MyChart Bedside Staff Survey

MyChart Bedside is a patient portal application on an electronic tablet that will be offered to parents of children under age 12 admitted to the hospitalist and trauma services on the 5th floor (P5) at AFCH.

Through this survey, we hope to better understand how this technology will affect healthcare staff. **Completion of this survey is voluntary and your responses are confidential.** Your name and other identifying information will not be associated with your answers. It will take **10 minutes or less** to complete this survey.

**Instructions:**

- This survey is intended for **staff working on the 5th floor of AFCH** where MyChart Bedside will be used.
- Please try to answer every question in this survey. If you feel unsure about a question, please answer it to the best of your ability.
Section A. About your job and the implementation of MyChart Bedside

1. What is your current job position? (check one)

- □ 1 HUC
- □ 2 NP
- □ 3 Staff RN
- □ 4 Physical or occupational therapist
- □ 5 Pharmacist
- □ 6 Child life
- □ 7 Attending physician
- □ 8 PGY 1 (intern)
- □ 9 PGY 2 (2nd year resident physician)
- □ 10 PGY 3 (3rd year resident physician)
- □ 11 Other __________________________

2. What do you think about the information you received about MyChart Bedside? (check one for each)

   a. Sufficient □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 Insufficient

   b. Timely □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 Not timely

   c. Useful □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 Useless

3. Did you participate in either of these committees? (check all that apply)

- □ 1 MyChart Bedside Project Team
- □ 2 MyChart Bedside Steering Committee

4. What number best reflects your acceptance of MyChart Bedside? (check one)

   Dislike very much and don’t want to use at our hospital □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 Like very much and eager to use at our hospital
### Section B. About MyChart Bedside.

In general, when you think about your patients’ parents who used MyChart Bedside, please check **one** box to indicate how much you agree or disagree with each statement below.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither Agree nor Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. MyChart Bedside will be easy for parents to use.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>6. MyChart Bedside will improve parent communication with his/her child's nurse.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>7. MyChart Bedside will improve parent communication with his/her child's doctor(s).</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>8. Parents will discover errors in their child's medication list using MyChart Bedside.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>9. MyChart Bedside will reduce errors in patient care.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>10. The information from MyChart Bedside will help parents monitor their child's health condition.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>11. The information from MyChart Bedside will help parents understand the care their child needs.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>12. The information from MyChart Bedside will help parents make decisions about their child’s care.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>13. The information from MyChart Bedside will help parents care for their child’s health care needs.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>14. MyChart Bedside will increase my workload.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>15. MyChart Bedside will increase my work satisfaction.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>16. MyChart Bedside will improve the quality of patient care.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>17. Overall, parents will be satisfied with MyChart Bedside.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>18. Overall, I will be satisfied with MyChart Bedside.</td>
<td>☐ 1</td>
<td>☐ 2</td>
<td>☐ 3</td>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
</tbody>
</table>

19. What challenges do you anticipate facing when parents start to use MyChart Bedside? (check **all** that apply)
   - ☐ 1 I will be too busy to incorporate it into my workflow
   - ☐ 2 It will be too hard for me to learn to use
   - ☐ 3 The information will not be useful for parents
   - ☐ 4 The tablets will get lost or damaged
   - ☐ 5 There will not be enough computer technical support
   - ☐ 6 Parents will know test results before their child’s doctor or nurse
   - ☐ 7 Parents will have too many questions about the information from MyChart Bedside
   - ☐ 8 Staff will be skeptical of it
   - ☐ 9 None
   - ☐ 10 Other, please specify  __________________________________________________________________________
20. What 3 things do you **like** most about MyChart Bedside?

1.

2.

3.

21. What **concerns** do you have about MyChart Bedside?

22. Is there anything you wish MyChart Bedside or the tablet included?

**Section C. About you**

23. What is your age? (check **one**)
   - □ 1 18-24
   - □ 2 25-34
   - □ 3 35-44
   - □ 4 45-54
   - □ 5 55-64
   - □ 6 65 or older

24. What is the highest level of education you completed? (check **one**)
   - □ 1 High school graduate or GED
   - □ 2 Some college or 2-year degree
   - □ 3 4-year college graduate
   - □ 4 More than 4-year college degree

25. Outside of your job, how often do you text message, email or use applications (apps) on a phone or tablet? (check **one**)
   - □ 1 Daily
   - □ 2 Several times a week
   - □ 3 Once a week or less

**Thank you for taking the time to complete this survey!**

If you have questions about this survey, please contact Michelle Kelly at mkelly@pediatrics.wisc.edu