

NYS Severe Sepsis and Septic Shock Survey 04/2015

Introduction

As described in regulation from 2013, New York State hospitals are required to collect, use and report quality measures related to the recognition and treatment of patients with severe sepsis and septic shock. In addition to reporting data sufficient to evaluate adherence to protocols, the submitted data permits the Department to develop risk-adjusted severe sepsis and septic shock mortality rates in consultation with expert stakeholders. NYSDOH regulation, reflecting definitions from the International Sepsis Definitions Conference, includes the following definitions:

Sepsis is defined as 'a proven or suspected infection accompanied by a systemic inflammatory response.'

Severe sepsis, for adults, is defined as 'sepsis plus at least one sign of hypoperfusion or organ dysfunction'; for pediatrics as 'sepsis plus one of the following: cardiovascular organ dysfunction or acute respiratory distress syndrome (ARDS) or two or more organ dysfunctions.'

Septic shock, for adults, is defined as 'severe sepsis with persistent hypotension or cardiovascular organ dysfunction despite adequate IV fluid resuscitation'; for pediatrics as 'severe sepsis and cardiovascular dysfunction despite adequate IV fluid resuscitation.'

This survey is intended to more fully understand and improve ongoing severe sepsis and septic shock adult and pediatric case identification and hospital reporting of such cases under this initiative.

There are two parts in this survey. The first part is for adult patients, and the second is for pediatrics. If your answers are the same for both adults and pediatrics, then you can fill out the first part, skip the second, and provide your contact information at the end of the survey.

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Your hospital name

* Please select your hospital name

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I. Adult Survey Questions 1/7

You must answer the following questions 1-7.

* 1. Which of the following options best describes your approach to finding cases for clinical data submission?

- Use administrative data (billing/SPARCS) only
- Use administrative data (billing/SPARCS) initially and then review for appropriateness based on clinical definitions
- Use prospective clinical severe sepsis/septic shock 'registry' or data base only
- Use prospective clinical severe sepsis/septic shock 'registry' initially and then search for 'missed' cases through administrative data
- Combination of administrative, prospective and clinical review
- Adults not treated in this facility

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I. Adult Survey Questions 2/7

* 2. How are cases presenting in the Emergency Department selected for reporting to the database? (please select all that apply)

- Administrative (billing) data
- Hospital derived system/program to capture cases
- Retrospective chart review
- Prospective chart review
- Cases are flagged by hospital staff (for example, case labeled "code sepsis")
- Adults not treated in this facility

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I. Adult Survey Questions 3/7

* 3. How are cases presenting during Inpatient Admission selected for reporting to the database? (please select all that apply)

- Administrative (billing) data
- Hospital derived system/program to capture cases
- Retrospective chart review
- Prospective chart review
- Cases are flagged by hospital staff (for example, case labeled "code sepsis")
- Adults not treated in this facility

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I. Adult Survey Questions 4/7

* 4. How are cases presenting in the ICU selected for reporting to the database? (please select all that apply)

- Administrative (billing) data
- Hospital derived system/program to capture cases
- Retrospective chart review
- Prospective chart review
- Cases are flagged by hospital staff (for example, case labeled "code sepsis")
- No ICU
- Adults not treated in this facility

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I. Adult Survey Questions 5/7

* 5. Do you currently compare or match the cases submitted to the sepsis data portal to cases reported as severe sepsis/septic shock to SPARCS?

- Yes
- No
- Adults not treated in this facility

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I. Adult Survey Questions 6/7

* 6. Has your approach for finding cases for reporting to the database changed among reporting quarters?

- Adults not treated in this facility
- No
- Yes. How ? Please Describe:

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I. Adult Survey Questions 7/7

* 7. Are all data elements needed for the Data Dictionary currently captured in an electronic system which could be extracted to meet the data submission requirement?

- Yes, 100% of the data elements can be extracted electronically
- Approximately 75% or greater data elements can be extracted electronically
- Approximately 50-75% of the elements can be extracted electronically
- Approximately 25-50% of the elements can be extracted electronically
- Less than 25% of the elements can be extracted electronically
- None, 0%
- Adults not treated in this facility

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II. Pediatric Survey Questions

* Do the same answers apply for Pediatrics and Adult ?

- Check this if your answers are the same as for adults. Your survey is complete.
Please insert contact name and email address at the end of the survey.
- Check this If your answers are different for adult versus pediatrics.
Please complete a separate pediatric survey below.

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II. Pediatric Survey Questions 1/7

1. Which of the following options best describes your approach to finding pediatric cases for clinical data submission?

- Use administrative data (billing/SPARCS) only
- Use administrative data (billing/SPARCS) initially and then review for appropriateness based on clinical definitions
- Use prospective clinical severe sepsis/septic shock 'registry' or data base only
- Use prospective clinical severe sepsis/septic shock 'registry' initially and then search for 'missed' cases through administrative data
- Combination of administrative, prospective and clinical review

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II. Pediatric Survey Questions 2/7

2. How are pediatric cases presenting in the Emergency Department selected for reporting to the database?
(please select all that apply)

- Administrative (billing) data
- Hospital derived system/program to capture cases
- Retrospective chart review
- Prospective chart review
- Cases are flagged by hospital staff (for example, case labeled "code sepsis")

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II. Pediatric Survey Questions 3/7

3. How are pediatric cases presenting during Inpatient Admission selected for reporting to the database?
(please select all that apply)

- Administrative (billing) data
- Hospital derived system/program to capture cases
- Retrospective chart review
- Prospective chart review
- Cases are flagged by hospital staff (for example, case labeled "code sepsis")

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II. Pediatric Survey Questions 4/7

4. How are pediatric cases presenting in the ICU selected for reporting to the database? (please select all that apply)

- Administrative (billing) data
- Hospital derived system/program to capture cases
- Retrospective chart review
- Prospective chart review
- Cases are flagged by hospital staff (for example, case labeled "code sepsis")

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II. Pediatric Survey Questions 5/7

5. Do you currently compare or match the pediatric cases submitted to the sepsis data portal to cases reported as severe sepsis/septic shock to SPARCS?

- Yes
- No

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II. Pediatric Survey Questions 6/7

6. Has your approach for finding pediatric cases for reporting to the database changed among reporting quarters?

- No
- Yes. How?

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II. Pediatric Survey Questions 7/7

7. Are all pediatric data elements needed for the Data Dictionary currently captured in an electronic system which could be extracted to meet the data submission requirement?

- Yes, 100%
- Approximately 75% or greater data elements can be extracted electronically
- Approximately 50-75% or greater data elements can be extracted electronically
- Approximately 25-50% or greater data elements can be extracted electronically
- Less than 25% of the data elements can be extracted electronically
- None, 0%

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Contact Information

Please enter your name and contact email address so that we may contact you if we need clarification on your responses or have additional communications regarding this survey.

* Name (first last)

* Email address

End of Survey

Thank you for your participation.