NEW YORK CITY HEALTH & HOSPITALS CORPORATION

Challenges/Lessons Learned: Implementation of a Systemwide Quality Improvement Approach in Measuring Patient Perception of Care

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Baltimore, Maryland
LEARNING OBJECTIVES

- Identify challenges to implement a standard approach in measuring patient perception of care in a large scale public healthcare system.

- Discuss implementation of quality improvement principles to achieve successful outcomes.
PUBLIC BENEFIT CORPORATION

- Largest municipal hospital system; $6.3 billion
- 11 acute care (Joint Commission-accredited)
- 4 long term care (Joint Commission-accredited)
- 6 diagnostic and treatment centers
- A certified home care agency
- A managed care organization
- Over 80 community health clinics
- Affiliation w/all major NYC Medical Schools
- 42,000 employees, including contracted staff
- Provides services to a very diverse population, many immigrants, 450,000 uninsured
- Serves 1.3 million New Yorkers
CORPORATE MISSION

- Provide comprehensive health services of the highest quality to NYC residents, regardless of ability to pay, in a humane and respectful manner.
- In fulfilling its mission, HHC promotes the fullest meaning of health: total physical, mental, and social well-being.

CORE VALUES

- Patient-Centered Care
- Quality & Patient Safety
- Continually Striving for Excellence
- Integrity
- Teamwork
GOALS

- Be the “Provider of Choice” by communities it serves; maintain readiness in the competitive marketplace.

- Embark/Implement system-wide approach to improve Culture, Quality, Safety, and Patient Satisfaction.
HCAHPS IMPLEMENTATION

- January to June 2007: HCAHPS dry run surveys
- July 2007: CMS HCAHPS survey participation
- QAC (Quality Assurance Committee) of the Board of Directors sanctioned Corporate HCAHPS Task Force w/11 HHC hospitals’ representatives
- “Voice of the Patient” added to survey tool to hear patient’s response on, “Thinking of this hospital’s admission, what one thing could the hospital have done better?”
- HCAHPS results reported quarterly to QAC meetings; action plans discussed using “Moments of Truth” form
CAHPS IMPLEMENTATION

- April 2008: expanded to four OPD/ED, two D&TC; analysis of scores showed a high correlation of patient experience during ED/OPD initial contact to inpatient admission
- January 2009: expanded to all HHC 11 hospitals’ OPD/ED and 6 D&TCs. “Voice of the Patient” added as last question (patients provide comments about their experience)
- January 2010 – HCAHPS sampling increased from 300 to 600 per hospital per year
- April 2010: added Mental Health inpatient and Home Care/Outpatient Hemodialysis services as required by CMS
- Dedicated Champion from each HHC facility: drives program; ensures Vendor’s database monitored weekly; responses analyzed; improvement opportunities identified and implemented
QUALITY IMPROVEMENT PROCESS

ASSESSMENT and ANALYSIS of HCAHPS scores

IDENTIFICATION of areas needing improvement and their root causes

DEVELOPMENT of best practices and improved techniques and procedures

WHO
Multi-disciplinary teams, task forces, leadership at all levels and including representatives from non-medical departments like Environmental/Support Services, Facilities Management, Security

HOW
Town hall meetings, vendor workshops and boot camps, systemwide conferences and reviews, integration into routine staff meetings
QUALITY IMPROVEMENT PROCESS (continued)

IMPLEMENTATION of best practices and improved techniques and procedures

EVALUATION of effectiveness of best practices and improved techniques and procedures

ASSESSMENT of subsequent HCAHPS scores

WHO

Everyone. All hands on deck. Leaders, managers, doctors, nurses, other health care providers, admitting staff, housekeepers/janitors, maintenance personnel, patient transporters, security guards, patient relations staff, etc.

HOW

Closely integrated into the daily workflows, activities, and routines of everyone and anyone with a direct connection to patients.

TRAINING & EDUCATION

COMMUNICATION (Nurse, Doctor, Medicines, Discharge)

RESPONSIVENESS & PAIN MANAGEMENT

PATIENT ENVIRONMENT

ALL AREAS IN GENERAL
BEST PRACTICES IMPLEMENTED
(Training and Education)

- Morale improvement, team-building, and empowerment activities
- Share “Voice of the Patient” with staff on weekly meetings and Town Hall (community) meetings
- “On The Road to Excellence Service Recovery”
- Monthly web-based staff in-service
- Employee of the Month
- Department/Unit Celebrations
BEST PRACTICES IMPLEMENTED
(Nurse & Doctor Communication, Communication about Medicines, and Discharge Information)

- Translation device in each patient room
- Whiteboards
- Pad & pen included in admissions packet – patient & family can write questions
- Uniforms standardized, and improved ID cards/tags worn, to make identification of the various members of the healthcare team easier for the patient & family
- Discharge Planning starts upon admission
- Charm Star Program
- Training to improve listening techniques
BEST PRACTICES IMPLEMENTED
(Staff Responsiveness and Pain Management)

- Increased unit staff rounding by nursing leadership
- Call bells turned off only after responding to patients in room
- Bilingual patient care partners assigned to ICUs
- Anticipate pain; PRN advanced to standing orders
- Doctors address pain earlier in the hospitalization process
BEST PRACTICES IMPLEMENTED
(Room Environment – Cleanliness & Quietness)

- Quiet time for patients 3X a day
- Environmental Service Call Center Hotline
- Increased supervision by Environmental Services & Facilities Management
- Improved staff awareness of “quiet times”
- Wider use of checklists
BEST PRACTICES IMPLEMENTED
(Affecting All Aspects of a Patient’s Experience)

- Customer Service Navigator assigned in ED, OPD and inpatient units
- Customer Service Manual
- Improved signage
- Thank You Cards
Interviewer: You may begin your comment now. Patient: To me, Coney Island Hospital, to me, is the best hospital, because that's the only hospital that I go. The staff is okay, the doctor is okay. What... Improvement is always good. If they could improve, during the, at night, when people, well, that's a hospital, which is normal, because there is nurses and nurses aides, they're working all night, but if they could lower their voice, that would be perfect. Interviewer: Does that conclude your comment? Patient: Yes.
Patient: I had a breathing problem when I went to the hospital, and you guys took care of it really well. And I had some problems in the room, and the nurses were attentive, and they came, and they helped me breathe. There was only one problem. When I was discharged from the hospital - to synchronize where the - my insurance - the bus or the ambulette was going to come and pick me up - the time that was synchronized - it took me from 12 o'clock to 7 o'clock at night to finally get a car service out of the hospital to bring me home. That was my only complaint. Other than that, the staff, and the nurses - they treated me with the utmost respect. It's a great hospital. I would recommend it to anybody. I'm done with my comment.
Patient: Well, the hospital overall was good. But there were like one or two few glitches. For example, there are one or two where cleanliness is concerned in the room. It could have been taken care of a little bit better. And one or two of the nurse assistants - you know, the way they deliver food - they just, like, dropped it on the table - you know, that can be upgraded. But overall, everything was great. Finished.
Brooklyn, NY
Survey completed on October 13, 2009

Patient: I don't have no complaints. They treated me good, and I was very satisfied with everything there. The only thing I wasn't satisfied with was the food, but everything else was alright. The nurses were wonderful, the doctors were wonderful, very respectful, and very caring.

Interviewer: Will that be all?
Patient: That's it.
Hospital Compare July 2008–June 2009
Communication with Nurses

- US Average: 75%
- NYS Average: 70%
- NYC Average: 63%
- HHC Average: 64%
Hospital Compare July 2008-June 2009
Communication with Doctors

- **US Average**: 80%
- **NYS Average**: 76%
- **NYC Average**: 73%
- **HHC Average**: 77%
Hospital Compare July 2008–June 2009
Responsiveness of Hospital Staff

- US Average: 63%
- NYS Average: 55%
- NYC Average: 47%
- HHC Average: 49%
Hospital Compare July 2008–June 2009
Pain Management

- US Average: 68%
- NYS Average: 64%
- NYC Average: 58%
- HHC Average: 59%
Hospital Compare July 2008–June 2009
Communication about Medicines

US Average: 59%
NYS Average: 55%
NYC Average: 51%
HHC Average: 55%
Hospital Compare July 2008–June 2009
Cleanliness of Hospital Environment

- US Average: 70%
- NYS Average: 65%
- NYC Average: 61%
- HHC Average: 65%
Hospital Compare July 2008–June 2009
Quietness of Hospital Environment

- US Average: 57%
- NYS Average: 47%
- NYC Average: 47%
- HHC Average: 49%
Hospital Compare July 2008–June 2009
Discharge Information

- US Average: 81%
- NYS Average: 79%
- NYC Average: 74%
- HHC Average: 79%
Hospital Compare July 2008-June 2009
Recommend the Hospital

- US Average: 68%
- NYS Average: 62%
- NYC Average: 56%
- HHC Average: 59%
RESULTS

- HHC hospitals did well if not better, than many of our NYC counterparts
- In Brooklyn and Queens, two of our hospitals earned top ranking in overall satisfaction and willingness to refer others to the hospital
- In the Bronx, one of our hospitals ranked close second to neighbor voluntary hospital
- In Manhattan, one hospital showed strong results that placed it on the top quartile for the borough
TRANSPARENCY

- In 2009, HHC began publishing our systemwide HCAHPS scores on our main website, http://www.nyc.gov/hhc, with a link to those scores at the top of the very first page.
Patient Satisfaction

In HHC hospitals, we believe that by paying close attention to the satisfaction of our patients, we can better assure the quality of healthcare we provide.

Patient satisfaction at HHC hospitals is measured by a standardized survey known as the Hospital Consumer Assessment of Healthcare Providers & Systems (HCAHPS). The survey has been validated by the federal Centers for Medicaid and Medicare Services (CMS) as a standard assessment tool for all hospitals throughout the nation. The survey scores were first made public by CMS in March 2009 and are updated quarterly.

Randomly selected patients admitted to each hospital for general medicine, surgery, obstetrics or gynecologic care are asked a range of questions to measure their satisfaction with various aspects of hospital service. The survey, which is offered to selected patients in their own language, provides an objective basis for comparing each hospital's performance. It also gives hospital leadership important feedback for improving these aspects of patient care which need further attention.

The survey results shown below reflect the most recently published patient satisfaction scores in HHC hospitals compared to city and state average scores. City averages scores were computed from scores of all New York City hospitals, as reported by CMS.

How do patients rate the hospital overall? January 2008 - December 2008

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<tr>
<th></th>
<th>Hospital Average</th>
<th>NYC Average</th>
<th>NY State Average</th>
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<tbody>
<tr>
<td>NHC Average</td>
<td>52%</td>
<td>49%</td>
<td>56%</td>
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<tr>
<td>25%</td>
<td>50%</td>
<td>Higher is Better</td>
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<td>75%</td>
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Would patients recommend the hospital to friends and family? January 2008 - December 2008

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NEXT STEPS

- Monitor/sustain Best Practices per hospital
- Identify Best Practices for Corporate-wide implementation
- Conduct employee/physician satisfaction surveys
- Conduct Rehab survey
- Conduct Mental/Behavioral Health survey
- Conduct Hemodialysis survey
- Conduct focused training/refresher courses for clinical and non-clinical staff
QUESTIONS

Thank you!