HCAHPS Best Practices

South Dakota CAH Quarterly MBQIP call
Wednesday, November 9, 2022

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Welcome – Chat Check In

• Name
• Organization
• Role
• What is your favorite Thanksgiving side dish?
Stratis Health

- Independent, nonprofit, Minnesota-based organization founded in 1971
  - Lead collaboration and innovation in health care quality and safety, and serve as a trusted expert in facilitating improvement for people and communities
- Work at intersection of research, policy, and practice
- Long history of working with rural providers, critical access hospitals (CAHs), and the Medicare Rural Hospital Flexibility (Flex) Program
Cooperative agreement awarded to Stratis Health starting September 2015 from the Health Resources and Services Administration Federal Office of Rural Health Policy (HRSA FORHP).

Improve quality and health outcomes in rural communities through TA for FORHP quality initiatives
- Flex/Medicare Beneficiary Quality Improvement Project (MBQIP)
- Small Health Care Provider Quality Improvement Grantees

Focus on quality reporting and improvement
Objectives

- Describe the importance of the Hospital Consumer Assessment for Healthcare Providers and Systems (HCAHPS) surveys for critical access hospitals (CAHs)
- Explore the questions on the HCAHPS survey
- Discuss best practices to improve experience scores for patients in the inpatient setting
HCAHPS and Rural Hospitals
Goals of MBQIP

• CAHs report common set of rural-relevant measures
• Measure and demonstrate improvement

• Prepare CAHs for participation in value-based payment programs
Why HCAHPS?

- Provides a standard survey and methodology for measuring patient perspectives on hospital care
- Important driver of performance improvement related to patient perception of care
- Ability to compare performance with other hospitals based on a national reporting program - it is not uncommon for CAHs to outperform larger facilities
- HCAHPS broad goals:
  - Produce comparable data on patient perspectives that allows objective and meaningful comparisons between hospitals
  - Public reporting is designed to create incentives for hospitals to improve quality of care and enhance public accountability in health care by increasing transparency.
HCAHPS Overview

• Developed by AHRQ (Agency for Healthcare Research and Quality)

• Offers ability to compare performance with other hospitals based on a national reporting program

• HCAHPS broad goals:
  – Produce comparable data on patient perspectives that allows objective and meaningful comparisons between hospitals
  – Public reporting is designed to create incentives for hospitals to improve quality of care and enhance public accountability in health care by increasing transparency.

• Required by Centers for Medicare & Medicaid Services (CMS) for all Prospective Payment System (PPS) hospitals since 2007

• MBQIP Core Measure for Critical Access Hospitals (CAHs)

• CMS rolled out HCAHPS star rating in 2015 for hospitals with more than 100 completed surveys in rolling four quarters
Answer Choices & Top Box Scoring

• Never, Sometimes, Usually, Always
• No, Yes
• No, Yes somewhat, Yes definitely
• Definitely no, Probably no, Probably yes, Definitely yes
• Strongly disagree, Disagree, Agree, Strongly agree
• More than 15 minutes, 5 to 15 minutes, Less than 5 minutes
Response Rates
Modes of Survey Implementation

1. Mixed (mail followed by telephone)
2. Mail only
3. Telephone only
4. Interactive voice response (IVR)
HCAHPS Response Rate Strategies

• Tell patients about the survey
  – Create scripting for staff
  – During discharge planning
  – Flyer or brochure
  – Posters, the hospital website, or announcements on waiting room television screens
  – Remind during discharge phone calls

• Leader rounding – assess patient satisfaction during stay and/or remind of survey

• Consistent and timely sharing of patient lists with survey vendor
What strategies has your hospital used to increase response rates?
Patient Experience Improvement Strategies
Communication

With Nurses
During this hospital stay, how often did:
- Nurses treat you with courtesy & respect? (Always)
- Nurses listen carefully to you? (Always)
- Nurses explain things in a way you could understand? (Always)

With Doctors
During this hospital stay, how often did:
- Doctors treat you with courtesy & respect? (Always)
- Doctors listen carefully to you? (Always)
- Doctors explain things in a way you could understand? (Always)
Communication

Whiteboards
- Communication tool
- Must be used faithfully
- Users design

Bedside Shift Report
- Template/checklist
- Natural leaders
- Observational auditing

Team Huddles
- Multidisciplinary – leaders involved
- In care units
- Different structures
Responsiveness of Hospital Staff

During this hospital stay:

• After you pressed the call button, how often did you get help as soon as you wanted it? (Always)

• How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted? (Always)
Responsiveness of Hospital Staff

Hourly Rounding
- Alternate RNs and CNAs
- Four Ps – pain, potty, position, possessions
- Reduce call light usage

No Pass Zone
- Everyone answers call lights
- Anyone can provide non-clinical support
- May decrease traffic in patient care areas

Technological Devices
- Call light systems
- Two-way speakers
- Nurse communication devices
Communication about Medications

During this hospital stay, before giving you any new medicine, how often did hospital staff:

• Tell you what the medicine was for? (Always)
• Describe possible side effects in a way you could understand? (Always)
Communication about Medications

Pharmacist Visits
- Trigger and process verified
- Medication reconciliation
- Interdisciplinary huddles and rounds

Patient Education
- Written and easy to read
- When: time of new meds, daily, discharge
- Teach back
- EHR reminders and hard stops

Key Words
- “Education on your medications”
- “Side effects of your medications”
- “This medication is for…”
Cleanliness & Quietness

During this hospital stay how often:

• Were your room and bathroom kept clean? (Always)
• Was the area around your room quiet at night? (Always)
**Cleanliness of Hospital Environment**

### Cleaning Schedules
- Morning cleaning
- Afternoon or evening tidy up
- PM by nurse, CNA, volunteer or environmental services staff

### Notices of Cleaning
- Tent cards, calling cards, white board notes
- Name, time, contact information

### Cleanliness Auditing
- Adenosine triphosphate (ATP) monitoring
- Glow gel monitoring
- Rounding inspections
Quietness of Hospital Environment

**Awareness**
- Noise monitors
- Reminders – verbal, written, scheduled, in real time
- “SHHH” campaigns

**Structural Changes**
- Enclosed nursing stations
- Decentralized nursing stations
- Carpets or floor padding

**Environmental Noise**
- Doors, carts
- Cleaning or maintenance schedules
- Communication devices
Discharge Information & Care Transitions

Discharge Information

During this hospital stay:

• Did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital? (Yes)

• Did you get information in writing about what symptoms or health problems to look out for after you left the hospital? (Yes)

Transitions of Care

• 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. (Strongly Agree)

• When I left the hospital, I had a good understanding of the things I was responsible for in managing my health. (Strongly Agree)

• When I left the hospital, I clearly understood the purpose for taking each of my medications. (Strongly Agree)
Discharge & Care Transitions

Discharge Planning
- Start at admission
- Social worker, care manager, discharge RN
- Rounds or huddles
- Interdisciplinary involvement

Discharge Education
- Discharge packet, folder, binder
- Written discharge instructions/care plan/AVS
- Simple language
- Teach back

Discharge Calls or Home Visits
- Phone calls in 2-3 days
- Discharge planner, nurse, pharmacist
- Selected patients by risk or diagnosis vs. all
- Home visits effective but less common
Overall Rating & Willingness to Recommend

• Using any number from 0 to 10 where 0 is the worst care possible and 10 is the best care possible, what number would you use to rate this visit? (9 or 10)

• Would you recommend this hospital to your friends and family? (Definitely yes)
Global Improvement

**Leader Behaviors**
- Leader visibility
- Leadership Development
- Leader rounding with staff

**Culture**
- Standards of behavior
- Teamwork
- Accountability

**Data**
- Share data with staff and providers often
- Opportunities for discussion and suggestions
- Friendly competition and momentum
Overarching Themes

• Leadership and Culture
• Communication
  – Among team members
  – With patients and families
• Employee Engagement
• Workforce Resiliency
HCAHPS Resources

• **Study of HCAHPS Best Practices in High Performing Critical Access Hospitals** (full study including resource list, summary brief)
  www.ruralcenter.org/resources/study-hcahps-best-practices-high-performing-critical-access-hospitals

• **Quality Improvement Implementation Guide and Toolkit for CAHs** (Best practice lists by measure)
  www.ruralcenter.org/resource-library/quality-improvement-implementation-guide-and-toolkit-for-cahs

• **HCAHPS Online**
  www.hcahpsonline.org
What additional strategies are working for your hospital to improve HCAHPS scores?
Other Resources
MBQIP Monthly

https://www.ruralcenter.org/tasc/mbqip/mbqip-monthly

- CAHs Can!
- Data: CAHs Measure Up
- Tip: Robyn Quips
- Tools and Resources
Quality Time: Sharing PIE (performance improvement experience)

https://stratishealth.org/quality-time-sharing-pie/

CAH QI Mentors share lessons learned, strategies, tips, and ideas from their in-the-field performance improvement experience.

Listen online or wherever you get your podcasts.
Quality Improvement Basics Course

https://stratishealth.org/quality-improvement-basics/

• 11 didactic modules including videos, slides, and transcripts
  – Can be completed in sequence or stand-alone
• Templates and tools
• Facilitator Guide and Sample Syllabus also available
Quality Improvement Implementation Guide & Toolkit for CAHs


- QI Implementation Guide
- QI Measure Summaries
- Brainstorming Tool
- Internal Quality Monitoring Tool
- Project Action Plan Template
- Meeting Agenda Template
- Rapid Tests of Change Tool
- Prioritization Tool
- Internal Quality Monitoring Tool
- 10-Step QI Project Documentation Template
Questions?

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www.stratishealth.org
Stratis Health is a nonprofit organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.