

Capstone Data & Information Request

Healthcare Organization: _____

Fiscal Year Start Date:

Approx. Number of Employees:

Number of

- Senior Leaders:
- Middle Managers (aka Department Directors):
- Other Supervisors/Assistant Managers/Leads:

Month/Year of last employee satisfaction/engagement survey (if applicable):

Vendor or Self-Administered:

Surveying Frequency (annual, every 2 years, etc.):

Employee Turnover Rate (total/all causes):

INSTRUCTIONS

- Scan/email the information above and any available data/information from Page 2 to: whitnee@capstoneleadership.net
- Please place this in the email Subject line: **DATA/INFO (+ Your Organization's Name)**
- No need to submit documents in one batch; please send each document as it is collected in the organization.
- If you don't have any requested information readily available and/or in a ready to share format, please let us know before taking the time to create reports or obtain data.

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√	Requested Information	Notes/Comments
DOCUMENTS: (Don't create something you don't have)		
	Strategic Plan (mission, vision, values, strategies, goals)	
	Organizational Chart	
	Standards of Behavior	
	Annual Performance Evaluation Form(s) (applicable to leaders)	
	Organization-wide communication plan	
DATA/REPORTS: (How do you currently report it? – Send that to us.)		
	Employee Satisfaction/Engagement Report (most recent report; any trending reports for multi-year trends)	
	Physician/Provider Satisfaction/Engagement Report (most recent report; any trending reports for multi-year trends)	
	Patient Satisfaction Reports	
	Culture of Safety Survey Report	
	Quality/Safety Measurement Reports	
CAPSTONE SURVEYS: (Survey links and instructions will be provided by Capstone.)		
	Leadership Learning Needs Survey	
	Solutions Checklist Survey	
	Change Assessment Survey	