

October 6, 2020

Spring 2020 In-Center CAHPS Patient Experience Survey Executive Summary

Summary

The Northwest Kidney Centers (NKC) hired DSS to administer the Spring 2020 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 18, 2020 to July 10, 2020, 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.

Our survey vendor's name is SPH Analytics (formerly DSS). Key Driver Analysis Reports (previously known as PowerCharts) were fully available on August 21, 2020.

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. The survey sample included only patients who had dialysis at their unit between October 1, 2019 and December 31, 2019. 1,236 NKC patients were included in the sample, with 997 being eligible. 344 patients completed surveys, 164 by mail and 180 by phone. The NKC response rate was 35%; the response rate was 38% for all SPH surveyed facilities.

See response rate data by unit:

Facility Name	Fall 2018 Response Rate	Spring 2019 Response Rate	Fall 2019 Response Rate	Spring 2020 Response Rate	Spring 2020 (# of respondents)
Auburn	41%	22%	37%	29%	14
Bellevue	46%	46%	41%	46%	17
Broadway	32%	19%	29%	36%	21
Burien	33%	24%	20%	29%	20
Elliott Bay	28%	28%	25%	37%	22
Enumclaw	38%	39%	35%	59%	19
Federal Way East	41%	25%	26%	32%	18
Kent	24%	18%	19%	30%	26
Kirkland	40%	32%	31%	31%	18
Lake City	38%	32%	31%	35%	21
Port Angeles	33%	40%	41%	40%	10
Renton	28%	39%	30%	31%	40
Scribner	35%	27%	33%	42%	30
Seattle 2 nd and 3rd Floor	16%	18%	25%	32%	41

SeaTac	32%	25%	25%	35%	18
Snoqualmie Ridge	50%	40%	44%	43%	9
TOTAL	32%	28%	29%	35%	344

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 2019 % Top Box	NKC Fall 2019 % Top Box	NKC Spring 2020 % Top Box
Q8	Overall rating of kidney doctors (scale 0-10) – top box is 9-10	78.8%	77.0%	81.5%
Q35	Overall rating of dialysis center (scale 0-10) – top box is 9-10	73.6%	78.2%	78.9%
Q32	Overall rating of dialysis center staff (scale 0-10) – top box is 9-10	69.3%	70.7%	73.9%
Q 3, 4, 5, 6, 7, 9	Nephrologists' communication and caring (scale 1-4 or yes/no) – top box is always or yes	80.5%	78.0%	79.3%
Q 19, 28, 29, 30, 31, 36, 38, 39, 40	Providing information to patients (yes/no) – top box is yes	82.4%	83.6%	80.7%
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	66.5%	67.7%	66.7%

Overall Impression:

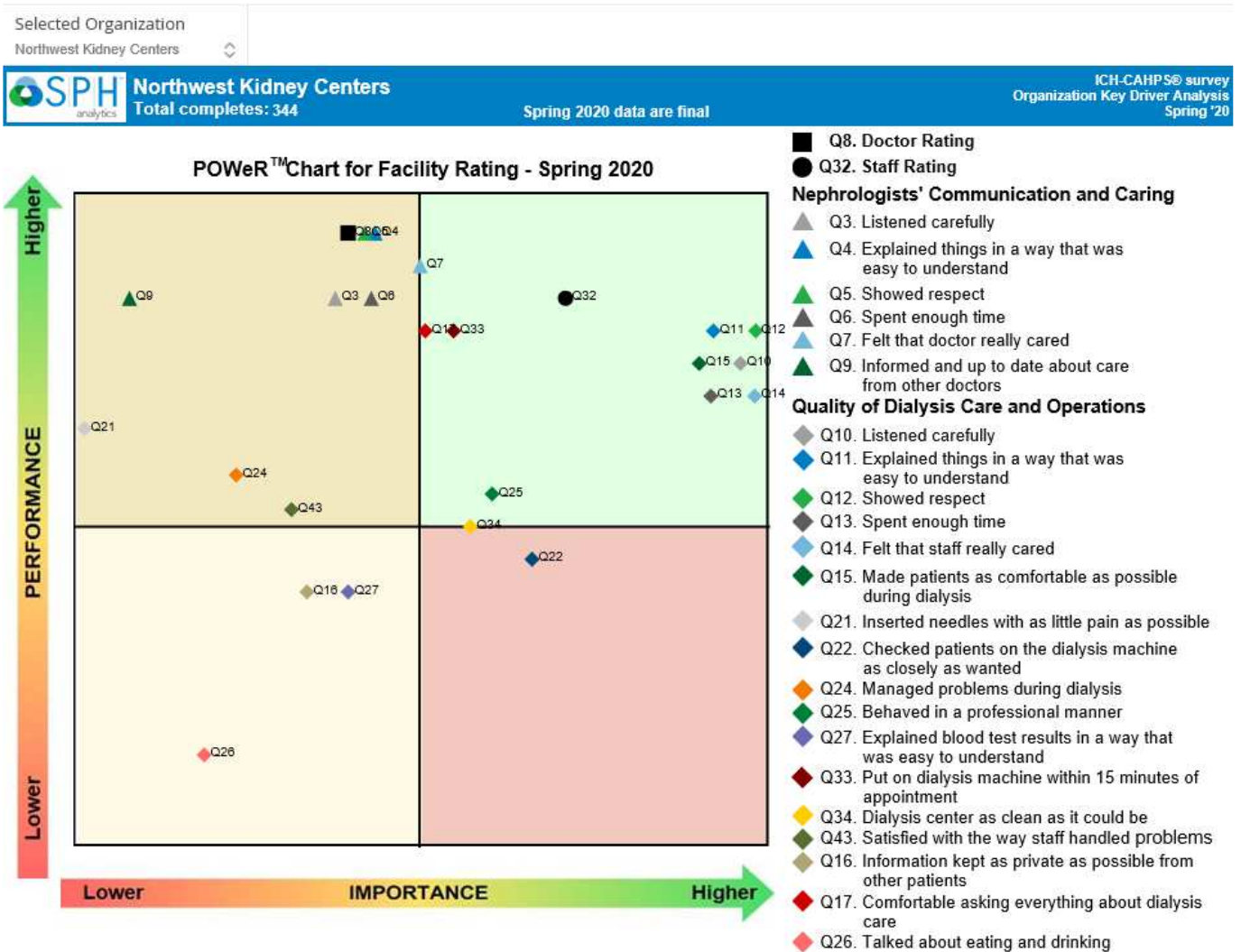
- NKC had a 35% response rate from eligible patients, as compared to SPH book of business at 38%. NKC response rate is at its highest level compared to previous three surveys.
- Compared to Fall 2019, Spring 2020 NKC trended Top Box results show:
 - Significant improvement in 2 measures (>3%):
 - Q8 Overall rating of kidney doctors
 - Q32 Overall rating of dialysis center staff
 - Slight improvement in 2 measures (< 3%)
 - Q35 Overall Rating of Dialysis Center
 - Composite scores for Nephrologists' communication and caring
 - Slight declines in 2 measures (< 3%)
 - Composite scores for Quality of dialysis center care and operations
 - Composite scores for Providing information to patients

NKC compared to ICH-CAHPS national norms

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 2019	CMS National Norm 2019	NKC Spring 2020
Overall rating of kidney doctor	77.9%	60%	81.5%
Overall rating of dialysis center	76.0%	69%	78.9%
Overall rating of dialysis staff	70.0%	64%	73.9%
Nephrologist communication and caring	79.2%	68%	79.3%
Providing information to Patients	83.0%	81%	80.7%
Quality of Dialysis Care and Operations	67.1%	63%	66.7%

Spring 2020 NKC Key Driver Analysis Result



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"

- Q12. Dialysis Center: Showed respect
- Q14. Dialysis Center: Felt that staff really cared
- Q10. Dialysis Center: Listened carefully
- 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
- Q25. Dialysis Center: Behaved in a professional manner
- Q33. Dialysis Center: Put on dialysis machine within 15 minutes of appointment
- Q17. Dialysis Center: Comfortable asking everything about dialysis care
- Q7. Nephrologist: Felt that doctor really cared

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"

- Q22. Dialysis Center: Checked patients on the dialysis machine as closely as wanted
- Q34. Dialysis Center: Dialysis center as clean as it could be

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"

- 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
- Q26. Dialysis Center: Talked about eating and drinking

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"

- Q4. Nephrologist: Explained things in a way that was easy to understand
- 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

Summary of Spring 2020 results

Spring 2020 ICH-CAHPS results were sent to the Operations Committee on September 28, 2020.

The organization wide action plan for 2020 Spring and Fall surveys was:

- Continue to encourage and increase patient participation in ICH CAHPS surveys
- So far, Spring 2020 participation is improved over previous years at 35%. Keep up the good work!

The Spring 2019 and Fall 2019 surveys showed no organizational opportunities.

The Spring 2020 Key Driver Analysis (PowerChart) identified two opportunities:

- Q22: In the last 3 months, how often did the dialysis center staff check you as closely as you wanted while you were on the dialysis machine?
(Never, sometimes, usually, always)
- Q34: In the last 3 months, how often was the dialysis center as clean as it could be? (Never, sometimes, usually, always)

Unit Action Plans and Spring 2020 Results

In-Center units will review their results and Key Driver Analysis (PowerChart) in their October 2020 QA/PI meeting.

QA/PI Action Items:

- Record the following information in unit QA/PI minutes:
 - The response rate (see page 1 and 2)
 - 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 Key Driver Analysis
- Review Comments
- See Addendum B for 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.

FUTURE SURVEYS

Our survey vendor known as DSS was acquired by SPH Analytics. All current surveys, letters and envelopes sent to patients show this logo:



Fall 2020 Survey schedule (In-Center):

- Sample window: Patients eligible for Fall 2020 survey had dialysis at their unit between 4/1/20 – 6/30/20
- Pre-notification Letter – 10/16/20
- In-Center Questionnaire Mailed – 10/30/20
- In-Center Phone Survey Begins – 12/2/20
- Data Collection Ends – 1/8/2021
- Federal Way West, Fife and Rainier Beach patients (who dialyzed within the sample window) will be included in the Fall 2020 ICH CAHPS and all future ICH CAHPS surveys.

The annual 2020 Survey for Home patients will follow the same timelines as ICH CAHPS as of now. SPH can modify the timelines as the home survey is not CMS mandated.

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 2019	Fall 2019	Spring 2020
NKC Overall	73.6%	78.2%	78.9%
Auburn	72.7%	85.7%	53.8%
Broadway	N/A	76.5%	71.4%
Burien / West Seattle	75.0%	57.1%	90.0%
Elliott Bay	75.0%	70.6%	81.8%
Enumclaw	78.6%	92.3%	100%
Federal Way East	71.4%	87.5%	70.6%
Kent	69.2%	87.5%	80.0%
Kirkland	81.3%	88.2%	72.2%
Lake City	82.4%	73.7%	85.0%
Lake Washington	73.7%	78.9%	70.6%
Port Angeles	N/A	81.8%	N/A
Renton	66.7%	73.7%	76.9%
Scribner	79.2%	81.5%	75.9%
SeaTac	60.0%	71.9%	78.0%
Seattle 2 and 3	75.0%	72.2%	82.4%
Snoqualmie Ridge	N/A	N/A	N/A

N/A = 10 or less responses

Addendum B (Spring 2020)

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

Action Plans are based on each unit's Key Driver Analysis (previously known as PowerChart.) Units that have >15 responses have a Key Driver Analysis report generated. Auburn, Port Angeles and Snoqualmie Ridge had responses less than 15.

The unit-by-unit summary below identifies a key Opportunity for each unit, based on the Spring 2020 Key Driver Analysis.

Auburn

Spring 2020 patient participation declined compared to Fall 2019. No KDA for Spring 2020, due to low number of survey responses. Continue efforts to increase patient participation.

Broadway

Patient participation shows increasing trend over last 3 surveys – keep up the good work. Multiple Opportunities identified. Develop Action plan for Q12 Staff show respect for what you had to say.

Burien

Multiple opportunities identified. Develop Action plan for Q11 Staff explain things in a way that is easy to understand.

Elliott Bay

Multiple opportunities identified. Develop Action plan for Q10 Staff listen carefully to what you have to say.

Enumclaw

Continue good work in maintaining a high level of patient participation. No unit-specific Opportunities were identified in Spring 2020 Key Driver Analysis.

Federal Way East

Multiple opportunities identified. Develop Action plan for Q14 Felt that staff really care about what you have to say.

Kent

Spring 2020 – Patient participation improved compared to Fall 2019. Maintain the gain. Develop Action plan for Q14 Felt that staff really care about what you have to say.

Kirkland

2019 Opportunity was Q34 – Dialysis Center is clean as it could be. Now moved into Power – maintain the gain. Sole Opportunity is Q25 – Staff behave in a professional manner. Develop Action plan.

Lake City

Spring 2020 sole Opportunity is Q22 – Checked patients on the dialysis machine as closely as wanted. This is the same Opportunity as shown in 2019 Lake City KDA. Revise Action plan.

Lake Washington (now Bellevue)

Multiple Opportunities identified in Spring 2020. Develop Action plan for Q15 – Staff make you feel as comfortable as possible while on dialysis.

Port Angeles

No KDA for Spring 2020, due to low number of survey responses. Continue efforts to increase patient participation.

Renton

Spring 2020 Key Driver Analysis shows 3 Opportunities. Two of them are the same as our organizational Opportunities: Q22 Staff check you as closely as you wanted on dialysis machine and Q34 Facility is as clean as it can be. Develop Action plan for Q22 Staff check you as closely as you wanted on dialysis machine.

Scribner

Spring 2020 patient participation greatly increased over Fall 2019 – maintain the gain. Sole Opportunity identified in Spring 2020 Key Driver Analysis is Q34 Facility is as clean as it can be. This was identified as an Opportunity for this unit in 2019. Revise Action plan for Q34.

SeaTac

Spring 2020 patient participation greatly increased over Fall 2019 – maintain the gain. Three Opportunities identified. Develop Action plan for Q25 Behaved in a professional manner.

Seattle 2 & 3

Patient participation shows increasing trend over last 3 surveys – keep up the good work. Multiple Opportunities identified. Develop Action plan for Q12 Staff show respect for what you had to say.

Snoqualmie Ridge

No KDA for Spring 2020, due to low number of survey responses. Continue efforts to increase patient participation.