

DATA ELEMENT DICTIONARY

Introduction

This section of the manual describes the data elements required to calculate the rates of the Health Care Staffing Services (HCSS) performance measures. It includes information necessary for defining and formatting the data elements, as well as the allowable values for each data element. This information is intended to assist in processing the data elements for the measures.

It is of primary importance that all HCSS organizations using these measures gather and utilize the data elements as defined in this section. This will ensure that the data are standardized and comparable across organizations.

Data Element Dictionary Terms

Data Element Name:	A short phrase identifying the data element.
Collected For:	Identifies the measure(s) that utilize this data element.
Definition:	A detailed explanation of the data element.
Suggested Data Collection Question:	A suggested wording for a data element question in a data abstraction tool.
Format:	<ul style="list-style-type: none">• Type: type of information the data element contains (i.e., numeric, alphanumeric, date, decimal, or time)• Occurs: the number of times the data element occurs in a single episode of care record
Allowable Values:	A list of acceptable responses for this data element
Suggested Data Sources:	Source document from which data can be identified such as administrative or personnel records.
Guidelines for Abstraction:	Designed to assist abstractors in determining how a data element should be answered.

Alphabetical Data Element List

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Data Element Name:	Active Clinical Staff
Collected For:	HCSS-1, HCSS-2 & HCSS-3
Definition:	Clinical staff that worked assigned shifts/contracts during the designated reporting period (data collection month).
Suggested Data Collection Question:	Did the clinical staff member work at any time during the applicable reporting period?
Allowable Values:	<p>Yes Clinical staff member worked at any time during the designated reporting period (data collection month)</p> <p>No Clinical staff member did not work at any time during the designated reporting period (data collection month)</p>
Suggested Data Sources:	<ul style="list-style-type: none"> • Personnel files • Time cards • Time sheets • Work schedules
Guidelines for abstraction:	<ul style="list-style-type: none"> • Clinical staff that has worked any time during the designated reporting period should be included in this measure. • Clinical staff that has worked one or more hours during the designated reporting period should be included in this measure.

Data Element Name:	Background Check
Collected For:	HCSS-3
Definition:	Documentation in personnel file to verify that employee is not disqualified from patient contact due to criminal conviction or other conduct substantially related to patient care.
Suggested Data Collection Question:	Is there documentation in the personnel file that a background check has been done and does this documentation verify that the employee is not disqualified from patient contact due to criminal conviction or other conduct substantially related to patient care?
Allowable Values:	<p>Yes There is documentation in the personnel file demonstrating that the requirements of the minimum data set for this element have been met.</p> <p>No Documentation in the personnel file of the minimum data set requirements for this element is missing, incomplete, or expired.</p>
Suggested Data Sources:	<ul style="list-style-type: none"> • OIG on-line check, Sanctions search, License Look-Up, and other computer searches • Departments of professional registration and regulation • State licensing boards • State disciplinary boards • State/national background studies • State/national data bases
Guidelines for abstraction:	<p>For purposes of data collection for this measure, personnel file documents must meet requirements as specified by the minimum data set for background check. Proof of background check includes the following components:</p> <ul style="list-style-type: none"> • Verification of previous employers for new hires • Reference checks for new hires • Background check, including criminal records search, at the time of hire and rehire

Disqualifications from patient care may include:

- Health care related civil judgments in federal or state court
- Health care related criminal convictions in federal or state court
- Injunctions
- Actions taken by federal or state licensing and certification agencies, including revocations, reprimands, censures, probations, suspensions, any other loss of license, or the right to apply for or renew a license
- Exclusions from participation in federal or state health care programs

Data Element Name: Clinical Staff

Collected For: HCSS-1, HCSS-2 & HCSS-3

Definition: Healthcare staff that are directly involved in the provision of patient care or direct patient care as part of their assigned duties. Clinical Staff may include but are not limited to:

1. Licensed Independent Practitioners (LIPs)
2. Registered Nurses
3. Licensed Practical Nurses
4. Certified Nursing Aides and Assistants
5. Pharmacists
6. Allied health staff (see guidelines for abstraction)
7. Care companions
8. Sitters

Suggested Data Collection Question: Is the staff member directly involved in the provision of patient care or direction of patient care as part of his or her assigned duties?

Allowable Values: Yes Assigned duties include direct provision of patient care or direction of patient care.
No Assigned duties do not involve direct provision of patient care or direction of patient care.

Suggested Data Sources:

- Assignment sheets
- Personnel files
- Position description
- Work schedules

Guidelines for abstraction: Allied health staff are those clinical healthcare professions distinct from the medical doctor and nursing professions. They may include but are not limited to:

- Diagnostic Technicians supervisors
- Pharmacists
- Pharmacy Technicians
- Phlebotomists
- Physical Therapists
- Physical Therapy Assistants
- Physician Assistants
- Respiratory Therapists
- Speech Pathologists
- Surgical Assistants
- Hemodialysis
- Sonography
- Radiology
- Dieticians / Nutritionists
- Medical Technologists
- Medical Assistants
- Occupational Therapists
- Patient care managers/

Data Element Name:	Competency
Collected For:	HCSS-3
Definition:	Documentation in personnel file that the employee's clinical knowledge, experience, and capabilities are appropriate for assigned duties per the requirements of the minimum data set for competency.
Suggested Data Collection Question:	Are the necessary sub-components of the minimum data set for this element present in the personnel file?
Allowable Values:	<p>Yes There is documentation in the personnel file demonstrating that the requirements of the minimum data set for this element have been met.</p> <p>No Documentation in the personnel file of the minimum data set requirements for this element is missing, incomplete, or expired.</p>
Suggested Data Sources:	<ul style="list-style-type: none"> • Clinical skills checklists / competency assessments • Continuing education credits • Documents that verify training and education • References from previous employers
Guidelines for abstraction:	<p>Personnel file documents must meet requirements as specified by the minimum data set for competency. Proof of appropriate competency includes the following components:</p> <ul style="list-style-type: none"> • Verification of prior work experience in the profession assigned • Assessment of clinical skills and knowledge appropriate to the discipline and / or specialty at the time of hire / assignment, and annually thereafter • OSHA and HIPAA compliance training at the time of initial assignment then annually or as dictated per specific regulation • Current CPR card for those categories of employees required under state law to be certified in basic life support (e.g., RN, LPN / LVN, etc.)

Data Element Name: Do Not Return - Clinical

Collected For: HCSS-1

Definition: A type of complaint received from a HCSS client dissatisfied with some aspect of the quality of care or service provided to that organization by a clinical staff employee of the HCSS firm, which generates a request that the HCSS employee should not be assigned again to the healthcare organization or a specific unit / division within the organization or that a HCSS employee should not return to complete an assignment as originally contracted; a request for Do Not Return that includes a clinical reason, provided by the HCSS client to the HCSS firm, either verbally or in writing.

Suggested Data Collection Question: Has the client requested that a HCSS employee not return due to a clinical reason?

Allowable Values:

Yes A Do Not Return due to a clinical reason was requested by the client.

No There is no documentation of a Do Not Return due to a clinical reason, OR no reason for Do Not Return was given.

Notes for Abstraction:

- Documentation includes all forms of tracking reports of Do Not Return, including written communication from a HCSS client stating a clinical reason, electronic documentation from a HCSS client stating a clinical reason, or clinical reasons verbally communicated by the HCSS client to the HCSS firm and transcribed using an internal form or software databases.
- Follow-up with the client after verbal requests for Do Not Return may be necessary to clarify the nature of the complaint and identify a reason for the request. Information verbally communicated by the client should be documented by the HCSS firm and used to substantiate a reason for the Do Not Return request if possible.

- Clinical reasons for Do Not Return may be related but not limited to the following categories:
 - Clinical competency issues
 - Medication-related issues
 - Documentation-related issues
 - Patient abuse
 - Patient safety issues
 - Credentialing
 - Client or physician complaints about employee's clinical competence
 - Employee incidents related to clinical competence
 - Non-performance of clinical assignment /duties

Suggested Data Sources:

- Hard copy/electronic copy
- Personnel files
- Staff evaluation forms
- HCSS logs
- Client files
- Client satisfaction records
- Incident report forms
- Complaint forms
- Commercial and custom computer software
- Records / notes of telephone conversations and verbal discussion with clients about a request for Do Not Return

Guidelines for abstraction:

- Other terms and acronyms may be used to describe episodes / occurrences of Do Not Return
 - Do Not Rehire
 - Do Not Use (DNU)
- Termination of an employee by the HCSS firm is not a requirement for the designation of Do Not Return.
- Termination of an employee by the HCSS firm may occur after one or more requests for the employee to not return to one or more client organizations.
- The occurrence of Do Not Return is counted and included in the numerator population whether the firm decides to terminate the employee, or to remarket the employee to other clients following evaluation of the occurrence.

Data Element Name:	Do Not Return Occurrence Identifier
Collected For:	HCSS-1 & HCSS-2
Definition:	Identifier generated by the HCSS firm that uniquely identifies each occurrence of Do Not Return. The identifier is used in order to allow the HCSS firm to reference a particular client request for Do Not Return for purposes of data collection review.
Suggested Data Collection Question:	What is the unique identifier that distinguishes this client's specific request for Do Not Return from other occurrences / episodes involving the same HCSS employee or different clinical staff members?
Format:	Type: Alphanumeric Occurs: Once
Allowable Values:	Value greater than 0
Suggested Data Sources:	Unique HCSS generated number
Guidelines for abstraction:	<ul style="list-style-type: none"> • There is no specific requirement for identifier length. • All occurrences of Do Not Return used for data collection purposes of this measure must have an assigned identifier.

Data Element Name:	Do Not Return - Professional
Collected For:	HCSS-2
Definition:	A type of complaint received from a HCSS client dissatisfied with some aspect of the quality of care or service provided to that organization by a clinical staff employee of the HCSS firm, which generates a request that the HCSS employee should not be assigned again to the healthcare organization or a specific unit / division within the organization or that a HCSS employee should not return to complete an assignment as originally contracted; a request for Do Not Return that includes a professional reason, provided by the HCSS client to the HCSS firm, either verbally or in writing.
Suggested Data Collection Question:	Has the client requested that a HCSS employee not return due to a professional reason?
Allowable Values:	<p>Yes A Do Not Return due to a professional reason was requested by the client.</p> <p>No There is no documentation of a Do Not Return due to a professional reason, <u>OR</u> no reason for Do Not Return was given.</p>
Notes for Abstraction:	<ul style="list-style-type: none"> • Documentation includes all forms of tracking reports of Do Not Return, including written communication from a HCSS client stating a professional reason, electronic documentation from a HCSS client stating a professional reason, or professional reasons verbally communicated by the HCSS client to the HCSS firm and transcribed using an internal form or software databases. • Follow-up with the client after verbal requests for Do Not Return may be necessary to clarify the nature of the complaint and identify a reason for the request. Information verbally communicated by the client should be documented by the HCSS firm and used to substantiate a reason for the Do Not Return request if possible. • Professional reasons for Do Not Return may be

related but not limited to the following categories:

- Professional conduct issues
- Attendance
- Tardiness
- No shows
- Job abandonment
- Non-performance of job responsibilities
- Insubordination
- Rule violation
- Disturbed work unit balance
- Damaged business reputation
- Damaged property
- Customer service issues
- Client or physician complaints related to employee's professional conduct
- Employee incidents related to professional conduct
- Unlawful activities

Suggested Data Sources:

- Hard copy/electronic copy
- Personnel files
- Staff evaluation forms
- HCSS logs
- Client files
- Client satisfaction records
- Incident report forms
- Complaint forms
- Commercial and custom computer software
- Records / notes of telephone conversations and verbal discussion with clients about a request for Do Not Return

Guidelines for abstraction:

- Other terms and acronyms may be used to describe episodes / occurrences of Do Not Return
 - Do Not Rehire
 - Do Not Use (DNU)
- Termination of an employee by the HCSS firm is not a requirement for the designation of Do Not Return.
- Termination of an employee by the HCSS firm may occur after one or more requests for the employee to not return to one or more client organizations.
- The occurrence of Do Not Return is counted and included in the numerator population whether the firm decides to terminate the employee, or to remarket the employee to other clients following evaluation of the occurrence.

Data Element Name:	Health Status
Collected For:	HCSS-3
Definition:	Documentation in the personnel file that demonstrates that the employee has completed appropriate health screening per the requirements of the minimum data set for health status.
Suggested Data Collection Question:	Is there documentation in the personnel file that demonstrates that the employee has completed appropriate health screening requirements as specified by the minimum data set for this element?
Allowable Values:	<p>Yes There is documentation in the personnel file demonstrating that the requirements of the minimum data set for this element have been met.</p> <p>No Documentation in the personnel file of the minimum data set requirements for this element is missing, incomplete, or expired.</p>
Suggested Data Sources:	<ul style="list-style-type: none"> • Health records • History and physical records • Lab/test results
Guidelines for abstraction:	<p>It is recognized that health care screening requirements and immunization requirements may vary from state to state and among HCSS and their clients.</p> <p>For purposes of data collection for this measure, personnel file documents must meet requirements as specified by the minimum data set for health status, which include:</p> <ul style="list-style-type: none"> • TB test (PPD) annually, or • Documentation that employee previously tested positive (e.g., CXR report, physician note or physical exam)

Data Element Name:	Hours Worked
Collected For:	HCSS-1 & HCSS-2
Definition:	Total number of hours actually worked by active clinical staff during the reporting month.
Suggested Data Collection Question:	What is the total number of hours worked by my active clinical staff for the reporting month?
Format:	Type: Numeric Occurs: Once
Allowable Values:	Value greater than 0
Suggested Data Sources:	Time sheets Time cards Payroll logs Billing logs Financial reports Software programs and payroll databases
Guidelines for abstraction:	<ul style="list-style-type: none"> • Hours worked are not the same as “billable” hours. • Hours worked are not the same as “paid” hours. • Hours worked are not the same as “contracted” hours.

Data Element Name:	Job Appropriate Credentials
Collected For:	HCSS-3
Definition:	<p>Documentation in personnel file of:</p> <ul style="list-style-type: none"> • current licensure, registration, or certification in accordance with federal and state regulations, <u>or</u> • education and training that is consistent with applicable legal and regulatory requirements and HCSS position description.
Suggested Data Collection Question:	Are the necessary components of the minimum data set for this element present in the personnel file?
Allowable Values:	<p>Yes There is documentation in the personnel file demonstrating that the requirements of the minimum data set for this element have been met.</p> <p>No Documentation in the personnel file of the minimum data set requirements for this element is missing, incomplete, or expired.</p>
Suggested Data Sources:	<ul style="list-style-type: none"> • Current state license • Registration/certification documents • School diploma
Guidelines for abstraction:	<p>Proof of appropriate job credentials includes documentation in the personnel file of the following components:</p> <ul style="list-style-type: none"> • Current license for employees licensed / registered by state boards of Professional Regulation and Education, or • Verification of certification program completion for employees not licensed by state boards of Professional Regulation and Education (i.e. Clinical Nursing Assistants) <p>Note: The original, primary source document of a specific credential should be used to verify the accuracy of a qualification reported by an individual. It is acceptable to verify current licensure, certification, or registration with the primary source via a secure electronic communication or by telephone, if this verification is documented.</p>

Data Element Name:	Personnel File Record Identifier
Collected For:	HCSS-3
Definition:	Identifier generated by the HCSS that uniquely identifies each personnel file. The identifier is used in order to allow the HCSS to reference a particular personnel file for purposes of data collection review.
Suggested Data Collection Question:	What is the unique HCSS generated identifier that distinguishes the personnel file from others?
Format:	Type: Alphanumeric Occurs: Once
Allowable Values:	Value greater than 0
Suggested Data Sources:	Unique HCSS generated number
Guidelines for abstraction:	<ul style="list-style-type: none"> • There is no specific requirement for identifier length. • All personnel files used for data collection purposes of this measure must have an assigned identifier.

