



Is Your Survey Return Where You Want It ?

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Objectives:

1. Establish Benchmarks for Department/Service Lines
2. Discuss how your return rate impacts your results
3. Identify opportunities for Performance Improvement
4. Discuss Improvement Strategies
5. Hear success strategies from your Peers

On average, about 7,700 patients complete the HCAHPS Survey daily. The *March 2021 HCAHPS fact sheet update* states that 4,517 hospitals have reported their HCAHPS scores according to 2.8 million survey completions in October 2020.

However, the official implementation did not begin until October 2006, and the first publicly reports followed in March 2008.

Why are HCAHPS scores important?

Before HCAHPS, numerous providers collected data on patients' satisfaction. However, there was no national standard for collecting or openly sharing the patients' opinion of their care. HCAHPS scores have provided a means for meaningful comparisons between hospitals.

How do HCAHPS scores benefit patients?

HCAHPS surveys offer patients the opportunity to provide input on the care they experienced during an inpatient stay, from the bedside to discharge. These insights can help your hospital leaders better understand patient needs and address areas for improvement. As these survey results are publicly available on Care Compare, they can help patients make more informed decisions when choosing a hospital.

How do HCAHPS scores help various types of healthcare teams improve care delivery?

By obtaining feedback directly from patients on their experiences with many aspects of care delivery, HCAHPS provides hospital teams with valuable insights. Your teams can use this data to determine where environmental and care gaps exist and develop targeted improvement efforts.

HCAHPS surveys have become a core patient experience measurement for hospitals throughout the nation. It's crucial to understand your hospital's reporting requirements, how HCAHPS results are publicly reported, and who the reputable and experienced vendors are when implementing your HCAHPS surveys.

<https://info.pressganey.com/press-ganey-blog-healthcare-experience-insights/hcahps-surveys-mean-for-hospitals>

So, what does return rate
mean

To all of this????????????



Do you know your HCAHPS response rate?

- Each 1-percent-point increase in a hospital's HCAHPS response rate is expected to result in a 0.5-percentage point increase in the mean top-box score

- www.hqinstitute.org

PROCESS:

- Hospitals submit data post discharge to Survey Solutions
- This data timeframe is 48 hours to 42 days post discharge
- Survey solution receives data checks for completeness
- Surveys are sent weekly to patients
- If no response in 21 days another survey is sent

Survey Strategy to Improve Return Rate:

1. Timing Matters: Speed thing up.

Patients receiving surveys sooner after discharge are more likely to respond and give higher scores. Send your discharge list to Survey Solutions daily, if possible, weekly at the latest.

2. Sample Size Matters.

The larger the sample, the more reliable the information and the greater the power for analyzing results for improvement. It is best to survey all eligible discharges in small and medium sized hospitals.

3. Tell your Patients Their Opinion Matters

Go out of your way to convey to the patients your hospital is actively

Interested in receiving patient input on their stay and the quality of care. Patients should feel invited and empowered to share their opinions and perspectives throughout their stay.

Share with them improvements that have been made based on previous patient/family feedback

Inform patients that they may receive a survey after discharge, and that the hospital is eager to hear about their experience.

Communicating with Patients about the HCAHPS Survey

Acceptable:

- Let patients know they may be receiving a survey after discharge asking about their stay in the hospital
- Encourage patients to complete and return
- Explain how changes are made as a result of their input
- Thank them

Unacceptable:

- Ask any HCAHPS or HCAHPS-like questions of the patients prior to administration of the survey after discharge
- Attempt to influence or encourage patients to answer HCAHPS questions in a particular way.

Additional Strategies

- Leadership Rounding
- Posters
- Staff Engagement

Communication examples that comply:

- We are looking for ways to improve your stay. Please share your comments with us
- What can we do to improve your care?
- We want to hear from you, please share your experience with us.
- Please let us know if you have any questions about your treatment plan.
- Let us know if your room is not comfortable.

Communication examples that Do NOT comply:

- Our goal is to Always address your needs
- Let us know if we are not listening carefully to you
- In order to provide the best possible care, please tell us how we can always.....
- Our doctors and nurses always listen carefully to you.

Strategies for Introducing Survey:

- On Admission
- Rounding (Leadership, Nursing)
- Discharge
- Posters
- Bedside Shift Report

Establishing Benchmarks:

- Department/Service Line
- Current return rate
- Team discussion
- State/National Return Rate

Opportunities for Performance Improvement:

- Engage staff
- Leadership Driven
- Set goals

Open Discussion

References and Resources:

Centers for Medicare and Medicaid Services HCAHPS Quality Assurance Guidelines V 17.0

HCAHPS Fact Sheet April 2022 <https://hcahpsonline.org>

<http://www.hope.org/resources-and-tools/resources/HCAHPS%20effective%20use.pdf>

www.medicare.gov/care-compare

<https://data.cms.gov/provider-data/>

<https://www.hcahpsonline.org/en/hcahps-star-ratings/>

A pair of hands is shown from the palms up, holding a small white rectangular card. The card has the words "Thank You" written on it in a bold, black, sans-serif font. The background is a light-colored wooden surface with horizontal planks.

Thank You