

## National Asthma and COPD Audit Programme (NACAP)

### Pulmonary rehabilitation (PR) audit – organisational audit dataset


Version 3.0: June 2019

Referrals and assessments				
Items	Question	Text under question	Pop-up help note	Validation
1.1	How many referrals did your service receive in the financial year 1 April 2018 to 31 March 2019?	Please record the <b>total number</b> of patient referrals (including non-COPD patients) that were received by your service in the financial year 1 April 2018 to 31 March 2019.	<i>This maps to the <b>British Thoracic Society's</b> 'Quality Standards for Pulmonary Rehabilitation in Adults' quality statement 1a and 2 (all subsequent references to these quality standards will solely list the relevant quality statement).</i>	Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>maximum of 4-digit whole numbers only</li> </ul>
1.1a	How many patients attended an initial assessment with a view to enrolling onto a PR programme in the financial year 1 April 2018 to 31 March 2019?	Please record the <b>total number</b> of patients (including non-COPD patients) that attended an initial assessment in the financial year 1 April 2018 to 31 March 2019. Do not double count patients if assessments were conducted over more than one session.		Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>maximum of 4-digit whole numbers only</li> <li>less than or equal to the number provided in 1.1</li> </ul>
1.1b	How many patients started a PR programme in the financial year 1 April 2018 to 31 March 2019?	Please record the <b>total number</b> of patients (including non-COPD patients) who started a PR programme in		Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>maximum of 4-digit whole numbers only</li> </ul>


		the financial year 1 April 2018 to 31 March 2019.  'Started' refers to patients who attended at least the first session of the scheduled PR programme.		<ul style="list-style-type: none"> <li>less than or equal to the number provided in 1.1a</li> </ul>
1.1c	How many patients completed a discharge assessment in the financial year 1 April 2018 to 31 March 2019?	Please record the <b>total number</b> of patients (including non-COPD patients) who completed a discharge assessment in the financial year 1 April 2018 to 31 March 2019.		<p>Numeric value required.</p> <p>Numeric option must be:</p> <ul style="list-style-type: none"> <li>maximum of 4-digit whole numbers only</li> <li>less than or equal to the number provided in 1.1b</li> </ul>
1.2	Where do the referrals noted in 1.1 come from?	Please enter the number of referrals received from each source.		<p>Numeric value required.</p> <ul style="list-style-type: none"> <li>Primary care - _____</li> <li>Community care - _____</li> <li>Secondary care - _____</li> <li>Self-referral - _____</li> <li>Other - _____</li> </ul> <p>Numeric option must be:</p> <ul style="list-style-type: none"> <li>maximum of 4-digit whole numbers only</li> <li>less than or equal to the number provided in 1.1</li> </ul>

## Audit participation

(The data in this section is being collected in inform clinical audit case ascertainment level for services. You will need to record this information throughout the audit period before completing this section.)

Items	Question	Text under question	 Pop-up help note	Validation
2.1	How many patients were eligible for inclusion in the <b>first reporting period</b> for the clinical audit?	Please record the number of COPD patients who attended an initial assessment appointment on or after 1 March 2019 <b>and</b> were discharged by 31 August 2019.		Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>• a whole number only</li> <li>• maximum of 4-digit number</li> </ul>
2.2	How many eligible patients identified in question 2.1 were approached and asked to consent to be included in the clinical audit?	Please record the number of eligible patients identified in question 2.1 who were approached for consent.		Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>• a whole number only</li> <li>• maximum of 4-digit number</li> <li>• less than or equal to the number provided in 2.1</li> </ul>
2.3	How many eligible patients approached in question 2.2 gave consent to be included in this audit?	Please record the number of eligible patients approached in question 2.2 who gave consent to be part of the clinical audit.		Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>• a whole number only</li> <li>• maximum of 4-digit number</li> <li>• less than or equal to the number provided in 2.2</li> </ul>


## Patient intake


Items	Question	Text under question	 Pop-up help note	Validation
3.1	To which self-reported Medical Research Council (MRC) graded COPD patients do you offer PR?	Please select all that apply.	Grade 1 – Not troubled by breathlessness except on strenuous exercise. Grade 2 – Short of breath when hurrying or walking up a slight hill.	Radio buttons six options: <ul style="list-style-type: none"> <li>• Grade 1</li> <li>• Grade 2</li> <li>• Grade 3</li> <li>• Grade 4</li> </ul>


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Patient intake				
Items	Question	Text under question	📄 Pop-up help note	Validation
			<p>Grade 3 – Walks slower than contemporaries on level ground because of breathlessness or has to stop for breath when walking at own pace.</p> <p>Grade 4 – Stops for breath after walking about 100 metres [109 yards] or after a few minutes on level ground.</p> <p>Grade 5 – Too breathless to leave the house or breathless when dressing or undressing.</p> <p><i><u>This maps to BTS quality statement 1a and 2.</u></i></p>	<ul style="list-style-type: none"> <li>• Grade 5</li> <li>• Not recorded</li> </ul> <p><b>Can select multiple options.</b></p>
3.2	Do you offer PR to COPD patients who are current smokers?		<i><u>This maps to BTS quality statement 1.</u></i>	<p>Radio buttons two options:</p> <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <p><b>Can select one option only.</b></p>
3.3	Do you offer PR to COPD patients who have previously completed a PR programme?		<p>If you re-offer PR to patients at variable time periods post completion e.g. within one year for post AECOPD (acute exacerbation of COPD) or after three years for non-AECOPD, please choose the option that applies to the majority of your patients.</p> <p>It will be assumed that if patients are offered PR within a year of completing, they will also be offered PR if completed over a year and over three years ago. Therefore, please select the shortest</p>	<p>Radio buttons four options:</p> <ul style="list-style-type: none"> <li>• Yes – if within a year of completing PR</li> <li>• Yes – if completed over one year ago</li> <li>• Yes – if completed over three years ago</li> <li>• No</li> </ul> <p><b>Can select one option only.</b></p>

Patient intake				
Items	Question	Text under question	📄 Pop-up help note	Validation
			time that must have passed before patients are able to re-enrol.  <i><u>This maps to BTS quality statement 1.</u></i>	
3.4	Do you offer PR to patients discharged from hospital with a diagnosis of acute exacerbation of COPD (AECOPD)?		<i><u>This maps to BTS quality statements 3a and 3b.</u></i>	Radio buttons two options: <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
3.5	Do you accept patients with long-term conditions other than COPD into your PR service?		<i><u>This maps to BTS quality statement 2.</u></i>	Radio buttons two options: <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
3.5a	If 'Yes', what other long-term conditions are accepted?	Please select all that apply.		Greyed out if 'No' selected at 3.5  If 'Yes' selected, radio buttons six options: <ul style="list-style-type: none"> <li>• Asthma</li> <li>• Interstitial lung disease (ILD)</li> <li>• Non-cystic fibrosis (CF) bronchiectasis</li> <li>• Other chronic respiratory diseases</li> <li>• Chronic heart failure</li> <li>• Pre/post thoracic surgery</li> </ul> <b>Can select multiple options.</b>
3.5b	If 'Yes', do patients with other long-term conditions enrol on the same programme as those with COPD?			Greyed out if 'No' selected at 3.5  If 'Yes' selected, radio buttons three options: <ul style="list-style-type: none"> <li>• Yes - all patients undertake the same programme</li> </ul>

Patient intake				
Items	Question	Text under question	 Pop-up help note	Validation
				<ul style="list-style-type: none"> <li>No - at least one specialised programme offered</li> <li>No - all patients undertake a programme specific to the disease</li> </ul> <b>Can select one option only.</b>
3.5c	Is your service funded to provide PR to non-COPD patients?	Are non-COPD patients funded for in your service level agreement?		Greyed out if 'No' selected at 3.5  Radio buttons three options: <ul style="list-style-type: none"> <li>Yes - all conditions recorded at question 3.5a are funded</li> <li>Yes - at least one condition recorded at 3.5a is funded</li> <li>No</li> </ul> <b>Can select one option only.</b>


Structure and content of programme <i>(These answers should be based on the service provided to patients with COPD.)</i>				
Items	Question	Text under question	 Pop-up help note	Validation
<b>Assessment information</b>				
4.1	At how many sites do you currently offer assessments/centre-based PR?	Please enter the number of different sites at which you perform assessments and run PR programmes.		Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>a whole number only</li> <li>maximum of 2-digit number</li> </ul>
4.2	Do your assessments/centre-based PR programmes run differently at different sites?	Please answer 'Yes' if any aspect of your PR programme differs per site e.g. different patient groups, different exercise tests or different		Radio buttons three options: <ul style="list-style-type: none"> <li>Yes</li> <li>No</li> <li>N/A</li> </ul> <b>Can select one option only.</b>

Structure and content of programme (These answers should be based on the service provided to patients with COPD.)				
Items	Question	Text under question	 Pop-up help note	Validation
		<p>exercise prescriptions methods are used at different sites.</p> <p>Please answer N/A if your service only has one site.</p>		
4.3	What is the typical duration of your centre-based PR programme?	If you run multiple PR programmes differently at different sites, please select all that apply.	<i>This maps to BTS quality statement 4.</i>	<p>Radio buttons seven options:</p> <ul style="list-style-type: none"> <li>• Less than 4 weeks</li> <li>• 4 weeks</li> <li>• 5 weeks</li> <li>• 6 weeks</li> <li>• 7 weeks</li> <li>• 8 weeks</li> <li>• More than 8 weeks</li> </ul> <p><b>Can select multiple options.</b></p>
4.4	How many supervised centre-based PR sessions per week are patients expected to attend?	If you run multiple PR programmes differently at different sites, please select all that apply.	<i>This maps to BTS quality statement 4.</i>	<p>Radio buttons four options:</p> <ul style="list-style-type: none"> <li>• 1</li> <li>• 2</li> <li>• 3</li> <li>• More than 3</li> </ul> <p><b>Can select multiple options.</b></p>
4.5	Do you offer a home-based PR programme?			<p>Radio buttons two options:</p> <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <p><b>Can select one option only.</b></p>
4.5a	If 'Yes', are patients offered initial and discharge assessments?			<p>Greyed out if 'No' selected for 4.5</p> <p>Radio buttons two options:</p> <ul style="list-style-type: none"> <li>• Yes</li> </ul>

Structure and content of programme (These answers should be based on the service provided to patients with COPD.)				
Items	Question	Text under question	 Pop-up help note	Validation
				<ul style="list-style-type: none"> <li>No</li> </ul> <b>Can select one option only.</b>
4.5b	If 'Yes', are patients offered supervised PR sessions in their homes?			Greyed out if 'No' selected for 4.5  Radio buttons two options: <ul style="list-style-type: none"> <li>Yes</li> <li>No</li> </ul> <b>Can select one option only.</b>
4.5c	If 'Yes', what is the typical duration of your home-based PR programme?			Greyed out if 'No' selected for 4.5b  Radio buttons seven options: <ul style="list-style-type: none"> <li>Less than 4 weeks</li> <li>4 weeks</li> <li>5 weeks</li> <li>6 weeks</li> <li>7 weeks</li> <li>8 weeks</li> <li>More than 8 weeks</li> </ul> <b>Can select multiple options.</b>
4.5d	If 'Yes', how many supervised home-based PR sessions per week are patients offered?			Greyed out if 'No' selected for 4.5b  Radio buttons four options: <ul style="list-style-type: none"> <li>1</li> <li>2</li> <li>3</li> <li>More than 3</li> </ul> <b>Can select multiple options.</b>
4.6	Do you send patients written information about your PR		<i>This maps to BTS quality statement 3a.</i>	Radio buttons two options: <ul style="list-style-type: none"> <li>Yes</li> </ul>



Structure and content of programme (These answers should be based on the service provided to patients with COPD.)				
Items	Question	Text under question	Pop-up help note	Validation
	programme prior to their initial assessment?			<ul style="list-style-type: none"> <li>No</li> </ul> <b>Can select one option only.</b>
4.7	Do you run/refer to additional services that people can attend whilst awaiting a PR course?	Additional services may include: respiratory groups, breathe easy groups, step up/step down groups etc.		Radio buttons two options: <ul style="list-style-type: none"> <li>Yes</li> <li>No</li> </ul> <b>Can select one option only.</b>
4.8	Is transport funded for patients?	Please choose 'Yes' if any funding is provided, even if only for a subset of patients.		Radio buttons three options: <ul style="list-style-type: none"> <li>Yes</li> <li>No</li> </ul> <b>Can select one option only.</b>
4.9	Which measures of aerobic exercise performance do you use at assessments or refer to as outcome measures?	Please select all that apply.	<i><u>This maps to BTS quality statements 8 and 9.</u></i>	Radio buttons four options: <ul style="list-style-type: none"> <li>Endurance shuttle walk test (ESWT)</li> <li>Incremental shuttle walk test (ISWT)</li> <li>Sit-to-stand (5STS)</li> <li>Six minute walk test (6MWT)</li> </ul> <b>Can select multiple options.</b>
4.9a	If '6MWT', how many of your sites use a 30-metre course?	If your service only has one site, either choose 'All sites use a 30m course' or 'No sites use a 30m course'.		Greyed out if '6MWT' not selected for 4.9  If '6MWT' selected, radio buttons three options: <ul style="list-style-type: none"> <li>All sites use a 30m course</li> <li>At least 1 site uses a 30m course</li> <li>No sites use a 30m course</li> </ul> <b>Can select one option only.</b>
4.10	Is muscle strength measured at assessment?		<i><u>This maps to BTS quality statements 8 and 9.</u></i>	Radio buttons two options: <ul style="list-style-type: none"> <li>Yes</li> <li>No</li> </ul> <b>Can select one option only.</b>


Structure and content of programme				
<i>(These answers should be based on the service provided to patients with COPD.)</i>				
Items	Question	Text under question	 Pop-up help note	Validation
4.10a	If 'Yes', how is muscle strength measured?	Please select all that apply.		<p>Greyed out if 'No' selected at 4.10</p> <p>If 'Yes' selected, radio buttons five options:</p> <ul style="list-style-type: none"> <li>• Dynamometer</li> <li>• Strain gauge</li> <li>• 1RM (repetition maximum)</li> <li>• 10RM</li> <li>• Sit-to-stand (5STS)</li> </ul> <p><b>Can select multiple options.</b></p>
4.11	Are any of the following measured at assessment?	<p>These measures can be collected at initial and/or discharge assessment.</p> <p>Please select 'No' or all that apply.</p>	<u><i>This maps to BTS quality statement 8 and 9.</i></u>	<p>Radio buttons eight options:</p> <ul style="list-style-type: none"> <li>• Activities of daily living scale</li> <li>• Hospital Anxiety and Depression Scores</li> <li>• Knowledge gained during education</li> <li>• Other psychological status scores</li> <li>• Patient satisfaction</li> <li>• Patient experience</li> <li>• Physical activity</li> <li>• No</li> </ul> <p><b>Can select either 'No' or multiple options.</b></p>
4.11a	If 'Physical activity' is measured, please select how this is done.	'Device' could include accelerometers and pedometers.		<p>Greyed out if 'Physical activity' not selected for 4.11</p> <p>If 'Physical Activity' selected, radio buttons two options:</p> <ul style="list-style-type: none"> <li>• Device</li> <li>• Questionnaire</li> </ul> <p><b>Can select multiple options.</b></p>


**Exercise**

Structure and content of programme (These answers should be based on the service provided to patients with COPD.)				
Items	Question	Text under question	Pop-up help note	Validation
4.12	Is aerobic training offered during the PR programme?	Aerobic training refers to endurance (or submaximal) whole body exercise most commonly performed using walking (treadmill or corridor) or on an exercise bike.	<i>This maps to BTS quality statement 5.</i>	Radio buttons two options: <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
4.12a	What type of aerobic training is undertaken during the PR programme?	Please tick that apply.		Greyed out if 'No' selected for 4.12  Radio buttons three options: <ul style="list-style-type: none"> <li>• Cycling</li> <li>• Walking</li> <li>• Other</li> </ul> <b>Can select multiple options.</b>
4.13	Is aerobic training individually prescribed?			Greyed out if 'No' selected for 4.12  Radio buttons two options: <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
4.13a	How is aerobic training prescribed?	Please tick all that apply.		Greyed out if only 'No' selected for 4.13  If 'Yes' selected, radio buttons five options: <ul style="list-style-type: none"> <li>• Borg or perceived exertion scores</li> <li>• Endurance shuttle walking test (ESWT) level from ISWT</li> <li>• From six-minute walk test (6MWT)</li> <li>• From incremental shuttle walk test (ISWT)</li> </ul> <b>Can select multiple options.</b>

## Structure and content of programme

(These answers should be based on the service provided to patients with COPD.)

Items	Question	Text under question	 Pop-up help note	Validation
4.13b	What intensity of aerobic exercise prescription is used?		<u><i>This maps to BTS quality statement 5.</i></u>	<p>Greyed out if only 'No' selected for 4.13</p> <p>Greyed out if only 'Borg or perceived exertion scores' selected for 4.9a</p> <p>Radio buttons four options:</p> <ul style="list-style-type: none"> <li>• &lt;65%</li> <li>• 65 - &lt;75%</li> <li>• 75 - 85%</li> <li>• &gt;85%</li> </ul> <p><b>Can select one option only.</b></p>
4.14	Is resistance training offered during the PR programme?	Resistance (or strength) training refers to the generation of force by specific muscle groups (either free weights or using a multigym) with the aim of improving muscle strength.	<u><i>This maps to BTS quality statement 5.</i></u>	<p>Radio buttons two options:</p> <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <p><b>Can select one option only.</b></p>
4.14a	What resistance training equipment is provided during the PR programme?	Please tick all that apply.		<p>Greyed out if only 'No' selected for 4.14</p> <p>Radio buttons four options:</p> <ul style="list-style-type: none"> <li>• Free weights</li> <li>• Resistance bands</li> <li>• Weight machines</li> <li>• Other</li> </ul> <p><b>Can select multiple options.</b></p>
4.15	Is resistance training individually prescribed?			<p>Greyed out if only 'No' selected for 4.14</p> <p>Radio buttons two options:</p>

Structure and content of programme				
<i>(These answers should be based on the service provided to patients with COPD.)</i>				
Items	Question	Text under question	 Pop-up help note	Validation
				<ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
4.15a	How is resistance training prescribed?	Please tick all that apply.	<i><u>This maps to BTS quality statement 5.</u></i>	Greyed out if 'No' selected for 4.15  If 'Yes' selected, radio buttons three options: <ul style="list-style-type: none"> <li>• Borg or perceived exertion scores</li> <li>• Measurement of 1RM or strength</li> <li>• Other</li> </ul> <b>Can select multiple options.</b>
4.16	Are patients advised to do unsupervised home exercise during their PR programme?		<i><u>This maps to BTS quality statement 5.</u></i>	Radio buttons two options: <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
Education				
4.17	How many hours of education are scheduled during a centre-based PR programme?	Record as a whole number.  Please give the time spent on education during a standard completed programme to the nearest hour.  <i>This maps to BTS quality statement 6.</i>		Numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>• maximum of 2-digit whole numbers only</li> </ul>
4.18	How is education provided?	Please select all that apply.		Radio buttons seven options: <ul style="list-style-type: none"> <li>• CD given to patients</li> <li>• DVD given to patients</li> <li>• Face-to-face taught group sessions</li> </ul>


Structure and content of programme (These answers should be based on the service provided to patients with COPD.)				
Items	Question	Text under question	Pop-up help note	Validation
				<ul style="list-style-type: none"> <li>Information on a dedicated website</li> <li>Telecare or other remote delivery</li> <li>Written hand-outs</li> <li>Other</li> </ul> <b>Can select multiple options.</b>
4.18a	If you offer face-to-face taught group sessions, who delivers these?	<p>'Volunteer' refers to any non-healthcare professional that delivers or supports to deliver face-to-face taught group sessions to your patients.</p> <p>Please select all that apply.</p>	<u><i>This maps to BTS quality statement 6.</i></u>	<p>Greyed out if 'Face-to-face' is not selected at 4.18</p> <p>If 'Face-to-face' selected, radio buttons 17 options:</p> <ul style="list-style-type: none"> <li>Clinical psychologist</li> <li>Dietician</li> <li>Exercise physiologist</li> <li>Fitness instructor</li> <li>GP</li> <li>Health care/therapy assistant</li> <li>Health psychologist</li> <li>Occupational therapist</li> <li>Pharmacist</li> <li>Physiotherapist</li> <li>Registered nurse</li> <li>Respiratory physician</li> <li>Respiratory physiologist</li> <li>Social worker</li> <li>Technical instructor</li> <li>Volunteer</li> <li>Other</li> </ul> <b>Can select multiple options.</b>

Structure and content of programme				
<i>(These answers should be based on the service provided to patients with COPD.)</i>				
Items	Question	Text under question	Pop-up help note	Validation
4.18b	If you offer face-to-face taught group sessions, what do these sessions cover?	Please tick all that apply.	<a href="#">This maps to BTS quality statement 6.</a>	<p>Greyed out if 'Face-to-face' is not selected at 4.18</p> <p>If 'Face-to-face' selected, radio buttons 21 options:</p> <ul style="list-style-type: none"> <li>• Advance directives</li> <li>• Anatomy, physiology, pathology—in health and in chronic respiratory disease</li> <li>• Anxiety management and relaxation</li> <li>• Benefits system and welfare rights</li> <li>• Chest clearance techniques</li> <li>• Confidence, self-efficacy and self-management</li> <li>• Dyspnoea/symptom management</li> <li>• Energy conservation/pacing</li> <li>• Exacerbation management (including coping with setbacks and relapses)</li> <li>• Goal setting and rewards</li> <li>• Identifying and changing beliefs about exercise and health related behaviours</li> <li>• Loving relationships/sexuality</li> <li>• Managing travel</li> <li>• Medication (including oxygen therapy)</li> <li>• Nutritional advice</li> <li>• Opportunities to exercise after pulmonary rehabilitation</li> <li>• Patient support groups</li> <li>• Relaxation</li> </ul>

Structure and content of programme				
<i>(These answers should be based on the service provided to patients with COPD.)</i>				
Items	Question	Text under question	Pop-up help note	Validation
				<ul style="list-style-type: none"> <li>Smoking cessation</li> <li>The benefits of physical exercise</li> <li>Use of self-management plans</li> <li>Other</li> </ul> <b>Can select multiple options.</b>
4.19	Do you routinely provide patients with an individualised structured, written plan for ongoing exercise maintenance?	Please tick all that apply.	<i><u>This maps to BTS quality statement 7.</u></i>	Radio buttons two options: <ul style="list-style-type: none"> <li>Yes</li> <li>No</li> </ul> <b>Can select one option only.</b>

Programme provision				
Items	Question	Text under question	Pop-up help note	Validation
5.1	Which Clinical Commissioning Group (CCG) commissions your service?	<p>If you are a service in Scotland or Wales, please choose N/A.</p> <p>If you are a service in England, please choose which CCG commissions your services. If you are commissioned by multiple CCGs, please select all that apply.</p> <p>Please type in the name of the CCG in the answer field and a list of relevant options will appear for you to select.</p>		Only available to English services.  Pre-populated list of English CCGs.  <b>Can select multiple options.</b>



Programme provision				
Items	Question	Text under question	 Pop-up help note	Validation
5.2	What type of organisation provides your service?	ICOs include any organisations that are both acute and non-acute/community trusts.  Please select all that apply.		Radio buttons nine options: <ul style="list-style-type: none"> <li>• Charity</li> <li>• Community interest company (CIC)</li> <li>• Council</li> <li>• GP federation</li> <li>• Integrated Care Organisations (ICO)</li> <li>• NHS acute trust</li> <li>• NHS Health Board</li> <li>• NHS non-acute or community trust</li> <li>• Private healthcare provider</li> </ul> <b>Can select multiple options.</b>
5.3	What type of funding does your service have?	If your service holds both fixed-term and a non-fixed term contracts for the same service, select both and record the number of years of future funding your service has in question 5.3a.  Please tick all that apply.	<i>This maps to BTS quality statement 10.</i>	Radio buttons two options: <ul style="list-style-type: none"> <li>• Fixed-term</li> <li>• Non fixed-term</li> </ul> <b>Can select multiple options.</b>
5.3a	If 'Fixed-term', how many years' future funding does the service have?	Please enter to the nearest whole year.	<i>This maps to BTS quality statement 10.</i>	Greyed out if 'Fixed-term' is not selected at 5.3  If 'Fixed-term' selected, numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>• maximum of 2-digit whole numbers only</li> <li>• less than 30</li> </ul>

Staffing																						
Items	Question	Text under question	Pop-up help note	Validation																		
6.1	Is there a named clinical lead for the service?	<p>The clinical lead is the lead clinician that has day to day responsibilities and sets the strategic direction for the programme.</p> <p>Please note that this answer will <b>not</b> need to be re-entered as an answer for 6.2.</p>	<p>A clinical lead is someone who takes overall responsibility for the organisation and delivery of the service. This will include at least partial responsibility for quality assurance, safety and staff line management.</p> <p>Please note that this answer will <b>not</b> need to be re-entered as an answer for 6.2.</p>	<p>Radio buttons three options:</p> <ul style="list-style-type: none"> <li>• Yes – filled</li> <li>• Yes – currently unfilled</li> <li>• No</li> </ul> <p><b>Can select one option only.</b></p>																		
6.1a	<p>If 'Yes - filled', what is their profession, grade and WTE?</p> <table border="1"> <thead> <tr> <th>Profession</th> <th>Band</th> <th>WTE</th> </tr> </thead> <tbody> <tr> <td>Doctor</td> <td></td> <td></td> </tr> <tr> <td>Exercise practitioner</td> <td></td> <td></td> </tr> <tr> <td>Qualified nurse</td> <td></td> <td></td> </tr> <tr> <td>Qualified occupational therapist</td> <td></td> <td></td> </tr> <tr> <td>Qualified physiotherapist</td> <td></td> <td></td> </tr> </tbody> </table>	Profession	Band	WTE	Doctor			Exercise practitioner			Qualified nurse			Qualified occupational therapist			Qualified physiotherapist			<p>Up to two decimal places.</p> <p>Full time = 1.00 WTE (Whole Time Equivalent)</p> <p>If your service has more than one allocated lead, please record the profession, band and number of WTEs for each type of post e.g. 2 x part-time band 6 qualified physiotherapists would be WTE=1.0 in the same row but 1 x part-time band 6 physiotherapist and 1 x part-time band 7 physiotherapist would be on separate rows WTE=0.5 for each.</p>	<p>Possible alternative job titles:</p> <p><b>Doctor:</b> includes GP and any secondary care physician.</p> <p><b>Exercise practitioner:</b> exercise instructor, exercise physiologist.</p> <p><b>Qualified nurse:</b> specialist nurse, nurse practitioner, consultant nurse.</p> <p><b>Qualified occupational therapist:</b> clinical specialist occupational therapist.</p> <p><b>Qualified physiotherapist:</b> including specialised physiotherapist, consultant physiotherapist, and senior physiotherapist.</p>	<p>Greyed out if 'Yes – currently unfilled' or 'No' selected at 6.1</p> <p>If 'Yes':</p> <p>'Band' column, nine options:</p> <ul style="list-style-type: none"> <li>• Pay band 4</li> <li>• Pay band 5</li> <li>• Pay band 6</li> <li>• Pay band 7</li> <li>• Pay band 8a</li> <li>• Pay band 8b</li> <li>• Pay band 8c</li> <li>• Pay band 8d</li> <li>• Pay band 9</li> </ul> <p><b>Can select one option only per row.</b></p> <p>'WTE' column: Numeric value required.</p>
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Staffing																																					
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			If your organisation does not use the Agenda for Change bandings, please still record posts under the equivalent band.	Numeric option must be: <ul style="list-style-type: none"> <li>maximum of 1-digit number to 2 decimal places (values with more than 2 decimal places will be rounded up or down)</li> </ul>																																	
6.1b	If 'Yes', does the clinical lead receive dedicated sessional time to coordinate and manage/develop the service?	Is the coordination and management/development of the service a dedicated part of the clinical lead's job plan?		Greyed out if 'Yes – currently unfilled' or 'No' selected at 6.1  If 'Yes', radio buttons two options: <ul style="list-style-type: none"> <li>Yes</li> <li>No</li> </ul> <b>Can select one option only.</b>																																	
6.2	How many types of posts are funded for the service?  <table border="1"> <thead> <tr> <th>Profession</th> <th>Band</th> <th>WTE</th> </tr> </thead> <tbody> <tr><td>Admin and clerical</td><td></td><td></td></tr> <tr><td>Dietician/Nutritionist</td><td></td><td></td></tr> <tr><td>Exercise practitioner</td><td></td><td></td></tr> <tr><td>Healthcare support worker</td><td></td><td></td></tr> <tr><td>Pharmacist</td><td></td><td></td></tr> <tr><td>Psychologist</td><td></td><td></td></tr> <tr><td>Qualified nurse</td><td></td><td></td></tr> <tr><td>Qualified physiotherapist</td><td></td><td></td></tr> <tr><td>Qualified occupational therapist</td><td></td><td></td></tr> <tr><td>Therapy assistant</td><td></td><td></td></tr> </tbody> </table>	Profession	Band	WTE	Admin and clerical			Dietician/Nutritionist			Exercise practitioner			Healthcare support worker			Pharmacist			Psychologist			Qualified nurse			Qualified physiotherapist			Qualified occupational therapist			Therapy assistant			Please note that you <b>do not</b> need to re-enter your answer to 6.1a here.  Up to two decimal places.  Full time = 1.00 WTE (Whole Time Equivalent)  Please give the band and number of WTEs for each post.  If two posts are funded at the same band, these can be recorded in the same row e.g. 2 x full-time band 7 qualified	'Funding' refers to the proportion of an individual's job plan that has been agreed with the provider to allow the individual to work in the service.  Please take your staff count as of the 1 August 2019, even if staff were absent.  Please note that you <b>do not</b> need to re-enter your answer to 6.1 here.  Possible alternative job titles:  <b>Admin and clerical:</b> secretary, admin assistant, clerk, support officer.	'Band' column, 12 options: <ul style="list-style-type: none"> <li>Pay band 1</li> <li>Pay band 2</li> <li>Pay band 3</li> <li>Pay band 4</li> <li>Pay band 5</li> <li>Pay band 6</li> <li>Pay band 7</li> <li>Pay band 8a</li> <li>Pay band 8b</li> <li>Pay band 8c</li> <li>Pay band 8d</li> <li>Pay band 9</li> </ul> <b>Can select one option only per row.</b>  'WTE' column: Numeric value required.
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Items	Question	Text under question	Pop-up help note	Validation
		<p>physiotherapists can be recorded as: WTE=2.0</p> <p>If the same roles exist at different bands then these would be recorded on different rows.</p>	<p><b>Exercise practitioner:</b> exercise instructor, exercise physiologist.</p> <p><b>Qualified nurse:</b> specialist nurse, nurse practitioner, consultant nurse.</p> <p><b>Qualified physiotherapist:</b> specialised physiotherapist, consultant physiotherapist, senior physiotherapist.</p> <p><b>Qualified occupational therapist:</b> clinical specialist occupational therapist.</p> <p>If your organisation does not use the Agenda for Change bandings, please still record posts under the equivalent band.</p>	<p>Numeric option must be:</p> <ul style="list-style-type: none"> <li>maximum of 2-digit number to 2 decimal places (values with more than 2 decimal places will be rounded up or down)</li> </ul>
6.3	What is the current WTE of staff vacancies at the service?	<p>Up to two decimal places.</p> <p>Full time = 1.00 WTE (Whole Time Equivalent)</p> <p>Please give the number of WTEs in total across all vacancies.</p>	Definition of current as at 1 August 2019.	<p>Numeric value required.</p> <p>Numeric option must be:</p> <ul style="list-style-type: none"> <li>maximum of 2-digit number to 2 decimal places (values with more than 2 decimal places will be rounded up or down).</li> </ul>
6.4	What are the designations of the staff who contribute, but are non-funded, to the service?	Please tick all that apply.	Please list members of staff who make a contribution to the delivery of the service (for example providing education sessions or materials) but	<p>Radio buttons 13 options:</p> <ul style="list-style-type: none"> <li>Admin and clerical</li> <li>Community exercise instructor</li> <li>Dietician/Nutritionist</li> </ul>

Staffing				
Items	Question	Text under question	Pop-up help note	Validation
			<p>do not have funded time within their job plans to do so.</p> <p>Please take your staff count as at 1 August 2019.</p> <p>Possible alternative job titles:</p> <p><b>Admin and clerical:</b> secretary, admin assistant, clerk, support officer.</p> <p><b>Exercise practitioner:</b> exercise instructor, exercise physiologist.</p> <p><b>Lay person/patient representative:</b> any patient representatives or non-healthcare professionals e.g. third sector support workers.</p> <p><b>Qualified nurse:</b> specialist nurse, nurse practitioner, consultant nurse.</p> <p><b>Qualified physiotherapist:</b> specialised physiotherapist, consultant physiotherapist, senior physiotherapist.</p> <p><b>Qualified occupational therapist:</b> clinical specialist occupational therapist.</p>	<ul style="list-style-type: none"> <li>• Exercise practitioner</li> <li>• Healthcare support worker</li> <li>• Lay person / patient representative</li> <li>• Pharmacist</li> <li>• Physician</li> <li>• Psychologist</li> <li>• Qualified nurse</li> <li>• Qualified physiotherapist</li> <li>• Qualified occupational therapist</li> <li>• Social worker</li> <li>• Therapy Assistant</li> </ul> <p><b>Can select multiple options.</b></p>

Staffing				
Items	Question	Text under question	Pop-up help note	Validation
6.5	Is there audit support provided?		Support by the provider organisation for requesting case-files and entering data for audits (local or national).	Radio buttons two options: <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
6.5a	How many WTE of audit support are provided?	Up to two decimal places.  Full time = 1.00 WTE (Whole Time Equivalent)  Please give the number of WTEs (filled or unfilled).		Greyed out if 'No' selected at 6.5.  If 'Yes', numeric value required.  Numeric option must be: <ul style="list-style-type: none"> <li>• maximum of 1-digit number to 2 decimal places (values with more than 2 decimal places will be rounded up or down).</li> </ul>

Record keeping				
Items	Question	Text under question	Pop-up help note	Validation
7.1	Do you have a Standard Operating Procedure (SOP) detailing local policies?	These can include trust policies if appropriate and if incorporated into the departmental SOP.	<i>This maps to BTS quality statement 10.</i>	Radio buttons two options: <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> </ul> <b>Can select one option only.</b>
7.1a	If 'Yes', what does the Standard Operating Procedure include?	The information relates specifically to the SOP's that are developed and held within the PR department.  Please tick all that apply.	<i>This maps to BTS quality statement 10.</i>	Greyed out if 'No' selected at 7.1.  Radio buttons 18 options: <ul style="list-style-type: none"> <li>• Accessibility</li> <li>• Capacity</li> <li>• DNA management</li> <li>• Environment: facilities, kit and equipment</li> <li>• Maintaining dignity and respect</li> </ul>

Record keeping				
Items	Question	Text under question	 Pop-up help note	Validation
				<ul style="list-style-type: none"> <li>• Managing waiting times</li> <li>• Measurement of exercise outcomes</li> <li>• Medication management</li> <li>• Minimum staffing levels</li> <li>• Patient and carer experience/satisfaction/feedback</li> <li>• Patients needing oxygen</li> <li>• Patient safety</li> <li>• Patient security</li> <li>• Risk assessments</li> <li>• Staff training, development and well-being</li> <li>• Transition care</li> <li>• Use of IT equipment</li> <li>• Whistle blowing</li> </ul> <p><b>Can select multiple options.</b></p>