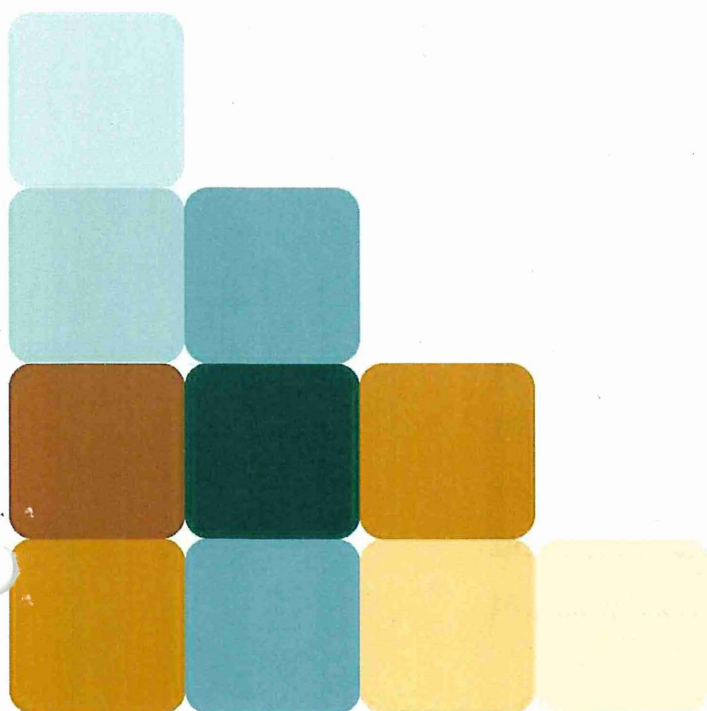




FINAL REPORT

2013 MINNESOTA RESIDENT AND FAMILY SATISFACTION SURVEYS



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It would not have been possible to accomplish a project of this scope without the Interviewers and Quality Assurance Monitors who worked diligently to interview residents in all Minnesota nursing facilities. The cooperation and hospitality of the Minnesota nursing facilities was invaluable. In particular, we would like to thank the staff at the facilities who volunteered to host training. These facilities made the training a meaningful experience and we are grateful for their hospitality.

- Carondelet Village Care Center
- New Brighton Care Center
- Augustana Chapel View Care Center
- Presbyterian Homes of North Oaks/Waverly Gardens Care Center
- Redeemer Residence
- Presbyterian Homes of Bloomington

EXECUTIVE SUMMARY

The Minnesota Department of Human Services (DHS) amended Contract #B42164 between the State of Minnesota and Vital Research (VR) to include the 2013 Resident and Family Satisfaction Surveys. VR contracted with Express Employment Professionals (Express) to recruit, screen, hire, and employ local field staff to conduct the resident interviews. VR also contracted with Service Mailers, a mailing house, to mail Family Surveys as well as Information Specialists Group (ISG) to conduct follow-up phone interviews.

VR contacted each nursing facility to schedule a date to conduct resident interviews and to provide an overview of the Family Survey. Facilities were responsible for submission of a resident census list and corresponding family contact information. Interviewers worked independently and submitted all data to VR for processing. All 369 nursing facilities participated in the Resident Survey and a total of 12,566 interviews were completed.

VR mailed the Family Surveys in four batches. Three weeks following the survey mailing, reminder postcards were mailed to those families who had *not* yet returned their survey form. Six weeks following the survey mailing, follow-up phone interviews were conducted for any facility that had not received enough surveys to meet the required margin of error. Ninety-nine percent of facilities (n=368) participated in the Family Survey. A total of 13,710 family surveys were completed by mail and phone.

The following ideas may be considered to enhance future surveys:

- Make minor revisions to the resident survey based on interviewer feedback;
- Integrate the family survey dashboard into all project materials and scripts; and
- Administer future Resident surveys using handheld devices rather than scannable paper forms.

PROJECT OVERVIEW

The Minnesota Department of Human Services (DHS), in collaboration with the Minnesota Department of Health (MDH) was charged by the Minnesota legislature in 2001 to publicly disseminate quality profiles for all nursing facilities, including information on consumer satisfaction. Contract #B42164 between the State of Minnesota and Vital Research (VR) was amended in 2013 to allow for a ninth round of consumer satisfaction and quality of life interviews with nursing facility residents (Resident Survey) and a fourth round of family satisfaction surveys (Family Survey).

The purpose of the Surveys was to:

1. Increase nursing facility awareness of resident and family perspectives of their services.
2. Provide nursing facilities with valid and reliable results to guide their quality improvement efforts.
3. Add results to the Minnesota Nursing Facility Report Card (<http://www.health.state.mn.us/nhreportcard>) as a consumer satisfaction component.

This report outlines the methodology, implementation, quality assurance plan, and data analysis for the 2013 resident and family surveys. A brief discussion of recommendations for future surveys is included at the end of the report.

METHODOLOGY

VR was responsible for the administration of a statistically valid survey of nursing facility residents and their family members. Residents were interviewed in person. Family members had the opportunity to complete a paper or phone survey.

Instruments

Two different survey instruments were used for the Surveys—one for residents and one for family members. The survey forms were modified based on results from the 2012 Surveys. Scantron printed the scannable forms.

The resident survey instrument was developed and tested by Dr. Robert Kane of the University of Minnesota and modified for use in statewide surveys in 2005. The resident survey instrument has been implemented in statewide satisfaction surveys in Minnesota annually since 2005 and has been extensively tested for reliability and validity. Three items were revised for the 2013 Survey. The probe was revised on one item and two items underwent slight wording changes.

The final 2013 resident survey form is found in Appendix A.

The family survey instrument was developed and tested by Drs. Robert and Rosalie Kane of the University of Minnesota. The first page of the family survey form was reserved for printing of the cover letter, which was developed in collaboration with DHS to introduce the Survey and provide more information to family respondents. No changes were made to the 2013 family survey.

The final 2013 family survey form is found in Appendix B.

Administration Methods

The resident surveys were administered as structured interviews, as required by DHS. Structured interviewing is a standardized technique for collecting information from a large group of people. The goal of structured interviewing is to guarantee that questions are asked and answers recorded in the same way by each interviewer, such that you would get the same answers from a resident when interviewed by different people. Structured interviews differ from other types of interviews in that:

- Each question must be read exactly as written on the page;

- Each question must always be read in the order it appears; and
- The information obtained is reliable.

When we use a standard way to ask questions and record the answers, any differences that result in resident answers should be due to differences in opinions among residents, not due to the way interviewers ask the questions.

The family surveys were primarily administered as mailed paper surveys and approximately 7% of family surveys were administered via phone interview. The alternate mode of administration was only used when a facility was unable to meet the margin of error through mailed surveys.

Sampling

MDS data determined which residents were to be excluded from the Resident Survey. DHS provided VR with up-to-date MDS information throughout data collection. The following residents were excluded from the sample:

- Very severely impaired (Cognitive Performance Scale score of 6) residents.
- Residents who had a Brief Interview Mental Status (BIMS) score of 0, 1, or 2.
- Residents in isolation on the day of the interviews.
- Residents whose responsible party requested that the resident not be approached for participation.

VR sampled short-stay and eligible long-term residents at each facility proportionately. A *short-stay* resident was defined as someone whose intended length of stay at a facility was 30 days or less. *Long-term* residents were defined as people whose intended length of stay was more than 30 days. Using proportional sampling to meet the required (+/-) 3.5% margin of error at the total score level and (+/-) 6.5% margin of error at the dimension level, the proportion of completed short-stay and long-term interviews reflected the proportion of short-stay and long-term residents at the facility. For example, if a facility had 20% short-stay residents and 80% long-term residents, approximately 20% of the interviews would be with short-stay residents and 80% of the interviews would be with long-term residents. If the number of short-stay

residents was lower than the target number of short-stay interviews, additional interviews with long-term residents were completed to meet the total number of interviews.

A relational database was developed to determine the required number of interviews at each facility to meet the margin of error. If the facility was large enough, the database randomly selected a sample of residents to approach for an interview. For small facilities, random sampling was not possible and all residents were included in the list of residents to approach for an interview. At nursing facilities with fewer than 25 eligible residents, interviewers were instructed to complete interviews with as many residents as possible.

The database was also used to calculate the number of completed family surveys required to meet the 3.5% margin of error at the total score level and the 6.5% margin of error at the dimension level. The family survey did not utilize sampling—all identified primary responsible parties received a survey.

IMPLEMENTATION

The Surveys were implemented over a eight-month period, with seven weeks of start-up, 19 weeks of data collection, and four weeks of data analysis and reporting.

Field Staffing

VR selected Express Employment Professionals (Express) to recruit, screen, hire, and employ the field staff for the Resident Survey. Dick Grussendorf, the Project Manager at Express, had previously recruited over 300 interviewers for nine statewide projects in Minnesota.

VR provided Express with a staffing plan and recruitment materials, including:

- Job descriptions;
- Screening guides;
- Online evaluations; and
- Requirements for criminal background checks.

Screening tools were developed by VR to identify the most successful interviewers. Interviewers were not required to have any long-term care or structured interviewing experience. A VR trainer conducted an additional phone interview with applicants to gain additional insight into new recruits that may have been missed by the staffing agency due to the unique nature of this project.

All interviewers passed a criminal background check, as required by DHS. The standards for criminal background checks were the same as the standards applied to employees of nursing facilities. All trainees passed their background check before attending the interviewer training.

Interviewer Recruitment

Twenty interviewers who had previously worked on the Minnesota Resident Survey were able to return this year. The three Quality Assurance Monitors from 2012 also returned to the project.

Interviewer Characteristics

Express recruited 43 candidates to attend training. All but three of the interviewers successfully passed training for a hiring rate of 93%.

Including the Quality Assurance Monitors, the average field staff age was 57 and nine (20%) interviewers were male and 37 (80%) were female. Nearly half of the field staff had a college or graduate degree (48%), compared to 51% in 2012. The following table shows the educational distribution of the field staff.

Education	Number	Percent
Some College or Technical School	17	37%
College Graduate (BA, BS)	17	37%
Graduate Degree (MA, MS, PhD)	5	11%
High School Graduate	7	15%

Table 1. Interviewer Education

Interviewer Retention

Of the 40 interviewers hired, 29 successfully finished their assignments for a retention rate of 73%. Four interviewers were dismissed and seven interviewers resigned.

Scheduling

The work plan called for ten weeks of resident data collection, and 17 weeks of family data collection. The Scheduler began contacting facilities on August 29, 2013. VR scheduled three to four weeks in advance to provide facilities with enough time to inform the necessary parties, and prepare census lists.

The Scheduler typically communicated with facility staff on four occasions:

1. To schedule resident interview date(s);
2. To fax or email an Orientation Packet;
3. To remind them of their scheduled date(s) via an email reminder one week in advance; and
4. A reminder phone call two days in advance.

An orientation packet was emailed to each facility after scheduling an interview date. The orientation packet included background information and specific instructions to prepare for the Surveys. Additional materials were available on the project website: www.vitalresearch.com/mnsurvey2013.

Rescheduling

We had to reschedule five (~1%) nursing facilities' resident interview dates. The following table describes the reasons for rescheduling facilities.

Reason	NF
Interviewer Absence	3
State Surveyor Team Visit	2
Total	5

Table 2. Reasons for Rescheduling

Census List Processing

Facilities were required to send an electronic census list two weeks prior to their interview date. Census list requirements were discussed during the scheduling call and were included in the Orientation Packet. The following template was available for facilities to complete. All information was required for each resident at the facility.

2013 Minnesota Resident/Family Census Template

Name of Facility

Contact Person

Contact Person's Email

Current long-term census

Current short-term census

Quick Tips:

- List all current residents in the facility, regardless of ability or interest in the survey.
- Short-stay resident = intend to stay less than 30 days in the facility.

REPRESENTATIVE information:

- Identify one representative for each resident who is familiar with his or her care (e.g., friend, family member, guardian).
- The representative does not have to make decisions for the resident. He/she should be involved in the resident's life and respond to questions about the resident.
- More information about selecting a representative is available on the project website: www.vitalresearch.com/mnsurvey2013

Questions? Need help? Contact Nicole Thrakulchavee (nthrakulchavee@vitalresearch.com) or Tanya Oleskiewicz (toleskiewicz@vitalresearch.com) at 888-848-2555.

Resident Last Name	Resident First Name	Date of Birth (mm/dd/yyyy)	Admission Date (mm/dd/yyyy)	Room Number	Short Stay	Put X if Representative Last Name	Representative First Name	Representative Address	Representative City	Rep. State	Rep. ZIP	Representative Phone	Put X if Uninvolved Rep

Figure 1. Census List Template

Facilities submitted residents' primary responsible parties and corresponding contact information with the resident census list. A *primary responsible party* was defined as the person who met the most of the following criteria:

1. The person who visits the nursing facility most often.
2. The person who attends the care conferences for the resident (in person or by phone).
3. The person who is the resident's Power of Attorney for Healthcare.
4. The person who is notified of any change in the resident's health or functional status.

Court-appointed legal guardians and conservators who were involved in resident care, visited the facility, and/or attended care conferences could be a primary responsible party; however, legal guardians or conservators who did not have contact with the resident were not eligible to participate in the Family Survey. In addition, a resident could not be listed as his/her own primary responsible party.

Two Census Coordinators guided facility staff through preparing and submitting their census lists. In compliance with HIPAA and the HITECH Act, all facilities were required to submit electronic census lists via Vital elink. Vital elink is a Secure Socket Layer Virtual Private Network (SSL/VPN) that provides secure sharing of confidential information among authorized users. Facilities that were unwilling or unable to use Vital elink were allowed to submit their Census List via fax. VR did not accept emailed information. The Census List Coordinators verified all of the required information and imported census lists into a Census database.

Facilities were required to provide primary responsible parties for at least 90% of its residents. The 90% threshold was established to track facilities potentially biasing their Family Survey results by controlling which families received a survey. If a family contact list was incomplete or had missing information, VR staff contacted the facility to get a completed list.

Two hundred and thirty-six facilities (64%) submitted primary responsible parties for fewer than 90% of residents, ranging from 13.00%-89.49%. The reasons for the missing primary responsible parties included not having valid contact information on file, residents listed as their own contact person, residents without active guardians or families, and residents with a public guardian or conservator who were not involved in the resident's life.

Appendix C documents the 236 facilities that submitted PRP contact information for fewer than 90% of residents.

Data Collection – Resident Survey

Interviewers arrived at each facility at 8:30AM, unless otherwise requested. Interviewers met with the facility contact person for a brief overview of the facility and to obtain three lists:

- Residents in isolation;
- Residents whose responsible party refused participation; and
- Current list of short-stay residents.

Facilities and Interviewers were informed of the VR interviewer policies and procedures. Any violations of these procedures were reported to the VR Project Manager.

Interviewers completed a resident selection procedure prior to interviewing. All residents in isolation and family refusals were removed from the list of residents to approach and all short-stay residents were assigned a resident ID number. Interviewers could only approach residents on one of these resident lists. If more than one interviewer was assigned to the facility, the interview team briefly met to divide the residents to be interviewed to prevent duplicate interviews.

Resident Interviews

Interviewers were trained to approach residents in a courteous manner. For residents who agreed to participate, interviewers read the introductory script and provided instructions on the response categories. Interviewers were instructed to conduct these confidential interviews in a private place where no staff members or family members of other residents could overhear the interview. When possible, interviewers conducted interviews where other residents could not overhear the interview.

The average time to complete an interview was 14.0 minutes.

State Surveyor Team Procedure

At least once per year, state inspection surveyors arrive unannounced at facilities to conduct annual inspections. Our interview team was trained to be alert for such a situation. If the state surveyors and our interviewers were present at a facility at

the same time, the interviewers followed the following procedure:

- Finish the current interview, if underway.
- Pack all materials.
- Inform the contact person that they are leaving due to the arrival of state surveyors.
- Call VR to inform office staff.

VR staff contacted the facility a few days later to schedule a time to return to the facility to complete data collection.

Return Visits

If an insufficient number of interviews was completed at a facility, interviewers were scheduled to return to the facility to complete additional interviews. We conducted a return visit at 61 NFs (17%) The reasons for these return visits are listed below.

Table 3. Return Visits

Reason	NF
Not Enough Eligible Residents	45
Interviewer Error	6
Interviewer Absence	5
State Surveyor Team Visit	1
Other	4
Total	61

Data Collection – Family Survey

VR contracted with a local mailing house to mail the family surveys. VR submitted a total of four batches of family member names to the mailing house. The mailing house processed the list and mailed the family surveys and postage-paid envelopes. Three weeks following the survey mailing, VR provided the mailing house with a list of family names that had already returned their survey. The mailing house then mailed a reminder postcard to those families who had *not* returned their survey.

For the mailing house, the first step in the mailing of the family survey involved running the family contact lists through the National Change of Address (NCOA) system to match the addresses to the USPS address database. This process was designed

to flag addresses that are undeliverable, mail that is being forwarded to a different address, and addresses that are unknown or may not be deliverable. The only addresses that were excluded from each mailing were those flagged as “undeliverable” through the NCOA process. If the NCOA process indicated that mail to a certain address was being forwarded, the survey was mailed to the forwarding address. The following table indicates how many family survey forms and postcards were mailed in each batch.

	# Surveys Mailed	# Postcards Mailed
Batch 1	5,017	3,403
Batch 2	6,304	6,304
Batch 3	4,818	3,936
Batch 4	6,214	3,594
Batch 5	212	-
Total	22,565	17,237

Table 4. Family Surveys by Batch

VR tracked PRPs who did not have a valid address. Some facilities submitted PRP names but no contact information. Other forms of invalid addresses were identified through the NCOA process and returned mail. Reasons for returned mail included: insufficient address, not deliverable, unclaimed, no such address, moved, and deceased. When an address was identified as “invalid,” VR flagged the PRP in the census database. These PRPs were retroactively removed from the sample; therefore ineligible to receive a follow-up postcard or a follow-up phone interview.

Family Survey Follow-up Interviews

Ten weeks following the first survey mailing, we began conducting follow-up phone interviews for any facility that had not received enough surveys to meet the required margin of error. Follow-up phone interviews were conducted by Information Specialists Group, Inc. (ISG), a market research company in Minnesota.

As VR received additional surveys in the mail, VR sent ISG an updated data file to indicate which facilities had met the margin of error and which family members had completed a survey and no longer needed to be contacted for a follow-up phone interview.

Family Calls

Vital Research office staff took calls from family members with questions or concerns Monday through Friday 9AM to 8:30 PM, CST. VR staff offered to re-send a survey if requested. VR mailed approximately 300 surveys throughout data collection upon request.

Family Comments

If a family member included a separate sheet of comments with his or her survey form, VR recorded the Family ID number on the comment and separated the comments from the survey form. VR staff wrote the facility name and resident name on each comment and forwarded all comments to DHS for potential follow-up.

Field Concerns & Feedback

We received relatively few complaints from facilities. Each facility received a follow-up survey one week following its scheduled interview date to gauge facility satisfaction with the survey process. Two hundred and four facilities (55%) completed the follow-up survey. The frequencies for each question are displayed in the following table.

Question	Yes
The Vital Research scheduler explained the survey process.	98.5%
Vital Research provided useful tools (e.g., orientation packet, templates, etc.) to help me prepare for data collection.	95.9%
Vital Research provided the support I needed to submit the resident census list.	97.4%
Vital Research staff communicated professionally over the phone.	98.5%
I felt comfortable raising questions or concerns about the survey process to Vital Research staff.	96.9%
The interviewer(s) were courteous to facility staff.	99.5%

Table 5. Facility Feedback Ratings

Question	Yes
The interviewer(s) did their best to minimize disruptions to facility operations.	100.0%
Overall, I was satisfied with the resident survey process.	97.4%
Overall, I was satisfied with the family survey process.	92.9%

Table 5 (cont'd). Facility Feedback Ratings

In general, facilities were satisfied with the resident survey process—97% of facilities reported overall satisfaction (same as 2012). Satisfaction with the family survey process increased from 90% in 2012 to 93%.

In addition to the yes/no questions, space was provided to write comments or suggestions. Facilities submitted 72 comments about the process. The Project Manager or Data Collection Supervisor followed up with facilities that expressed concerns or raised questions on their follow-up survey. The following table describes the comments by theme.

Theme	#	Sample
Family Survey - Uninvolved	17	<i>I really can't comment on the Family survey process. I sent out the letter that the survey was happening for residents and family. But didn't hear anything at all about the process for family.</i>
Positive Feedback	14	<i>Nothing but professional every year! Thank you so much!</i>
Suggestion	14	<i>Interviewers should also request activity calendar and list of residents on outing on day of survey. Would help interviewers to work around events at facility.</i>
Negative Interviewer Behavior	9	<i>The interviewers completed surveys with some of the residents in a public area. I would have liked to see them go to a more private area.</i>

Table 6. Facility Feedback Comments

Theme	#	Sample
Concerns Regarding Cognitive Impairment	5	<i>In future surveys, I would like to see that the dementia residents living in the Special Care Unit could be exempt from the interview due to I feel it is a dignity issue for them. Several of the dementia residents get agitated with questions and/or are not able to answer appropriately due to their poor cognition.</i>
VR Office Staff – Negative Feedback	2	<i>The data collection tool was very time consuming. They did not accept any other format of information which was a burden on the facility. Accept any form of data that presents the information requested. Don't just require one collection spreadsheet. That is too time consuming to complete.</i>
Other	8	<i>Very much appreciate the extra time to send off facility information, and sorry about the delay the day of the survey. We are going through a transition period and things aren't running on all cylinders yet. Thanks!</i>

Table 6 (cont'd). Facility Feedback Comments

Potential for Abuse, Mistreatment, or Neglect

If an interviewer observed, or if a resident spontaneously discussed or volunteered, incidents that might indicate a potential for abuse and neglect, the interviewer completed a Potential for Abuse, Mistreatment, or Neglect Report. The resident's exact words were recorded, along with information about when the incident occurred and who was involved. Interviewers reported potential mistreatment directly to the local Common Entry Point (CEP). Interviewers also submitted their reports to Vital Research.

The Potential for Abuse, Mistreatment, or Neglect Report can be found in Appendix D.

Interviewers encountered a total of 20 Potential for Abuse, Mistreatment, or Neglect reports (16 in 2012). The following table provides an overview of the problem areas that were identified. Please note that the table includes reports with multiple problem areas.

Problem Area	Number of Reports
Physical Abuse	8
Neglect	9
Medical Neglect	5

Table 7. Potential Problem Forms by Problem Area

Problem Area	Number of Reports
Sexual Abuse	2
Theft	3
Privacy Violation	2
Verbal Abuse	3
Other	5
Total	37

Table 7 (cont'd). Potential Problem Forms by Problem Area

Interviewers contacted the local CEP from home within 24-hours. The following table illustrates the actions taken. Interviewers also offered residents a card with the contact information for the Ombudsman and Office of Health Facility Complaint. The following table shows how many residents accepted the card.

Ombudsman/OHFC Card	Number
Yes	9
No	8
Unknown	3

Table 8. Ombudsman/OHFC Cards

Privacy & Security

In compliance with federal law, policies were in place to guide the transmission of data, the physical security of data, and the confidentiality of respondents.

Transmission of Data

All facilities were required to submit their electronic census lists through a secure HTTPS website using Secure Socket Layer Virtual Private Network (SSL/VPN) technology. Facilities were not permitted to send any resident or family information via email. When communicating with interviewers, VR staff transmitted all resident lists and information through a secure website.

Security specifications of Vital elink can be found in Appendix E.

Physical Security

All resident and family information was kept secure through the following precautions:

- All electronic data were stored on password-protected computers/servers accessible only to project staff.
- Computers and servers were protected by firewalls and security protocols that encrypt and block unauthorized access.
- All documents or files that were shipped were tracked via FedEx.
- All raw data forms and contact lists were held in a locked, limited-access office. The VR office is located in a limited access, secured building with 24-hour security.
- Electronic data elements will be deleted and hard copies of data will be shredded according to DHS's requirements.

Confidentiality

DHS provided VR with a letter describing VR's requirement to safeguard all health information. This letter was available on the project website and was sent to any facility with questions or concerns about HIPAA, HITECH Act, or the privacy of personal health information. Interviewers also signed a confidentiality pledge during training.

QUALITY ASSURANCE

The quality assurance plan included four components: training, quality assurance monitoring, inter-rater reliability, and auditing survey forms.

Training

VR conducted three interviewer trainings—one dedicated 2-day training for interviewers who had been on the project at least four years and two traditional three-day interviewer trainings. All three trainings took place in the Twin Cities. Each training included a combination of classroom instruction and practice interviews.

Training	Host Facilities
Return Interviewer	Carondelet Village Care Center New Brighton Care Center
Traditional Training #1	Augustana Chapel View Care Center Presbyterian Homes of North Oaks/Waverly Gardens Care Center
Traditional Training #2	Redeemer Residence Presbyterian Homes of Bloomington

Table 9. Training
Locations

Training Teams

Training teams were comprised of both Trainers and Assistant Trainers. Trainers were responsible for all classroom instruction, supervision of practice interviews, and evaluating trainee progress. Assistant Trainers assisted with supervision of practice interviews, were responsible for timekeeping and logistical arrangements (e.g., communicating with the facility contact person, arranging for lunches), and interviewed additional residents to complete each training facility. The members of each training team and their credentials are listed below.

Table 10. Training Team Experience

Training	Name	Credentials	Tenure with VR
Return Interviewer Training	Connie Maratea	MA	2008
	Pat Francis	MA	2005
	Maureen Nelson	BA	2005
	Sally Magin	BS	2009
Traditional Interviewer Trainings	Pat Francis	MA	2005
	Maureen Nelson	BA	2005
	Sally Magin	BS	2009
	Randy Mertes	MA	2009
	Melissa Deneen	BS	2008
	Nona Hendrickson	--	2008

Training Content

Interviewer training was based on the principles of Adult Education and incorporated discussion, observation, practice, and feedback. By the end of training, trainees became proficient in the following skills:

- Structured interview methods
- Establishing rapport and interacting with residents
- Categorizing resident responses without bias
- Communicating with residents who have difficulty communicating
- Sensitivity to age, mental or behavioral health, cognitive and physical impairment, and cultural competency
- Maintaining confidentiality
- Resident selection procedures
- Completing scannable forms and all required paperwork
- Reporting potentials for abuse, mistreatment, or neglect

Trainees were required to complete at least three successful practice interviews supervised by either a Trainer or an Assistant Trainer. Following each interview, the Trainer or Assistant Trainer met with the interviewer to debrief the interview and provide feedback. Successful interviewers were permitted to conduct unsupervised interviews after passing all training requirements.

Evaluation of Trainees

The Trainers used several tools to evaluate knowledge and skill acquisition of the trainees. Trainers and Assistant Trainers met each day following training to discuss trainees' progress. Trainers made their final decisions on which trainees successfully completed the training based on the Knowledge Test, Interview Skills Checklist, Percent Agreement, and the behaviors and attitudes expressed during training.

KNOWLEDGE TEST

Trainers administered a short Knowledge Test at the end of the second day of training. Test answers and rationale were reviewed with trainees to provide the training team with an additional opportunity to discuss training concepts. Trainees' Knowledge Test scores ranged from 84% to 100%, with an average score of 95%.

INTERVIEW SKILLS CHECKLIST

VR developed a skills checklist to capture the key behavioral elements that contribute to a successful interview. During each practice interview, Trainers and Assistant Trainers would complete a Skills Checklist to evaluate if the Trainee was exhibiting the required skills. The average Skills Checklist score during training was 93%. Trainees with an average score below 80% were not hired.

PERCENT AGREEMENT

During each supervised interview, the Trainer or Assistant Trainer would mark the answers on a separate interview form. During the debriefing, the answer to each question was compared and discussed. Trainers and Assistant Trainers calculated percent agreement using the following formula:

$$\text{Percent Agreement} = \frac{[\text{Number of Questions with the Same Answer}]}{[\text{Total Number of Questions Asked}]}$$

Percent agreement calculations documented the ability of trainees to categorize resident responses and interpret information according to the requirements of a structured interview. Percent agreement at training ranged from 80% to 100% with an average of

97%. Interviewers were required to complete at least three interviews with percent agreement of 90% or higher. Trainees that did not meet this standard were not hired.

Quality Assurance Monitoring

Three experienced Quality Assurance (QA) Monitors were periodically scheduled to observe each interviewer in the field. QA Monitoring ensured interviewers' procedures in the field met or exceeded the parameters VR defined as acceptable.

Interviewers were monitored at least once every two weeks. The QA Monitoring process was similar to the supervised interviews during training. The QA Monitor observed at least two interviews with each interviewer, completing an Interview Skills Checklist and survey form during each interview. Following the observation, supervisors would debrief with the interviewer to discuss demonstrated skills, scoring decisions, strengths and suggestions for improvement.

Over the course of the day, the QA Monitor also evaluated the interviewers' procedural and communication skills. These observations were discussed with interviewers, who acknowledged the feedback by signature on an Interviewer Evaluation Form.

QA Monitors provided VR staff with weekly reports via an online feedback system. The system asked supervisors to comment on the interviewers they supervised as well as alerting staff to any field issues so appropriate follow-up could be done.

VR provided DHS with a weekly QA Monitoring schedule so they could plan DHS visits to view procedures during data collection.

Inter-Rater Reliability

During training and QA Monitoring, both the interviewer and a Trainer/QA Monitor would complete a survey form. These forms were used to provide feedback to the interviewer through debriefing sessions, but also to assess reliability of data collection.

Inter-rater agreement was calculated for observation interviews conducted during training and in the field following training. The

Trainer/QA Monitor's survey form was included in the data set for the facility and the interviewer's form was used to calculate inter-rater agreement. *Cohen's Kappa*, which represents percent agreement corrected for chance, was calculated for each question. *Kappa* ranges from -1.0 to 1.0, where values of zero imply no relationship (therefore any agreement is attributable to chance alone), values of -1.0 indicate there is perfect disagreement, and values of 1.0 indicate perfect agreement. In general, a *Kappa* of 0.7 or above is considered satisfactory.

During training, 104 pairs of inter-rater interviews were collected, along with 315 during data collection for a total of 419 pairs. All *Kappas* exceeded the 0.70 acceptable level. These findings indicate that interviewers consistently selected the same response category as the Trainer or QA Monitor and that interviewers were generally more proficient in selecting answer categories after training.

Cohen's *Kappa* is calculated as:

$$\kappa = \frac{[Pr(a) - Pr(e)]}{[1 - Pr(e)]}$$

Where:

$Pr(a)$ = Observed agreement

$Pr(e)$ = Expected agreement

(Landis & Koch, 1977)

	Training Kappa (n=104)	Post- Training Kappa (n=315)
COMFORT		
Have you been too cold here?	.901	.954
Are you in physical pain?	1.000	.980
Are you ever in pain because you are left in one position for too long?	1.000	.978
Are you bothered by noise when you are in your room?	.929	.966
ENVIRONMENTAL ADAPTATIONS		
Is it easy for you to get around in your room by yourself?	.905	.977
Are your personal items arranged so you can get to them?	.969	1.000
Can you get to the personal items you want to use for grooming?	.906	.941
Can you take care of your own things here as much as you want?	.927	.968
PRIVACY		
Can you find a place to be alone when you want to be alone?	.914	.956
Can you make a private phone call?	.977	.900
Do you and your visitors get enough privacy?	1.000	.975

Table 11. Cohen's *Kappa* for Training and Post-Training

Table 11 (cont'd).
Cohen's *Kappa* for
Training and Post-
Training

	Training Kappa (n=104)	Post- Training Kappa (n=315)
DIGNITY		
Do the people who work here treat you politely?	.749	.965
Do the people who work here treat you with respect?	1.000	1.000
Do the people who work here handle you gently?	.955	.938
Do the people who work here respect your modesty?	.956	.967
MEANINGFUL ACTIVITY		
Are there things to do here that you enjoy?	.898	.974
Are there things to do on the weekend that you enjoy?	.935	.961
Do you ever help other people?	.900	.960
Can you do hobbies that you enjoy here?	.922	.903
FOOD ENJOYMENT		
Do they serve your favorite foods here?	1.000	.974
Do you like the food here?	.902	.956
Do you enjoy mealtimes here?	.947	.964
AUTONOMY		
Can you go to bed at the time you want?	1.000	.980
Can you get up in the morning at the time you want?	.971	.990
Do the people who work here know what you like and don't like?	.906	.974
Can you change things you don't like here?	.866	.949
Can you decide what clothing to wear?	.875	.970
INDIVIDUALITY		
Are people working here interested in the things you've done in your life?	.947	.988
Do the people who work here know who you are as a person?	.976	.948
Do the people who live here know who you are as a person?	.905	.950

Table 11 (cont'd).
Cohen's *Kappa* for
Training and Post-
Training

	Training Kappa (n=104)	Post- Training Kappa (n=315)
SECURITY		
Are your personal items safe here?	.939	.971
Does your clothing get lost or damaged in the laundry?	.933	.911
Do you feel safe and secure here?	.933	.967
RELATIONSHIPS		
Do the people who work here ever stop by just to talk?	.928	.968
Do you consider anybody who works here to be your friend?	.939	.991
Can you get help when you need it?	.961	.948
QUALITY OF LIFE INTRACLAS CORRELATION	.882	.878
SATISFACTION		
Do the people who work here listen to what you to say?	.976	.988
Do the people who work here explain what they are doing when they give you care?	.919	.959
Do you consider any of the other people who live here a friend?	.895	.984
Do the people who work here wait to be invited in before entering your room?	.928	.972
Do the people who work here ever get angry at you?	.910	.933
Would you recommend [Name of Facility] to someone who needs care?	.939	.985
Overall, what grade would you give [Name of Facility]?	.987	.986
SATISFACTION INTRACLAS CORRELATION	.700	.690
MOOD		
Bored	.987	.996
Angry	.931	.995
Peaceful or Calm	.957	1.000
Worried	.947	.982
Interested in things	.918	.986

	Training Kappa (n=104)	Post- Training Kappa (n=315)
Sad or Unhappy	.987	.996
Afraid	.931	.974
Lonely	1.000	.991
Happy	.916	.985
MOOD INTRACLAS CORRELATION	.817	.762

Table 11 (cont'd).
Cohen's *Kappa* for
Training and Post-
Training

Auditing Data

Finally, data quality was assured through an extensive data auditing process which included interviewers checking their survey forms, data logging, scanning, and auditing scanned data.

Checking Resident Survey Forms

Interviewers were responsible for assuring the quality and accuracy of their data by reviewing completed survey forms immediately after each interview. Interviewers were instructed to double-check the following information on each form:

- All information on the Face Sheet was filled out and bubbled.
- The Interview Status box was accurately marked and the reason for "incomplete" and "not interviewed" forms was documented.
- If a resident received assistance with the interview from someone in the room (e.g., a relative), the appropriate person was identified in the Assistance with Interview section.
- The Start Time and End Time were documented.
- Only one answer was marked for each question.
- There were no stray marks on the form.
- That interviews marked "complete" were complete.

Interviewers were supplied with FedEx boxes and pre-printed FedEx labels and submitted data weekly.

Resident Survey Data Logging

An automated report identified which facilities were scheduled each week so VR staff could track the incoming data. The Project Manager followed up with interviewers responsible for missing data and requested tracking information.

Data Loggers checked all survey forms and paperwork and counted the number of completed interviews at each facility. The following information was logged in a Project Management database:

- Number of residents in isolation
- Number of residents whose legal guardian declined participation
- Number of short-stay completed interviews
- Number of long-term completed interviews
- Total number of completed interviews
- Number of incomplete interviews
- Number of residents approached but not interviewed

Data errors were addressed with individual interviewers, as necessary.

Scanning

Each survey form was scanned using an NCS OpScan 6 scanner.

RESIDENT SURVEY

Resident survey items 1 through 42 of the survey form were scored during scanning as follows:

- Yes = 1
- No = 2
- DK/NA/NR = 3

Item 43 of the survey form was scored as follows:

- A = 1
- B = 2
- C = 3
- D = 4
- F = 5
- DK/NA/NR = 6

Items 44 through 52 of the survey form were scored as follows:

- Often = 1
- Sometimes = 2
- Rarely = 3
- Never = 4
- DK/NA/NR = 5

The scanner was programmed to stop if it picked up any out of range values (e.g., 13 for the month, 1842 for the year of birth). The scanner would also stop and provide an error message if the interviewer marked two answers for one question. The following rules were applied if two answers were marked:

- If both Yes and No were marked, the answer selected was DK/NA/NR
- If both Yes and DK/NA/NR were marked, the answer selected was Yes
- If both No and DK/NA/NR were marked, the answer selected was No
- If two answers were marked for any of the Mood questions, the most positive answer was selected

FAMILY SURVEY

The family survey forms were scored during scanning as follows:

Item 1:

- Spouse = 1
- Child = 2
- Son-in-law or daughter-in-law = 3
- Sibling = 4
- Other relative or friend = 5
- Guardian/conservator/power of attorney/case manager = 6

Item 2:

- Male = 1
- Female = 2

Items 3 and 4:

- Once a week or more = 1
- A couple times a month = 2
- About once a month = 3
- Less than once a month = 4

- Not Applicable - The resident is unable to talk on the phone = 5 (#4 only)

Items 5 through 35:

- Excellent (A) = 1
- Very Good (B) = 2
- Average (C) = 3
- Below Average (D) = 4
- Failing (F) = 5
- Don't Know/Not Applicable (NA) = 6

Item 36 and 37 of the family survey form were scored the same as the scales 5 to 1, with 5 being Extremely Confident/Extremely High and 1 being Not at All Confident/Extremely Low.

The scanner was programmed to stop and provide an error message if a respondent marked two answers. The following rules were applied to the marking of two answers:

- *For Questions 3 and 4:*
 - If more than one answer is filled, select the answer that represents the more frequent time period.
- *For Questions 5 through 35:*
 - If more than one scale answer (A-F) is filled in, leave the question blank.
 - If one scale answer (A-F) and NA are filled in, select the scale answer.
- *For Questions 36 and 37:*
 - If more than one answer is filled, leave the question blank.

Auditing Scanned Data

A Data Analyst created a program in SPSS 22 to identify surveys with out-of-range or unidentifiable values. These surveys were looked up and both the survey form and data file were corrected, as needed. The most frequent errors were interview time errors (e.g., if the end time was earlier than the start time, the calculated interview time would be a negative value). Other errors included date of birth and duplicate surveys. Any remaining out of range values such as negative interview times, ages > 114 years, etc., were set to missing. If a duplicate family survey was found, both survey forms were reviewed and corrected, when possible. If a family

member completed a survey by mail and by phone, the mailed survey was accepted and the duplicate was removed.

DATA ANALYSIS

Facility Participation Rate

All 369 eligible facilities agreed to participate in the resident survey for a 100% facility response rate. At the 369 nursing facilities, there were 29,833 beds and 26,420 skilled nursing residents for a statewide occupancy rate of 89%. One facility did not participate in the Family Survey.

Response Rate and Demographics

Ninety-six percent of residents were eligible to participate in the survey (n=25,422). A total of 15,873 residents were approached for an interview and 13,064 complete and incomplete interviews were conducted, resulting in a resident participation rate of 82% (83% in 2012). The average number of interviews completed at each facility was 34 (34 in 2012), with a range of 14 to 60 interviews.

Interviewed residents ranged in age from 20 to 109 years with an average of 83 years. Thirty-two percent of interviewed residents were male, and 68% female. The length of stay for interviewed residents ranged from less than one year to forty-two years with an average of 2.40 years.

Participating facilities (n=369) provided VR with a total of 25,477 primary responsible parties. Of the 25,477 PRPs, 468 were designated as not involved in the residents' life, therefore ineligible to complete a survey. We also tracked invalid contact information using our custom database, the National Change of Address System and by tracking returned mail. Facilities submitted a total of 2,911 invalid PRP addresses. Uninvolved PRPs and PRPs with invalid contact information were removed from the sample for a total of 22,098 PRPs eligible to complete the survey. We mailed a total of 22,565 surveys to Minnesota family members (note: some of the invalid contacts were identified after the mailing). The average number of Family Surveys completed at each facility was 37, with a range of two to 130 Surveys. In total, 13,710 family surveys were completed.

Margin of Error

The sampling plan determined the number of completed interviews required for the results to be considered representative of each population to a $\pm 3.5\%$ margin of error at the total score level and $\pm 6.5\%$ margin of error at the dimension level. At nursing facilities with fewer than 25 eligible residents, interviewers were instructed to complete interviews with as many residents as possible. Nineteen facilities (5%) did not meet the margin of error or the adjusted target for the Resident Survey.

Appendix F lists the facilities that did not meet the margin of error for the Resident Survey.

If a facility did not have the required number of completed family surveys, follow-up phone interviews were conducted to meet the margin of error. Forty-five facilities did not meet the margin of error for the family survey (12%).

Appendix G lists the facilities that did not meet the margin of error for the Family Survey.

Data Summary

The following tables summarize the resident and family data collected statewide.

	Population	Sample	%
Participating Facilities	369	369	100%
Total Residents (Census)	29,833 (Beds)	26,420	88.6%
Total Eligible Residents	26,420	25,422	96.2%
Long-term Eligible Residents		22,344	87.9%
Short-term Eligible Residents		3,078	12.1%
Family Refusals	25,422	254	1.0%
Residents in Isolation		114	0.4%
Approached Residents	25,422	15,873	62.4%
Unsuccessful Attempts (Not Interviewed)	15,873	2,809	17.7%
Refusal		672	23.9%
Unable to Respond	2,809	984	35.0%
Deceased		266	9.5%

Table 12. Resident Data Summary

Table 12 (cont'd). Resident Data Summary

	Population	Sample	%
Discharged		228	8.1%
Hospitalized/Ill		162	5.8%
Out of Facility		83	3.0%
Asleep (3 Times)		157	5.6%
Language Barrier		79	2.8%
Unable to Locate		49	1.7%
Other		129	4.6%
Interviews Started	15,873	13,064	82.3%
Interviews with Assistance	13,064	89	0.7%
Incomplete Interviews	13,064	498	3.8%
Unable to Respond		267	53.6%
Refusal to Continue		100	20.1%
Fatigue	498	66	13.3%
Other		65	13.1%
Complete Interviews	13,064	12,566	96.2%
Long-term Complete		11,118	88.5%
Short-term Complete	12,566	1,448	11.5%

Table 13. Family Data Summary

	Population	Sample	%
Participating Facilities	369	368	99.7%
Residents with a PRP	26,420	25,477	96.4%
Uninvolved PRPs		468	1.8%
PRPs with invalid addresses	25,477	2,911	11.4%
PRPs Eligible for the Survey	25,477	22,098	86.7%
Total Completed Surveys	22,098	13,710	62.0%
Completed by Mail		12,818	93.5%
Completed by Phone Interview	13,710	892	6.5%

Submission of Survey Data

Census data with MDS information was matched to the cleaned SPSS system file of scanned Survey data by nursing facility ID (FID), resident ID (RID), and family ID (family_id). Final resident and family data files were submitted to DHS for further analysis, and included all Survey data and calculated variables.

RECOMMENDATIONS

Survey Suggestions

VR conducted exit interviews with interviewers who completed the project. Interviewers were asked if they had any recommendations for the resident survey form. Based on interviewer feedback and review of VR staff, the following suggestions could be considered for subsequent surveys.

Survey Question	Suggestion
<i>Are your personal items arranged so you can get to them?</i> <i>Can you get to the personal items you want to use for grooming.</i>	These two questions and their probes are similar and felt repetitive to residents and interviewers. Consider rewording one of the questions or combining them.
<i>Do the people who work here respect your modesty?</i>	Residents were confused by the word "modesty." Consider rewording this question.
<i>Do the people who work here know you as a person?</i>	This question elicited poor responses from some residents. The wording "as a person" was confusing to some residents.
<i>Do the people who work here wait to be invited in before entering your room?</i>	This question elicited poor responses from some residents. Consider adding a probe to allow interviewers to respond to the most common resident response ("well, they knock").

Table 14. Resident Survey Suggestions

Family Survey Dashboards

In 2013, VR rolled out a "Family Survey Dashboard" to help illuminate the family survey administration process and to help facilities feel more connected to the survey. Due to the timing of this rollout (approximately three weeks into data collection), not all facilities were introduced to the dashboard during scheduling or in their orientation materials. In future projects, the dashboard should be fully integrated into all scripts and materials.

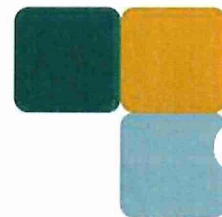
Materials should also be enhanced to further explain purpose of the dashboard and how to use and interpret the information.

Handheld Devices

VR has developed the capacity to administer interviews using handheld devices (i.e., tablets) using custom survey software. This software is programmed to display all survey questions, instructions, and prompts to provide a fluid, easy-to-use tool for interviewers. Administering interviews via handheld devices increases the security of the data being collected, improves project efficiency, and enables real-time quality assurance (e.g., validating data as it is being collected). VR recommends administering future Resident surveys using handheld devices rather than scannable paper forms.

APPENDICES

- A. Resident Satisfaction Survey
- B. Family Satisfaction Survey
- C. Facilities with Contact Information for Less than 90% of Residents
- D. Potential for Abuse, Mistreatment or Neglect Report
- E. Vital elink Security Specifications
- F. Resident Survey: Margin of Error Not Met
- G. Family Survey: Margin of Error Not Met



APPENDIX A

RESIDENT SATISFACTION SURVEY

Minnesota Department of Human Services

Resident Satisfaction Interview Form 2013

MARKING INSTRUCTIONS

- Use No. 2 pencil only.
- Make dark marks that fill the circle completely.
- Make no stray marks.

USE NO. 2 PENCIL ONLY

CORRECT MARK



INCORRECT MARKS



Facility ID #	Interviewer ID #	Today's Date	Resident ID #	Date of Birth	Admission Date	Type of Stay	Gender			
Month	Day	Year	Month	Day	Year	Month	Day	Year		
0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	<input type="radio"/> Long Term <input type="radio"/> Short Stay	<input type="radio"/> Male <input type="radio"/> Female			
1 1 1	1 1 1	1 1 1	1 1 1	1 1 1	1 1 1					
2 2 2	2 2 2	2 2 2	2 2 2	2 2 2	2 2 2					
3 3 3	3 3 3	3 3 3	3 3 3	3 3 3	3 3 3					
4 4 4	4 4 4	4 4 4	4 4 4	4 4 4	4 4 4					
5 5 5	5 5 5	5 5 5	5 5 5	5 5 5	5 5 5					
6 6 6	6 6 6	6 6 6	6 6 6	6 6 6	6 6 6					
7 7 7	7 7 7	7 7 7	7 7 7	7 7 7	7 7 7					
8 8 8	8 8 8	8 8 8	8 8 8	8 8 8	8 8 8					
9 9 9	9 9 9	9 9 9	9 9 9	9 9 9	9 9 9					

Interview Status

- ☐ Not interviewed
- ☐ Incomplete
- ☐ Complete

Reason why resident was not interviewed (if applicable)

- ☐ Deceased
- ☐ Discharged/Moved
- ☐ Hospitalized/III
- ☐ Out of facility
- ☐ Unable to locate
- ☐ Asleep (when visited 3 times)
- ☐ Language barrier
- ☐ Unable to respond to questions
- ☐ Refused
- ☐ Other

Reason why interview is incomplete (if applicable)

- ☐ Resident fatigue
- ☐ Unable to respond to questions
- ☐ Refusal to continue
- ☐ Necessary clinical care
- ☐ Resident illness
- ☐ Other

Start Time	End Time
Hour	Minute
0 0 0 0	0 0 0 0
1 1 1 1	1 1 1 1
2 2 2 2	2 2 2 2
3 3 3 3	3 3 3 3
4 4 4 4	4 4 4 4
5 5 5 5	5 5 5 5
6 6 6 6	6 6 6 6
7 7 7 7	7 7 7 7
8 8 8 8	8 8 8 8
9 9 9 9	9 9 9 9

Assistance with interview (if applicable)

- ☐ Family member
- ☐ Volunteer
- ☐ Staff member
- ☐ Custodian/Guardian
- ☐ Other

Mark only if interview was interrupted and re-started

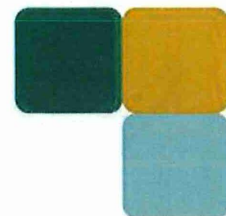
Start Time 2	End Time 2
Hour	Minute
0 0 0 0	0 0 0 0
1 1 1 1	1 1 1 1
2 2 2 2	2 2 2 2
3 3 3 3	3 3 3 3
4 4 4 4	4 4 4 4
5 5 5 5	5 5 5 5
6 6 6 6	6 6 6 6
7 7 7 7	7 7 7 7
8 8 8 8	8 8 8 8
9 9 9 9	9 9 9 9

PLEASE DO NOT WRITE IN THIS AREA



COMFORT	THE FIRST FEW QUESTIONS ARE ABOUT HOW COMFORTABLE YOU ARE HERE.		Generally, YES	Generally, NO	DK/NA/ NR
	1. Have you been too cold here?*		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	2. Are you in physical pain?*		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	3. Are you ever in pain because you are left in one position for too long?*(Probe: you are not turned or moved)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	4. Are you bothered by noise when you are in your room?*		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ENVIRONMENTAL ADAPTATIONS	I HAVE A FEW MORE QUESTIONS ABOUT YOUR ROOM.		Generally, YES	Generally, NO	DK/NA/ NR
	5. Is it easy for you to get around in your room by yourself?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	6. Are your personal items arranged so you can get to them?(Probe: clothing, toothbrush, comb, soap)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	7. Can you get to the personal items you want to use for grooming?(Probe: toothpaste, toothbrush, comb, shampoo, soap, shaver)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	8. Can you take care of your own things here as much as you want?(Probe: personal items)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PRIVACY	NOW I'D LIKE YOU TO THINK ABOUT YOUR PRIVACY HERE.		Generally, YES	Generally, NO	DK/NA/ NR
	9. Can you find a place to be alone when you want to be alone?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	10. Can you make a private phone call?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	11. Do you and your visitors get enough privacy?(Probe: when they visit with you)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
DIGNITY	THIS GROUP OF QUESTIONS IS ABOUT THE PEOPLE WHO WORK HERE.		Generally, YES	Generally, NO	DK/NA/ NR
	12. Do the people who work here treat you politely?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	13. Do the people who work here treat you with respect?(Probe: Are the people who work here polite, listen to what you have to say, care about your feelings?)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	14. Do the people who work here handle you gently?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	15. Do the people who work here respect your modesty?(Probe: avoid exposing your body more than needed)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MEANINGFUL ACTIVITY	NOW I HAVE A FEW QUESTIONS ABOUT THE ACTIVITIES HERE.		Generally, YES	Generally, NO	DK/NA/ NR
	16. Are there things to do here that you enjoy?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	17. Are there things to do on the weekend that you enjoy?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	18. Do you ever help other people?(Probe: Helping them find their way, moving from place to place, giving advice, reading to them)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	19. Can you do hobbies that you enjoy here?(Probe: reading, knitting, puzzles, playing cards, building or fixing things, music)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

FOOD ENJOYMENT	THE NEXT FEW QUESTIONS ARE ABOUT THE FOOD AND MEALTIMES.		Generally, YES	Generally, NO	DK/NA/ NR
	20. Do they serve your favorite foods here?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	21. Do you like the food here?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	22. Do you enjoy mealtimes here?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
AUTONOMY	THE NEXT FEW QUESTIONS ARE ABOUT THE CHOICES YOU HAVE HERE.		Generally, YES	Generally, NO	DK/NA/ NR
	23. Can you go to bed at the time you want?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	24. Can you get up in the morning at the time you want?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	25. Do the people who work here know what you like and don't like?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	26. Can you change things you don't like here? <i>(Probe: your bathing schedule, your food, your room)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
INDIVIDUALITY	THE NEXT FEW QUESTIONS ARE ABOUT YOUR PERSONAL IDENTITY HERE.		Generally, YES	Generally, NO	DK/NA/ NR
	28. Are people working here interested in the things you've done in your life?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	29. Do the people who work here know who you are as a person? <i>(Probe: Do they recognize what is special about you?)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	30. Do the people who live here know who you are as a person? <i>(Probe: Do they recognize what is special about you?)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SECURITY	NEXT I'D LIKE TO ASK YOU A FEW QUESTIONS ABOUT SAFETY.		Generally, YES	Generally, NO	DK/NA/ NR
	31. Are your personal items safe here? <i>(Probe: clothing, jewelry, things that are important to you)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	32. Does your clothing get lost or damaged in the laundry?*		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	33. Do you feel safe and secure here?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
RELATION- SHIPS	I HAVE A FEW MORE QUESTIONS ABOUT THE PEOPLE WHO WORK HERE.		Generally, YES	Generally, NO	DK/NA/ NR
	34. Do the people who work here ever stop by just to talk?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	35. Do you consider anybody who works here to be your friend? <i>(Probe: Can you confide in anyone?)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	36. Can you get help when you need it?		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SATISFACTION	37. Do the people who work here listen to what you say? <i>(Probe: Do they answer you? Look at you when you speak? Do what you say?)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	38. Do the people who work here explain what they are doing when they give you care? <i>(Probe: Doing things to help you)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	39. Do you consider any of the other people who live here a friend? <i>(Probe: Can you confide in anyone?)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	40. Do the people who work here wait to be invited in before entering your room? <i>(Probe: Ask to be invited in?)</i>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



APPENDIX B

FAMILY SATISFACTION SURVEY

Marking Instructions

CORRECT
MARK

- Use a No. 2 pencil or blue or black ink pen only.
- Do not use pens with ink that soaks through the paper.
- Make solid marks that fill the circle completely.
- Make no stray marks on this form.
- Do not fold, tear, or mutilate this form.

INCORRECT MARKS



1. What is your relationship to the resident at the nursing facility?

- ☐ Spouse
- ☐ Child
- ☐ Son-in-law or Daughter-in-law
- ☐ Sibling
- ☐ Other relative or friend
- ☐ Guardian/Conservator/Power of Attorney/
Case Manager

3. About how often do you visit the resident?

- ☐ Once a week or more
- ☐ A couple times a month
- ☐ About once a month
- ☐ Less than once a month

2. Are you male or female?

- ☐ Male
- ☐ Female

4. About how often do you talk with the resident on the phone?

- ☐ Once a week or more
- ☐ A couple times a month
- ☐ About once a month
- ☐ Less than once a month
- ☐ Not Applicable – The resident is unable to talk on the phone

PLEASE DO NOT WRITE IN THIS AREA





26. Including your thoughts and opinions in planning the resident's care
27. Answering questions that you might have
28. Making you feel confident in the care the resident receives
29. Allowing you to provide help or care to the resident
30. Not counting on you to provide more help than you want to provide
31. Allowing the resident to choose to receive or refuse care
32. Staff going the extra mile to resolve problems
33. Management responding well to your concerns
34. Quality of care provided in the nursing facility
35. Quality of nursing facility as a place to live

Excellent
A

Very Good
B

Average
C

Below Average
D

Failing
F

Don't Know/Not Applicable
NA

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

36. Rating the nursing facility on a scale where 5=**extremely confident** and 1=**not at all confident**, how confident are you that the resident is well cared for whether you are present or not?

Extremely Confident

Not at all Confident

5 4 3 2 1

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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37. Rating the nursing facility on a scale where 5=**extremely high** and 1=**extremely low**, how enthusiastically would you recommend this nursing facility to another family?

Extremely High

Extremely Low

5 4 3 2 1

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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SCANTRON

Mark Reflex® EM-209133-2:654321

HC03

For Office Use Only

<input type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
<input type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
<input type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
<input type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
<input type="checkbox"/>	0	1	2	3	4	5	6	7	8	9



APPENDIX C

FACILITIES WITH CONTACT INFORMATION FOR LESS THAN 90% OF RESIDENTS

Facilities with contact information for fewer than 90% of residents

FID	Facility Name	# of Residents	# of PRP	Residents with PRP
120	GALTIER HEALTH CENTER	100	13	13.00%
96	ELLIOT CARE HOME	15	2	13.33%
131	GRAND AVENUE REST HOME	20	5	25.00%
346	SOUTHSIDE CARE CENTER	16	4	25.00%
60	GOLDEN LIVING CENTER-CHATEAU	65	17	26.15%
111	FAIRVIEW UNIVERSITY TRANSITIONAL SERVICES	23	7	30.43%
307	ROSE OF SHARON MANOR	51	21	41.18%
329	SAINT OLAF RESIDENCE	67	31	46.27%
302	RICHFIELD HEALTH CENTER	105	49	46.67%
358	COVENIRE CARE COLONY	14	7	50.00%
156	HERITAGE LIVING CENTER	61	31	50.82%
41	BIRCHWOOD HEALTH CARE CENTER	98	51	52.04%
269	PARK HEALTH & REHABILITATION CENTER	64	35	54.69%
52	CAMDEN CARE CENTER	84	47	55.95%
390	THE VILLA AT SAINT LOUIS PARK	66	38	57.58%
36	BETHEL HEALTHCARE COMMUNITY	97	58	59.79%
385	WARROAD CARE CENTER	45	27	60.00%
227	MAPLEWOOD CARE CENTER	131	81	61.83%
168	GOLDEN LIVING CENTER-HOPKINS	118	73	61.86%
189	LAKE MINNETONKA CARE CENTER	21	13	61.90%
382	GOLDEN LIVING CENTER-WABASSO	32	20	62.50%
256	BIGFORK VALLEY COMMUNITIES	40	26	65.00%
188	SAINT ELIGIUS HEALTH CENTER	64	42	65.63%
305	ROBBINSDALE REHAB & CARE CENTER	72	48	66.67%
22	BARRETT CARE CENTER	31	21	67.74%
376	VIEWCREST HEALTH CENTER	87	59	67.82%
33	GOOD SAMARITAN SOCIETY-BETHANY	119	82	68.91%
363	GOLDEN VALLEY HEALTH & REHAB	155	107	69.03%
182	KITTSOON MEMORIAL HEALTHCARE CENTER	65	45	69.23%
201	LAKEWOOD CARE CENTER	33	23	69.70%
140	GREEN PINE ACRES NURSING HOME	63	44	69.84%
142	CORNERSTONE NURSING & REHAB CENTER	40	28	70.00%
170	FARIBAULT CARE CENTER	37	26	70.27%
339	SHOLOM HOME EAST	101	71	70.30%
10	THE HOMESTEAD AT ANOKA	112	79	70.54%
68	COLONIAL MANOR NURSING HOME	34	24	70.59%
265	GOLDEN LIVING CENTER-OLIVIA	48	34	70.83%
216	GOLDEN LIVING CENTER-LYNNHURST	69	49	71.01%

FID	Facility Name	# of Residents	# of PRP	Residents with PRP
101	EVELETH HOSPITAL	21	15	71.43%
298	REDEEMER RESIDENCE	126	90	71.43%
95	ELIM REHAB & NURSING HOME OF WATERTOWN	49	35	71.43%
133	GRAND VILLAGE	116	83	71.55%
158	HIGHLAND CHATEAU HEALTH CARE CENTER	60	43	71.67%
253	NEW BRIGHTON CARE CENTER	50	36	72.00%
306	GOLDEN LIVING CENTER-ROCHESTER WEST	47	34	72.34%
357	TEXAS TERRACE CARE CENTER	88	64	72.73%
277	PELICAN VALLEY HEALTH CENTER	34	25	73.53%
71	COMMUNITY MEMORIAL HOME AT OSAKIS	42	31	73.81%
244	MISSION NURSING HOME	89	66	74.16%
404	THE GABLES AT BOUTWELLS LANDING	97	72	74.23%
29	BENEDICTINE HEALTH CENTER OF MINNEAPOLIS	90	67	74.44%
40	BIRCHWOOD CARE HOME	59	44	74.58%
103	EVERGREEN TERRACE	79	59	74.68%
49	BYWOOD EAST HEALTH CARE	95	71	74.74%
174	GOOD SAMARITAN SOCIETY-INVER GROVE	48	36	75.00%
67	COKATO MANOR	48	36	75.00%
42	GOLDEN LIVING CENTER-BLOOMINGTON	68	51	75.00%
212	LUTHERAN CARE CENTER	49	37	75.51%
70	GOOD SAMARITAN SOCIETY-COMFORCARE	41	31	75.61%
252	NEILSON PLACE	78	59	75.64%
320	GOLDEN LIVING CENTER-ST. LOUIS PARK	193	146	75.65%
45	BROWNS VALLEY HEALTH CENTER	37	28	75.68%
337	SAUER HEALTH CARE	66	50	75.76%
386	GOOD SAMARITAN SOCIETY-WATERVILLE	29	22	75.86%
308	LIFECARE ROSEAU MANOR	54	41	75.93%
50	CALEDONIA CARE & REHAB	50	38	76.00%
247	MOTHER OF MERCY CAMPUS OF CARE	76	58	76.32%
171	OWATONNA CARE CENTER	38	29	76.32%
62	CHRIS JENSEN HEALTH & REHAB CENTER	167	128	76.65%
210	LUTHER HAVEN	90	69	76.67%
274	PARKVIEW MANOR NURSING HOME	30	23	76.67%
65	GOOD SAMARITAN SOCIETY-CLEARBROOK	39	30	76.92%
185	GOLDEN LIVING CENTER-LACRESCENT	39	30	76.92%
116	FOLEY HEALTH CARE, INC.	78	60	76.92%
72	SUNNYSIDE HEALTH CARE CENTER	52	40	76.92%
73	COOK COMMUNITY HOSPITAL C&NC UNIT	26	20	76.92%
141	LIFECARE GREENBUSH MANOR	39	30	76.92%

FID	Facility Name	# of Residents	# of PRP	Residents with PRP
162	GOLDEN LIVING CENTER-RUSH CITY	44	34	77.27%
19	AUGUSTANA HEALTH CARE CENTER OF HASTINGS	75	58	77.33%
365	TRIMONT HEATH CARE CENTER	31	24	77.42%
364	HEALTH & REHAB OF NEW BRIGHTON	76	59	77.63%
315	SAINT ELIZABETH HOSPITAL & NURSING HOME	94	73	77.66%
181	KENYON SUNSET HOME	27	21	77.78%
368	TWEETEN LUTHERAN HEALTHCARE CENTER	45	35	77.78%
89	EBENEZER CARE CENTER	126	98	77.78%
85	GOLDEN LIVING CENTER-DELANO	45	35	77.78%
75	CORNERSTONE VILLA	41	32	78.05%
57	CENTRACARE HEALTH SYSTEM-PINE VILLA	73	57	78.08%
5	GOOD SAMARITAN SOCIETY-AMBASSADOR	78	61	78.21%
77	COURAGE RESIDENCE	37	29	78.38%
400	GOLDEN LIVING CENTER-WALKER	28	22	78.57%
13	GOOD SAMARITAN SOCIETY-ARLINGTON	28	22	78.57%
48	HARMONY RIVER LIVING CENTER	112	88	78.57%
230	PARMLY LIFEPOINTES	89	70	78.65%
192	GOLDEN LIVING CENTER-LAKE RIDGE	141	111	78.72%
139	GREEN LEA SENIOR LIVING	47	37	78.72%
195	LAKESHORE LUTHERAN HOME	57	45	78.95%
279	PIERZ VILLA	43	34	79.07%
208	LITTLEFORK MEDICAL CENTER	48	38	79.17%
295	PROVIDENCE PLACE	168	133	79.17%
100	EPISCOPAL CHURCH HOME OF MINNESOTA	125	99	79.20%
148	HAYES RESIDENCE	34	27	79.41%
348	SPRING VALLEY CARE CENTER	49	39	79.59%
206	GOLDEN LIVING CENTER-LINDEN	59	47	79.66%
17	AUBURN HOME IN WACONIA	30	24	80.00%
151	CERENITY CARE CENTER ON HUMBOLDT	115	92	80.00%
21	CLAYCO CARE CENTER, INC.	25	20	80.00%
300	RENVILLA NURSING HOME	52	42	80.77%
134	GRACEPOINTE CROSSING GABLES WEST	120	97	80.83%
217	GOLDEN LIVING CENTER-LYNWOOD	47	38	80.85%
93	ELIM CARE & REHAB CENTER OF MILACA	84	68	80.95%
28	BENEDICTINE HEALTH CENTER AT INNSBRUCK	102	83	81.37%
74	COOK COUNTY NORTH SHORE HOSPITAL & CARE CENTER	33	27	81.82%
157	HERITAGE MANOR HEALTH CENTER	77	63	81.82%
24	BAYSHORE HEALTH CENTER-RULE 50 AND 80	128	105	82.03%

FID	Facility Name	# of Residents	# of PRP	Residents with PRP
229	MARANATHA SENIOR LIVING COMMUNITY	73	60	82.19%
11	AUGUSTANA HEALTH CARE CENTER OF APPLE VALLEY	158	130	82.28%
296	RAMSEY COUNTY CARE CENTER	170	140	82.35%
132	GRAND MEADOW HEALTHCARE CENTER	34	28	82.35%
138	ECUMEN NORTH BRANCH	58	48	82.76%
97	BOUNDARY WATERS CARE CENTER	29	24	82.76%
18	AUGUSTANA CHAPEL VIEW CARE CENTER	99	82	82.83%
39	GOLDEN LIVING CENTER-ROCHESTER EAST	111	92	82.88%
130	ESSENTIA HEALTH GRACE HOME	41	34	82.93%
393	GOLDEN LIVING CENTER-WHITEWATER	53	44	83.02%
214	TRUMAN SENIOR LIVING	48	40	83.33%
6	RED WING HEALTH CARE CENTER-RULE 80 AND 50	120	100	83.33%
288	GOOD SAMARITAN SOCIETY-PLEASANT VIEW	54	45	83.33%
167	ESSENTIA HEALTH HOMESTEAD	30	25	83.33%
169	GOOD SAMARITAN SOCIETY-HOWARD LAKE	30	25	83.33%
86	DIVINE PROVIDENCE COMMUNITY HOME	55	46	83.64%
16	AUBURN MANOR	55	46	83.64%
2	AFTENRO HOME	37	31	83.78%
321	SAINT LUCAS HEALTH CARE COMMUNITY	74	62	83.78%
125	GLENWOOD VILLAGE CARE CENTER	62	52	83.87%
107	FAIRFAX COMMUNITY HOME	31	26	83.87%
143	GUARDIAN ANGELS CARE CENTER	118	99	83.90%
152	CERENITY CARE CENTER-MARIAN OF SAINT PAUL	75	63	84.00%
135	GOOD SAMARITAN SOCIETY-GRANDVIEW	25	21	84.00%
228	GOOD SAMARITAN SOCIETY-MAPLEWOOD	75	63	84.00%
31	THE VILLA AT OSSEO	94	79	84.04%
112	GOOD SAMARITAN SOCIETY-FALLS	44	37	84.09%
401	ZUMBROTA HEALTH SERVICES	38	32	84.21%
334	SAINT WILLIAM'S LIVING CENTER	51	43	84.31%
234	MCINTOSH SENIOR LIVING	45	38	84.44%
374	VALLEY VIEW MANOR	45	38	84.44%
249	MOUNT OLIVET HOME	90	76	84.44%
104	GOLDEN LIVING CENTER-EXCELSIOR	45	38	84.44%
59	CENTRAL TODD COUNTY CARE CENTER	58	49	84.48%
165	SAINT BRIGID'S AT HI-PARK	52	44	84.62%
330	SAINT OTTO'S CARE CENTER	91	77	84.62%
78	CREST VIEW LUTHERAN HOME	118	100	84.75%

FID	Facility Name	# of Residents	# of PRP	Residents with PRP
176	JANESVILLE NURSING HOME	33	28	84.85%
20	AUGUSTANA HEALTH CARE CENTER OF MINNEAPOLIS	245	208	84.90%
55	CATHOLIC ELDERCARE ON MAIN	146	124	84.93%
56	KODA LIVING COMMUNITY	73	62	84.93%
203	GUARDIAN ANGELS HEALTH & REHAB CENTER	87	74	85.06%
53	CAMILIA ROSE CARE CENTER	81	69	85.19%
326	ESSENTIA HEALTH SAINT MARY'S	81	69	85.19%
311	SAINT ANNE EXTENDED HEALTHCARE	109	93	85.32%
232	MARTIN LUTHER CARE CENTER	130	111	85.38%
391	GOOD SAMARITAN SOCIETY-PINE RIVER	55	47	85.45%
98	EMMANUEL LUTHERAN NURSING HOME	83	71	85.54%
30	BENEDICTINE LIVING COMMUNITY OF SAINT PETER	63	54	85.71%
350	STEWARTVILLE CARE CENTER	77	66	85.71%
197	GOOD SAMARITAN SOCIETY-GLENWOOD LAKEVIEW	28	24	85.71%
117	FRANCISCAN HEALTH CENTER	42	36	85.71%
220	MAHNOMEN HOSPITAL & NURSING CENTER	35	30	85.71%
23	GOOD SAMARITAN SOCIETY-BATTLE LAKE	49	42	85.71%
58	CENTRAL HEALTH CARE OF LECENTER	35	30	85.71%
155	GOLDEN LIVING CENTER-HENNING	28	24	85.71%
64	CLARKFIELD CARE CENTER	35	30	85.71%
38	BETHESDA PLEASANT VIEW	112	96	85.71%
239	MINNEOTA MANOR HEALTH CARE CENTER	63	54	85.71%
218	MADISON LUTHERAN HOME	63	54	85.71%
223	PATHSTONE LIVING	64	55	85.94%
281	PINE HAVEN CARE CENTER	57	49	85.96%
34	BETHANY HOME	79	68	86.08%
196	LAKESIDE MEDICAL CENTER	36	31	86.11%
254	NEW HARMONY CARE CENTER	72	62	86.11%
209	CENTRACARE HEALTH-LONG PRAIRIE	65	56	86.15%
293	PRESBYTERIAN HOMES OF LAKE MINNETONKA	124	107	86.29%
246	GOLDEN LIVING CENTER-MOORHEAD	73	63	86.30%
340	SHOLOM HOME WEST	161	139	86.34%
266	OSTRANDER NURSING HOME	22	19	86.36%
4	GOOD SAMARITAN SOCIETY-ALBERT LEA	103	89	86.41%
370	GOLDEN LIVING CENTER-TWIN RIVERS	52	45	86.54%
109	FAIRVIEW CARE CENTER	52	45	86.54%
106	FAIR OAKS LODGE	67	58	86.57%

FID	Facility Name	# of Residents	# of PRP	Residents with PRP
144	HALSTAD LIVING CENTER	30	26	86.67%
92	ELDER'S HOME	45	39	86.67%
378	SAINT CLARE LIVING COMMUNITY OF MORA	53	46	86.79%
79	EVANSVILLE CARE CENTER	38	33	86.84%
27	BENEDICTINE HEALTH CENTER	114	99	86.84%
362	TRAVERSE CARE CENTER	46	40	86.96%
128	GOOD SHEPHERD LUTHERAN HOME	69	60	86.96%
324	BENEDICTINE LIVING COMMUNITY OF WINSTED	54	47	87.04%
81	CRYSTAL CARE CENTER-VOLUNTEERS OF AMERICA	116	101	87.07%
219	MADONNA TOWERS OF ROCHESTER	62	54	87.10%
224	MAPLE LAWN NURSING HOME	55	48	87.27%
383	GOOD SAMARITAN SOCIETY-WACONIA & WESTVIEW ACRES	95	83	87.37%
387	AVERA MORNINGSIDE HEIGHTS CARE CENTER	64	56	87.50%
161	SAINT ISIDORE HEALTH CENTER OF GREENWOOD PRAIRIE	48	42	87.50%
328	CENTRACARE HEALTH SYSTEM-SAUK CENTRE	56	49	87.50%
333	SAINT THERESE HOME	243	213	87.65%
183	KNUTE NELSON	98	86	87.76%
250	GOOD SAMARITAN SOCIETY-MOUNTAIN LAKE	49	43	87.76%
258	NORTHFIELD CARE CENTER	41	36	87.80%
371	TWIN VALLEY LIVING CENTER	58	51	87.93%
342	GOLDEN LIVING CENTER-SLAYTON	50	44	88.00%
14	ADRIAN CARE CENTER	25	22	88.00%
91	EDINA CARE & REHABILITATION CENTER	102	90	88.24%
122	GIL-MOR MANOR	34	30	88.24%
336	SAMARITAN BETHANY HOME ON EIGHTH	173	153	88.44%
231	GOOD SAMARITAN SOCIETY-WARREN	52	46	88.46%
146	HAVEN HOMES OF MAPLE PLAIN	52	46	88.46%
46	THE VILLA AT BRYN MAWR	96	85	88.54%
355	GOOD SAMARITAN SOCIETY-SUNWOOD	35	31	88.57%
76	COUNTRY MANOR HEALTH & REHAB CENTER	158	140	88.61%
299	REGINA MEDICAL CENTER	53	47	88.68%
225	MAPLE MANOR HEALTH CARE & REHAB	62	55	88.71%
240	MINNESOTA MASONIC HOME CARE CENTER	205	182	88.78%
347	SOUTHVIEW ACRES HEALTH CARE CENTER, INC.	223	198	88.79%
90	EDGEBROOK CARE CENTER	54	48	88.89%
389	GOOD SAMARITAN SOCIETY-WESTBROOK	36	32	88.89%
43	BENEDICTINE CARE COMMUNITY	45	40	88.89%

FID	Facility Name	# of Residents	# of PRP	Residents with PRP
136	GRANITE FALLS MUNICIPAL HOSPITAL & MANOR	36	32	88.89%
137	GOLDEN LIVING CENTER-GREELEY	63	56	88.89%
63	CLARA CITY CARE CENTER	64	57	89.06%
384	WALKER METHODIST HEALTH CENTER	303	270	89.11%
160	HILLCREST HEALTH CARE CENTER	74	66	89.19%
397	WOODBURY HEALTH CARE CENTER	158	141	89.24%
235	GOLDEN LIVING CENTER-MEADOW LANE	56	50	89.29%
54	CASTLE RIDGE CARE CENTER	56	50	89.29%
270	PARK RIVER ESTATES CARE CENTER	94	84	89.36%
118	GOLDEN LIVING CENTER-FRANKLIN	38	34	89.47%



APPENDIX D

POTENTIAL FOR ABUSE, MISTREATMENT OR NEGLECT REPORT

Potential For Abuse, Mistreatment, Or Neglect Report

Please complete the information below and call Vital Research the same day

Facility: _____ City: _____ Facility ID: _____
(Name)

Date: _____ Interviewer ID: _____

Check one of the following:

☐ I saw the abuse, mistreatment, or neglect (Complete Section A)

☐ The Resident described the abuse, mistreatment, or neglect (Complete Section B)

SECTION A: Complete if you SAW the abuse, mistreatment or neglect

Floor and Unit: _____

Number of Staff Involved: _____ Number of Residents Involved: _____

Name(s) of Staff Involved (if known): _____

Name(s) of Residents Involved (*if known and only if the resident has provided consent*): _____

Name(s) of Others Who May Know About the Incident (*only if the resident has provided consent*): _____

Description of the Incident: _____

SECTION B: Complete if the Resident DESCRIBED the abuse, mistreatment or neglect

Resident Name and Room Number

(use resident name only if resident has provided consent to do so): _____

Description of the Problem (use the resident's words):

ASK THE RESIDENT:

When did this happen? _____

Who did this? _____

Who else knows this happened? _____

Do you want the Ombudsman's/OHFC phone number? ☐ Yes ☐ No

If yes, leave Ombudsman/OHFC contact card.

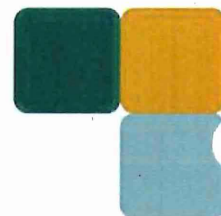
Please inform Resident what will happen with the information on this form:

You will notify the Vital Research Project Manager. You will also notify the local Common Entry Point so they can investigate the incident.

The section below is for Vital Research office use only

County: _____

CEP Notified: _____



APPENDIX E

VITAL ELINK SECURITY SPECIFICATIONS

Vital elink Security Specifications

The Vital Research E-Link Electronic Health Records Information System is a Secure Socket Layer Virtual Private Network (SSL/VPN) that provides secure sharing of confidential data among authorized users.

The E-Link system incorporates the following layers of security:

I. Secure Socket Layer

- E-Link employs the Secure Socket Layer (SSL) protocol to provide secure internet access to authorized users. All E-link elements are protected with SSL.
<https://elink.vitalresearch.com>
- SSL is the recommended protocol for internet-based Virtual Private Networks, by the National Institute of Standards and Technology of the United States (NIST),
see: [Special Publication 800-113, Guide to SSL VPNs, July 2008](#)

II. Authentication

- E-Link incorporates the SHA256 Secure Hashing Algorithm for user authentication. All passwords and session ID strings are encrypted with SHA256.
- SHA256 is the Secure Hash Signature Standard established by the National Institute of Standards and Technology of the United States (NIST),
see: [Federal Information Processing Standards Publication 180-2, August 1, 2002](#)
- E-Link includes IP verification, providing an additional layer of authentication.
- E-Link does not set HTTP Cookies. No session data is stored on the client side. All page views are dynamically created, and are not cached.
- E-Link users are automatically logged off the system after a period of inactivity.

III. Data Encryption

- All files stored on the system are encrypted with Advanced Encryption Standard AES-256, and only authorized users can access original, decrypted data.
- AES is the file encryption standard established by the National Institute of Standards and Technology of the United States (NIST),
see: [Federal Information Processing Standards Publication 197, November 26, 2001](#)



APPENDIX F

RESIDENT SURVEY

MARGIN OF ERROR NOT MET

Resident Survey: Margin of Error Not Met

The 2013 sample size formula, as in previous years, assumed $\pm 3.5\%$ margin of error at the total score level and $\pm 6.5\%$ margin of error at the dimension level. The formula determined how many interviews were required to meet the margin of error at each facility. The sampling plan called for interviewers to approach all eligible residents at facilities with 25 or fewer eligible residents. In 27 out of 369 facilities (7%), interviewers were unable to complete the required number of interviews. A return visit was scheduled to re-approach residents who were out of the facility, were unable to respond, or may have refused during the first visit.

When Dr. Arling developed the sampling plan, he anticipated that not all eligible residents could be interviewed at facilities with fewer than 25 eligible residents. Following the same procedures as in 2012, an *adjusted target* was calculated by multiplying the number of eligible residents by the estimated completion rate (89%). Of the 27 facilities that did not meet the margin of error, thirteen of them had 25 or fewer eligible residents. Of those thirteen, eight met the margin of error based on the *adjusted target* (eligible x completion rate). The following table provides details on the five facilities that met the *adjusted target*.

FID	Name of Facility	Number of Eligible Residents	Adjusted Target	Number of Interviews Completed	Comments
021	CLAYCO CARE CENTER, INC.	24	21	21	2 discharged, 1 deceased
073	COOK COMMUNITY HOSPITAL C&NC UNIT	23	20	20	1 refused, 2 unable
096	ELLIOT CARE HOME	15	13	14	1 refused
101	EVELETH HOSPITAL	19	17	17	2 unable to respond to questions
131	GRAND AVENUE REST HOME	20	18	19	1 out of facility when visited twice
166	GOOD SAMARITAN SOCIETY- HOFFMAN	24	21	23	1 deceased
263	OAKLAND PARK COMMUNITIES	25	22	23	1 deceased, 1 refusal
266	OSTRANDER NURSING HOME	21	19	19	1 unable, 1 other (deaf)

Nineteen facilities did not meet the requisite margin of error based on the sampling table or the *adjusted target*, if applicable (the facility had 25 or fewer residents). The following table provides details on those facilities that did not meet the margin of error.

FID	Name of Facility	Number of Eligible Residents	Adjusted Target	Number of Interviews Completed	Comments
014	ADRIAN CARE CENTER	22	20	17	1 hospitalized/ill, 3 refusals, 1 unable to respond to questions
022	BARRETT CARE CENTER	31	n/a	23	4 unable to respond to questions, 2 discharged, 1 refusal, 1 deceased, 1 other
097	BOUNDARY WATERS CARE CENTER	27	n/a	22	1 unable, 1 deceased, 3 short stay discharges
167	ESSENTIA HEALTH HOMESTEAD	30	n/a	20	6 unable, 1 other, 2 discharged, 1 refused
392	ESSENTIA HEALTH NORTHERN PINES MEDICAL CENTER	45	n/a	28	12 guardian refusals, 3 incompletes, 1 discharged, 1 unable
117	FRANCISCAN HEALTH CENTER	40	n/a	25	7 guardian refusals, 5 incompletes, 3 unable
155	GOLDEN LIVING CENTER-HENNING	27	n/a	18	2 incomplete, 5 unable, 1 asleep, 1 refusal
013	GOOD SAMARITAN SOCIETY-ARLINGTON	28	n/a	24	4 unable, 1 refused (note: 1 additional short stay resident was present date of data collection)
135	GOOD SAMARITAN SOCIETY-GRANDVIEW	24	21	18	Refused return visit
132	GRAND MEADOW HEALTHCARE CENTER	33	n/a	24	5 unable, 1 deceased, 3 short stay discharges
163	HILLCREST SENIOR LIVING	26	n/a	22	2 deceased, 1 unable to respond to questions, 1 other
181	KENYON SUNSET HOME	27	n/a	22	2 discharged, 1 deceased, 2 unable to respond to questions

FID	Name of Facility	Number of Eligible Residents	Adjusted Target	Number of Interviews Completed	Comments
189	LAKE MINNETONKA CARE CENTER	21	19	18	2 refused, 1 hospitalized
234	MCINTOSH SENIOR LIVING	41	n/a	26	4 guardian refusals, 3 incompletes, 4 refusals, 2 unable, 1 asleep, 1 language barrier
171	OWATONNA CARE CENTER	37	n/a	17	11 guardian refusals, 1 incomplete, 2 deceased, 3 discharged, 2 hospitalized/ill, 1 out of facility
272	PARKER OAKS COMMUNITIES, INC.	26	n/a	20	3 unable, 2 discharged/moved
273	PARKVIEW HOME	21	19	14	3 refused, 1 deceased, 1 unable, 2 short stay discharges
277	PELICAN VALLEY HEALTH CENTER	31	n/a	23	4 guardian refusals, 3 unable, 1 not interviewed (other)
303	RIVERVIEW CARE CENTER	19	17	15	2 unable, 2 other



APPENDIX G

FAMILY SURVEY

MARGIN OF ERROR NOT MET

Family Survey: Margin of Error Not Met

FID	Name of Facility	Total Number of PRPs	Target Completed Surveys	Actual Completed Surveys	Comments
13	GOOD SAMARITAN SOCIETY- ARLINGTON	22	19	17	<ul style="list-style-type: none"> • 1 wrong number • 4 voicemail
21	CLAYCO CARE CENTER, INC.	20	18	17	<ul style="list-style-type: none"> • 1 refusal • 2 voicemail
22	BARRETT CARE CENTER	21	18	17	<ul style="list-style-type: none"> • 3 voicemail • 1 will mail/mailed
40	BIRCHWOOD CARE HOME	44	28	22	<ul style="list-style-type: none"> • 6 voicemail • 9 duplicate name/numbers • 1 will mail/mailed • 6 wrong number
41	BIRCHWOOD HEALTH CARE CENTER	51	30	26	<ul style="list-style-type: none"> • 11 wrong number • 1 voicemail
51	GRACEPOINTE CROSSING GABLES EAST	64	35	34	<ul style="list-style-type: none"> • No phone numbers provided by facility
52	CAMDEN CARE CENTER	47	29	28	<ul style="list-style-type: none"> • 1 wrong number • 5 voicemail • 7 disconnected • 6 refusals
60	GOLDEN LIVING CENTER- CHATEAU	17	15	9	<ul style="list-style-type: none"> • 1 wrong number • 4 voicemail • 3 will mail/mailed
65	GOOD SAMARITAN SOCIETY- CLEARBROOK	30	25	23	<ul style="list-style-type: none"> • 2 voicemail • 2 disconnected • 3 refusals
74	COOK COUNTY NORTH SHORE HOSPITAL & CARE CENTER	27	23	22	<ul style="list-style-type: none"> • 3 disconnected • 2 refusals

FID	Name of Facility	Total Number of PRPs	Target Completed Surveys	Actual Completed Surveys	Comments
75	CORNERSTONE VILLA	32	25	24	<ul style="list-style-type: none"> • 3 voicemail • 4 disconnected • 1 refusal
77	COURAGE RESIDENCE	29	25	19	<ul style="list-style-type: none"> • 3 voicemail • 1 fax/modem • 2 refusal • 1 unavailable • 1 will mail/mailed • 2 wrong number
87	DIVINE PROVIDENCE HEALTH CENTER	21	18	17	<ul style="list-style-type: none"> • 3 voicemail • 1 refusal
97	BOUNDARY WATERS CARE CENTER	24	21	19	<ul style="list-style-type: none"> • 4 voicemail • 1 disconnected
101	EVELETH HOSPITAL	15	13	12	<ul style="list-style-type: none"> • 1 voicemail • 1 disconnected • 1 refusal
111	FAIRVIEW UNIVERSITY TRANSITIONAL SERVICES	7	6	3	<ul style="list-style-type: none"> • 1 voicemail • 3 refusal
135	GOOD SAMARITAN SOCIETY- GRANDVIEW	21	18	17	<ul style="list-style-type: none"> • 1 busy • 3 disconnected
144	HALSTAD LIVING CENTER	26	23	19	<ul style="list-style-type: none"> • 4 voicemail • 1 busy • 2 refusals
148	HAYES RESIDENCE	27	23	17	<ul style="list-style-type: none"> • 8 voicemail • 1 no answer • 1 wrong number
162	GOLDEN LIVING CENTER-RUSH CITY	34	25	22	<ul style="list-style-type: none"> • 8 voicemail • 2 refusals • 2 wrong number

FID	Name of Facility	Total Number of PRPs	Target Completed Surveys	Actual Completed Surveys	Comments
166	GOOD SAMARITAN SOCIETY- HOFFMAN	24	21	18	<ul style="list-style-type: none"> • 2 voicemail • 2 disconnected • 1 refusal • 1 call back
169	GOOD SAMARITAN SOCIETY- HOWARD LAKE	25	22	18	<ul style="list-style-type: none"> • 3 voicemail • 1 disconnected • 1 refusal • 1 call back • 1 will mail/ mailed
170	FARIBAULT CARE CENTER	26	23	16	<ul style="list-style-type: none"> • 4 voicemail • 2 refusals • 1 mail • 3 wrong number
174	GOOD SAMARITAN SOCIETY- INVER GROVE	36	25	22	<ul style="list-style-type: none"> • 7 voicemail • 1 no answer • 2 disconnected • 2 refusals • 1 unavailable • 1 wrong number
181	KENYON SUNSET HOME	21	18	15	<ul style="list-style-type: none"> • 4 voicemail • 2 refusals
201	LAKEWOOD CARE CENTER	23	20	16	<ul style="list-style-type: none"> • 1 voicemail • 2 no answer • 2 refusals • 2 wrong number
216	GOLDEN LIVING CENTER- LYNNHURST	49	30	27	<ul style="list-style-type: none"> • 17 voicemail • 1 busy • 2 disconnected • 1 refusal • 1 unavailable

FID	Name of Facility	Total Number of PRPs	Target Completed Surveys	Actual Completed Surveys	Comments
220	MAHNOMEN HOSPITAL & NURSING CENTER	30	25	20	<ul style="list-style-type: none"> • 2 voicemail • 1 busy • 2 refusals • 1 will mail/mailed • 1 wrong number • 3 no number
256	BIGFORK VALLEY COMMUNITIES	26	23	20	<ul style="list-style-type: none"> • 3 voicemail • 2 no answer • 1 disconnected
257	GOOD SAMARITAN SOCIETY- BLACKDUCK	29	25	24	<ul style="list-style-type: none"> • 1 voicemail • 3 refusals • 1 unavailable
269	PARK HEALTH & REHABILITATION CENTER	35	25	24	<ul style="list-style-type: none"> • 7 voicemail • 1 no answer • 2 disconnected • 1 refusal
272	PARKER OAKS COMMUNITIES, INC.	25	22	19	<ul style="list-style-type: none"> • 3 voicemail • 1 disconnected • 1 refusal • 1 will mail/mailed
273	PARKVIEW HOME	20	18	17	<ul style="list-style-type: none"> • 2 voicemail • 1 disconnected
302	RICHFIELD HEALTH CENTER	49	30	23	<ul style="list-style-type: none"> • 10 voicemail • 2 no answer • 4 disconnected • 3 refusals • 4 will mail/mailed • 3 wrong number

FID	Name of Facility	Total Number of PRPs	Target Completed Surveys	Actual Completed Surveys	Comments
303	RIVERVIEW CARE CENTER	21	18	15	<ul style="list-style-type: none"> • 4 voicemail • 1 busy • 1 refusal
306	GOLDEN LIVING CENTER- ROCHESTER WEST	34	25	24	<ul style="list-style-type: none"> • 2 disconnected • 7 refusals • 1 bad number
329	SAINT OLAF RESIDENCE	31	25	17	<ul style="list-style-type: none"> • 4 voicemail • 6 disconnected • 1 refusal • 3 wrong number
355	GOOD SAMARITAN SOCIETY- SUNWOOD	31	25	24	<ul style="list-style-type: none"> • 2 voicemail • 3 disconnected • 1 refusal • 1 will mail/mailed
382	GOLDEN LIVING CENTER- WABASSO	20	18	16	<ul style="list-style-type: none"> • 3 voicemail • 1 refusal
385	WARROAD CARE CENTER	27	23	21	<ul style="list-style-type: none"> • 3 voicemail • 1 refusal • 2 wrong number
386	GOOD SAMARITAN SOCIETY- WATERVILLE	22	19	17	<ul style="list-style-type: none"> • 1 voicemail • 3 refusals • 1 unavailable
389	GOOD SAMARITAN SOCIETY- WESTBROOK	32	25	19	<ul style="list-style-type: none"> • 5 voicemail • 1 disconnected • 5 refusal • 1 unavailable • 1 wrong number
396	WOOD DALE HOME	26	23	22	<ul style="list-style-type: none"> • 1 disconnected • 1 refusal • 2 no number

FID	Name of Facility	Total Number of PRPs	Target Completed Surveys	Actual Completed Surveys	Comments
400	GOLDEN LIVING CENTER- WALKER	22	19	14	<ul style="list-style-type: none"> • 3 voicemail • 1 disconnected • 3 refusals • 1 wrong number
402	JOURDAIN/PERPICH EXTENDED CARE CENTER	39	26	21	<ul style="list-style-type: none"> • 9 voicemail • 1 no answer • 4 disconnected • 1 fax/modem • 1 call back • 2 wrong number