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Agenda

- CMS Hospice final rule
- Hospice CAHPS call to action
  - Impact of time on reporting and improving
  - Hearing the voice of the families
- CAHPS Hospice Trends
  - One year+ of data
- Acting on the data
  - Assessing data and drilling down
  - Identifying and Planning
  - Organizing CAHPS improvement
- Summary
CMS Hospice Final Rule – FY 2017
The CAHPS® Hospice Survey
- first national hospice experience of care survey
- includes standard survey administration protocols that allow for fair comparisons across hospices.

CMS will publicly report hospice data when at least 12 months of data are available (April 2015 official start)

The goals of the CAHPS® Hospice Survey
- Produce **objective and meaningful comparisons** between hospices on domains that are important to consumers.
- **Create incentives** for hospices to improve their quality of care through public reporting of survey results
- **Hold hospice care providers accountable** by informing the public about the providers' quality of care
Public reporting of the Hospice Item Set (HIS) and CAHPS® Hospice Survey will begin in CY 2017.

The CAHPS Hospice Survey will be reported on an 8-quarter rolling average:
- initially fewer quarters will be reported as they ramp up

2% penalty for any hospice that does not comply with the quality data submission requirements.

Hospices with fewer than 50 survey-eligible decedents/caregivers (1/1/2016-12/31/2016) are exempt.

The Hospice Compare Web site will, in time, feature a quality rating system of between 1 and 5 stars.
Hospice CAHPS Call to Action
HHCAHPS Perspective

- CMS shares data for each domain on website
- HHCAHPS Star Ratings use 4 of the 5 domains in calculating the ratings
- All 5 domains are used in the 17 HHVBP measures
- 12 months of survey results are reported on Home Health Compare after a delay of 6 months
- CMS timetable for value-over-volume puts CAHPS Hospice on the fast track
### HHCAHPS Perspective

#### HHCAHPS Scores by Domain

National SHP scores in 6 month period increments

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Care of Patients</td>
<td>88.6%</td>
<td>88.7%</td>
<td>88.9%</td>
<td>88.9%</td>
<td>89.1%</td>
<td>89.1%</td>
<td>89.3%</td>
</tr>
<tr>
<td>Communications</td>
<td>85.6%</td>
<td>85.9%</td>
<td>86.0%</td>
<td>86.2%</td>
<td>86.3%</td>
<td>86.5%</td>
<td>86.7%</td>
</tr>
<tr>
<td>Specific Care Issues</td>
<td>85.0%</td>
<td>85.4%</td>
<td>85.5%</td>
<td>85.7%</td>
<td>85.5%</td>
<td>85.6%</td>
<td>86.1%</td>
</tr>
<tr>
<td>% who Rated Agency 9,10</td>
<td>82.7%</td>
<td>83.1%</td>
<td>83.2%</td>
<td>83.5%</td>
<td>83.8%</td>
<td>84.0%</td>
<td>84.3%</td>
</tr>
<tr>
<td>% who would Recommend</td>
<td>78.9%</td>
<td>79.1%</td>
<td>79.2%</td>
<td>79.5%</td>
<td>79.7%</td>
<td>79.5%</td>
<td>79.9%</td>
</tr>
</tbody>
</table>

|                      | Chg last 6 mths Chg last 6 mths Chg last 6 mths Chg last 6 mths Chg last 6 mths Chg last 6 mths |
|----------------------|-------------------------------------------------|-------------------------------------------------|-------------------------------------------------|-------------------------------------------------|-------------------------------------------------|-------------------------------------------------|
| Care of Patients     | 0.10%  | 0.20%  | 0.00%  | 0.20%  | 0.00%  | 0.20%  |
| Communications       | 0.30%  | 0.10%  | 0.20%  | 0.10%  | 0.20%  | 0.20%  |
| Specific Care Issues | 0.40%  | 0.10%  | 0.20%  | -0.20% | 0.10%  | 0.50%  |
| % who Rated Agency 9,10 | 0.40%    | 0.10%  | 0.30%  | 0.30%  | 0.20%  | 0.30%  |
| % who would Recommend | 0.20%  | 0.10%  | 0.30%  | 0.20%  | -0.20% | 0.40%  |
| **Average**          | **0.28%**| **0.12%**| **0.20%**| **0.12%**| **0.06%**| **0.32%**|
| **Average**          | **.16%** |
Opportunity

► Put it in context
► Understand this is perception
► Experience is not satisfaction

► It is public
► It is your families
Satisfaction

► Satisfaction is a measure of expectations being exceeded, met or not met

► Even when expectations are met, a chance for something better will motivate change

► Lacks emotionality; forgettable
Experience

► An experience is about the emotion

► Engage me as a person and connect

► Perceive you as a partner

► Do what you do so well that they will want to see it again and bring their friends. – Walt Disney
The Difference

► Experience and satisfaction are related but not the same

► Every patient has an experience but the experience does not always result in a satisfied patient

► Patient satisfaction cannot be improved without knowing patient’s expectations
Questions to Ask

► Which points of contact have the greatest impact on satisfaction?
► When did anyone last ask patients to define their expectations?
► Which points of contact affect most of your patients?
► Which points of contact are frequented most by your patients?
► What are the consequences of not knowing these answers?
Quality

► Seeking to do it better tomorrow is NOT a failure of today
CAHPS Hospice Trends
## SHP CAHPS Hospice Scores – Quarterly Trends

<table>
<thead>
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</thead>
<tbody>
<tr>
<td>1. Hospice Team Communication</td>
<td>80.6%</td>
<td>80.3%</td>
<td>80.2%</td>
<td>80.6%</td>
<td>80.3%</td>
<td>80.4%</td>
</tr>
<tr>
<td>2. Getting Timely Care</td>
<td>76.9%</td>
<td>76.7%</td>
<td>76.9%</td>
<td>76.9%</td>
<td>76.7%</td>
<td>76.8%</td>
</tr>
<tr>
<td>3. Treating Family Member with Respect</td>
<td>91.2%</td>
<td>91.2%</td>
<td>91.2%</td>
<td>91.5%</td>
<td>91.2%</td>
<td>91.3%</td>
</tr>
<tr>
<td>4. Providing Emotional Support</td>
<td>91.4%</td>
<td>91.3%</td>
<td>91.1%</td>
<td>91.5%</td>
<td>91.0%</td>
<td>91.2%</td>
</tr>
<tr>
<td>5. Getting Help for Symptoms</td>
<td>76.9%</td>
<td>76.7%</td>
<td>76.8%</td>
<td>76.6%</td>
<td>76.9%</td>
<td>76.8%</td>
</tr>
<tr>
<td>6. Getting Hospice Care Training</td>
<td>72.0%</td>
<td>71.7%</td>
<td>71.4%</td>
<td>71.8%</td>
<td>72.2%</td>
<td>71.8%</td>
</tr>
<tr>
<td>7. Support for Religious and Spiritual Beliefs</td>
<td>93.8%</td>
<td>93.6%</td>
<td>93.6%</td>
<td>94.1%</td>
<td>93.6%</td>
<td>93.8%</td>
</tr>
<tr>
<td>8. Information Continuity</td>
<td>88.0%</td>
<td>87.5%</td>
<td>87.4%</td>
<td>88.1%</td>
<td>87.5%</td>
<td>87.7%</td>
</tr>
<tr>
<td>9. Understanding the Side Effects of Pain Medication</td>
<td>74.8%</td>
<td>74.5%</td>
<td>74.1%</td>
<td>74.7%</td>
<td>74.7%</td>
<td>74.6%</td>
</tr>
<tr>
<td>10. Overall Rating of Hospice</td>
<td>84.3%</td>
<td>83.6%</td>
<td>84.3%</td>
<td>84.1%</td>
<td>84.3%</td>
<td>84.1%</td>
</tr>
<tr>
<td>11. Recommend Hospice</td>
<td>85.4%</td>
<td>85.0%</td>
<td>85.0%</td>
<td>84.9%</td>
<td>85.1%</td>
<td>85.1%</td>
</tr>
<tr>
<td><strong>Overall Composite</strong></td>
<td><strong>81.9%</strong></td>
<td><strong>82.1%</strong></td>
<td><strong>81.8%</strong></td>
<td><strong>81.8%</strong></td>
<td><strong>81.9%</strong></td>
<td><strong>81.9%</strong></td>
</tr>
</tbody>
</table>
SHP CAHPS Hospice Scores – Quarterly Trends

CAHPS Hospice

87.0%
85.0%
83.0%
81.0%
79.0%
77.0%
75.0%

April 2015 - June 2015: 84.3%
July 2015 - Sept 2015: 83.6%
Oct 2015 - Dec 2015: 84.3%
Jan 2016 - Mar 2016: 84.1%
Apr 2016 - June 2016: 84.3%

Overall Rating  Recommend Hospice  Overall Composite
Acting on the Data
1. **Assess the Data**

- What do you have?
- What does it mean?
- Do you care?
1. Assess the Data

► What do you have?
► What does it mean?
► Do you care?

<table>
<thead>
<tr>
<th>Top Box</th>
<th>You Actual</th>
<th>You 12M Trend</th>
<th>SHP Multistate</th>
<th>SHP National</th>
<th>You % Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Hospice Team Communication</td>
<td>79.8%</td>
<td>80.3%</td>
<td>80.4%</td>
<td>42%</td>
<td></td>
</tr>
<tr>
<td>2. Getting Timely Care</td>
<td>76.9%</td>
<td>76.8%</td>
<td>76.8%</td>
<td>47%</td>
<td></td>
</tr>
<tr>
<td>3. Treating Family Member with Respect</td>
<td>91.4%</td>
<td>91.2%</td>
<td>91.3%</td>
<td>48%</td>
<td></td>
</tr>
<tr>
<td>4. Providing Emotional Support</td>
<td>90.5%</td>
<td>91.3%</td>
<td>91.2%</td>
<td>40%</td>
<td></td>
</tr>
<tr>
<td>5. Getting Help for Symptoms</td>
<td>77.3%</td>
<td>76.8%</td>
<td>76.8%</td>
<td>52%</td>
<td></td>
</tr>
<tr>
<td>6. Getting Hospice Care Training</td>
<td>70.9%</td>
<td>71.6%</td>
<td>71.8%</td>
<td>44%</td>
<td></td>
</tr>
<tr>
<td>7. Support for Religious and Spiritual Beliefs</td>
<td>93.5%</td>
<td>93.7%</td>
<td>93.8%</td>
<td>41%</td>
<td></td>
</tr>
<tr>
<td>8. Information Continuity</td>
<td>88.2%</td>
<td>87.6%</td>
<td>87.7%</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>9. Understanding the Side Effects of Pain Medication</td>
<td>75.1%</td>
<td>74.5%</td>
<td>74.6%</td>
<td>51%</td>
<td></td>
</tr>
<tr>
<td>10. Overall Rating of Hospice</td>
<td>83.4%</td>
<td>84.1%</td>
<td>84.1%</td>
<td>46%</td>
<td></td>
</tr>
<tr>
<td>11. Recommend Hospice</td>
<td>84.3%</td>
<td>84.9%</td>
<td>85.1%</td>
<td>47%</td>
<td></td>
</tr>
</tbody>
</table>
2. Drill Down

- Can you work with the data in this form?
  - Usable
  - Understandable
  - Do you know where to start?
## Drill Down

- Getting Help for Symptoms (Top Box Score = 77.3%)

<table>
<thead>
<tr>
<th>Top Box</th>
<th>You Actual</th>
<th>You 12M Trend</th>
<th>SHP Multistate</th>
<th>SHP National</th>
<th>You % Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Getting Help for Symptoms</td>
<td>77.3%</td>
<td></td>
<td>76.8%</td>
<td>76.8%</td>
<td>52%</td>
</tr>
<tr>
<td>Measure Details</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Appropriate amount of help with pain was provided (% Yes, definitely)</td>
<td>85.0%</td>
<td></td>
<td>84.7%</td>
<td>84.6%</td>
<td>50%</td>
</tr>
<tr>
<td>22. Help provided for trouble breathing (% Always)</td>
<td>83.4%</td>
<td></td>
<td>82.6%</td>
<td>82.6%</td>
<td>52%</td>
</tr>
<tr>
<td>25. Help provided for trouble with constipation (% Always)</td>
<td>72.7%</td>
<td></td>
<td>72.3%</td>
<td>72.4%</td>
<td>48%</td>
</tr>
<tr>
<td>27. Help provided for feelings of anxiety or sadness (% Always)</td>
<td>65.0%</td>
<td></td>
<td>64.7%</td>
<td>64.7%</td>
<td>49%</td>
</tr>
</tbody>
</table>
2. Drill Down

Hospice Team Communication (Top Box Score = 79.5%)

<table>
<thead>
<tr>
<th>Top Box</th>
<th>You Actual</th>
<th>You 12M Trend</th>
<th>SHP Multistate</th>
<th>SHP National</th>
<th>You % Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Hospice Team Communication</td>
<td>79.5%</td>
<td></td>
<td>80.3%</td>
<td>80.4%</td>
<td>42%</td>
</tr>
<tr>
<td>Measure Details</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Family kept informed about when hospice team would arrive (%) Always</td>
<td>67.6%</td>
<td></td>
<td>70.8%</td>
<td>71.0%</td>
<td>38%</td>
</tr>
<tr>
<td>8. Things were explained in a way that was easy to understand (%) Always</td>
<td>85.0%</td>
<td></td>
<td>85.1%</td>
<td>85.2%</td>
<td>46%</td>
</tr>
<tr>
<td>9. Family kept informed about patient’s condition (%) Always</td>
<td>77.6%</td>
<td></td>
<td>78.0%</td>
<td>78.2%</td>
<td>45%</td>
</tr>
<tr>
<td>14. Hospice team listen carefully about any problems with care (%) Always</td>
<td>83.7%</td>
<td></td>
<td>83.7%</td>
<td>83.8%</td>
<td>44%</td>
</tr>
<tr>
<td>35. The hospice team listened carefully (%) Always</td>
<td>85.9%</td>
<td></td>
<td>85.6%</td>
<td>85.6%</td>
<td>50%</td>
</tr>
</tbody>
</table>
# 2. Drill Down

- Getting Hospice Care Training (Top Box Score = 70.9%)

<table>
<thead>
<tr>
<th>Top Box</th>
<th>You Actual</th>
<th>You 12M Trend</th>
<th>SHP Multistate</th>
<th>SHP National</th>
<th>You % Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6. Getting Hospice Care Training</strong></td>
<td>70.9%</td>
<td></td>
<td>71.6%</td>
<td>71.8%</td>
<td></td>
</tr>
<tr>
<td>Measure Details</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Training provided about pain medicine side effects (% Yes, definitely)</td>
<td>65.6%</td>
<td>65.7%</td>
<td>85.9%</td>
<td></td>
<td>46%</td>
</tr>
<tr>
<td>20. Training provided about if and when to give pain medicine (% Yes, definitely)</td>
<td>82.6%</td>
<td>82.2%</td>
<td>82.3%</td>
<td></td>
<td>49%</td>
</tr>
<tr>
<td>23. Training provided about how to help with trouble breathing (% Yes, definitely)</td>
<td>75.7%</td>
<td>76.4%</td>
<td>76.6%</td>
<td></td>
<td>45%</td>
</tr>
<tr>
<td>29. Training provided about patient restlessness or agitation (% Yes, definitely)</td>
<td>63.1%</td>
<td>64.9%</td>
<td>85.2%</td>
<td></td>
<td>40%</td>
</tr>
</tbody>
</table>
3. **Identify the focus**

- Which one can you impact?
- Which has most meaning?
- Are they related?
4. Make a Plan

► Start with what you know
► Drill down beyond the data
  - What do you want to know?
► Honesty is key
► Invest in the planning
► Stick to it
► Use your data to monitor
4. **Make a Plan**

► **PICK a process**
  - PDSA
  - Rapid Cycle
  - Lean
  - Six sigma
  - Other

► **Stick to it**

► **USE DATA**
Project Data

- Data to monitor your project
- Very short time intervals, watched over many periods
- Meaningful units, by team and by person
- Be Transparent!
- Understand “standard” curves
Quality = Reliability = Sustainability

► Commitment to quality is the real goal
► Specific data points and outcomes will change, the culture of adaptation is the critical part
  - Reliability is about patterns
  - Adopting culture
  - Behavior change
  - Structure you can articulate and follow
  - Process which is clear and known
  - Outcomes in usable data
Quality

- Seeking to do it better tomorrow is NOT a failure of today
Leader Rounding

- Based on Studer principles
- Overarching - strategy
- Evidence-based
- Get out of the office
- Role model
- Does the chart match the patient?
Leader Rounding

► Value added
  - Engages leaders with patients
  - Feeds clinical leaders passion
  - Connects team members
  - Direct observation
  - Patients feel valued
  - Chart review
  - Role model new behaviors
Resources

VNAA Blueprint for Excellence
PATHWAY TO BEST PRACTICES

5-Star Operational Best Practices

Home Health
- Care Initiation
- Clinical Conditions
- Patient Safety

Tools and Critical Interventions

References and Resources

Training Programs

Measurement and Evaluation

http://vnaablueprint.org/5-star-best-practices/5-star-best-practices-HH.html
Summary

► Final Rule Sets the stage for public reporting
► HHCAHPS was first – learn from them
► Take action now as today’s scores will be included in Hospice Compare next year
► Understand the Caregivers perspective & expectations
► Use your reporting tools and drilldown into data
► Identify your focus and make a plan
► Monitor closely and develop best practices
Questions and Answers
Thank you for attending!

Questions? Please Contact Us At: info@shpdata.com or call (805) 963-9446