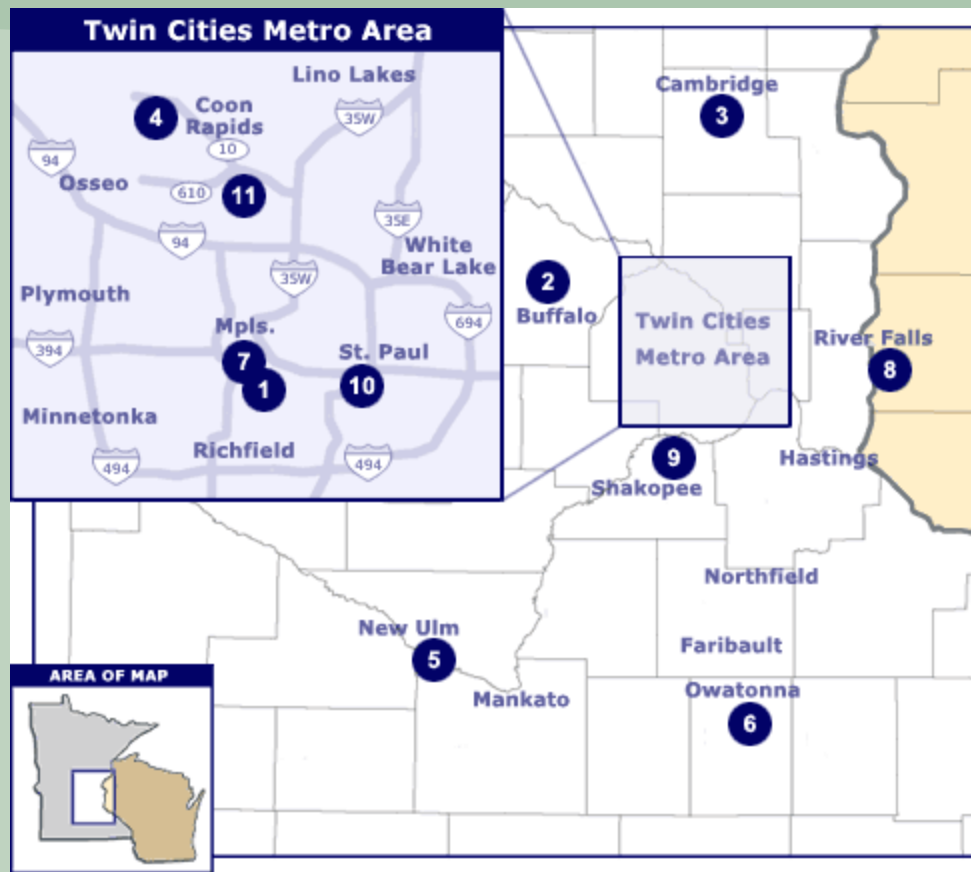


A Diagnostic Approach to Improving H-CAHPS Results at the Health System

**Janiece Gray, FACHE, MHA
Allina Hospitals & Clinics
Minneapolis, MN**

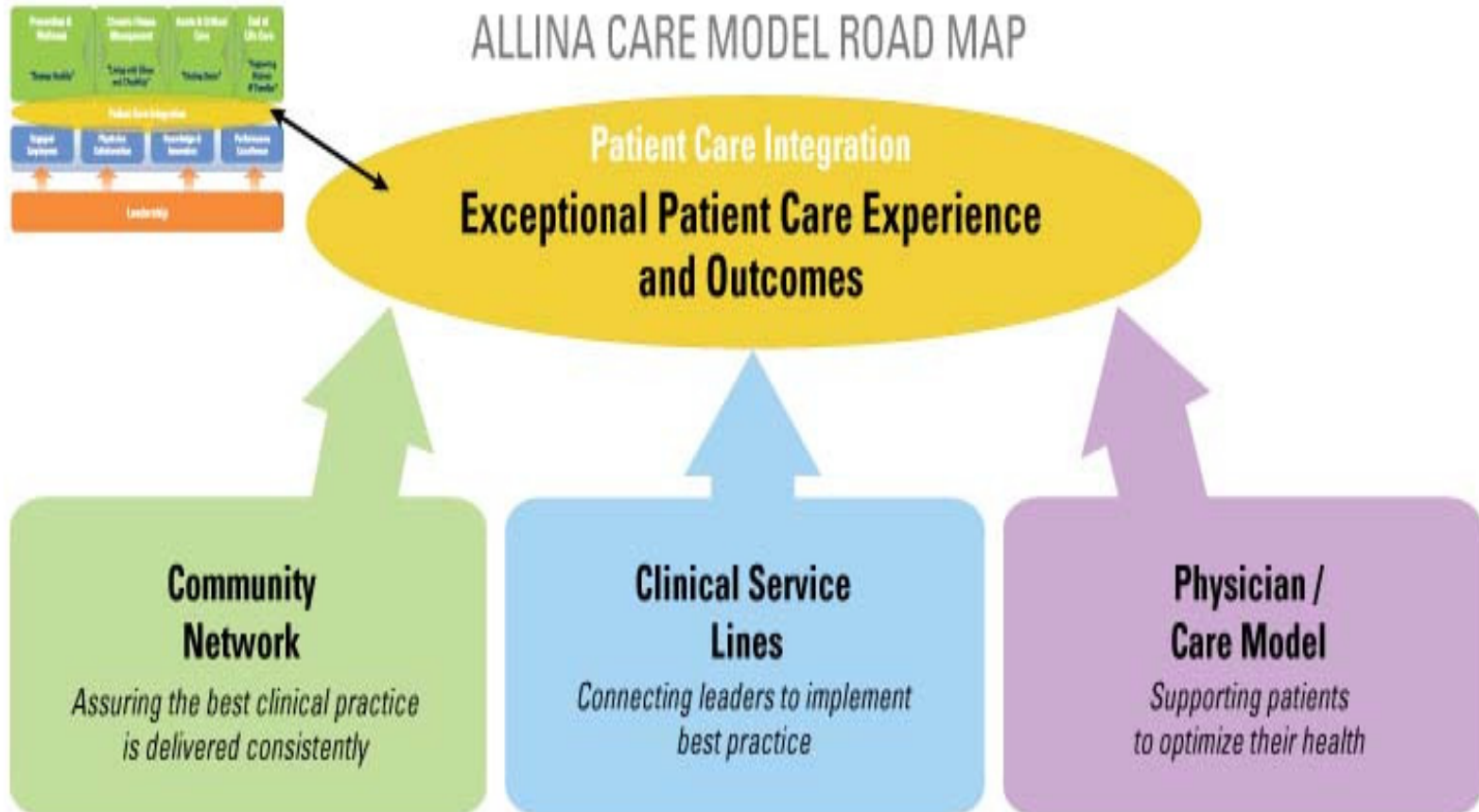
Track: Improving Patients' Experiences With Care
Session: Using H-CAHPS To Drive Systemwide
Improvements.
Date & Time: April 20, 2010, 2:15 pm
Track Number: CAHPS T2- S3-1

Allina Hospitals & Clinics



1. Abbott Northwestern - Minneapolis, MN
2. Buffalo Hospital - Buffalo, MN
3. Cambridge Medical Center - Cambridge, MN
4. Mercy Hospital - Coon Rapids, MN
5. New Ulm Medical Center - New Ulm, MN
6. Owatonna Hospital - Owatonna, MN
7. Phillips Eye Institute - Minneapolis, MN
8. River Falls Area Hospital - River Falls, WI
9. St. Francis Regional Medical Center - Shakopee, MN
10. United Hospital - St. Paul, MN
11. Unity Hospital - Fridley, MN

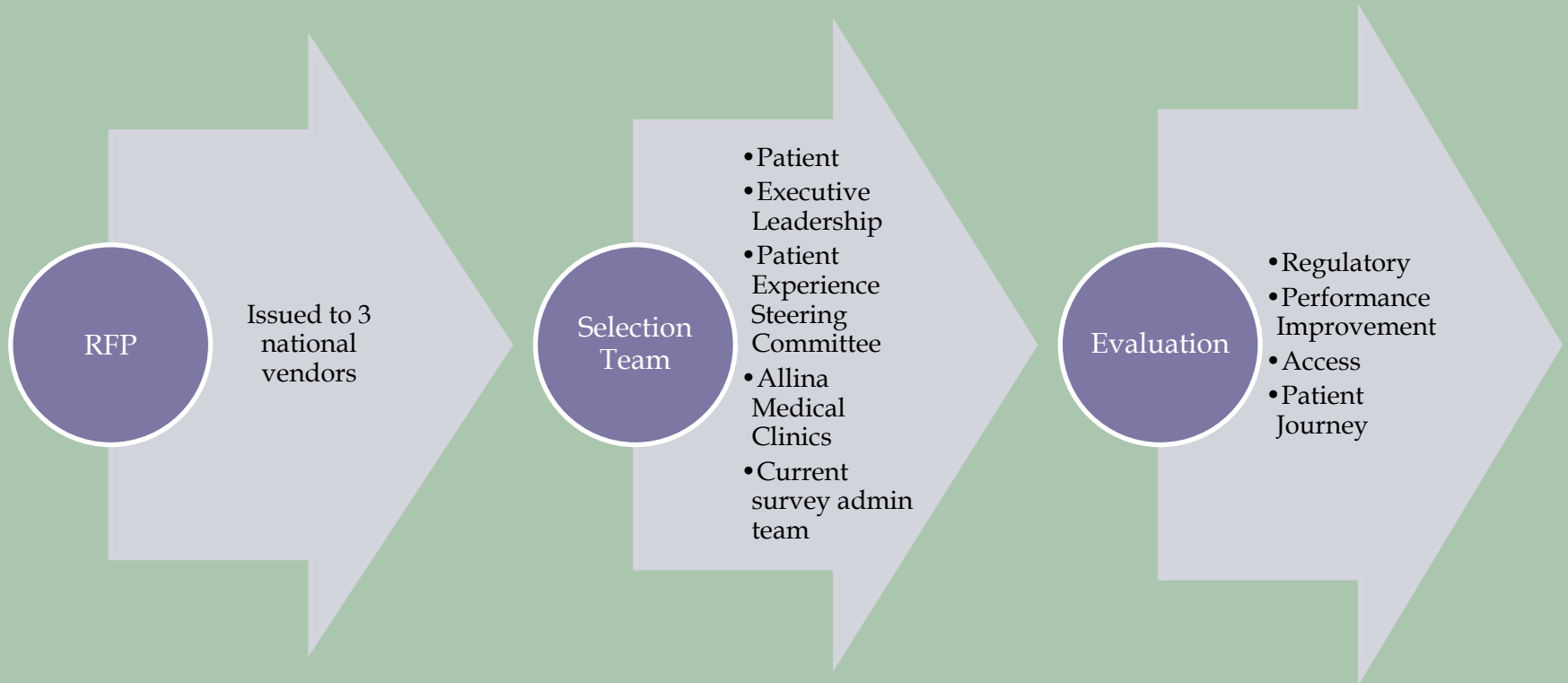
Allina 2.0: Enhancing the Patient Experience



Why Was a New Approach Needed?

- Regulatory Risk
- Performance Improvement
- Access
- Patient Journey
- Reporting Capabilities
- Partnership

Selection Process



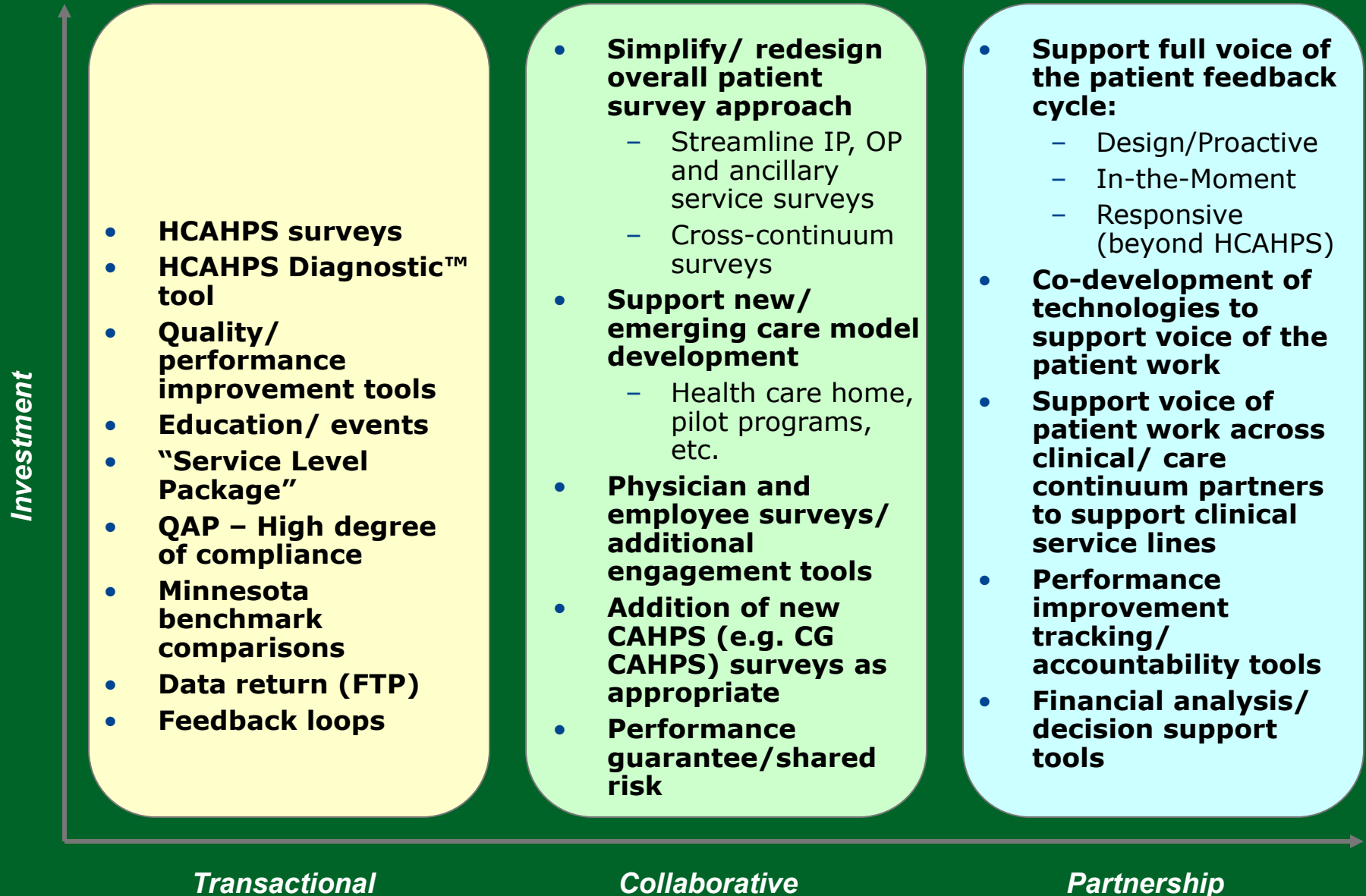
Patient Experience: Vendor selection process

Susan Blumentals, patient



ALLINA[®]
Hospitals & Clinics

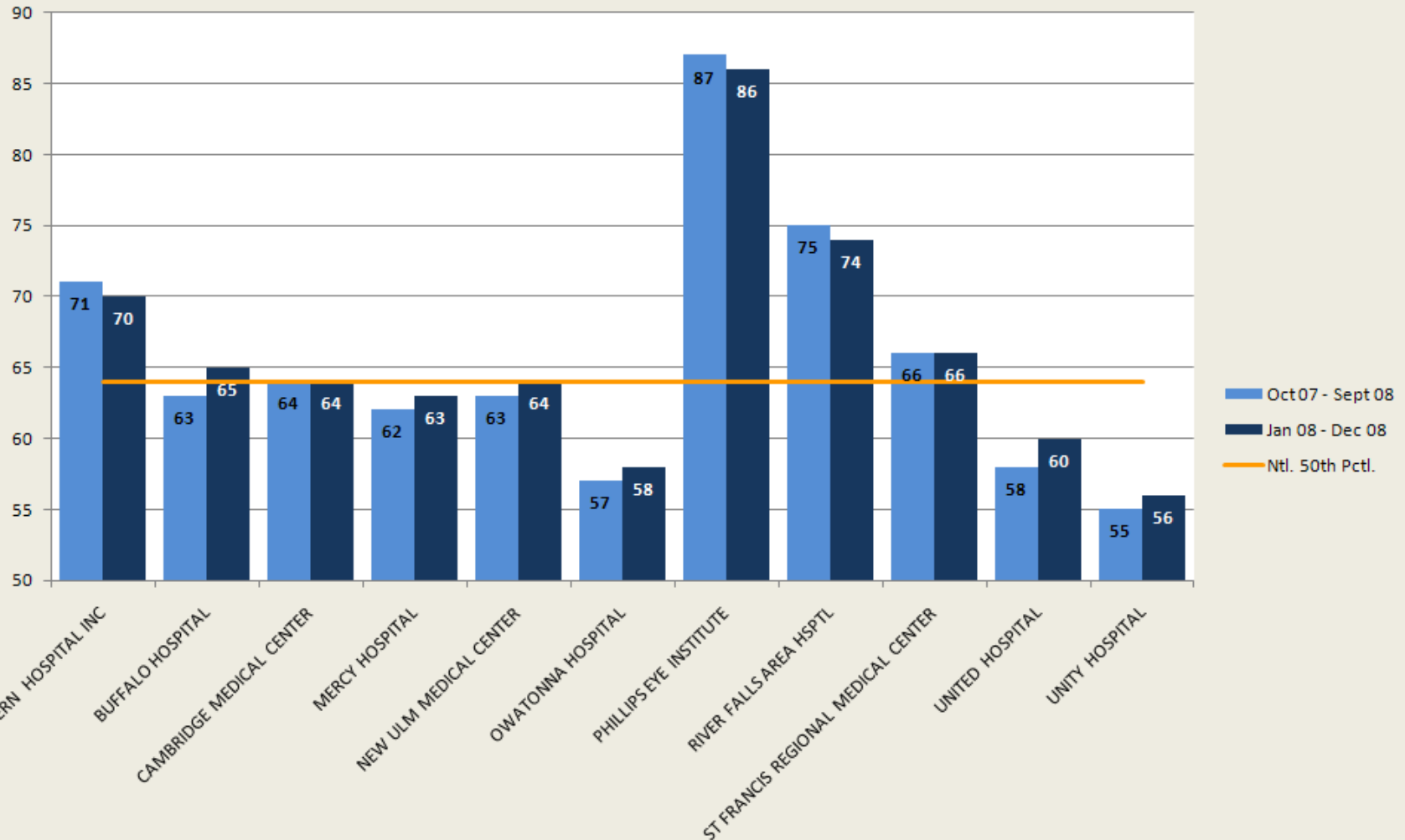
Partnership philosophy: Potential areas of engagement



What's Different with Avatar?

- Regulatory Risk
- Performance Improvement
- Access
- Patient Journey
- Reporting Capabilities
- Partnership

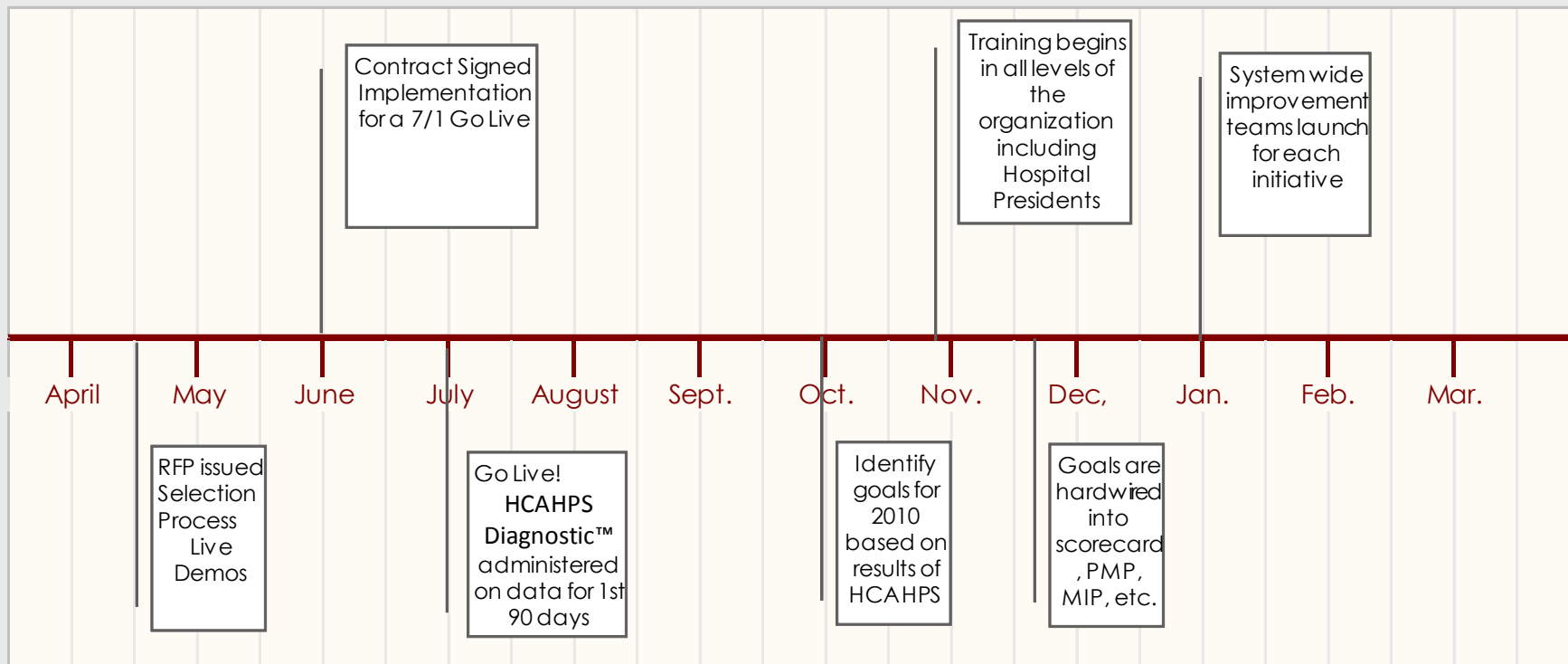
Baseline HCAHPS Results - Overall



Percent of patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).

Source for Individual Hospital Scores: www.hospitalcompare.hhs.gov. Results are from patients who had overnight hospital stays from October 2007 through September 2008 compared with January 2008 through December 2008.

Transition & Implementation Timeline

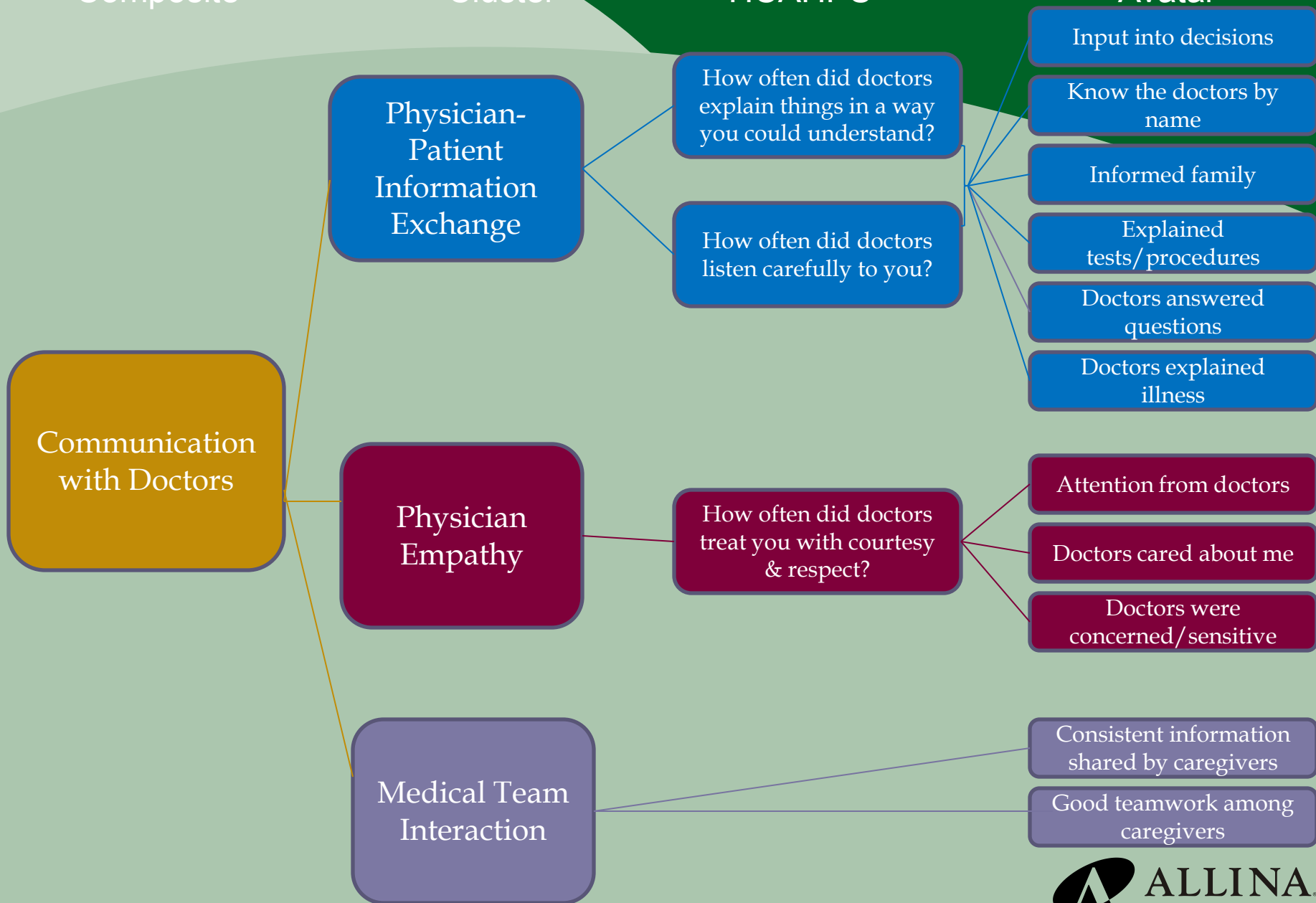


Composite

Cluster

HCAHPS

Avatar



Grade

Communication with Doctors

- Executive Sponsor - Dr. Tierza Stephan
 - Focus will be initially with the hospitalists at each site
 - Medical Staff leadership expanding to include all physician groups
- Specific focus on physician empathy & teach back
 - Tools/training under development based on physician input
 - Articles, videos/vignettes, communication tips
- Takeaways - Challenge/ Actions
 - Look for “windows of opportunity”
 - Tests of change

- Same systemwide approach underway for Pain Management
- Leveraging synergies between other key initiatives in the organization
 - Medical utilization & pain management for OB
- Look forward to sharing our success with you next year!