The Role of the Staff Nurse in Patient Satisfaction and Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)

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The purpose of *The Role of the Staff Nurse in Patient Satisfaction and HCAHPS* is to provide staff nurses with knowledge and strategies that support a positive experience for their patients.

**After completing this course, the participant will be able to:**

1. Explain the role that nurses play in patient satisfaction.
2. Describe the purpose and use of HCAHPS survey, and how it relates to patient satisfaction.
3. Explain the patient satisfaction measures included in HCAHPS.
4. Give examples of HCAHPS questions from the patient survey.
5. Identify opportunities for nurses to impact HCAHPS scores.

**HCAHPS Defined**

HCAHPS is an acronym for Hospital Consumer Assessment of Healthcare Providers & Systems.

HCAHPS includes questions that are designed to include both broad, and specific questions related to the hospital setting of the patient.

The intent of the HCAPHS initiative is to provide both a survey instrument and data collection methodology to measure patient’s experience during hospital care. (HCAHPS Online, 2013)

HCAHPS is monitored by Center for Medicare and Medicaid Services (CMS).

HCAHPS measures 16 different indicators of patient satisfaction.

**Nurses and Patient Satisfaction**

Nurses play a critical role in the patient care experience. A Press Ganey study emphasizes the important role that nurses serve in transforming the health care system. Beginning October 2012, hospitals' Medicare payments began to be partially calculated to their patient satisfaction scores on the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey.

**The Rising Tide Measure: Communication with Nurses**

The 2012 Press Ganey Associates, Inc. study examined the role that staff nurses play in affecting patient satisfaction. The report emphasizes the pivotal role for nurses in making a big difference in patient satisfaction and clinical outcomes that influence financial performance of healthcare organizations.

The study estimates that 30% of hospital’s value based purchasing (VBP) incentive payments are calculated based on several of the HCAHPS dimensions.

A sample of 3,062 US acute care hospitals analyzed eight HCAHPS dimensions.
The analysis identified multiple measures that were consistently connected to each other:

- Communication with Nurses
- Communication with Doctors
- Responsiveness of Hospital Staff
- Pain Management
- Communication about Medication
- Cleanliness/Quietness of Hospital Environment
- Discharge Information
- Overall Rating

**Test Yourself**
There are 8 dimensions measured on the HCAHPS survey and include all of the below except:

- A. Communication with nurses
- B. Pain management
- C. Satisfaction with food – Correct!
- D. Discharge information

The 8 dimensions are:

- Communication with Nurses
- Communication with Doctors
- Responsiveness of Hospital Staff
- Pain Management
- Communication about Medication
- Cleanliness/Quietness of Hospital Environment
- Discharge Information
- Overall Rating

**Communication with Nurses**
Of the eight HCAHPS dimensions that the Press Ganey Associates study reviewed, four dimensions were directly related to communication with nurses. This indicates that improvement in the communication with nurses dimension will most likely lead to gains in performance for the remaining four dimensions studied.

Communication with nurses is a key contributor to improving patient satisfaction and CMS (Centers for Medicare & Medicaid Services) payment programs.

**Best Practice**
Best practices connected to solid performance includes purposeful hourly rounding, bedside shift reporting, use of scripts, post-discharge phone calls, and providing service skills training. Many hospitals are implementing these strategies within their healthcare organizations to improve communication, and the overall patient care experience.

**The Importance of Assessing Communication**
Staff members must carefully assess both the patient's understanding and the impact that their communication can have on the overall satisfaction of the patient with their healthcare experience. This is especially important when staff suspect that a patient or family may have misunderstandings...
because of limitations related to literacy, language, education level, socioeconomic status, hearing, or vision.

It is important to make an extra effort to first understand the needs of the patient and family to be understood themselves, which helps to build trust, respect, rapport, and satisfaction.

**Nurse Interactions with Patients**

There are several times that nurses interact with patients and families during just one shift. Some of these key interactions that occur are during times of medication administration, discharge teaching, and when discussing pain management strategies and options with patients and families.

Responsiveness to call bells also impacts patients overall patient satisfaction experience, which can be influenced by nurses promptly responding to patient call bell lights.

**Hospital Participation**

Beginning in 2007, hospitals are included in the pay-for-reporting program, and currently the Patient Protection and Affordable Care Act of 2010, Section 3001(a) mandates reporting under the Hospital Value-Based Purchasing (VBP) pay-for-performance program.

As of December 2012 publicly reporting scores are based on more than 2.9 million HCAHPS surveys complete from patients at 3,892 hospitals.

More than 7,900 patients complete the HCAHPS survey every day.

**HCAHPS Process**

A survey is sent after discharge, defined as 48 hours to 42 calendar days post-discharge. Patients are randomly selected to participate in the survey.

Surveys are administered in 4 different ways:

- Mail Only
- Telephone Only
- Mixed (mail with telephone follow-up)
- Active Interactive Voice Response

*In participating hospitals of the third quarter in 2012*

Of the 4,047 surveys completed:

- 60% Mail Only
- 40% Telephone Only
- 0.1% Mixed
- 0.3% Active Interactive Voice Response

**HCAHPS Goals**

The HCAHPS survey has three broad goals related to patient satisfaction, including consumer education, establishment of incentive programs, and increased accountability and transparency.

*The first goal* is to educate consumers about hospital performance in a transparent manner to fully inform the consumer about their choices in healthcare. This level of transparency is important to consumers when selecting a hospital to receive their care. Although physicians and insurance
companies largely influence this decision, a consumer that is informed about patient satisfaction performance at competitive hospitals are able to make a more informed decision that could possible influence future decisions with their insurance carrier, or even their physician.

The second goal of public reporting helps to establish incentive programs that provide equitable comparisons across healthcare organizations. The ability to compare the same metrics is important when developing incentive programs tied to patient satisfaction metrics. Consistent, comparable reporting through HCAHPS survey provides a high level of unbiased transparency, and enables a fair and equitable incentive payment program connected to patient satisfaction scores.

The third goal is increased accountability of healthcare organizations through transparent, unbiased reporting of patient satisfaction metrics. This level of increased transparency allows peer hospital accountability, as well as insurer and consumer accountability enabling consumers and insurers to address metric misses, or possible opportunities to improve the overall patient experience for hospitals that are not performing well.

Test Yourself
The HCAHPS survey randomly selects patients to receive the survey after discharge, which is defined as:

A. 24-48 hours after discharge  
B. 30 days after discharge 
C. 48 hours - 42 days after discharge- Correct!  
D. 1 - 7 days after discharge

HCAHPS Survey Content
HCAHPS survey includes 32 items
Examples of HCAHPS Survey Items:

“Your Care From Nurses”

During this hospital stay, how often did nurses treat you with courtesy and respect?  
1-Never  2-Sometimes  3-Usually  4-Always

During this hospital stay, how often did nurses listen carefully to you?  
1-Never  2-Sometimes  3-Usually  4-Always

During this hospital stay, how often did nurses explain things in a way you could understand?  
1-Never  2-Sometimes  3-Usually  4-Always

HCAHPS Content: Individual and Group Items
What patients/consumers want to know:

Individual Items:  
1. Cleanliness of hospital environment  
2. Quietness of hospital environment

Global Items:
1. Overall rating of hospital  
   • 0 to 10 scale  
2. Recommend this hospital
Publicly Reporting Results
Reporting includes 12 months of discharges.

Public Reporting occurs in:
- April
- July
- October
- December

Example:
December 13, 2012 Public Reporting quarters included:
- 2nd Quarter, 2011
- 3rd Quarter, 2011
- 4th Quarter, 2011
- 1st Quarter, 2011

HCAHPS Website: [www.hcahpsonline.org](http://www.hcahpsonline.org)

HCAHPS Guidelines for Hospitals
CMS does not endorse hospitals or survey vendors.

*Hospital Compare* is designed to help consumers make informed decisions about their hospital care.

The incentive for hospitals to improve patient satisfaction was further supported by the Patient Protection and Affordable Care Act of 2010 (P.L. 111-148), which specifically targeted the HCAHPS performance in determining incentive payments that began in October 2012.

Test Yourself
CMS provides an approved list of survey vendors, and endorses these vendors to ensure that they are using standardized surveys across all hospitals.

A. True
B. False- Correct!

How Does CMS Use HCAHPS Data?
Since October 2012, under CMS's Value-Based Purchasing (VBP) plan, Medicare will:
- Withhold 1% of its payments to hospitals which perform poorly on HCAHPS measures.
- Place withheld funds into a pool to be distributed as bonuses to hospitals which score above average on several measures.

The Hospital Value-Based Purchasing (Hospital VBP) program links a portion of Inpatient Prospective Payment System (IPPS) hospitals' payment from CMS to performance on a set of quality measures. The Hospital VBP Total Performance Score (TPS) for FY 2013 has two components:
- The Clinical Process of Care Domain includes 12 clinical measures and accounts for 70% of the TPS
- The Patient Experience of Care Domain (HCAHPS results) accounts for 30% of the TPS

The HCAHPS Website
The public may also access summary analyses of HCAHPS scores at the [HCAHPS online website](http://www.hcahpsonline.org).
The website presents:
- Summaries of current state and national HCAHPS results
- Current HCAHPS news and upcoming events
- HCAHPS training materials
- HCAHPS survey instruments in English and Spanish
- Implementation protocol
- HCAHPS reporting includes both improvement (comparing current with earlier findings) and achievement (comparing a hospital with state and national findings).

Test Yourself
The HCAHPS survey tools are located on the HCAHPS online website.
   A. True- Correct!
   B. False

The HCAHPS website presents summaries of current state and national HCAHPS results, current HCAHPS news and upcoming events, HCAHPS training materials, HCAHPS survey instruments in English and Spanish, implementation protocol, and HCAHPS reporting of both improvement and achievement findings. Department level data is not available on the website, and vendor satisfaction survey results are not reported on the website.

HCAHPS Survey Questions
Nursing Care Survey Questions:
Examples of HCAHPS Survey Items:

"Your Care from Nurses"

During this hospital stay, how often did nurses treat you with courtesy and respect?
1-Never  2-Sometimes  3-Usually  4-Always

During this hospital stay, how often did nurses listen carefully to you?
1-Never  2-Sometimes  3-Usually  4-Always

During this hospital stay, how often did nurses explain things in a way you could understand?
1-Never  2-Sometimes  3-Usually  4-Always

What does this mean to a patient?
How well do you explain things to your patients?
How would your patients rate you?

HCAHPS Survey Questions: Cleanliness and Quietness
Hospital cleanliness and quietness is assessed on the HCAHPS survey. It is also evaluated by regulatory agencies during site visits, as well as by patients and families during the hospital stay.

Maintaining environment cleanliness is a responsibility shared by everyone in the hospital environment, not only the environmental services team. Providing healthcare in a clean environment, free of unnecessary clutter and debris helps to establish an environment of quality care, and a more
satisfied patient experience.

**Best Practice**
The nurse manager may direct charge nurses to assign a staff member to perform “clean and quiet rounds” once per shift and report findings on a simple form. Data might include patients’ perceptions of cleanliness and quietness. Input from housekeeping personnel and from staff who work the night shift can add useful perspectives.

**Making a Difference!**
Making a difference in the patient experience starts with self-motivation. Nurses are passionate about their work, and easily self-motivated. Nurses work in complex work environments that requires constant attention to detail, and demonstrating a caring attitude. It can become challenging for nurse to be motivated with competing priorities, and when faced with multiple tasks.

Communication is the foundation of patient satisfaction.

Techniques such as paraphrasing what the patient has stated, asking the patient to paraphrase what a staff member has stated, and asking open-ended questions help to assure accurate communication.

**Nurse Manager Strategies to Improve Patient Satisfaction**
Nurse Managers depend on staff nurses to make the difference in patient satisfaction to deliver high quality care making the patient experience positive and memorable. Managers are actively engaged with operations within their departments to stay informed by conducting daily manager rounding. This rounding time allows the managers to connect with patients and nursing staff to support a positive patient experience. Staff nurses are exposed to more information about patients satisfaction, and performance improvement opportunities through dashboard, metrics data shared during staff meetings, and data posted on bulletin boards and in newsletters.

Nurse Managers often select indicators that are based upon latest HCAHPS results or events on the unit that suggest aspects for improvement. They may identify one or two indicators to use to collect data that will measure performance. Depending upon the aspect you are addressing, indicators might include:

- Call light response time
- Information given about medications, percentage of:
- Times nurses give information about medications when administering medications
- Patients who respond that nurses give information about medications when administering medications
- Medical records that document information given to patients about medications

**Example of Quarterly Results**
The example below displays first quarter results on three different indicators in use to monitor information given to patients about medications. Nurses collected data which sampled the percentage of:

- Medical records that document information given to patients about medications (**Medical Record**)
- Patients who respond that nurses give information about medications when administering medications (**Patient Response**)
Key Elements in Improving Patient Satisfaction

The acronym SATISFY represents key elements in a process for improving patient satisfaction.

The process runs parallel to ongoing quality improvement efforts or may be integrated into the ongoing quality improvement plan.

**S**
Satisfy indicators

**A**
Assess using the indicators

**T**
Time

**I**
Involve staff and resource persons

**S**
Synthesize quarterly results

**F**
Focus on ways to improve

**Y**
Year-end results

Staff Nurse Involvement

When staff members consistently used standardized tools and approaches to improving patient satisfaction, positive outcomes have resulted. Some of these tools include AIDET® Model and Purposeful, Hourly Rounding.

The AIDET® model was developed by The Studer Group and promotes patient-centered communication to eliminate breakdowns of communication between patients and staff nurses. AIDET® which represents:

**A**
Acknowledge the patient using the patient's name.
I
Introduce themselves, including their roles in the patient’s care.

D
Describe the duration of any procedures, tests, or other events.

E
Explain all procedures, daily activities, consultations, and other events or routines that the patient will experience.

T
Thank the patient for his/her time, attention, cooperation, and for choosing the healthcare organization.

Purposeful, Hourly Rounding
Findings of many studies (Blakely, et al, 2011; Meade, et al, 2006; Mercer & Fagan, 2010) suggest that systematic nursing rounds contribute to:

• Significant reduction in patients’ use of call bell
• Significant reduction of fall incidence
• Significant reduction in pressure ulcers
• Significant increase in patient satisfaction

Although staff may resist introducing one more requirement in the shift routine, gains in staff satisfaction and rapport among staff have occurred after initiating hourly rounding (Blakely, et al, 2011).

Purposeful, Hourly Rounding
Purposeful, hourly rounding provide a standardized tool to support patient satisfaction, and to anticipate needs using a proactive, instead of reactive approach. Use of the 4-Ps has increased patient safety and satisfaction (Blakely, et al, 2011).

The 4 Ps which represent a checklist for hourly rounding are as follows:

Pain
• Assess pain
• Assess pain relief measures

Positioning
• Assist into comfortable, safe positions

Potty
• Ask about bowel and bladder elimination and any need at this time
• Assist with elimination as necessary

Proximity
• Assure that personal items are within easy reach
• Ask about specific items, such as reading glasses, drinking water, call bell, and other essential items

Test Yourself
The AIDET® model was developed by the Studer Group to promote patient centered education, represented by all of the following except:

A. Assess pain- Correct!
B. Explain procedures
C. Acknowledge the patient by using their name
Best Practices

Best Practice Example
Nurses in the Mother-Baby Unit at South Miami Hospital formed a “Raising the Bar Team” (RTBT). The team analyzed the last two quarters’ Press Ganey Patient Satisfaction results of the unit.

They conducted a review of the literature on bedside hand-off shift reporting and developed a process of bedside shift reporting using keywords and involving the patient in the process.

Both patients and nurses responded positively to bedside hand-off shift reporting. However, noncompliance of the process from a few nurses presented a challenge.

Unit leadership played a significant role in encouraging staff compliance.

(Butao, et al, 2010)

Patient Satisfaction Best Practices Summary
Studer (Dunn, 2011) recommends best practices in support of patient satisfaction throughout the hospital stay.

**On admission:**
- Manage patient expectations. Let the patient know he should expect highest quality care and you will provide it.
- Provide an “excellent care” hotline. As a nurse manager, introduce yourself, leave your card and encourage the patient to contact you if he believes he is receiving less than excellent care or has any complaint.

**Throughout hospitalization:**
- Implement bedside hand-off reports. Bedside reports build the patient’s trust, enhance teamwork, and protect safety.
- Practice hourly rounding and daily Nurse Manager rounding.
- Show respect. Protect confidentiality and privacy. Always introduce yourself and your role in care.
- Ask permission. If visitors are present, find out whether the patient wishes them to know information about his condition and treatment. Address the patient using the name he prefers.
- Use best communication practices. Ask open-ended questions and paraphrase patient responses to verify understanding.

**At discharge:**
- Provide and verify the patient’s understanding of discharge instructions.
- Thank the patient for cooperating with the plan of care and for choosing the healthcare facility.

Summary
The Role of the Staff Nurse in Patient Satisfaction and HCAHPS is to provide staff nurses with knowledge and strategies that support a positive experience for their patients.

By studying this course, you have learned:
- The role that nurses play in patient satisfaction.
- The purpose and use of HCAHPS survey, and how it relates to patient satisfaction.
- Patient satisfaction measures included in HCAHPS.
Examples of HCAHPS questions from the patient survey.

Strategies and opportunities for nurses to impact HCAHPS scores.

References


RN.com course (2012), The Nurse Manager’s Role in Enhancing Patient Satisfaction.