	We Honor Veterans State Survey	
Utah		January 2012
Demographic Information		

What is your organization's current enrollment status in the We I organization's current enrollment status in the We I organization with the We Honor Recruit 1 14% 14	Demographic Informat	ion																
Tm not familiar with the Wel Honor Recruit 1 14%	What is your organization's	cur	rent enrollme	nt status in the W	e Ho	onor Vet	teran's camp	oaigr	1?									
The We Honor 1 14%		#	%			#	%				#	%					#	%
What type of organization are you?		1	14%	Level 1 Pa	rtner	1	14%			Level 3 Partner	0	0%	I	don't k	now wł		0	0%
Solution Solution	Recruit	4	57%	Level 2 Pa	artne	r 1	14%			Level 4 Partner	0	0%		Not :		-	0	0%
Syour organization urban, rural, mixed or highly rural?	What type of organization a	re y	ou?					#									#	%
Is your organization urban, rural, mixed or highly rural?							•									-		
or highly rural?					Hos	spital-ba	sed hospice	1	14%				Other hed	althcar	e organ	iization	0	0%
Noisy our organization serve Veterans in rural areas?	Is your organization urban,	rur	al, mixed					#	%								#	%
Does your organization serve Veterans in rural areas?	or highly rural?							1										
rural areas? Yes 6 86% No 1 14% Indicate VISN identified in service area # % VISN19 1 100% Driving distance (miles) from your organization to nearest VA Medical Ctr 0-10 0 0% 11-20 0 0% 21-40 2 29% >40 5 71% Driving distance (miles) to nearest VA outpatient clinic 0-10 5 71% 11-20 1 14% Type of formal relationship, if any, you have with your local VA Medical Center Contract 3 60% PA 2 40% None 0 0% Other: 0 0% Does your organization participate in a							Rural	1	20%						Highl	y Rural	0	0%
Driving distance (miles) from your organization to nearest VA Medical Ctr # % # % # % 21-40 2 29% >40 5 71% Driving distance (miles) to nearest VA Medical Ctr # % # % 21-40 2 29% >40 5 71% Driving distance (miles) to nearest VA outpatient clinic # % # % 21-40 0 0 0% >40 1 14% Type of formal relationship, if any, you have with your local VA Medical Center # % # % # % # % # % # % # % %		e V	eterans in	Yes			No											
Driving distance (miles) from your organization to nearest VA Medical Ctr # % # % # % 21-40 2 29% >40 5 71% Driving distance (miles) to nearest VA Medical Ctr # % # % 21-40 2 29% >40 5 71% Driving distance (miles) to nearest VA outpatient clinic # % # % 21-40 0 0 0% >40 1 14% Type of formal relationship, if any, you have with your local VA Medical Center # % # % # % # % # % # % # % %	Indicate VICN identified in	~~ ~~			#	0/												
organization to nearest VA Medical Ctr 0 - 10 0 0% 11 - 20 0 0% 21 - 40 2 29% >40 5 71% Driving distance (miles) to nearest VA outpatient clinic # % # % # % # % # % # % 0 0 0% >40 1 14% 1 14% 1 14% 1 14% 1 14% 1 14% 1	indicate visiv identified in	SCI V	ice area	VISN19														
Organization to nearest VA Medical Ctr 0 - 10 0 0% 11 - 20 0 0% 21 - 40 2 29% >40 5 71% Driving distance (miles) to nearest VA outpatient clinic # % # % # % # % # % # % # % # % # % >40 1 14% Type of formal relationship, if any, you have with your local VA Medical Center # %	Driving distance (miles) from	m yo	our		#	%		#	%		#	%		#	%			
outpatient clinic 0 - 10 5 71% 11 - 20 1 14% 21 - 40 0 0% >40 1 14% Type of formal relationship, if any, you have with your local VA Medical Center # % # % # % # % # % Does your organization participate in a # % # % * * % * </td <td>_</td> <td>-</td> <td></td> <td>0 - 10</td> <td>0</td> <td>0%</td> <td>11 - 20</td> <td>0</td> <td>0%</td> <td>21 - 40</td> <td>2</td> <td>29%</td> <td>>40</td> <td>5</td> <td>71%</td> <td></td> <td></td> <td></td>	_	-		0 - 10	0	0%	11 - 20	0	0%	21 - 40	2	29%	>40	5	71%			
Type of formal relationship, if any, you	Driving distance (miles) to n	ear	est VA		#	%		#	%		#	%		#	%			
have with your local VA Medical Center Contract 3 60% PA 2 40% None 0 0% Other: 0 0% Does your organization participate in a # % # %	outpatient clinic			0 - 10	5	71%	11 - 20	1	14%	21 - 40	0	0%	>40	1	14%			
Does your organization participate in a # % # %	Type of formal relationship,	, if a	ıny, you		#	%		#	%		#	%		#	%			
	have with your local VA Me	edica	al Center	Contract	3	60%	PA	2	40%	None	0	0%	Other:	0	0%			
Hospice-Veteran Partnership? Yes 5 100% No 0 0% 1 2 3 4 5	Does your organization part	ticip	ate in a		#	%		#	%									
•	Hospice-Veteran Partnershi	ip?		Yes	5	100%	No	0	0%		1		2	3		4		5
# of Fair Great MEAN Resp None Little Some amount deal				MEAN							None		Little	Some				
How much emphasis do you feel your state 3.71 7 0 0 2 5 0 0 7 0 0 1 1 1 1 1 1 1 1 1 1 1	How much emphasis do vou	fee	l vour state							•								
organization places on end-of-life care for Veterans?	organization places on end-		-							,								

Positive (4+5)

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

	We Honor Veterans State	Survey					
J tah						Januar	y 2012
eteran Emphasis							
Vithin the last two years, which, if any, of the follo	owing has taken place with your organization?		1	2	3	4	5
	MEAN	# of	Mana	Tiulo	C - ma	Fair amount	Great deal
		Resp 5	None 0	Little 2	Some 2	amount 1	dear 0
ave increased our Veteran caseload	2.80		0%	40%	40%	20%	0%
	2.80	5	1	1	1	2	0
ave received referrals from VA staff	2.80		20%	20%	20%	40%	0%
		5	0	1	2	1	1
ave experienced increased awareness of e unique needs of Veterans	3.40		0%	20%	40%	20%	20%
e unique necus or veterans							
ave found it easier to work with our local	3.20	5	0	1	2	2	0
A Medical Center or outpatient clinic	3.20		0%	20%	40%	40%	0%
A /C							
A/Community Interface fow do you rate your organization's understandin	ng in the following areas?		1	2	3	4	5
on do you rate your organization of white states	g in the following areas.	# of	Very	-	Č	•	Very
	MEAN	Resp	Poor	Poor	Fair	Good	Good
enefits to which Veterans are entitled	3.40	5	0	1	2	1	1
enents to which veterans are endued			0%	20%	40%	20%	20%
		5	0	1	2	1	1
ow to assist Veterans access their enefits	3.40		0%	20%	40%	20%	20%
nems							
	240	5	0	1	2	1	1
ow to assist Veterans enroll in VA	3.40		0%	20%	40%	20%	20%

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VA/Community Interface (cont.)			1	2	3	4	5
		# of	Very	_			Very
		Resp	Poor	Poor	Fair	Good	Good
How to assist terminally ill Veterans with expedited enrollment in VA	3.20	5	0 0%	2 40%	1 20%	1 20%	1 20%
TD1 1 687 4 1 4	2.00	5	0	2	2	0	1
The needs of Veterans by war, trauma, or population	3.00		0%	40%	40%	0%	20%
Duratical was of the Militaur History	2.20	5	2	1	1	1	0
Practical use of the Military History Checklist	2.20		40%	20%	20%	20%	0%
Voy concets of the VA's notional bearing	2.50	4	0	2	2	0	0
Key aspects of the VA's national hospice and palliative care program	2.30		0%	50%	50%	0%	0%
Key aspects of the hospice and palliative	2.40	5	0	4	0	1	0
care program(s) of the VA Medical Center(s) closest to you	2.40		0%	80%	0%	20%	0%
Benefits of community organizations	2.60	5	0	3	1	1	0
partnering with VA to better serve Veterans	2.00		0%	60%	20%	20%	0%
Business Relationship							
How do you rate each of the following?		" C	1	2	3	4	5
	MEAN	# of Resp	Very Poor	Poor	Fair	Good	Very Good
\$7		5	0	3	0	1	1
Your organization's ability to help Veterans access needed resources	3.00		0%	60%	0%	20%	20%
Availability of information outlining tools	2.20	5	0	2	1	1	1
and processes hospices need to know to do business with VA	3.20		0%	40%	20%	20%	20%

	V	Ve Honor Veterans State Sur	rvey					
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Business Relationship (cont.)			# of	1 Very	2	3	4	5 Very
D. 19-1-114 A common of contact	MEAN	R	Resp	Poor	Poor 1	Fair 1	Good	Good
Reliability and accuracy of contact information for the VA staff your organization needs to work with	3.60		5	0 0%	1 20%	1 20%	2 40%	1 20%
Approvals for VA-Paid hospice admissions to community hospice	3.60		5	0 0%	1 20%	1 20%	2 40%	1 20%
Approvals for VA-Paid hospice changes in levels of care	3.60		5	0 0%	1 20%	1 20%	2 40%	1 20%
Process for determining continued need for hospice services	3.60		5	0 0%	1 20%	1 20%	2 40%	1 20%
Reimbursement			# of	1 Very	2	3	4	5 Very
	MEAN		# or Resp	Poor	Poor	Fair	Good	Very Good
Timeliness of VA reimbursement for VA- Paid hospice care	3.25		4	0 0%	1 25%	1 25%	2 50%	0 0%
Access to reimbursement for all four levels of VA-Paid hospice care	3.00		2	0 0%	0 0%	2 100%	0 0%	0 0%
Your organization's experience in billing your local VA Medical Center	3.75		4	0 0%	0 0%	2 50%	1 25%	1 25%

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Continuity of Care		# of	1 Very	2	3	4	5 Very			
Process to coordinate the transition of Veterans' care between your organization and your local VA Medical Center	MEAN 3.60	Resp 5	Poor 0 0%	Poor 1 20%	Fair 1 20%	Good 2 40%	Good 1 20%			
Process to coordinate VA-Paid admission to your organization's hospice inpatient unit	5.00	1	0 0%	0 0%	0 0%	0 0%	1 100%			
Process to coordinate admission from the community to VA facility (inpatient HPC unit, acute care, long term care)	4.00	3	0 0%	0 0%	1 33%	1 33%	1 33%			
Process to provide after-hour coverage for Veterans whose primary care is provided by a VA physician	3.50	4	0 0%	1 25%	1 25%	1 25%	1 25%			