

HCAHPS

Presented by:
Bill Sexton



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- *iVantage Health Analytics*

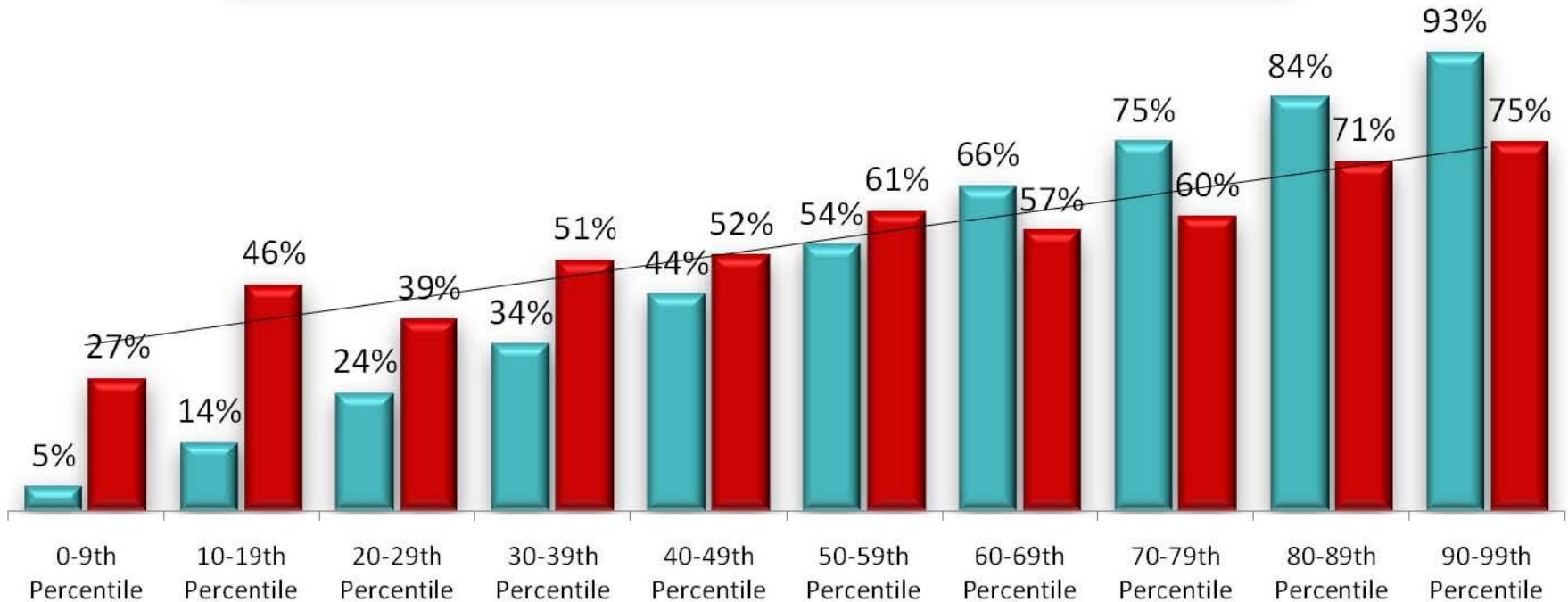
God put me on earth
to accomplish a certain
number of things.



Right now
I am so far behind,
I will never die!

- HCAHPS results will impact your organization's reimbursement in the era of health care reform
- HCAHPS results are a quality metric, not just a patient satisfaction metric
- ED performance is directly connected to HCAHPS results
- “Nurse Communication” is the most critical component on the HCAHPS survey

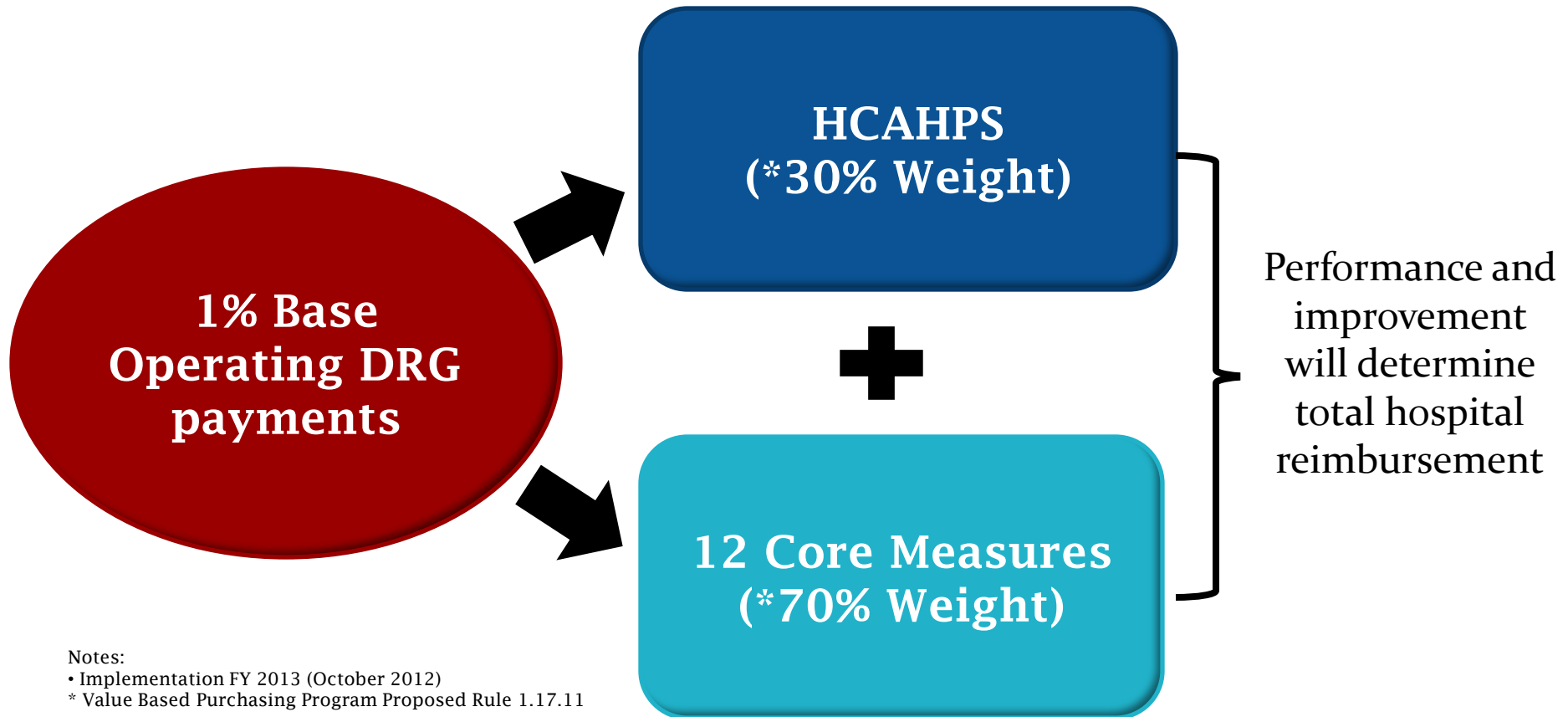
Relationship: ED and HCAHPS "Overall" Percentile Rankings



■ Emergency Department Percentile Rank
 ■ HCAHPS "Overall" Percentile Rank

— Linear (HCAHPS "Overall" Percentile Rank)

Value Based Purchasing RY 2013



Notes:

- Implementation FY 2013 (October 2012)
- * Value Based Purchasing Program Proposed Rule 1.17.11

What will Value-Based Purchasing Mean for You?

**12 Clinical Process
Core Measures**

HCAHPS

Prairie du Chien
Memorial Hospital



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HCAHPS COMPOSITES AND QUESTIONS

HCAHPS COMPOSITES AND QUESTIONS			
Composite	Questions Summary	Response Scale	
8 Value Based Purchasing Measures	Nursing Communication	Nurse courtesy and respect	ALWAYS, Usually, Sometimes, Never
		Nurse listen carefully	ALWAYS, Usually, Sometimes, Never
		Nurse explanations are clear	ALWAYS, Usually, Sometimes, Never
	Doctor Communication	Doctor courtesy and respect	ALWAYS, Usually, Sometimes, Never
		Doctors listen carefully	ALWAYS, Usually, Sometimes, Never
		Doctor explanations are clear	ALWAYS, Usually, Sometimes, Never
	Responsiveness of Staff	Did you need help in getting to bathroom?	Yes, No (screening question)
		Staff helped with bathroom needs	ALWAYS, Usually, Sometimes, Never
		Call button answered	ALWAYS, Usually, Sometimes, Never
	Pain Management	Did you need medicine for pain?	Yes, No (screening question)
		Pain well controlled	ALWAYS, Usually, Sometimes, Never
		Staff helped patient with pain	ALWAYS, Usually, Sometimes, Never
	Communication of Medications	Were you given any new meds?	Yes, No (screening question)
		Staff explained medicine	ALWAYS, Usually, Sometimes, Never
		Staff clearly described side effects	ALWAYS, Usually, Sometimes, Never
	Discharge Information	Did you go home, someone else's home, or to another facility?	Own home, someone else's home, Another facility (screening question)
		Staff discussed help need after discharge	YES, NO
		Written symptom/health info provided	YES, NO
	Cleanliness and Quietness of Hospital Environment	Area around room kept quiet at night	ALWAYS, Usually, Sometimes, Never
		Room and bathroom clean	ALWAYS, Usually, Sometimes, Never
Overall Rating	Hospital Rating Question	0 – 10 point scale (percent 9 and 10 reported)	
Willingness to Recommend will continue to Be reported but not included in VBP formula	Willingness to Recommend	DEFINITELY YES, Probably Yes, Probably No, Definitely No	

12 Core Quality Measures Value Based Purchasing FY 2013

Core Quality Measures Selected

- 2 Heart Attack (Fibrinolytic w/i 30 min's; PCI w/i 90 min's)
- 1 Heart Failure (Dx instruct)
- 2 Pneumonia (Culture in ED w/o anti; CAP immuno pt)
- 7 Surgical Care: Infection and Improvement
 - Proph anti w/i 1 hr of incision
 - Proph anti selection-surg
 - Proph anti Dx w/i 24 hrs of surg
 - Cardiac pts - 6AM post-op serum glucose
 - Beta blocker prior to arrival if received during period
 - Recommended Venous Thromboembolism proph ordered
 - Venous Thromboembolism proph w/i 24 hrs prior and post

What's the possible risk?

Hospital Profile:

- 30 - bed hospital
- ED
- Inpatient Revenue:
\$50 million
- Payor mix:
50% Medicare

Impact:

- 1% impact - base operating DRG payments - \$250,000
- 30% attributed to HCAHPS Performance = \$75,000 potential risk
- 70% attributed to Core Measure Performance = \$175,000 potential risk





Pay for
Performance is
Here

NOW

**Performance Period is
July 1, 2011 – March 31, 2012**

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***VBP Proposed* Calculation of Performance: Reimbursement**

- **Baseline period:** July 1, 2009 – March 31, 2010
- **Performance period:** July 1, 2011 – March 31, 2012
- **Hospital performance:** the higher of an achievement score in the performance period or the improvement score as compared to the score in the baseline period
- To incentivize HCAHPS consistency points will be added in determining total performance.

Value-Based Purchasing - FY2014

Hospital Acquired Condition Measures (FY 2014)

- 1.Foreign Object Retained After Surgery
- 2.Air Embolism
- 3.Blood Incompatibility
- 4.Pressure Ulcer Stages III and IV
- 5.Falls and Trauma: (Includes: Fracture, Dislocation, Intracranial Injury, Crushing Injury, Burn, Electric Shock)
- 6.Vascular Catheter-Associated Infections
- 7.Catheter-Associated Urinary Tract Infection (UTI)
- 8.Manifestations of Poor Glycemic Control

Mortality Measures (FY 2014)

- 1.Mortality -30-AMI: Acute Myocardial Infarction (AMI) 30-day Mortality Rate
- 2.Mortality -30-HF: Heart Failure (HF) 30-day Mortality Rate
- 3.Mortality -30-PN: Pneumonia (PN) 30-day Mortality Rate



Value-Based Purchasing - FY2014

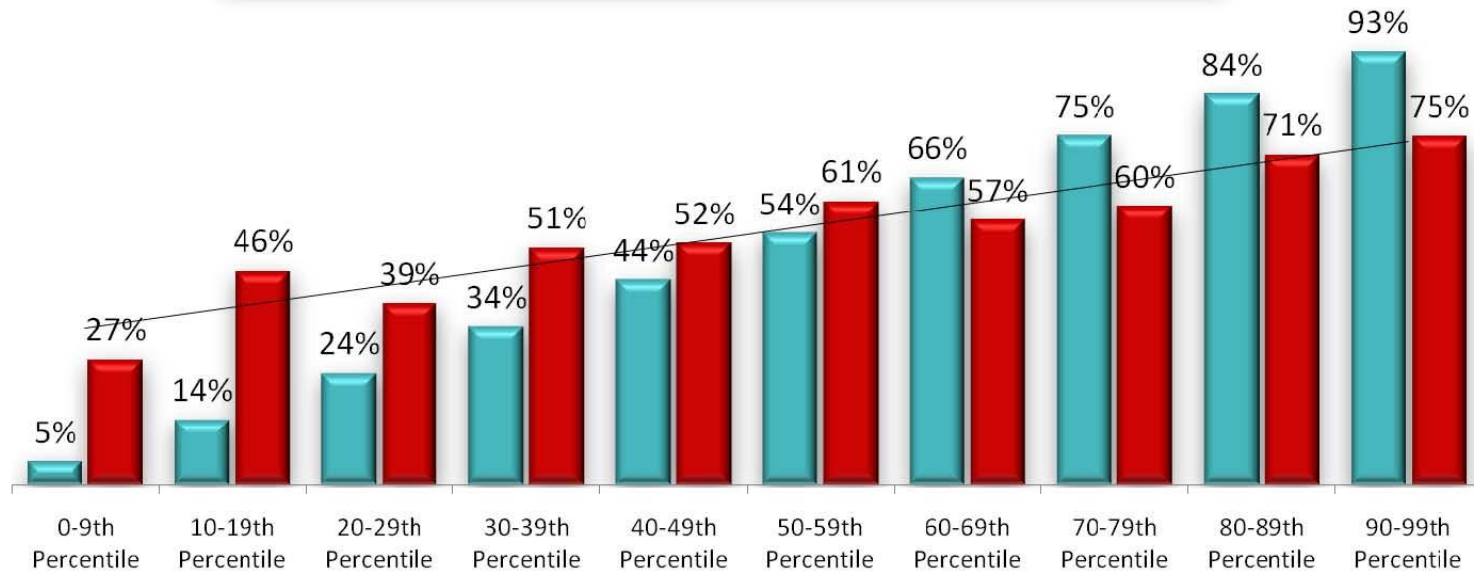
Patient Safety Indicators (FY 2014)

- PSI 06 - Iatrogenic pneumothorax, adult
- PSI 11 - Post Operative Respiratory Failure
- PSI 12 - Post Operative PE or DVT
- PSI 14 - Post Operative wound dehiscence
- PSI 15 - Accidental puncture or laceration
- IQI 11 - Abdominal aortic aneurysm (AAA) repair mortality rate (with or without volume)
- IQI 19 - Hip fracture mortality rate
- Complication/patient safety for selected indicators (composite)
- Mortality for selected medical conditions (composite)



As Hospital's ED Percentile Ranking Increases, So Does Its HCAHPS "Overall" Percentile Ranking

Relationship: ED and HCAHPS "Overall" Percentile Rankings



■ Emergency Department Percentile Rank ■ HCAHPS "Overall" Percentile Rank
— Linear (HCAHPS "Overall" Percentile Rank)



Nursing Communications

1. During this hospital stay, how often did nurses treat you with courtesy and respect?
2. During this hospital stay, how often did nurses listen carefully to you?
3. During this hospital stay, how often did nurses explain things in a way you could understand

Post-Visit Phone Call Sample

Empathy and Concern	<ul style="list-style-type: none">➤ “Mrs. Smith? Hello. This is <name>. You were discharged from my unit yesterday. I just wanted to call and see how you’re doing today...”
Clinical Outcomes	<ul style="list-style-type: none">➤ “Do you have any Questions regarding your medications or any possible side effects? Have you filled your prescription yet?”➤ “How is your pain now compared to when you were in the hospital?”➤ “We want to make sure we do excellent clinical follow-up to ensure your best possible recovery. Do you know what symptoms or health problems to look out for...?”➤ “Do you have your follow-up appointment?...”
Reward and Recognition	<ul style="list-style-type: none">➤ “Mrs. Smith, we like to recognize our employees. Who did an excellent job for you while you were in the hospital?...”➤ “Can you tell me why Sue was excellent?...”
Service	<ul style="list-style-type: none">➤ “We want to make sure you received excellent care. How were we, Mrs. Smith?...”
Process Improvement	<ul style="list-style-type: none">➤ “We’re always looking to get better. Do you have any suggestions for what we could do to be even better?...” (could add in questions regarding quality indicators such as hand washing, ID band check, etc.)
Appreciation	<ul style="list-style-type: none">➤ “We appreciate you taking the time this afternoon to speak with us about your follow up care. Is there anything else I can do for you?...”

MISSION:

Prairie du Chien Memorial Hospital will deliver high quality, personalized health care, and education in a friendly, safe environment to people in every stage of life collaboratively with other regional health care providers.



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Organizational Pillars

SERVICE	QUALITY/SAFETY	PEOPLE	FINANCE	GROWTH	COMMUNITY
<p>Typically refers to patient satisfaction or improving customer experience (pt., family, MD)</p>	<p>Areas needing improvement whether clinically or related or performance improvement and process measures.</p> <p>Assure standards of practice are followed.</p>	<p>Focus on employee and physician satisfaction or retention and turnover; Staff competency, education; Safety and well being; Leadership and staff development</p>	<p>Measure of the overall financial performance of the department as it related to the organization. Management of resources (fiscal, material, and human), being good stewards. Identify opportunities for revenue enhancement.</p>	<p>Improving market share or growing volume. Identify opportunities for development of new services/revenue sources Identify strategic priorities.</p>	<p>Measures that indicate the organization's commitment to those it serves.</p>

VISION STATEMENT:

Prairie du Chien Memorial Hospital achieves the best outcomes for every patient every time. It is where:

- Patients want to go when they need health care services
- Physicians want to practice
- People who are passionate about health care want to work
- The community feels it has an invaluable resource
- The region knows high quality patient-focused health care is provided



VALUES:

Excellence

Integrity

Compassion

Unity

Joy

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Memorial Hospital



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**Hospital-wide PI/Quality Information presented to the
Board of Directors
June 16, 2012**

DEPARTMENT GOALS

Service

- Hospital HCAPHS
- ER Performance Measurement
- Home Health Satisfaction Results
- Hand Hygiene Study
- TCAB Related Projects



Quality/Safety

- Core Measure Data
- Medication Variance
- OR Antibiotics
- Surgical Site Infection
- Nosocomial Infection Rates
- Falls
- OPPE - Ongoing Physician
Performance Evaluation
- Hand-off Communication



People

- Swank = 100% Staff Completed - 747 total participants
- CPR Participation
- Student Stats
- 2nd Employee Satisfaction Survey Completed
- 98% RN staff participation in nursing skills program 2011

Finance

- LEAN Projects
- Readmission - WHA project - will effect reimbursement
- Flu Vaccine

Growth

Community Needs Assessment - in progress

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Community

Tissue Organ Donation

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HCAHPS Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting Prairie du Chien Memorial Hospital

GLOBAL DOMAIN QUESTION INDICATOR	YEAR 2011							
	Qtr 1	n	Qtr 2	n	Qtr 3	n	Qtr 4	n
YOUR CARE FROM THE NURSES								
Nurses treat with courtesy/respect	90	90	88.1	84	93.4	76	93.9	82
Nurses listen carefully to you	73.3	90	75.3	85	81.6	76	76.8	82
Nurses explain in way you understand	70.8	90	74.1	85	86.8	76	80.5	82
YOUR CARE FROM THE DOCTORS								
Dr. treats you with courtesy/respect	88.9	90	91.7	84	86.8	76	90.2	82
Dr. listens carefully to you	79.8	89	79.5	83	82.7	75	84	81
Dr. explained things you could understand	76.7	90	74.8	83	81.3	75	81.5	81
THE HOSPITAL ENVIRONMENT								
When you pushed your call button/staff answered	71.3	80	77.6	76	77.6	67	84.1	69
Room/Bathroom kept clean	84	90	87.8	82	83.8	74	90.1	81
Your room was kept quiet	46.6	88	62.7	83	60.5	76	59.8	82
Help to bathroom/bedpan	71.3	59	77.6	56	77.6	55	71	62
Was your pain well controlled	66.1	66	57.1	63	76.3	59	67.8	59
Everything was done to control pain	88.1	66	79	62	89.5	57	90	60
Explanation of meds before given	75	49	78	50	85.4	48	81.8	44
Before given meds, side effects explained	57.8	50	55.1	49	64.6	48	60	45
WHEN YOU LEFT THE HOSPITAL								
Staff talked need after discharge	90.8	81	94.5	73	85.3	68	90.7	75
Info on symptoms to look for after discharge	86.3	78	93.1	72	91.2	68	92.2	77
OVERALL RATING OF HOSPITAL								
PDC Memorial Hospital Rating (9-10)	71.3	87	75.6	82	77	74	73.4	79
PDC Memorial Hospital Rating (7-8)	22.6	87	18.2	82	19.4	74	25.3	79
PDC Memorial Hospital Rating (0-6)	6.5	87	6.2	82	6.1	74	1.3	79
Recommend to friends/family (Definitely Yes)	64	89	77.1	83	74.3	74	70.7	82

ER Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting

Prairie du Chien Memorial Hospital

YEAR 2011

GLOBAL DOMAIN QUESTION INDICATOR	Qtr 1	Qtr 2	Qtr 3	Qtr 4
ARRIVAL				
Waiting time before noticed arrival	94.9	91.5	92.8	95.9
Helpfulness of first person	93.1	92	93.2	92.7
Comfort of waiting room	89.7	86.7	85.9	89
Waiting time to treatment area	92.9	88.6	88.2	93.4
Waiting time to see doctor	84.8	82.5	81.1	84.4

ER Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting

Prairie du Chien Memorial Hospital

GLOBAL DOMAIN QUESTION INDICATOR	Qtr 1	Qtr 2	Qtr 3	Qtr 4
NURSES				
Nurses courtesy	95.7	93.2	93.3	95.9
Nurse took time to listen	93.6	92.5	91.6	93.6
Nurses attention to your needs	93.8	90.9	92	94.2
Nurses informative re: treatments	92.4	91.4	91.7	93
Nurses concern for privacy	93.8	92.3	91.25	94.5

ER Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting Prairie du Chien Memorial Hospital

GLOBAL DOMAIN QUESTION INDICATOR	Qtr 1	Qtr 2	Qtr 3	Qtr 4
DOCTORS				
Doctors courtesy	88.8	89.4	88.7	89.6
Doctor took time to listen	86.8	86.7	88.3	88.3
Doctore informative re: treatments	86.8	88	88.8	87.3
Doctors concern for comfort	87.2	87.2	89.3	87.3



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ER Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting

Prairie du Chien Memorial Hospital

GLOBAL DOMAIN QUESTION INDICATOR	Qtr 1	Qtr 2	Qtr 3	Qtr 4
TESTS				
Courtesy of person who took blood	91.7	89.7	94.4	92.1
Concern blood draw comfort	91.9	88.2	94	91.5
Waiting time for radiology test	89.2	82.5	88.5	88.7
Courtesy of radiology staff	94.3	89.3	92.8	91.4
Concern for comfort radiology test	94.9	87.3	92.5	91.4

ER Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting

Prairie du Chien Memorial Hospital

GLOBAL DOMAIN QUESTION INDICATOR	Qtr 1	Qtr 2	Qtr 3	Qtr 4
FAMILY & FRIENDS				
Courtesy shown for family/friends	91.1	89.3	92.4	90
Adequacy of info to family/friends	90.3	90	90.6	88.4
Let family/friend be with you	94.1	90.4	93.5	91.8

ER Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting

Prairie du Chien Memorial Hospital

GLOBAL DOMAIN QUESTION INDICATOR	Qtr 1	Qtr 2	Qtr 3	Qtr 4
PERSONAL ISSUES				
Informed about delays	82.4	83.7	83.8	86
Staff cared about you as person	88.9	89.8	89.8	90.6
How well pain was controlled	84.5	86.1	87.6	88.2
Information about home care	87.3	90.5	90.1	91.4

ER Performance Measurement Dashboard Report - Trend by Quarter

Composite Scores for Public Reporting

Prairie du Chien Memorial Hospital

GLOBAL DOMAIN QUESTION INDICATOR	Qtr 1	Qtr 2	Qtr 3	Qtr 4
OVERALL ASSESSMENT				
Overall rating ER care	91.1	89.3	91.4	92
Likelihood of recommending	90	87.9	88.7	89.4



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ER Performance Measurement Overall Analysis by Sections- Trend by Quarter Prairie du Chien Memorial Hospital

ER Performance Measurement Overall Analysis by Sections - Trend by Quarter

Prairie du Chien Memorial Hospital - Year 2011

	Qtr 1 PDC	Qtr 1 PG	Qtr 2 PDC	Qtr 2 PG	Qtr 3 PDC	Qtr 3 PG	Qtr 4 PDC	Qtr 4 PG
Overall Facility Rating	90.6	86.8	89.2	86.9	90.2	86.7	90.4	87.1
Arrival	91	85.8	88.5	86.2	88.3	85.9	91.2	86.3
Nurses	93.9	89	92	89.2	91.9	89	94.2	89.5
Doctors	87.6	85.9	87.8	86.2	88.6	85.8	88.2	86.2
Tests	92	89.5	88.5	89.5	93.3	89.6	91	89.8
Family/Friends	91.5	88.5	89.6	88.8	92.1	88.6	90.2	89
Personal/Insurance Information	91.5	89.5	89.2	89.7	92	89.8	92.4	89.9
Personal Issues	86.7	83.1	87.2	83.4	88.2	83.1	88.2	83.6
Overall Assessment	90.7	85.3	88.6	85.4	90	85	90.8	85.5

Prairie du Chien Memorial Hospital Quarterly Report

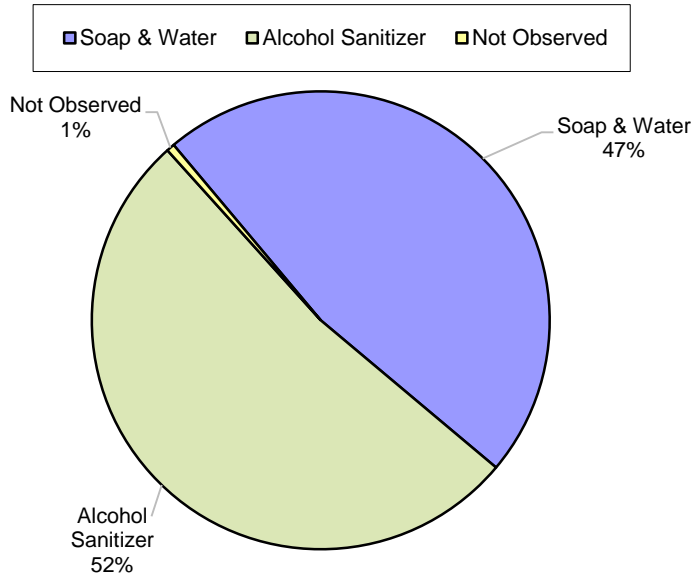
Small Hospitals Press Ganey Database



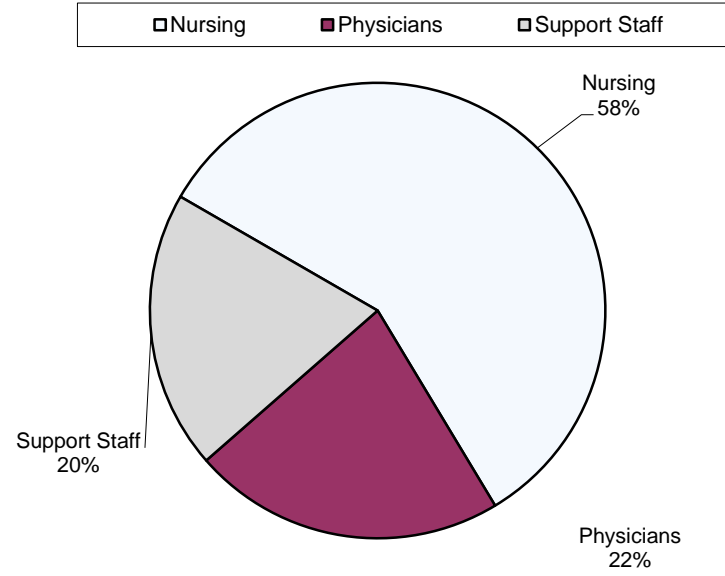
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Hand Hygiene Study

Hand Hygiene Study 2011



Staff Observed 2011 Hand Hygiene Study



Staff	Total % of Hand Hygiene
Soap & Water	332
Alcohol Sanitizer	367
Not Observed	4

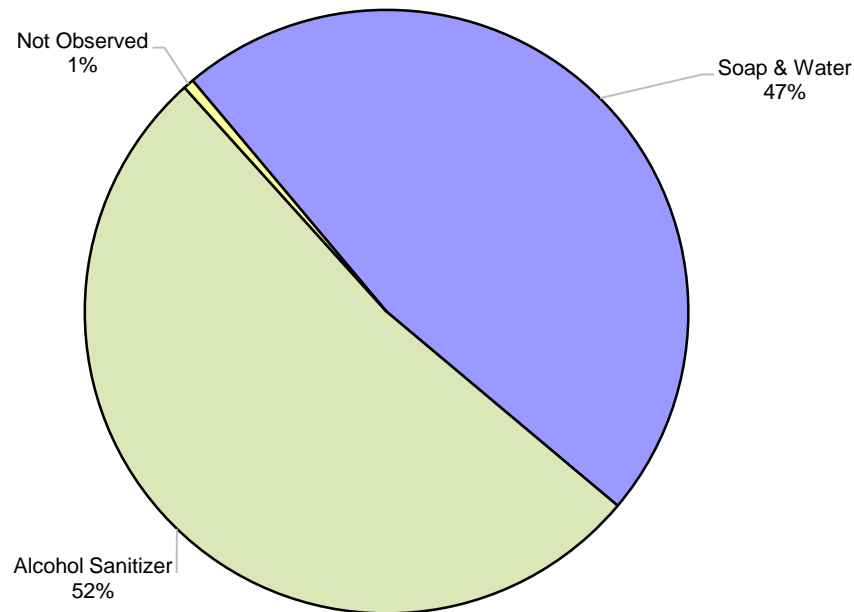
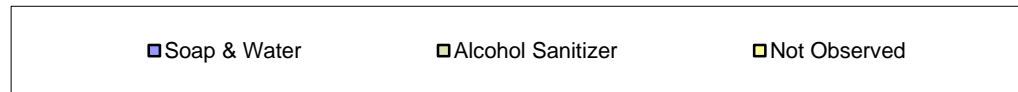
Support Staff	Number of Staff Observed
Nursing	408
Physicians	156
Support Staff	139

National Percentage of Hand Hygiene in Health Care Facilities 87% | Prairie du Chien Memorial 99% (2003)



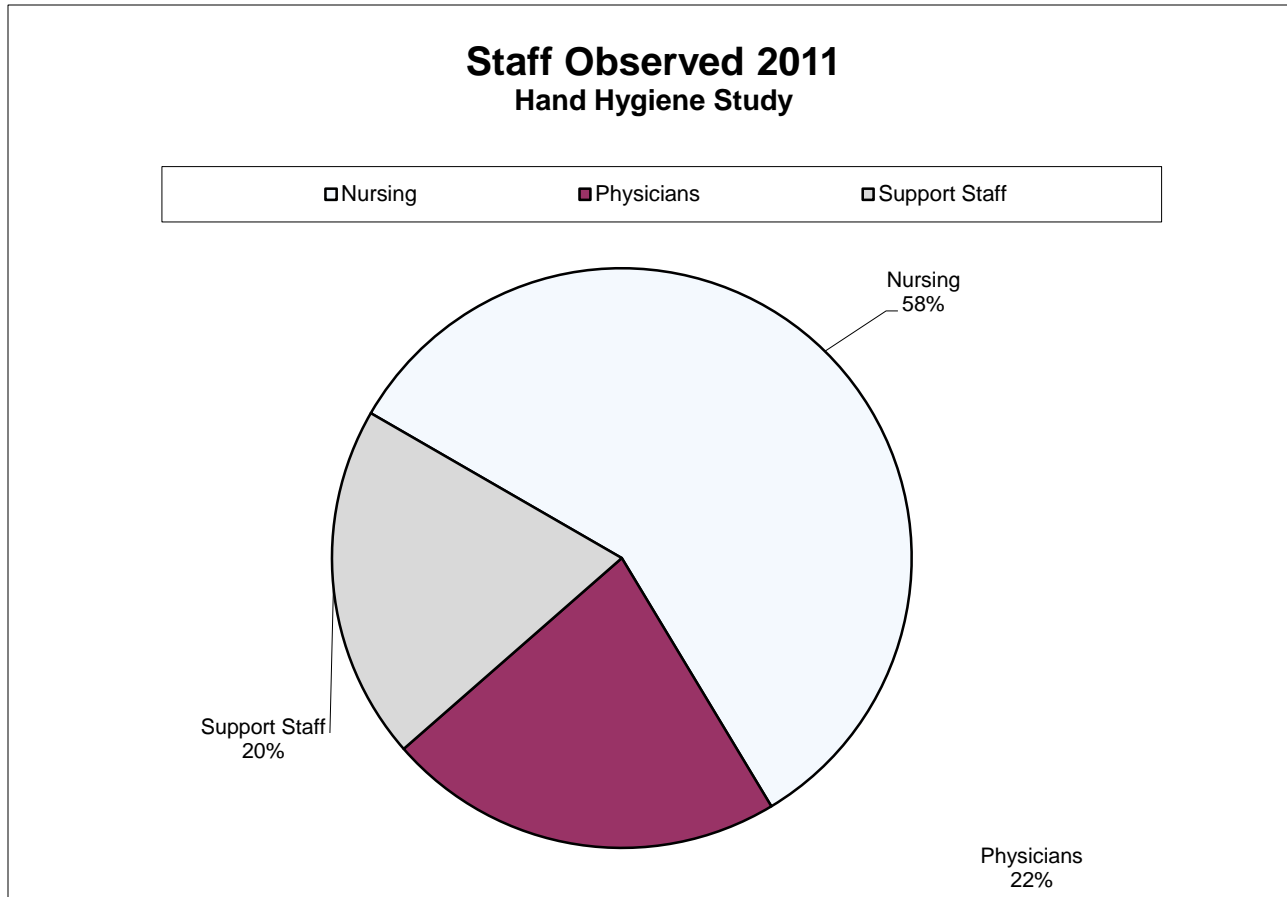
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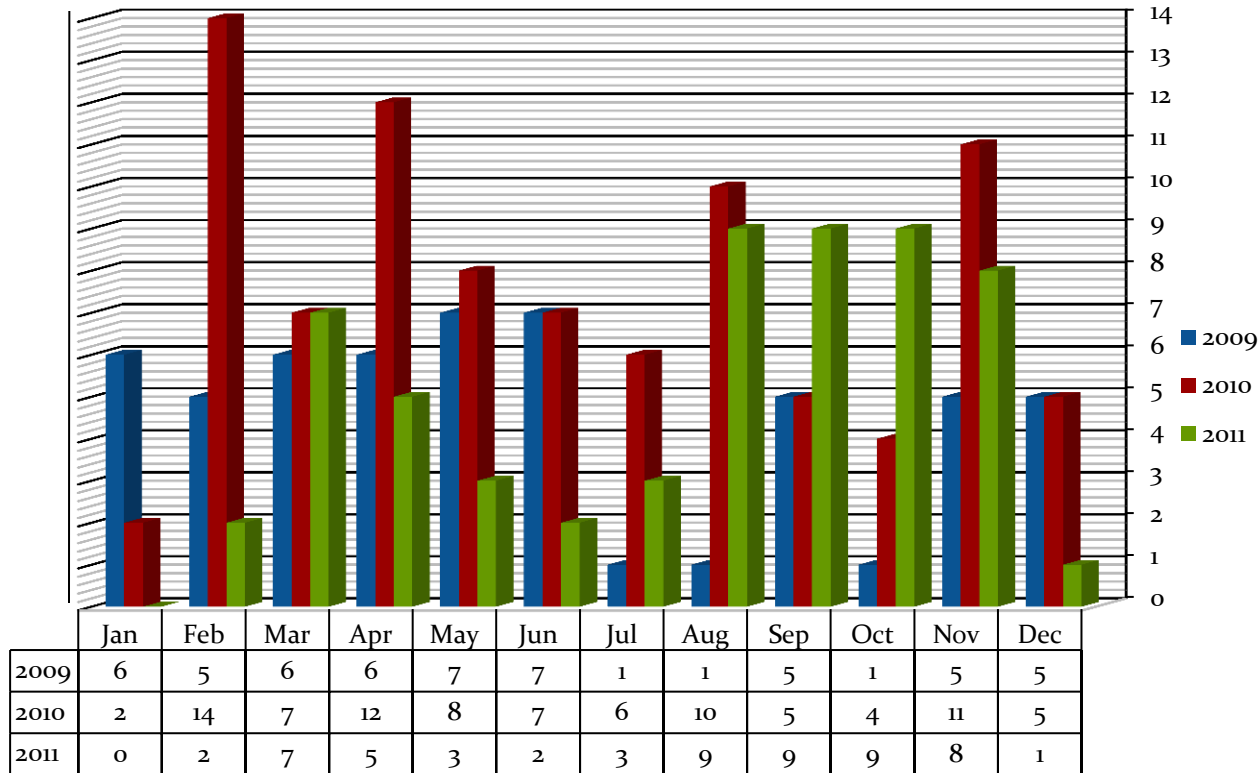
Hand Hygiene Study



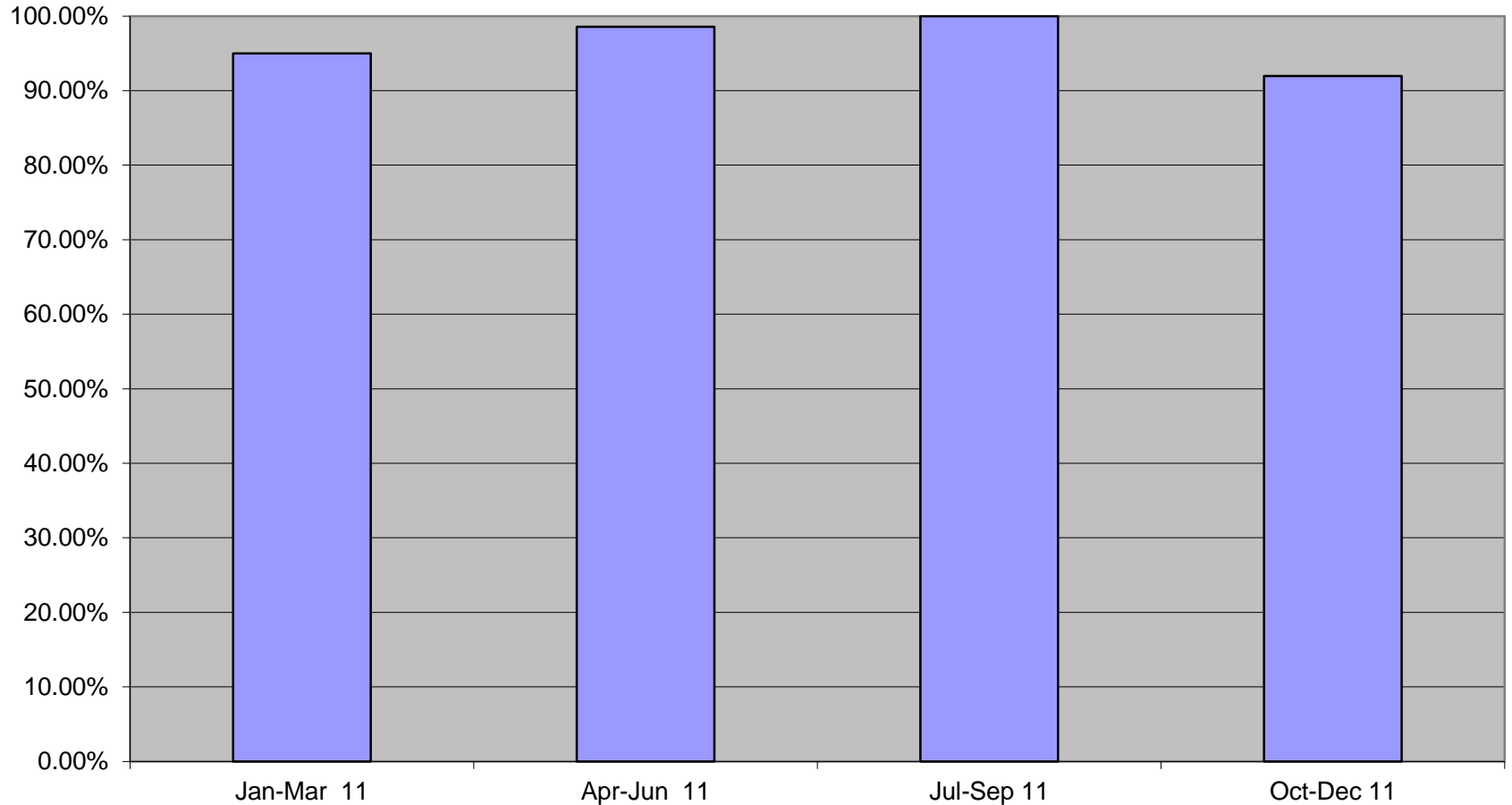
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Prairie du Chien Memorial Hospital Medication Variance Comparison



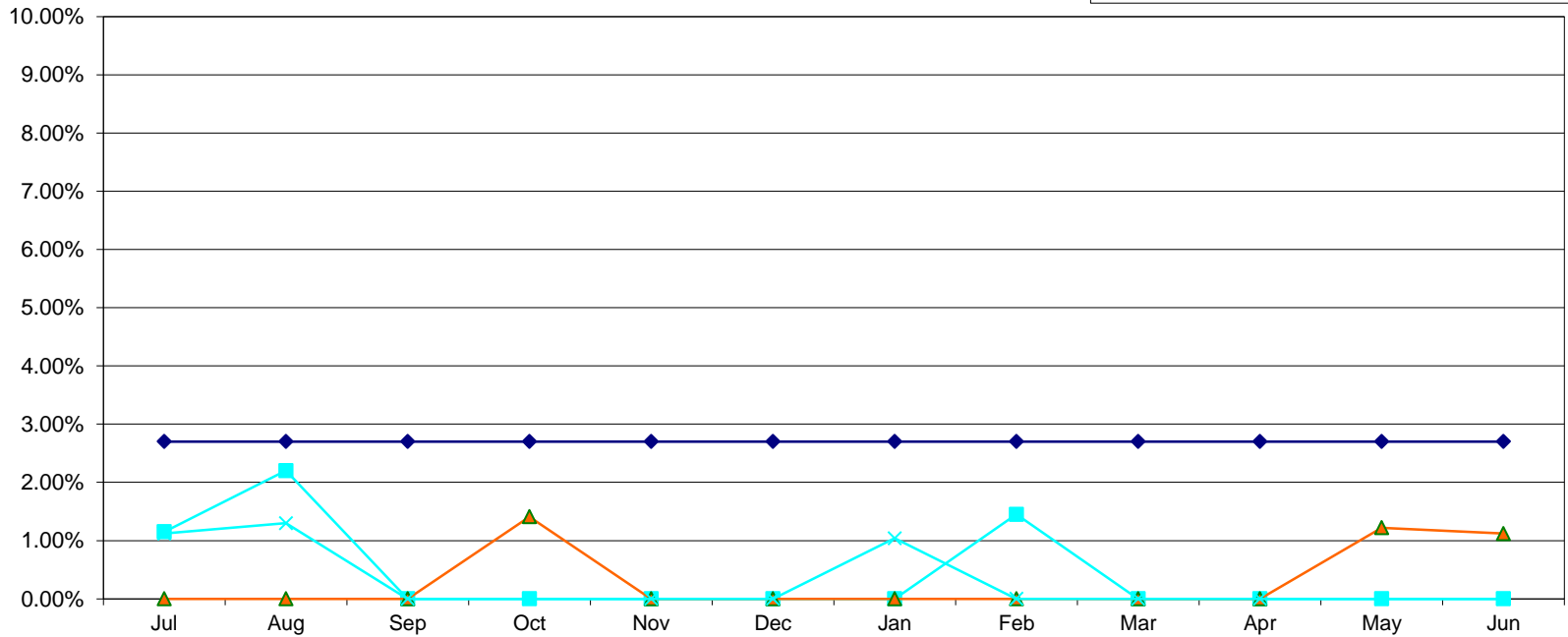
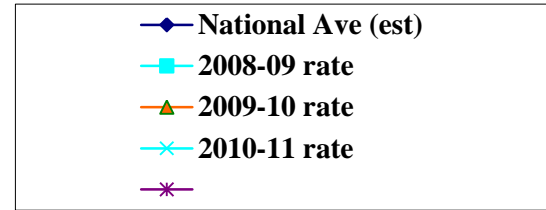
Surgical Antibiotic Timeliness



	Number of Charts	< 60min	
Jan-Mar 11	60	57	95.00%
Apr-Jun 11	70	69	98.57%
Jul-Sep 11	43	43	100.00%
Oct-Dec 11	62	57	91.94%

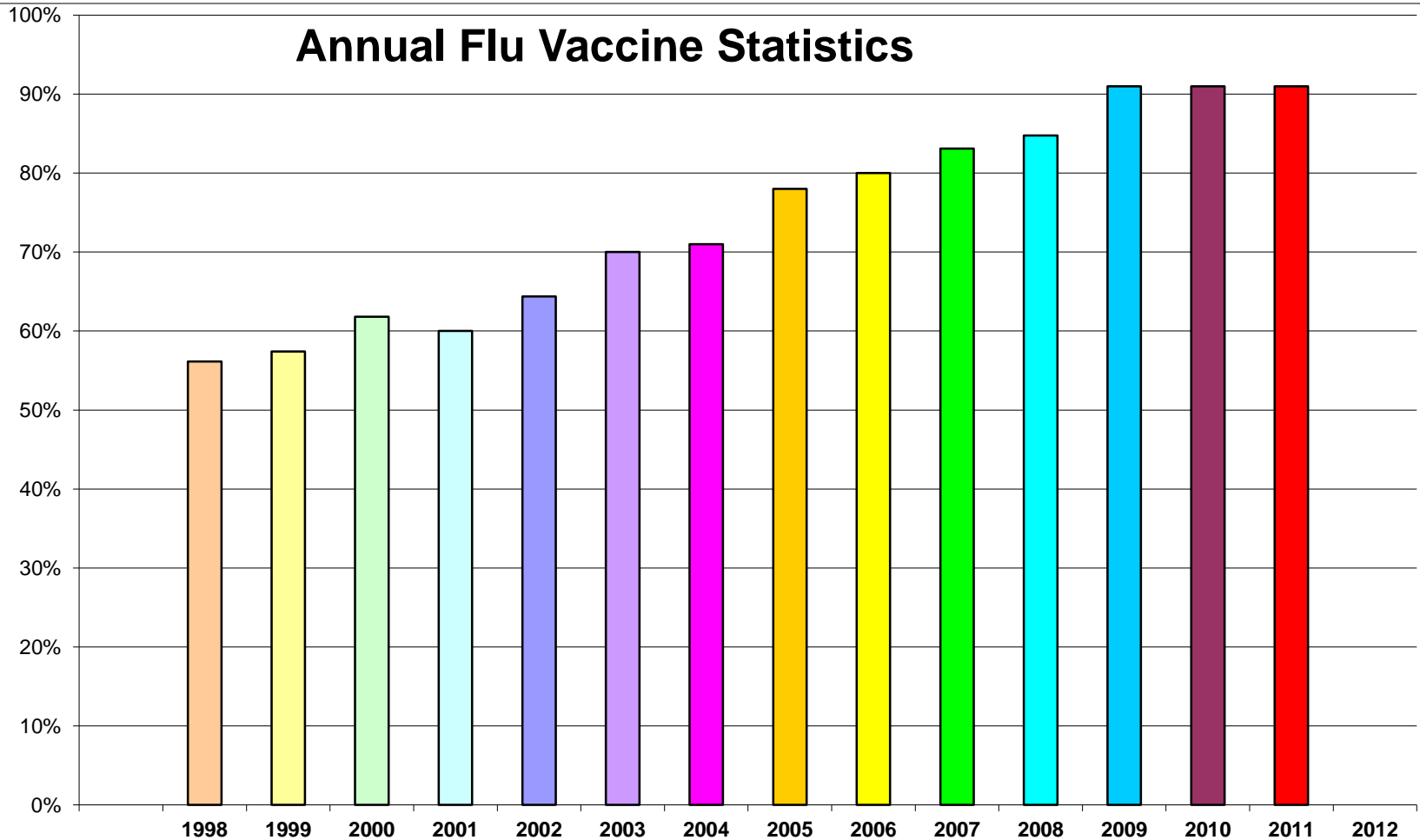
Range in min	Mean	Not Documented
5 to 61	23	0
10 to 67	21	0
12 to 60	22	0
1 to 202	30	1

Surgical Site Infection CLASS 1 & 2



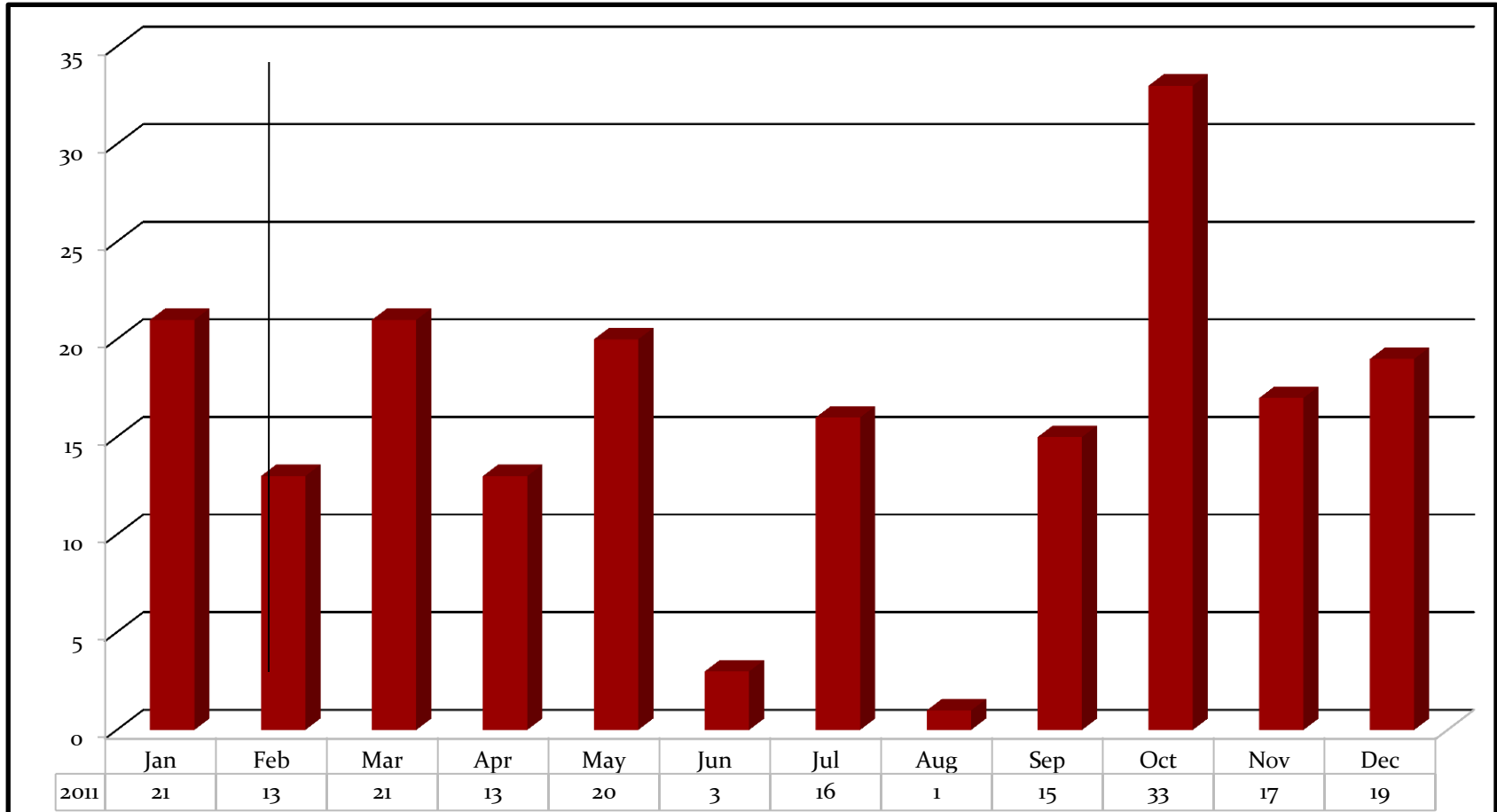
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
National Ave (est)	2.70%	2.70%	2.70%	2.70%	2.70%	2.70%	2.70%	2.70%	2.70%	2.70%	2.70%	2.70%
2008-09 rate	1.15%	2.20%	0.00%	0.00%	0.00%	0.00%	0.00%	1.45%	0.00%	0.00%	0.00%	0.00%
2009-10 rate	0.00%	0.00%	0.00%	1.41%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.22%	1.12%
2010-11 rate	1.12%	1.30%	0.00%	0.00%	0.00%	0.00%	1.04%	0.00%	0.00%	0.00%	0.00%	0.00%

Annual Flu Vaccine Statistics



	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	
	56%	57%	62%	60%	64%	70%	71%	78%	80%	83%	85%	91%	91%	91%	
	151	151	170	168	177	194	203	232	238	241	250	272	286	288	
	269	263	275	280	275	279	285	296	297	290	295	302	316	317	

2011 Student Stats



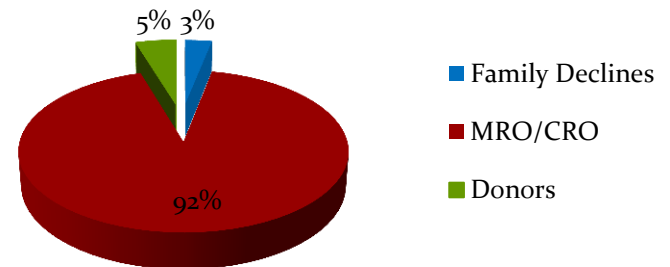
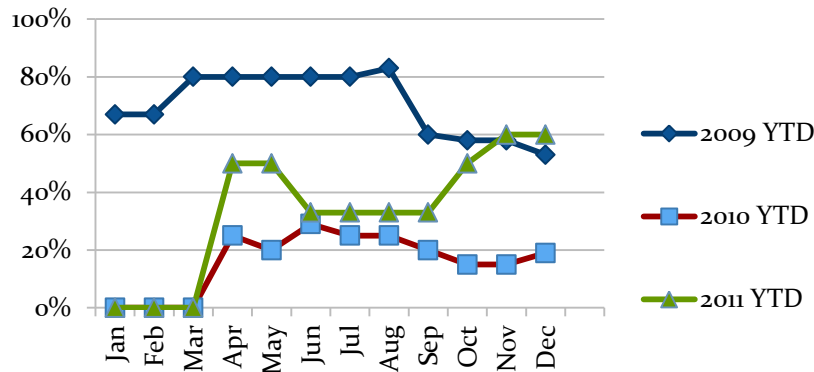
Total Students = 192

Tissue Donation Dashboard

2011 – Prairie du Chien Memorial Hospital

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	TOTAL
Referrals to Statline	6	3	5	7	6	5	3	5	3	6	8	7	64
Rule Outs Statline	4	3	3	4	3	4	1	5	3	4	2	7	43
Referrals to RTI Call Center	2	0	2	3	3	1	2	0	0	2	6	0	21
Rule Outs RTI	2	0	2	1	3	0	2	0	0	1	5	0	16
Eligible for Donation - RTI Call Ctr	0	0	0	2	0	1	0	0	0	1	1	0	5
Family Decline	0	0	0	1	0	1	0	0	0	0	0	0	2
Actual Donors	0	0	0	1	0	0	0	0	0	1	1	0	3
Donors Listed on Registry	0	0	0	0	0	0	0	0	0	0	0	0	0
Conversion Rate By Month	na	na	na	50%	na	0%	na	na	na	100%	100%	na	
Family Decline Rate By Month	na	na	na	50%	na	100%	na	na	na	0%	0%	na	
Conversion Rate YTD	na	na	na	50%	50%	33%	33%	33%	33%	50%	60%	60%	
Family Decline Rate YTD	na	na	na	50%	50%	67%	67%	67%	67%	50%	40%	40%	

Q1	Q2	Q3	Q4
na	33%	na	100%



Patient Deaths YTD Result Breakdown

www.pdcmh.org

sextonw@pdcmemorialhospital.org

Data Provided by: Studer Group, George Scarborough and Prairie du Chien Memorial Hospital



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