

* = check all that apply

1. Feedback for: (pick one)

- 082510 -- Fresenius Medical Care of Rehoboth
- 392503 -- Fresenius Medical Care of Pittsburgh
- 392513 -- DaVita – West Philadelphia
- 392563 -- DCI Renal Services of Pittsburgh LLC – Monroeville
- 392610 -- DCI Renal Services of Pittsburgh LLC – Oakland
- 390006 -- Geisinger Health System
- 39012F -- VA Pittsburgh Healthcare System
- 390256 -- M.S. Hershey Medical Dialysis Center
- 392577 -- Belmont Court Dialysis – Northeast Campus
- 392719 -- Renal Care of White Oak

2. QIPS

- 2.1: Did you experience any problems with the QIPS application? Yes | No
- 2.2: How was the issue resolved?* My Issue Was Not Resolved | Handled it on my own | Called the Helpdesk | Called the Network
- 2.3: Tell us about your issue: _____

3. CROWNWeb Connectivity

- 3.1: Did you experience any problems with CROWNWeb connectivity? Yes | No
- 3.2: How was the issue resolved?* My Issue Was Not Resolved | Handled it on my own | Called the Helpdesk | Called the Network
- 3.3: Tell us about your issue: _____

4. CROWN Helpdesk

- 4.1: Did you need to contact the CROWN Helpdesk with an issue? Yes | No
- 4.2: How did you contact the CROWN Helpdesk?* Call | Email | Fax
- 4.3: If you called the Helpdesk, was your issue resolved during that call? Yes | No
- 4.4: If your issue was not resolved during the initial call, or if you contacted the Helpdesk via email or fax, how quickly did it take for the Helpdesk to acknowledge your issue?* Within the hour | By the next day | My issue was never acknowledged
- 4.5: How quickly was your issue resolved? Within the hour | By the next day | My issue was not resolved
- 4.6: Tell us about your issue: _____

5. Recommendations

5.1: Use this space to list any recommendations you would like to make about the QIPS application, CROWNWeb (connectivity, application or functionality) and/or the CROWN Helpdesk: _____

6. CROWNWeb Processes

6.1: I updated my unit’s “Facility Details” page (i.e. updated or added something) and submitted the changes. Yes | No

6.2: I updated my unit’s “Personnel List” (i.e. updated, added, or delete something) and submitted the changes. Yes | No

6.3: I had admissions and discharges to report this week ... (choose one response below)

6.3.1: ... I’m an LDO unit and my admissions/discharges were reported by my corporation, but I verified the information was correct in CROWNWeb

Yes | No

6.3.2: ... I’m an SDO unit and I had manually submitted my admissions/discharges

Yes | No

6.4: I had to report a change in a patient’s modality this week ... (choose one response below)

6.4.1: ... I’m an LDO unit and my Treatment Information was reported by my corporation, but I verified the information was correct in CROWNWeb

Yes | No

6.4.2: ... I’m an SDO unit and I had manually submitted my Treatment Information

Yes | No

6.5: I entered and submitted CMS-2728 Forms. Yes | No

6.6: I entered and submitted CMS-2746 Forms. Yes | No

6.7: I reviewed and verified the individuals on the Patient Attributes and Related Treatment (PART) screen [to be done monthly]. Yes | No

6.8: I had to report monthly clinical and vascular access data this week ... (choose one response below)

6.8.1: ... I’m an LDO unit and my clinical/vascular access data were reported by my corporation, but I verified the information was correct in CROWNWeb

Yes | No

6.8.2: ... I’m an SDO unit and I had manually submitted my clinical/vascular access data

Yes | No

6.9: In support of the work I’ve done this week, I submitted the following hardcopy material to the Network office:*

Network Patient Activity Report (nPAR) | CMS-2728 Forms | CMS-2746 Forms | Facility or Personnel Updates

Monthly Vascular Access Utilization Collection Form (SDO units only) | Patient Specific Lab Results (optional)

7. Issues / Comments

Use the space below to share any issues you had with any of the above CROWNWeb Processes, or to share any comments about your experience:

(use another sheet of paper to provide additional detail, or you may include examples of issues)

COMPLETE BOTH PAGES AND FAX THIS INFORMATION TO THE NETWORK OFFICE BY 12:00 NOON EACH FRIDAY / NETWORK 4 FAX NUMBER: (412) 325-1811 or you can complete this information using our “web based survey” ... find it by going to our website (www.esrdnetwork4.org), clicking on the CROWNWeb page, and then on the WEEKLY PHASE 2 FEEDBACK link