PARTNER Social Determinants of Health/Carrying Capacity Survey Questions

This document lists the PARTNER "SOCIAL DETERMINANTS OF HEALTH/CARRYING CAPACITY" survey. That is, the questions are specific to social determinants of health and networks working around carrying capacity. You can use this document as a template to review questions and make edits, before working on the online version of the survey. The wording here is suggested wording based on past surveys that the PARTNER team has developed on a variety of projects. We encourage you to modify it for your own community/cultural contexts.

How should you use this survey template? The entire survey is modifiable, although in some limited ways. You can use this template (in Word) to draft up your own language and customize question changes. If you follow the structure of this template, you will be able to fit changes into the online survey.

In what ways can I edit the survey? In the table below, the first column is the question number, the second column is the question text, the third column is the question response, and the last column explains what is modifiable and what is not. The ability to change the question text is available for almost every question, however the 'spirit' of the question must remain. That is, if the question is a multiple-choice question, then it should remain as a multiple-choice question. For example, question 4 must be a multiple choice, and question 5 will always ask the respondent to pick one from the list of response they picked in question 4. Question 6 and 7 are similar. Questions 8 and 9 can be any type of multiple-choice question. Question 10 is where respondents select their partners and the next eight questions refer back to the list partners select here. Questions 11 and 12 are relational questions and you can ask any question (single or multiple choice) you want to know about the network partnerships. Questions 13, 14, and 15 correspond to the value metrics and questions 16, 17, and 18 correspond to the trust metrics. For these questions you can only modify the definition of the metric to better fit your language but the metric itself and the scale cannot be modified. After question 18, any number of open-ended, single-choice or multiple-choice questions can follow. This template provides some example additional questions you can choose to include in your survey.

Any questions? Contact us at partnertool@visiblenetworklabs.com

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THIS TEXT IS THE DEFAULT CONSENT AND INSTRUCTIONS THAT IS AUTO-FILLED INTO THE PARTNER SURVEY. IT IS ALL MODIFIABLE.

Consent:
By starting the survey, you are agreeing to participate. Your participation is voluntary, and you can stop at any time. There are no known risks to participate in this survey. If you have questions about your participation in the survey, please reply to the email invitation you received, or contact the PARTNER team at partnertool@visiblenetworklabs.com.

Instructions:
Thank you for taking this survey. To begin, you will be asked to answer a few questions about your own organization. You will then be asked to answer questions about other organizations.

Answer all questions from the perspective of your organization, rather than yourself as an individual. Feel free to check with others in your organization for more information.

At any time, you can save the responses and continue the survey later. When complete, you can review your responses and modify them, if required.

Q#	Question Text	Question Response Options	Notes on how question can be modified in the PARTNER system
1	Your organization should be listed below. If it is not, please return to the original email you received inviting you to take this survey and click on the link included.		This question is not modified, rather it is based on the respondent list
2	What is your organization's mission?		This can be modified to any question where you elicit a short answer, short open-ended response, for example, "what is your motivation for joining?"

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3	How many years has your organization existed? Note: type numerals (e.g. 11, not eleven)		This can be modified to any question where you elicit a numerical value as a response, such as "how long have you been in your position?"
4	Please indicate which of the following types of services your <u>organization/program/department</u> provides for people *(select all that apply).*	1. Access to Care 2. Child Welfare 3. Disabilities Support 4. Domestic Violence Support 5. Early Childhood (including services for mothers/fathers, children, and childcare) 6. Education (K-12) 7. Elderly Support 8. Emergency Needs (shelter, clothing, etc.) 9. Equity (gender, race, and others) 10. Financial Assistance 11. Food Insecurity 12. Health/Healthcare 13. Higher Ed (including professional educational associations) 14. Homelessness Support/Prevention 15. Housing 16. Legal Matters 17. Mental/Behavioral Health 18. Nonprofit office facilitates 19. Nutrition & Exercise 20. Public Safety (military, police/fire dept.) 21. Quality of Life (general well-being) 22. Social Support & Guidance 23. Substance Abuse Support 24. Transportation 25. Veteran Support 26. Work/Employment Services 27. Other	The wording of this question can be modified to be customized to this network (this question is linked to Q5). Usually this is a question asking about what member orgs can or can potentially contribute to the network. The response options listed here are from our default survey, but you can modify these to match resources/activities that you hope the organizations will bring to the network.

5	What is your organization/program/department's primary service provided? *(select only one)*	Same response list as Q4	
6	When thinking about working with other organizations to connect individuals to services that address their unmet social needs, what outcomes does your organization hope to achieve? (select all that apply)	1. Better access to housing & utility services 2. Better community support 3. Better health education services/resources & health literacy 4. Easier access to food services 5. Improved ability to provide for self and family 6. Improved client experience 7. Improved communication 8. Improved resource sharing 9. Improved transportation services 10. Increased information sharing 11. Increased public awareness 12. New sources of data 13. Policy/ regulation changes 14. Reduced burden on caregivers 15. Reduced ER visits 16. Reduced hospital readmissions 17. Reduction of health disparities 18. Other	You can customize the wording of this question (this question is linked to Q7). Usually this is a question asking about outcomes achieved or potential outcomes to achieve. The response options can be edited, but will be the same for both Q 6 and Q 7.
7	What is the most important outcome to your organization? (select only one)	Same response list as Q6	Whatever responses someone chooses in Q 6 will populate as possible responses for Q7.
8	How successful do you think efforts to address unmet social needs through referrals from hospitals/ health systems to community organizations have been in this community?	1. Not Successful 2. Somewhat Successful 3. Successful 4. Very Successful 5. Completely Successful	This can be modified to any question where you elicit a single choice response.

			If this is a new network, you can find another question to ask here if you do not think this fits. You could ask what their potential role in the network could be or what level of involvement they could contribute.
9	What aspects of the referral process are working well in your community? *(select all that apply)*	1. Centralized referral point person 2. Centralized resources guide (i.e. 211, United Way Service Guide) 3. Coordinated entry 4. Data sharing 5. Discharge planning 6. Health care coordinator 7. Meetings to discuss service delivery/referrals process 8. Partnership with hospitals 9. Partnership with law enforcement 10. Partnerships with community based organizations 11. Referral follow-up 12. Screening for social needs 13. Screening protocols/assessments 14. Shared space/services hub building 15. Shared tracking system/database 16. Universal client releases 17. Use of case-manager 18. Use of intake specialist 19. Wraparound support services	This can be modified to any question where you elicit a multiple choice response.
10	The next set of questions take a few extra minutes– we are grateful for your time in answering them! These questions will provide details about your community's network of partnerships that are working to address unmet social needs. We will use this information to map these		Question can be modified but list of organizations to choose from will be based on the respondent list uploaded.

	partnerships and consider how to strengthen the network. From the list, select all organization/program/departments with which you have an established relationship (either formal or informal). In the following questions, you will be asked about your relationship with each organization you selected within the context of working together to address unmet social needs.		

The next set, questions 11-18 are relational questions, meaning that the respondent will answer each question about the organizations they selected in Q10.

Q11-12: Below are the relational questions, however there are several options for the content of these questions. At the end of this table are other options to choose from (in blue text), but all can be modified. In total, we recommend only choosing a total of 3 relational questions (q11, q12, and the 3rd option will become Q19).

Questions 13-18 are also relational, but instead of assessing the content and type of relationship between two partners, they assess the quality in terms of Value and Trust. Questions 13-15 are three measures of Value and questions 16-18 are three measures of Trust. The wording of Q13-18 can be slightly modified for your network, but the context cannot change. These are trademark PARTNER questions and usually yield the most useful data.

11	What areas/activities does your relationship with this partner entail? (select all that apply)	1. Advocacy/Policy 2. Client referrals 3. Client assessments 4. Data sharing 5. Developing standards/ procedures 6. Developing tools/ technologies 7. Funding 8. Information exchange 9. Joint programming 10. Meetings/events/trainings 11. Service delivery 12. Sharing resources (office space/staff)	You can modify the language/wording of the question and response options. However, the nature of this question has to be "relational" (something they are answering about their relationship with each partner they selected). See other examples at the end of this table.

		13. Technical assistance/training 14. Other	
12	What kinds of activities does your relationship with this <u>organization/program/department</u> entail? (Note: the response options increase by the level of collaboration.)	1. None 2. Cooperative Activities: Involves exchanging information, attending meetings together, and offering resources to partners. (Example: Informs other programs of Request for Proposals release.) 3. Coordinated Activities: Includes cooperative activities in addition to intentional efforts to enhance each other's capacity for the mutual benefit of programs. (Example: Separate granting programs utilizing shared administrative processes and forms for application review and selection.) 4. Integrated Activities: In addition to cooperative and coordinated activities, this is the act of using commonalities to create a unified center of knowledge and programming that supports work in related content areas. (Example: Developing and utilizing shared priorities for funding effective prevention strategies. Funding pools may be combined.)	You can modify the language/wording of the question and response options. However, the nature of this question has to be "relational" (something they are answering about their relationship with each partner they selected). See other examples at the end of this table.
13	To what extent does this <u>organization/program/department</u> have power and influence to support a referral network between hospitals/health systems and community organizations to address unmet social needs? *Power/Influence: The organization/program/department holds a prominent position in the community by being powerful, having influence, success as a change agent, and showing leadership.	1. Not at all 2. A small amount 3. A fair amount 4. A great deal	Questions 13-18 are based on validated scales to measure perceived value and trust among partners, so they generally need to remain as is, although we can customize for your network. You can modify the language of the definition and what this term means to your group. Please do not modify the response options as it is linked to the analysis tool/ calculations.

14	What is this organization/program/department's level of involvement in efforts to refer patients/clients between hospitals/health systems and community organizations to address unmet social needs? *Level of Involvement: The organization/program/department is strongly committed and active in the partnership and gets things done.	1. Not at all 2. A small amount 3. A fair amount 4. A great deal	
15	To what extent does this organization/program/department contribute resources toward efforts to refer patients/clients between hospitals/health systems and community organizations to address unmet social needs? *Contributing Resources: The organization/program/department brings resources to the partnership like funding, information, or other resources.	1. Not at all 2. A small amount 3. A fair amount 4. A great deal	
16	How reliable is the organization/program/department? *Reliable: This organization/program/department is reliable in terms of following through on commitments.	1. Not at all 1. A small amount 2. A fair amount 3. A great deal	
17	To what extent does the organization/program/department share a mission that seeks to build a referral network between hospitals/health systems and	1. Not at all 2. A small amount 3. A fair amount 4. A great deal	

	community organizations to address unmet social needs? *Mission Congruence: this organization shares a common vision of the end goal of what working together should accomplish.		
18	How open to discussion is this <u>organization/program/department</u>? *Open to Discussion: this organization/program/department is willing to engage in frank, open and civil discussion (especially when disagreement exists). The organization is willing to consider a variety of viewpoints and talk together (rather than at each other). You are able to communicate with this organization in an open, trusting manner.	1. Not at all 2. A small amount 3. A fair amount 4. A great deal	
19	This partnership has (select all that apply):	1. Been informative only (we only exchange information, knowledge about resources, etc.) 2. Improved my organization's capacity 3. Improved the capacity of the community to address unmet social needs 4. Led to an exchange of resources 5. Led to improved services or supports 6. Led to new funding opportunities 7. Led to new program development 8. Reduced duplication of services/processes 9. Not resulted in any outcomes 10. Not resulted in any outcomes, but we anticipate that it will	You can add any type of question here and after this point in the survey. If you added a 3rd relational question, you would do so here followed by any other question(s) you would like to ask.
	SURVEY END		
	OPTIONAL ADDITIONAL QUESTIONS YOU WILL NEED TO ADD TO THE SURVEY TRANSFERRED TO YOUR ACCOUNT.		

20	In order to inform the service provider network's future community engagements, can you suggest any other organizations in the system that were not included in the list of partners included in this survey?	Open-ended	
21	*We are interested in knowing how capable organizations feel they are to respond to increased demand for their services. The following questions help us better understand that.* To what degree is your organization able to quickly expand services, given your current circumstances?	1. Not at all 2. A small amount 3. A fair amount 4. A great deal	
22	Which factors have the greatest impact on your ability to continue to provide and sustain services for your clients? (please select up to 5)	1. Assessment/data on programs/outcomes 2. Board decision-making 3. Client needs 4. Collaborative capacity building opportunities 5. Consistent communication with partners 6. Cost-savings/financial efficiencies 7. Funding 8. Location of client population 9. Political environment 10. Referral Coordination 11. Season/time of year 12. Sharing office space/staff/resources 13. Staff capacity 14. Strong relationships with other organizations 15. Number of health system referrals to community organizations 16. Volunteer involvement	
23	What kinds of funding model/source(s) do you use to	1. Community benefit dollars 2. Contracts	

	sustain your organization? (select all that apply)	3. Donations 4. Events/fundraisers 5. Fee-for-service 6. Grants 7. Reimbursements 8. Sale of goods 9. Social enterprise 10. Taxes/funding through legislation 11. Other 12. N/A	
24	Which of the following types of data/information do you have available) to assess your organization's capacity to provide services to more people in your community? (select all that apply)	1. Appointment/service availability or wait times 2. Case load levels 3. Client outcomes from providing services (for example, health outcomes) 4. Data on services provided vs. demand 5. Financial data over time 6. Historical data on services provided 7. Needs assessment 8. Policy/procedure changes 9. Projections of client needs 10. Staffing levels 11. Waitlist/wait times 12. Other	
25	If applicable, how does your organization keep track of how many patients/clients are referred out/to you and if they receive services? We are interested in both your process and technology.	Open-ended	
26	Do you have any thoughts about what could improve the system of service referrals, tracking, and follow-through in your community?	Open-ended	

27	Do you have any additional comments or feedback?	Open-ended	