Kaiser Permanente’s Experience with Patient Satisfaction and Service Improvement

A PRESENTATION TO: The CAHPS / SOP User Group Meeting

Esther Burlingame, Director, Service Performance and Strategy
Presentation Outline

• Overview of Kaiser Permanente
• Brief history of HCAHPS survey initiative
• Service improvement journey
• Challenges
Our Membership and Geographic Coverage

Kaiser Permanente is a nonprofit organization with 8.6 million members programwide.
Our Facilities and Physicians/Staff

• Medical Offices: 431

• Medical Centers/Hospitals: 36
  – 13 Southern California, 21 Northern California, 1 Northwest, 1 Hawaii

• Physicians: ~14,600

• Employees: ~167,300
Kaiser Permanente’s mission is to provide high-quality, affordable healthcare services to improve the health of our members and the communities we serve.
Brief History: Inpatient Focus at Kaiser

- 2001 – PEP-C
- 2005 – Participated as HCAHPS pilot site
- 2006 – Commitment to census sampling to be able to provide measurement at the unit level
- 2007 – Monthly unit level reporting on website
  - CHART public reporting
- 2008 – Changed vendors
  - CMS public reporting – decision to use national benchmarks
Trends in Health Care

• Three key trends in health care set the stage for our story today
  – Evidence-based medicine movement
    • Being clear about what works and what doesn’t work, and why
  – From provider-centered to patient-centered care
    • Increasing importance of patient/customer perspective
  – Value-based purchasing
    • Push for public reporting and pay based on service and quality
HCAHPS Journey - Rate Hospital

Kaiser Foundation Hospitals
HCAHPS Rate Hospital (percentage of 9 and 10 ratings) All Inpatient


1st CHART/HCAHPS Public Report

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Service Improvement Journey

- Commitment to service improvement framework
- Development of evidence-based key drivers
- Aligned goals with measurable outcomes
- Engaged workforce – Unit Based Teams
  - Performance improvement methodology
- Development and deployment of tools and tactics
- Commitment to patient-family centeredness
Our approach is based on attributes of high-performing organizations and integrates Performance Improvement and Service and Organizational Excellence.
## Service Roadmap: Drivers of Service

<table>
<thead>
<tr>
<th>Goal/Aim</th>
<th>Service Components</th>
<th>Service Drivers</th>
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<tbody>
<tr>
<td>Market Leading CAHPS Performance and World Class Hospital Performance</td>
<td>Leadership and Culture</td>
<td>Leadership Focus &amp; Development</td>
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<td>Performance Accountability &amp; Alignment</td>
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<td>People Engagement</td>
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<td>Member/Patient Experience – Hospital Care</td>
<td>Nurse Communication / Compassion</td>
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<td>Environment – Clean &amp; Quiet</td>
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<td>Staff Responsiveness</td>
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<td>Comfort/Pain</td>
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<td>Problem Resolution / Service Recovery</td>
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<td>Coordination / Flow</td>
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<td>Member/Patient Experience – Ambulatory Care</td>
<td>Primary Care Access</td>
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<td>Specialty Care Access</td>
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<td>Patient – Physician Relationship</td>
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<td>Phone Service &amp; E-Connectivity</td>
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<td>Total Visit Experience</td>
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<td>Member/Patient Experience – Health Plan</td>
<td>New Member Integration</td>
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<td>Member Marketing Communications</td>
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<td>Member Services</td>
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<td>Claims Processing</td>
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### Hospital Service Key Drivers and Initiatives

<table>
<thead>
<tr>
<th>Service Component</th>
<th>Key Drivers</th>
<th>Focus Areas &amp; Initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Member / Patient Experience – Hospital / Inpatient</strong></td>
<td><strong>Nurse Communication / Compassion</strong></td>
<td>• Purposeful Hourly Rounding on Patients</td>
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<td></td>
<td><strong>Environment – Clean &amp; Quiet</strong></td>
<td>• Nurse Knowledge Exchange / Care Boards</td>
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<td><strong>Staff Responsiveness</strong></td>
<td>• Nurse Communication Skills - CARE</td>
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<td><strong>Problem Resolution / Service Recovery</strong></td>
<td>• Patient-Centered Relationships</td>
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<td><strong>Coordination / Flow</strong></td>
<td>• Culturally Sensitive Care</td>
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<td><strong>Comfort / Pain</strong></td>
<td>• Nursing Vision and Values</td>
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<td>• Noise Abatement/“Quiet at Night” Campaigns</td>
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<td>• Environmental Standards Defined</td>
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<td>• Housekeeping Communication Tools</td>
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<td>• UBT Initiatives – EVS, Facilities, etc.</td>
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<td>• Purposeful Hourly Rounding on Patients</td>
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<td>• Call Light Responsiveness/Phone Systems</td>
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<td>• Teamwork: Coordination Across the Continuum</td>
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<td>• Service Recovery Training with A-HEART</td>
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<td>• Manager Rounding on New Admits and Discharges</td>
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<td>• ED Door-to-Floor Throughput</td>
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<td>• Hospital Throughput Initiatives</td>
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<td></td>
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<td>• MD/RN Bedside (Discharge) Rounds</td>
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<td>• Discharge Scheduling/Coordination</td>
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<td>• Hand-Off Management Initiatives</td>
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<td>• Discharge Phone Calls</td>
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## Service and Organizational Excellence Overview

<table>
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<tr>
<th>Sequence</th>
<th>Timeframe</th>
<th>Tactics</th>
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<tbody>
<tr>
<td>Aligned Leadership (launching)</td>
<td>6 months</td>
<td>Goal Cascading, Accountability</td>
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<tr>
<td>Aligned Culture (engaging)</td>
<td>6-12 months</td>
<td>Rounding, Recognition, Standards, Coaching</td>
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<tr>
<td>Aligned Behaviors (standardizing)</td>
<td>12-24 months</td>
<td>Communication Skills, Patient Rounding, Pre- &amp; Post-Calls</td>
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<td>Aligned Processes (sustaining)</td>
<td>ongoing</td>
<td>Hiring, Onboarding, Performance Management</td>
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Aligned Leadership and Goals

• Ambitious, challenging goals
  – National 75th percentile

• Cascaded and visible throughout the organization
  – National Senior Leadership
    • Regional Leadership
      – Hospital Leadership to front-line managers and labor partners

• Measure performance at all levels – web-based access to data

• Performance and incentive goals
Increased Transparency

- All 10 HCAHPS Measures
- Top level view shows overall trend
- Dots indicate individual hospital performance
- Goal is to improve performance and decrease variation
- Ability to drill down by region, hospital measure, and compare to national percentiles
Hospital Service Performance by Region and Medical Center

Performance is trended and reported compared to national percentiles.

UP TO THE MINUTE DATA WILL BE PRESENTED
Using the Voice of the Patient

- Patient comments are transcribed
- Comments are reviewed by unit managers and shared with staff
- Qualitative and quantitative data

...your staff was friendly, helpful as well as professional in every way. We will never forget the kindness of a recovery nurse named Melody. She was everything you would wish a nurse to be...You are to be commended for a team that works well together for the comfort and good of the patient and their family.

Anonymous patient, Los Angeles Medical Center, 10/20/09
Aligned Culture - Engaged Front-Line Staff

Unit Based Teams

- Engaged front-line staff working on service
- Utilizing performance improvement methodology
- Successful projects include:
  - Quiet at night
  - Cleanliness
  - Nurse communication
  - Pain management
- Spread successful practices
Unit Based Team Measures Performance

MBU, HCAHPS Quietness of the Hospital Environment

- UCL = 71.92
- CTL = 55.84
- LCL = 39.85

50th Percentile = 53
75th Percentile = 61

Kaiser Permanente
Aligned Behaviors – Tools for Change

• **Building Trust & Confidence**
  - Focuses on self introduction, handoffs, and “managing up”

• **The Right Words at the Right Times**
  - Breaks down the notion of key words into a structured and methodical approach

• **Communicating with CARE**
  - C- Connect, A- Ask, R- Respond, E- Educate

• **Service Recovery with A-HEART**
  - Introduces tools and practice for service recovery situations
  - Builds confidence in dealing with difficult situations
  - Builds patient loyalty
Determining Focus Areas

- All HCAHPS dimensions are important from a quality perspective
- Focus on gaps to external benchmarks
- Pushing scores down to accountable units
- Implement evidence-based practices that impact more than one measure
One Practice That Influences Many Opportunities…

Purposeful Hourly Rounding

- Improved Communication
- Increased Patient Satisfaction
- Reduction in Hospital Acquired Pressure Ulcers
- Reduction in Falls
- Improved Teamwork
- Improved Satisfaction with Professional Practice
- Creation of Healing Environment
- Improved Perception of Cleanliness
- Improved Safety
- Improved Perception of Staff Responsiveness

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HCAHPS Journey - Where We Are Now

32-35* Kaiser Permanente Hospitals
HCAHPS Rate Hospital (percentage of 9 and 10 ratings) All Inpatient

*Number of hospitals has increased from 32 to 35 since 2006
Challenges

- Lack of National Service-line benchmarks
- Public reporting of HCAHPS data
  - Various methodologies
    - Consumer Reports
    - CHART
    - CMS
Keys to Success

• Senior leadership commitment to service excellence
  – Census sampling

• Aligned, cascading goals

• Engaged front-line staff
  – Unit level data

• Accountability for outcomes

“Execution is the major job of a leader and must be the core element of an organization’s culture.”

- Bossidy & Charan
Special Thanks to:

- Deborah Romer, Vice President, National Service Quality

- Robert S. Mangel, Ph.D., Senior Manager, Service Quality Research

- Stephanie A. Fishkin, Ph.D., Senior Consultant, Center for Health Care Analytics
For More Information

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