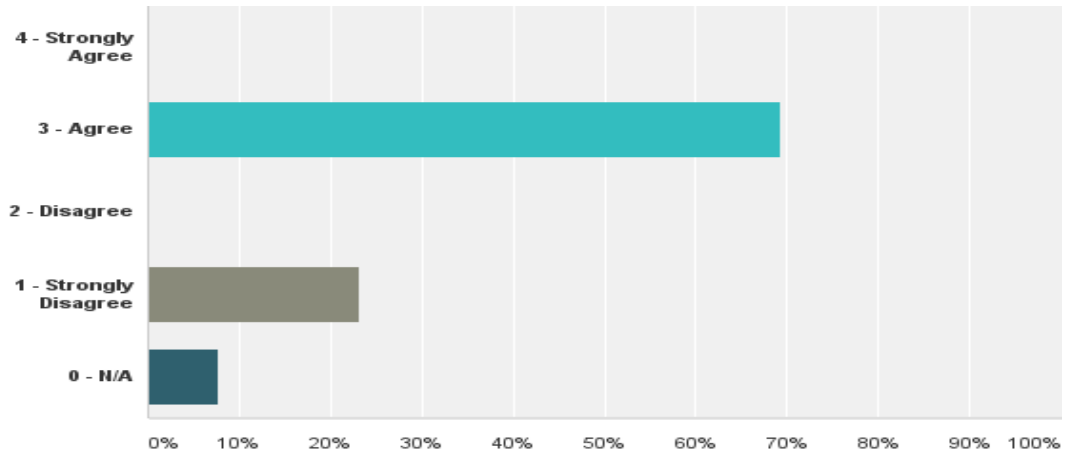
Q8: IT Solutions: The PPS communicated the availability of resources or support for IT solutions to address network partner needs.



Sample of comments for question 8:

- *"We are not aware of information or conversation regarding the availability of IT resource to address / support the organization."*
- *"IT solutions have not been offered. The detailed survey process by partner by project outlining current state and needs is occurring. The IT leaders and managers from the PPS have spent no time at this partner site. There is little interest/understanding regarding the current challenges partners face in balancing internal IT demands vs. the goals/needs of the PPS"*

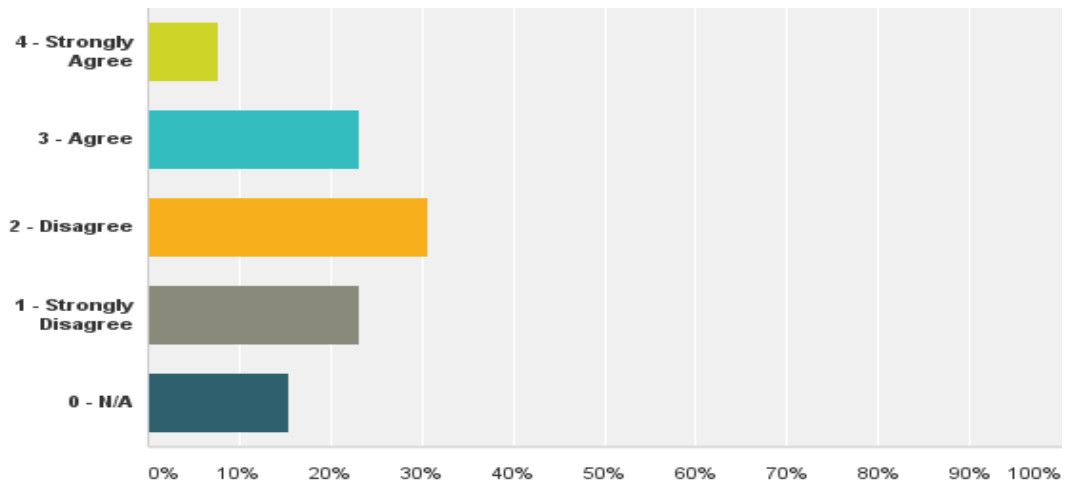
Q9: Governance: The PPS governance structure is effective in facilitating your progress towards meeting the DSRIP goals.



Sample of comments for question 9:

- *“To date, yes. That said, the Learning Collaboratives are being launched in the month. We do have some concerns regarding the potential for duplication of work and cloudiness of how the learning collaborative will integrate.”*
- *“The PPS governance structure is well defined and effective.”*

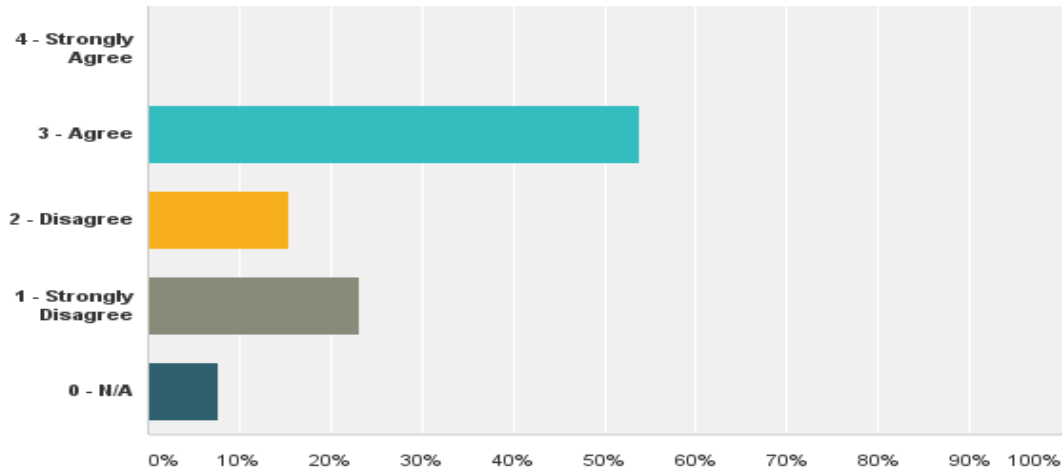
Q10: Contracting and/or Funds Flow: The PPS has been effective in establishing contracts and/or flowing funds to you as a network partner.



Sample of comments for question 10:

- *“We’re still awaiting permission to participate in more than one PIC, despite our capacity to immediately assist with reaching DSRIP deliverables.”*
- *“The funds flow process has improved but detailed reports are needed regarding patient engagement funds.”*

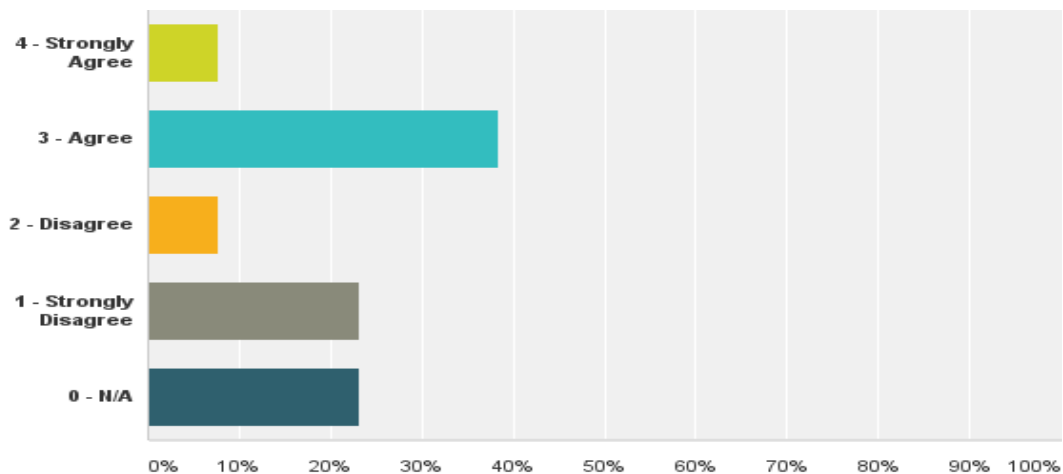
Q11: Performance Management: The PPS has been effective in detailing how it will monitor the performance of its network partners against metrics and facilitating quality improvement efforts.



Sample of comments for question 11:

- *“It is known that metrics will be tracked and monitored. We are not aware of specifics on expectation, nor how this detail will be communicated or acted upon. Further information and specifics are necessary.”*
- *“The process has been outlined but has yet to be implemented.”*

Q12: IT Solutions: The PPS has been effective in providing solutions or support to ensure DSRIP goals are met.



Sample of comments for question 12:

- *“Limited. We are aware of the decision made on a Population Health Management System. However, the specifics of what support the PPS would provide to assist our organization to meet our DSRIP goal is unclear. The expectation is that there will be support provided by the PPS to assist this organization as well as many of the other partners (outside of the large hospitals) who have limited IT resources, expertise, and budget to accomplish the established goals.”*
- *“We've not requested/needed support”*