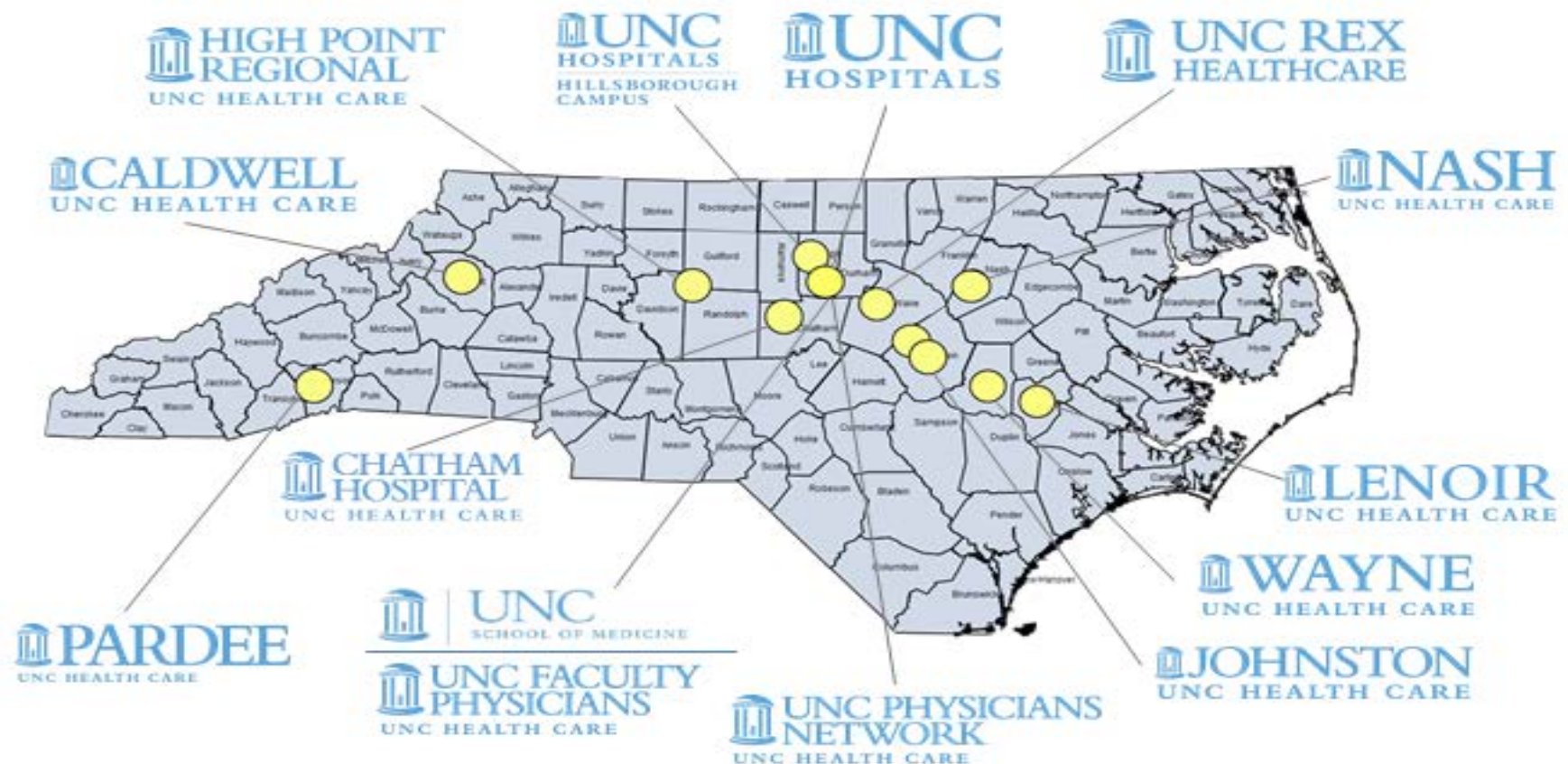


Chatham Hospital's Story of HCAHPS Success and Sustainment Using Lean Methodology



Hospital Consumer Assessment of Healthcare Provider Systems (HCAHPS)

Hospital Discharges October 2015-September 2016

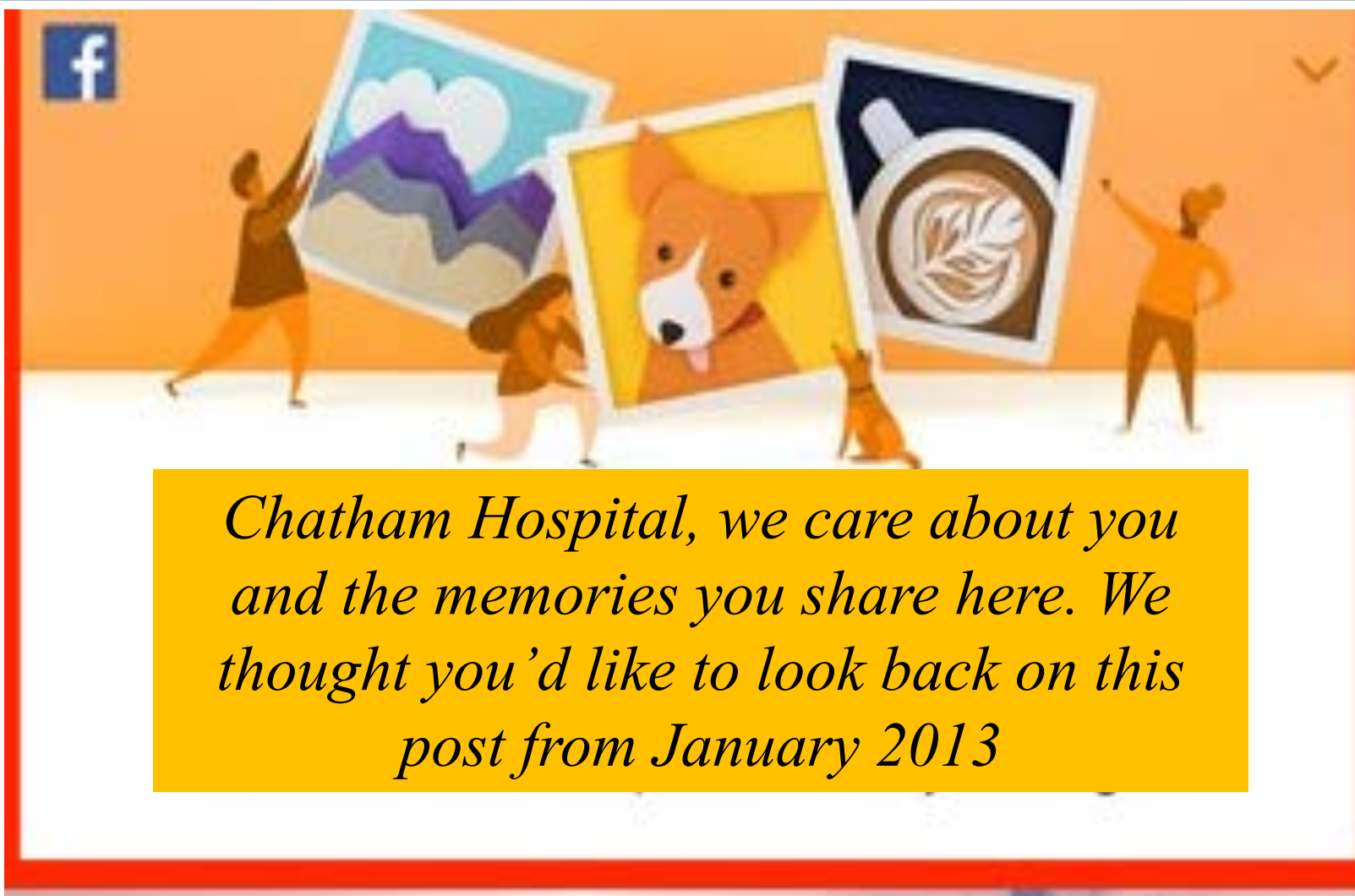
HCAHPS (pronounced "H-caps") is a 27 question standardized telephone survey measuring patients' ratings of their hospital experience. The results are compiled into 10 separate core measures listed below. All results of this test are publicly reported at <http://www.hospitalcompare.hhs.gov>, where other hospital results can be found as well. HCAHPS allows hospitals to publicly report and compare their results locally, regionally, and nationally.



	UNC	Rex	Caldwell	Chatham	High Point	Johnston	Lenoir	M. Pardee	Nash	Wayne	NC Avg.	Nat. Avg.
% Patients who overall rate the hospital highly	81	76	67	85	68	75	66	73	64	67	73	73
% Patients who would recommend hospital to friends & family	84	80	66	83	68	73	63	73	58	60	71	72
% Patients given information about what to do during recovery at home	90	89	87	95	82	90	86	88	84	86	87	87
% Doctors who communicated well with patients	83	84	81	91	78	83	83	83	78	81	83	82
% Nurses who communicated well with patients	83	80	77	90	78	81	81	78	80	79	81	80
% Patients who received help quickly from hospital staff	67	66	67	81	60	69	62	67	66	64	68	69
% Staff who explained medicines before giving them to patients	67	66	65	75	62	67	66	63	64	63	66	65
% Patients whose pain was well controlled	72	72	68	76	70	72	66	68	69	68	71	71
% Patients whose rooms were kept quiet at night	65	59	64	80	55	73	60	60	56	63	64	63
% Patients rooms and bathrooms kept clean	74	64	74	84	68	78	69	83	65	71	72	74
% Patients who understood their care when they left the hospital	59	56	49	67	47	50	48	53	46	43	51	52
Overall Star Rating (1-5)	2	3	2		3	3	2	4	2	3		
Patient Survey Star Rating (1-5)	4	4	3	5	2	4	3	3	3	3		



Highest Scoring Hospital
NC Average
National Average



*Chatham Hospital, we care about you
and the memories you share here. We
thought you'd like to look back on this
post from January 2013*

Current State (in January of 2013) HCAHPS and the Patient Experience at Chatham Hospital



UNCHCS Quality Service Framework



SWANSON CARING THEORY



January 2013 Patient Experience Plan ...coming soon!!!

UNC HEALTH CARE RELATIONSHIP-BASED CARE



**Best
Practice**



Chatham Carolina Care 2013

Ten Strategies or Tools

1. Standards of Behavior
2. Patient Sat data posted and reviewed
3. Rounding
4. AIDET (communication)
5. Words and Ways that Work
6. Huddles
7. Moment of Caring
8. Service Recovery
9. Celebrations and Recognition
10. DC Callbacks

Jan
2013

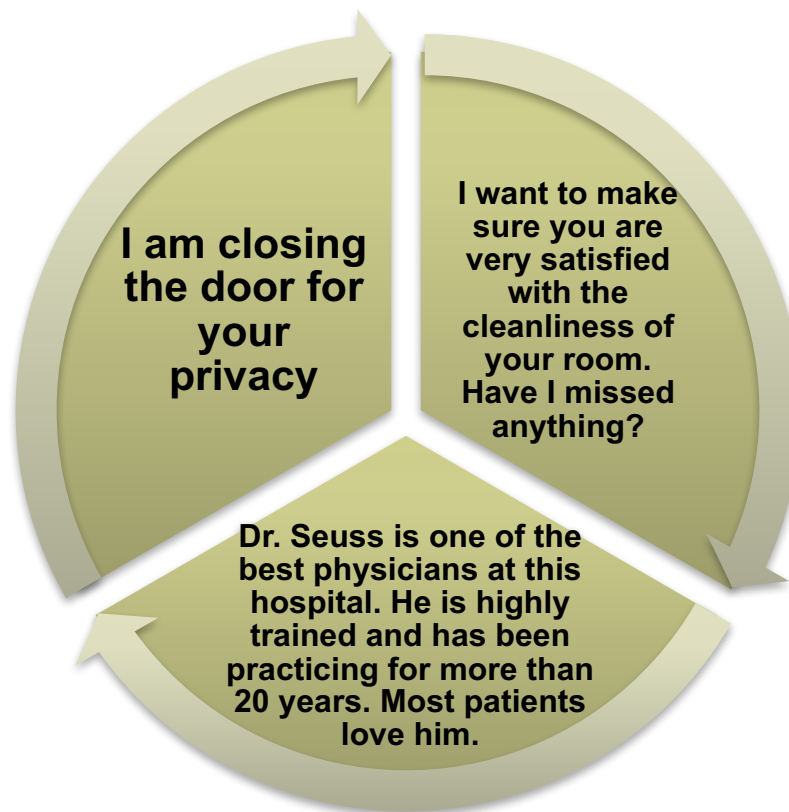
Jan
2013

Feb
2013



Words and Ways that Work – Key Words at Key Times

Carefully chosen words used to “connect the dots” and help patients, families, and visitors better understand what we are doing and why.



Words and Ways that Work for Service Recovery

The CARE approach to blameless Apology...

C for Connect.

A for Apologize. No excuses!

R for Repair.

E for Exceed.

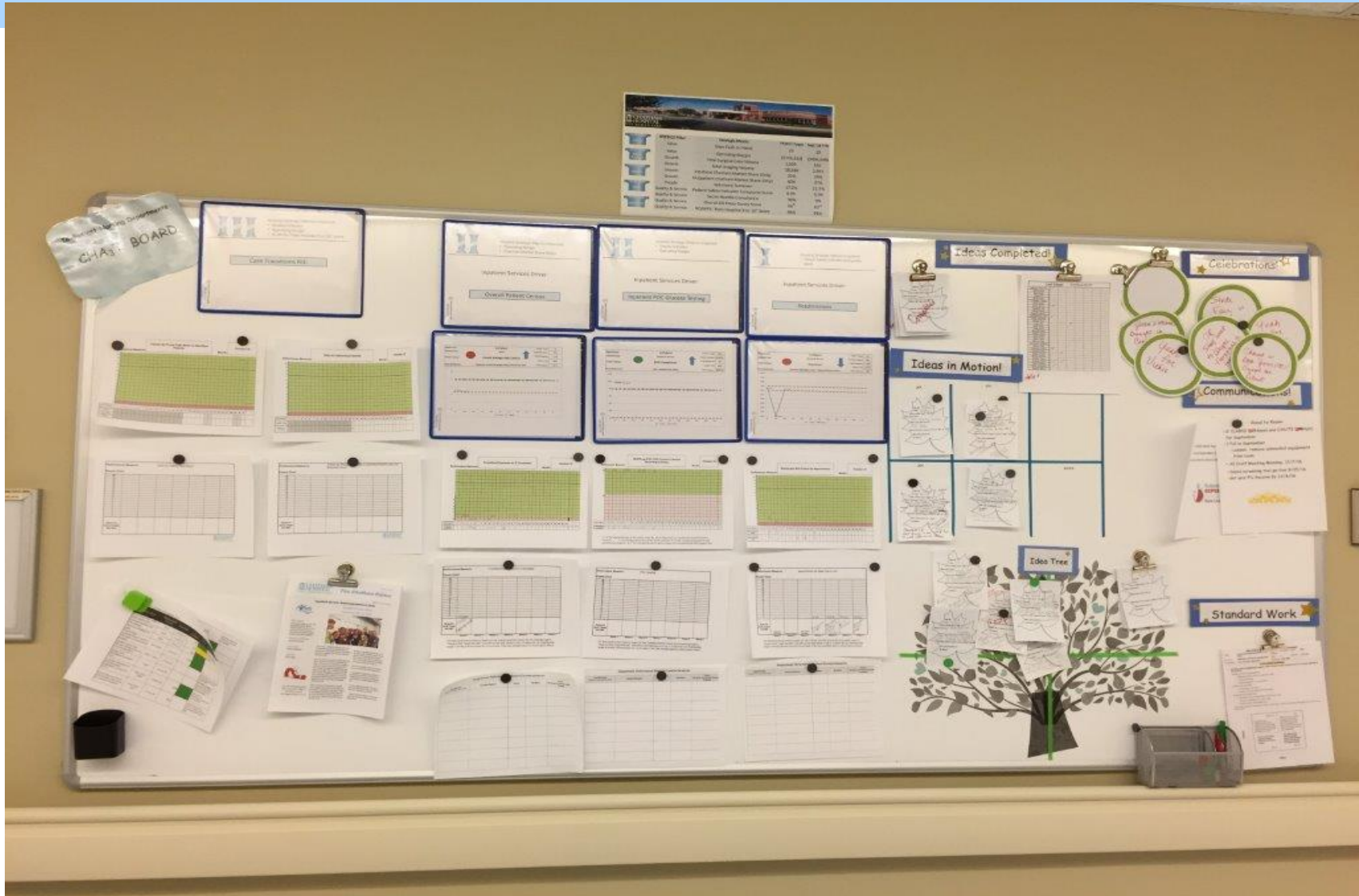


Assignment for Leaders!



- 1. Have all current employees sign Carolina Care standards of behavior and turn into HR by 1/31**
- 2. Post patient satisfaction results in dept.**
- 3. Initiate leader rounding on employees by 2/1/2013**
- 4. Initiate employee rounding on patients by 2/1/2013**

How our huddles have grown through our Lean work; and how they keep us on track with patient experience goals

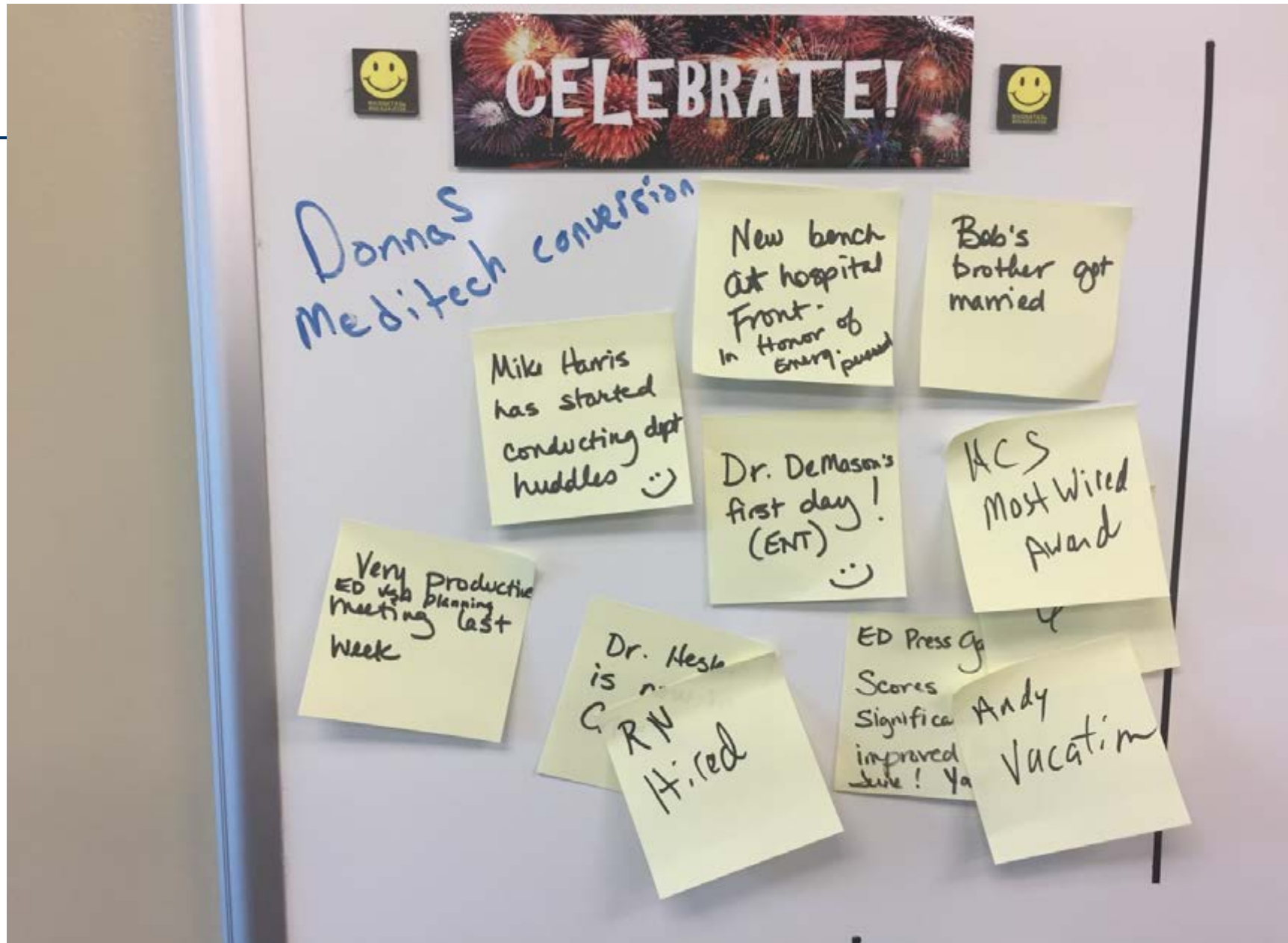


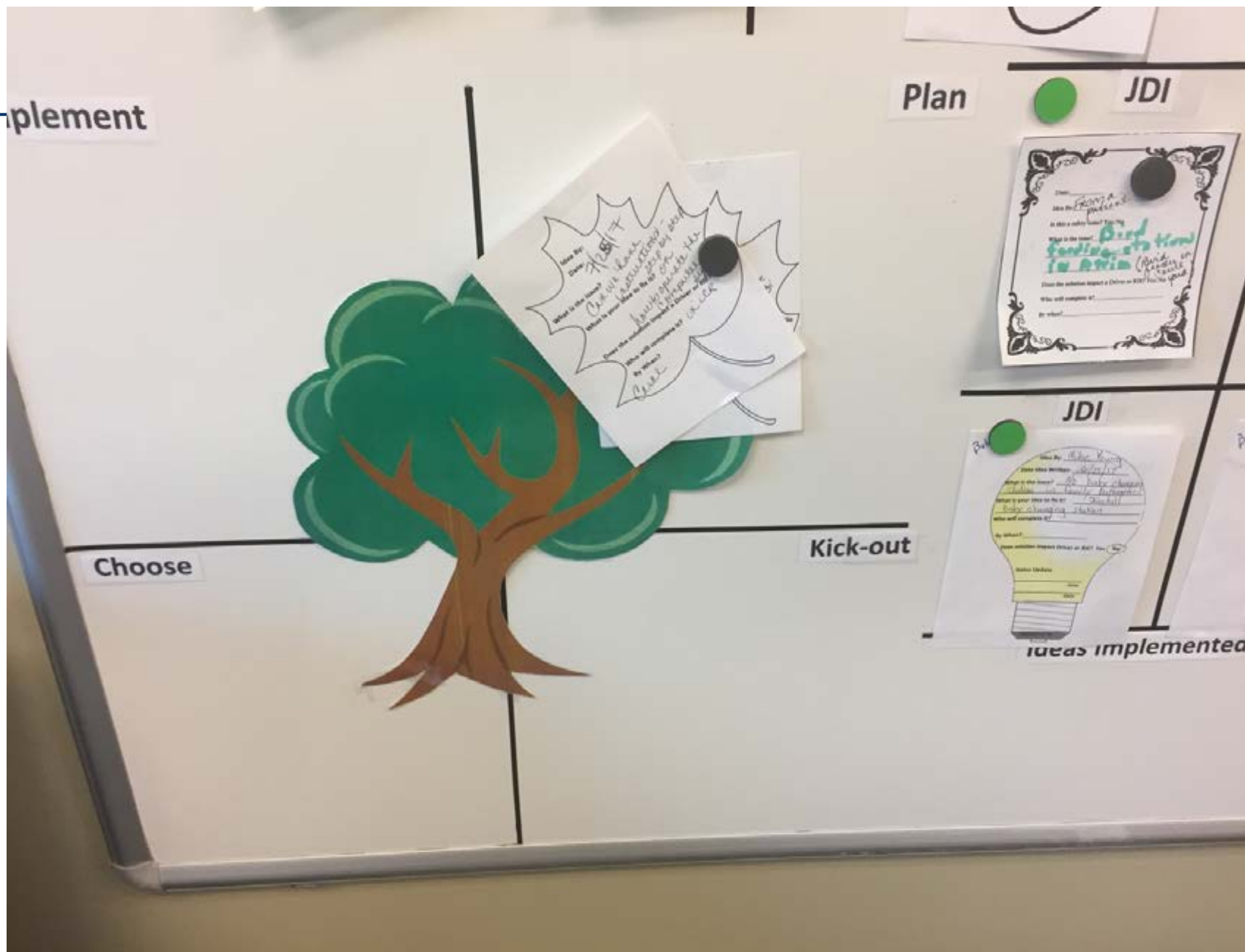


CHATHAM
HOSPITAL
UNC HEALTH CARE

TRUE NORTH







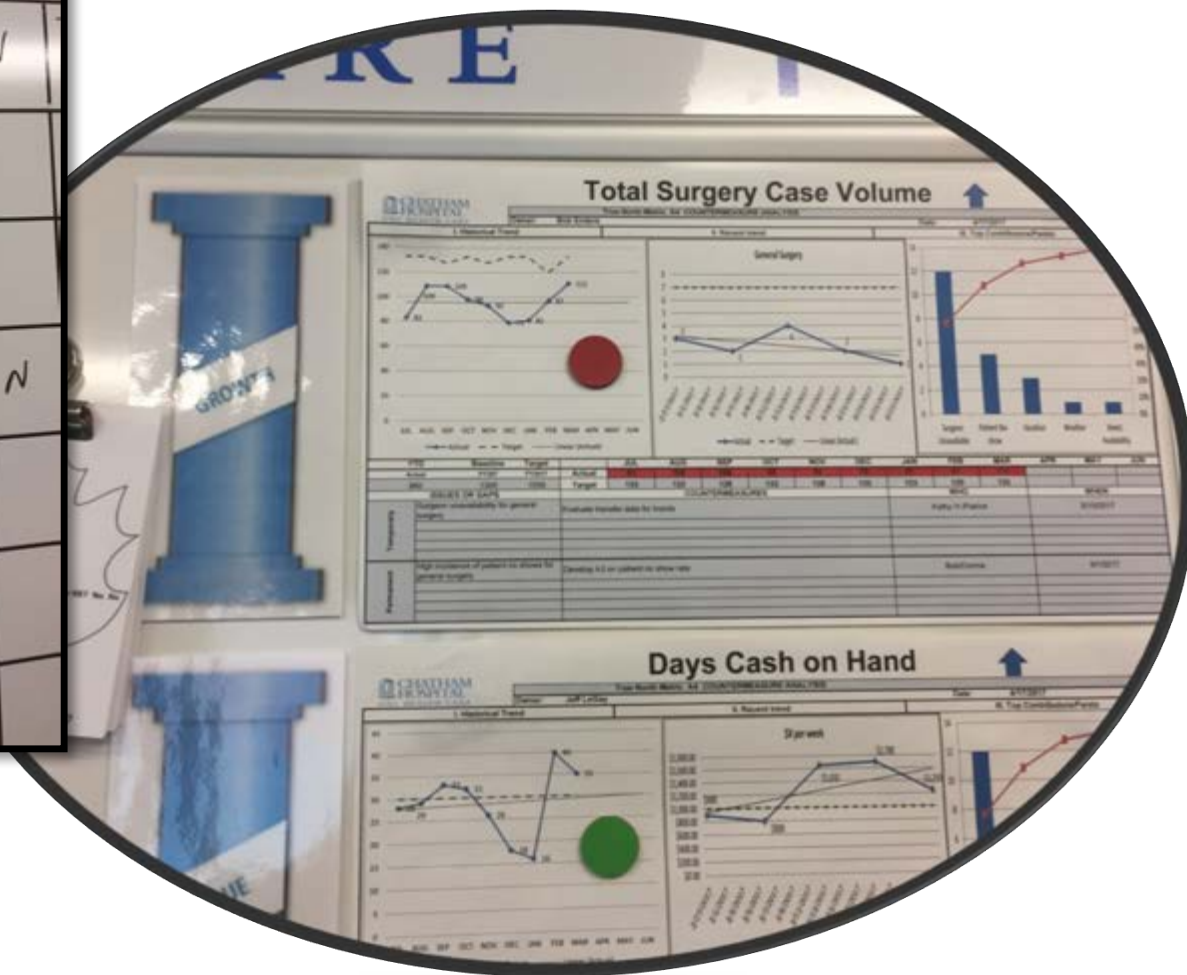
Chatham Hospital Hoshin

FY2018 Level 0 Strategy Deployment

Strategic Initiatives			A3																					
	Design and implement surgical expansion and referral plan	Yes	X				X	X	X	X	S	P					S					S	S	S
X	Improve accessibility, reporting and use of available Epic data	Yes	X	X	X			X	X	X	S			S	P		S							S
	Develop provider engagement strategy	Yes	X	X	X	X	X	X	X	X	S			S			P					S	S	S
X	Improve ED patient quality of care and throughput	Yes	X	X	X	X				X	S			S	S		P					P	S	
X	Identify new outpatient opportunities including community offsite services	Yes	X	X	X					X	P	S	S				S							S
	Identify ways to increase acute care patient days	Yes	X				X	X	X	X	P						P			S				
X	Identify Chatham Hospital's role in lower joint replacement bundled payments	No	X							X	P													S
	Improve Chatham Hospital Marketing Program	Yes	X				X	X		X	P	S												S
	Optimize Chatham Hospital and Pittsboro MOB Referral Processes	Yes	X				X	X		X	P						S							
X	Develop and implement Antimicrobial Stewardship Program	Yes	X							X							P				S			S
<div>1-year Breakthrough Objectives (FY2018)</div> <div>Improvement Initiatives (FY2018)</div> <div>Measures and Targets (FY2018)</div> <div>3 year Strategic Objectives (FY2017 - FY2019)</div>			<div>RESOURCES</div> <div>P- PrimaryS-Secondary</div> <div>Operating Cash Flow</div> <div>ED LOS (D/C Home Patients)</div> <div>Overall ED Press Ganey Score</div> <div>Percent Provider Attendance to Required Meetings</div> <div>Acute Patient Days</div> <div>Total Surgical Volumes</div> <div>Patient Safety Indicator Composite Score</div> <div>Operating Margin</div> <div>Robert Enders</div> <div>Tammy Needham</div> <div>Jeff LeGry</div> <div>Kathy Heilig</div> <div>Deborah Taylor</div> <div>Jodie Bolow</div> <div>Andrew Hammagel</div> <div>Brian Wigga</div> <div>Lakea Powell</div> <div>Kelth Blinnert</div> <div>Carol Rietz-Barlow</div> <div>Pharmacy</div> <div>Donna Sessions</div> <div>Chief of Issu Surgery Committee Chair</div> <div>ED Medical Director</div> <div>UNC Health Care System Support</div>																					
1	Prepare for transition to value-based purchasing and population health			<div>To ensure Chatham's long term success and sustainability, we must move beyond status quo and incremental change to achieve breakthrough improvement in every dimension of performance to provide superior patient and family-centered care.</div> <div>CHATHAM HOSPITAL</div> <div>UNC HEALTH CARE</div>																				
2	Increase net revenue through smart growth based on market demand and consumer preferences																							
3	Provide top quartile quality of care to enhance patient loyalty																							
4	Strengthen finances to facilitate reinvestment and innovation																							
5	Develop a culture of engaged employees and physicians																							
6	Leverage UNC systemness																							

Hoshin level A3 projects that Senior Leadership own

Strategic Initiatives					
A Strategic A3: Owner(s): Develop A3 By: A3 Status: Barriers/ Delays?					
●	Implement surgical expansion & referral plan	P: Thomas S: Bob/Andy	10/31/17	CC	N
●	Improve accessibility, reporting; use of available spin data	P: Deborah S: Kelly/Brin		NS	
●	Develop provider engagement strategy	P: Andy S: Bob/Kelly		NS	
●	Improve ED patient quality of care and throughput	P: Keith S: Dr. Hester	9/30/17	CC	N
●	ID new outpatient opportunities including community office services	P: Bob S: Tenny		NS	
●	ID ways to increase acute care patient days	P: Tenny S: Andy		NS	
		P: Bob		NS	



RRR (R3) Board : Rewards, Recognition, Recovery (*service recovery*)



RRR (R3) Board : Rewards, Recognition, Recovery (*service recovery*)

PURPOSE:

- Define structure for and provide rewards and recognition related to patient satisfaction to top performing departments and/or individuals (including physicians).
- Review data looking for star performance.
- Define the Service Recovery process and implement in all areas.
- Subcommittee of Patient Experience Steering Committee (PESC).

Surgical Services

Highest Mean Rating
Let's keep it up!
☆ **GO TEAM!** ☆

WOW!

5

Our 9th
-star rating!
Keep it up!
s make it 10!!!

Published on April 25, 2007

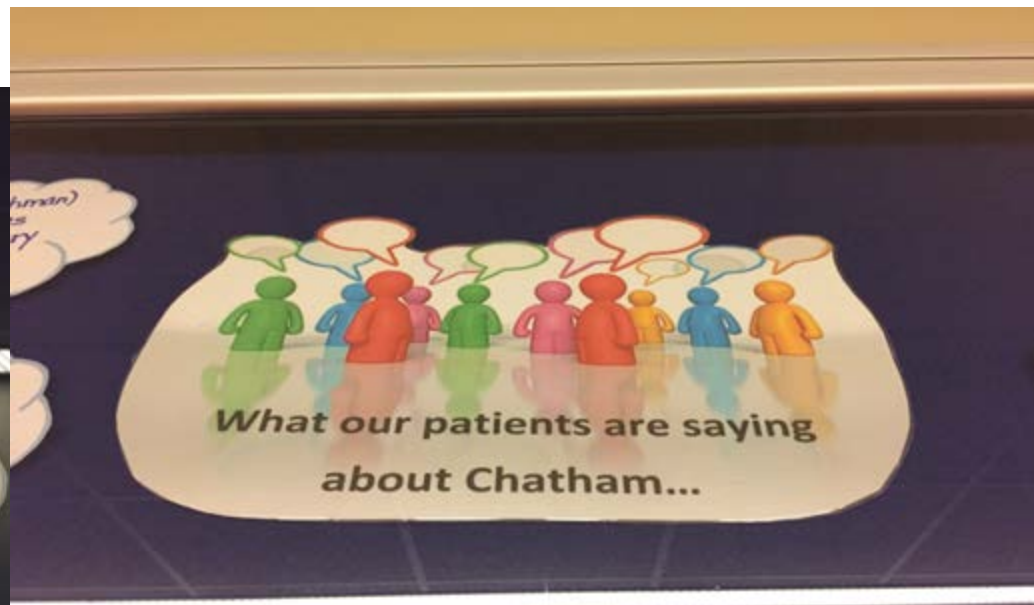
UNC Health Care affiliates ranked highly in first-ever Hospital Compare star ratings
Chatham Hospital is one of only three in North Carolina to receive five stars. Four other UNC Health Care affiliates received four stars.

According to *Becker's Hospital Review*, **3,499 hospitals** had an HCAHPS summary star rating as of April 28, 2017. Of those hospitals:

- 188 received five stars

Chatham Hospital is in these!
5-stars for 9 times! WOW!

...and four stars.



Dave (Dr. Fleischman) fixing my eyes has made me a very, very happy man.

(human)
is
very

The ultrasound lady was great! She took the time to explain what all was going on

Dr. Asher & Adrienne Burchette (Moody) were great

One of the best experiences I have had in healthcare services. Thank you Chatham Hospital!

Linda (ED) made me feel comfortable with situation

Everyone was very helpful & kind from nurses ~ cleaning people ~ kitchen

They work great together. Always concerned about you

Acknowledge
Introduce
Duration



UNC
HEALTH CARE

GREAT JOB!



Leigh Poe, CNA

2017

CNA/Tech of the YEAR!



Autumn Lewis

**WINNER OF
DAY OFF WITH PAY!**

2nd

QUARTER



Tara Hussey, RN

2017

NURSE of the YEAR!

One winner per quarter for day off with pay!!!!

There will be a drawing each quarter from positive comments on patient surveys recognizing our employees. The employee's name will be entered once per survey, but can be entered multiple times if mentioned on multiple surveys. Remember AIDET!

MOST IMPROVED

Score & Percentile Rank
Surgical Services

Highest Mean Rating
Let's keep it up!

★ **GO** ★
TEAM!



How our huddles have grown through our Lean work; and how they keep us on track with patient experience goals

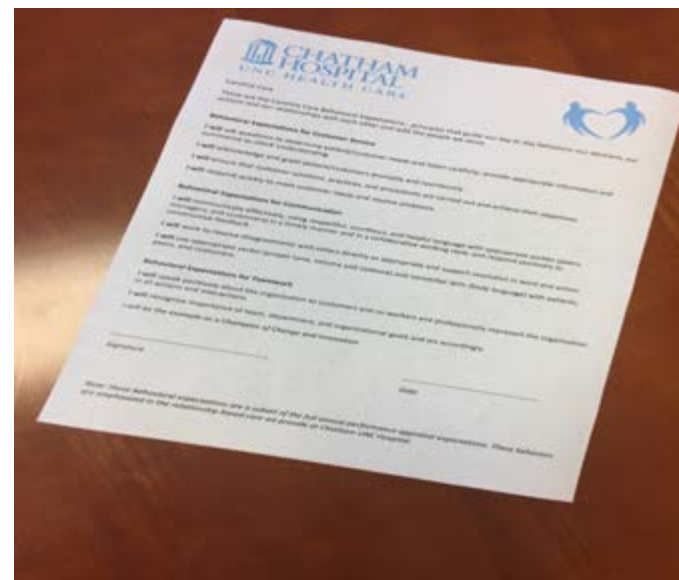


Carolina Care Culture

**All new hires go
through Carolina
Care Orientation**



**All new hires sign the
Carolina Care
Standards of
behavior**



Carolina Care Standards of Behavior

These are the Carolina Care Behavioral Expectations - principles that guide our day to day behaviors: our decisions, our actions and our relationships with each other and with the people we serve.

Behavioral Expectations for Customer Service

I will ask questions to determine patient/customer needs and listen carefully; provide appropriate information and summarize to check understanding.

I will acknowledge and greet patient/customers promptly and courteously.

I will ensure that customer solutions, practices, and procedures are carried out and achieve their objectives.

I will respond quickly to meet customer needs and resolve problems.



Behavioral Expectations for Communication

I will communicate effectively, using respectful, courteous, and helpful language with appropriate parties (peers, managers, and customers) in a timely manner and in a collaborative working style, and respond positively to constructive feedback.

I will work to resolve disagreements with others directly as appropriate and support resolution in word and action.

I will use appropriate verbal (proper tone, volume and cadence) and nonverbal skills (body language) with patients, peers, and customers.



Behavioral Expectations for Teamwork

I will speak positively about the organization to customers and co-workers and professionally represent the organization in all actions and interactions.

I will recognize importance of team, department, and organizational goals and act accordingly.

I will be the example as a Champion of Change and Innovation

Signature _____

Date _____

Note: these behavioral expectations are a subset of the full annual performance appraisal expectations. These behaviors are emphasized in the relationship based care we provide at Chatham UNC Hospital.



<u>2014</u>	<u>2014</u>	<u>2014</u>	<u>2014</u>	<u>2015</u> <u>5</u>	<u>2015</u> <u>5</u>	<u>2015</u> <u>5</u>	<u>2015</u> <u>5</u>	<u>2016</u> <u>5</u>	<u>2016</u> <u>5</u>	<u>2016</u> <u>5</u>	<u>2016</u> <u>5</u>	<u>2017</u> <u>5</u>
Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1
Jan - March	April - June	July - Sept	Oct - Nov	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Nov	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb
Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - March	April - June	July - Sept	Oct - Dec	Jan - Feb

We educated ourselves on the CMS Patient Experience Star Ratings

Technical Notes for HCAHPS Star Ratings:

1. HCAHPS Star Ratings are applied to 11 publicly reported HCAHPS measures
2. There is a 100 survey Minimum per 4 Qtrs for HCAHPS Star Ratings
3. The HCAHPS measures ratings are combined and converted to a 0 – 100 linear-scaled score
 1. Never = 0
 2. Sometimes = 33 1/3
 3. Usually = 66 2/3
 4. Always = 100
 5. Yes/No question , No = 0 and Yes = 100



Technical Notes for HCAHPS Star Ratings continued:

4. The Linear scores are then adjusted for patient mix

1. CMS applies patient mix adjustment (PMA) to scores to account for tendency of certain patient sub-groups to respond more positively or negatively. PMA allows for fair comparisons across hospitals.
2. The definition of the PMA factors can be found at www.hcahpsonline.org under the “*Mode and Patient-Mix Adj*” button (Education, Self-rated health, Age, Language, service line such as L& D)

5. HCAHPS Linear Scores are **adjusted for the mode of survey** (mail, telephone, mixed or Interactive Voice Response). The mode adjustments can be found in Appendix B www.hcahpsonline.org

6. Next the **4 Qtr averages of HCAHPS linear scores are weighted proportionately to the number of eligible patients seen by hospital each Qtr of reporting period**. Each Quarter’s score has a quarterly weight equal to that quarter’s eligible DC size divided by the total eligible DC size for the 4 Qtrs making up the reporting period.

HCAHPS Summary : Star Rating

- The average of all of the Star Ratings of the HCAHPS measures are constructed from the following components:
 - The 7 Star Ratings from each of the composite measures (Communication w Nurses, Communication w Doctors, Responsiveness of Hospital Staff, Pain Mgmt, Comm about meds, DC information, and Care Transition).
 - A Single Star Rating for the HCAHPS individual Items
 - The average of the Star Rating assigned to Cleanliness of Hospital Environment and Quietness of Hospital Environment.
 - A single Star Rating for the HCAHPS Global items
 - The average of the Star Ratings assigned to Overall Hospital Rating and Recommend the Hospital



	Oct 1 2013 – Sept 30th 2014 Benchmarking period reported July 2015
	Top Box
Rate hospital 0-10	75.6
Recommend the hospital	76.4
Cleanliness of hospital environment	90.6
Quietness of hospital environment	71.1
Comm w/ Nurses	85.6
Response of Hosp Staff	78.8
Comm w/ Doctors	86.4
Hospital Environment *	80.8
Pain Management	70.0
Discharge Information	85.3
Care Transitions	52.7
Comm About Medicines	66.7

Rate Hospital and Recommend are combined to equal one average score. Cleanliness and quietness are combined to equal one average score.

7 of these question values* are added to the two averages above and then this value is divided by 9 for the Final Summary Star Rating.

*Hospital Environment is not in the calculation for Star Rating

EXAMPLE	11 HCAHPS Measure Star Ratings	9 Star Ratings used in HCAHPS Summary Star Rating	9-Measure HCAHPS summary Star Rating Average	HCAHPS Summary Star Rating
HCAHPS Global Items			<div>(5+5+5+5+5+5+4+4+5+4) = 42 Divided by 9 = 4.66 Rounds up to 5</div>	<div>5</div> <div>★</div>
Hospital Rating	5	(5 + 5) / 2 = 5		
Would Recommend	5			
HCAHPS Individual Items				
Cleanliness	5	(5 + 5) / 2 = 5		
Quietness	5			
HCAHPS Composite Measures				
Communication with Nurses	5	5		
Comm with Drs	5	5		
Responsiveness	5	5		
Pain Management	4	4		
Comm about Meds	4	4		
DC Info	5	5		
Care Transition	4	4		





HCAHPS Oct 2013

Inpatient

Chatham Hospital

We implemented standard work around *The Patient Experience* starting in Jan of 2013, by Sept/Oct of 2013 we had hit a real + tipping point.

CAHPS	Aug '13	Sep '13	Oct '13	Nov '13
	Top Box	Top Box	Top Box	Top Box
Rate hospital 0-10	61.5 ▼	78.6 ▲	100 ▲	-
Recommend the hospital	61.5 ▼	78.6 ▲	100 ▲	-
Cleanliness of hospital environment	69.2 ▼	78.6 ▲	100 ▲	-
Quietness of hospital environment	76.9 ▲	46.2 ▼	100 ▲	-
Comm w/ Nurses	69.2 ▼	75.4 ▲	100 ▲	-
Response of Hosp Staff	65.2 ▼	57.0 ▼	100 ▲	-
Comm w/ Doctors	70.9 ▼	88.1 ▲	100 ▲	-
Hospital Environment	73.1 ▲	62.4 ▼	100 ▲	-
Pain Management	42.9 ▼	70.0 ▲	100 ▲	-
Comm About Medicines	64.6 ▼	60.0 ▼	100 ▲	-
Discharge Information	79.2 ▼	90.9 ▲	100 ▲	-

**Oct 1 2013 – Sept 30th 2014 Benchmarking period
reported July 2015**

**We have received 5 stars every quarter since the start of
the CMS publically reported Patient Exp Star ratings.**

Strengths:



HCAHPS 2013 - 2017

Inpatient

Chatham Hospital

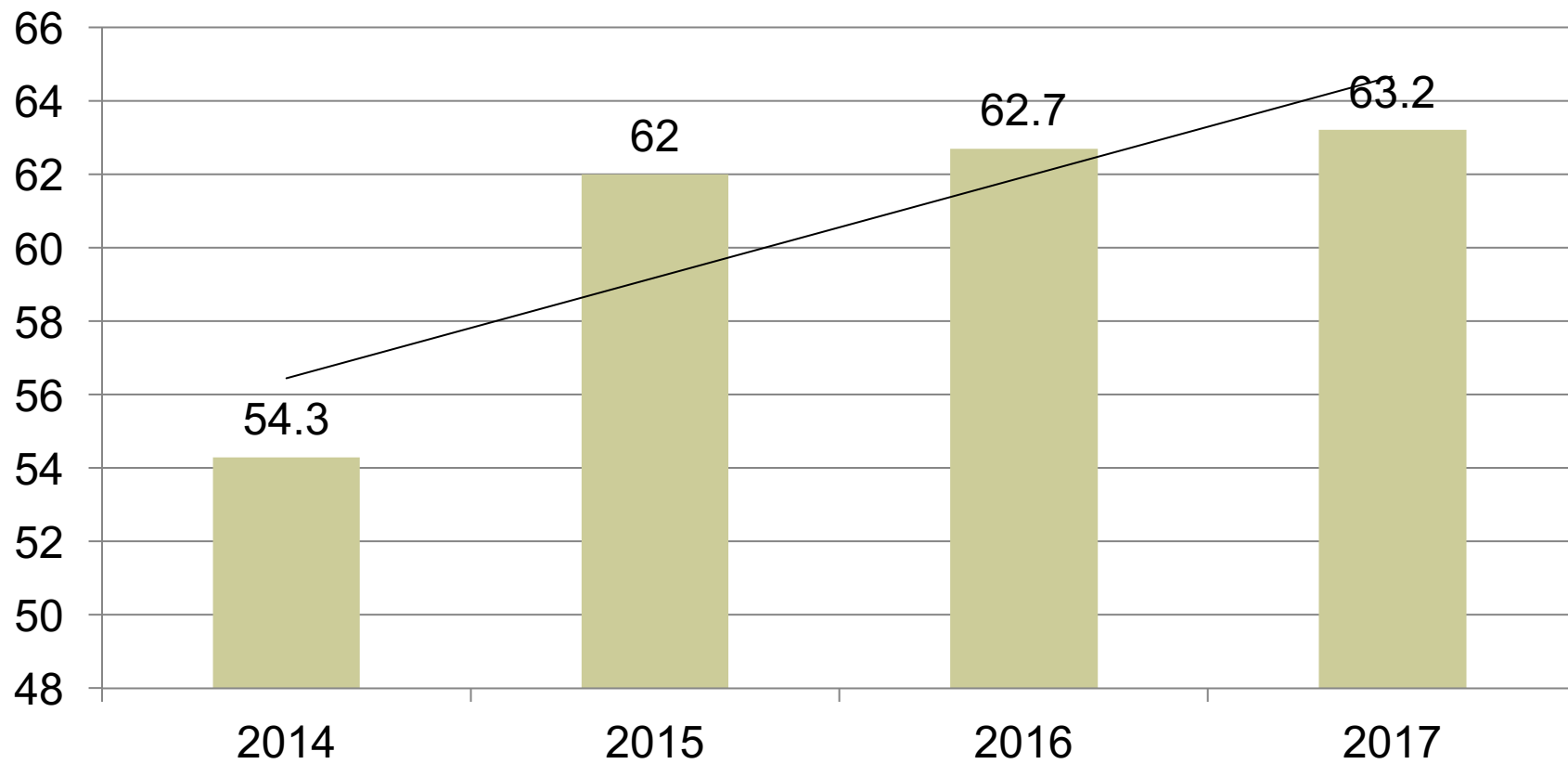
CAHPS	2013	2014	2015	2016	2017
	Top Box	Top Box	Top Box	Top Box	Top Box
Rate hospital 0-10	73.0	75.4	79.0	85.8	82.7
Recommend the hospital	76.1	77.3	80.7	84.2	80.8
Cleanliness of hospital environment	89.1	89.3	85.2	89.9	85.4
Quietness of hospital environment	70.0	71.2	71.4	77.3	72.0
Comm w/ Nurses	85.0	86.8	86.5	90.6	88.6
Response of Hosp Staff	66.0	80.0	80.9	76.9	77
Comm w/ Doctors	88.0	88.9	88.	87.9	87.8
Hospital Environment	80.2	80.2	78.3	83.6	78.7
Pain Management	73.0	73.0	72.5	74.7	72.4
Comm About Medicines	70.2	70.2	69.9	65.8	73.5
Discharge Information	85.5	85.5	89.0	91.0	95.1
Care Transitions	xx	54.3	62.0	62.7	63.2

Displayed by Discharge Date

Transition Together



Care Transitions HCAHPS Score



Care Transitions HCAHPS

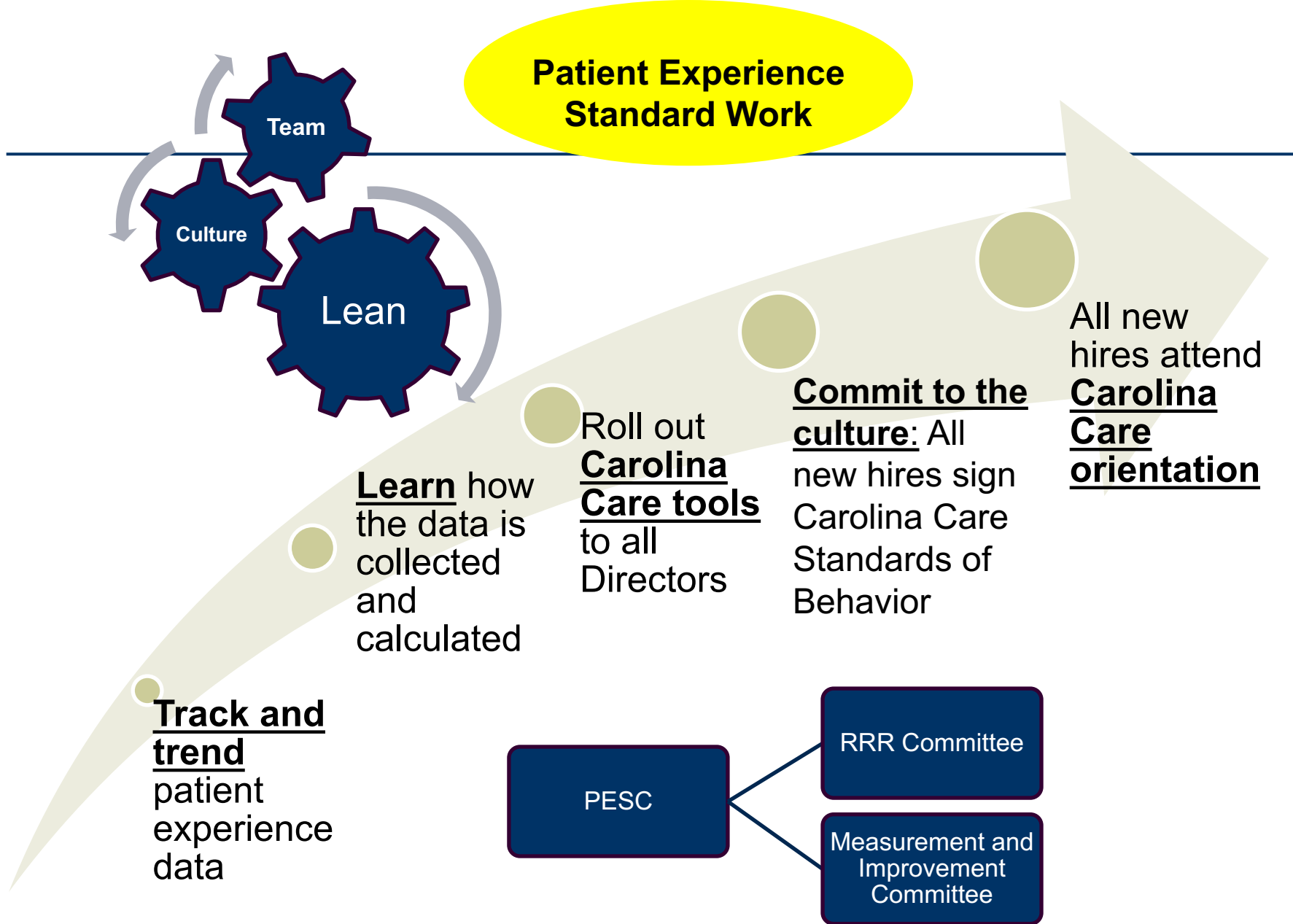
Domain Questions

1. The hospital staff took my preferences and those of my family or caregiver into account in deciding what my health care needs would be when I left the hospital.
2. When I left the hospital, I had a good understanding of the things I was responsible for in managing my health.
3. When I left the hospital, I clearly understood the purpose for taking each of my medications.

Lean approach to improve the process:

1. Care Management RIE
2. Interdisciplinary CAPP and Interim Care (Swing Bed) weekly rounds RIE's.





Next Steps for Chatham Hospital's Patient Experience Standard Work

- Carolina Care for the ED
- “Patients come second??!!”
campaign putting our employees first
- Standard work for service recovery
- Focus on “quietness” through a multidisciplinary team
- Continue work through our VMS

