

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

April 20, 2010

Anthony Warmuth, MPA, FACHE, CPHQ
Director, Quality Management

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%
<div>Green = At or above CMB Top Box National Average</div> <div>Yellow = Within 1% of CMB Top Box National Average</div> <div>Red = Below CMB Top Box National Average</div>									
Updated 11/17/2009									

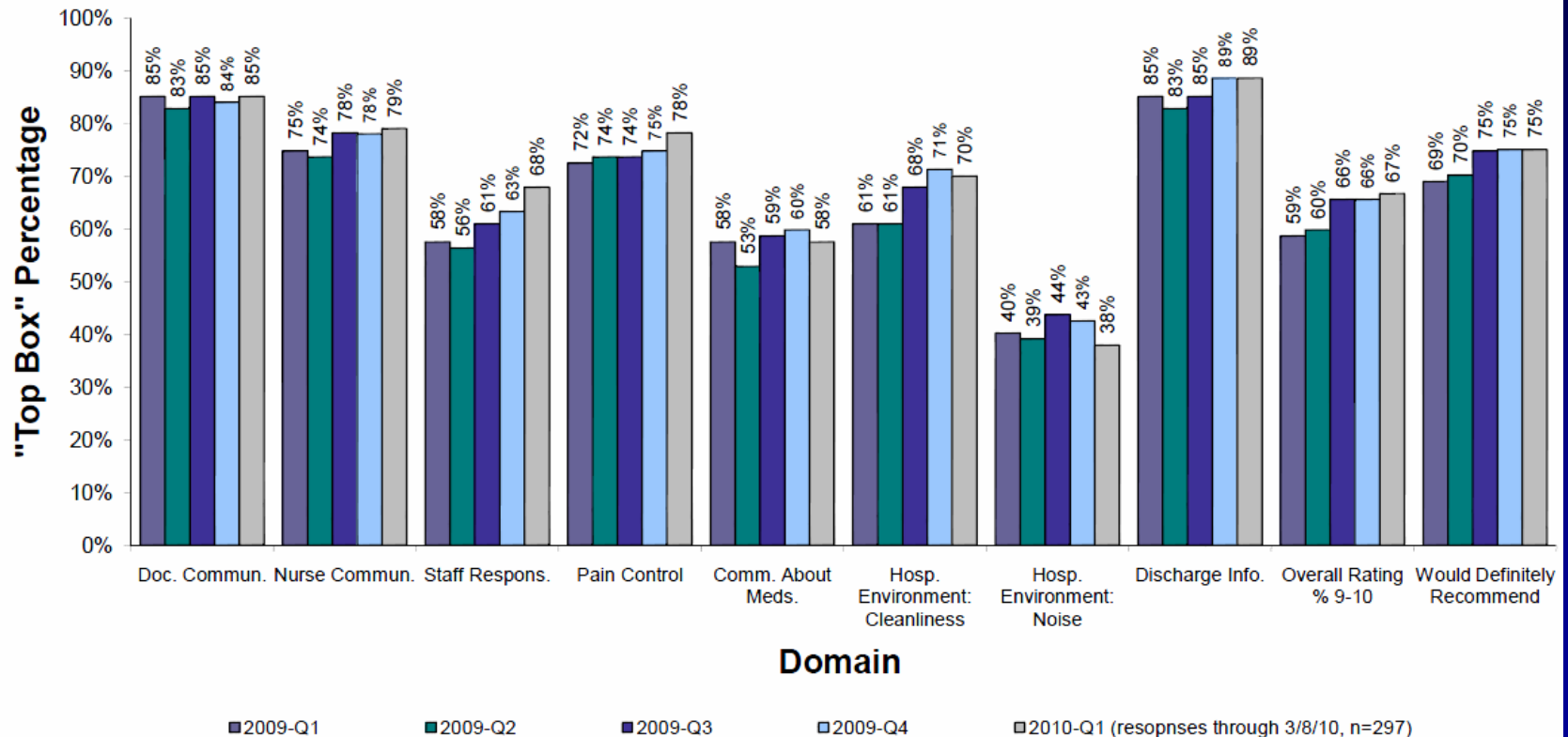
Next iteration (includes historic data)

HCAHPS TOP BOX SCORES RESPONSES THROUGH NOVEMBER 17, 2009 QUARTERLY TRENDS										
	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
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										
	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
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: Meds % 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.

Sample data

Template-based Reports

Templates facilitate automation of report generation

8													
9				Discharge Date*								Rec'd in last	
10		2008	2009	Q1-09	Q2-09	Q3-09	Q4-09	Jan-10	Feb-10	Q1-10	30 days		
11	n	2112	2963	746	748	764	705	217	80	297	215		
12	% Rating Hospital 9 or 10 out of 10	62	62	59	60	66	66	67	68	67	59		
13	% Would Definitely Recommend Hospital	75	72	69	70	75	74	70	78	72	65		
14	Communication with Nurses % Always	75	75	75	74	78	75	74	79	76	68		
15	Responsiveness of Staff % Always	60	60	58	56	61	63	67	69	68	59		
16	Communication with Doctors % Always	84	84	85	83	85	84	87	79	85	74		
17	Room and Bathroom Clean % Always	62	66	61	61	68	71	68	68	68	60		
18	Quiet at Night % Always	43	41	40	39	44	43	39	38	38	34		
19	Pain Managed % Always	75	74	72	75	74	75	76	85	78	69		
20	Communication re: Meds % Always	56	58	58	53	59	60	59	54	58	50		
21	Communication re: Discharge % Yes	86	85	85	83	85	89	89	89	89	81		
22													
23													
24				* Discharge surveys received through 03/8/2010									
25													
26													
27													
28													
29													
SUMMARY 2008 2009 Q1-09 Q2-09 Q3-09 Q4-09 Q1-10 Jan-09 Feb-09 Mar-09 Apr-09 May-09 Jun-09 Jul-09 Aug-09 Sep-09													

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.