# Your Voice Matters (YVM) Report User Notes

## **Database Information**

All YVM data is collected and extracted from the Ontario Health (Cancer Care Ontario) – Interactive Symptom Assessment and Collection (ISAAC) Replication Database. Cancer system activity is extracted from the Activity Level Reporting (ALR) database.

- Measures and indicators relying solely on data in the ISAAC Replication Database will be reported up the previous month. For example, a user who opens the report in June 2025 will only be able to see counts of YVM prompts and surveys completed up to May 2025.
- Sections of the report that require data from the ALR database, such as the prompt or
  participation rate (i.e., the "uptake indicators") will be lagged by two months to align with
  data availability for this data source. For example, a user who opens the report in June 2025
  will only be able to see information about the uptake indicators up to April 2025.

# **Report Filters**

The report filters below are applied to specific pages of the YVM Report (not every filter will be found on every page):

- Time: Measures and indicators are presented by month and fiscal quarter. Month and fiscal quarter are determined from the date when the patient is prompted to complete and/or submits the YVM survey. Records are aggregated and displayed by fiscal quarter only when data for all the months of the quarter are available. Monthly data is available up to and including the most recently completed month based on the database update frequency and data availability timeframe. Users can select multiple time periods at once.
- Appointment type: Based on the patient-reported appointment type (entered on question 1 of the YVM survey), YVM surveys are classified as in-person or virtual care (telephone or video).
- Survey completeness: All YVM surveys are classified as complete or partially complete. A 'complete' survey refers to surveys in which the submit button on the final page was pressed by the patient, regardless of how many questions were completed. A 'partially completed' survey captures all surveys in which at least one survey question was completed, but the submit button was not pressed by the patient. In both cases, individual questions may have missing responses due to built-in skip-logic in the survey, and/or patients electing not to complete them.
- Channel: YVM surveys can be completed via kiosks located on-site at facilities, or via a link to
  the home channel on a personal or hospital-supplied device. In rare cases, surveys may be
  classified under 'other channel' which includes YVM surveys manually uploaded to the ISAAC
  system.

Version date: August 2025

### **Data Notes and Caveats**

### **Reporting Considerations**

- Patients with an invalid or missing health card number (HCN) are not excluded from the
  report measures or indicators. These patients still have appropriate identifiers in the ISAAC
  system for record linkages within the database. This ISAAC-generated identifier is facilityspecific and may lead to the double counting of patients, so provincial totals use the patient
  HCN. Due to these patients, provincial totals using HCN may be slightly undercounted, and
  differences may be observed when comparing facility-level totals against the provincial total.
- In rare cases, the appointment type for the survey (in-person versus virtual care) is
  unavailable due to missing data in question 1 of the survey. This question is mandatory, but
  occasionally data is missing due to a server issue with the Interactive Symptom Assessment
  and Collection (ISAAC) platform (i.e., the electronic platform collecting all submitted YVM
  surveys from participating facilities). Surveys with this data quality issue are excluded from all
  measures and indicators in this report.
- Except for question 1, the questions on the YVM survey are optional and the built-in skip logic for the YVM survey may mean that certain questions are never seen by the patient based on their earlier selections. This may lead to differing survey or patient totals across the various measures and indicators of this report.

#### **Data Suppression**

- Indicators which include patient characteristics (such as age, sex, disease site or appointment information) and/or patient perspectives (such as responses from the YVM survey) are considered potentially identifiable. To mitigate the risk of patient re-identification, the numerator and denominator will be suppressed when at least one of these values is between 1 and 5. Suppressed values are represented with <6 in the report.</p>
- To mitigate the risk of patient re-identification, facilities with less than six patients reported to ALR in a calendar month are reported with a participation and prompt rate of 0%. The T2PS metric (an ALR data element used to identify and calculate the total number of cancer patients seen at that site in the specified month) is replaced with a value of 0.
- Indicators which do not contain patient characteristics or perspectives, such as survey and prompt volumes, are reported without small cell suppression.

### **Data Collection Considerations/Limitations**

- Within each channel (kiosk and home channel), patients can complete the YVM survey every 30 days. The prompt logic is channel agnostic, meaning patients can complete YVM more than once within the same 30-day window if completed on separate channels.
- For some participating sites, YVM has been disabled on kiosks and all surveys are completed via the home channel.
- Patients prompted to complete YVM at multiple participating facilities will be counted under multiple sites (if applicable). These patients are counted only once in the provincial total.

Version date: August 2025

- A survey "prompt" is counted when a patient is presented with the YVM Consent question, which they can either Accept or Decline. Adult patients in Ontario receiving cancer care are prompted with YVM (within each channel) if the following suite of conditions are met:
  - ≥1 Your Symptoms Matter (YSM) assessment (more details about YSM can be found here) completed at a previous visit (this criterion would not apply if the patient is using the YVM standalone link),
  - ≥30 days elapsed since a patient last accepted a prompt for the YVM survey, and
  - the patient completed <4 assessments on the electronic interface or kiosk where the YSM assessments are administered for the respective visit day (this criterion would not apply if the patient completed YVM using a link decoupled from the YSM)
- Patients who decline or ignore a prompt for YVM will be prompted on each login to the ISAAC
  platform until the prompt is accepted. As a result, this may result in several prompts being
  recorded per patient within a 30-day period.
- In some cases, patients who accept a prompt may elect not to complete a YVM survey. When prompts are accepted (regardless of survey completion), the patient is not prompted on that channel type to complete the YVM for 30 days.
- Participating facilities that do not administer YVM with ISAAC will not have prompt events in the ISAAC Replication Database that can be used for reporting. For example, prompt measures will not be available for Princess Margaret Cancer Centre since their YVM surveys are uploaded to the ISAAC system and not collected directly by the ISAAC platform.
- Facilities which do not submit data to Activity Level Reporting (ALR) do not have certain indicators, such as the prompt and participation rates, available for reporting.
- Indicators which rely on data submitted to ALR are lagged by 2 months (e.g., an additional
  month compared to other sections of the report) to account for the data submission schedule
  in ALR. Data reported from ALR may be resubmitted by sites, resulting in changes to historical
  indicator values. In some cases, sites may have additional delays in submissions and will not
  have data available for the most recent months.

Version date: August 2025