

September 29, 2022

NOTICE

The Board of Directors of the Kaweah Delta Health Care District will meet in an open Patient Experience Committee meeting at 4:00PM on Thursday October 6, 2022 in the Support Services Building Emerald Conference Room 520 W. Mineral King Ave., Visalia, CA 93291.

All Kaweah Delta Health Care District regular board meeting and committee meeting notices and agendas are posted 72 hours prior to meetings (special meetings are posted 24 hours prior to meetings) in the Kaweah Delta Medical Center, Mineral King Wing entry corridor between the Mineral King lobby and the Emergency Department waiting room.

The disclosable public records related to agendas are available for public inspection at Kaweah Health Medical Center – Acequia Wing, Executive Offices (Administration Department) {1st floor}, 400 West Mineral King Avenue, Visalia, CA and on the Kaweah Delta Health Care District web page https://www.kaweahhealth.org.

KAWEAH DELTA HEALTH CARE DISTRICT Mike Olmos, Secretary/Treasurer

Cindy moccio

Cindy Moccio Board Clerk, Executive Assistant to CEO

DISTRIBUTION: Governing Board Legal Counsel Executive Team Chief of Staff <u>http://www.kaweahdelta.org</u>



KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS PATIENT EXPERIENCE COMMITTEE

Thursday, October 6, 2022

Support Services Building Emerald Conference Room 520 W. Mineral King Ave, Visalia, CA 93291

- ATTENDING: Board Members; Dave Francis (Chair), Ambar Rodriguez; Gary Herbst, CEO; Dianne Cox, Chief Human Resources Officer; Ed Largoza, RN, Director of Patient Experience; Keri Noeske, Chief Nursing Officer; Steve Carstens, Medical Director of Physician Engagement and George Ortega, Recording.
 - 1. OPEN MEETING 4:00PM
 - 2. CALL TO ORDER Dave Francis, Committee Chair
 - **3.** PUBLIC / MEDICAL STAFF PARTICIPATION Members of the public wishing to address the Committee concerning items not on the agenda and within the subject matter jurisdiction of the Committee may step forward and are requested to identify themselves at this time. Members of the public or the medical staff may comment on agenda items after the item has been discussed by the Committee but before a Committee recommendation is decided. In either case, each speaker will be allowed five minutes.
 - **4.** <u>Patient Experience Data Review</u> *Ed Largoza, Director of Patient Experience* Reviewing department/unit performance scores based on patients' feedback on their visit.
 - 4.1. Rehabilitation
 - 4.2. Home Health Consumer Assessment of Healthcare Providers & Systems
 - 4.3. (CAHPS)
 - 4.4. Hospice CAHPS; & In-Center Hemodialysis CAHPS
 - 4.5. Medical Practice Clinics
 - 4.6. Emergency Department
 - **4.7.** Hospital CAHPS (including unit performance & patient comments)
 - <u>Department Spotlight, Rehabilitation</u> Rehabilitation Department will be presenting on their efforts and performance in outstanding health, ideal work environment, and excellent service. – Jag Batth, Chief Operating Officer; *Molly Niederreiter, Director of Rehabilitation*

Mike Olmos – Zone I	Lynn Havard Mirviss – Zone II	Garth Gipson – Zone III	David Francis – Zone IV	Ambar Rodriguez – Zone V
Secretary/Treasurer	Vice President	Board Member	President	Board Member

MISSION: Health is our Passion. Excellence is our Focus. Compassion is our Promise.

Services; Lisa Suggs, Rehab Nurse Manager; Tara Norman, Therapy Manager; Ruth Toews, Therapy Manager; Anna Famy, Short Stay Nurse Manager, Geraldine White, Rehab Quality Improvement Coordinator

6. Adjourn Closed Meeting – Dave Francis, Committee Chair

In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.

October 6, 2022 – Patient Experience

Page 2 of 2

 Mike Almos – Zone I
 Lynn Havard Mirviss – Zone II
 Garth Gibson – Zone II
 David Francis– Zone IV
 Ambar Rodriguez– Zone V

 Board Member
 Vice President
 Secretary/Freasurer
 President
 Board Member

 MISSION:
 Health is OUr Passion.
 Excellence is OUr Focus.
 Compassion is OUr Promise.

Separator Page

PX Board Committee - Oct 2022v2

Patient Experience Board Delivering excellent care that is consistent, coordinated, and compassionate. October 2022

Providing World Class Service

 $\star \star \star \star \star$



Rehab Performance & Goals: July-August 2022

REHABILITATION	# OF SURVEYS	PERFORMANCE	GOAL (NRC)
Would Recommend	19	89.5% (>90 th)	80.9% (90 th)
How likely would you be to recommend			
this facility to your family and friends?			
0 (Not at all likely) -10 (Extremely likely) Scale			

QUESTION SUMMARY

Question	n-size	Score	Bench- mark	Gap			
Human Understanding	19	94.7	93.3	1.4			
NPS: Facility would recommend	19	89.5	67.9	21.6			
Facility was clean	19	68.4	70.1	-1.7			
Home rehabilitation explained	19	68.4	68.2	0.2		1 - C	
Care provider courtesy/respect	20	65.0	77.0	-12.0			
Aware of important med info	20	60.0	55.6	4.4			
Trust providers w/ care	20	60.0	68.6	-8.6			
Family involved as you wanted	17	58.8	59.8	-1.0			
Care providers listened	21	57.1	69.2	-12.1			
Care providers explain things	22	54.5	69.4	-14.9			
Food quality	19	47.4	50.6	-3.2			



Outpatient Surgery Performance & Goals: July-August 2022

Outpatient Surgery	# OF SURVEYS	PERFORMANCE	GOAL (NRC)
Would Recommend	336	76.2% (<50 th)	84.7% (50 th)
How likely would you be to recommend			
this facility to your family and friends?			
0 (Not at all likely) -10 (Extremely likely) Scale			

QUESTION SUMMARY

Question	n-size	Score	Bench- mark	Gap
Human Understanding	340	79.1	83.4	-4.3
Facility was clean	352	77.8	88.7	-10.9
Anesthesia courtesy/respect	356	77.5	87.7	-10.2
NPS: Facility would recommend	336	76.2	84.7	-8.5
Care provider courtesy/respect	357	75.4	87.0	-11.6
Family involved in visit	341	72.4	75.2	-2.8
Care providers listened	358	68.2	81.9	-13.7
Care providers explain things	360	65.6	79.4	-13.8
Got help as soon as wanted	366	57.9	78.2	-20.3
Received consistent info	363	56.7	78.1	-21.4
Procedure began on time	375	35.5	49.3	-13.8

CMS Outpatient and Ambulatory Surgery Survey (OAS CAHPS) will be mandatory for Hospital outpatient departments (HOPDs) in 2024.



Clinics Performance & Goals: July-August 2022

CLINIC PERFORMANCE	# OF SURVEYS	PERFORMANCE	GOAL (NRC)
All Clinics – Would Recommend	7360	77.6% (<50 th)	83.2% (50 th)
Woodlake Health	160	81.9%	83.2% (50 th)
Lindsay Health	277	80.9%	83.2% (50 th)
Sequoia Health & Wellness	231	78.4%	83.2% (50 th)
Dinuba Health	180	78.3%	83.2% (50 th)
KHMG	5395	77.8%	83.2% (50 th)
Tulare Health	157	75.8%	83.2% (50 th)
Exeter Health	960	74.8%	83.2% (50 th)

QUESTION SUMMARY

Question	n-size	Score	Bench- mark	Gap
Easy to find way	8,159	82.0	75.9	6.1
NPS: Provider would recommend	7,360	77.6	83.2	-5.6
Human Understanding	7,550	75.6	82.1	-6.5
Provider listened	8,755	74.9	83.9	-9.0
Easy to schedule visit	8,114	72.9	65.6	7.3
Got enough info re: treatment	8,640	72.4	78.6	-6.2
Trust provider w/ care	8,943	68.1	83.3	-15.2
Office hours convenient	8,221	63.6	59.3	4.3
Knew medical history	8,563	57.9	69.6	-11.7
Staff cleaned hands	8,395	57.6	77.5	-19.9



Home Health Performance & Goals: July 2022

OME HEALTH CAHP	S # OF	SURVEYS	PERFORMAI	NCE	GOAL (CMS)
Overall Rating (0-10)		13	92.3% (>75	^{;th})	89% (75 th)
Home Health CAHPS Dime	nsions Table Questions Dashboard	Questions Table			
		HH CAHPS - D	Dimensions		
		Selected Timefra	me: Jul 2022		
Time Period S	itart Date	CCN	Benchmark	Benchmark Date	
Month 👻	7/1/2022	Kaweah Health Home Health	CMS HHCAHPS 75th Percentile	▼ Q2 2022	•
Dimensions	Previous Month	Current Score & Benchmark		Difference	
Care of Patient	91.1%	83.7%	92.0%	-7.4%	
Overall Rating of Care	92.0%	92.3%	89.0%	0.3%	
Provider Communication	88.4%	91.0%	89.0%	2.6%	
Specific Care Issues	92.2%	95.6%	88.0%	3.4%	
Would Recommend Agency	80.0%	84.6%	85.0%	4.6%	





Hospice CAHPS Performance & Goals: April-June 2022

HOSPICE	#	OF SURVEYS	PERFOR	GOAL (NRC)	
Overall Rating (0-10)		17	88.9%	90.7% (75 th)	
Hospice CAHPS Dimensions Table	Questions Dashboard	uestions Table			
		Hospice CAHPS	- Dimensions		
		Selected Timefra	me: 2022		
Time Period Start Da		CCN	Benchmark	Benchmark Date Q2 2022	•
Year • 4/1/200	~~	Kaweah Health Hospice	NRC 75th Percentile	▼ Q2 2022	Ť
Dimension	Previous Year	Current Score & Benchmark		Difference	
Getting Help for Symptoms	Null	80.7%	79.8%	+	
Getting Hospice Care Training	Null	83.7%	<mark>8</mark> 0.7%	→	
Getting Timely Care	Null	74.6%	84.1%	⇒	
Hospice Team Communication	Null	81.2%	86.4%	→	
Information Continuity	Null	87.5%	92.1%	→	
Overall Rating	Null	88.9%	90.7%	→	
Providing Emotional Support	Null	89.5%	94.9%	→	
Support for Religious and Spiritual Beliefs	Null	87.5%	96.8%	→	
Treating Family Member with Respect	Null	94.7%	94.5%	+	
Understanding the Side Effects of Pain Medication	Null	83.3%	81.7%	+	
Would Recommend	Null	89.5%	91.2%	+	





In-Center Hemodialysis CAHPS Performance & Goals: Spring 2022

IN-CENTER HEMODIALYSIS		# OF SURVEYS	PERFORMANCE	GOAL (Pres	GOAL (Press Gane	
Rate Center (()-10)	33	87.88% (>90 th)	86.7%	(90 th)	
Priority Inde	× 0			Access Solutions Start	ters	
PG Report Period: 6 Benchmark by: All R		Report Period: 12 months				
Current Order	Survey Type	Question	Percent	ile Rank Correlation		
1	CAHPS	Staff keep info about you private	13	0.47		
2	CAHPS	Staff give info re: problem at home	20	0.45		
3	CAHPS	Comfortable asking staff about care	57	0.54		
4	CAHPS	Doctors expl in way you understand	42	0.41		
5	CAHPS	Staff give info re: patient rights	42	0.4		
6	CAHPS	Staff discuss emergency disconnect	15	0.36		
7	CAHPS	Rate dialysis center staff 0-10	69	0.61		
8	CAHPS	Doctor/staff discuss best treatment	37	0.38		
9	CAHPS	Staff behave in professional manner	73	0.74		
10	CAHPS	Involved in choosing treatment	30	0.33		



Emergency Department Performance & Goals: July – August 2022

	Emergen	cy Department	# OF SURVEYS	PERFORMANCE	GOAL
	Overall Rating (0-5)		951	3.3	4.0
	ate Range: 7/01/2022 → 08/31/2	2022	Root Cause Anal	lytics	
C	ATEGORIES			INSIGHT	
÷	2ª	Patient Care >Quality of Care	222 (41.00%) Positive Insight(s)	Total Insight(s) 542 (31.50%)	312 (57.60%) Negative Insight(s)
ŧ		Clinical Staff (Nurse/Therapist/NP/PA etc) > Bedside_Manner	187 (55.20%) Positive Insight(s)	Total Insight(s) 339 (19.70%)	149 (44.00%) Negative Insight(s)
ŧ	e	Access >Getting Timely Care	16 (11.30%) Positive Insight(s)	Total Insight(s) 141 (8.20%)	122 (86.50%) Negative Insight(s)
ŧ		Non-Clinical Staff >Attitude	188 (60.30%) Positive Insight(s)	Total Insight(s) 312 (18.10%)	120 (38.50%) Negative Insight(s)
÷	8	Providers (Physician) >Bedside Manner	241 (77.50%) Positive Insight(s)	Total Insight(s) 311 (18.10%)	67 (21.50%) Negative Insight(s)
Ŧ	Q	Facilities And Environment >Cleanliness	8 (13.30%) Positive Insight(s)	Total Insight(s) 60 (3.50%)	50 (83.30%) Negative Insight(s)

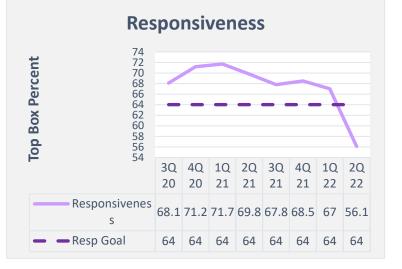


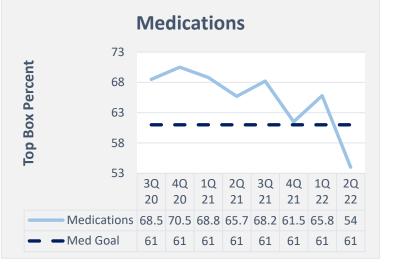
Hospital CAHPS Performance & Goals: July 2022

Hospital CAHPS	# of SURVEYS	Overall Rating (Goal TBD)	Nurse Communication (Goal 79% CMS 50th)	Doctor Communication (Goal 79% CMS 50th)
All Units	134	63.4% (<50 th)	70.9% (<50 th)	72.9% (<50 th)
Broderick Pavilion	15	80.0%	95.6%	88.9%
2 South	13	76.9%	61.5%	65.6%
MB – Labor & Delivery	19	68.4%	80.5%	92.9%
3 North	6	66.7%	66.7%	61.9%
3 South	11	63.6%	72.2%	61.9%
4 South	11	63.6%	62.7%	81.8%
4 Tower	21	61.9%	69.8%	71.0%
4 North	8	37.5%	62.5%	47.6%
2 North	8	37.5%	54.2%	66.3%

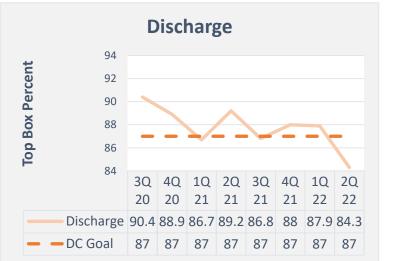


Hospital CAHPS Trends

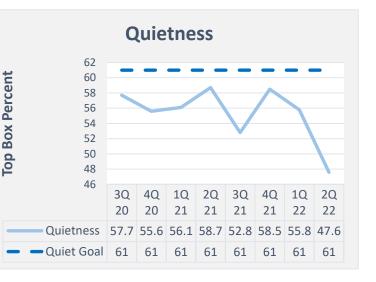








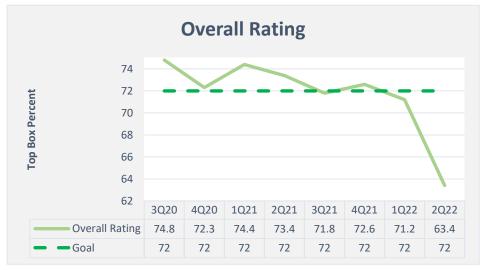






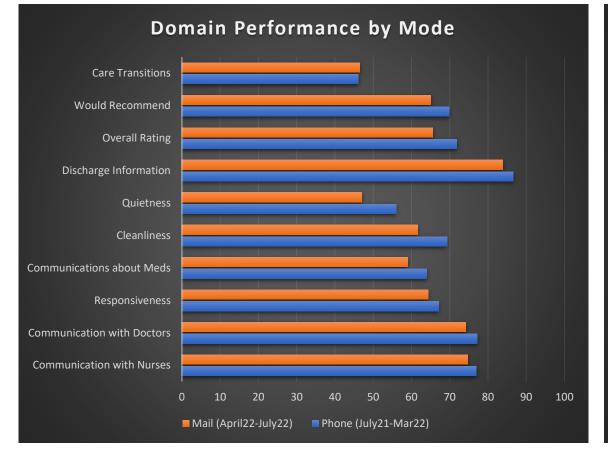
Hospital CAHPS Trends

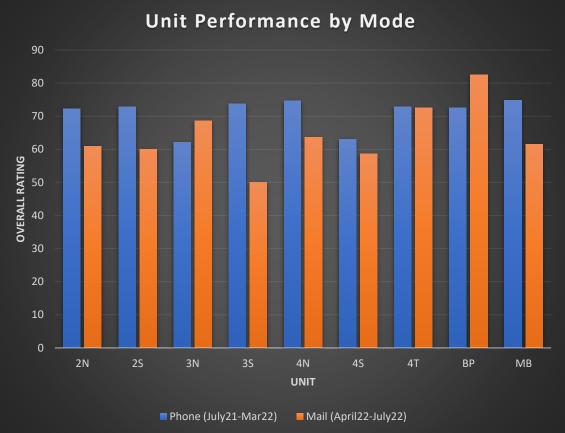






HCAHPS Performance by Mode







Patient Surveying Discussion

Option 1: Change mode of HCAHPS Surveying to phone

Option 2:

- A. Move HCAHPS surveying from 2000 to 300 (CMS minimum) results per year.
- B. All other patients would receive real-time surveys with questions pertaining to care transition and patient experience
- C. Benefits of real-time surveying:
 - Greater volume of responses
 - More timely feedback
 - More detailed feedback
 - Alerts for patient follow-up and service recovery
 - Decrease readmissions
 - > More rapid evaluations of initiatives leading to quicker adjustments
- D. Challenge of real-time surveying:
 - > Bandwidth of leaders to follow up on patient needs / concerns



Positive Patient Comments – HCAHPS (July 2022)

I would like to thank all the nurses that were their the day of my visit. Some of them were Amy (Saft), Araceli (Moreno Toscano), & Maria. I'm sorry I can't remember the rest of the nurses' names, but thank you all. you were excellent and gave me the best care. Thank you for saying a prayer for me. -LD Patient

Everyone was so nice, caring, professional, & knowledgeable. Special thank you to **Angela (Rosati)** RN @ CVICU - she's an angel, **Dr. Akinjero, Dr. Sharma** from cath lab, Pastor **Mark (Wilson)**. They are all wonderful amazing people! Made my very sick husband stable before transferring to a higher level of care facility. They kept him alive. –CVICU Patient's wife

I had a great experience during my stay. The L&D team was amazing. My nurse Anamarie (Mclean) took great care of me. Erin (Hawkins) CRNA was wonderful & listened to my concerns. The surgical tech (Shonya Paredez) was very caring. Dr. Bosman & Rita (Barron) made me feel safe during my c-section. -MB Patient

Department Spotlight – Rehabilitation PPT



Rehab Patient Experience Board Presentation 2022

Kaweah Health Rehabilitation Hospital

Patient Experience

Kaweah Health Rehabilitation Hospital

More than medicine. Life.

Kaweah Health





Staff Engagement and Support







Some Fyn!!

REHAB WEEK SEPT 19 - 23 Mon Scavenger Hunt/Bingo Fue - Superheroes in Rehab Clay of the Superheroes in Rehab Superheroes in Rehab Clay of the Superheroes in Rehab Superheroes



Money is not the only thing that motivates employees. It's about making them happy.













https://www.facebook.com/watch/?v=838872930437194





- Meet the Volley Lamas!!!!
- Baseball night
- Maroon Mondays
- Tie Dye Thursdays
- Friendly Competitions







Special Occasions









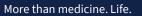


















Promoting Staff Growth & Development

- Rehab Therapy Mentoring Program
- Nursing /Therapy Orientation and Training
- Nursing Super-user Training
- Lunch and Learns
- Nursing UBC
- Therapy Journal Club and In-services
- Employee of the Quarter Recognition



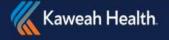












Interdepartmental Communication

- Rehab Newsletter
- Nursing, Therapy, MD, CM communications at Daily Huddles
- Nursing and Therapy Phones





Patient Experience and Engagement

- Halloween Dress Up and Candy Distribution to Patients
- Mid Stay Surveys
- Service Dogs and Therapy Dogs







Performance Improvement

- PI Results
 - Goal Board
 - Stakeholder feedback cards

Things you like:

Thank you for being our patient. We hope you like the quality of care at Kaweah Health Rehabilitation Hospital. Please tell us about your experience here.

Kaweah Health Rehabilitation Hospital	Things we can do b

More than medicine. Life. 840 S. Akers Street, Visalia, CA 93277 - (559) 624-3700

Things we say	a da hattari		
Things we car	i do better:		

After your discharge, you will receive a satisfaction survey in the mail. We would like to thank you in advance for taking the time to complete and return the survey.





Advanced Technology

- Safe Gait
- Safe Gait Research Project







Patient with Grace Perry, OT participating in Tie Dye Thursday



Healing our Own



https://www.facebook.com/kaweahhealth/videos/465191854909462



https://fb.watch/fQnHJcETrh/







Live with passion.

Health is our passion. Excellence is our focus. Compassion is our promise.

