

September 27, 2018

Spring 2018 In-Center CAHPS Patient Experience Survey Executive Summary

Summary

The Northwest Kidney Centers (NKC) hired DSS Research to administer the Spring 2018 In-Center Patient Experience CAHPS (Consumer Assessment of Healthcare Providers and Systems) survey required by the Centers for Medicare and Medicaid Services (CMS) since 2012.

The survey was administered from May 4, 2018 to July 3, 2018 using a paper survey mailed to patient homes and by phone. The paper survey is in English, Spanish, and Chinese. The phone survey is in English and Spanish. NKC received initial results on August 6, 2018 but full results were not available until September 20, 2018.

Response Rate

All patients 18 years or older with at least 3 months of experience on hemodialysis at their current facility were sampled. This survey did not include Home Hemodialysis or Peritoneal Dialysis patients. It also excludes nursing home residents or those known to be participating in Hospice. 995 NKC patients were mailed the survey with 917 being eligible. 275 patients completed surveys (30% of eligible patients). The average response rate of all DSS clients was 34.7%. See response rate data by unit:

Facility Name	Spring 2017 Response Rate	Fall 2017 Response Rate	Spring 2018 Response Rate	Spring 2018 (# of respondents)
Auburn	41%	42%	30%	27
Broadway	35%	30%	37%	17
Elliott Bay	31%	28%	21%	12
Enumclaw	36%	38%	36%	12
Kent	39%	34%	27%	19
Kirkland	50%	37%	33%	15
Lake City	31%	27%	33%	17
Lake WA	47%	46%	31%	11
Port Angeles	48%	36%	18%	5
Renton	39%	34%	31%	37
Scribner	44%	44%	35%	28
Seattle 2 nd and 3rd Floor	27%	24%	20%	15
SeaTac	32%	33%	36%	41
Snoqualmie Ridge	25%	64%	29%	4
West Seattle	46%	35%	26%	15
TOTAL	38%	35%	30%	275

Northwest Kidney Centers Overall Trended Results. The ICH-CAHPS survey produces the following six categories of measures of patient experience. Top Box refers to top responses in either individual questions or a group of questions.

	Category	NKC Spring 2017 % Top Box	NKC Fall 2017 % Top Box	NKC Spring 2018 % Top Box
Q8	Overall rating of kidney doctors (scale 0-10) – top box is 9-10	72.5%	77.5%	76.7%
Q35	Overall rating of dialysis center (scale 0-10) – top box is 9-10	73.5%	76.4%	74.2%
Q32	Overall rating of dialysis center staff (scale 0-10) – top box is 9-10	67.9%	68.8%	70.6%
Q 3, 4, 5, 6, 7, 9	Nephrologists' communication and caring (scale 1-4 or yes/no) – top box is always or yes	74.2%	76.9%	79.1%
Q 19, 28, 29, 30, 31, 36, 38, 39, 40	Providing information to patients (yes/no) – top box is yes	80.2%	82.8%	82.8%
Q 10, 11, 12, 13, 14, 15, 16, 17, 21, 22, 24, 25, 27, 28, 33, 34, 43	Quality of dialysis center care and operations (scale 1-4 or yes/no) – top box is always or yes	64.6%	66.5%	66.7%

ICH-CAHPS national benchmarks (compared to Fall 2017 and Spring 2018).

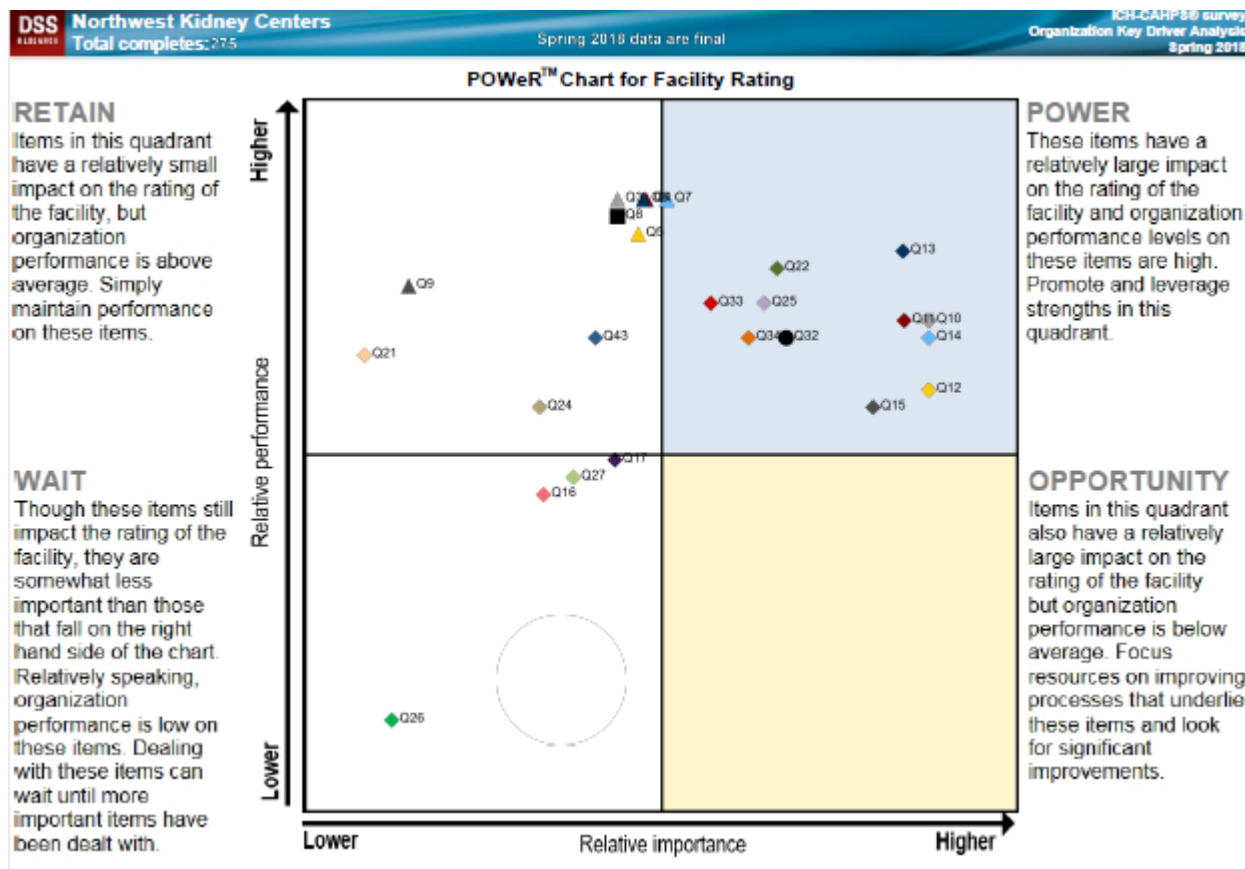
This is the percent of respondents who provided “top box” scores, e.g. 9 or 10 on 10 point scale, or “always”, or “yes.”

	<u>QIP 2017 PERFORMANCE YEAR</u>			NKC Fall 2017	NKC Spring 2018
	15 th	Percentile 50 th	90 th		
Overall rating of kidney doctor	49%	62%	77%	78%	77%
Overall rating of dialysis center	52%	67%	83%	76%	74%
Overall rating of dialysis staff	49%	62%	77%	69%	71%
Nephrologist communication and caring	57%	67%	78%	77%	79%
Providing information to Patients	73%	80%	87%	83%	83%
Quality of Dialysis Care and Operations	53%	61%	72%	67%	67%

Overall Impression:

- NKC had a 30% response rate from eligible patients, as compared to DSS book of business at 35%.
- Compared to Fall 2017, Spring 2018 NKC trended Top Box results show:
 - Improvements in 2 measures
 - No change in 2 measures
 - Slight decrease in 2 measures

NKC Spring 2018 PowerChart Results



Power - high importance, high performance. These questions have a relatively large impact on the overall rating and NKC’s performance on these questions is high.

13 Questions identified as “Power”

- Q10. Dialysis Center: Listened carefully
- Q12. Dialysis Center: Showed respect
- Q14. Dialysis Center: Felt that staff really cared
- Q11. Dialysis Center: Explained things in a way that was easy to understand
- Q13. Dialysis Center: Spent enough time
- Q15. Dialysis Center: Made patients as comfortable as possible during dialysis
- Q32. Staff Rating
- Q22. Dialysis Center: Checked patients on the dialysis machine as closely as wanted
- Q25. Dialysis Center: Behaved in a professional manner

- Q34. Dialysis Center: Dialysis center as clean as it could be
- Q33. Dialysis Center: Put on dialysis machine within 15 minutes of appointment
- Q7. Nephrologist: Felt that doctor really cared
- Q4. Nephrologist: Explained things in a way that was easy to understand

Opportunities - high importance, lower performance. These questions have a relatively large impact on overall ratings, but NKC's performance is below average.

0 Questions identified as "Opportunities"

Wait – lesser importance, lower performance. These questions have a lesser impact on overall rating. However, NKC's performance is low on these items. Dealing with these items can wait until more important items have been addressed.

4 Questions identified as "Wait"

- Q26. Dialysis Center: Talked about eating and drinking
- Q17. Dialysis Center: Comfortable asking everything about dialysis care
- Q27. Dialysis Center: Explained blood test results in a way that was easy to understand
- Q16. Dialysis Center: Information kept as private as possible from other patients

Retain – lesser importance, high performance. These questions have a lesser impact on overall rating, but NKC's performance is above average. Maintain performance on these items.

8 Questions identified as "Retain"

- Q6. Nephrologist: Spent enough time
- Q5. Nephrologist: Showed respect
- Q8. Doctor Rating
- Q3. Nephrologist: Listened carefully
- Q43. Dialysis Center: Satisfied with the way staff handled problems
- Q24. Dialysis Center: Managed problems during dialysis
- Q9. Nephrologist: Informed and up to date about care from other doctors
- Q21. Dialysis Center: Inserted needles with as little pain as possible

Organization action plans and Spring 2018 results

The Operations Committee reviewed the ICH CAHPS results on 9/24/18.

How are we doing compared to Spring 2017 Opportunities?

The Spring 2017 identified Opportunities for three of our largest units which influences our system-wide scores:

- Q10 – Staff listen carefully to you
- Q11 – Staff explain things in a way that was easy to understand
- Q12 – Staff show respect for what you had to say
- Q13 - Staff spend enough time with you

For the organization as a whole as reflected in the Fall 2017 survey results, all of these questions moved into Power. For the Spring 2018 survey results, all of these remained in Power.

- The systemwide Opportunity from the Spring 2017 survey was Q25 – Staff behave in a professional manner. This moved also into Power in the Fall 2017 survey, and remained in Power in the Spring 2018 survey. We continue to support staff professionalism through maintaining NKC’s relationship with Navos, which provides behavioral health training and support for staff.

How are we doing compared to Fall 2017 Opportunities?

The sole Opportunity identified from the Fall 2017 survey was Q34 – Dialysis center as clean as it could be. Units with Q34 defined as an Opportunity: Auburn, Kent, West Seattle.

This question moved into Power in Spring 2018 for the organization as a whole. It was noted as an Opportunity for Kirkland Kidney Center. Note that NKC changed janitorial service provider in the Spring/Summer 2017 timeframe.

Spring 2018 results

The NKC organizational PowerChart identified no system-wide opportunities.

Unit Action plans and Spring 2018 Results

In-Center units will review their results and PowerChart in their October 2018 QA/PI meeting.

QA/PI Action Items:

- Record the following information in unit QA/PI minutes:
 - The response rate (see page 1)
 - The “top box” results for past three surveys for “Overall Rating of the Dialysis Center” (see Addendum A on page 6).
- Celebrate Power questions and review Opportunities on PowerChart
- Review Comments
- See Addendum B (see pages 7-9) for assignments of Unit Specific Action Plans
 - Close Action Plans where improvements achieved.
 - Revise or Continue Action Plans where opportunities still exist.
 - Develop new Action Plans for the one opportunity identified by Operations Committee.
 - Units with low response rates are asked to develop an Action Plan to increase patient participation; this is especially important for ESCO units.

FUTURE SURVEYS

Fall 2018 Survey schedule (In-Center):

- Federal Way East patients will begin receiving surveys starting with next round
- Pre-notification Letter – 10/19/18
- In-Center Questionnaire Mailed – 11/2/18
- In-Center Phone Survey Begins – 11/30/18
- Data Collection Ends – 1/11/19

2018 Home Survey schedule (new format this year):

- Home Survey Questionnaire Mailed – 11/2/18
- Home Phone Survey Begins – 11/30/18
- Data Collection Ends – 1/11/19

Addendum A

Annual Top Box Results to put in QA/PI Minutes

Q35 - Overall rating of dialysis center (scale 0-10) – top box is 9-10.

	Spring 2017	Fall 2017	Spring 2018
NKC Overall	73.5%	76.4%	74.2%
Auburn	68.6%	79.4%	84.6%
Broadway	73.7%	88.2%	88.2%
Elliott Bay	68.8%	80.0%	81.8%
Enumclaw	90.0%	92.3%	100%
Kent	70.4%	70.0%	73.7%
Kirkland	78.3%	75.0%	66.7%
Lake City	73.3%	75.0%	76.5%
Lake Washington	73.3%	57.1%	72.7%
Port Angeles	75.0%	N/A	N/A
Renton	74.5%	77.3%	62.2%
Scribner	75.0%	78.9%	74.1%
SeaTac	75.7%	70.3%	70.0%
Seattle 2 and 3	72.2%	66.7%	66.7%
Snoqualmie Ridge	100%	N/A	N/A
West Seattle	63.6%	66.7%	66.7%

N/A = 10 or less responses

Addendum B (Spring 2018)

Unit Specific Action Plan to be Developed by QA/PI Team

Auburn

Q 13 – Dialysis center staff spent enough time with you. Identified as Power in Fall 2017 and Spring 2018 – close Action Plan.

Fall 2017 Opportunity was Q34 – Dialysis center as clean as it could be – Moved into Power in Spring 2018, sustain the gain.

No Opportunity identified for Spring 2018 survey.

Broadway

Fall 2017 Opportunity Q05 – Physicians show respect for what you had to say – Moved into “Retain” – sustain the gain.

Spring 2018 Opportunity Q12 – Staff show respect for what you had to say – Develop Action Plan.

Patient survey response rate increased to 37% in Spring 2018, compared to 30% in Fall 2017. Sustain the gain.

Elliott Bay

No PowerChart for Spring 2018 survey, due to low response rate.

Fall 2017 Opportunity was Q14 – Feel that staff really cared about you as a person – continue Action Plan.

Patient survey response rate low –Revise Action Plan to improve response rate.

Enumclaw

No PowerChart for Spring 2018 survey, due to low response rate.

Patient survey response rate low –Revise Action Plan to improve response rate.

Kent

Q11 – Staff explain things in a way that was easy to understand – Identified as Power in Fall 2017 and Spring 2018 – close Action Plan.

Fall2017 Opportunity was Q34 – Dialysis center as clean as it could be – Moved into Power in Spring 2018, sustain the gain.

Spring 2018 Opportunity Q12 – Staff show respect for what you had to say – Develop Action Plan.

Kirkland

Fall 2017 Opportunity Q12 – Staff show respect for what you had to say –Moved into Power in Spring 2018, sustain the gain.

Spring 2018 Opportunity Q34 – Dialysis center as clean as it could be – develop Action Plan.

Patient survey response rate low –Revise Action Plan to improve response rate.

Lake City

No Spring 2018 Opportunities identified.

Spring 2018 response rate improved – sustain the gain.

Lake Washington

No Power Chart for Spring 2018 survey, due to low survey response rate.

Spring 2017 Opportunity Q11 - Staff explain things in a way that was easy to understand –identified as Power in Fall 2017 – sustain the gain.

Fall 2017 Opportunity Q22 –Staff check you as closely as you wanted on dialysis machine – continue Action plan.

Patient survey response rate low –Develop Action Plan to improve response rate.

Port Angeles

No Power Chart for Spring 2018 survey, due to low survey response rate.

Patient survey response rate low –Revise Action Plan to improve response rate.

Renton

Spring 2017 Opportunity Q12 - Staff show respect for what you had to say – Identified as Power in Fall 2017 and Spring 2018 – close Action Plan.

Fall 2017 Opportunity Q15 – Staff make you as comfortable as possible on dialysis – Now identified as Power, sustain the gain.

No Spring 2018 Opportunities identified

Scribner

Spring 2017 Opportunity Q12 – Staff show respect for what you had to say – Identified as Power in Fall 2017 and Spring 2018 – close Action Plan.

Fall 2017 Opportunity Q14 –Feel that staff really cared about you as a person– Identified as Power, sustain the gain.

Spring 2018 Opportunity Q15 – Made patients as comfortable as possible – Develop Action Plan.

SeaTac

Spring 2017 Opportunity Q15 - Staff make you as comfortable as possible during dialysis. Fall 2017 and Spring 2018 identified as Opportunity –revise Action Plan.

Seattle 2 & 3

Spring 2017 Opportunity Q12 - Staff show respect for what you had to say. Still on PowerChart as an Opportunity for Fall 2017, but moved into Power in Spring 2018 – sustain the gain.

Spring 2018 Q15 – Made patients as comfortable as possible during dialysis – develop Action Plan.

Patient survey response rate low –Revise Action Plan to improve response rate.

Snoqualmie Ridge

No PowerChart for Spring 2018 survey, due to low survey response rate.

Develop Action plan to improve response rate.

West Seattle

Spring 2017 Opportunity Q14 – Staff really cared about you as a person- Identified as Power in Fall 2017 and Spring 2018, close Action Plan.

Fall 2017 Opportunity Q34 – Dialysis center as clean as it could be – Moved into Power in Spring 2018, sustain the gain.

Develop Action Plan to improve response rate.