



**Department
of Health**

DSRIP Independent Assessor

Mid-Point Assessment Report

OneCity Health PPS

Appendix 360 Survey

November 2016

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Prepared by the DSRIP
Independent Assessor

Appendix 360 Survey –OneCity Health PPS (New York City Health & Hospital Corporation)

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 did not 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

OneCity Health PPS sample size to be surveyed was calculated to be 67 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 40 (60%) survey samples were received. Respondents' answers overall were positive with 76% of all respondents' answers were either "Strongly Agree" or "Agree." Below is the breakdown summary of all answers. Not every responder completed every question.

<u>Survey Answers</u>	<u>Total of all Responders' Answers</u>	<u>Percentage</u>
Strongly Agree	156	32.50%
Agree	207	43.13%
Disagree	79	16.46%
Strongly Disagree	6	1.25%
N/A	32	6.66%
	<u>480</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:

- *"OneCity Health has been responsive and professional in working with our organization and our DSRIP Implementation Team."*

- *“OneCity Health has developed into a well-organized and functional PPS that works closely with our organization to ensure our transformation initiatives are successful.”*
- *“We are members of 4 PPS organizations. NYHHC has been by far the best organized and most communicative.”*
- *“Contracting has been confusing and often required in the absence of necessary information. Compensation is too low to make participation economically sustainable.”*
- *“We participate in 3 PPS. Each of them appears to operate in a distinctly different manner.”*
- *“We are still waiting to hear more regarding care transitioning and how our organization fits within that model of care.”*
- *“Implementation and execution can be faster and should have been incentivized in the disbursement of funds.”*
- *“Most state PPS's could do a better job aligning and facilitating cooperative relations between distinct providers whose alignment would produce better outcomes for patients”*
- *“We have attended many webinars but do not have a really good understanding of what our role is supposed to be.”*

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	2	2
2 Nursing Home	4	4
3 Clinic	3	2
4 Hospice	1	1
5 Substance Abuse	5	5
6 Pharmacy	5	3
7 Mental Health Practitioner:	6	4
8 Primary Care Provider (PCP)	2	0
9 Non-Primary Care Provider	2	2
10 Case Manager / Health Home	8	3
11 Community Based Organization	10	9
12 All Other	<u>19</u>	<u>5</u>
	<u>67</u>	<u>40</u>

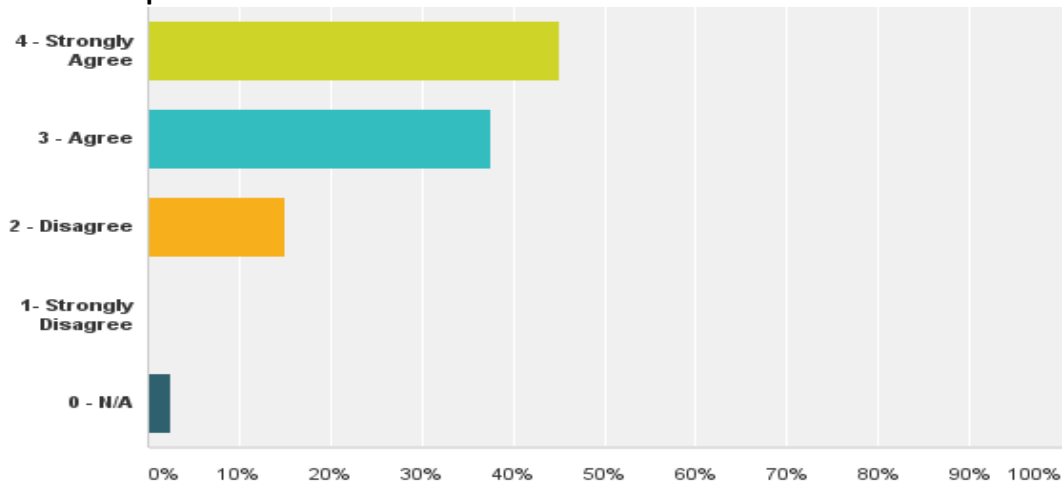
Sampling Methodology

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.

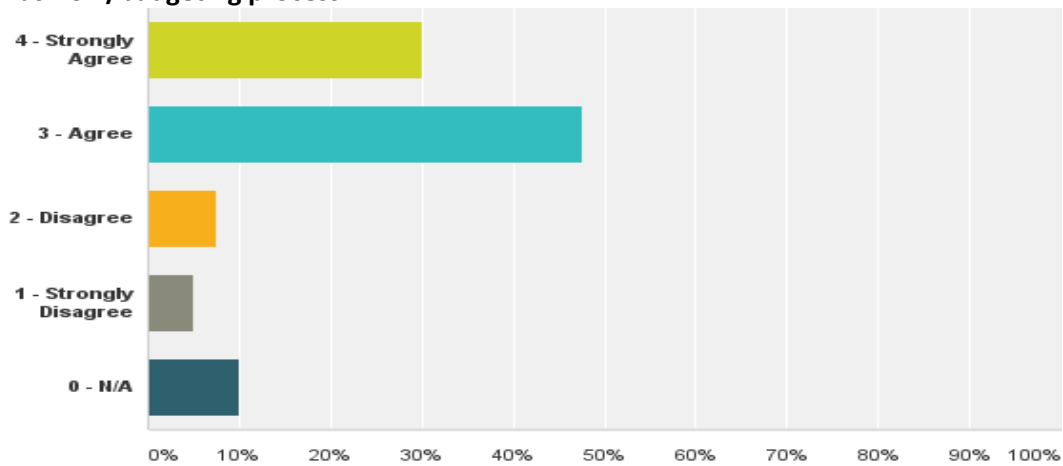
Q1: Governance: The PPS engaged you in its governing board, committees and/or solicited input from you as a network partner.



Sample of comments for question 1:

- *“There are representatives from our organization seated on each of the OneCity Health Governing Boards.”*
- *“OneCity Health involved Downstate Administration and Leaders in all committees and governing bodies on our PPS”*
- *“Other than mass emails, individualized outreach to engage partners has been minimal.”*
- *“We would have liked to have been engaged more in these pieces.”*
- *“We sit on one of its committees.”*
- *“Actively involved at Hub level governance”*

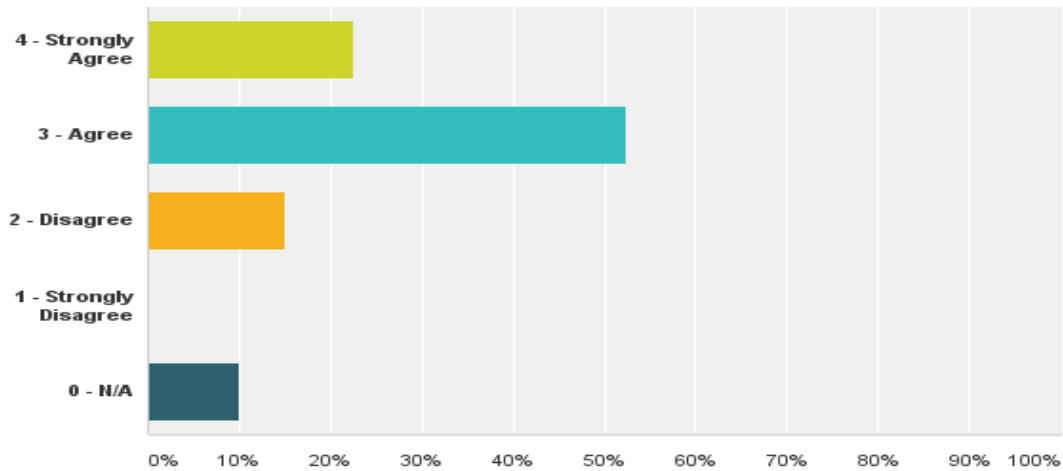
Q2: Contracting and/or Funds Flow: The PPS engaged you in the development of your contract and/or the funds flow/budgeting process.



Sample of comments for question 2:

- *“There is a policy of transparency regarding funds flow and budgeting from OneCity Health.”*
- *“OneCity Health provided a detailed written contract specifying all duties for our organization as well as the PPS and also due dates.”*
- *“There was no outreach to our organization to discuss or negotiate the contract.”*
- *“There was no discussion at the Hub level on fund flow”*

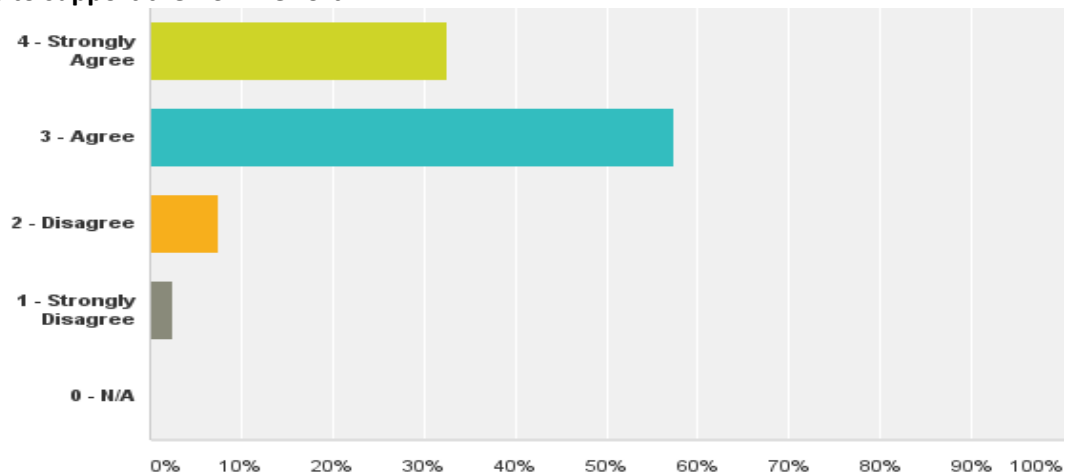
Q3: Performance Management: The PPS engaged you in project implementation efforts (planning and execution) for the projects in which you participate as a network partner.



Sample of comments for question 3:

- *“OneCity Health has actively engaged our organization for DSRIP.”*
- *“Our PPS’ Faculty experts were actively engaged by OneCity Health in all eleven projects development, planning and implementation in meaningful ways”*
- *“Very little was provided to our agency in terms of implementation guidance.”*
- *“Individualized engagement was minimal”*
- *“We have reached out to express our interest in participating in the project workgroup (project 4.c.ii), but the workgroup has not yet met. We also have not received any updates regarding the project in which all partners must participate, i.e., 2.a.i.”*
- *“We provided feedback on strengths and weaknesses of implementation plans.”*

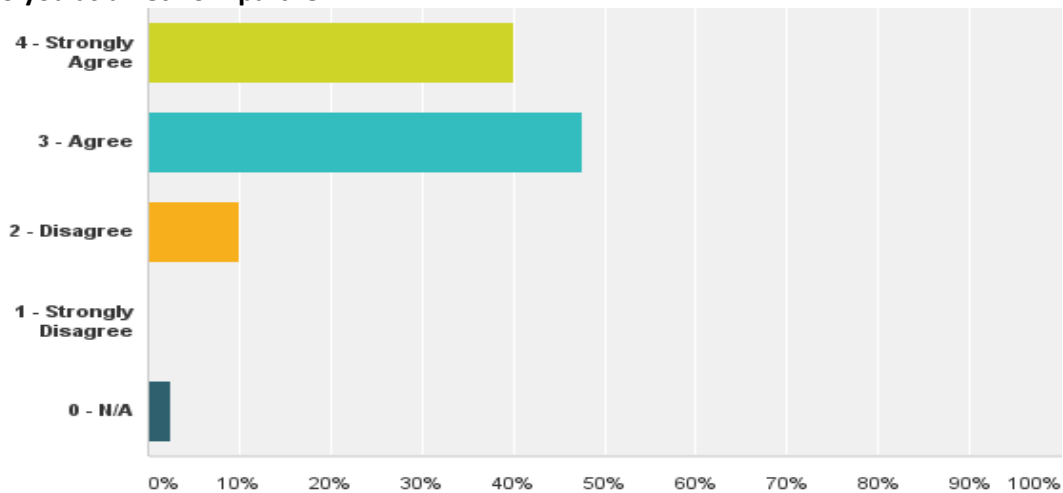
Q4: IT Solutions: The PPS has sought to understand your organization’s IT capabilities and your IT needs to support the DSRIP effort.



Sample of comments for question 4:

- *“Recently provided us with opportunity to obtain IT assist support for DSRIP project implementation.”*
- *“We participated in an on-site IT assessment and completed an IT survey. We are currently participating in Project 2.a.i., which will provide our PPS with even more information on this issue.”*
- *“Minimal engagement, waiting for feedback from Data Survey.”*
- *“We have completed a survey and site visit, but did not delve into our EHR systems. They only asked what we used. The other PPS's we work with asked for more information.”*
- *“There have been some discussion and demonstration of already selected products, no firm discussion on if selected software met our needs or how we could better integrate it with current software being utilized for patient care.”*
- *“We had to submit written documentation as well as a site visit. The site visit confirmed that we were capable of receiving and exchanging data.”*

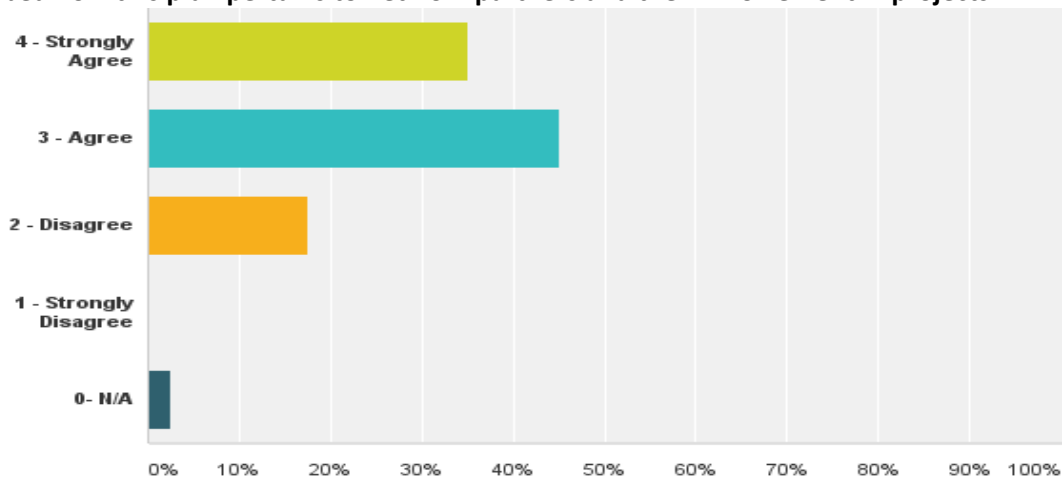
Q5: Governance: The PPS communicated its governance activities and/or changes to the governance plan to you as a network partner.



Sample of comments for question 5:

- *“OneCity Health has communicated its Governance activities by News Letter, Website, Committee and hosting a Retreat.”*
- *“All OneCity Health governance activities and changes are communicated with this partner.”*
- *“We receive updates on governance activities via email.”*
- *“Communication has been via mass emails. Individualized communication is minimal.”*
- *“We recently had a retreat where activities and plans were shared, in addition to ongoing webinars.”*

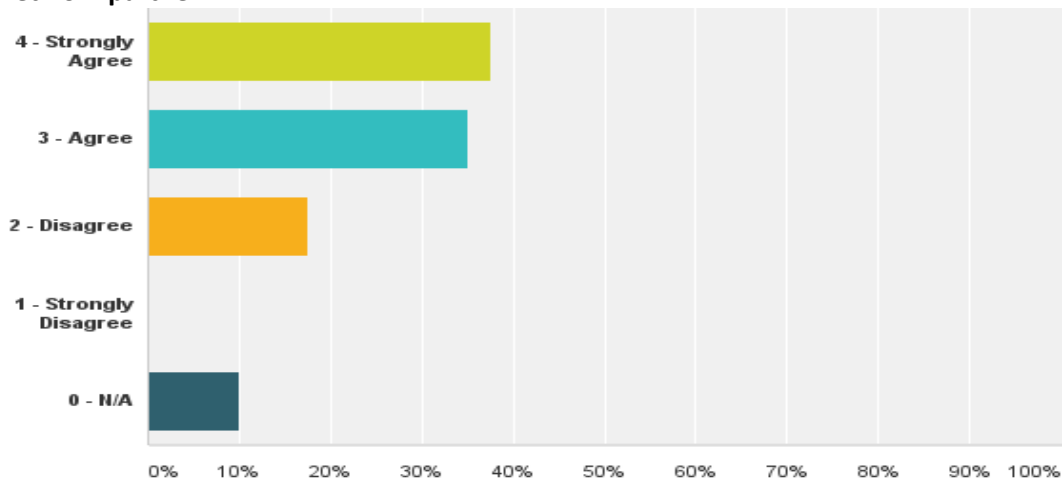
Q6: Contracting and/or Funds Flow: The PPS communicated its funds flow distribution plan and described how this plan pertains to network partners and their involvement in projects.



Sample of comments for question 6:

- *“Funds Flow methodology was discussed on the Finance Committee (our Hospital CEO sits on that Committee).”*
- *“OneCity Health communicates in writing all fund flows data to all partners.”*
- *“Communication has been via mass emails. Individualized communication is minimal.”*
- *“One of the PPS leads, they have shared funding for operational processes, we have seen the methodology for cost savings sharing.”*

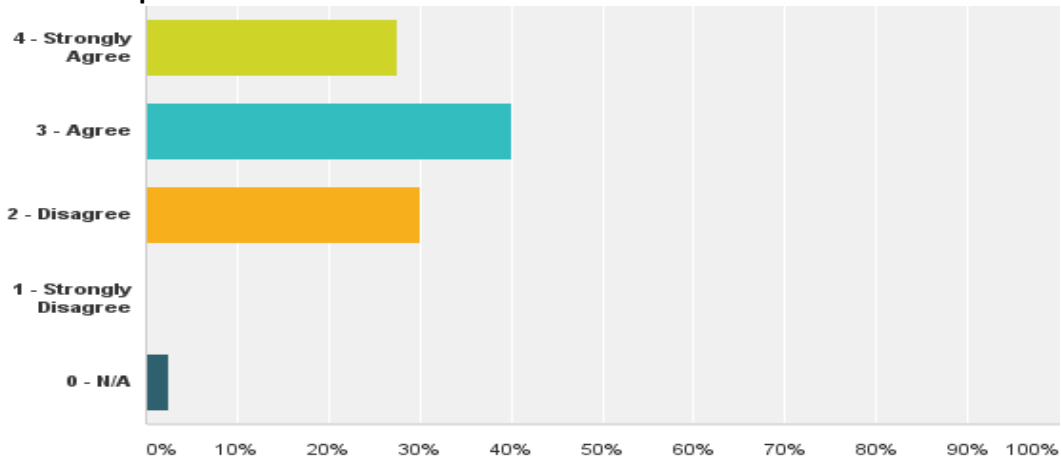
Q7: Performance Management: The PPS communicated it's plans to share performance data with you as its network partner.



Sample of comments for question 7:

- *“OneCity Health routinely provides performance feedback for projects and data inputs in a timely manner via written notifications and by telephone.”*
- *“While we have received updates regarding the PPS' own performance vis-a-vis other PPS, we have not received feedback on our performance from our PPS.”*
- *“No sample of how it will be shared yet, though we are well aware of the metrics.”*
- *“Yes, however we haven't seen the methodology for cost savings sharing.”*

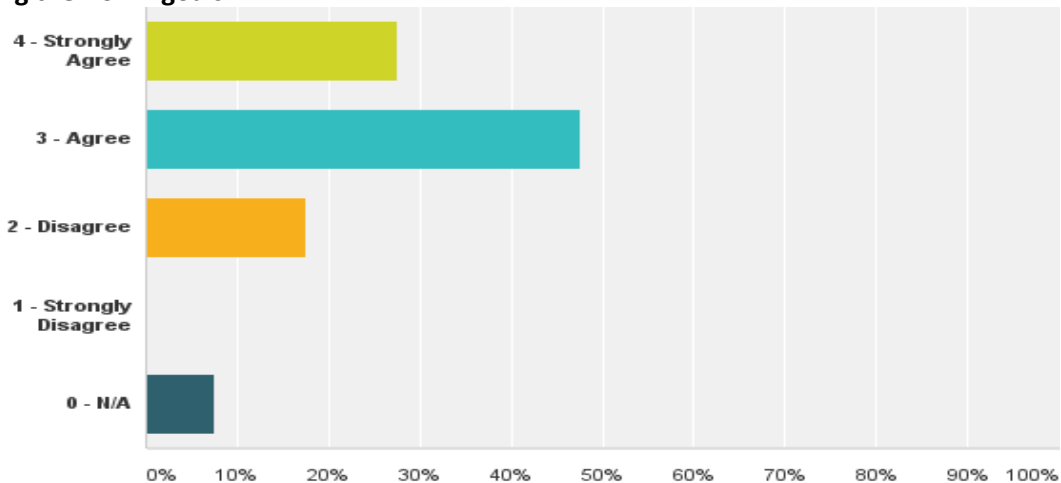
Q8: IT Solutions: The PPS communicated the availability of resources or support for IT solutions to address network partner needs.



Sample of comments for question 8:

- *"This is a work in progress."*
- *"OneCity Health recently made requests for IT assistance available on its portal."*
- *"We have access to webinars, which have provided general information regarding our Projects, but, to date, have not received assistance from DSRIP with respect to 'IT solutions.'"*
- *"We still don't know what they need from us in terms of IT capabilities."*
- *"There was communication of some limited resources and support for specific needs only."*

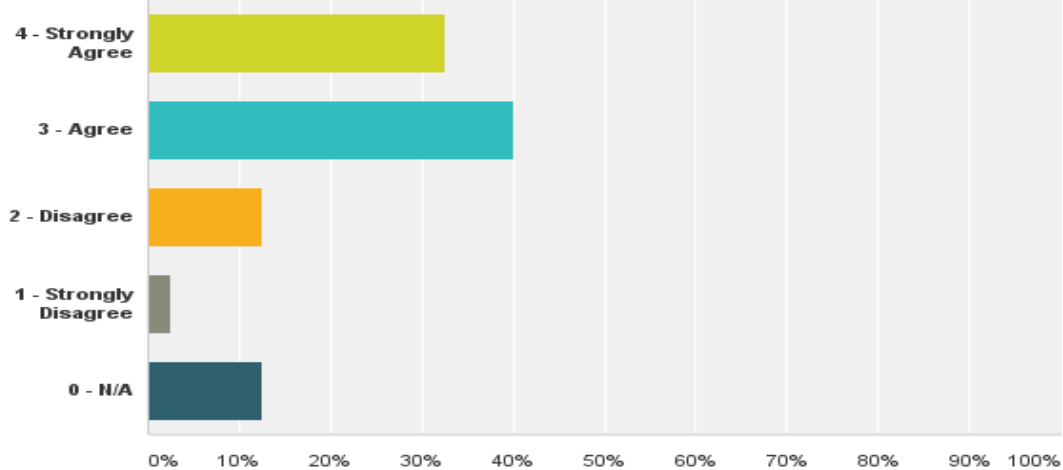
Q9: Governance: The PPS governance structure is effective in facilitating your progress towards meeting the DSRIP goals.



Sample of comments for question 9:

- *"The OneCity Health Governance structure promotes feedback and communication."*
- *"OneCity Health routinely makes its administrators available to us."*
- *"To date, we have not been asked for input on the design of the Projects themselves."*
- *"Yes, because we sit on one of its committees."*
- *"The flow of information has to be easier and quicker."*

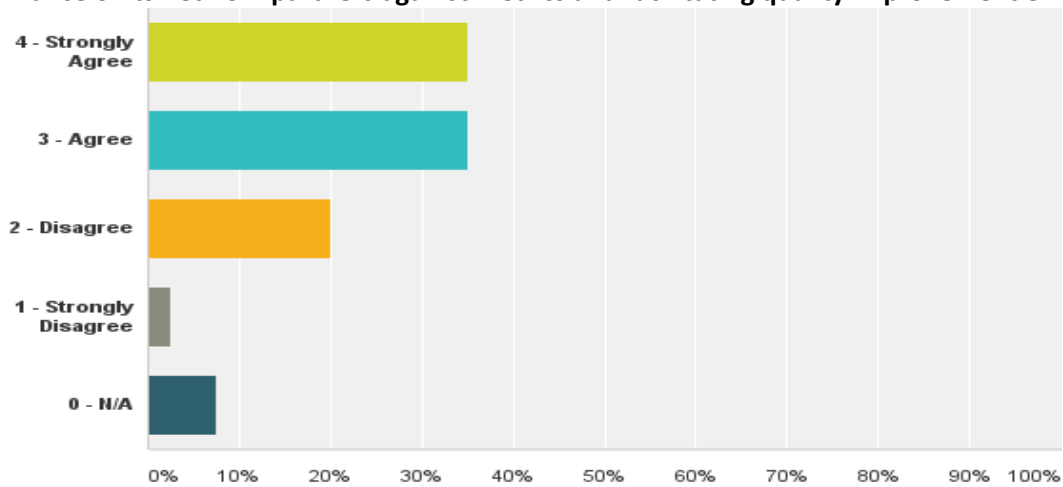
Q10: Contracting and/or Funds Flow: The PPS has been effective in establishing contracts and/or flowing funds to you as a network partner.



Sample of comments for question 10:

- *“Our organization has signed the Comprehensive Schedule B contract allowing for the implementation of eight (8) projects effective July 31, 2016 through March 31, 2017.”*
- *“Contracting and funds are in writing. The contract is transparent to all members of the PPS.”*
- *“While we have been successful in reducing 30-day hospital readmissions and implemented a palliative care program at the nursing home, there has been no flowing of funds to the facility other than one check for under \$800.”*
- *“Yes, we have signed off on the contract and received our first payment.”*

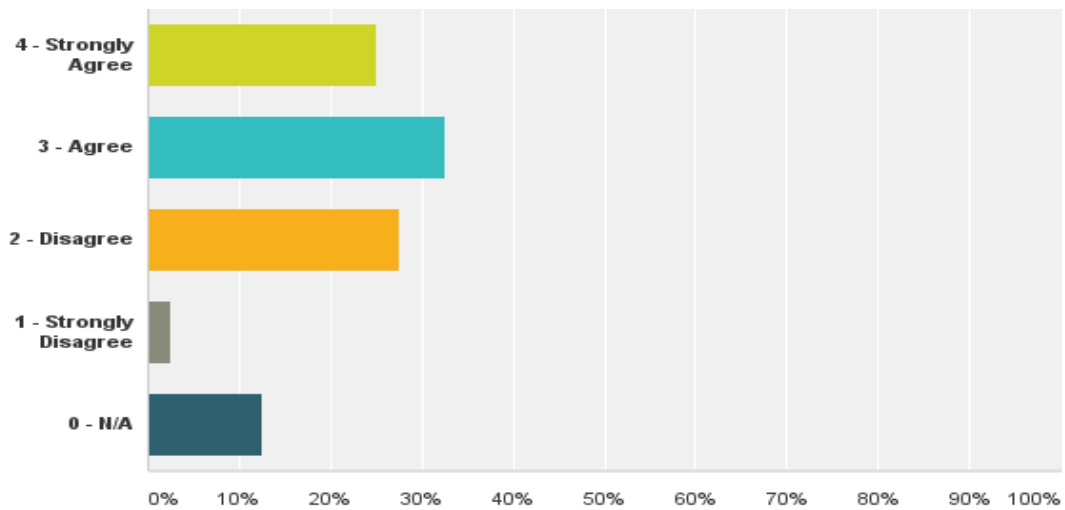
Q11: Performance Management: The PPS has been effective in detailing how it will monitor the performance of its network partners against metrics and facilitating quality improvement efforts.



Sample of comments for question 11:

- *“The Comprehensive Schedule B contract details performance objectives and metrics designed to facilitate quality improvement.”*
- *“OneCity Health has been transparent in its contracting, feedback, and portal regarding the monitoring of performance of metrics.”*
- *“They have scheduled several webinars to keep partners updated.”*
- *“There has been a lot of discussion on metrics but not on a specific standardized PI process across the PPS and spread of “best practices.””*

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:

- *"The GSI software to be implemented by OneCity Health to our organization is a work in progress."*
- *"OneCity Health has been consistent in providing answers to questions or problems to ensure that DSRIP goals are met."*
- *"There has been no communication from the PPS as to recommendations for providing solutions"*
- *"We are unsure of exactly what support is needed"*
- *"We have strong IT capability and only had one of the PPS leads assess our IT systems."*