HCAHPS, Staff gave patient discharge information (NQF 0166)

Measure Basic Information

To support improvements in internal customer services and quality related activities, this measure uses survey data to measure patients' perspectives on their hospital care experiences. The survey asks patients whether hospital staff had discussed the help they would need at home, and whether they were given written information about symptoms or health problems to watch for during their recovery. Response options are ‘Yes’ or ‘No’.¹

**Name and date of specifications used:** NQF 0166

**URL of Specifications:**
http://www.hcahpsonline.org/Files/HCAHPS%20QAG%20V9%200%20MARCH%202014.pdf

**Measure Type:**
HEDIS □ Joint Commission □ Survey ■ Other □ Specify:

**Data Source²:** Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey, self-administered by hospitals (sometimes through a vendor). OAHHS will collect responses from the hospitals and report to OHA.

**Measurement Period:**
Year One: October 1, 2013 – September 30, 2014 (baseline)
Year Two: October 1, 2014 – September 30, 2015 (performance year)

**Benchmark:** National 90th percentile (90%, April 2014³)

The equation used is per CMS guidelines, and is the percentage of patients at each hospital who reported ‘yes’ to both questions on whether they were given information about what to do during their recovery at home.

**Improvement from Baseline Target:** MN method with 2 percentage point floor⁴

¹ Note that the Child HCAHPS survey is under development. Therefore, Shriner’s Hospital for Children is unable to field an HCAHPS survey. Instead, it uses the Press Ganey Inpatient Pediatric Survey. Shriner’s performance on staff providing discharge information is therefore assessed against a similar question included in the Press Ganey Inpatient Pediatric Survey.

² OHA reserves the right to contact hospitals directly or through OAHHS with additional questions about data submitted as part of the program. Hospitals must be able to provide documentation of data submitted should it be requested.


⁴ Information on improvement target calculations can be found in the ‘Hospital Improvement Target Brief’, here: http://www.oregon.gov/oha/Pages/Hospital-Baseline-Data.aspx.
Measure Details

HCAHPS survey sample: A random sample of adult patients of all payer types and across medical conditions between 48 hours and six weeks after discharge that meet the following criteria:

- 18 years or older at the time of admission
- At least one overnight stay in the hospital as an inpatient
- Non-psychiatric MS-DRG/principal diagnosis at discharge
- Alive at the time of discharge

The following are excluded from the survey sample:

- Patients discharged to hospice care
- Patients discharged to nursing homes and skilled nursing facilities
- Court/Law enforcement patients (i.e., prisoners); this does not include patients residing in halfway houses
- Patients with a foreign home address (excluding U.S. territories—Virgin Islands, Puerto Rico, and Northern Mariana Islands)
- “No-Publicity” patients - A patient who requests at admission that the hospital: (1) not reveal that he or she is a patient; and/or (2) not survey him or her.
- Patients who are excluded because of rules or regulations of the state in which the hospital is located

Data elements required denominator: Number of adult patients in survey sample with valid responses to questions 19 and 20 of questionnaire.

Required exclusions for denominator: Those with invalid responses to questions 19 and 20 of questionnaire.

Deviations from cited specifications for denominator: None.

Data elements required numerator: Number of patients who responded “Yes” to both questions 19 and 20 of the survey:

Question 19: During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?

Question 20: During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital?

Required exclusions for numerator: None.

Deviations from cited specifications for numerator: None.
Explanation of Exclusions and Deviations

List other required exclusions and or deviations from cited specifications not already indicated: None.

Additional Notes

As noted above, the Child HCAHPS survey is under development. Therefore, Shriner’s Hospital for Children is unable to field an HCAHPS survey. Instead, it uses the Press Ganey Inpatient Pediatric Survey. Shriner’s performance on staff providing discharge information is therefore assessed against a similar question included in the Press Ganey Inpatient Pediatric Survey.

A comparison of the questions related to providing discharge information in HCAHPS versus the Press Ganey Inpatient Pediatric Survey is below:

<table>
<thead>
<tr>
<th>Survey</th>
<th>Questions</th>
<th>Response Scale</th>
</tr>
</thead>
</table>
| HCAHPS composite              | Question 19: During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?  
Question 20: During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital? | Yes or No                                                 |
| Press Ganey Inpatient Pediatric Survey | Instructions given about how to care for your child at home | Five point scale (very poor to very good); a higher score is better |