

September 24, 2019

Spring 2019 In-Center CAHPS Patient Experience Survey Executive Summary

Summary

The Northwest Kidney Centers (NKC) hired DSS Research to administer the Spring 2019 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 3, 2019 to July 12, 2019 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. Powercharts (Key Driver Analysis reports) were fully available on August 14, 2019.

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. 1214 NKC patients were included in the sample, with 1008 being eligible. 286 patients completed surveys, 193 by mail and 93 by phone. The NKC response rate was 28.4%; the response rate was 31% for all DSS surveyed facilities.

See response rate data by unit:

Facility Name	Spring 2018 Response Rate	Fall 2018 Response Rate	Spring 2019 Response Rate	Spring 2019 (# of respondents)
Auburn	30%	41%	22%	12
Broadway	37%	32%	19%	10
Elliott Bay	21%	28%	28%	20
Enumclaw	36%	38%	39%	14
Federal Way East	-	41%	25%	14
Kent	27%	24%	18%	13
Kirkland	33%	40%	32%	17
Lake City	33%	38%	32%	17
Lake WA	31%	46%	46%	20
Port Angeles	18%	33%	40%	10
Renton	31%	28%	39%	50
Scribner	35%	35%	27%	24
Seattle 2 nd and 3rd Floor	20%	16%	18%	13
SeaTac	36%	32%	25%	30
Snoqualmie Ridge	29%	50%	40%	6
West Seattle	26%	33%	24%	16
TOTAL	30%	32%	28%	286

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 2018 % Top Box	NKC Fall 2018 % Top Box	NKC Spring 2019 % Top Box
Q8	Overall rating of kidney doctors (scale 0-10) – top box is 9-10	76.7%	78.2%	78.8%
Q35	Overall rating of dialysis center (scale 0-10) – top box is 9-10	74.2%	76.5%	73.6%
Q32	Overall rating of dialysis center staff (scale 0-10) – top box is 9-10	70.6%	68.6%	69.3%
Q 3, 4, 5, 6, 7, 9	Nephrologists' communication and caring (scale 1-4 or yes/no) – top box is always or yes	79.1%	79.8%	80.5%
Q 19, 28, 29, 30, 31, 36, 38, 39, 40	Providing information to patients (yes/no) – top box is yes	82.8%	82.3%	82.4%
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	66.7%	65.9%	66.5%

Overall Impression:

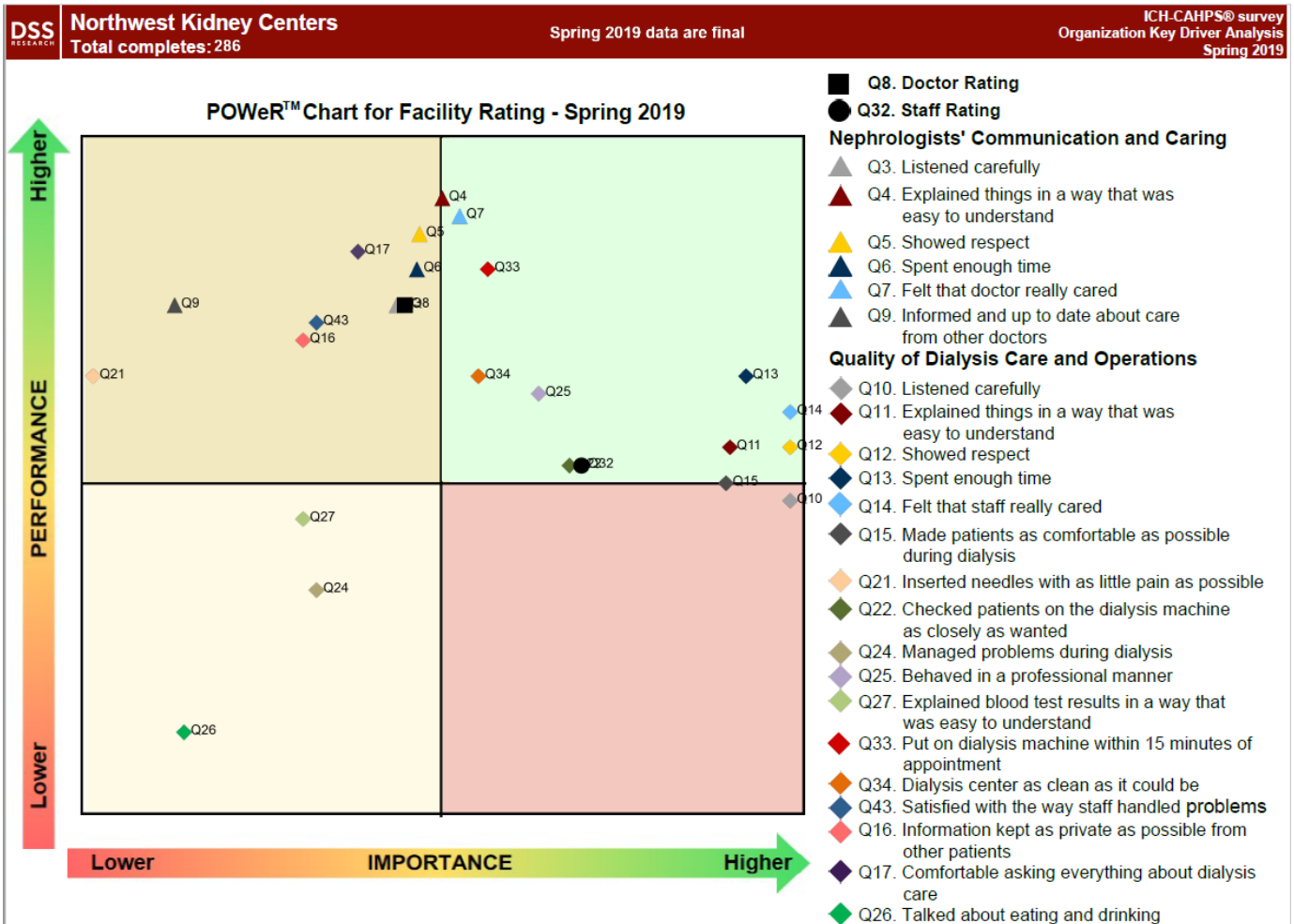
- NKC had a 28% response rate from eligible patients, as compared to DSS book of business at 31%.
- Compared to Fall 2018, Spring NKC trended Top Box results show:
 - Slight improvement in 4 measures
 - No change in 1 measure
 - Slight decline in 1 measure

NKC compared to ICH-CAHPS national benchmarks

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

	NKC combined Spring & Fall 2018	CMS National Norm 2018	Spring 2019
Overall rating of kidney doctor	77.5%	60%	78.8%
Overall rating of dialysis center	75.4%	68%	73.6%
Overall rating of dialysis staff	69.6%	63%	69.3%
Nephrologist communication and caring	79.5%	67%	80.5%
Providing information to Patients	82.5%	80%	82.4%
Quality of Dialysis Care and Operations	66.2%	62%	66.5%

NKC Spring 2019 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.

Questions identified as "Power"

- Q14. Dialysis Center: Felt that staff really cared
- Q12. Dialysis Center: Showed respect
- Q13. Dialysis Center: Spent enough time
- Q11. Dialysis Center: Explained things in a way that was easy to understand
- Q32. Staff Rating
- Q22. Dialysis Center: Checked patients on the dialysis machine as closely as wanted
- Q25. Dialysis Center: Behaved in a professional manner
- Q33. Dialysis Center: Put on dialysis machine within 15 minutes of appointment
- Q34. Dialysis Center: Dialysis center as clean as it could be
- 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.

Questions identified as "Opportunities"

Q10. Dialysis Center: Listened carefully

Q15. Dialysis Center: Made patients as comfortable as possible during dialysis

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.

Questions identified as "Wait"

Q26. Dialysis Center: Talked about eating and drinking

Q24. Dialysis Center: Managed problems during dialysis

Q27. Dialysis Center: Explained blood test results in a way that was easy to understand

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.

Questions identified as "Retain"

Q5. Nephrologist: Showed respect

Q6. Nephrologist: Spent enough time

Q8. Doctor Rating

Q3. Nephrologist: Listened carefully

Q17. Dialysis Center: Comfortable asking everything about dialysis care

Q43. Dialysis Center: Satisfied with the way staff handled problems

Q16. Dialysis Center: Information kept as private as possible from other patients

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 2019 results

The Operations Committee reviewed the ICH CAHPS results on 9/23/19.

The Spring 2019 PowerChart identified two opportunities:

- Q10 - In the last 3 months, how often did the dialysis center staff listen carefully to you?
- Q15- In the last 3 months, how often did dialysis center staff make you as comfortable as possible during dialysis?

The organization wide action plan will be to:

- Increase patient participation in ICH CAHPS surveys
- Improve staff's skills regarding listening carefully to patients and strengthen use of these skills.

Unit Action Plans and Spring 2019 Results

In-Center units will review their results and PowerChart in their November 2019 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).
- Celebrate Power questions and review Opportunities on PowerChart
- Review Comments
- See Addendum B 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

Our survey vendor DSS has been acquired by SPH Analytics. All future surveys, letters and envelopes sent to patients will show this logo:



Fall 2019 Survey schedule (In-Center):

- Pre-notification Letter -10/18/19
- In-Center Questionnaire Mailed - 11/1/19
- In-Center Phone Survey Begins - 11/29/19
- Data Collection Ends - 1/10/20

Federal Way West and Fife will not be included in Fall 2019 survey – patient census is too low (Need 15 responses to generate a PowerChart)

Annual 2019 Survey schedule (Home patients):

- Questionnaire Mailed - 10/7/19
- Phone Survey Begins- 11/4/19
- Data Collection Ends -12/16/19

Note: Home survey starts a month earlier than Fall 2019 ICH CAHPS

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 2018	Fall 2018	Spring 2019
NKC Overall	74.2%	76.5%	73.6%
Auburn	84.6%	78.9%	72.7%
Broadway	88.2%	77.8%	N/A
Elliott Bay	81.8%	68.4%	75.0%
Enumclaw	100%	90.9%	78.6%
Federal Way East	---	76.5%	71.4%
Kent	73.7%	71.4%	69.2%
Kirkland	66.7%	66.7%	81.3%
Lake City	76.5%	77.3%	82.4%
Lake Washington	72.7%	84.6%	73.7%
Port Angeles	N/A	N/A	N/A
Renton	62.2%	78.8%	66.7%
Scribner	74.1%	80.0%	79.2%
SeaTac	70.0%	71.8%	60.0%
Seattle 2 and 3	66.7%	75.0%	75.0%
Snoqualmie Ridge	N/A	N/A	N/A
West Seattle	66.7%	72.2%	75.0%

N/A = 10 or less responses

Addendum B (Spring 2019)

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

Action Plans are based on each unit's PowerChart. Units must have 15 or more responses for a Power Chart to be generated.

Auburn

Fall 2018 Opportunity: Q10 Staff listen carefully to what you have to say– develop Action Plan.

Spring 2019 – No PowerChart generated, due to low number of responses. Develop Action plan to increase patient participation in ICH CAHPS. Revise Action plan to improve staff listening skills during communication with patients.

Broadway

Spring 2019- No PowerChart generated, due to low number of responses. Develop Action plan to increase patient participation in ICH CAHPS.

Elliott Bay

Spring 2019 - Patient survey response rate stable at 28% in the 2 surveys since Spring 2018 – continue your good work. Spring 2019 Opportunity is Q12 Staff show respect for what you had to say – revise Action plan.

Enumclaw

Spring 2019- No PowerChart generated, due to low number of responses.

Number of survey respondents is improving (response rate is high.) Continue Action plan to increase patient participation in ICH CAHPS.

Federal Way East

First time participating in ICH CAHPS was Fall 2018.

Spring 2019- No PowerChart generated, due to low number of responses. Continue Action plan to increase patient participation in ICH CAHPS.

Kent

Spring 2019- No PowerChart generated, due to low number of responses. Develop Action plan to increase patient participation in ICH CAHPS.

Kirkland

Fall 2018 Opportunity was Q25 - Staff behave in a professional manner. Moved into Power in Spring 2019 – sustain the gain.

Spring 2019 – No Opportunities identified.

Lake City

Spring 2019 - No Opportunities identified.

Lake Washington

Fall 2018 Opportunity was Q32 – Overall Staff rating - Develop Action Plan.

Spring 2019 Opportunities are:

- Q22 – Staff check you as closely as you wanted on dialysis machine.
- Q32 – Overall Staff rating

Develop Action plan for Q22

Port Angeles

No Power Chart for Spring 2019 survey, due to low number of survey responses.

Revise Action plan to increase patient participation in ICH CAHPS.

Renton

Spring 2017 Opportunity Q12 - Staff show respect for what you had to say – Identified as Power in Fall 2017 and Spring 2018. However back into Opportunity in Fall 2018 – revise Action Plan. Spring 2019- now showing as Power –sustain the gain.

Spring 2019 Powerchart shows multiple Opportunities. Please develop an Action Plan for Q11 – Staff explain things in a way that was easy for you to understand.

Scribner

Spring 2018 Opportunity Q15 – Made patients as comfortable as possible. Remained an Opportunity in Fall 2018. Spring 2019 Q15 is now Power – sustain the gain.

Spring 2019 Opportunity Q34 – Dialysis center as clean as it should be. Develop Action Plan.

SeaTac

Fall 2018 greatest Opportunity was Q14 Feel that staff really cared about you as a person.

Spring 2019 Powerchart shows multiple Opportunities. Q14 performance is improved, but still listed as Opportunity. Please develop an Action Plan for Q12 Staff show respect for what you had to say.

Seattle 2 & 3

Spring 2019- No PowerChart generated, due to low number of responses. Revise Action plan to increase patient participation in ICH CAHPS.

Snoqualmie Ridge

No Power Chart for Spring 2019 survey, due to low number of survey responses.

Revise Action plan to increase patient participation in ICH CAHPS.

West Seattle

Fall 2018 Opportunity was Q10 Staff listen carefully to you. Spring 2019 – moved into Power, sustain the gain.

Develop Action plan for Q11 Dialysis center staff explain things in a way that was easy for you to understand.