

APPENDIX 4B

COCOA-B DATA ITEM INTEGRATION GUIDELINES

The COCOA-B Data Item Integration and Customization guidelines, including discipline assignments, from the SYFT training materials are presented in this appendix. These materials were used to aid sites with the process of integrating COCOA-B data items into existing site assessment materials in preparation for SYFT data collection. Nine sites elected to integrate COCOA-B data into their existing site assessment materials, while four sites were unable to integrate due to state reporting requirements or existing electronic medical record systems. Sites that were unable to integrate were required to collect COCOA-B data in addition to completing their own site assessment materials.

SECTION 3

COCOA-B DATA ITEM INTEGRATION AND CUSTOMIZATION

A. WHAT IS INTEGRATION?

Implementing the COCOA-B data set as part of a PACE site's routine assessment activities requires that many of the COCOA-B data items be integrated into existing participant assessment forms. This approach to uniform data collection increases the accuracy of assessment and minimizes the documentation and paperwork burden for site clinical staff.

Integration means that items on a site's current assessment form that are substantive duplicates of COCOA-B data items are replaced by COCOA-B data items. Integration also means that COCOA-B items are not simply added on to the beginning or end of an existing assessment form, but are interspersed with existing items in a manner that creates a logical and clinically appropriate flow to the assessment. Successful integration therefore would involve, for example, replacing a site's current ambulation item with the COCOA-B data item for ambulation in a logical location on the assessment form. (Not all COCOA-B items are intended to be integrated into current assessment materials, as described later in this document.)

B. OVERVIEW OF COCOA-B AND DATA ITEM ASSIGNMENTS

1. The COCOA-B Data Set

The COCOA-B data set has been developed to meet multiple purposes. A primary objective of the data set is to provide the data necessary to compute and risk-adjust outcome measures as part of an outcome-based continuous quality improvement (OBCQI) system for PACE. The outcome measures that can be computed using COCOA-B data span multiple clinical and other domains, and have been identified and refined based on several years of research, including substantial input from clinicians and administrators representing multiple disciplines and numerous PACE sites across the country.

Table 3.1 summarizes the ten data item subsets included in the COCOA-B data set. For each set of data items, the table indicates which PACE staff members will have primary responsibility for collecting the items, the time point(s) for data collection, the number of items contained in each subset, and whether the subset of items is intended for integration into existing site assessment materials or collected as a stand-alone form.

TABLE 3.1: Components of the COCOA-B Data Set.

Set of Items	Responsible Staff ^a	Time Points (for SYFT)	Integration Status	
			Inte-grate	Stand-Alone
Participant Tracking and Demographic Items	Any staff member	<ul style="list-style-type: none"> • Initial assessment • Reassessment^b 		X
Disenrollment	Any staff member	<ul style="list-style-type: none"> • Disenrollment (including death) 		X
Primary Care Provider	Physician Nurse Practitioner	<ul style="list-style-type: none"> • Initial assessment • Reassessment 	X	
Nursing	RN (not LPN) (clinic or home care)	<ul style="list-style-type: none"> • Initial assessment • Reassessment 	X	
Social Work	Social Worker	<ul style="list-style-type: none"> • Initial assessment • Reassessment 	X	
Rehabilitation Therapy	Occupational Therapist Physical Therapist	<ul style="list-style-type: none"> • Initial assessment • Reassessment 	X	
Utilization	Medical Records or other staff	<ul style="list-style-type: none"> • Monthly 		X
Participant Satisfaction Questionnaire (PSQ)	Individual who does not provide direct care to participant	<ul style="list-style-type: none"> • July 2003 (one time point) 		X
Caregiver Satisfaction Questionnaire (CSQ)	Individual who does not provide direct care to participant	<ul style="list-style-type: none"> • July 2003 (one time point) 		X
End of Life (EOL) Questionnaire	Any staff member (recommend a staff member familiar with the informal caregiver)	<ul style="list-style-type: none"> • 2 to 4 months after death of participant • Administer to primary informal caregiver 		X

^a For some data items, each site may determine which discipline or staff position will collect the item (as described in this document).

^b Participants are reassessed every four months during the SYFT.

2. Who Will Collect the COCOA-B Items?

To fit with the multidisciplinary team approach emphasized under the PACE model and reduce the data collection burden for any one discipline, the COCOA-B data items are organized by discipline or staff member. As indicated in Table 3.1, there are ten subsets of items within COCOA-B and an additional six items (referred to as **Clinical Record Items**). The following four item sets are strongly recommended for integration

into existing site assessment materials, to facilitate completion as part of routine participant assessment: a) primary care provider; b) nursing (clinic or home care); c) social work; and d) rehabilitation therapy (occupational or physical therapy).

Although the item sets have been assigned to a primary discipline (as indicated in the table), some items within these sets may be assigned to an alternative discipline as determined by each site's integration team(s), based on Research Center guidelines. For example, the item measuring *Frequency of Participant's Anxiety* (C0660) currently is included in the set of items assigned to the social work staff as the primary discipline. If preferred by a site, this item may be assigned instead to the primary care provider. It is important to note, however, that the site integration team must choose a single discipline that will collect the item for the entire period of the SYFT and integrate the item into the appropriate discipline's form. That is, the items may not be collected by one discipline at one time point and another discipline at a subsequent time point during the SYFT. Attachment A provides information on the primary and alternative discipline assignments for each data item included in the primary care, nursing, social work, and rehabilitation therapy item subsets.

C. PREPARING FOR COCOA-B ITEM INTEGRATION

1. Assemble COCOA-B Integration Teams

The review and revision process that will result in a set of revised assessment forms that are both functional and accurate is a precise and time-consuming process. It therefore is suggested that a team approach be utilized to accomplish the activities associated with integrating COCOA-B into current site assessment materials. The team approach described below is presented to help guide the integration process. However, each site will need to determine the approach to item integration that will be the most appropriate and feasible, given site-specific staffing and other circumstances.

We recommend that discipline-specific teams and an integration oversight team be established. The discipline-specific teams will work on integrating the COCOA-B item subsets into their discipline's routine site assessment materials. A single individual should be identified to lead each discipline-specific team. The integration oversight team's role is to oversee the review process and set internal site deadlines; ensure that the discipline-specific teams meet internal and external deadlines to the extent possible; collect and submit the integrated forms to the Research Center; and ensure that the stand-alone components of COCOA-B are reviewed and revised -- but not integrated -- by the appropriate staff members, in preparation for implementation.

The following discipline-specific integration teams should be assembled:

- primary care provider;

- nursing (if data items will be integrated into both clinic and home care nurse assessment forms, representatives from both groups should work together to select the data items most appropriate for each assessment form);
- social work; and
- rehabilitation therapy (if OT and PT have separate assessment forms, these two disciplines should work together to select the data items most appropriate for each assessment form).

Ideally, each team should include clinicians and a clinical manager of the relevant discipline, and a medical records staff member. Each of these staff groups will be affected by documentation changes and thus have investments in the final product(s). The individuals who will serve as the Data Quality and Collection Coordinators (DQCCs) and Site Clinical Contacts (SCCs) for the SYFT also should be involved in the item integration process, at least in a review capacity.

It also may be helpful to consider personality factors when assembling the integration teams. For example, the ideal group would include as many of the following personality types as possible:

- an individual who considers him/herself to be the best assessor of participant health status at the site;
- an individual whose opinions are respected by others and who will keep the group on track;
- an individual who is sufficiently detail-oriented so that errors in wording or skip logic will not be overlooked;
- an individual who is likely to introduce anticipated barriers which can be addressed early in the process for a more satisfactory product later on; and
- an individual whose energy and enthusiasm will keep the group moving toward task completion now and will increase full staff acceptance of the changes later.

While leading such a group can be challenging, the effort is likely to be fully worth the investment when the final product is acceptable to such a diverse group. If the personality attributes and the various staff categories can be combined in team selection, the likelihood of success is maximized.

2. Conduct an Integration Kick-Off Meeting with All Integration Teams

An integration kick-off meeting involving all of the integration teams should be held as soon as possible, to complete the following.

- Review the objectives of and time frame for the integration activities, emphasizing the critical nature of the integration activities.

- Distribute the following materials to each discipline-specific team:
 - a copy of the Integration Guidelines (this document), including all attachments;
 - the hard copy (and if applicable, electronic copy) of the COCOA-B data items; and
 - current site assessment forms.
- As a group, review the discipline assignment options for the COCOA-B items (described in Attachment A) and assign (if desired) data items to alternative disciplines (it may be useful to review existing site assessment materials to determine discipline assignments).
- Using Table 3A.1 in Attachment A, indicate (circle) the discipline selected for each item. Please submit a copy of this table with the discipline designations for your site to the Research Center along with your integrated forms.
- Ensure that each discipline-specific team updates their discipline's checklist in Attachment B to reflect the data items assigned to their discipline. This checklist will be used to verify that all aspects of item integration have been completed for each COCOA-B data item.

D. THE INTEGRATION PROCESS

1. Evaluate Current Documentation

After determining the set of COCOA-B data items to be collected by each discipline, each discipline-specific team should begin the integration process with a thorough review and evaluation of their current assessment forms (both initial assessment and reassessment forms, if applicable). Completing this review and comparison process will help the team to determine the scope of the task they are facing. The following steps should be completed as part of the review.

- Compare the current discipline-specific assessment form with the COCOA-B item set for the discipline.
- Indicate (by marking on the COCOA-B document) for each COCOA-B data item, whether the current site assessment form includes an item that is the exact duplicate, is similar but not exactly the same, or does not include the item. (In some cases, minimal or no change to your current data item will be needed.)
- Based on the review of existing forms in comparison with the COCOA-B data items (e.g., the number of items to be replaced, added, etc.), decide whether to modify existing assessment forms, or to develop entirely new forms. If the latter approach is chosen, sites may begin this process with the COCOA-B

items and add to this data set the additional items they find necessary and appropriate for comprehensive assessment.

2. COCOA-B Data Item Integration Rules

Once you have determined the data items to be integrated into your discipline's assessment forms and decided whether you will modify existing forms or create completely new forms, you are ready to begin the item by item integration process. To ensure standardized data collection across all sites, several rules for integrating the COCOA-B data items must be followed. The checklists provided in Attachment B have been developed to facilitate review by site staff to verify that each COCOA-B data item has been integrated appropriately.

- a. Items in the revised assessment documentation must be exact (verbatim) duplicates of the COCOA-B items. Item wording may not be changed. Emphasis added to items by underlining, boldface, and capitalization must be retained. Uniformity of data collection cannot be assured if modifications are made to the items. There are a few situations when an item should be modified (e.g., customizing the item with your site's name, modifying a skip pattern). These situations are described below.
- b. Items that reference **(PACE site)** or **(Day Health Center)** should be modified by each site to replace the phrase **(PACE site)** or **(Day Health Center)** with the name of the center or location that would be recognizable to the participant or informal caregiver. For example, **(PACE site)** might be replaced with "Grant Street Center". In these cases the modified text should not be in bold or ().
- c. Unique COCOA-B identification markers preceding each item must be retained. These identifiers begin with the letter "C" and consist of up to eight characters (e.g., C0010; C0160_1). The identifier facilitates locating the items within an assessment form for data entry and verification purposes (as each site will have the items integrated among existing site assessment items). In addition, the identifier clearly designates a COCOA-B item and serves to eliminate inadvertent modifications to the item.
- d. The **Clinical Record Items (C0010 through C0050)** must be included on each assessment form. In addition, *Staff Member Name* (item 6 in the Clinical Record Items) should be included on each integrated assessment form. (This item is not a COCOA-B data item but will be used during the SYFT for tracking purposes.)
- e. Almost all of the integrated COCOA-B data items are collected at every time point (i.e., initial assessment and reassessment). A few items are collected only at initial assessment or only at reassessment. These items have been designated in the item sets. Designation of the data collection time points for these items also must be included in the integrated assessment forms.

- f. “Skip patterns” must be carefully observed. A skip pattern indicates that a group of items should be skipped based on a response to a previous item. For example, the COCOA-B Primary Care Provider subset of items contains a series of questions on participant pain. If a participant has no pain, the first question in the series (C0270_1) directs the clinician to “skip” the subsequent pain items (as designated by the phrase **[Go to C0280_1]**). Such skip patterns assist the clinician to proceed quickly past nonrelevant items during participant assessment. However, this skip logic can be easily overlooked when revising assessment forms, resulting in critical data errors.
- g. The end points of any items with “skip patterns” should be renumbered to direct the clinician to the next appropriate item. In some cases the next item may not be a COCOA-B item and therefore a numbered item reference may be necessary. For example, if the next item in the data set is a COCOA-B item the skip pattern might be changed to **[Go to C0260]** if a site elected to complete the *Life Expectancy* (C0260) item after the pain items. If the integrated form has a site-specific data item (i.e., not a COCOA-B data item) following the COCOA-B pain items, the skip pattern might be changed to **[Go to Item 5]** in reference to the next item on the integrated form.
- h. All COCOA-B items (appropriate for the time point) must be included in the assessment documentation, although site staff may choose to alter the sequence of the COCOA-B items as they appear before integration. If the sequence is changed, it is critical that skip patterns are not altered, because data entry errors and edit checks will result from improper sequencing of some items. Please note, however, that the sequencing of items within the same unique identifier, or C0#, may not be changed (including C0#s with the same main number followed by underscores; e.g., C0270_1, C0270_2, C0270_3, C0270_4, and C0270_5 in the Primary Care Provider items).
- i. Most of the COCOA-B data items are to be completed by the care provider, based on care provider assessment (which may include clinical examination, observation, discussion with other staff members, and/or discussion with the participant or the participant's informal caregivers). However, some items should be administered directly to the participant or to the participant's informal caregiver. These items are designated in the data set by a heading (e.g., Participant Response Items). It is important to retain these headings and/or other instructions to ensure that it is clear to clinicians that such items must be asked directly to the participant (or the informal caregiver, as instructed).
- j. The ADL and IADL sections begin with the following heading **"ADLs(IADLs): The ADL(IADL) items should be assessed based on the past week."** This heading should be included in the integrated form before the ADL/IADL sections. If ADL and IADL items are split out across an assessment, this header should appear each time a new ADL/IADL or set of ADLs/IADLs is presented.

- k. Other headings or instructional narrative also should be retained in the integrated documentation. For example, items C0270_1 to C0270_5 (in the Primary Care Provider Items) should be preceded by the following leading narrative as it appears in the COCOA-B subset: "**Participant Pain:** If participant has pain in multiple locations, respond based on the most severe or intrusive pain."
- l. Sites should supplement the COCOA-B data items as desired to enhance their utility for participant assessment (without altering the required components of the data item). Examples include:
 - Adding room for comments on the Social Work Form after the COCOA-B data item for *Self-Rated Quality of Life* (C0790) to note any comments the participant provides in addition to his/her response to the item.
 - Adding degree of edema to the COCOA-B data item for *Edema* (C0430) on the Nursing form.

3. Other Tips for Reviewing/Revising Documentation

- In addition to the headers and instructions provided in the COCOA-B data set and integrated into site assessment materials, sites may find it useful to include additional script or instructional information on the integrated assessment forms.
- Attempt to maintain a format similar to existing site assessment forms as much as possible. The transition necessary for clinical staff will be smoother if they can recognize consistencies or similarities with current forms.
- Review current forms for consolidation or elimination possibilities. Sites may discover that integrating COCOA-B items into current documentation makes other (long-desired) documentation changes possible (e.g., decreasing the number of different forms in participant enrollment packets). Some sites may pursue concerted efforts to simplify their current paperwork when integrating the COCOA-B items. Such efforts likely will result in increased staff receptivity to the new forms.

4. Customization of COCOA-B Stand-Alone Forms

Six of the COCOA-B data item subsets are not intended for integration into site assessment materials (Participant Tracking and Demographic Items, Participant Satisfaction Questionnaire [PSQ], Caregiver Satisfaction Questionnaire [CSQ], Utilization Form, End of Life [EOL] Questionnaire, and Disenrollment Form). However, some customization of these forms should be undertaken.

- The PSQ, CSQ and EOL questionnaires should be modified to replace references to **(PACE site)** or **(Day Health Center)** with a name of the center or location that would be recognizable to the participant or informal caregiver. For example, **(PACE site)** might be replaced with "Grant Street Center". In these cases the modified text should not be in bold or ().
- The order of the data items on the Participant Tracking and Demographics form may be customized, if desired. Item order for the PSQ, CSQ, EOL Questionnaire, Utilization Form, and Disenrollment Form may not be changed.

In addition to the stand-alone item sets mentioned above, a Supplemental Nursing Items sheet also is included. The four items on this sheet have been developed (by another CMS contractor) to compute the frailty adjuster for payment of PACE sites. The Research Center is working with the CMS contractor and CMS to coordinate field test efforts. To ensure that the Supplemental Nursing Items are completed (by nursing staff) in conjunction with the integrated nursing assessment form, we recommend that sites add the Supplemental Nursing Items to the end of the integrated nursing assessment form or staple the hard copy of the sheet to the end of the assessment form. Participant response versions of the four payment items (which are designated by a "P" at the end of the assigned C0 numbers) also are included in the set of COCOA-B Nursing items, for administration by the nurse directly to the participant. (Details on data collection protocols will be presented at the national training in April.)

5. COCOA-B Materials to Facilitate Integration

Hard copy and electronic versions of the COCOA-B data items have been provided to each site. The hard copies include a consolidated COCOA-B data set (with all of the items included), the subsets of the COCOA-B items by primary discipline (i.e., Primary Care Provider Items, Nursing Items, Social Work Items, and Rehabilitation Therapy Items), and the stand-alone components of COCOA-B (Participant Tracking and Demographic Items, PSQ, CSQ, EOL Questionnaire, Utilization Form, and Disenrollment Form). To facilitate site word processing and formatting tasks, each set of items also is provided on diskette.

6. Carefully Review and Proofread the New Assessment Documentation

After the integration process has been conducted, the new assessment documentation should be reviewed carefully by integration team members to determine the accuracy of the integrated forms. Thorough proofreading and checking of the documents are necessary to avoid major problems later. Checklists for review of new clinical assessment forms for each discipline are provided in Attachment B. Please use these checklists to carefully review the documentation by examining each item for the specific characteristics noted on the checklist and determine the existence of any problems. Uniformity and accuracy of the COCOA-B data can be negatively impacted by failure to carefully review the new assessment documents once they are completed.

Also review the revised assessment forms from an overall formatting perspective. Be sure that a single item is not split across pages. Is the print size sufficiently large enough to read? Are too many items crowded on a page? Can the clinician proceed appropriately through the document without inadvertently missing items? Do items change from vertical column to horizontal row placement suddenly in rather indiscriminate fashion?

7. Conduct a Mini Pilot Test, Revise, and Refine

If it is possible to use the new forms with even one or two participants (per form), a mini pilot test would provide the opportunity to identify potential problems or areas for improvement with regard to ease of using the new form for assessment. (The participants for whom the documentation is pilot tested need not be at a true (re)assessment time point, as the pilot testing is for the clinician's assessment of the form's ease of use rather than the evaluation of the participant's clinical status.)

After the forms are pilot tested, the discipline-specific integration teams should meet to discuss possible revisions or refinements. If major form revisions are needed after the first pilot test, additional pilot testing should be conducted until any needed revisions are only minor in scope. If possible, the item integration team members should participate in training the site staff on the new forms and support staff with the transition to new forms.

8. Submit New, Integrated Forms to Research Center for Review

The uniform presentation of items across sites is critical to ensure their comparability across sites (for purposes of comparing risk-adjusted outcomes). To ensure that the data items appear in the new, integrated assessment forms as required, sites will submit the integrated forms to the Research Center for review.

Research Center staff will review the integrated forms and provide comments to site staff regarding necessary modifications. Site integration teams will need to revise the integration forms as necessary, and submit the next iteration of the forms to the Research Center for a second round review. This process will continue until all COCOA-B items appear as necessary in the site assessment forms. **Do not copy your newly integrated forms for use prior to receiving approval from the Research Center.**

We request that you submit the integrated assessment forms to the Research Center by **May 2, 2003**, if possible, for first round review. Given this limited time frame, Research Center staff will contact site staff as this date nears to discuss the status of the integration process and likely submission dates.

ATTACHMENT A TO SECTION 3

COCOA-B CLINICAL FORM INTEGRATION - GUIDELINES FOR DISCIPLINE ASSIGNMENT

To facilitate data collection for the SYFT, each COCOA-B clinical data item has been assigned to a "primary" discipline (or staff member) responsible for assessing the participant on that item. Primary discipline assignments were determined based on input from PACE care providers and findings from previous phases of testing. In recognition of variations in PACE site assessment protocols and procedures, some (but not all) of the data items can be assigned to an alternative discipline. If a site elects to assign data items to staff members other than the "primary" discipline, the data item must be collected by that alternative discipline for the remainder of the SYFT.

Table 3A.1 provides information on the primary, and when applicable, alternative discipline(s) eligible to collect each COCOA-B clinical data item. (The table does not include the items in the stand-alone components of COCOA-B [Participant Tracking and Demographic Items, PSQ, CSQ, EOL Questionnaire, Utilization, and Disenrollment], as those items are not to be integrated into existing site documentation). The data items are organized within the table by primary discipline (i.e., primary care provider, nursing, social work, and rehabilitative therapy). For example, all items assigned to social work as the primary discipline are under the Social Work sub-heading. The discipline(s)/staff member(s) who may collect each item is presented on the right side of the table, indicated by an X in the appropriate column (a bold **X** indicates the primary discipline). While the Research Center recommends that data items be assigned for collection by the primary discipline, sites may assign some of the items to other staff members within the guidelines noted in the table. Illustrative examples from the set of COCOA-B social work items are presented below.

- *Frequency of Caregiver Assistance* (C0620) must be collected by the social worker;
- *Frequency of Anxiety* (C0660) may be collected either by the social worker or the primary care provider; and
- *Ability to Express Thoughts, Wants, Needs* (C0750) may be collected by the social worker, nurse, or speech therapist.

Please Note: When a data item is assigned to a discipline other than the primary discipline, please record your site's selection for that item by circling the X indicating the appropriate discipline. After all items have been assigned to a discipline, please send a copy of Table 3A.1 with your site's selections indicated to the Research Center (along with your site's integrated assessment forms).

TABLE 3A.1: Discipline/Staff Assignments for COCOA-B Data Items.^a

CO #	Item Name	Discipline/Staff ^b							
		PCP	RN ^c	SW	REHAB ^d	RD	RT	Speech Therapy	Pharmacy
<u>PRIMARY CARE PROVIDER</u>									
C0240	Diagnoses and Severity Index	X							
C0250	Overall Prognosis	X							
C0260	Life Expectancy	X							
C0270	Participant Pain (C0270_1 to C0270_5)	X							
C0280	Surgical Wounds (C0280_1 to C0280_4)	X							
C0290	Pressure Ulcers (C0290_1 to C0290_4)	X							
C0300	Stasis Ulcers (C0300_1 to C0300_4)	X							
C0310	Modified/Abbreviated Mini Mental Status Examination	X		X					
<u>NURSING</u>									
C0320	High Risk Factors	X	X						
C0330	Therapies at Participant's Residence		X						
C0340	Respiratory Treatments at Participant's Residence		X						
C0350	Flu Immunization Status		X						
C0360	Vision	X	X						
C0370	Hearing	X	X						
C0380	Height and Weight		X				X		
C0390	Hydration (Oral Fluid Intake)		X				X		
C0400	Skin Turgor (Hydration)		X				X		
C0410	Nutritional Risk		X				X		
C0420	Dyspnea	X	X		X				
C0430	Edema	X	X						
C0440	Bladder Continence/When Urinary Incontinence Occurs (C0440_1; C0440_2)	X	X						
C0450	Urinary Tract Infection	X	X						
C0460	Bowel Incontinence Frequency	X	X						
C0470	Number of Falls/Number of Falls Resulting in Injury (C0470_1; C0470_2)	X	X		X				
C0480	Prescription Medications	X	X						X
C0490	Management of Oral Medications	X	X						X
C0500	Adherence to Medications	X	X						X
C0510	Adherence to Therapy/Medical Interventions	X	X		X	X			
C0520	Self-Report of Health Status	X	X	X					
C0530_P ^e	Activity Difficulties		X						
C0540_P ^e	Help from Another Person for Activities		X						
C0550_P ^e	Lifting or Carrying Objects		X						
C0560_P ^e	Walking a Quarter of a Mile		X						
<u>SOCIAL WORK</u>									
C0570	Day Health Center Attendance				X			X	
C0580	Current Residence				X				
C0590	Participant Lives With				X				
C0600	Informal (Unpaid) Caregivers				X				
C0610	Number of Informal Caregivers				X				
C0620	Frequency of Informal Caregiver Assistance				X				
C0630	Type of Informal Caregiver Assistance				X				
C0640	Financial Concerns				X				
C0650	Advance Directives (C0650_1; C0650_2)	X	X		X				
C0660	Frequency of Participant's Anxiety	X			X				
C0670	Participant Stress/Concerns (C0670_1; C0670_2)	X			X				
C0680	Depression, Depressive Symptoms, and Social Isolation	X			X				

TABLE 3A.1: Discipline/Staff Assignments for COCOA-B Data Items.^a (Cont'd)

CO #	Item Name	Discipline/Staff ^b								
		PCP	RN ^c	SW	REHAB ^d	RD	RT	Speech Therapy	Pharmacy	
C0690	Frequency of Behavior Problems			X						
C0700	Wandering	X		X						
C0710	Cognitive Functioning	X		X						
C0720	Memory Deficit	X		X						
C0730	Judgment	X		X						
C0740	Ability to Understand Others			X				X		
C0750	Ability to Express Thoughts, Wants, Needs		X	X				X		
C0760	Satisfaction with Amount of Interaction/Contact			X						
C0770	Satisfaction with Quality of Interaction/Contact			X						
C0780	Socialization/Isolation (C0780_1; C0780_2)			X						
C0790	Self-Rated Quality of Life			X						
C0800	Satisfaction with Care Provided for Pain (C0800_1 to C0800_3)			X						
C0810	Caregiver Stress			X						
C0820	Caregiver Coping (C0820_1; C0820_2)			X						
C0830	Caregiver Support			X						
REHABILITATION THERAPY										
C0840	Endurance				X					
C0850	Ambulation/Locomotion				X					
C0860	Transferring				X					
C0870	Bathing				X					
C0880	Grooming				X					
C0890	Dressing Upper Body				X					
C0900	Dressing Lower Body				X					
C0910	Toileting				X					
C0920	Feeding or Eating				X					
C0930	Planning and Preparing Light Meals				X					
C0940	Shopping				X					
C0950	Housekeeping				X					
C0960	Laundry				X					
C0970	Telephone Use				X					
C0980	Transportation				X					
C0990	Functional Rehabilitative Prognosis				X					
C1000	Safety Hazards in Participant's Residence		X	X	X					
C1010	Structural Barriers in Participant's Residence		X	X	X					

^a All items included in the COCOA-B data set are not listed in this table. Only the items intended for integration into existing assessment documentation are presented here. Each clinical form also will need to include the six clinical record items (Site ID, Participant ID, Participant Name, Reason for Assessment, Date Assessment Completed, and Care Provider Name).

^b PCP = Primary Care Provider; RN = Nursing (clinic or home care); SW = Social Work; REHAB = Rehabilitation Therapy (physical therapy or occupational therapy); RD = Dietitian; RT = Recreational Therapy.

^c RN items may be assigned to the clinic or home care nurse.

^d REHAB items may be assigned to the physical therapist or occupational therapist.

^e Four data items developed for calculating the frailty adjuster for potential payment also are being tested as part of the COCOA-B SYFT. These items are designated with a "P" at the end of the unique identifier, or CO#. The listed payment items are to be integrated into the nursing assessment form and are intended for direct participant response (administered by the nurse). The nurse also is asked to complete the same four items, presented in a separate stand-alone document (entitled Supplementary Nursing Items), based on her/his assessment of the participant. The one-page Supplementary Nursing Items sheet should be added or stapled to the end of the site's nursing assessment form.

ATTACHMENT B TO SECTION 3

CHECKLIST TO REVIEW INTEGRATION OF COCOA-B ITEMS

This attachment includes checklists to assist site staff with verifying the accuracy of the new, integrated assessment documentation for each of the following disciplines (according to primary discipline assignment): a) Primary Care Provider; b) Nursing; c) Social Work; and d) Rehabilitation Therapy.

Using the checklist, please verify the accuracy of the following for each item:

- the C0 number (including underscores where applicable) is included for and precedes each item and sub-item;
- the sub-items (designated by a C0 number with an underscore) appear in the integrated documentation in the same order as they are presented in the COCOA-B document;
- item wording is identical (to that presented on the COCOA-B documents), including all boldface and underlines;
- skip patterns are correct (items that begin a skip pattern are designated on the checklist by footnote b);
- all duplicate or similar items in the current assessment forms that have been replaced by a COCOA-B item have been deleted;
- items are not split across pages; and
- confirm whether an item has been assigned to an alternative discipline (rather than the primary discipline).

When a particular area does not need to be checked for an item, that column is shaded in gray. For example, if an item does not have a skip pattern, the column for verifying skip patterns is gray for that item. For items that do not have an alternative discipline option (i.e., the item must be collected by the primary discipline), the column for indicating assigned discipline is gray.

All items included in the COCOA-B Primary Care Provider, Nursing, and Rehabilitation Therapy item sets are to be completed at initial assessment and reassessment time points, with no wording changes. All items in these sets therefore should be integrated into clinical documentation for initial assessment and reassessment time points.

All but two of the COCOA-B Social Work items also should be integrated into clinical documentation for both initial assessment and reassessment time points, without wording changes. As noted on the Social Work checklist, the following two items are for completion at the reassessment time points only (and therefore should be skipped at initial assessment): (C0570) *Day Health Center Attendance*; and (C0800) *Satisfaction with Care Provided for Pain*.

Several blank rows are included at the bottom of each checklist. Use these rows to record items that were reassigned (by your site's item integration team) to the discipline represented on the checklist, then follow the same review process to verify the accuracy of the added items.

PRIMARY CARE PROVIDER FORM INITIAL AND REASSESSMENT VERSIONS

C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
CLINICAL RECORD ITEMS						
C0010	Site ID					
C0020	Participant ID					
C0030	Participant Name					
C0040	Reason for Assessment					
C0050	Date Assessment Completed					
	Staff Member Name ^a					
PRIMARY CARE PROVIDER ITEMS						
C0240	Diagnoses and Severity Index					
C0250	Overall Prognosis					
C0260	Life Expectancy					
C0270_1	Any Pain ^b					
C0270_2	Severity of Pain					
C0270_3	Frequency of Pain					
C0270_4	Pain Interfering with Daily Activities					
C0270_5	Intractable Pain					
C0280_1	Surgical Wounds ^b					
C0280_2	Number of (Observable) Surgical Wounds					
C0280_3	Unobservable Surgical Wound					
C0280_4	Status of Most Problematic (Observable) Surgical Wound					
C0290_1	Pressure Ulcers ^b					
C0290_2	Number of Pressure Ulcers at Each Stage					
C0290_3	Stage of Most Problematic (Observable) Pressure Ulcer					
C0290_4	Status of Most Problematic (Observable) Pressure Ulcer					

If box is shaded, the item does not require checking in this category.

^a *Staff Member Name* is included for SYFT purposes only and is not considered a COCOA-B item. The item therefore has not been assigned a C0 number. (This item was changed from *Care Provider Name* to *Staff Member Name* based on requests from site staff who attended the national SYFT training on April 8-9, 2003.)

^b Contains a skip pattern.

PRIMARY CARE PROVIDER FORM (continued)

C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFA CE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
C0300_1	Stasis Ulcers ^b					
C0300_2	Current Number of Observable Stasis Ulcers					
C0300_3	Unobservable Stasis Ulcer					
C0300_4	Status of Most Problematic (Observable) Stasis Ulcer					
C0310	Modified/Abbreviated Mini Mental Status Examination					

If box is shaded, the item does not require checking in this category.

**NURSING FORM
INITIAL AND REASSESSMENT VERSIONS**

C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
CLINICAL RECORD ITEMS						
C0010	Site ID					
C0020	Participant ID					
C0030	Participant Name					
C0040	Reason for Assessment					
C0050	Date Assessment Completed					
	Staff Member Name ^a					
NURSING ITEMS						
C0320	High Risk Factors					
C0330	Therapies at Participant's Residence					
C0340	Respiratory Treatments at Participant's Residence					
C0350	Flu Immunization Status					
C0360	Vision					
C0370	Hearing					
C0380	Height and Weight					
C0390	Hydration (Oral Fluid Intake)					
C0400	Skin Turgor (Hydration)					
C0410	Nutritional Risk					
C0420	Dyspnea					
C0430	Edema					
C0440_1	Bladder Continence ^b					
C0440_2	When Urinary Incontinence Occurs					
C0450	Urinary Tract Infection					
C0460	Bowel Incontinence Frequency					
C0470_1	Number of Falls ^b					
C0470_2	Number of Falls Resulting in Injury					

If box is shaded, the item does not require checking in this category.

^a *Staff Member Name* is included for SYFT purposes only and is not considered a COCOA-B item. The item therefore has not been assigned a C0 number. (This item was changed from *Care Provider Name* to *Staff Member Name* based on requests from site staff who attended the national SYFT training on April 8-9, 2003.)

^b Contains a skip pattern.

NURSING FORM (continued)

C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
C0480	Prescription Medications					
C0490	Management of Oral Medications					
C0500	Adherence to Medications					
C0510	Adherence to Therapy/Medical Interventions					
PARTICIPANT RESPONSE ITEMS						
C0520	Self-Report of Health Status					
C0530_P	Activity Difficulties					
C0540_P	Help from Another Person for Activities					
C0550_P	Lifting or Carrying Objects					
C0560_P	Walking a Quarter of a Mile					

If box is shaded, the item does not require checking in this category.

SOCIAL WORK FORM INITIAL AND REASSESSMENT VERSIONS

ITEMS TO OMIT IN INITIAL ASSESSMENT DOCUMENTATION:
Check each item to verify that it has not been included in the Initial Assessment documentation.

C0570__ C0800__

C0#	WORDING IDENTICAL TO COCO A-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
CLINICAL RECORD ITEMS						
C0010	Site ID					
C0020	Participant ID					
C0030	Participant Name					
C0040	Reason for Assessment					
C0050	Date Assessment Completed					
	Staff Member Name ^a					
SOCIAL WORK ITEMS						
C0570	REASSESSMENT ONLY: Day Health Center Attendance					
C0580	Current Residence					
C0590	Participant Lives With					
C0600	Informal (Unpaid) Caregivers ^b					
C0610	Number of Informal Caregivers					
C0620	Frequency of Informal Caregiver Assistance					
C0630	Type of Informal Caregiver Assistance					
C0640	Financial Concerns					
C0650_1	Advance Directives (Have a Signed Living Will) ^b					
C0650_2	Advance Directives (Discussed Living Will)					
C0660	Frequency of Participant's Anxiety					

If box is shaded, the item does not require checking in this category.

^a *Staff Member Name* is included for SYFT purposes only and is not considered a COCOA-B item. The item therefore has not been assigned a C0 number. (This item was changed from *Care Provider Name* to *Staff Member Name* based on requests from site staff who attended the national SYFT training on April 8-9, 2003.)

^b Contains a skip pattern.

SOCIAL WORK FORM (continued)

C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
C0670_1	Major Life Changes ^b					
C0670_2	Stress Due to Changes					
C0680	Depression, Depressive Symptoms, and Social Isolation					
C0690	Frequency of Behavior Problems					
C0700	Wandering					
C0710	Cognitive Functioning					
C0720	Memory Deficit					
C0730	Judgment					
C0740	Ability to Understand Others					
C0750	Ability to Express Thoughts, Wants, Needs					
PARTICIPANT RESPONSE ITEMS						
C0760	Satisfaction with Amount of Interaction/Contact					
C0770	Satisfaction with Quality of Interaction/Contact					
C0780_1	Socialization/Isolation (How Often Talk/Visit)					
C0780_2	Socialization/Isolation (How Often Lonely)					
C0790	Self-Rated Quality of Life					
C0800_1	REASSESSMENT ONLY: Satisfaction with Care Provided for Pain (Help Control Pain) ^b					
C0800_2	REASSESSMENT ONLY: Satisfaction with Care Provided for Pain (Wait for Medication)					
C0800_3	REASSESSMENT ONLY: Satisfaction with Care Provided for Pain (Do More to Keep Free from Pain)					
INFORMAL CAREGIVER RESPONSE ITEMS						
C0810	Caregiver Stress					
C0820_1	Caregiver Coping (How Often Difficult)					
C0820_2	Caregiver Coping (Need a Break)					
C0830	Caregiver Support					

If box is shaded, the item does not require checking in this category.

^b Contains a skip pattern.

SOCIAL WORK FORM (continued)

C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES

If box is shaded, the item does not require checking in this category.

^b Contains a skip pattern.

**REHABILITATION THERAPY FORM (OT or PT FORMS)
INITIAL AND REASSESSMENT VERSIONS**

C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
CLINICAL RECORD ITEMS						
C0010	Site ID					
C0020	Participant ID					
C0030	Participant Name					
C0040	Reason for Assessment					
C0050	Date Assessment Completed					
	Staff Member Name ^a					
REHABILITATION THERAPY ITEMS						
C0840	Endurance					
ADLs						
C0850	Ambulation/Locomotion					
C0860	Transferring					
C0870	Bathing					
C0880	Grooming					
C0890	Dressing Upper Body					
C0900	Dressing Lower Body					
C0910	Toileting					
C0920	Feeding or Eating					
IADLs						
C0930	Planning and Preparing Light Meals					
C0940	Shopping					
C0950	Housekeeping					
C0960	Laundry					
C0970	Telephone Use					
C0980	Transportation					
C0990	Functional Rehabilitative Prognosis					

If box is shaded, the item does not require checking in this category.

^a *Staff Member Name* is included for SYFT purposes only and is not considered a COCOA-B item. The item therefore has not been assigned a C0 number. (This item was changed from *Care Provider Name* to *Staff Member Name* based on requests from site staff who attended the national SYFT training on April 8-9, 2003.)

REHABILITATION THERAPY FORM (OT or PT) (continued)

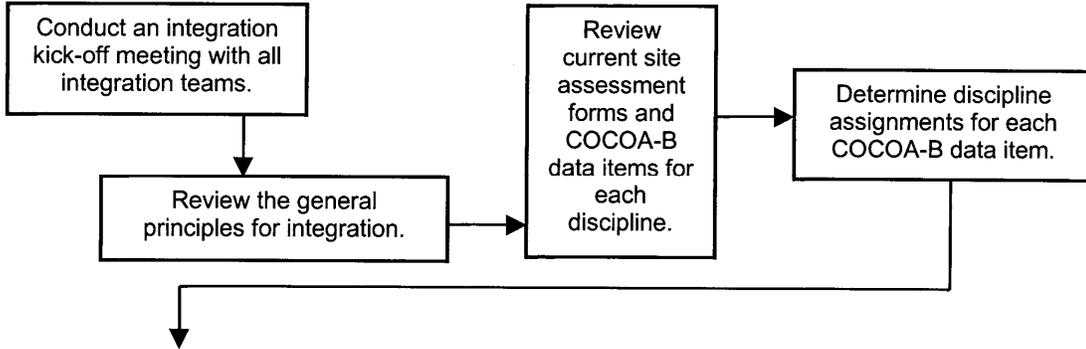
C0#	WORDING IDENTICAL TO COCOA-B ITEM	ALL BOLDFACE AND UNDERLINES INCLUDED	"GO TO" OR "SKIP" PATTERN IS CORRECT	DUPLICATE OR SIMILAR ITEM DELETED FROM INTEGRATED FORM	FULL ITEM ON ONE PAGE ONLY	ASSIGNED TO OTHER DISCIPLINES
C1000 Safety Hazards in Participant's Residence						
C1010 Structural Barriers in Participant's Residence						

If box is shaded, the item does not require checking in this category.

ATTACHMENT C TO SECTION 3

OVERVIEW OF COCOA-B DATA ITEM INTEGRATION

Integration Oversight Team



Discipline-Specific Team

