

RHQN Quality Newsletter, March 2007

Hospital CAHPS (HCAHPS)

The Centers for Medicare and Medicaid Services (CMS) partnered with the Agency for Healthcare Research and Quality (AHRQ), another agency in the Department of Health and Human Services, to develop HCAHPS. HCAHPS is a survey composed of 27 items and is available for download from the CMS website. The National Quality Forum (NQF) fully endorsed the survey in 2005. The intent of the HCAHPS initiative, also known as the CAHPS Hospital Survey, is to provide a standardized survey instrument and data collection methodology for measuring patients' perspectives on hospital care for public reporting, and provide further incentive for hospitals to improve quality of care, and enhance public accountability in health care by increasing the transparency of the quality of hospital care provided in return for the public investment.¹ This is still voluntary for critical access hospitals (CAHs) but that will most likely change in the next couple of years. Therefore, the RHQN recommends that if you have not already done so, that you consider enrolling at some time during 2007.

Quick Facts about HCAHPS from CMS:

- HCAHPS will result in the first national, standardized, publicly reported benchmark of hospital patients' perspectives of their care
- At this time, participation in HCAHPS is voluntary for critical access hospitals
- Hospitals may use an approved survey vendor (such as Press Ganey), or collect their own HCAHPS data. A list of CMS approved vendors can be found at the CMS website www.cms.hhs.gov
- Hospitals may either integrate the HCAHPS items within their own patient satisfaction survey, or implement HCAHPS as a separate survey
- The survey can be conducted by mail, telephone, mail with telephone follow-up; CMS will adjust data prior to public reporting for mode of administration and patient-mix effects
- Hospitals will survey a random sample of their live discharges who were over the age of 18 at admission, had an overnight stay, and had a non-psychiatric diagnosis
- Hospitals should survey patients on a monthly basis and submit data to CMS on a monthly or quarterly basis
- Hospitals are being asked to provide 300 completed surveys per year; for smaller hospitals, as few as 100 completed surveys are needed for public reporting (Hospital Compare)
- Hospitals will own their raw HCAHPS data and are free to analyze it as they wish
- Hospitals may preview their HCAHPS results prior to public reporting

¹ The Centers for Medicare and Medicaid Services www.cms.hhs.gov

To Learn more, visit the CMS website at www.cms.hhs.gov/quality/hospital or www.arhq.gov or contact the Washington State Quality Improvement Organization at www.qualishealth.org

Upcoming Events

April 5th RHQN QI Conference Call noon-1pm, details sent via email

April 17th Credentialing and Privileging Workshop Sea Tac Hilton 7am-4pm
* Pre-workshop dinner Monday 16th at 7pm Sea Tac Hilton), registration details sent via email*

Save The Date:

May 11th: Nursing and QI Leaders/Risk Managers Retreat: Sleeping Lady Resort, Leavenworth