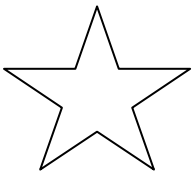


**REPLAY of Network #15 Data TOPIC Call: *Year-End Survey (2744) –  
Timeline and Important Tips***

- **Who should Listen:**
  - Social Workers
  - Data Contact – Person who completes the PAR
  - Person familiar with treatment-load totals and staffing hours
  
- **Replay Toll-free Phone:** 888-203-1112
  
- **Replay Passcode:** 73660636
  
- **Handouts:**
  - 2011 Year-End Survey (2744) Timeline
  - Year-End Treatment Load and Staffing Hours Worksheet
  - Voc Rehab Instructions
  - Vocational Rehab Survey - 2011
  - Year-End Patient Population List: *Tips and FAQs*
  
- **Short Online Survey to be taken after the call. This is required to show us who attended:**  
Will be available at: <http://www.surveymethods.com/EndUser.aspx?DAFE9288D39F8C8EDB>  
  
Or you may find the link on the Network #15 website at: [www.esrdnet15.org/data.htm#topic](http://www.esrdnet15.org/data.htm#topic)



**\*NOTE:** Daylight Saving Time has ended, so Arizona is now THE SAME as everyone else in the Mountain Time Zone.

**NW #15 Data Dept Phone:** 303-860-1515

**Email:** [NW15data@nw15.esrd.net](mailto:NW15data@nw15.esrd.net)

# 2011 Year-End Survey (2744) Timeline

## December 2011

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

## January 2012

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Item	Date / Facility Activity	Due Date
Staffing/ Treatment Load Worksheet	<b>Dec 28</b> Facility receives Staffing/Treatment Load Worksheet from NW 15—via FAX  (Return to NW 15 via FAX)	<b>Jan 5th</b>
Voc Rehab Survey	<b>Dec 28</b> Social Workers receive Voc Rehab Survey from NW 15—via email  (Return to NW 15 via FAX)	<b>Jan 5th</b>
Facility Year-end list of patient names	<b>Dec 31</b> Facility makes a list of all chronic patients belonging to their unit as of December 31  Don't forget PD patients!	<b>Jan 5th</b>
Patient Activity Report (PAR)	<b>Jan 1-5</b> Facility completes December PAR  (Send to NW 15 via FAX)	<b>Jan 5th</b>

**QUESTIONS? Call the NW 15 Data Dept at 303-860-1515**

# Year-end Treatment Load and Staffing Hours Worksheet

Complete this page on/after 12/31/2011 and Fax to NW 15 no later than January 5, 2012

Facility Name: \_\_\_\_\_

Facility Provider Number: \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ Phone Number: \_\_\_\_\_

Name of Person Completing this Worksheet: \_\_\_\_\_

## Patients Dialyzing FIVE or MORE Times Per Week

On the grid at right, fill in the number of either In-center or Home hemo patients dialyzing FIVE or more times per week--as of 12/31/2011. **This is RARE.** Write zeros (if applicable) rather than leaving these boxes blank.

Pts Dialyzing 5 or More Times per week	
In-Center	Home Hemo

## Hemodialysis Treatments for ALL of 2011

On grid below, under Hemodialysis, write the TOTAL number of in-center hemo treatments given at your unit in 2011. Include transient/visitor treatments and hemo training treatments given at your unit, but **DO NOT** count treatments for acute patients. (Many facilities get treatment numbers from their billing dept.)

Total Treatments for ALL of 2011	
Hemodialysis	Other

### Other (PD Training Treatments)

If you do not train PD patients write ZERO under "Other."

If you DO train PD patients "Other" is a count of *just* the CAPD or CCPD training treatments/exchanges given at your facility in 2011. Do not count any exchanges/treatments given at a patient's home. For training treatments, count the number of days exchanges were provided, not the number of exchanges. (Hemo training treatments given at your facility should be included in the Hemodialysis box.)

## Staffing

Report staffing positions and openings **as of December 31, 2011** on the grid below.

"Full Time Position" is a person working at least 32 hours per week.

"Part Time Position" is a person working less than 32 hours per week and includes per diem staff. Include any TEMP workers or TRAVELERS if they were part of your staff as of December 31<sup>st</sup>.

Do NOT count a staff member in more than one category, unless they work part-time in two positions. For instance, if you have a staff member who works 20 hours as an LPN and 20 hours as a PCT then they may be counted in both P-Time categories—otherwise choose only ONE category per person.

Position	Number of Staff		Number of Open Positions	
	Full Time	Part Time	F-Time	P-Time
<b>RN:</b> Staff holding a Registered Nurse degree.				
<b>LPN or LVN:</b> Licensed Practical Nurse or Licensed Vocational Nurse.				
<b>PCT:</b> Patient Care Technician. Include staff giving direct patient care.				
<b>APN:</b> Advanced Practice Nurse. A certified RN with advanced certification as a nurse practitioner (NP) or a Clinical Nurse Specialist (CNS) who has met advanced educational and clinical practice requirements. Do not report Certified Nephrology Nurses (CNNs) in this category. <b>Do not double count RNs in this category.</b>				
<b>Dietitian:</b> Staff with renal dietitian credentials.				
<b>Social Worker:</b> Staff with LCSW, MSW, BSW or other professional social work degrees.				

**Fax this page to 303-860-8392 by Jan 5, 2012.**

# Voc Rehab Instructions

Attached is the *Vocational Rehab Survey – 2011*. If there is more than one Social Worker at your facility, please combine your statistics and return only one copy of the survey, showing entire facility totals, not just those for your caseload.

This survey only concerns patients who are BOTH:

- **part of your facility as of December 31, 2011 *and***
- **aged 18 through 54 as of December 31, 2011 (DOB Range = 1/1/57 -12/31/93).**

If you used the *2011 Vocational Rehabilitation Tracking Tool* that the Network #15 Patient Services Department sent last year, you can transfer those numbers onto the attached Survey.

The definitions below are intended to give detailed descriptions of each category from the box on the attached *Vocational Rehab Survey*. **Please put your totals for each category in the grid on the attached *Vocational Rehab Survey*.**

## **Total of patients (aged 18-54) who received Voc Rehab services in 2011**

CMS definition includes those who did any of the following for any length of time during the year:

- Talked with VR personnel AND agreed to be evaluated for services by completing an application, having medical records requested, or being assigned a counselor
- Received evaluation services by participating in testing (for example: interest inventories, skills testing, aptitude testing, work readiness inventories) or by attending an evaluation/testing center
- Received vocational counseling, training at a community facility, Ticket to Work program, private or public educational/training center or school [patients going to school funded by VR can also be counted again in the “attending school” category]
- Received assistance with job seeking skills, with job placement, or with retaining or modifying a job through a VR counselor, job placement specialist, Ticket to Work program, or private or public agencies

## **Total of patients (aged 18-54) employed full or part-time at any time during 2011**

CMS definition of employment is restricted to those who:

- Received taxable wages from an employer or who was self-employed and paid taxes on earnings [Patients in this category may also be counted again in the next category, if they also went to school]

## **Total of patients (aged 18-54) enrolled in any formal education or training program in 2011**

CMS definition includes those who:

- Were enrolled in ANY training program or formal education (for example: college, technical school, GED program, community facility training) [Patients in this category may also be counted again in the previous category if they also worked]

**Questions? Call the Network #15 Data Dept at 303-860-1515**

## Vocational Rehab Survey – 2011

Facility Name: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Facility Medicare Provider Number: \_\_\_\_ \_

Facility Phone: \_\_\_\_\_

Name of Person Completing This Form: \_\_\_\_\_

After reading the attached instructions, please complete and FAX this page back to Network #15 at 303-860-8392.

**Remember, you should ONLY be looking at patients who are BOTH:**

- **Still part of your facility as of December 31, 2011 AND**
- **Aged 18 through 54 as of December 31, 2011 (DOB Range = 1957 -1993)**

If there is more than one Social Worker at your facility, please combine your statistics and return only one copy of the survey, showing entire facility totals, not just those for your caseload.

<b>Vocational Rehab Totals for patients aged 18-54 as of Dec 31, 2011</b>		
Total of patients (18-54) who received Voc Rehab services any time during 2011	Total of patients (18-54) employed full or part-time at any point during 2011	Total of patients (18-54) enrolled in any formal education or training program in 2011

**FAX to Network #15 at 303-860-8392  
by January 5, 2012**

## Year-end Patient Population List: *Tips and FAQs*

1. Your list should include the names of patients who were temporarily (for less than 30 days) receiving dialysis at another outpatient setting (such as patients who were on a short vacation as of December 31).
2. Keep in mind that your list should include only patients who belonged to your facility **and were alive** as of December 31.

### Frequently Asked Questions

Q: I can get a list of admissions and discharges for my facility; can I use this as a year-end roster?

A: *NO. This will only show people who have been added or removed from your facility; this is not the same as a list of all non-transient patients.*

Q: I have a patient who started dialysis for the first time ever on December 31, 2011. Should this patient be on my year-end list?

A: *YES.*

Q: We had a patient who started chronic dialysis on December 2, 2011, and died on December 28, 2011. Should this person be on my list?

A: *NO. Only patients who were alive as of December 31, 2011 (regardless of when they started with you) should appear on your year-end list.*

Q: We have a patient who was a “winter visitor” at our facility from November through January. Should she be included on our year-end list?

A: *YES. Any patient who is with your facility for over 30 days should be considered a transfer in, (long-term patient) and **SHOULD** be listed on your year-end roster.*

Q: We have a patient who has been in a hospital for over two months and was still there at the end of December. Should he be on my list?

A: *YES. Patients who are in a hospital or other acute-care setting as of December 31, **SHOULD** appear on your roster. Therefore, all patients who were reported as an “Interruption in Service” should appear on your roster unless they died or transferred into another dialysis unit before December 31, 2011.*

Q: I have a patient who died on January 2, 2012. Should he be listed on the Network #15 year-end roster?

A: *YES. The roster is a listing of patients **as of December 31, 2011**, and events from 2012 do not apply.*