We Honor	Veterans	State	Survey
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North Dakota January 2012

Demographic I	nformation
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Demographic information															
What is your organization's current enrollme	nt status in the	We H			ıpaig	gn?		,,,	0/					,,	0/
# %			#	%				#	%	,	r .1 24	1 1	1 1	#	%
I'm not familiar with $0 0\%$	Level 1 Pa	ırtner	0	0%			Level 3 Partner	0	0%	Ţ	I don t	know wl	we are	0	0%
Recruit 1 100%	Level 2 P	artne	r 0	0%			Level 4 Partner	0	0%		No	-	hope to ify soon		0%
What type of organization are you?					#	%								#	%
		Fre	ee-stand	ing hospice	0	0%				Hom	ehealti	h-based	hospice	0	0%
		Hos	pital-ba	sed hospice	1	100%				Other h	ealthca	re organ	nization	0	0%
Is your organization urban, rural, mixed or					#	%								#	%
highly rural?				Urban	0	0%							Mixed	0	0%
				Rural	1	100%						Highl	y Rural	0	0%
Does your organization serve Veterans in		#	%		#	%									
rural areas?	Yes	1	100%	No	0	0%									
Indicate VISN identified in service area		#	%		#	%									
	VISN19	0	NA	VISN23	0	NA									
Driving distance (miles) from your		#	%		#	%		#	%		#	%			
organization to nearest VA Medical Ctr	0 - 10	0	0%	11 - 20	0	0%	21 - 40	0	0%	>40	1	100%			
Driving distance (miles) to nearest VA		#	%		#	%		#	%		#	%			
outpatient clinic	0 - 10	0	0%	11 - 20	0	0%	21 - 40	0	0%	>40	1	100%			
Type of formal relationship, if any, you		#	%		#	%		#	%		#	%			
have with your local VA Medical Center	Contract	0	0%	PA	1	100%	None	0	0%	Other:	0	0%			
Does your organization participate in a		#	%		#	%									
Hospice-Veteran Partnership?	Yes	1	100%	No	0	0%	1	1		2	3		4		5
	MEAN						# of Resp	None		Little	Some		Fair amount		Great deal
How much emphasis do you feel your state	5.00						1	0		0	0		0		1
organization places on end-of-life care for								0%		0%	0%		0%		100%
Veterans?		1				:									

Positive (4+5)

KEY: Negative (1+2) Neutral (3)

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Veteran Emphasis Within the last two years, which, if any, of the following the state of the sta	owing has taken place with your organization?		1	2	3	4	5		
Have increased our Veteran caseload	MEAN 3.00	# of Resp 1	None 0 0%	Little 0 0%	Some 1 100%	Fair amount 0 0%	Great deal 0		
Have received referrals from VA staff	1.00	1	1 100%	0 0%	0 0%	0 0%	0 0%		
Have experienced increased awareness of the unique needs of Veterans	5.00	1	0 0%	0 0%	0 0%	0 0%	1 100%		
Have found it easier to work with our local VA Medical Center or outpatient clinic	4.00	1	0 0%	0 0%	0 0%	1 100%	0 0%		
VA/Community Interface How do you rate your organization's understanding	g in the following areas?	# of Resp	1 Very Poor	2 Poor	3 Fair	4 Good	5 Very Good		
Benefits to which Veterans are entitled	3.00	1	0 0%	0 0%	1 100%	0 0%	0 0%		
How to assist Veterans access their benefits	4.00	1	0 0%	0 0%	0 0%	1 100%	0 0%		
How to assist Veterans enroll in VA	4.00	1	0 0%	0 0%	0 0%	1 100%	0 0%		

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VA/Community Interface (cont.)		# of Resp	1 Very Poor	2 Poor	3 Fair	4 Good	5 Very Good
How to assist terminally ill Veterans with expedited enrollment in VA	3.00	1	0 0%	0 0%	1100%	0 0%	0 0%
The needs of Veterans by war, trauma, or population	3.00	1	0 0%	0 0%	1 100%	0 0%	0 0%
Practical use of the Military History Checklist	5.00	1	0 0%	0 0%	0 0%	0 0%	1 100%
Key aspects of the VA's national hospice and palliative care program	5.00	1	0 0%	0 0%	0 0%	0 0%	1 100%
Key aspects of the hospice and palliative care program(s) of the VA Medical Center(s) closest to you	3.00	1	0 0%	0 0%	1 100%	0 0%	0 0%
Benefits of community organizations partnering with VA to better serve Veterans	5.00	1	0 0%	0 0%	0 0%	0 0%	1 100%
Business Relationship How do you rate each of the following?				2	3	4	5
Your organization's ability to help Veterans access needed resources	MEAN 4.00	# of Resp	Very Poor 0 0%	Poor 0 0%	Fair 0 0%	Good 1 100%	Very Good 0 0%
Availability of information outlining tools and processes hospices need to know to do business with VA	4.00	1	0 0%	0 0%	0 0%	1 100%	0 0%

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Business Relationship (cont.)				1	2	3	4	5
	MEAN		# of Resp	Very Poor	Poor	Fair	Good	Very Good
Reliability and accuracy of contact information for the VA staff your organization needs to work with	5.00		1	0 0%	0 0%	0 0%	0 0%	1 100%
Approvals for VA-Paid hospice admissions to community hospice	4.00		1	0 0%	0 0%	0 0%	1 100%	0 0%
Approvals for VA-Paid hospice changes in levels of care	3.00		1	0 0%	0 0%	1 100%	0 0%	0 0%
Process for determining continued need for hospice services	3.00		1	0 0%	0 0%	1 100%	0 0%	0 0%
Reimbursement				1	2	3	4	5
	MEAN		# of Resp	Very Poor	Poor	Fair	Good	Very Good
Timeliness of VA reimbursement for VA- Paid hospice care	3.00		1	0	0 0%	1 100%	0 0%	0 0%
Access to reimbursement for all four levels of VA-Paid hospice care	2.00		1	0 0%	1 100%	0 0%	0 0%	0 0%
Your organization's experience in billing your local VA Medical Center	4.00		1	0 0%	0 0%	0 0%	1 100%	0 0%

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Continuity of Care			# of	1 Very	2	3	4	5 Very
	MEAN		Resp	Poor	Poor	Fair	Good	Good
Process to coordinate the transition of Veterans' care between your organization and your local VA Medical Center	3.00		1	0 0%	0 0%	1 100%	0 0%	0 0%
Process to coordinate VA-Paid admission to your organization's hospice inpatient unit	2.00		1	0 0%	1 100%	0 0%	0 0%	0 0%
Process to coordinate admission from the community to VA facility (inpatient HPC unit, acute care, long term care)	3.00		1	0 0%	0 0%	1 100%	0 0%	0 0%
Process to provide after-hour coverage for Veterans whose primary care is provided by a VA physician	3.00		1	0 0%	0 0%	1 100%	0 0%	0 0%