Hospice CAHPS Analysis for Performance Improvement

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Agenda

• Welcome!
• Background
• DEYTA ANALYTICS Hospice CAHPS Dataset
• Review of Interim Hospice CAHPS Data
  ‒ Composite Measures
  ‒ Single Item Measures
  ‒ Global Measures
• Recommendations for Utilizing Hospice CAHPS Data
• Wrap up

Background

• Hospice Quality Reporting Program created to promote delivery of high quality hospice services.
• Required reporting of quality measures
  ‒ Hospice Item Set
    ▪ July-December 2014: Practice period
    ▪ January 2015: Data analyzed by CMS
  ‒ CAHPS Hospice Survey
    ▪ January-March 2015: Dry Run (practice period)
    ▪ April 2015: Began official data collection
CAHPS Hospice Survey Quality Measures

- Global Measures
  - Overall Rating of Hospice (Question 39)
  - Recommend Hospice (Question 40)
- Single Item Measures
  - Support for Religious and Spiritual Beliefs (Question 28)
  - Information Continuity (Question 10)
  - Understanding Side Effects of Pain Medications (Question 18)
- Composite Measures
  - Hospice Team Communication
  - Getting Timely Care (Questions 5, 7)
  - Treating Family Member with Respect (Questions 11, 12)
  - Providing Emotional Support (Questions 37, 38)
  - Getting Help for Symptoms (Questions 16, 22, 25, 27)
  - Getting Hospice Care Training (Questions 19, 20, 23, 29)

CAHPS Hospice Survey Results

- Q1 2015 – practice data only; not included in CMS analysis
- Need at least 4 quarters of data to analyze before benchmarks will be released by CMS (Q3 2016 at the VERY earliest...)
  - No calculations or methodology available at this time for the Hospice Quality Measures
- Only CMS-published results are official results
- Results from approved vendors may be used for quality improvement purposes
Deyta National Scores within Presentation

- > 67,000 complete surveys
- Sample month (month of death) = January – June 2015
- Decedent/caregiver must meet the survey-eligibility criteria
  - Patient at least 18 years old
  - LOS at least 48 hours
  - Decedent had a caregiver of record
  - Caregiver was someone other than a non-familial legal guardian
  - Caregiver had a US or US Territory home address
- Sampled for CMS
- Returned within the 42-day data collection period
- Survey includes answers to at least 50% of the questions applicable to all caregivers
  
Analyze Individual Questions

- Composite Measure analysis
- No calculations or methodology for Quality Measures (composite measures)
- Analyze individual question results to identify the primary driver of performance
  - Positive or negative
- Prioritize specific areas for focus in QAPI
  - Target the lowest score
  - Focus on low hanging fruit
  - Consider the caregiver’s perception of the question wording
Target the Lowest Score

- Identify which questions are driving Composite Measure scores
  - Positive
  - Negative

- Focus on the lowest score for improvement

- Improving performance for the lowest should ultimately improve the overall Composite Measure score

Target Lowest Scores - Example 1

16  Received help with pain
22  Received help for trouble breathing
25  Received help with constipation
27  Received help with anxiety or sadness
Target Lowest Scores – Example 2

6  Kept informed about when team would arrive
9  Team explained things in an easily understood way
6  Kept informed about patient’s condition
9  Listened carefully about problems with care
14 Listened carefully to caregiver

Focus on Low Hanging Fruit

• Groups of questions may not display big ranges in performance
• Identify questions that may be easier to address
• Improvement in one of the questions will contribute to improvement in the Composite Measure score
Focus on Low Hanging Fruit – Example 1

- Identify the question that may be easiest to address.

5  Received help during evenings, weekends and holidays
7  Received help as soon as needed

- Question 5 looks at a specific time frame
- May be easier to identify a smaller set of variables that may impact responsiveness rating

Focus on Low Hanging Fruit – Example 2

- Questions with specific timeframes may be easier to address vs. considering support provided throughout the patient’s stay.

37  Amount of emotional support provided by team
38  Amount of support in the weeks after patient died

- Review protocols around timing and type of support offered to caregivers after patient dies
Consider the Caregiver’s Perception of the Question Wording

- Both questions look at respect and care shown to patient

- Difference in scores may indicate that caregivers perceive caring about patient and dignity and respect differently.

Identify the Need for Training – Example 1

- Relationship between symptoms and diagnoses

- Ensure symptom management training is included for patient groups that present with specific symptoms most frequently
Identify the Need for Training – Example 2

• Caregivers appear to know if/when to give pain medicines, but may feel they were not trained about what side effects might arise based on those actions.
• Relate the action of providing more meds with potential side effects rather than providing information about general side effects of pain medicines.

Importance of Trending Data Over Time

• Incorporate overall scores (quarterly or annual results) as well as trending monthly scores over time
• Decreasing trends can highlight the need for a specific performance improvement project
• Increasing trends can provide valuable feedback about the effect of interventions that have been implemented
• No or minimal change illustrates stability
Using Data from the Dry Run

- Q1 2015/Dry run was a *practice period*.

- Include Q1 data only if results appear consistent with data captured during Q2 and beyond.
- Deyta National is consistent across both Q1 and Q2, however individual agency scores may vary.

Set Question-Specific Targets

- Set realistic performance targets for each question

- Example: Performance target of 90% favorable responses:
  - Too low for *Support for Religious & Spiritual Beliefs*
  - May be an appropriate, attainable stretch goal for *Understanding Side Effects of Pain Medications*
  - Unrealistic, unattainable goal for *Information Continuity*
Impact of Real Time Reporting: Closed vs. Open Data Periods

- Benefits and draw backs of real time reporting
  - Early visibility into surveys as they are returned
  - Important to understand if data collection period is Open or Closed

Real time scores (Open data period with partial data) may fluctuate as additional surveys are received making it difficult to accurately interpret results.

Summary of Recommendations

- Analyze individual questions within the composite measures.
- Focus on areas with the biggest opportunity for improvement.
- Think strategically by selecting areas that may be easier to improve than others.
- Understand the factors that may impact the caregiver’s perception of the care provided.
- Establish question-specific performance targets.
- Review trends over time.
- Incorporate Q1 data for quality improvement efforts only if the data are consistent with Q2 findings.
- Understand the benefits and limitations of viewing real-time results.
- Use closed data periods when analyzing results to identify improvement opportunities.
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