

## Patient Experience Data Self-Assessment

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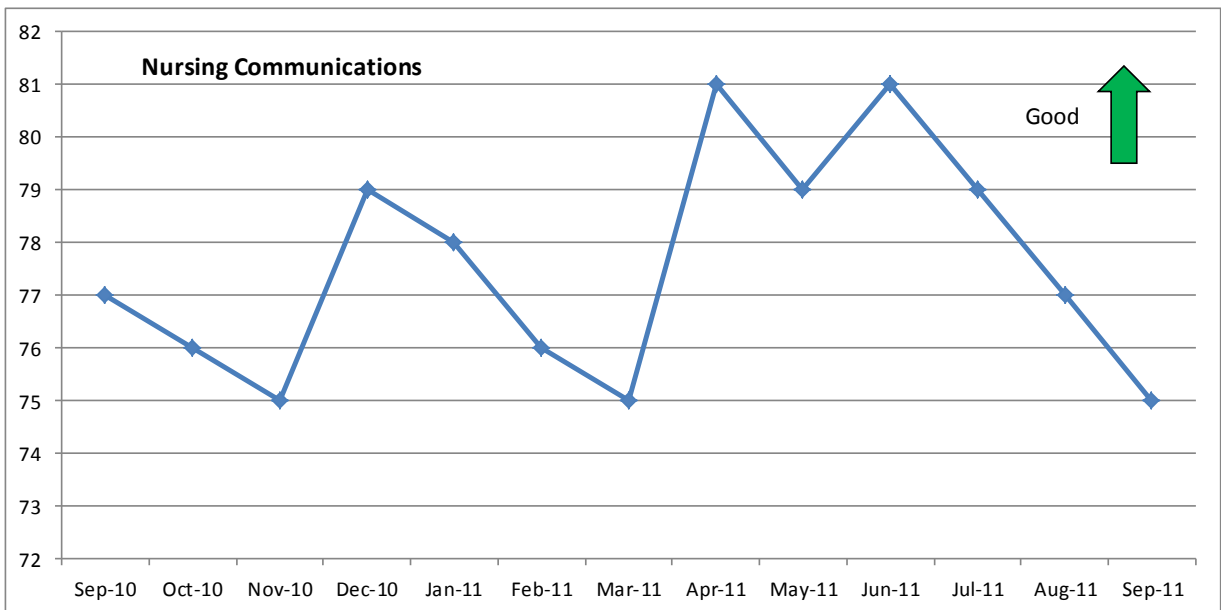
### 1. What is a run chart?

A plot that shows patient experience values (e.g., willingness to recommend) in time order, with a median reference line, is an example of a **run chart**. You can interpret the run chart with a set of rules. The rules help you to detect patterns that may be signals that your system has improved or deteriorated.

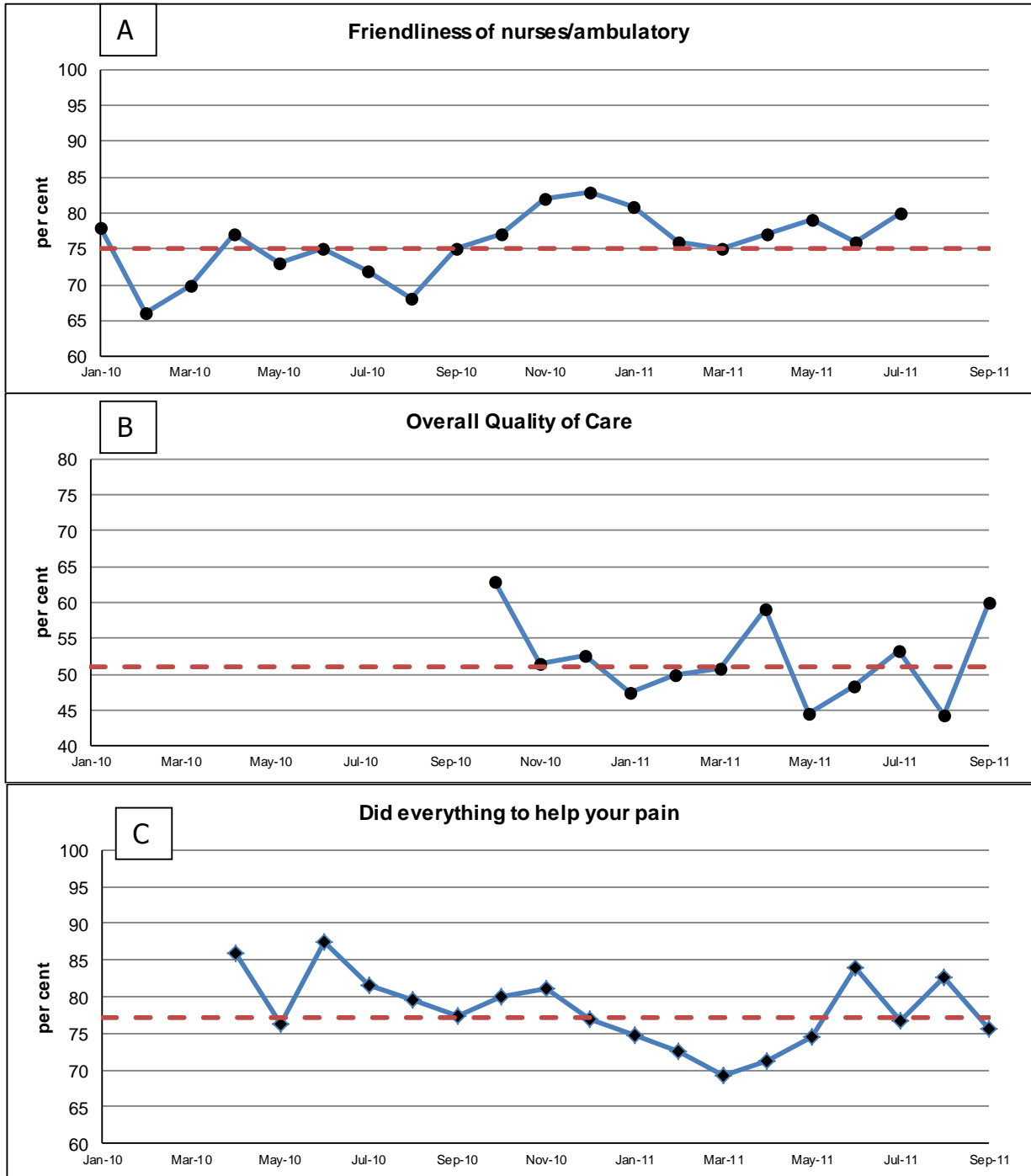
- True
- False
- Not sure

### 2. The median of the HCAHPS Nursing Communications “top box” scores in the accompanying chart...

- a. Is 78
- b. Is 77
- c. Can not be determined from the graph



3. Using the standard run chart rules for shift, trend, and “astronomical point,” examine each chart for signs of improvement or degradation. The dashed line is the median value to be used for reference. The first chart uses a median based on the first 12 months, also known as a “baseline reference” median.



#### 4. Interpreting a New Month's Value

At your hospital, suppose the HCAHPS overall “top box” willingness to recommend\* data shows an average monthly performance of 80% for the past 12 months; the median monthly value is also 80%. Now you get the latest month's data — the value is 76%.

Circle “Yes” if the action is **always** justified as part of your reaction to this new month's value of 76%.

a. Plot the 76% value on a run chart of “willingness to recommend” to see if there is any signal over time according to the run chart rules.	Yes	No	Not sure
b. Look at the “willingness to recommend” data in the context of the other elements of the HCAHPS survey.	Yes	No	Not sure
c. Re-iterate to staff the importance of continuous improvement and the financial implications of a relatively poor score for “willingness to recommend.”	Yes	No	Not sure
d. Initiate an investigation to find out what changed in the most recent month that caused the decrease as this month is below average.	Yes	No	Not sure
e. Interpret the 76% value in terms of the number of patients surveyed.	Yes	No	Not sure


*\*On average over the past 12 months, 80% of respondents have answered “Definitely yes” to the HCAHPS question, “Would you recommend this hospital to your friends and family?”*

## 5. Interpreting HCAHPS Percentile Tables

Use the table below to answer the questions on the following page.

(source: <http://www.hcahpsonline.org/files/January%202012%20HCAHPS%20Percentiles%20Table.pdf>)

HCAHPS PERCENTILES January 2012										
Hospital Percentile*	Communication with Nurses	Communication with Doctors	Responsiveness of Hosp. Staff	Pain Management	Comm. About Medicines	Cleanliness of Hospital Env.	Quietness of Hospital Env.	Discharge Information	Overall Hospital Rating	Recommend the Hospital
<b>TOP-Box Score<sup>1</sup></b>										
95 <sup>th</sup> (near best)	86	89	81	79	73	85	77	89	83	85
90 <sup>th</sup>	83	87	76	76	69	82	72	88	79	82
75 <sup>th</sup>	80	84	70	73	65	76	65	86	73	76
50 <sup>th</sup>	77	80	64	69	60	71	58	83	68	70
25 <sup>th</sup>	73	77	58	66	57	67	51	80	62	63
10 <sup>th</sup>	69	74	54	63	54	62	46	76	57	57
5 <sup>th</sup> (near worst)	66	72	51	60	51	60	43	74	52	53
<b>BOTTOM-Box Score<sup>2</sup></b>										
5 <sup>th</sup> (near best)	1	1	3	3	11	3	3	11	3	1
10 <sup>th</sup>	2	2	4	4	14	4	4	12	4	2
25 <sup>th</sup>	3	3	7	5	17	6	7	14	6	3
50 <sup>th</sup>	5	4	10	7	21	9	10	17	8	5
75 <sup>th</sup>	6	6	13	8	24	12	15	20	11	7
90 <sup>th</sup>	9	7	17	11	27	15	19	24	14	9
95 <sup>th</sup> (near worst)	11	9	20	13	29	17	22	26	17	11


 Percentiles for HCAHPS "Top-box" and "Bottom-box" scores of the 3,837 hospitals publicly reported on Hospital Compare in January 2012. Surveys are from patients discharged between April 2010 and March 2011. Scores have been adjusted for survey mode and patient-mix.

<sup>1</sup> The "Top-box" is the most positive response to HCAHPS survey items. Percentiles indicate how often patients gave positive assessments of their hospital experience. With "Top-box" scores, the higher, the better. For example, on "Communication with Nurses," 5% of hospitals scored 86 or higher (95th percentile) in the "Top-box," while 5% scored 66 or lower (5th percentile). The median (50th percentile) score on this measure was 77.

<sup>2</sup> The "Bottom-box" summarizes the least positive responses to HCAHPS survey items. Percentiles indicate how often patients gave negative assessments of their hospital experience. With "Bottom-box" scores, the lower, the better. For example, on "Communication with Nurses," 5% of hospitals scored 1 or lower (5th percentile) in the "Bottom-box," while 5% scored 11 or higher (95th percentile). The median (50th percentile) score on this measure was 5.

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Circle “T” for true, “F” for false, or “?” for Can’t tell from the Information provided. The questions pertain to the hospitals described in the note marked by the red arrow.

a. If your hospital averaged 83 from April 2010 to March 2011 on the top box <i>Communications with Nurses</i> composite, your hospital had a score lower than more than 150 hospitals nationally.	T	F	?
b. If your hospital averaged 83 from April 2010 to March 2011 on the top box <i>Communications with Nurses</i> composite, on average 17% of your hospital’s patients who responded to the survey feel they did not experience “top box” communications.	T	F	?
c. On the most recent HCAHPS monthly data report, your hospital scored 78 on the top box <i>Recommend the Hospital</i> . That means your hospital outperformed more than 75% of the surveyed hospitals.	T	F	?
d. If Hospital A averaged a score of 6 points higher than Hospital B on top box <i>Overall Hospital Rating</i> from April 2010 to March 2011, then in percentile terms, Hospital A is at least 15% higher than Hospital B.	T	F	?
e. The national HCAHPS survey response rate for the period April 2010-March 2011 was 32%. This means that about 2 out of 3 patients contacted did not complete the survey questions.	T	F	?
f. It always makes sense to compare ratings and percentiles of specific departments or services (e.g. OB) rather than rely only on whole-hospital summary measures.	T	F	?

## 6. Correlations: Friend or Foe?

Use this table of national survey data for overall rating of **inpatient experience** to answer the questions below. Circle “T” for true, “F” for false, or “?” for Can’t tell from the Information provided. The two digit number in each row is the correlation between the overall rating and the rating of the item in the row, e.g. the correlation between “Skill of physician” and “overall rating of inpatient experience” is 0.63.

Source: *Press Ganey National database – through June 30, 2011*

Staff sensitivity to inconvenience	.79
Staff addressed emotional needs	.78
Staff include decision re: treatment	.77
Likelihood recommending hospital	.75
Teach/instruct self-care, med, treatment	.74
Staff attitude toward visitors	.72
Nurses kept you informed	.72
How well your pain was controlled	.69
Nurses attitude toward requests	.67
Skill of physician	.63
Room cleanliness	.55
Noise level in and around room	.48

### Questions

a. The correlation value in each row can't be any larger than 1 but could be zero or even negative.	T	F	?
b. If your aim is to improve the overall rating of in-patient experience at your hospital, you should concentrate improvement on staff sensitivity to inconvenience and staff actions to address emotional needs.	T	F	?
c. If the national correlations align well with survey data at your hospital, then reduction of noise level in and around room is not as likely to improve your overall rating compared to staff including patients in decisions re: treatment.	T	F	?
d. The table implies that in terms of national summary data, room cleanliness doesn't really matter in terms of overall rating.	T	F	?