

Reporting H-CAHPS Results/Data to Staff to Facilitate Improvement

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Track: Improving Patients' Experiences With Care
Session: Strategies for Improving Patients' Experience
With Hospital Care
Date & Time: April 20, 2010, 9:30 am
Track Number: CAHPS T2- S1-2

Hillcrest Hospital

- **Full-service 424-bed, 2300 employee Cleveland Clinic Community Hospital in suburban Cleveland.**
- **11-time Thomson Reuter 100 Top Hospital Recipient**
- **U.S. News and World Report Top 50 Hospital for digestive disease and pulmonary service lines**
- **Vision: To be the best place to receive care, the best place to work, and the best place to practice medicine**



Charge

To effectively distill large amounts of data into meaningful information to support Patient Experience improvement efforts

Traditional Approach

- **Manager access to vendor website for reporting**
- **Hospital Patient Experience KPIs included on balanced scorecards**
- **Limited unit-level analysis or public reporting alignment**
- **Targets tied to historic performance and incremental improvement**

New Approach

- **Retain manager-level access to vendor-based reporting but “push out” frequent summary statistics**
- **Provide unit-level detail**
- **Set new targets and stretch goals using external benchmarks**
- **Increase transparency of performance (employees, medical staff, and patients)**

Example of early unit-level report

HCAHPS TOP BOX SCORES RESPONSES THROUGH NOVEMBER 17, 2009									
Nursing Communication Domain	Doctor Communication Domain	Staff Response Domain	Pain Management Domain	Communication re: Medications Domain	Communication re: Discharge Domain	Hosp. Environment Rooms and Bathrooms Clean	Hosp. Environment Quiet at Night	Hospital Rating	Would Recommend
Target 73% Always	Target 79% Always	Target 60% Always	Target 67% Always	Target 58% Always	Target 79% Yes	Target 70% Always	Target 56% Always	Target 63% Rating 9 or 10 out of 10	Target 67% Yes Definitely Recommend
2008 (n=2053)									
75%	84%	60%	75%	56%	86%	62%	43%	62%	74%
YTD-2009 (n=2390)									
76%	85%	59%	74%	56%	85%	63%	41%	62%	71%
Q3-2009 (n=747)									
78%	85%	61%	74%	59%	85%	68%	44%	66%	75%
4 East - Main Tower - HCAHPS TOP BOX SCORES									
Nursing Communication Domain	Doctor Communication Domain	Staff Response Domain	Pain Management Domain	Communication re: Medications Domain	Communication re: Discharge Domain	Hosp. Environment Rooms and Bathrooms Clean	Hosp. Environment Quiet at Night	Hospital Rating	Would Recommend
Target 73% Always	Target 79% Always	Target 60% Always	Target 67% Always	Target 58% Always	Target 79% Yes	Target 70% Always	Target 56% Always	Target 63% Rating 9 or 10 out of 10	Target 67% Yes Definitely Recommend
2008 (n=134)									
72%	82%	59%	82%	48%	98%	62%	31%	64%	77%
YTD-2009 (n=116)									
69%	84%	53%	74%	46%	86%	55%	26%	61%	68%
Q3-2009 (n=16)									
75%	91%	60%	63%	58%	93%	72%	29%	72%	79%
<small>Green = At or above CMS Top Box National Average Yellow = Within 1% of CMS Top Box National Average Red = Below CMS Top Box National Average</small>									
Updated 11/17/2009									

Next iteration (includes historic data)

HCAHPS TOP BOX SCORES RESPONSES THROUGH NOVEMBER 17, 2009
QUARTERLY TRENDS

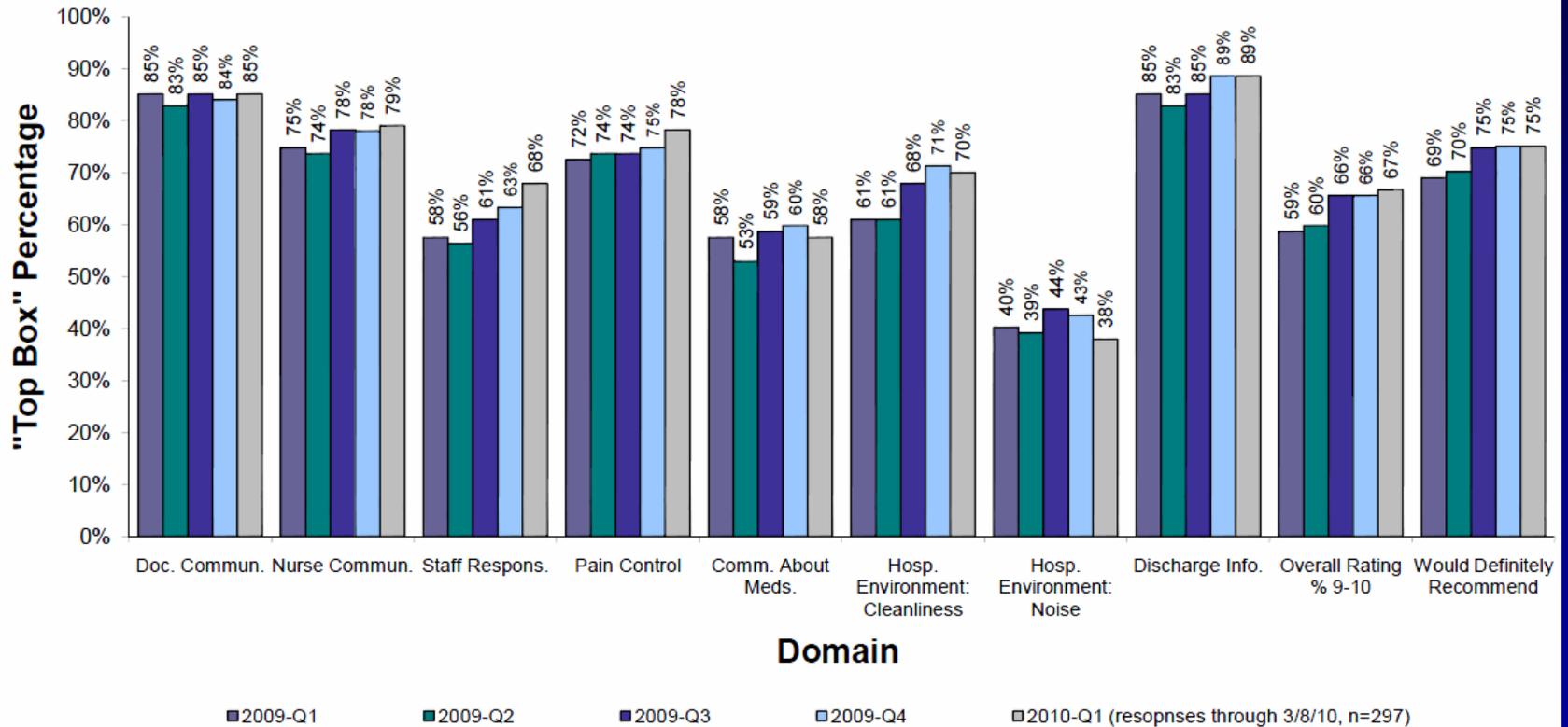
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	Target 73% Always	Target 79% Always	Target 60% Always	Target 67% Always	Target 58% Always	Target 79% Yes	Target 70% Always	Target 56% Always	Target 63% Rating 9 or 10 out of 10	Target 67% Yes Definitely Recommend
Q2-2008	76%	84%	62%	76%	59%	86%	60%	44%	60%	76%
Q3-2008	75%	85%	59%	74%	54%	86%	63%	40%	63%	72%
Q4-2008	75%	84%	59%	76%	56%	86%	63%	44%	61%	74%
Q1-2009	75%	85%	58%	72%	58%	85%	61%	40%	60%	69%
Q2-2009	74%	84%	56%	74%	53%	84%	62%	39%	61%	71%
Q3-2009	78%	85%	61%	74%	59%	85%	68%	44%	66%	75%

4 East - Main Tower - HCAHPS TOP BOX SCORES
QUARTERLY TRENDS

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Q2-2008	75%	85%	61%	77%	48%	98%	49%	31%	52%	72%
Q3-2008	69%	89%	52%	85%	45%	104%	60%	16%	74%	77%
Q4-2008	72%	72%	63%	83%	52%	95%	79%	45%	69%	85%
Q1-2009	70%	87%	54%	76%	48%	85%	49%	29%	56%	62%
Q2-2009	66%	81%	55%	76%	43%	86%	61%	23%	63%	74%
Q3-2009	75%	91%	60%	63%	58%	93%	72%	29%	72%	79%

Hospital Quarterly Trend Report

Hospital HCAHPS Performance



Unit-Level Quarterly Change Report

Unit	% Rating Hospital 9 or 10 out of 10	% Would Definitely Recommend Hospital	Communication with Nurses % Always	Responsiveness of Staff % Always	Communication with Doctors % Always	Room and Bathroom Clean % Always	Quiet at Night % Always	Pain Managed % Always	Communication re: Meds % Always	Communication re: Discharge % Yes
Unit 1A	2	-2	5	12	2	1	3	4	-1	0
Unit 2A	8	-7	5	14	21	12	17	32	16	9
Floor A	5.0	-4.5	5.0	13.0	11.5	6.5	10.0	18.0	7.5	4.5
Unit 1B	8	4	-1	13	0	6	2	3	8	5
Unit 2B	-17	-10	-12	-12	-18	-13	-9	-16	4	2
Unit 3B	20	21	20	11	19	-7	7	40	21	18
Floor B	3.7	5.0	2.3	4.0	0.3	-4.7	0.0	9.0	11.0	8.3
Unit 1C	9	9	-18	-2	-8	-1	-8	-1	-22	0
Unit 2C	1	-10	7	-6	17	12	-6	5	13	-2
Floor C	5.0	-0.5	-5.5	-4.0	4.5	5.5	-7.0	2.0	-4.5	-1.0
Unit 1D	2	1	2	12	-6	-4	-1	2	14	13
Unit 2D	-4	1	1	9	5	0	1	13	16	4
Floor D	-1.0	1.0	1.5	10.5	-0.5	-2.0	0.0	7.5	15.0	8.5
Unit 1E	-13	-5	-11	-8	-9	7	-1	-11	-5	-6
Unit 2E	-5	-5	1	10	-7	0	2	12	-4	17
Floor E	-9.0	-5.0	-5.0	1.0	-8.0	3.5	0.5	0.5	-4.5	5.5
Unit 1F	20	13	6	-4	2	14	20	13	-4	-13
Unit 2F	4	1	-5	1	-6	21	-7	-4	-2	3
Unit 3F	-15	-13	-7	-5	-1	7	-8	-12	-18	-4
Floor F	3.0	0.3	-2.0	-2.7	-1.7	14.0	1.7	-1.0	-8.0	-4.7
HOSPITAL:	0.0	-1.0	-2.0	3.0	-1.0	4.0	0.0	2.0	2.0	3.0

surveys received through 2/8/10

Monthly Operating Reports

HCAHPS SCORES Patient Experience Scores											
HCAHPS Domains All Units Date: 3-1-2010	% Rating Hospital 9 or 10 out of 10	% Would Definitely Recommend Hospital	Communication with Nurses % Always	Responsiveness of Staff % Always	Communication with Doctors % Always	Room and Bathroom Clean % Always	Quiet at Night % Always	Pain Managed % Always	Communication re: Medis % Always	Communication re: Discharge % Yes	
Target Scores	63%	67%	73%	60%	79%	68%	54%	67%	59%	79%	
Discharge Dates	# Surveys										
January 2009	267	61%	72%	76%	55%	85%	66%	40%	74%	58%	89%
February 2009	246	56%	66%	75%	60%	86%	62%	43%	71%	62%	84%
March 2009	233	59%	68%	72%	55%	84%	54%	38%	71%	53%	84%
April 2009	254	54%	71%	70%	54%	82%	54%	38%	70%	56%	82%
May 2009	257	67%	70%	77%	61%	86%	67%	40%	78%	53%	85%
June 2009	237	60%	68%	72%	55%	82%	61%	39%	75%	49%	82%
July 2009	264	63%	67%	72%	64%	83%	63%	39%	70%	55%	85%
August 2009	264	66%	79%	78%	55%	85%	68%	44%	76%	60%	84%
September 2009	235	69%	79%	84%	64%	87%	71%	47%	75%	60%	85%
October 2009	234	64%	72%	74%	66%	86%	72%	44%	77%	60%	89%
November 2009	221	69%	78%	77%	66%	89%	71%	44%	77%	63%	89%
December 2009	247	63%	71%	75%	61%	77%	71%	41%	69%	56%	87%
January 2010	205	67%	71%	75%	66%	87%	68%	38%	77%	59%	89%
February 2010	46	75%	83%	85%	72%	83%	74%	47%	83%	58%	91%
Q1-2009	746	59%	69%	75%	58%	85%	61%	40%	72%	58%	85%
Q2-2009	748	60%	70%	74%	56%	83%	61%	39%	75%	53%	83%
Q3-2009	764	66%	75%	78%	61%	85%	68%	44%	74%	59%	85%
Q4-2009	702	66%	74%	75%	64%	84%	71%	43%	75%	60%	89%
Q1-2010	251	68%	74%	76%	68%	86%	69%	39%	78%	59%	89%
Q2 to Q4-2008	2112	62%	75%	75%	60%	84%	62%	43%	75%	56%	86%
2009	2960	62%	72%	75%	60%	84%	66%	41%	74%	58%	85%
YTD-2010	251	68%	74%	76%	68%	86%	69%	39%	78%	59%	89%

Key: Target Met Within 1% of Target Target not met

Note: Responses to HCAHPS surveys can take 6 weeks to be accepted post discharge.

Downloaded data sheets from vendor site for each time period populate tab summarizing results.

	A	B	C	D
5	Discharge Date	From 01/01/2008 To 09/30/2		
6				
7	HCAHPS SUMMARY INFORMATION			
8				
9				
10	Discharge Date: 1/1/08-12/31/08			
11	Rate hospital 0-10	n	%	
12	0	15	0	
13	1	6	0	
14	2	17	0	
15	3	42	0	
16	4	34	2	
17	5	86	4	
18	6	86	4	
19	7	204	10	
20	8	491	18	
21	9-10	1131	62	
22	Total	2112		
23				
24				
25	Recommend this hospital	n	%	
26	Definitely no	51	0	
27	Probably no	87	0	
28	Probably yes	615	28	
29	Definitely yes	1371	72	
30	Total	2124		

Supplemental Interventions

- **Comment reports distributed weekly to staff**
- **Weekly Patient Experience ACTION Meetings**
- **Spread unit-specific best practices**
- **Weekly *COO Update* with analysis, narrative and best practice sharing re: patient experience**
- **Convened Patient/Family Advisory Council**
- **Enhanced patient experience orientation content**
- **Posting of unit-specific and hospital results in all departments**
- **Posting most recent results on hospital's website**
- **Provide doctor-specific results to each physician**

Next Steps

- **Additional focus and analysis beyond “top box”**
- **Revisit targets and benchmarks**
- **Additional involvement of front line staff and patients in efforts**



Cleveland Clinic

Every life deserves world class care.