ALPHABET SOUP: C, G, H-CAHPS SCORES

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What is CAHPS?
Why is CAHPS Important to You and Your Organization?
How can I (as in you, and me) Improve CAHPS Scores?
36 Month Professional Horizon/Patient Experience
Obligatory Campbell's Soup Video at the End (just to overkill the theme)

PLEASE RAISE YOUR HAND AT ANYTIME WITH ANY THOUGHT OR QUESTION, TO ME, THIS IS A PEER CONVERSATION MORE THAN A FORMAL PRESENTATION
WHAT DOES THE ACRONYM ‘CAHPS’ STAND FOR?

Consumer Assessment of Healthcare Providers and Systems Survey

- Hospital Consumer Assessment of Healthcare Providers and Systems Survey
- First National Standardized Public Reporting Tool
- Measures Patient Perceptions and Experience in the Hospital (Clinic is Separate)
- Survey asks discharged patients 32 Questions About their Recent Stay
A FOCUS ON THE PATIENT'S PERSPECTIVES

The survey also includes four screener questions and seven demographic items, which are used for adjusting the mix of patients across hospitals and for analytical purposes.

3 MAIN GOALS FOR THE CAHPS SURVEY

1. The survey is designed to produce comparable data on the patient's perspective on care that allows objective and meaningful comparisons between hospitals on domains that are important to consumers.

2. Public reporting of the survey results is designed to create incentives for hospitals to improve their quality of care.

3. Public reporting will serve to enhance public accountability in health care by increasing the transparency of the quality of hospital care provided in return for the public investment.
AND...THEN THERE ARE THE MARKETING CONSIDERATIONS

DISHING IT OUT!
Survey Distribution Process

1) Mail Only
2) Telephone Only
3) Mixed (mail followed by telephone)
4) Active Interactive Voice Response (IVR)
SOUP TO ENTREE

- Random Survey Distribution
- Hospitals Must Survey Patients Throughout Each Month of The Year
- Results are published on Six Summary Measures and listed on www.hospitalcompare.hhs.gov
WHO ‘DISHES' OUT THE SURVEYS?

- CAHPS survey sponsors (your organization) are not required to contract with vendors (with a few exceptions). However, the use of vendors is strongly recommended for the following reasons:
  - Working with an outside firm to conduct your survey will help to ensure the neutrality and credibility of your results.
  - Professional and experienced vendors can usually provide you with better quality data at a lower cost than if you were to field the survey yourself.
  - The use of an experienced vendor can help ensure that the collection and analysis of the survey data are consistent with recommended CAHPS protocols for survey administration, analysis, and reporting. This is especially important if you want to compare your results with those of other sponsors locally or through national merged data sets such as the National CAHPS Benchmarking Database (the CAHPS Database) or the National Committee for Quality Assurance’s (NCQA) Quality Compass.

NCQA, which makes a list of certified vendors for the CAHPS Health Plan survey available on [http://www.ncqa.org/tabid/170/Default.aspx](http://www.ncqa.org/tabid/170/Default.aspx)

The Centers for Medicare & Medicaid Services:
  - For H-CAHPS: [http://www.hcahpsonline.org](http://www.hcahpsonline.org)
  - For the CAHPS Home Health Care Survey: [https://homehealthcahps.org](https://homehealthcahps.org)

- A local university, which may have a commercial survey research center or can recommend local vendors.
- Other departments in your organization that may have used survey vendors for other purposes.

VENDOR IDENTIFICATION
Please answer the questions in this survey about your stay at the hospital named on the cover letter. Each survey is 'Admission' or 'stay' specific, and covers the following categories:

- **YOUR CARE FROM NURSES**
- **YOUR CARE FROM DOCTORS**
- **YOUR EXPERIENCES IN THIS HOSPITAL**
- **THE HOSPITAL ENVIRONMENT**
- **WHEN YOU LEFT THE HOSPITAL**
- **OVERALL RATING OF HOSPITAL**

HCAHPS Star Ratings

- In April 2015, CMS added HCAHPS Star Ratings to the Hospital Compare Web site.
- HCAHPS Star Ratings summarize the results for each HCAHPS measure and present it in a format that is increasingly familiar to consumers, making it easier to use the information and spotlight excellence in healthcare quality.
- Twelve HCAHPS Star Ratings appear on Hospital Compare: one for each of the 11 publicly reported HCAHPS measures, plus a Summary Star Rating that combines all the HCAHPS Star Ratings.
- HCAHPS Star Ratings will be updated quarterly. Hospitals must have at least 100 completed HCAHPS surveys over a four-quarter period and be eligible for public reporting of HCAHPS measures to receive HCAHPS Star Ratings.
- Hospitals with fewer than 100 completed surveys will not receive Star Ratings, though their HCAHPS
Please answer the questions in this survey about your stay at the hospital named on the cover letter. Do not include any other hospital stays in your answers.

1. During this hospital stay, how often did nurses treat you with courtesy and respect?
   1. Never
   2. Sometimes
   3. Usually
   4. Always

2. During this hospital stay, how often did nurses listen carefully to you?
   1. Never
   2. Sometimes
   3. Usually
   4. Always

3. During this hospital stay, how often did nurses explain things in a way you could understand?
   1. Never
   2. Sometimes
   3. Usually
   4. Always

SURVEY QUESTION EXAMPLES

YOUR EXPERIENCES IN THIS HOSPITAL

15. During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan?
   1. Yes
   2. No
   If No, Go to Question 12

16. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?
   1. Never
   2. Sometimes
   3. Usually
   4. Always

17. During this hospital stay, did you need medicine for pain?
   1. Yes
   2. No
   If No, Go to Question 15

18. During this hospital stay, how often was your pain well controlled?
   1. Never
   2. Sometimes
   3. Usually
   4. Always
SURVEY QUESTION EXAMPLES

Understanding your care when you left the hospital:
23. During this hospital stay, staff took my preferences and those of my family or caregiver into account in deciding what my health care needs would be when I left:
   1. Strongly disagree
   2. Disagree
   3. Agree
   4. Strongly agree
24. When I left the hospital, I had a good understanding of the things I was responsible for in managing my health:
   1. Strongly disagree
   2. Disagree
   3. Agree
   4. Strongly agree
25. When I left the hospital, I clearly understood the purpose for taking each of my medications:
   1. Strongly disagree
   2. Disagree
   3. Agree
   4. Strongly agree
   5. I was not given any medication when I left the hospital.

WOH, WOH, WOH WAIT A SECOND...

ENT physicians are held accountable for some of these metrics?

PATIENT PERSPECTIVES

- The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass nine key topics:
  - Communication with nurses
  - Responsiveness of hospital staff
  - Cleanliness of the hospital environment
  - Quietness of the hospital environment
  - Transition of care

SAY WHAT???
LETS TALK ABOUT CG-CAHPS

The survey includes standardized questionnaires for adults and children that can be used in both primary care and specialty care settings. Users can also add supplemental items to customize their questionnaires.

- The Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CG CAHPS) survey is a standardized tool to measure patient perception of care provided by physicians in an office setting. Another way to think of CG CAHPS is like a “sister” survey to the HCAHPS survey.
- Access Comparative Data in CAHPS Database Online.

THE CG-CAHPS TIMELINE

The Physician Compare website was created in 2011 and currently provides a directory of providers in their communities. In the near future, the information will include quality measures and patient experience measures for the physician office setting. Much like the Hospital Compare website, the Physician Compare website provides viewers with information to allow them to make informed decisions on where to receive care based on feedback strictly on physicians. The below timeline shows what has been established and what to expect in the near future.

- 2011: Physician Compare launched
- 2012: Physician Quality Reporting System (PQRS) Data Collection for Public Reporting & CG CAHPS
- 2012-2015: CMS/Medicare Shared Savings Plan (MSSP) Launches - Accountable Care Organization (ACO) structure
- 2014: CMS starts collecting data related to CG CAHPS
- 2015: Physician Quality Reporting System begins reporting of PQRS
- 2015: Payment modification begins for those practices impacted (results tied to reimbursement)
THE PATIENT EXPERIENCE

- We could debate for hours as to who is directly accountable or responsible for each grouping of these scores...

- More importantly, how can we make the scores better?
WE ARE ONLY AS STRONG

AS THE WEakest
ORGANIZATIONAL LINK

SO, HOW MIGHT WE
CONSISTENTLY IMPROVE
THE CAHPS SCORES?

AS WE MOVE THROUGH THESE ‘SOUP RECIPES’
I WANT TO ASK YOU, HOW DO YOU
ORGANIZATIONALLY MEASURE UP AT PRESENT
FROM 1-10?
HARDWIRE A CULTURE OF RECOGNITION AND APPRECIATION

Start a weekly-morning with the office recognizing a great patient feedback moment
Post survey data in high-traffic staff areas

ENGAGE YOUR ENT CLINICIANS

Meet with them Routinely
Engage them in the CAHPS scoring process
Make sure ALL staff members know on what questions they are being rated
Openly recognize your superstar docs

FOCUS ON YOUR WEAKEST PERFORMERS

“We don’t have time for this stuff”
Solicit Their Input
Address and Resolve Their Issues
For those that don’t subscribe-help them find employment elsewhere
Research has demonstrated that, for every piece of negative feedback, there should be five pieces of positive feedback.
CAHPS SOUP FOR THE SOUL

'AIDET' AND SCRIPTING

A consistent communication at every touch point is paramount.

UTILIZE SURVEYOR TOOLS FOR IMPROVEMENT

The contracted party that distributes and assembles your survey reports often has great insights to review and utilize.

UNDERSTAND PATIENT AND FAMILY ISSUES WHEN THEY TOUCH ENT SERVICES - Labs, Outpatient Surgery, Office etc.

Smart Phone App for Wayfinding
Parking Challenges?
Expected Wait Times
SERVICE RECOVERY – OWN THE MOMENT

TELL PATIENTS YOU'RE BEING MEASURED
(without steering them)
Examples from other industries include:

36 MONTH HEALTHCARE HORIZON
THE WHITE HOUSE
Implications for CAHPS and further Reform

FULLY LEVERAGE THE PROMISE AND POTENTIAL OF THE EHR

WHO ARE THE MILLENNIALS?
Both at Patients and Doctors and Staff
Dissatisfied Patients are a Financial Risk

- CAHPS scores highlight another, potentially more important, opportunity. Current CAHPS ratings indicate large numbers of patients are dissatisfied with the care they currently receive in hospitals and clinics.
- 92 percent of the hospitals listed in the latest Scorecard have an overall rating of 75 percent or less. This means a significant number (25 percent or more of the patients that visited these hospitals) are critical of one or more aspects of the hospital experience.
- In the future, these patients are less likely to recommend these hospitals and more likely to seek care elsewhere. Imagine losing even 10 percent of your current patient population to a competitor.

Only 4 percent of dissatisfied patients ever complain.

Questions and Answers
Thank-You For Your Time