

Project
Extended coordinated medical care in nursing homes
(CoCare)

Questionnaire for nursing staff
2nd survey (follow-up)

Intervention group



Section of Health Care Research and Rehabilitation
Research

Instructions for completing the questionnaire

With the following questions, we'd like to know more about your work at your nursing home and how you experience the collaboration with the doctors that provide medical care for your facility.

Please answer these questions one after another in the sequence they appear on the questionnaire. **Please don't skip any questions.**

- ✓ You will answer most of the questions by checking a box. Please **check only one box per question.**
- ✓ **Please choose one of the options provided!** For some questions, you may need to fill in dates, numbers or text.
- ✓ If you feel like a question doesn't apply to you, **please check a box regardless.** Most of the time, one of the options provided will be an appropriate answer, e.g. "don't know" or "doesn't apply".
- ✓ A few questions will be very similar to one another, since this questionnaire consists of several shorter questionnaires. **Please answer all the questions regardless of repetition.**
- ✓ In case you need to correct an answer (i.e. you accidentally checked the wrong box), please do so by filling in the falsely checked box completely. You may now check the correct box:

| | | | | | | |
|---|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| Example question: | strongly agree | agree | agree somewhat | disagree somewhat | disagree | strongly disagree |
| <i>I actively participated in the discussion.</i> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Thank you for taking the time to participate in this survey!

Assessment of cooperation

The following questions concern the collaboration of all enrolled nursing staff and general practitioners/specialists involved in caring for nursing home residents. Please indicate to which extent the following statements apply to you.

Please refer your answers to the time **since CoCare has been implemented** at your facility.

| Please choose only <i>one</i> option per item. | | | | | | |
|--|--|--------------------------|--------------------------|--------------------------|--------------------------|---|
| | strongly disagree | disagree | agree | strongly agree | don't know | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 |
| | Questions 1 through 7 are adapted from the Internal Participation Scale (IPS): Körner, M., & Wirtz, M. A. (2013). Development and psychometric properties of a scale for measuring internal participation from a patient and health care professional perspective. <i>BMC health services research</i> , 13(1), 374. | | | | | 3 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7 |
| | 1 | 2 | 3 | 4 | 5 | |

The following questions concern the collaboration with nursing staff at the facility you provide medical care for. Please choose one of the response options and indicate to which extent the chosen option applies to you.

Please refer your answers to the time **since CoCare has been implemented** at your facility.

| | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------------------|---|
| very good | | | | | | | very poor | 8 |
| <input type="checkbox"/> | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |

| | | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------|---|
| very good | | | | | | very poor | don't know | 9 |
| <input type="checkbox"/> | | |
| 1 | 2 | 2 | 4 | 5 | 6 | 7 | | |
| 1 | | | | | | 7 | | |

| | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----|
| very much | | | | | very little | 10 |
| <input type="checkbox"/> | |
| 1 | | | | | 6 | |
| 1 | 2 | 3 | 4 | 5 | 6 | |

Questions 8 through 14 are adapted from a questionnaire assessing work satisfaction for nursing staff (Fragebogen zur Arbeitssituation von Pflegekräften; FAP):
Fischbeck, S., & Laubach, W. (2005). Arbeitssituation und Mitarbeiterzufriedenheit in einem Universitätsklinikum: Entwicklung von Messinstrumenten für ärztliches und pflegerisches Personal. *PPmP-Psychotherapie · Psychosomatik · Medizinische Psychologie*, 55(06), 305-314.

| | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----|
| very much | | | | | very little | 11 |
| <input type="checkbox"/> | |
| 1 | 2 | 3 | 4 | 5 | 6 | |
| 1 | 2 | 3 | 4 | 5 | 6 | |

very much **very little** 12

| | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | |
| 1 | 2 | 3 | 4 | 5 | 6 | |

absolutely sufficient **absolutely insufficient** 13

| | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | |
| 1 | 2 | 3 | 4 | 5 | 6 | |

always available **never available** 14

| | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
| 1 | 2 | 3 | 4 | 5 | 6 | |
| 1 | 2 | 3 | 4 | 5 | 6 | |

Project satisfaction

In the past few months, CoCare has introduced a number of measures to improve medical care at nursing home facilities. Please assess how useful those measures were to you and your nursing home with these following questions.

How useful was the consolidation of general practitioners into GP-teams?

- | | | | |
|--------------------------|---|--|----|
| <input type="checkbox"/> | 1 | Very useful | 15 |
| <input type="checkbox"/> | 2 | Useful | |
| <input type="checkbox"/> | 3 | Hardly useful | |
| <input type="checkbox"/> | 4 | Not useful at all | |
| <input type="checkbox"/> | 5 | To my knowledge, there were no GP-teams. | |

How useful did you find the weekly rounds with nursing staff and general practitioners?

- | | | | |
|--------------------------|---|--|----|
| <input type="checkbox"/> | 1 | Very useful | 16 |
| <input type="checkbox"/> | 2 | Useful | |
| <input type="checkbox"/> | 3 | Hardly useful | |
| <input type="checkbox"/> | 4 | Not useful at all | |
| <input type="checkbox"/> | 5 | To my knowledge, there were no weekly rounds with general practitioners and nursing staff. | |

How useful were the joint, quarterly rounds with specialists and nursing staff?

- | | | | |
|--------------------------|---|---|----|
| <input type="checkbox"/> | 1 | Very useful | 17 |
| <input type="checkbox"/> | 2 | Useful | |
| <input type="checkbox"/> | 3 | Hardly useful | |
| <input type="checkbox"/> | 4 | Not useful at all | |
| <input type="checkbox"/> | 5 | To my knowledge, there were no quarterly rounds with specialists and nursing staff. | |

How useful was the joint documentation in CoCare-Cockpit (patients' shared medical records)?

- ₁ Very useful 18
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ To my knowledge, there was no documentation in CoCare-Cockpit.

How useful did you find the quarterly meetings with nursing home coordinators and the GP-teams?

- ₁ Very useful 19
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ To my knowledge, no quarterly meetings were held.

How useful were case conferences with doctors and assigned nursing staff?

- ₁ Very useful 20
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ To my knowledge, no case conferences were held with doctors and assigned nursing staff, even though they might have been beneficial.
-
- ₆ Not applicable

How useful was the coordinated catheter management (insertion or change of suprapubic catheters at the facility, availability of portable ultrasound machines upon doctor's request)?

- ₁ Very useful 21
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ To my knowledge, there was no coordinated catheter management.

How useful was the coordinated medication management (regularly scheduled medication checks, interdisciplinary medication plans)?

- ₁ Very useful
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ To my knowledge, no coordinated medication management was implemented at the facility.
-

22

How useful was the extended availability of general practitioners by phone after office hours (9p.m. on weekdays)?

- ₁ Very useful
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ To my knowledge, availability wasn't extended.
-
- ₆ Not applicable
-

23

How useful were the CoCare training courses for nursing staff and doctors?

- ₁ Very useful
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ To my knowledge, no training courses were offered.
-

24

How useful were CoCare-recommended standard courses of treatment?

- ₁ Very useful
-
- ₂ Useful
-
- ₃ Hardly useful
-
- ₄ Not useful at all
-
- ₅ I don't know any CoCare-recommended standard courses of treatment.
-

25

How useful did you find the CoCare structured preventative measures targeting critical issues that often lead to hospitalization?

1

Very useful

26

2

Useful

3

Hardly useful

4

Not useful at all

5

To my knowledge, no CoCare structured preventative measures were implemented.

Changes in quality of care

The following questions ask you to assess the changes in the quality of care provided to nursing home residents that occurred due to the measures implemented by CoCare.

| Please choose only <i>one</i> option per item. | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----|
| | strongly disagree | disagree | agree | strongly agree | don't know | |
| Primary medical care has been improved by CoCare. | <input type="checkbox"/> | 27 |
| Cooperation between doctors and nursing staff concerning patient care has been improved by CoCare. | <input type="checkbox"/> | 28 |
| Specialized medical care has been improved by CoCare. | <input type="checkbox"/> | 29 |
| Organisation of rounds has been improved by CoCare. | <input type="checkbox"/> | 30 |
| Documentation of rounds has been improved by CoCare. | <input type="checkbox"/> | 31 |
| The implementation of doctor's orders has been improved by CoCare. | <input type="checkbox"/> | 32 |
| Preparation of rounds has been improved by CoCare. | <input type="checkbox"/> | 33 |
| | 1 | 2 | 3 | 4 | 5 | |

Personal information

When did you complete this questionnaire?

Date

34

Your age

years

35

Your gender

Male

1

Female

2

36

Which formal training or degree have you completed? (Check all that apply)

₁ Elderly care nurse

37

₂ Nurse

₃ Children's nurse

₄ Occupational therapist

₅ Other, please specify: _____

How many years have you worked at your facility?

₁ less than 2 years

38

₂ 2 to 5 years

₃ 6 to 10 years

₄ 11 to 15 years

₅ more than 15 years

Do you hold an executive or supervisory position at your facility?

₁ no

39

₂ yes, middle management

₃ yes, upper management

Please turn!

What shifts do you usually work? „Day shift” may include early morning or late shifts.

1

day shifts mostly or exclusively

40

2

overnight shifts mostly or exclusively

3

both day and overnight shifts

If you have any comments, questions or concerns, please provide them here:

Thank you for your support!