

NEW YORK CITY HEALTH & HOSPITALS CORPORATION

Challenges/Lessons Learned:
Implementation of Hospital
Consumer Assessment of
Providers and Systems (HCAHPS)

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LEARNING OBJECTIVES

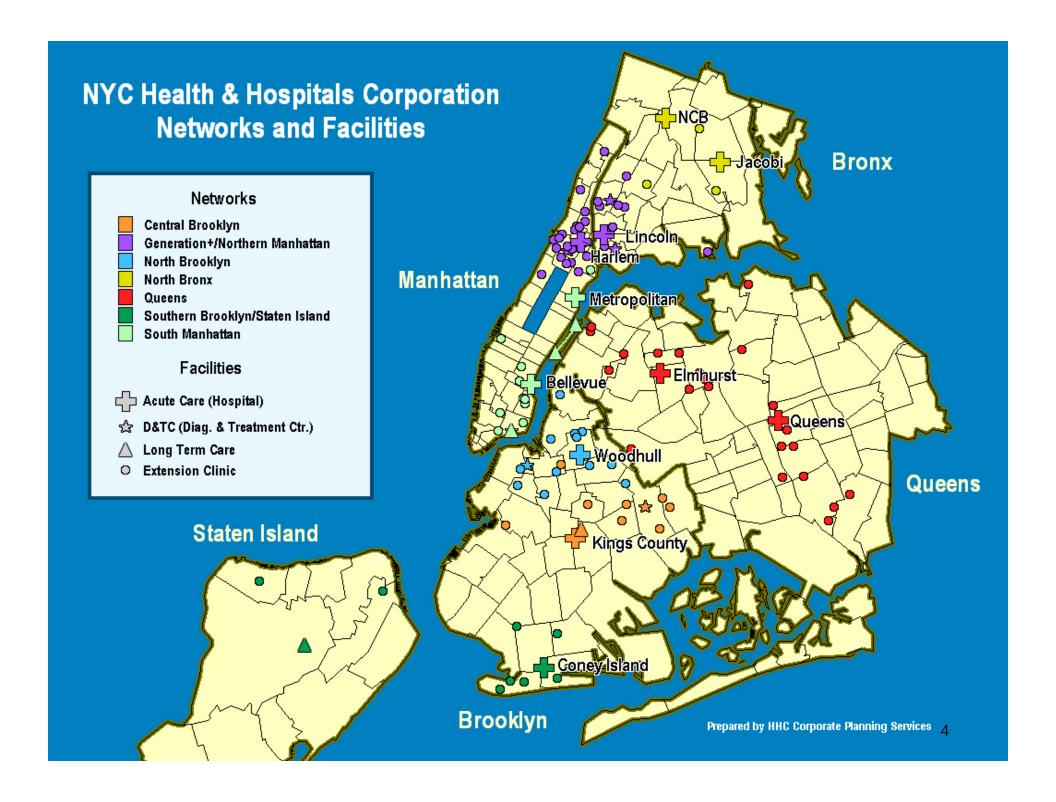
- Identify challenges to implement a standard approach in measuring patient perception of care in a large scale public healthcare system.
- Discuss implementation of quality improvement principles to achieve successful outcomes.





WHO WE ARE

- A public benefit corporation
- Largest municipal hospital system
- 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 (310,000 enrollees)
- Over 80 community health clinics
- Affiliation w/all major NYC medical schools
- 38,000 employees
- Provides services to a very diverse population, many immigrants
- Serves 1.3 million New Yorkers







BACKGROUND

- CAHPS surveys started in 1990's by AHRQ to measure/report quality of care from consumers' and patients' perspectives.
- 2002: Department of Health and Human Services and CMS announced intent to collect/report clinical measures and patient experience results.
- 2005: Deficit Reduction Act expanded quality measurement; include perception of care surveys.
- 2006: HCAHPS (inpatient) survey added to CMS clinical measures.





BACKGROUND

- 07/07: CMS required all hospitals to submit HCAHPS data.
- 2007-2008: HCAHPS results added to CMS public reports linked to Medicare reimbursement.
- 10/09: CMS required Health and Home Care and Hemodialysis patient satisfaction surveys.
- 2010: CMS will link HCAHPS to "Pay-for Performance" Medicare basket share of reimbursement.
- 2012: CMS will require Rehab Medicine patient satisfaction surveys.





HHC GOALS

- Be the "Provider of Choice" by communities it serves; maintain readiness in the competitive marketplace.
- Embark system-wide approach to improve culture; Quality, Safety, and Patient Satisfaction.





HHC 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.





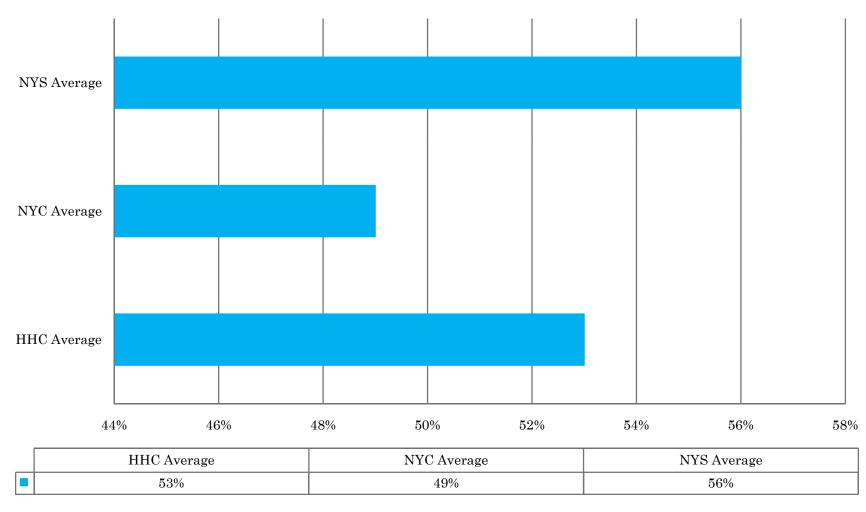
HHC CAHPS IMPLEMENTATION

- April 2008: expanded to four OPD/ED, two D&TC; data analyses 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
- October 2009: added Home Care/Outpatient Hemodialysis services as required by CMS
- Dedicated Champion on each HHC facility: drives program; ensures Vendor's database monitored weekly, responses analyzed and improvement opportunities implemented





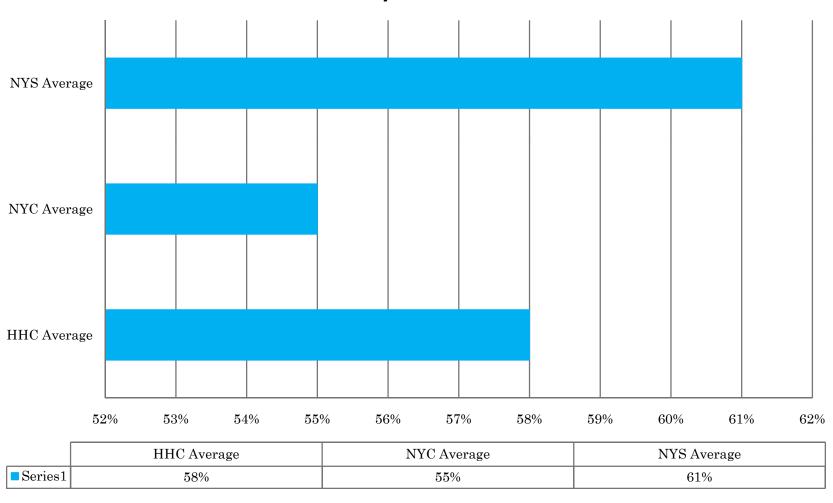
How do patients rate the hospital overall? QualityNet CY 2008







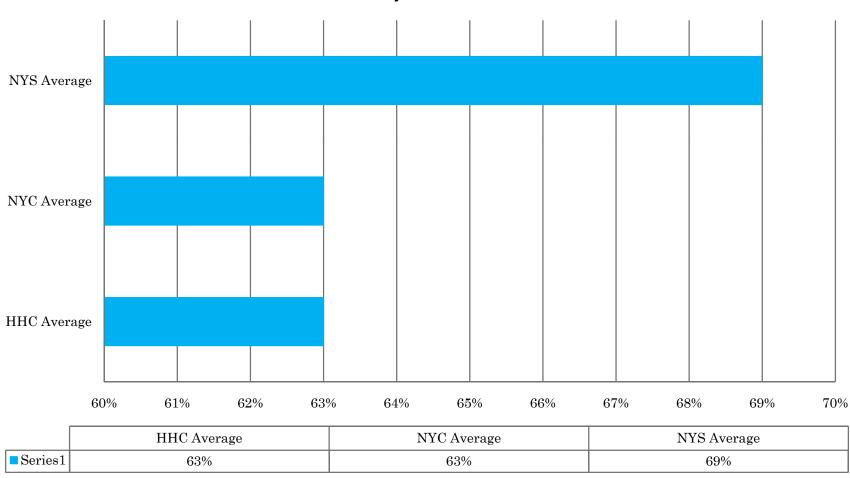
Would patients recommend the hospital to friends and family? QualityNet CY 2008







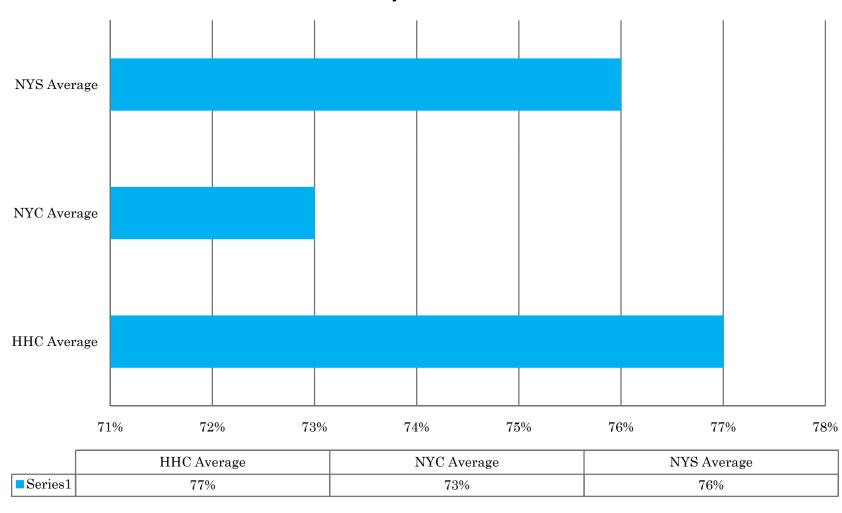
How often did nurses communicate well with patients? QualityNet CY 2008







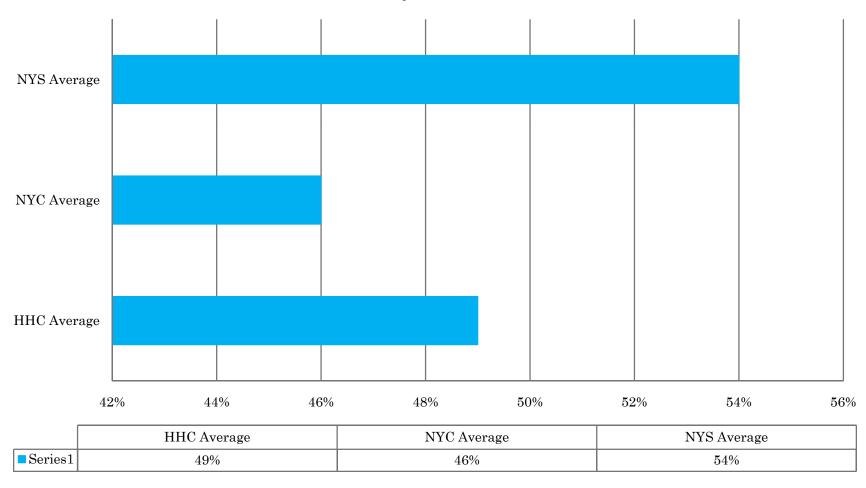
How often did doctors communicate well with patients? QualityNet CY 2008







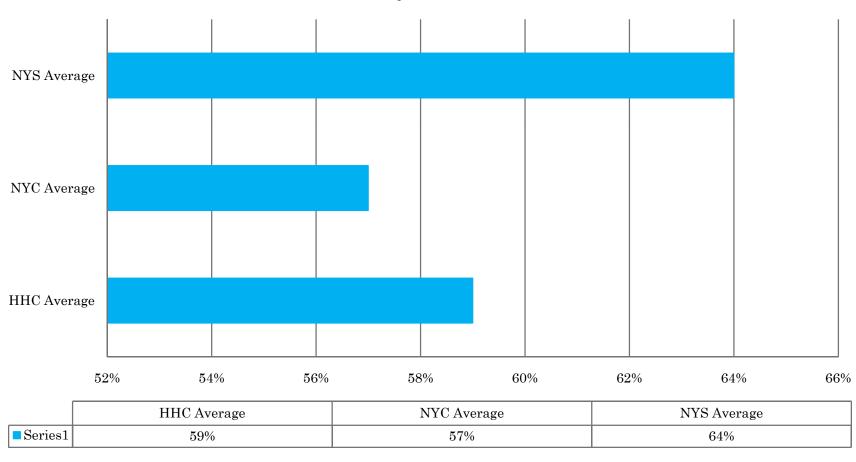
How often did patients receive help quickly from hospital staff? QualityNet CY 2008







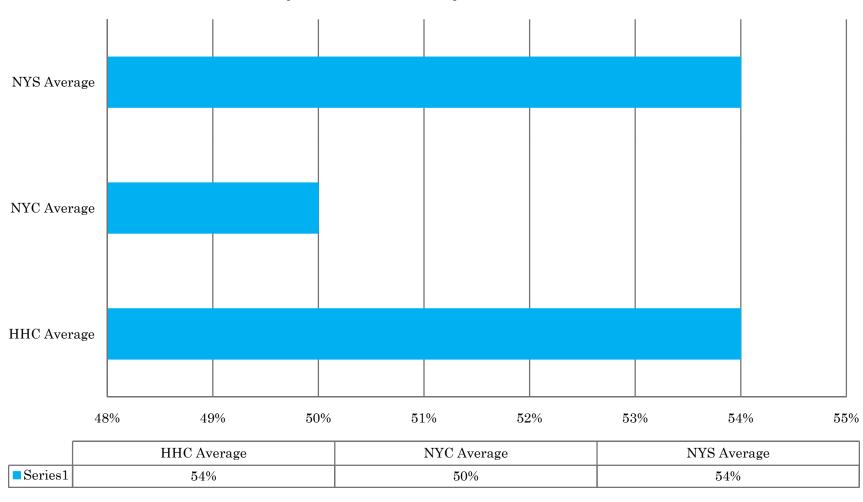
How often was patients' pain well controlled? QualityNet CY 2008







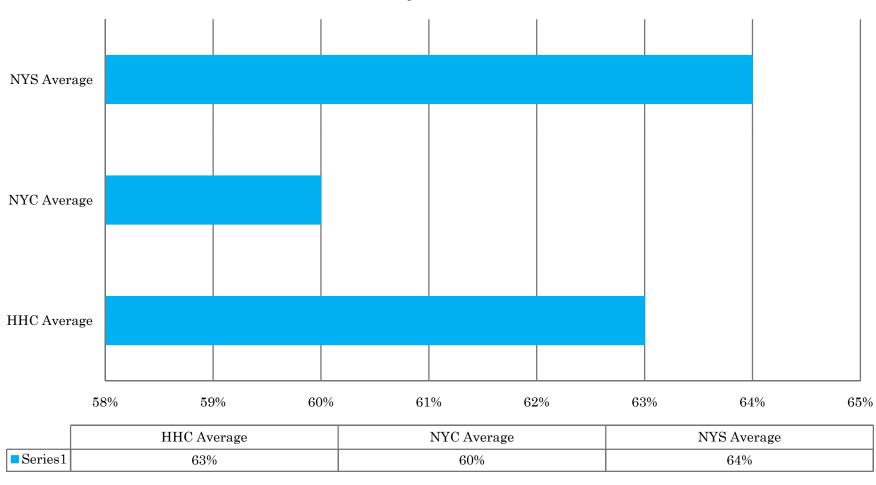
How often did staff explain about medicines before giving them to patients? QualityNet CY 2008







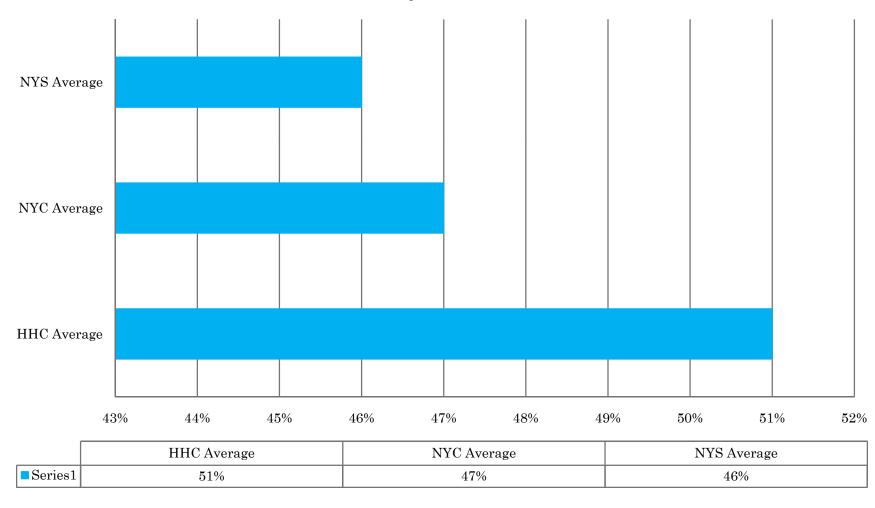
How often were the patients' rooms and bathrooms kept clean? QualityNet CY 2008







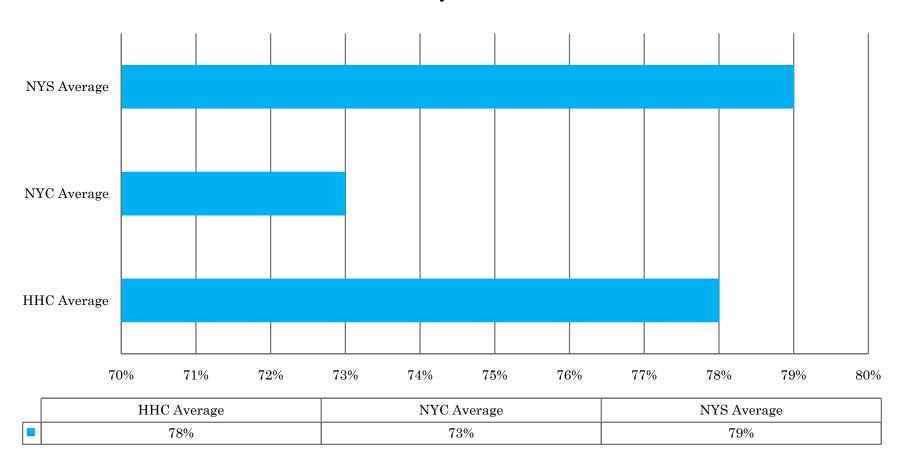
How often was the area around patients' rooms kept quiet at night? QualityNet CY 2008







Were patients given information about what to do during their recovery at home? QualityNet CY 2008







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





BEST PRACTICES IMPLEMENTED

- Employee of the Month
- Department/Unit Celebration
- Thank You Cards
- Charm Star Program
- Increased unit staff rounding
- Quiet time for patients 3X a day
- Discharge Planning starts upon admission
- Call bells turned off only after responding to patients in room
- Anticipate pain; PRN advanced to standing orders
- Monthly web-based staff in-service





BEST PRACTICES IMPLEMENTED

- "On The Road to Excellence Service Recovery"
- Translation device in each patient room
- Environmental Service Call Center Hotline
- Customer Service Navigator assigned in ED, OPD and inpatient units
- Customer Service Manual
- Share "Voice of the Patient" with staff on weekly meetings and Town Hall meetings
- HCAHPS results transparent; added to "HHC In Focus," public web site
- Others





NEXT STEPS

- Monitor/sustain Best Practices per hospital
- Identify Best Practices for corporate-wide implementation
- Increase sampling from 300 to 600 per hospital 2010
- Conduct employee/physician satisfaction surveys 2010
- Conduct Psychiatry survey 2010
- Conduct Rehab survey 2010