STEP 3.1: Organize your implementation team

What is the purpose of this step?

The purpose of this step is to develop a specific working team, work plan, and timeline for your PHDS project, and to assemble the data needed to conduct your PHDS sampling and administration.

In this step you will:

☑ Build an internal and external team to implement the PHDS project.

☑ Assign specific roles to each team member.

☑ If Applicable: Hire a survey vendor.

Guidelines and Issues to Consider

☑ Determine which tasks will be completed internally and which will require external partners or vendors.

When building your internal and external PHDS teams to administer the survey, consider the following:

- Which parts of the process can you handle internally? Which parts will require hiring an external vendor?
- Do internal staff members have the skills/expertise as well as the time needed to complete the tasks that will be assigned to them?
- Do you have the resources to pay external vendors, if you need them? How will you do so?
- What is the status of the data systems you will use for sampling and gathering information? Will you need to contract with an external organization to gather population files?

☑ Immediately involve all leaders whose approval is needed to implement your PHDS project activities or to disseminate PHDS findings.

Obtaining the full support of senior leadership is essential to the success of your PHDS project. While it is possible to conduct the PHDS without the early involvement and support of senior leadership, they may key to community-wide distribution of the results. They also may help explain the value of the project to others, such as the chief of pediatrics, or approve contracts with external vendors.

☑ If you hire an external vendor, be sure to carefully craft a survey vendor request for proposal (RFP).

Now that you have determined which parts of the project will be contracted out, you will likely need to find a suitable survey vendor. Your organization may have specific rules and requirements for hiring a vendor. Depending on these requirements, hiring a vendor can be a lengthy process.

The process begins by writing an RFP (which may go by a different name in your health system). This is the document that informs potential bidders of exactly what work needs to be done, how it should be done, and when it needs to be finished. This document should be as detailed and specific as possible. Be sure to review the technical specifications before you write the RFP so that all necessary details are included. Also include management tasks such as regular progress meetings and/or interim reports, decision-making processes, and conflict resolution procedures. Make sure bidders understand exactly which costs they are responsible for, such as survey printing and mailing costs or report development and testing costs.

All deliverables that you expect from the vendor should be specified in the RFP. This includes interim deliverables, such as progress reports and interim completed PHDS survey data sets, as well as final deliverables, such as the data set and all documentation about the project. If you make changes later on, it will most likely cost you more than if they were included in the original RFP.

The RFP should provide potential bidders with information on the processes for bidding, evaluating, and selecting a vendor. It is important to include the following information in your RFP:

- The deadlines and format for proposals.
- Information about how bidders can ask questions or get clarification when preparing the proposals.
- The criteria used to score the proposals and select the vendor.
- Provisions for data security and confidentiality. Person-identifiable data is necessary <u>only</u> for the administration of the survey. Include provisions for the return or destruction of any data files with identifying information that were needed for the sampling and administration of the survey.

☑ If you hire an external vendor, carefully evaluate candidate survey vendors who respond to your RFP.

When evaluating survey vendors who respond to your RFP, the minimum scoring criteria should evaluate applicants on how well they demonstrate they have the following:

General characteristics

- An understanding of the overall project and the goal of the PHDS.
- A comprehensive response to all tasks described in the RFP.
- Sufficient and qualified staff to do the work.
- Sufficient facilities and resources.

PHDS-specific characteristics

- Experience and expertise in sampling, specifically:

    - Experience in obtaining population files from health systems and pulling samples for survey administration based on enrollment and health care utilization. Vendors with experience in calculating child-focused HEDIS measures should be preferred.

    - Experience in creating weighted, stratified sampling files based on information about the child's enrollment in a health system and child's age.

    - Experience pulling survey samples at the level or unit of analysis desired, such as health care provider or office.

- Experience in conducting parent-based surveys about the quality of care received, specifically:

    - Demonstrated ability to maximize response rates and produce acceptable telephone response rates. The telephone response rate is calculated by dividing the total number of completed phone interviews by all possible phone respondents. An acceptable response rate is 40 percent or higher.

The contract will be based on the project detailed in the RFP. Remember that the contracting process will be easier if your RFP contains specific details on the scope of the work, deliverables, and timelines. Consult your legal department to make sure all necessary legal language and requirements are included. This is most likely standardized for all contracts with external vendors.

In addition, ensure that the data collection and sharing are compliant with the Health Insurance Portability and Accountability Act (HIPAA), so that any public health information shared between organizations is strictly protected. Include provisions for the return or destruction of personal health information once the project is completed. Create a HIPAA Business Associate agreement between all parties who will have access to the data.

STEP 3.2: Create the sampling frame and analytic variable data sets

What is the purpose of this step?

In this step you will:

☑ Create the child-level sampling frame data set (specified in Step 2).

☑ Create the child-level analytic variable data set (specified in Step 2).

☑ If Applicable: Deliver the data sets to your survey vendor.

☑ If Applicable: Have the survey vendor pull your PHDS sample.

Guidelines and Issues to Consider

☑ Create the child-level sampling frame data set and analytic variable data set.

Step 2.2 provided a detailed description of the guidelines that should be used in identifying and selecting the sample.

To review, you (or your hired vendor) will do the following:

1) Identify eligible children for sampling.
2) Determine the minimum starting sample for each unit of analysis.
3) Stratify the starting sample by age and determine the minimum starting sample for each age group in each unit of analysis.

Once these steps have been completed, you are ready to randomly select the starting sample for the PHDS.

Additionally, for each child and unit of analysis represented in the starting sample you will identify the analytic information not based on the survey, as described in **Step 2.3.**

☑ If Applicable: Provide survey vendor with a sampling and analytic data set data dictionary **(Appendix 7).**

If you are providing a data set to a survey vendor to conduct the sampling, outline the specific variables you want to include in the child-level sampling and analytic data sets (e.g., utilization, enrollment, etc.), and/or obtain a data dictionary from your survey vendor before the PHDS sample is pulled. This ensures that all variables that need to be linked to the survey data set will be available to you. Once the sample is pulled, you may not be able to go back to get additional variables. In particular, be sure your vendor makes clear which stratified sampling groups each child belongs to (e.g., age, continuous enrollment, age group, and any state-specific sampling strategies).

Tip from the Field

You want to use the most updated information possible for sampling because a key eligibility criterion is whether the child had a visit or not. Children have seven well-child visits in their first year of life alone. Therefore, you want to make sure that your sampling is done as close as possible to when the survey is administered. Past users of the PHDS have conducted a “dry run” of the sampling to ensure that their sampling data specifications work and then have re-run the sampling at the latest time possible.

STEP 3.3: Plan and implement your survey administration process

What is the purpose of this step?

Establishing a specific work plan and realistic timeline is essential to the success of your PHDS project. Many expect instant results with a quality measurement initiative. However, it takes time to collect, analyze, and report the quality measurement data—and to have those data used in ways that lead to improvements in care. So make sure you set a reasonable timeline for the overall project. It is very important to allow enough time for the administration of the survey, analysis of the results, and reporting of development, testing and production.

This section provides detailed information about the technical requirements for implementing the PHDS. The timelines listed in the technical specifications below have been tested in the field to ensure the best response rates and highest-quality data. Compressing the timeline can compromise data quality and reliability.

In this step you will:

- ☑ Understand the key steps and timeline for administering the PHDS.
- ☑ Verify your work plan and delegation of tasks within your implementation team.
- ☑ Prepare to specify in a contract with an internal or external vendor/department how you would like the PHDS to be administered.

Guidelines and Issues to Consider

Important note: This manual is specific to the administration of the PHDS or ProPHDS by mail. Refer to Step 1: PHDS Tool and Resources for other manuals describing the implementation guidelines for administering the PHDS over the telephone or in a pediatric office.

☑ **Survey administration process**

This section contains a framework for a survey administration process that has been used by CAHMI and achieved acceptable response rates.

However, it is important to review survey administration processes used in your own health system with your own patients, and to identify strategies that have yielded the highest response rates.

The timing of the administration is also critical. Please consider the following:

1. **Holidays:** It is not recommended that you administer the survey during November and December as many parents are busy with the holidays.
2. **Seasons:** Summer can be a difficult time for survey administration as families are often on vacation. Higher response rates are often observed in the early fall and in late winter. However, avoid survey administration during the first week of school or during school holiday weeks.
3. **Other surveys in your health system:** Check to see if there are other surveys that may be sent to parents and try not to coincide with other survey mailings, such as the Consumer Assessment of Healthcare Providers and Systems (CAHPS).

There are six stages to administering the PHDS by mail:

- Stage # 1: Pre-notification letter
- Stage # 2: Toll-free number for parents
- Stage # 3: First mailing of cover letter and survey

- ➲ Stage # 4: Reminder postcard
- ➲ Stage # 5: Second mailing of cover letter and survey
- ➲ Stage # 6 (Optional): Second reminder postcard and/or telephone call

Stage #1: Pre-notification letter
For each selected child with a viable address, a pre-notification letter should be mailed. This letter should be available in all languages in which the survey will be administered. Pre-notification letters should be customized at the respondent level (e.g., "To the parent/guardian of [Child Name]") and should include the logo of your health system and the signature of the appropriate agency's executive or the leader of the units of analysis for which you are focused (e.g., the chief of pediatrics).

The pre-notification letter should:

- Provide the name of the target child for whom the survey should be completed.
- Explain that they were randomly chosen to assist you in providing information that would be useful in improving the health care of children.
- Explain that the parent or guardian who takes the child to the doctor most often should complete the survey.
- Specify how long the survey will take (See Table 2.3).
- Provide the toll-free number parents can use to call the vendor to ask questions about the study, verify the study's legitimacy, or request no further contact pertaining to the study.

Appendix 8 provides an example of a pre-notification letter.

Similar to the protocols developed for External Quality Review, the pre-notification letter is a strategy to maximize response rates, ensure confidentiality, describe how the results will benefit the respondent, and provide instructions on how to complete the survey.

Tip from the Field

Make sure that the United States Postal Service's "**Address Correction Service**" is utilized for all mailings. This will assure that you get accurate and complete information about the number of pre-notification letters that were not received by parents due to a bad address.

Stage #2: Toll-free number for parents to call with questions or to schedule an interview
Throughout the field phase, a live toll-free number should be maintained from 10:00 a.m. to 11:30 p.m. (local time) Monday through Saturday and 3:00 p.m. to 11:30 p.m. (local time) on Sunday for respondents. Calls outside these hours should be referred to voicemail.

Stage # 3: First mailing of cover letter and survey
The survey should be sent one week after the pre-notification letter is mailed. It should be accompanied by a cover letter that explains the project and includes the other details from the pre-notification letter. **Appendix 8** provides an example of a cover letter.

It is important the letterhead used includes a name/logo that parents recognize/value that parents recognize and value (e.g., the health system name).

Stage # 4: Reminder postcard
A reminder postcard should be sent to the entire starting sample. There are two options for the timing of the postcard reminder:

1. **One week** after the survey mailing. With this option, the postcard goes to the entire starting sample and thanks those who have already responded. This option saves the data analyst the time it would take to remove respondents from the data file used for the survey mailing. On the other hand, printing and mailing costs are higher because you are mailing to the entire starting sample.
2. **Two weeks** after the survey mailing. This allows parents more time to complete the survey, but may increase the chance that they have thrown it out. If you go with this option, remove the known respondents' names from the mailing, but still thank those who may have responded after you mailed the postcards. Also, provide parents with a toll-free number to use to request another survey.

Stage # 5: Second mailing of cover letter and survey
A second mailing of the cover letter and survey should be sent to the non-respondents at least one month after mailing the first survey.

Stage # 6 (Optional): Reminder Postcard and/or telephone call
If the response rate is low, then CAHMI recommends that you send another reminder to the parent.

You can use either a postcard OR you call the parent.

The telephone call should be used ONLY to remind the parent to send the completed survey back and find out if they need another one. CAHMI does not recommend that you administer the survey over the phone if you have conducted a majority of the survey administration by mail.[1] The telephone reminder is more costly than the postcard reminder; however, it can reach parents who might not have responded to the postcard.

Appendix 8 provides an example of the telephone script that can be used to remind parents to complete the survey.

Example 3.1: Survey Administration Timeline

Task	Date
Mail pre-notification letter	**Day 1**
Toll-free number for parents • Live toll-free number maintained from 10:00 a.m. to 11:30 p.m. (local time), Monday–Friday, and 11:00 a.m. to 11:30 p.m. on Saturday. • Calls outside these hours referred to voicemail.	**Day 1**
First mailing of cover letter and survey	**Day 8**
Reminder postcard Option 1: To the entire starting sample Option 2: To the non-respondents	 **Day 15** **Day 22**
Second mailing of cover letter and survey	**Day 36**
Reminder postcard or telephone call	**Day 50**

[1] As with all surveys, there is a mode effect on the survey results depending on whether it is completed by mail or telephone. Telephone-based surveys tend to systematically higher quality of care findings.

☑ **Data Confidentiality**

The recommended protocol for implementing the PHDS ensures the confidentiality of the data. If you contract the administration of the survey to an external vendor, make sure to include data confidentiality provisions in the RFP and the contract.

Be sure that the organization conducting the survey administration signs a HIPAA Business Associate agreement. Check with your legal department about HIPAA compliance. The HIPAA privacy provisions establish how covered entities must safeguard the confidentiality of patients' protected health information. Your legal department can help you determine whether you are a covered entity under HIPAA and whether your project adequately safeguards the confidentiality of patients' protected health information as specified in the HIPAA regulations.

☑ Institutional Review Board (IRB) Approval

You may be wondering if you need approval from an Institutional Review Board (IRB), especially if you do not have an IRB within your organization. While many people think that IRB reviews are only for research projects, IRB approval should be obtained before conducting the PHDS or any survey. IRBs ensure that consumer/patient rights are protected. The technical specifications in this manual are meant to address legal issues and allow for IRB approval. These specifications are based on past pilots of the PHDS that have undergone IRB review and been approved.

If your organization does not have an IRB, you can still have a review. Independent IRBs often review projects on a contractual basis; nearly every educational institution has an IRB.

STEP 3.4: Review additional related resources

As mentioned earlier, there are additional versions of the PHDS that can be administered via mail and/or in-office. For more information about how items from the PHDS have been administered, visit the CAHMI Web site at www.cahmi.org.

The Spanish version of the PHDS is also available at www.cahmi.org.

For more information on HIPAA privacy provisions or for a copy of the final law, go the Department of Health and Human Service's Web site at www.hhs.gov/ocr/hipaa.