# 2024 RURAÍ EEA HECAR SYMPOSIUM March 4 & 5







## HCAHPS & Hospital Finances: What's the Big Deal?

ROCHELLE SCHULTZ SPINARSKI RURAL HEALTH SOLUTIONS

MARCH 5, 2024

CALIFORNIA FLEX PROGRAM TEAM





### Agenda

#### What and why HCAHPS

The connection between HCAHPS scores and hospital finances

Where we stand in California

HCAHPS changes on the horizon

# Funding and Disclaimer

This is a **Medicare Rural Hospital Flexibility Program** initiative that is part of its quality improvement activities. HRSA funding is directed to the California State Office of Rural Health, Department of Health Care Access and Information.

This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award with 100 percent funded by HRSA/HHS. The contents are those of the author(s) and presenters and do not necessarily represent the official views of, nor an endorsement, by HRSA/HHS, or the U.S. Government.





AIM FOSTER A RENEWED COMMITMENT TO PATIENT EXPERIENCE AND HCAHPS.

# Hospital Consumer Assessment of Healthcare Providers and Systems

HCAHPS



# HCAHPS

WHAT IS IT AND WHY EVERYONE SHOULD CARE

#### What?

Established by CMS in 2008

Play a role in hospital payments through Value-Based Purchasing Program since 2012

#### 29 items

Administered by a vendor 2-42 days after discharge

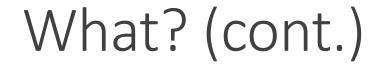
Measures patients' perception of their INPATIENT experience

"Top Box" – most favorable score

"Bottom Box" – least favorable score

Response rate

- Communication with doctors
- Communication with nurses
- Responsiveness of hospital staff
- Communication about medicines
- Discharge information
- Care transitions
- Cleanliness
- Quietness
- Overall ratings/would you recommend



#### HCAHPS Survey

#### SURVEY INSTRUCTIONS

- You should only fill out this survey if you were the patient during the hospital stay named in the cover letter. Do not fill out this survey if you were not the patient.
- Answer all the questions by checking the box to the left of your answer
- You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:
  - ☐ Yes
     Ø No → If No. Go to Question 1

You may notice a number on the survey. This number is used to let us know if you returned your survey so we don't have to send you reminders. Please note: Questions 1-29 in this survey are part of a national initiative to measure the quality of care in hospitals. OMB #0938-0981 (Expires September 30, 2024)

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.		3.	During this hospital stay, how often did nurses <u>explain things</u> in a way you could understand? <sup>1</sup> Never <sup>2</sup> Sometimes
	YOUR CARE FROM NURSES		
1.	During this hospital stay, how often did nurses treat you with <u>courtesy</u>		<sup>3</sup> Usually
			<sup>4</sup> □ Always
	and respect?	4.	During this hospital stay, after you
	<sup>1</sup> Never		pressed the call button, how often di
	<sup>2</sup> Sometimes		you get help as soon as you wanted
	<sup>3</sup> ☐ Usually		it?
	4 Always		<sup>1</sup> Never
			<sup>2</sup> Sometimes
2.	During this hospital stay, how often did nurses <u>listen carefully to you</u> ? —		<sup>3</sup> ☐ Usually
			<sup>4</sup> Always
	1 Never		<sup>9</sup> □ I never pressed the call button
	<sup>2</sup> Sometimes		·
	<sup>3</sup> Usually		
	4□ Always		

Vendors: Which vendor is your hospital using?

#### <u>Approved Vendor List (hcahpsonline.org)</u>

(Common: Press Ganey, PRC, Survey Solutions, NRC, Qualtrics)

Response Rate: What is your survey response rate and does it matter?

### Top Box Score vs. Percentile Ranking

#### TOP BOX SCORE

- The "Top-box" represents the **most positive** Perc
- response to HCAHPS survey items.
- It indicates how often patients gave **positive assessments** of their hospital experience.
- Higher "Top-box" scores are desirable.
- For example, the 95<sup>th</sup> percentile for communication with nurses is for hospitals that score 92 or higher in the top box score, while the 5<sup>th</sup> percentile are those scoring 69 or lower.

#### PERCENTILE RANKING

- Percentiles indicate where a hospital's score falls <u>relative to other hospitals</u>.
- They show how often patients' assessments were positive.
- Higher percentiles mean better performance.
- For example, the median (50<sup>th</sup> percentile) score for communication with nurses was 80.
- Always know where your hospital stands compared to other hospitals as "high" top box scores can seem high when they are not.

### Why?

VBP – Higher score = higher reimbursement

Scores are publicly reported consumers are choosing care providers based on what they find online

Health care is increasingly a consumer driven industry:

- Value
- Price transparency
- Trust
- Volume
- QUALITY

Research – As patient experience and employee engagement – hospital ratings and profits – Harvard Business Review

Press Ganey – Hospitals with better patient experience have better business performance, records in safety, length of stay, and readmission rates. "For example, the financial margins for the hospitals in the top quartile of patients' likelihood to recommend were 4.8 percentage points higher than those in the bottom quartile."

"There is a strong link between hospital culture and staff retention. When a hospital's actual culture doesn't mirror its stated culture, the organization is at risk of losing staff."

### Quality

Patient-facing quality data is driving health care decision-making,

But

Only if the patient knows where to look for the data.



What is the biggest factor driving patient satisfaction and experience?



#### CULTURE



### Culture, Culture, Culture

Hospitals with happier staff and greater cultural competency have better HCAHPS scores.

1) Decades of research show happier employees raise HCAHPS scores. – <u>Research</u>

2) The nurse/work environment "significantly relates" to HCAHPS scores. – <u>Research</u>

3) Happier employees increases staff retention. – Research

4) Hospitals with greater cultural competency have better HCAHPS scores for doctor communication, hospital rating, and hospital recommendation. – CMS

5) Cultural competency influences patient satisfaction and the more culturally competent, the more beneficial to patients – <u>Research</u>

6) Direct correlation between hospital culture and staff retention. Retention issue puts hospitals at risk financially and experientially. – <u>Research</u>



#### How is your hospital doing? What are you doing?

Do you know your data?

Does everyone in your CAH know their role in HCAHPS?

What other CAHPS are you doing?

How often are you looking at your hospital's CAHPS data, using it?

Are you sharing patient experience data with all staff?

Where are your trouble spots? Do you have any improvement projects in place?

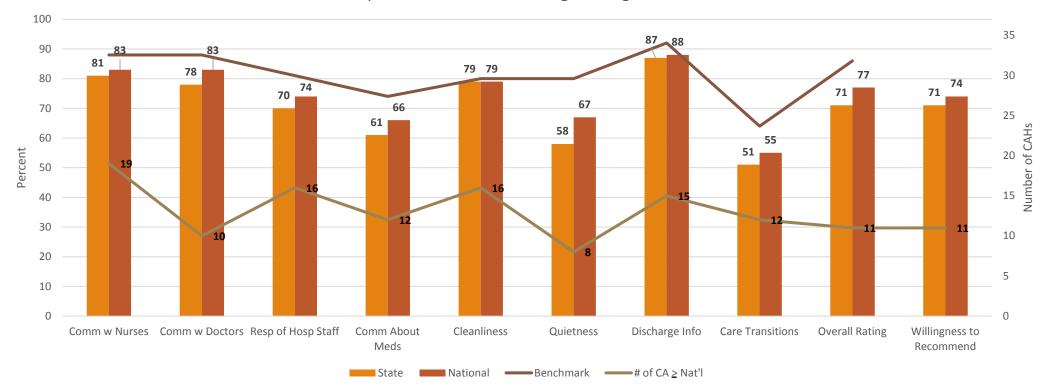




### Digging into the Data

#### California CAHs

HCAHPS Top Box Scores 2Q23: CA Avg, US Avg, Nat'l Benchmark





# Who are the top performers?

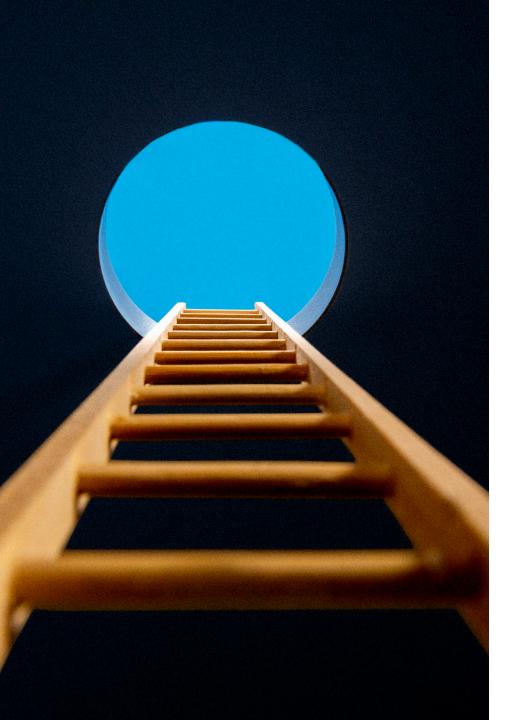


### **Top Performers**

Catalina Island – 5 measures with scores of 100, 2 measures with scores of 99 Eastern Plumas – 2 measures at 98, Overall Rating – 100 Santa Ynez – At or above the national average for all measures Tehachapi – At or above the national average for all but 1 measure Tahoe Forest – At or above the national average for all but 1 measure Bear Valley – At or above the national average for all but 1 measure Mammoth – At or above the national average for all but 1 measure Trinity – At or above the national average for all but 1 measure

Response Rates: Santa Ynez – top at 41%

Based on 2Q2023 annualized HCAHPS scores



### Lows for All Measures

Communication w/Nurses – 56/1 < 60 Communication w/Doctors – 43/2<60 Responsiveness of Staff  $- 31/2 \le 60$ Communications about Medications – 28/14<60 Cleanliness – 57/1<60 Quietness - 24/20<60 Discharge Instructions – 56/1<60 Care Transitions – 20/17≤50 Overall Rating –28/7<u><</u>60 Willingness to Recommend –  $29/7 \le 60$ Response Rate – 13%

#### How does your hospital rate?

Communication with Nurses (Oct 2023):

95<sup>th</sup> percentile – Top box of 91 or higher

90<sup>th</sup> percentile – Top box of 88 or higher  $\implies$  E

75<sup>th</sup> percentile – Top box of 83 or higher 🔲 10 CAHs

50<sup>th</sup> (median) – Top box of 78 or higher 7 CAHs

25<sup>th</sup> percentile – Top box of 74 or higher  $\implies$  2 CAHs

10<sup>th</sup> percentile – Top box of 71 or higher – 1 CAH

5<sup>th</sup> percentile – Top box of 68 or lower 🛛 📥 2 CAHs

Catalina Island, Eastern Plumas, Mammoth, Santa Ynez, Seneca, Tehachapi

Bear Valley, Tahoe Forest, Trinity

#### Strategies to Improve Patient Experience

#1 – BE A LEADER – Make patient experience a priority, lead by example, build it into operations, reward greatness.

#2 – COMMUNICATIONS – The patient experience starts with every interaction.

#3 – The WHOLE TEAM – Everyone working in every department is part of the patient experience team.

#4 – SET EXPECATIONS – If the patient is aware of what to expect (including any disruptors or challenges) they won't be as caught off guard or unpleasantly surprised. Minimize environmental stressors

All staff trained, ongoing training

Develop a rapport with patients

Make care personal

Make listening well a priority

Commit to sit

Care for the caregivers

Ensure cleanliness and responsiveness where everyone is involved

Update systems so they meet both staff and patient needs



### What's ahead?

Now – hospitals are implementing ED CAHPS, OP CAHPS, Clinic CAHPS, Swing Bed CAHPS...Every experience matters for patients and staff.

The current HCAHPS Survey will remain in use for patients discharged through December 31, 2024.

2025 – HCAHPS 2.0

- January 1, 2025 (pending rulemaking)
- New participation process
- HCAHPS can be administered via text or email. Vendors must complete participation process.
- Three new Web-First modes (telephone and mail remain):
  - Email survey, followed by mail survey to non-respondents (Web-Mail mode)
  - Email survey, followed by phone survey to non-respondents (Web-Phone mode)
  - Email survey, followed by mail survey then phone survey to non-respondents (Web-Mail-Phone mode)
- Longer data collection period (49 days)
- No more than 12 supplemental items can be added
- Need to provide HCAHPS vendor with patient's language preference
- Allow survey responses by patient proxy
- Summary of changes

### No Cost Training

1) Breakthrough Leadership Series – webbased training through Custom Learning Systems: Register <u>Here</u>, Code – HCAI16, ondemand

Make kindness your personal brand of patient experience.



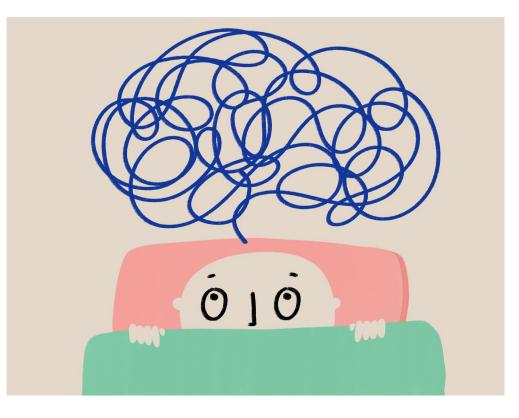
#### The HCAHPS Breakthrough Leadership Series™ Schedule All webinars scheduled on Thursdays at: 10PT / 11MT / 12CT / 1ET

	Webinar	Date
1.	Leadership Engagement: <b>The C-Suite Leader Role in HCAHPS Transformation™</b> Creating Leadership Inspiration, Engagement & Accountability to Drive HCAHPS Success	July 20, 2023 37 minutes
2.	Quiet at Night: <b>The Quiet Revolution</b> <sup>ne</sup> How to Create a Restful, Healing Environment that Patients Perceive to Be Quiet	August 17, 2023 30 minutes
3.	Cleanliness of Patient Rooms: <b>Cleanliness Matters™</b> Cleanliness Is Next to Godliness	September 21, 2023 30 minutes
4.	Communication about Medicine: <b>Medication Education Imperative™</b> Master the Skills of Successful Patient Medication Education	October 19, 2023 32 minutes
	HealthCare Service Excellence Conference November 13-15, 2023 • Rosen Center, Orlando, FL Attend in person or watch our live-stream event	November 13 – 15 2023 • Orlando, FL
5.	Communication with Doctors: <b>Skillful Physician Communication™</b> Master the Communication Skills for a Compassionate Patient Experience	December 21, 2023 49 minutes
6.	Communication with Nurses: <b>Relationship-Based Nurse Communication™</b> Master Relationship-Based Communication Skills that Heal	January 18, 2024 41 minutes
7.	Discharge Information: <b>Discharge Satisfaction Guaranteed</b> <sup>net</sup> How to Prepare Every Patient for Sofe, Continued Recovery at Home Every Time!	February 15, 2024 58 minutes
8.	Pain Care: <b>Compassionate Pain Care™</b> Create a Culture of Compassionate Pain Care Through Proven Skills and Best PracticeS	March 21, 2024 49 Minutes
9.	Responsiveness of Staff: <b>Revolutionize Staff Responsiveness™</b> Greate a Culture of Empathelic, Timely, Responsive Service	April 18, 2024 49 Minutes
10.	Transition of Care: <b>Care Transitions Done Right™</b> Engage Staff and Patients in Creating a Seamless Care Transition Experience	May 16, 2024 55 Minutes
11.	Overall Rating: High-Performing Overall Hospitals <sup>™</sup> A Strategic Blueprint to Engage All Staff in Greating a Compassionate Experience for Patients and Family Throughout their Hospital Stay	June 20, 2024 45 Minutess
12.	Willingness to Recommend: <b>The Power of Word-of-Mouth Marketing</b> ™ Greate a Hospital Experience that Patients: Will Enthusiastically Recommend	July 18, 2024 58 Minutes
13.	BONUS WEBINAR! Marcus Engel: <b>Applied Inspiration™</b> Discover How Small Acts of Compassion Make a Big Difference in the Patient Experience	August 15, 2024 42 Minutes

jister Via: Link or QR Code







### Questions or Other Thoughts?

#### Thank you & Have a Great Day!





#### Flex Program Resources

Flex Program resources are available for all program areas. Your primary contact is:

Tyfany Frazier, Tyfany.Frazier@hcai.ca.gov

FLEX Grant Manager and SORH Director

Department of Health Care Access and Information 916.326.3703

#### **MBQIP Reporting and Improvement:**

**Rochelle Spinarski** 

**Rural Health Solutions** 

0 (651) 731-5211

C (651) 261-6219

E: <u>rspinarski@rhsnow.com</u>



**Other MBQIP Resources** 

www.wyqim.com

www.flexmonitoring.org

https://www.ruralcenter.org/tasc/resources/mbqip-resource-list

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