



Executing a Patient Experience Measurement Initiative

Cathy Gorman Klug RN, MSN

Director, Quality Service Line

Nuance

Patient Experience Defined-The Beryl Institute



The sum of all **interactions**, shaped by an
organization's **culture**, that influence
patient **perceptions**
across the **continuum** of care.

Patient Experience-Worth the Investment

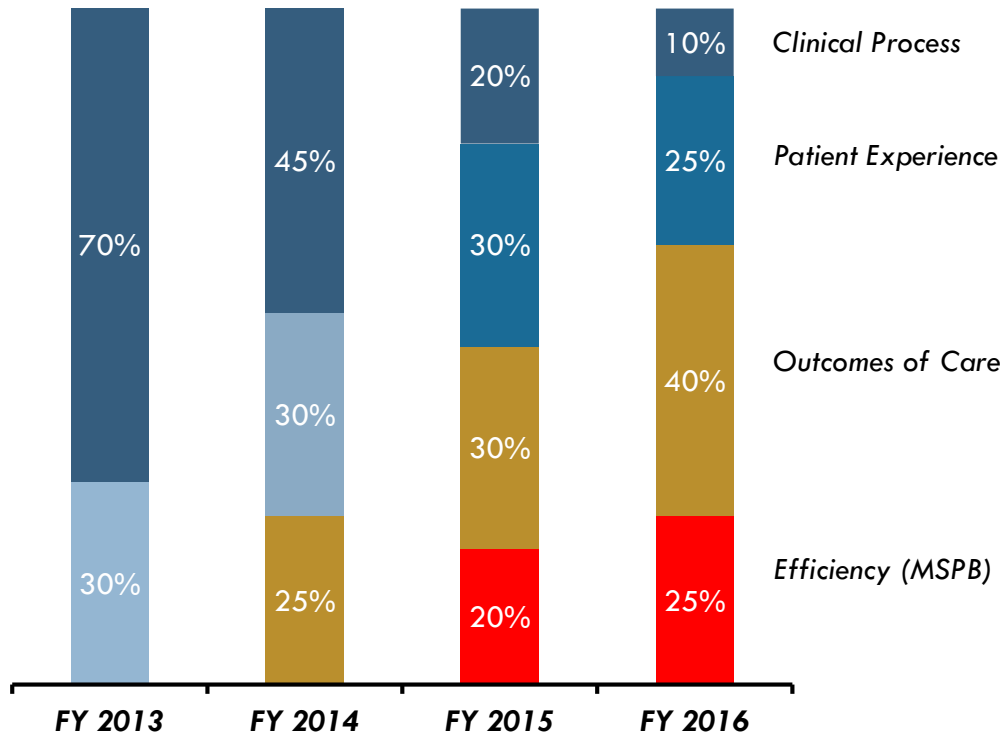
- Following a non-satisfactory resolution to a hospital service failure,
 - fewer than **two in 10** customers will return.
- Conversely if the organization reaches a satisfactory resolution in the moment:
 - more than **five in 10** customers will return
- Disengaged or dissatisfied are more likely to experience
 - a medical error
 - A hospital acquired conditions
 - a greater number of readmissions

Steady Shift Toward Risk-Based Payment

More Mandatory Risk on the Horizon

Medicare Value-Based Purchasing Program Performance Criteria

Weight in Total Performance Score



1) Includes Value-Based Purchasing Program, Hospital Readmissions Reduction Program, and Hospital-Acquired Conditions Program.

Other Mandatory Risk Programs



Hospital-acquired Condition Penalties



Readmission Penalties

No Trivial Thing

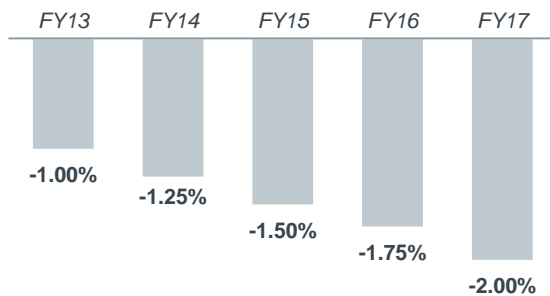


Medicare revenue at risk from mandatory pay-for-performance programs¹, FY 2017

Actual Quality Affecting Hospital Payment

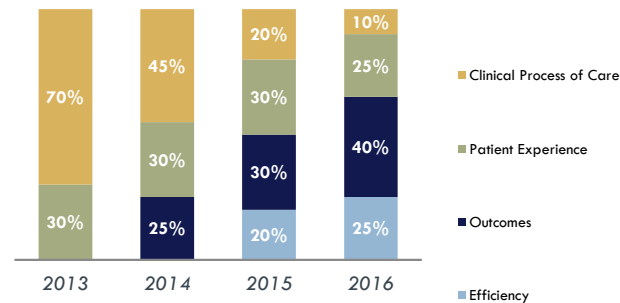
Incentive Payment in Medicare Value-Based Purchasing Program

Payment Withhold



- Payment withhold applies to base operating DRG payment
- Withhold applies only to roughly 3,100 hospitals meeting VBP inclusion criteria

Quality Performance Assessment



- Assesses performance on quality measures including:
 - Clinical process of care (2013)
 - Patient experience of care (2013)
 - Outcomes (2014)
 - Efficiency (2015)
- Scored on achievement relative to national benchmarks and improvement compared to historical baseline
- Quality measure scores combined to form single figure Total Performance Score (TPS)

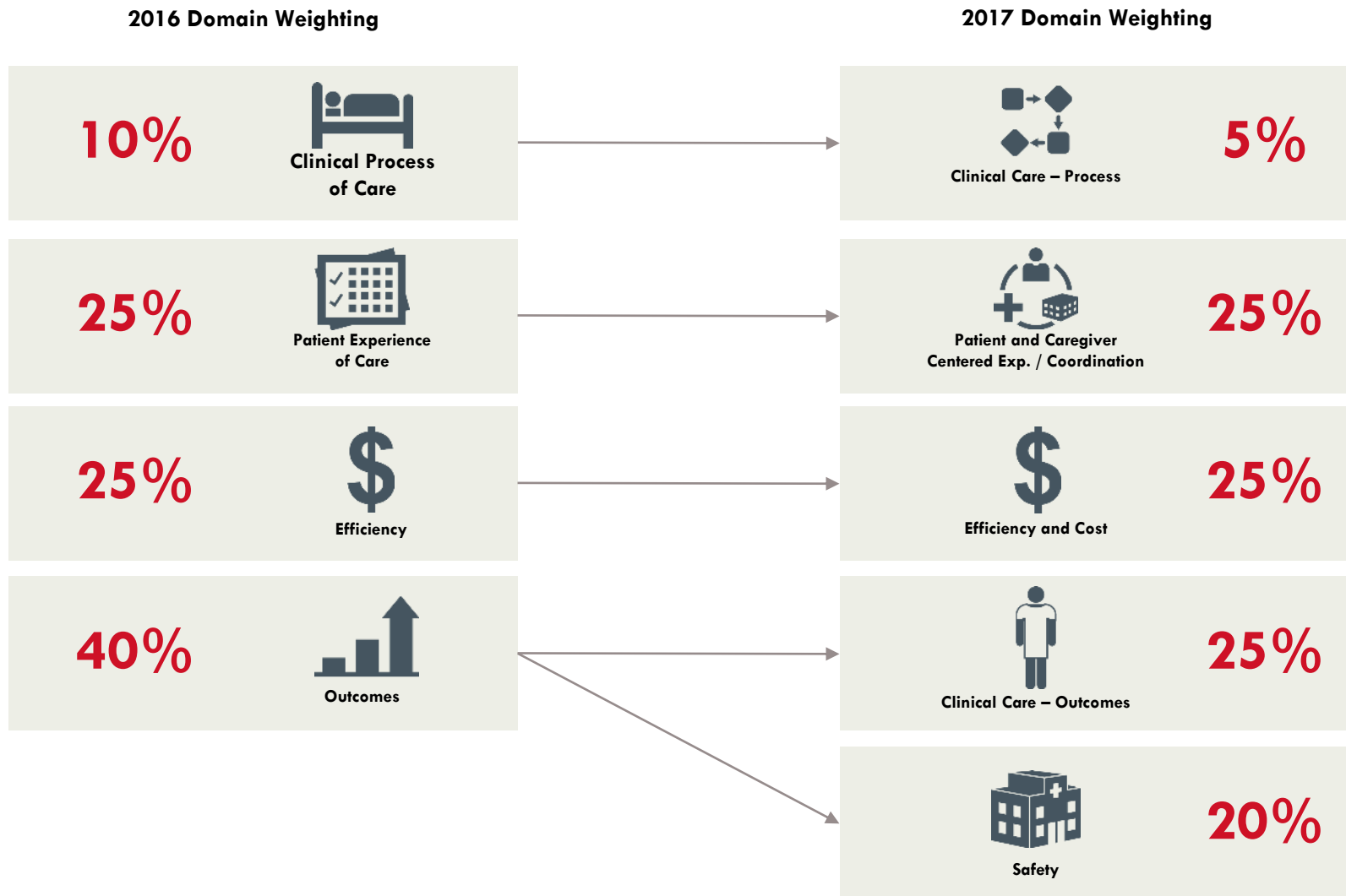
Redistribution of Payment



- Payment directly proportional to TPS score
- Budget neutrality results in “winners vs. losers”; roughly half of hospitals earn back more than withhold, others earn back less

Calculating Total Hospital Performance

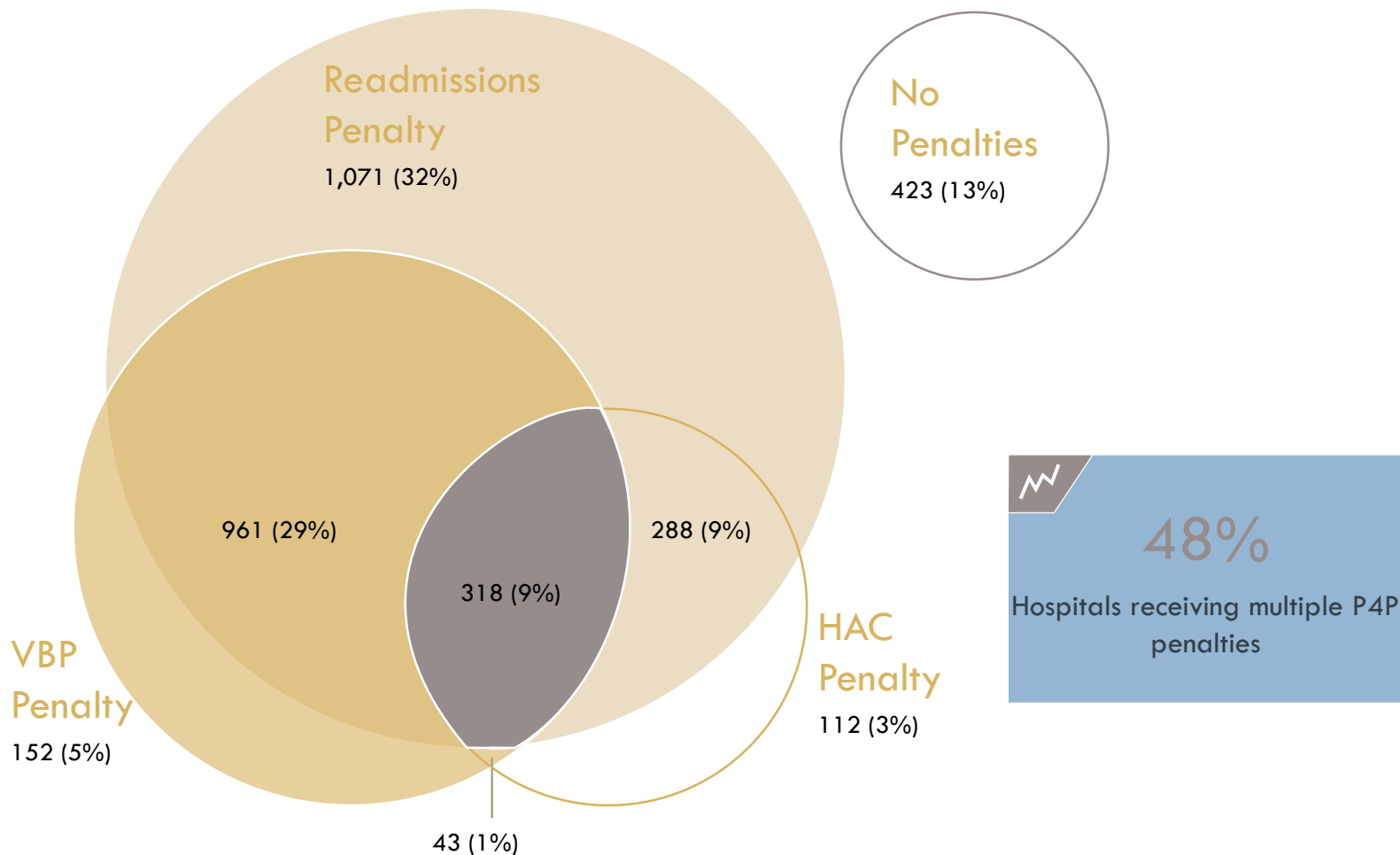
Continued Shift Towards Outcomes and Efficiency



Many Facilities Receiving Multiple Penalties

Few Escaping Penalties Altogether, Almost Half Facing Two or More

Hospitals Receiving FY 2015 P4P Penalties¹



¹ Based on Readmissions and VBP proxy adjustment factors from FY 2015 IPPS Final Rule, proxy HAC adjustments from FY 2015 IPPS Proposed Rule.

Calculating Total Hospital Performance

Continued Shift Towards Outcomes and Efficiency

2016 Domain Weighting

10%



Clinical Process of Care

25%



Patient Experience of Care

25%



Efficiency

40%



Outcomes

2017 Domain Weighting



Clinical Care – Process

5%



Patient and Caregiver Centered Exp. / Coordination

25%



Efficiency and Cost

25%



Clinical Care – Outcomes

25%



Safety

20%

Leapfrog Safety Score

- Leapfrog Safety Score is released twice a year
- It provides a “grade” for acute care hospitals
- Uses multiple measures
 - If you answer the LF Survey the CPOE, Intensivists and Safe Practices are included
 - If you do or do not participate in the LF Survey the data from CMS Hospital Compare is used
 - Hospital Acquired Infections (*CLABSI, CAUTI, MRSA, C.Diff*)
 - Seven PSI's (*Pressure Ulcer, Death Among Surg IP with Serious Treatable Complications, Iatrogenic Pneumothorax, Post Op Respiratory Failure or PE/DVT, Wound Dehiscence, Accidental Puncture or Laceration*)
 - Three Hospital Acquired Conditions (*Foreign Object Retained, Air Embolism, Falls & Trauma*)
 - Selected HCAHPS

Value Based Purchasing Domains

- The Hospital Value-Based Purchasing (Hospital VBP) Program adjusts hospitals' payments based on their performance on four domains that reflect hospital quality:
 - Clinical Process of Care Domain
 - Patient Experience of Care Domain
 - Outcome Domain
 - Efficiency Domain

HCAHPS

- Hospital Consumer Assessment of Healthcare providers and Systems
- Standardized, publicly reported survey for measuring patients' perceptions of the care they
- The national standard for reporting and comparing the patients' experience during the care they received
- Random sampling of patients
- Statistically often not completed by the patient by rather a family member

HCAHPS Impact on Leapfrog Safety Score

- HCAHPS carry a large weight for the Safety Score
 - approximately 14.8% if participate in LF Survey, more if do not participate
- 6 Domains are used
 - HCAHPS-1: Communication with Nurses
 - HCAHPS-2: Communication with Physician
 - HCAHPS-3: Staff responsiveness
 - HCAHPS-5: Communication about Medications
 - HCAHPS-6: Communication about Discharge

Patient Experience of Care Domain

- The Patient Experience of Care Domain in Hospital VBP is based on the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems)
- HCAHPS is a national, standardized survey that asks adult patients about their experiences during a recent hospital stay.
- The Patient Experience of Care domain scores encompass eight important aspects of hospital quality
- It is ALWAYS or Nothing!!

Domain Categories

- **Communication with nurses**
- **Communication with doctors**
- **Responsiveness of hospital staff**
- **Pain management**
- **Cleanliness and quietness of hospital environment**
- **Communication about medicines**
- **Discharge information**
- **Overall rating of hospital**

The Joint Commission

- Holds public open forums to discuss consumer perception of quality of care
- Requires hospitals to post public notices:
 - listing survey dates and times
 - Inviting public to provide input to surveyors
- Interviews patients and families during survey process

The Bottom Line



Patients are expecting consumer quality experiences and services in all aspects of healthcare and they will research and shop around until they get what they want



EXECUTING A PATIENT EXPERIENCE MEASUREMENT INITIATIVE

April 19, 2017

Presented by:

Jennifer O'Neill

RWJBarnabas Health

- Merger of 2 Healthcare systems in NJ
- 11 Acute Care Hospitals
- 3 Children's Hospitals
- Behavioral Health Hospital
- Children's Specialized (Rehab) Hospital

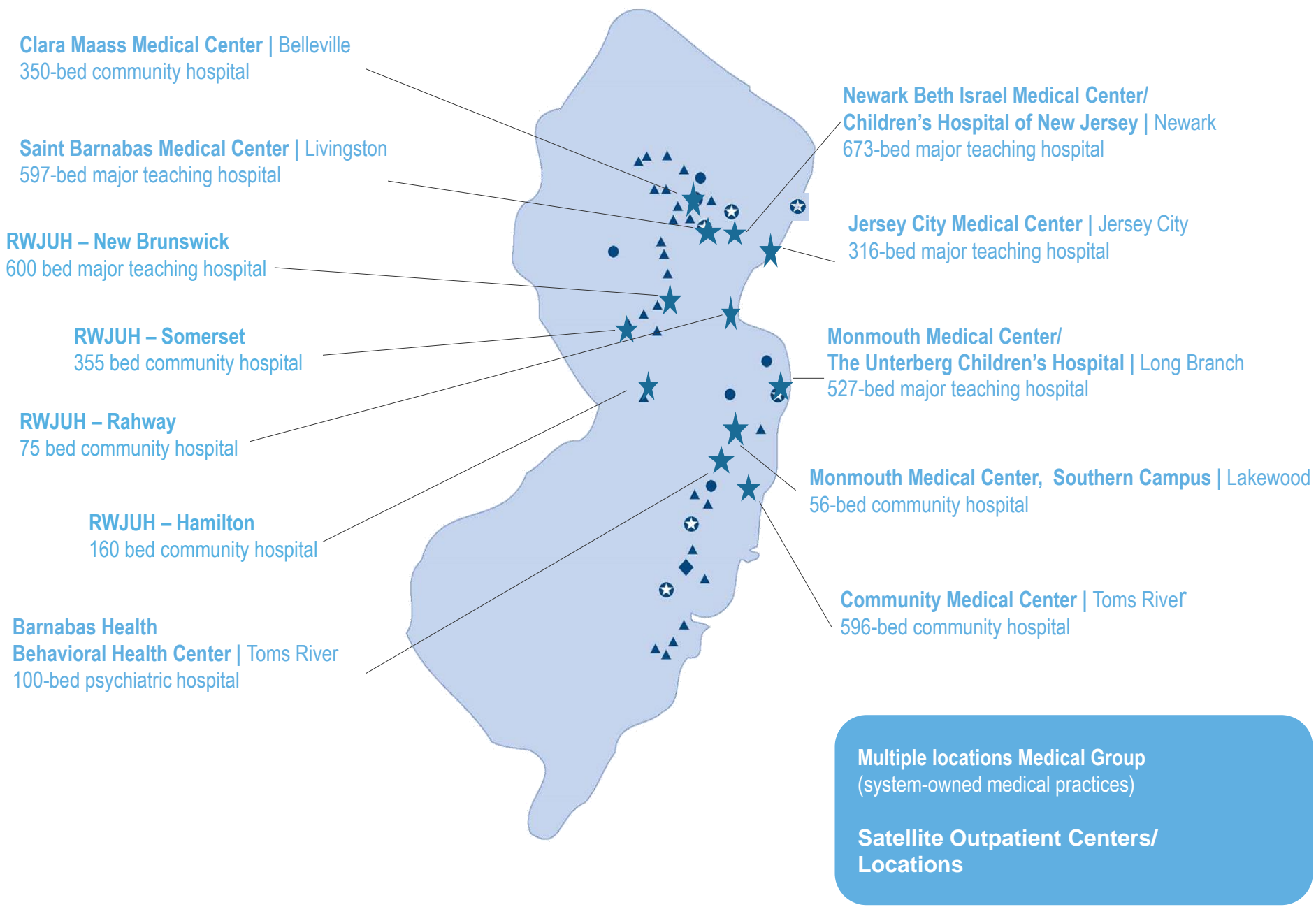
Profile:

- NJ Based Health Care System
- 2nd Largest employer in NJ
- 13 Hospitals
 - 11 Acute Care
 - 1 Acute Care Behavioral Health
 - 1 Children's Acute Rehab
- Multiple OP sites
- Physician Offices

Leader in quality

Top 100 Leapfrog Hospitals

One of 5 hospitals in NJ to achieve 4 stars



Multiple locations Medical Group
(system-owned medical practices)

**Satellite Outpatient Centers/
Locations**



The Journey

The Journey

22

Prescriptive Plan for Nursing

Launched in 2012

- Protocol Based
- Hourly Rounds
- Bedside Report

The Journey

23

Prescriptive Plan

Launched in 2014

- Protocol Based
- Executive Platform Established
- Domain Teams Developed
- Complaint-Free Environment Policy
- Superior Service Trainings

The Journey

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Additional Elements added in 2015

- M in the BoxSM
- PCMSM software for discharge phone calls
- Simulation
- Succession Planning

The Journey

2016/2017

Integrate all 11 RWJBarnabas Health hospitals on prescriptive plan. Two branches of plan include:

Culture Change:

- Journey not a Race
- Organizational Strategy
- Engaged Leadership
- Regular measurement and performance feedback

Tactical Initiatives:

- However, small measurable improvements can be achieved over short projects or tactical initiatives

Patient Experience Prescriptive Plan

Culture Changing

2 to 5 years

- Organizational Strategy and Executive Leadership Platform
- Patient and Family Advisory Councils
- Ambulatory Surgery Strategy (OASCAHPs)
- ED strategy (EDCAHPs)
- Care of our Care Givers and Employee Engagement
- Investment in Leadership Development
 - Coaching vs. Counseling
 - Coaching vs. Cheerleading
- Standardize Peer Review and Behavioral Interview Process
- Expand services for LEP
- Data analytics

Tactical Initiatives

One Year Quick Wins

- **M in the Box**
- **Post-Visit Phone Calls**
- Hourly Rounding
- **Bedside Shift Report**
- **Use of AIDET by all employees as an engagement tool**
- Customer Service Education
- Domain Teams

Changing Staff Performance

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Ongoing Education on Patient Experience:

- ▣ *teach staff the “how” ,focus staff on “understanding the patient’s perspective” ,provide staff the tools to use, hardwire and drive accountability*

Superior Service Educational Programs: 2015

Superior Service #1: A Patient’s Perspective

Superior Service #2: Empathy – Being in the Moment

Superior Service #3 : Alleviating Patient Fears

Superior Service Educational Programs : 2016

Superior Service #4 : Service Recovery

Superior Service #5 : Sensitivity Training: Care of our Patients with Limited English Proficiency

Superior Service #6 : Care of the Care Giver (to address the importance of self care for our employees and compassion fatigue)

The RWJBarnabas Health Journey

- RWJBarnabas Health sharing of best practice
- CNO workshop December 2016
 - Bedside Report
 - Engagement
 - Skills Labs
 - M in the Box SM
 - Standard validation
 - Checklists

Coaching vs Cheerleading

Coaching vs. Cheerleading



Coaching vs Cheerleading

- Coaching
 - Managing
 - Appreciative Inquiry
 - Support-Coach-Support
- Cheerleading
- Reward and Recognition
- Crucial conversation



Skill Development

Skill Development

- Focused Training
 - Simulation Labs
 - All Leaders
 - Skills Labs
 - All Leaders
 - Live videotaping
 - Photographs



Validation

Validation

- Protected Nurse Leader time
- Checklists
 - Bedside Report
 - Hourly RoundingSM
 - Rounding by Assignment
 - PCMSM
 - AIDETSM
- Submission to CNO weekly reports
 - Action plans for low performing area monthly
- CNO observations
- Quarterly RWJBH Patient Experience meetings



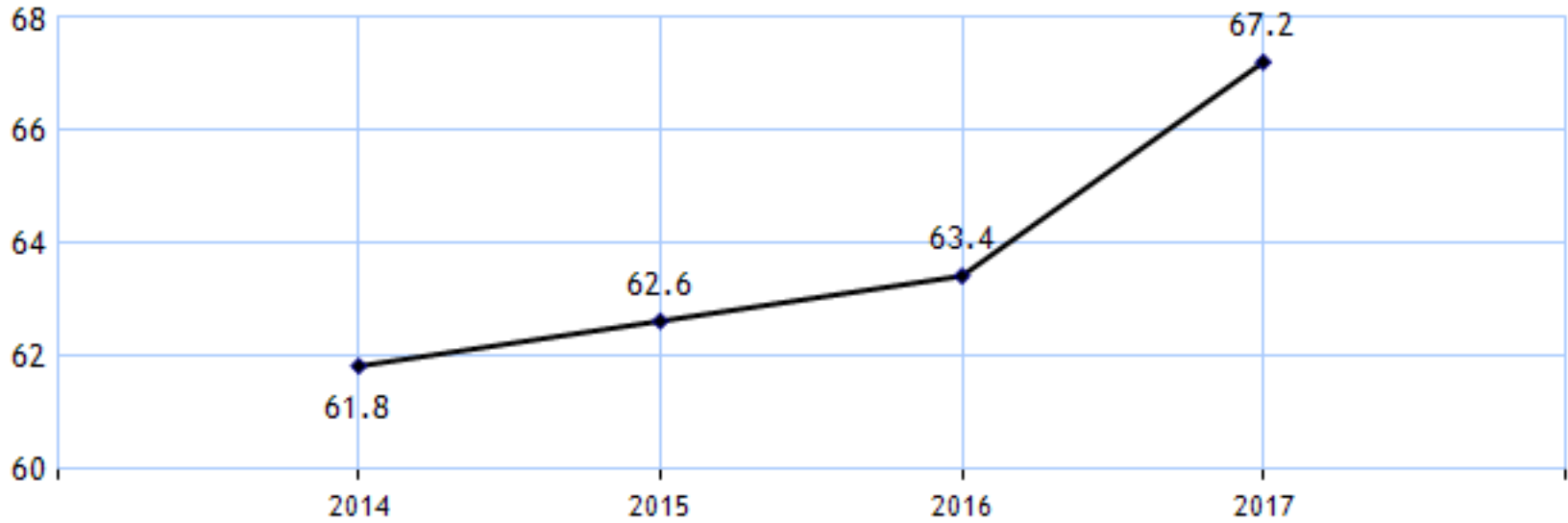
Results

Top Box Trends

Inpatient

All My Sites

Section - CAHPS - Comm About Medicines



All My Sites

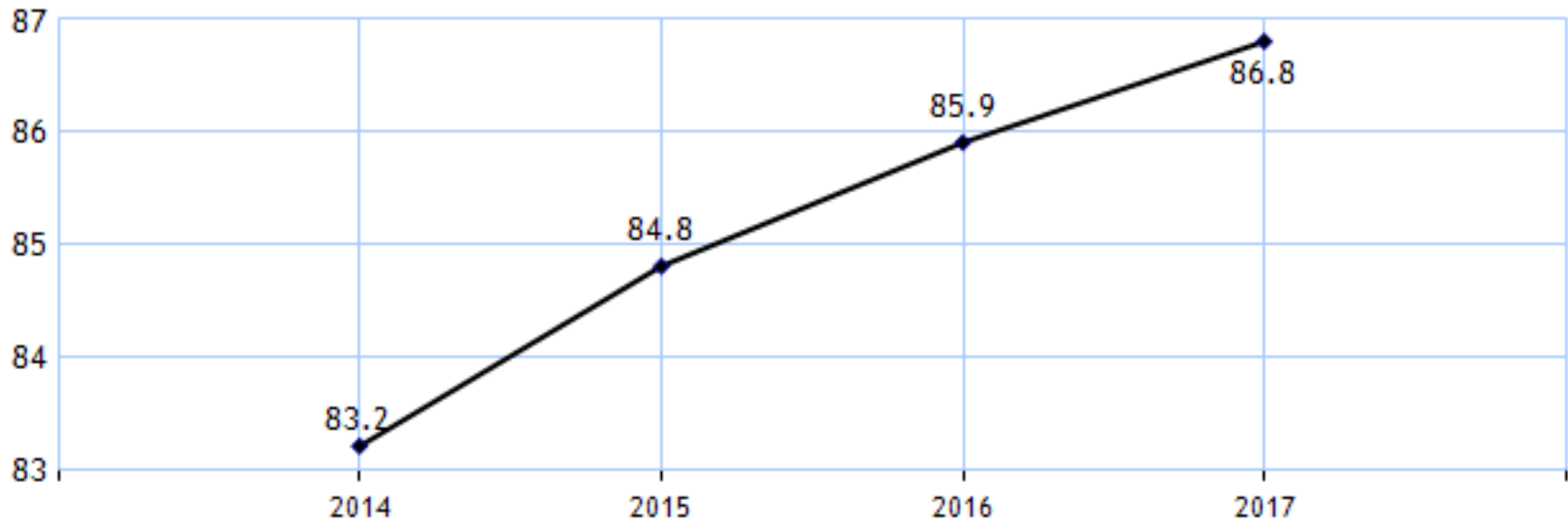


Top Box Trends

Inpatient

All My Sites

Section - CAHPS - Discharge Information



All My Sites



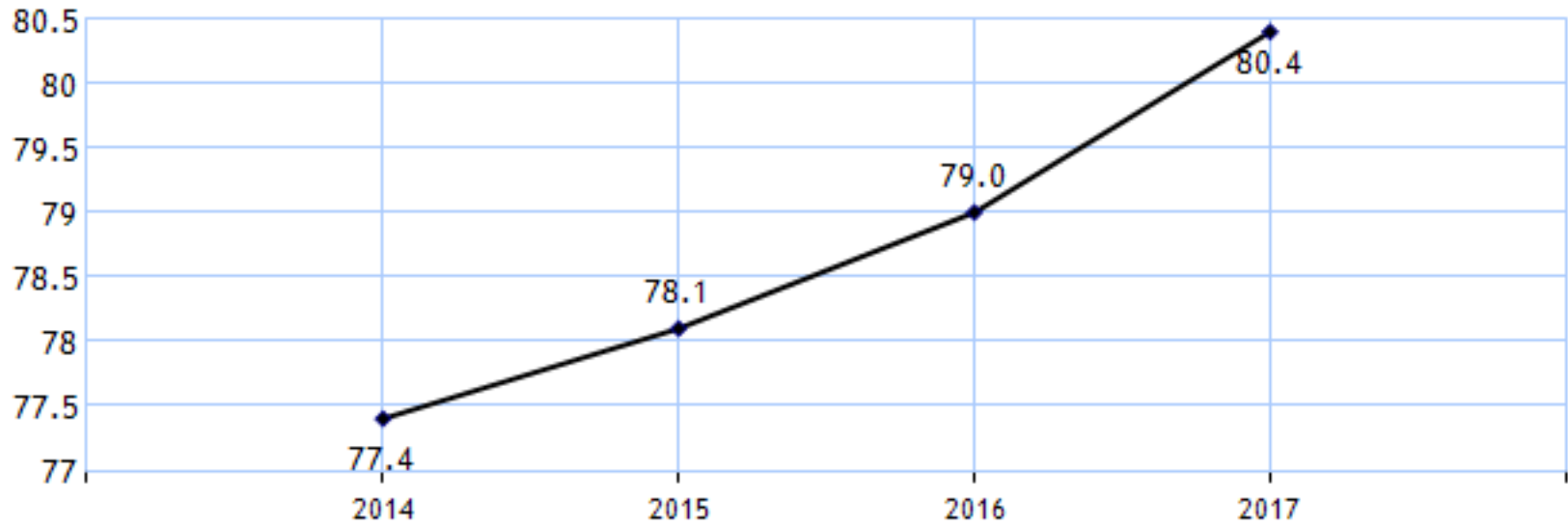
Displayed by Discharge Date

Top Box Trends

Inpatient

All My Sites

Section - CAHPS - Comm w/ Nurses



All My Sites

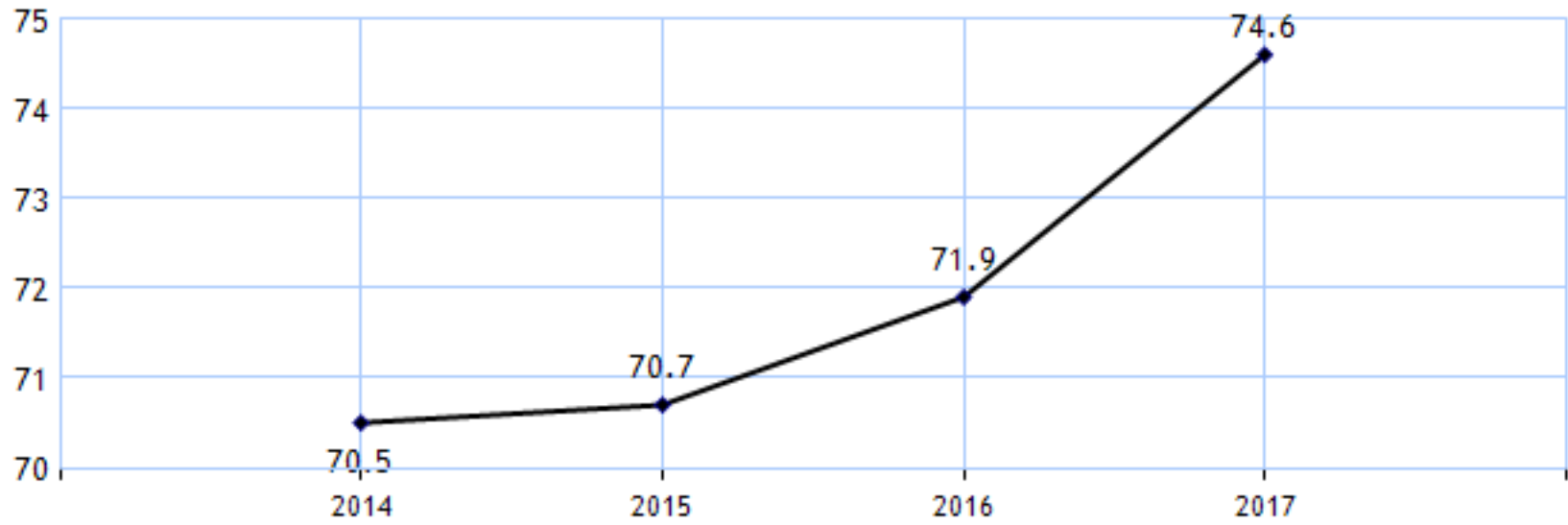


Top Box Trends

Inpatient

All My Sites

Section - CAHPS - Pain Management



All My Sites

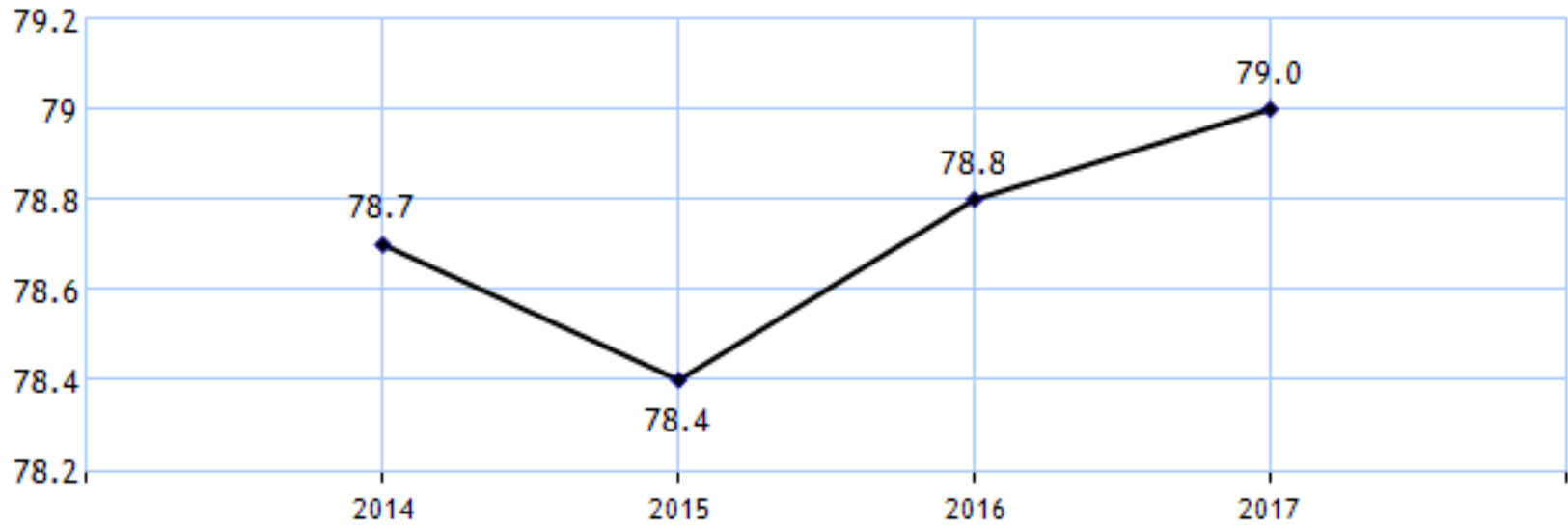


Top Box Trends

Inpatient

All My Sites

Section - CAHPS - Comm w/ Doctors



All My Sites

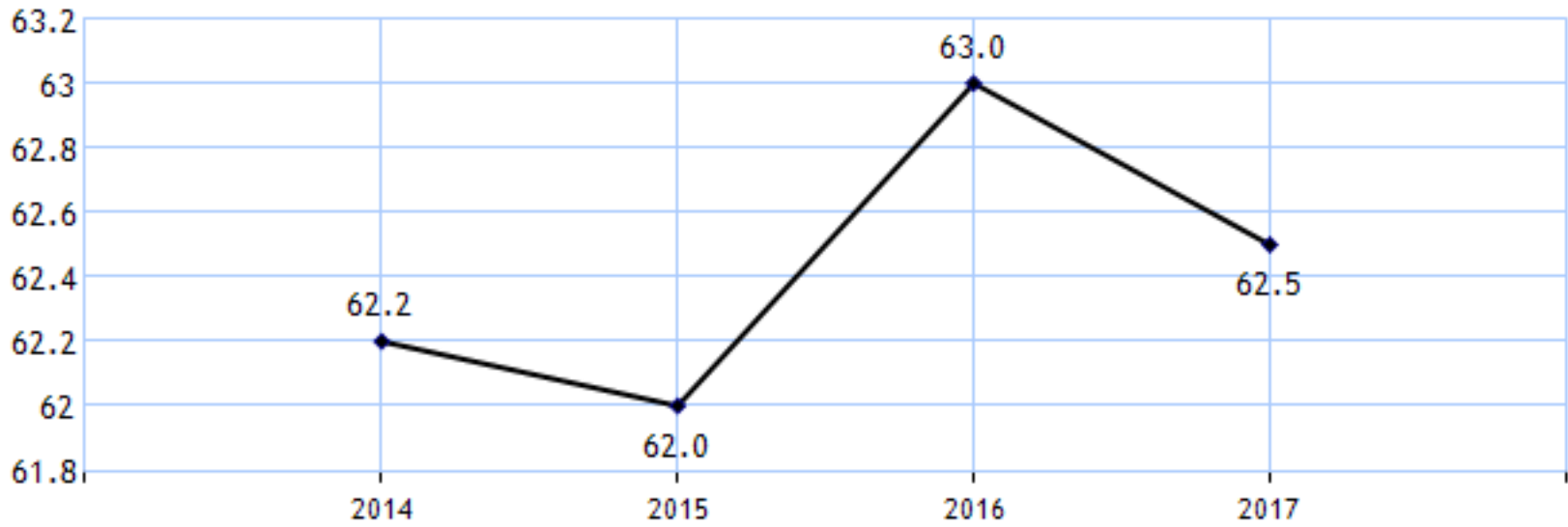


Top Box Trends

Inpatient

All My Sites

Section - CAHPS - Response of Hosp Staff



All My Sites

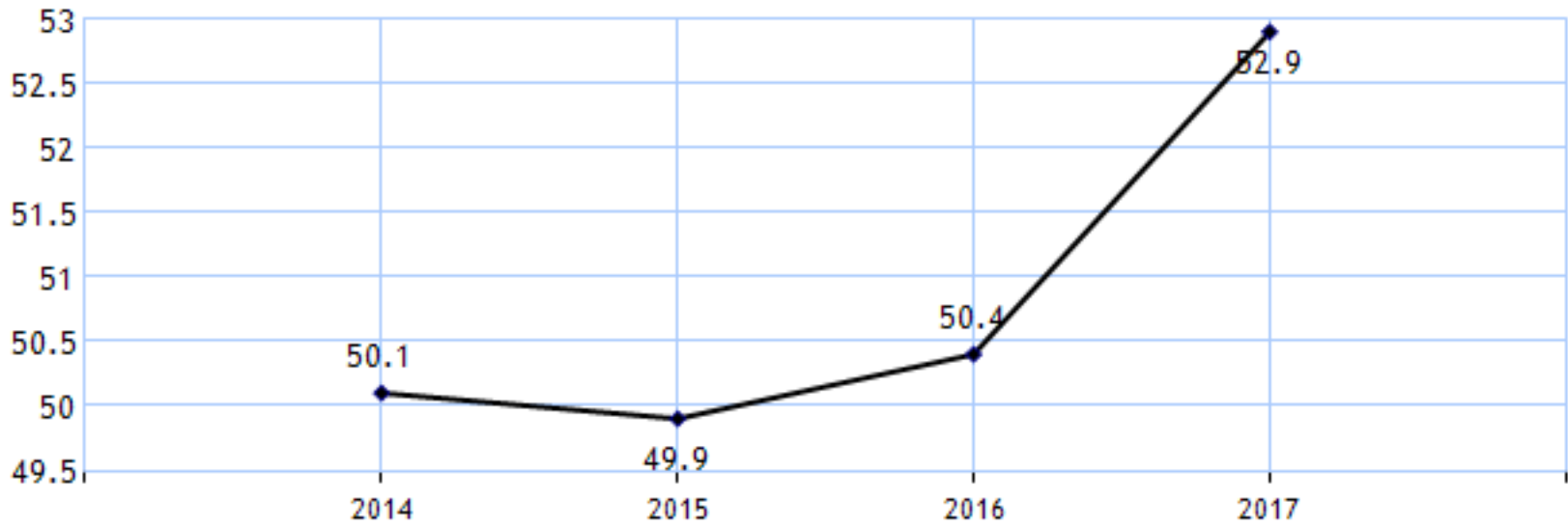


Top Box Trends

Inpatient

All My Sites

Section - CAHPS - Care Transitions



All My Sites





Lessons Learned

Lessons Learned

- Focus on one tactic
- Learning styles of leaders
 - ▣ Individualized coaching plan
- Focus on developing staff
 - ▣ Appreciative inquiry
- Time management
- Invest in training
- Validation is KEY to sustainability
- Consistency
- Reward and Recognition

Lessons Learned

- ❑ Set clear expectations
- ❑ Report results transparently
- ❑ Address poor performance immediately
- ❑ Consequences for non-compliance up to and including termination

What you can do today

- Assess and reduce current committees/meetings
- Protected time
- Standardize validation/verification process
- Simulation
 - ▣ Role playing
- Leadership skill development
- Results reported transparently



Thank You!