

August 22, 2022, 10:00AM-11:00AM

Connect and Transparency: Programs used together to enhance communication for patients

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Director, Patient Experience

Janice Finder, RN, MSN
Executive Director, askMDAnderson



Program Description & Objectives

Program Description:

The University of Texas MD Anderson Cancer System has been able to take two programs, Transparency Star Ratings and the Discharge Phone Call program Connect to improve communication scores and enhance the patient experience. Cancer can be complicated. You will learn through this presentation how to initiate programs, monitor metrics, and share tools inpatient and outpatient to improve metrics across the care continuum that enable staff and providers improve their communication and recognize their patients concerns. These programs work if there is an ongoing education and awareness of what patients are saying and how to best convey to the care team.

Learning Objectives:

1. Utilization of a tool kit for discharge phone call alerts to improve patient experience scores and to enhance communication
2. Identify steps to change the culture and to socialize transparent patient satisfaction provider star ratings and comments
3. Identify the steps to operationalize provider star ratings and comments



The University of Texas MD Anderson Cancer Center

One of the world's most respected centers devoted exclusively to cancer patient care, research, education and prevention

MISSION

- To eliminate cancer in Texas, the nation, and the world through outstanding programs that integrate **patient care**, **research** and **prevention**, and through **education** for undergraduate and graduate students, trainees, professionals, employees and the public.

VISION

- We shall be the premier cancer center in the world, based on the excellence of our people, our research-driven patient care and our science. We are Making Cancer History®.

CORE VALUES

- Caring
- Integrity
- Discovery
- Safety
- Stewardship



FY21 MD Anderson Cancer Center



147.1K
Patients



1.5M
Outpatient Visits



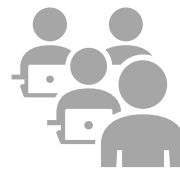
\$314M
Donated Care



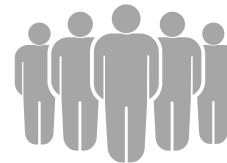
\$1.03B
Spent on Research



9.6K
Clinical Trials



4.8K
Trainees



22K
Employees



National Recognition



Star Ratings Transparency Agenda

- **Background, rationale, & goals**
- Socializing the concept and changing the culture
- Operationalizing provider patient satisfaction star cards
- Sustaining transparency:
 - Patient satisfaction survey provider comments review and appeals process
 - Faculty web page
 - Operational key components
 - Internal communications
 - NRC client communications
- Metrics



Rationale and Goals: Public Posting of Provider Star Rating

Provider Patient Satisfaction Score Transparently Drives improvement

- 20-30% better CAHPS scores
- Improves quality and safety scores
- CMS is driving transparency through star ratings;
 - HCAHPS star ratings online (hospitalcompare.gov) and other CAHPS surveys on horizon

Opportunity to control “the message”

- ~70% of patients “research” doctors on the Internet
- Competition in currently leveraging transparency to attract patients

Publishing Goal of Patient – Providers Comments

- Exemplifies transparency internally/externally
 - Builds trust and credibility with Providers and Patients
 - Comments are not edited nor will responses to a comment be posted



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Socializing the Concept and Changing the Culture

- Star Rating Transparency Road Shows
- Internal Transparency - Provider Reports emailed to providers
 - Q1 & Q2 - Providers only
 - Q3 - Providers and one-up
 - Q4 - Providers, one-up, and department
- External Transparency - Posting Star Cards on public website



Socializing Star Rating Transparency: Road Shows

Department Faculty – Completed

1. Breast Medical Oncology
2. Breast Surgical Oncology
3. Cardiology
4. Clinical Cancer Prevention
5. Dermatology
6. Division Heads and Administrators
7. Emergency Medicine
8. Endocrine Neoplasia and HD
9. Gastroenterology, Hepatology, Nutrition
10. General Internal Medicine
11. General Oncology
12. GI Medical Oncology
13. Gynecologic Oncology
14. Head & Neck Surgery
15. Infectious Disease
16. Investigational Cancer Therapeutics
17. Leukemia
18. Lymphoma/Myeloma
19. Neuro-Oncology
20. Neurosurgery
21. Orthopaedic Oncology
22. Pain Medicine
23. Pediatrics – Patient Care
24. Plastic Surgery
25. Pulmonary Medicine
26. Psychiatry
27. Radiation Oncology
28. Sarcoma Medical Oncology
29. Stem Cell Transplant (SCT)
30. Surgical Oncology
31. Thoracic & Cardiovascular Surgery
32. Thoracic/Head & Neck Medical Onc

Department Faculty – Scheduled

1. Genitourinary Medical Oncology
2. Melanoma
3. Urology

Other

1. Division Head Meeting
2. Senate Faculty
3. Surgical Oncology APPs



Road Show: Sharing with Providers Current Web URL

Google search for "dr. randal weber" showing search results and a detailed profile for Dr. Randal S. Weber, MD.

Dr. Randal S. Weber, MD
 Doctor in Houston, Texas · 0.2 mi
 Address: 1515 Holcombe Blvd, Houston, TX 77030
 Phone: (713) 792-6920

Reviews from the web:

Source	Rating	Number of Reviews
Healthgrades	3.3/5	6 reviews
WebMD Physician Directory	5/5	2 votes
Vitals.com	4.6/5	9 votes

Summary Callouts:

- 3.3/5 based on 6 reviews (Healthgrades)
- 5/5 based on 2 reviews (WebMD)
- 4.6/5 based on 9 reviews (Vitals)

Google search for "roy smith orthopedics" showing search results and a detailed profile for Dr. Roy Bascom Smith MD.

Dr. Roy Bascom Smith MD
 Orthopedic surgeon in Houston, Texas
 Address: 6550 Fannin St ste 2600, Houston, TX 77030
 Phone: (713) 790-1818

Reviews from the web:

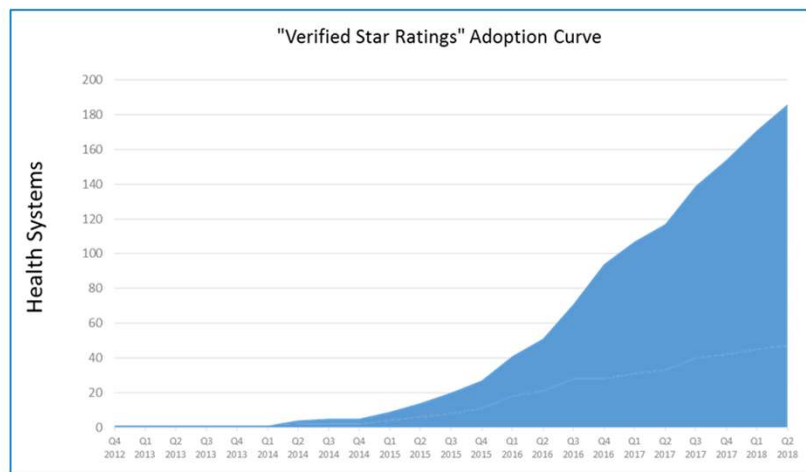
Source	Rating	Number of Reviews
Methodist	4.7/5	354 reviews

Summary Callouts:

- 4.7/5 based on 354 reviews (Methodist)



Road Show: Patient Experience Transparency in Healthcare



healing happens here.








Road Show: Comparing MD Anderson Star Ratings to Other Online Provider Ratings

JCO® Oncology Practice
An American Society of Clinical Oncology Journal

Accepted for publication in JCO Oncology Practice

Comparison of Internal Patient Satisfaction Scores at a Cancer Center with Star Ratings on Online Physician Rating Websites

Michael [Frumovitz](#), Catherine Kim, Gary Chisholm, Abby [Bevolo](#), Beverly Shelton, Leslie Kian, Carol Lewis, Elizabeth Garcia, Randal Weber

	 Star Ratings				
n^1	510	379	272	263	128
Score (mean)	4.86	4.23	4.2	4.3	4.58
Number Surveys (median)	49.5	7	7	4	2
Faculty w/ score < 4	0%	19%	16%	14%	4%
Faculty ²					
MDACC Score Higher		70%	69%	47%	22%
MDACC Score Lower		12%	13%	20%	39%
MDACC Score Same ³		17%	18%	32%	38%

¹ Only faculty with ≥ 30 PG surveys included | ² Denominator is total faculty with a score on website | ³ +/- 0.1



Data Transparency – Guiding Principles

- Balance patient experience with provider experience
 - Includes engagement and resiliency
- Focus on the positive (rewards and recognition, learning from high performers)
 - Transparency is not punitive. It is about self awareness
- Resources for improvement
 - Service Excellence Program and Evidence-Based Best Practices
- Use progressive approach towards data transparency



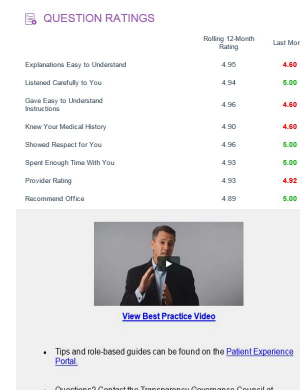
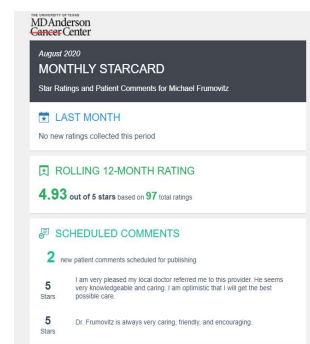
Internal Transparency – The Transition

Provider Dashboard Reports

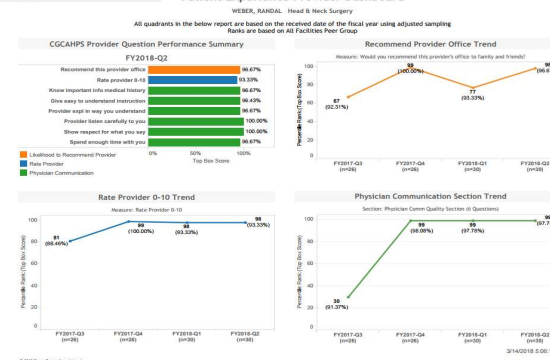
- Provider dashboard reports were distributed quarterly
March 2018 - June 2019
- ✓ Email sent June 2019 to clinical and department leadership announcing StarCards

Provider StarCard Transparency Timeline:

- Providers in GYN and H&N received StarCards July 01, 2019
- All eligible providers received StarCards August 01, 2019
- Providers one-up received StarCards February 2020
- All providers in department received all provider star cards June 2020
- Publishing to external website October 01, 2020



Patient Experience Provider Dashboard



Understanding the Data Source

- Based on CGCAHPS* survey
 - Ambulatory patient experience surveys that contains questions about their providers
 - Surveys sent to patients who have outpatient provider appointments:
 - New patients
 - Consults
 - Follow ups
- ~ 800

* CG-CAHPS (Clinician & Group – Consumer Assessment of Healthcare Providers and Systems)



Star Ratings Transparency Agenda

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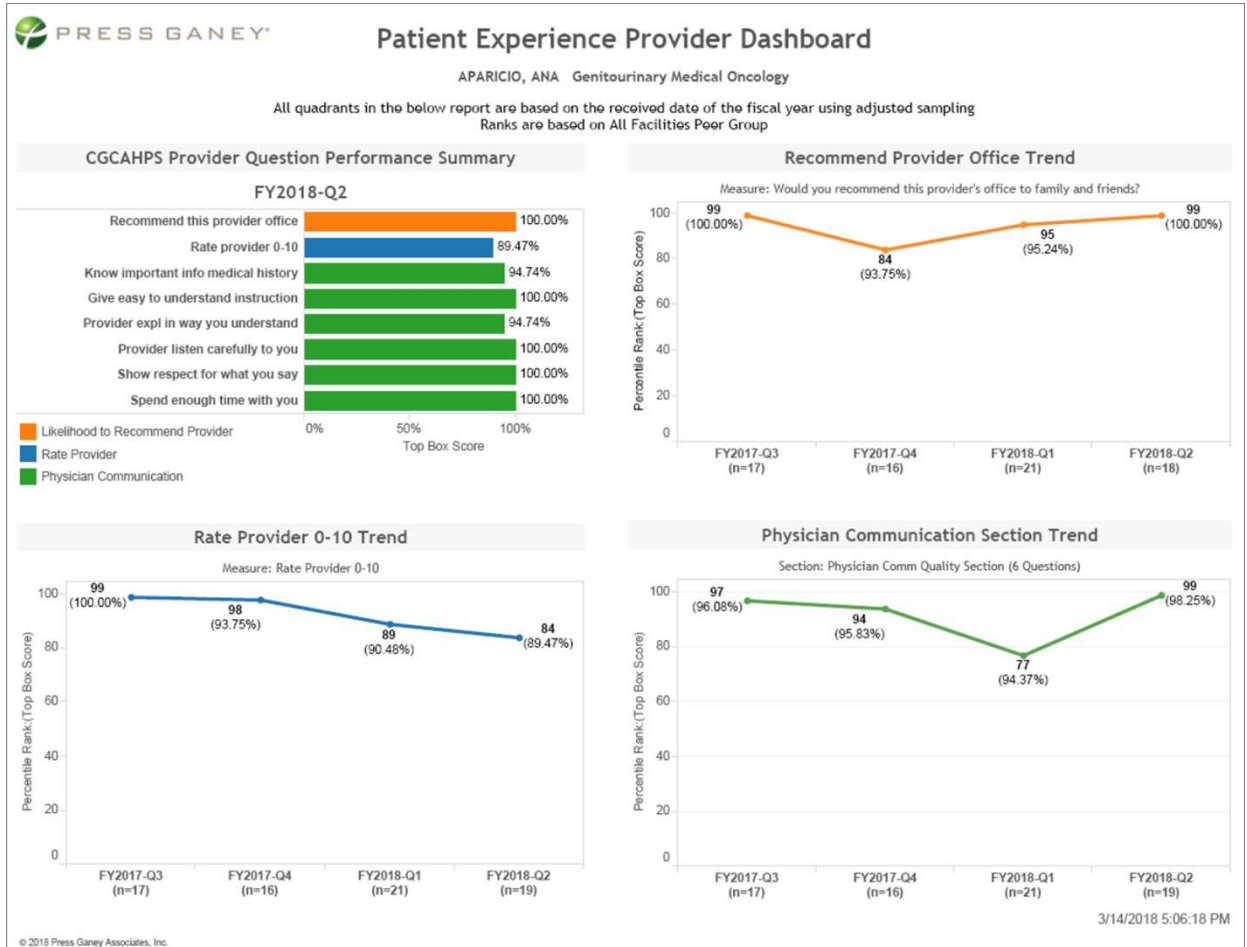


Operational Plan

- Internal Posting
- Vendor selection process
- Contract process
- Transparency Governance
- Develop SOP to manage patient survey comments
- Post Star Ratings, Summary Scores, Comments
- Externally



Internal Transparency: Individual Provider Report



Internal Provider Report – Patient Comments

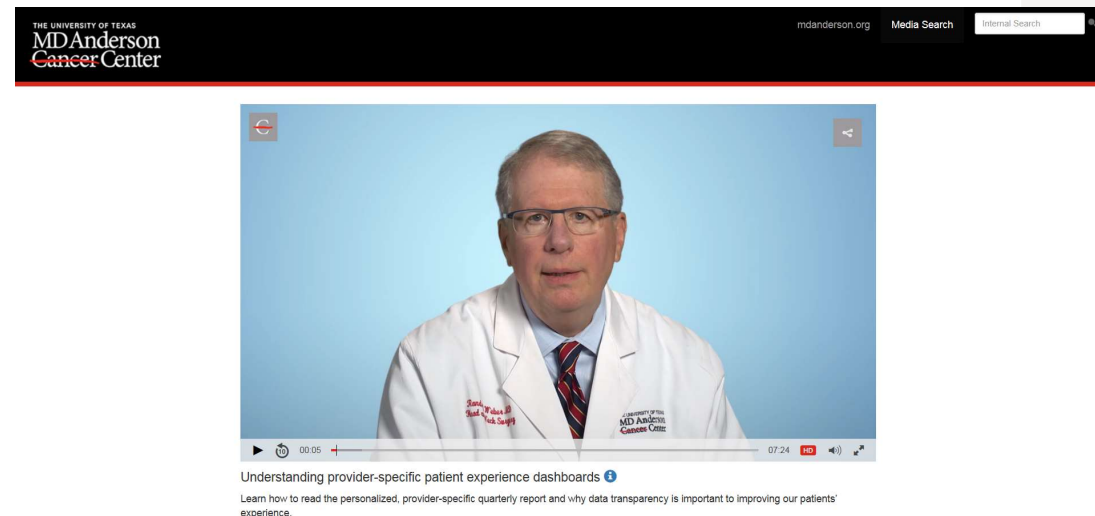
- Surveys includes space for patients to write comments
- Comments are a rich source of information that may indicate more specifics about positive or negative experiences
- All comments (positive, negative, mixed, neutral) are included

Patient Comments			
Dr. Test Provider	February 12, 2018	146488903	Dr. Provider is a wonderful physician. I have great confidence in her.
	February 1, 2018	145470054	Truly feel that I'm in excellent hands!
	January 30, 2018	145251173	The recommended treatment is very harsh but there was no discussion about how it whether I can handle it based on my other health issues. now in trying to find a doctor at another hospital to get them to explain pros and cons based on my current health problems.
	January 16, 2018	143801705	Dr. Provider was wonderful. Very clear. I very much appreciated her candor and anticipation of my concerns. Her explanations were thoughtful, well informed and empathetic. I was very pleased.

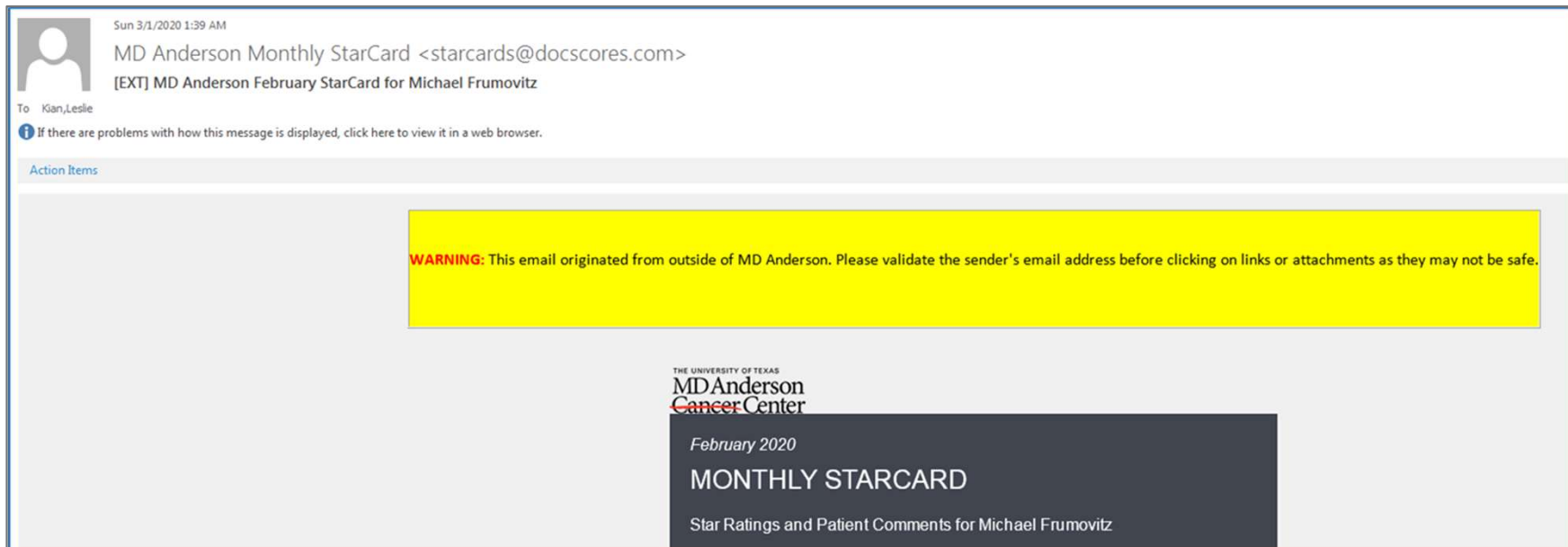


Internal Individual Provider Report – Plan

- Communications plan includes road shows, emails, and article(s)
- Emails sent with reports include:
 - Link to video explanation of rationale and interpretation
 - Resources available for improvement
 - Contact information for questions




Email Delivery of the StarCard to Providers



Sun 3/1/2020 1:39 AM

MD Anderson Monthly StarCard <starcards@docscores.com>
[EXT] MD Anderson February StarCard for Michael Frumovitz

To: Kian, Leslie

 If there are problems with how this message is displayed, click here to view it in a web browser.

Action Items

WARNING: This email originated from outside of MD Anderson. Please validate the sender's email address before clicking on links or attachments as they may not be safe.

THE UNIVERSITY OF TEXAS
MDAnderson
Cancer Center

February 2020
MONTHLY STARCARD
Star Ratings and Patient Comments for Michael Frumovitz



Report Access to Clinical and Department Leadership

- Using secured Patient Experience SharePoint site
- All reports within secured site available

The screenshot shows the MD Anderson Cancer Center Patient Experience Portal. The header includes the MD Anderson Cancer Center logo and navigation links for Divisions, Departments, Communities, and External Sites. The main content area features the title "Patient Experience Portal" and four icons representing communication, time, medical care, and administrative processes. Below the icons are five thumbnail images representing different report categories: Patient Satisfaction Reports, Surveys, & ; Patient and Family Advisor Program; Patient & Family Centered Care; Calendar; and Administrative Reports. The "Administrative Reports" thumbnail is highlighted with a dashed orange circle. At the bottom, there is a contact email address: PatientExperience@mdanderson.org. The footer includes social media links and the copyright notice: © 2013 MD Anderson Cancer Center.



Components of the StarCard

- Providers emailed StarCard 1st of each month
- Star Ratings:
 - Last month rating
 - Rolling 12-month rating
- Scheduled Comments
 - Previous month
- Question Ratings:
 - CGCAHPS questions
- Footer contains links to:
 - Best Practice Video
 - PX Portal Resources
 - Contact us: StarTransparency@mdanderson.org
 - Appeal Form with publishing guidelines and instructions
 - Note:** Everyone with CGCAHPS surveys will receive a StarCard; only those with a 30+ surveys will be published

THE UNIVERSITY OF TEXAS
MD Anderson
Cancer Center

August 2020
MONTHLY STARCARD
Star Ratings and Patient Comments for Michael Frumovitz

LAST MONTH
No new ratings collected this period

ROLLING 12-MONTH RATING
4.93 out of 5 stars based on **97** total ratings

SCHEDULED COMMENTS
2 new patient comments scheduled for publishing

5 Stars I am very pleased my local doctor referred me to this provider. He seems very knowledgeable and caring. I am optimistic that I will get the best possible care.

5 Stars Dr. Frumovitz is always very caring, friendly, and encouraging.

QUESTION RATINGS

	Rolling 12-Month Rating	Last Month
Explanations Easy to Understand	4.95	4.60
Listened Carefully to You	4.94	5.00
Gave Easy to Understand Instructions	4.96	4.60
Knew Your Medical History	4.90	4.60
Showed Respect for You	4.96	5.00
Spent Enough Time With You	4.93	5.00
Provider Rating	4.93	4.92
Recommend Office	4.89	5.00

View Best Practice Video


- Tips and role-based guides can be found on the [Patient Experience Portal](#).
- Questions? Contact the Transparency Governance Council at startransparency@mdanderson.org.
- Want to exclude a comment? Submit a formal request by the last business day of the current month and you will receive a response to your appeal within 7 days of the next Transparency Governance Council meeting. The Council will evaluate your appeal based on approved [Comment Publishing Guidelines](#). To request an appeal [Click here](#).
- Please Note: Providers with less than 30 total surveys will receive a star rating, however will not be published externally.

Powered by NRC Health



StarCard Comments

- Comments are processed using exclusion criteria
- Vast majority of comments are positive; negative comments do occur
- Comments are posted on a rolling 12 months basis
- Comments can be appealed and reviewed by the Transparency Governance Council

 SCHEDULED COMMENTS

17 new patient comments scheduled for publishing

5 Stars
very good experience

5 Stars
I was not in pain, but he would've taken care of it had I been. I've been coming to him since 2013 and have always been thrilled with him, his staff, and my care.

5 Stars
I am currently in the beginning stage of care with my Care Provider. in terms of expectations in this step by step process, I have been made aware of and results discussed with me in an understandable manner. He recognizes my concerns and takes the time to help me understand from an overall perspective.

3 Stars
not impressed with doctor.

5 Stars
An excellent experience.

5 Stars
I actually never saw Dr. Frumovitz but was seen by his PA, Lindsey. Since I had so recently completed my treatments, I would have liked to have been seen by Dr. Frumovitz as well but his PA was thorough in asking her questions and completing my exam.

5 Stars
Dr. Frumovitz is just tops in his field. Nothing else can be said. He KNOWS gynecological cancer and he KNOWS how to treat it. I just love him!



Comment Review Process

1. NRC Health
 - Conducts 2-step review based on MDA exclusion/inclusion criteria
2. Transparency Comment Review WorkGroup
 - PX Transparency + Patient Advocacy reviews flagged comments
3. Individual providers receive their StarCard
 - Review scheduled comments and may appeal a comment
4. Transparency Governance Council (TGC)
 - Reviews appeals and unresolved comments and determines final TGC disposition
5. Patient Experience Leadership
 - 1:1 Discussion Upon Request



StarCard Comments Exclusion Criteria

- Profanity, defamatory, slanderous, derogatory or libelous statements
 - e.g. jerk, stupid, dumb, bully
- Service alert
 - e.g., death of patient, malpractice errors, threat of lawsuit, HIPAA/compliance violation, mention of violence/suicide, direct request to be contacted in comment
- Patient seen by provider other than surveyed provider with an unknown association
- Positive / negative comments meant for another provider
- Retiring / leaving providers
- Comments not relevant to care, treatment or communication with provider
 - e.g. parking, billing, scheduling, receptionist in another area, no pain, patient requested contact
- Comments about provider's appearance, personal attribute
 - e.g. accent, good looking, overweight, family, martial status
- Direct provider quotes
- Reference to survey instrument
 - e.g., N/A; too long



Star Ratings Transparency Agenda

- Background, rationale, & goals
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- **Sustaining transparency:**
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- Metrics



Sustaining Transparency

- Patient Satisfaction Survey Provider Comments Review
 - (MDACC and NRC)
- Appeals Process
- Faculty Web Page
- Operational Updates
- Internal Communications
- NRC-Client Communications



Patient Comments - Considerations/Advice

- Publishing favors patient experience/perception of interaction
- May not reflect true interaction (or your perception)
- Avoid focus on single negative comment
- Comments removed on web after 12 months
- Think of Yelp or Amazon reviews
 - Would one negative comment of a highly rated/reviewed restaurant sway you?
 - If multiple negative comments, reflection may be needed
- Patient Experience Portal provides provider resources
- Remember your team is an extension of you
- Set patient expectations of what visits provider will attend
- Coach team members
- Encourage patients to complete surveys to increase # of surveys



Provider Comment Appeals Process

- Appeals Form available on the Provider StarCard with instructions regarding completion
- One Comment Appeal Form is required for each comment
- Provider has 30 days to submit Comment Appeal Form to TGC
- Final disposition of comment determined by TGC
- Provider notified via email of final comment disposition

MD Anderson Provider Transparency Program Comment Appeal Form

Today's Date:

Provider First Name * Provider Last Name *

Provider Email Address * Provider Call-Back Number *

startransparency@mdanderson.org

Date of Comment: *

Please copy and paste the comment text here: *

Why do you feel this comment should be reviewed? *

The comment contains PHI

The comment contains profanity

The comment is libelous/defamatory

Other

Provide any additional feedback regarding why you believe this comment should be excluded:

Please submit your appeal form by the last day of the current month. You will receive a response within 7 business days of the next Transparency Governance Council meeting.



Transparency Governance Committee [TGC]

Membership

- Chair
 - Professor, Gynecologic Oncology & Reproductive Medicine
 - Chief Patient Experience Officer, ad interim

- Vice-Chair
 - Professor, Head and Neck Surgery
 - Associate Chief Patient Experience Officer

Clinical/Faculty

- Surgery
Assistant Professor, Surgical Oncology (HALS)
- Cancer Prevention
Associate Professor, Clinical Cancer Prevention
- Medical Oncology
Assistant Professor, Gastrointestinal Medical Oncology
- Pediatrics
Associate Professor, Pediatrics
- Radiation Oncology
Professor, Radiation Oncology
- Internal Medicine
Associate Professor, Infectious Disease

Administrative

- Internal Communications
Program Director, Communication
Executive Director, Strategic Communications
- Risk Management
Risk Manager, Legal Services
Legal Officer, Legal Services (Alternate Contact)
- Public Relations
Executive Director, Public Relations
- Patient Advocacy
Operations Manager, Patient Advocacy
- Advanced Practitioner Provider (APP)
APP, Endocrine Neoplasia and HD



External Transparency: Faculty Profile Webpage

Michael M. Frumovitz, M.D., M.P.H., FACOG
 Department of Gynecologic Oncology and Reproductive Medicine, Division of Surgery

About Dr. Frumovitz
 After graduating from the MD Anderson Gynecologic Oncology fellowship, Dr. Frumovitz was awarded the prestigious Fulbright Scholarship to pursue advanced laparoscopic training for the treatment of gynecologic malignancies in Lille, France. He...

Request an Appointment
 Whether you are ready to make an appointment now or have questions for our expert team, we are standing by to help.

Honors & Awards

Professional Memberships

Selected Publications

Patient Reviews
 3.8/5 Overall Rating (30 reviews) *Understand Star Ratings*

★★★★☆ 3.8/5 Explanations Easy to Understand	★★★★☆ 3.8/5 Showed Respect for You
★★★★☆ 3.8/5 Listened Carefully to You	★★★★☆ 3.8/5 Spent Enough Time With You
★★★★☆ 3.8/5 Gave Easy to Understand Instructions	★★★★☆ 3.8/5 Provider Rating 9 - 10
★★★★☆ 3.8/5 Knew Your Medical History	★★★★☆ 3.8/5 Would Recommend Provider's Office

Comments (15)
 July 31, 2019
 Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed diam nonummy nibh euismod tincidunt ut laoreet dolore magna aliquam erat volutpat. Ut wisi enim ad minim veniam, quis nostrud exerci tation ullamcorper suscipit lobortis nisl ut aliquip ex ea commodo consequat. Ut wisi enim ad minim veniam, quis nostrud ... continue reading

Read more

Sustainability: Operational Key Components

Dedicated team to project: 3 FTE

IT Liaison for IT questions, issues, continuity of changes made on MD Anderson side

Chief Patient Experience Officer – champion and on Appeals Committee

NRC: key is client/vendor relationship
Clear, consistent communications during project build and after for sustainability



Sustainability: Internal Communications

- Internal Communications liaison – keeps awareness of program
 - Clinical Minute
 - Inside MD Anderson
 - Employee Notes
- Key to socializing star card transparency and recognizing top performers



Sustainability: NRC-Client Communications

- Weekly meetings first two years
- Twice a month meetings after year two
 - Action log excel updated by NRC team
 - MD Anderson: Director/Project Director/Project Manager/ Project Coordinator
 - NRC: Account Representative/ IT Manager/ Project Director



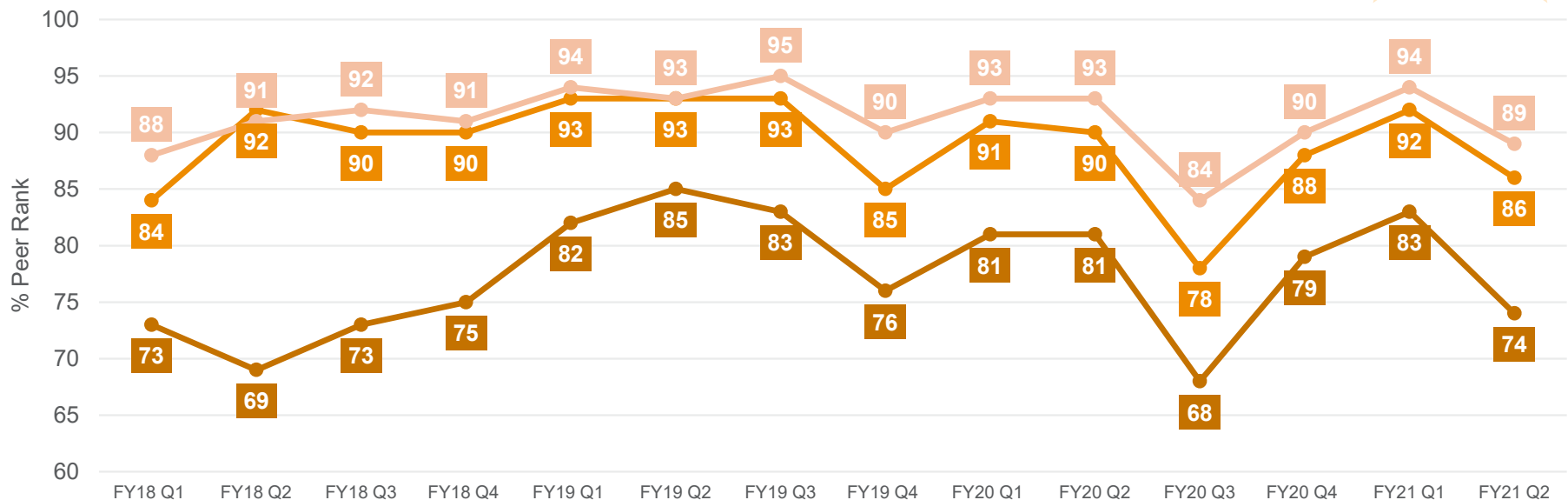
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- **Metrics**



Metrics: Physician Communication Question

4.87/5
Average
Star Card
Rating



Individual Provider Reports Initiated

● Physician Communication
● Recommend this Provider Office
● Rate Provider 0-10



Survey Questions and CAHPS Conversion Chart

CGCAHPS Questions	Response
Did this provider explain things in a way that was easy to understand?	Yes definitely, Yes somewhat, No
Did this provider listen carefully to you?	Yes definitely, Yes somewhat, No
Did you talk with this provider about any health questions or concerns?	Yes, No
Did this provider give you easy to understand information about these health questions or concerns?	Yes definitely, Yes somewhat, No
Did this provider seem to know the important information about your medical history?	Yes definitely, Yes somewhat, No
Did this provider show respect for what you had to say?	Yes definitely, Yes somewhat, No
Did this provider spend enough time with you?	Yes definitely, Yes somewhat, No
Would you recommend this provider's office to your family and friends?	Yes definitely, Yes somewhat, No
For this question please listen very carefully as you will be using a scale from 0 to 10 and it is very important that we get an accurate response from you.	
Using any number from 0 to 10, where 0 is the worst provider possible and 10 is the best provider possible, what number would you use to rate this provider?	0-10
Please tell us about your experience with this provider.	Open Question

Questions Response Scale (p=11)	Star Rating Conversion
10 (r=11)	5 Stars
9 (r=10)	4.6 Stars
8 (r=9)	4.2 Stars
7 (r=8)	3.8 Stars
6 (r=7)	3.4 Stars
5 (r=6)	3 Stars
4 (r=5)	2.6 Stars
3 (r=4)	2.2 Stars
2 (r=3)	1.8 Stars
1 (r=2)	1.4 Stars
0 (r=1)	1 Stars
Questions Response Scale (p=3)	Star Rating Conversion
Yes, Definitely (r=3)	5 Stars
Yes, somewhat (r=2)	3 Stars
No (r=1)	1 Stars
Questions Response Scale (p=4)	Star Rating Conversion
Always (r=4)	5 Stars
Usually (r=3)	3.66 Stars
Sometimes (r=2)	2.33 Stars
Never (r=1)	1 Stars



Survey Questions and Star Ratings

Linear Conversion:

Provider question responses are linearly converted to a 5-point scale based on monthly and rolling 12-month data

QUESTION RATINGS

	Rolling 12-Month Rating	Last Month
Explanations Easy to Understand	4.93	5.00
Listened Carefully to You	4.95	5.00
Gave Easy to Understand Instructions	4.97	5.00
Knew Your Medical History	4.85	5.00
Showed Respect for You	4.97	5.00
Spent Enough Time With You	4.97	5.00
Provider Rating	4.91	4.87
Recommend Office	4.97	5.00

CAHPS Conversion Chart

Questions Response Scale (p=11)	Star Rating Conversion
10 (r=11)	5 Stars
9 (r=10)	4.6 Stars
8 (r=9)	4.2 Stars
7 (r=8)	3.8 Stars
6 (r=7)	3.4 Stars
5 (r=6)	3 Stars
4 (r=5)	2.6 Stars
3 (r=4)	2.2 Stars
2 (r=3)	1.8 Stars
1 (r=2)	1.4 Stars
0 (r=1)	1 Stars
Questions Response Scale (p=3)	Star Rating Conversion
Yes, Definitely (r=3)	5 Stars
Yes, somewhat (r=2)	3 Stars
No (r=1)	1 Stars
Questions Response Scale (p=4)	Star Rating Conversion
Always (r=4)	5 Stars
Usually (r=3)	3.66 Stars
Sometimes (r=2)	2.33 Stars
Never (r=1)	1 Stars



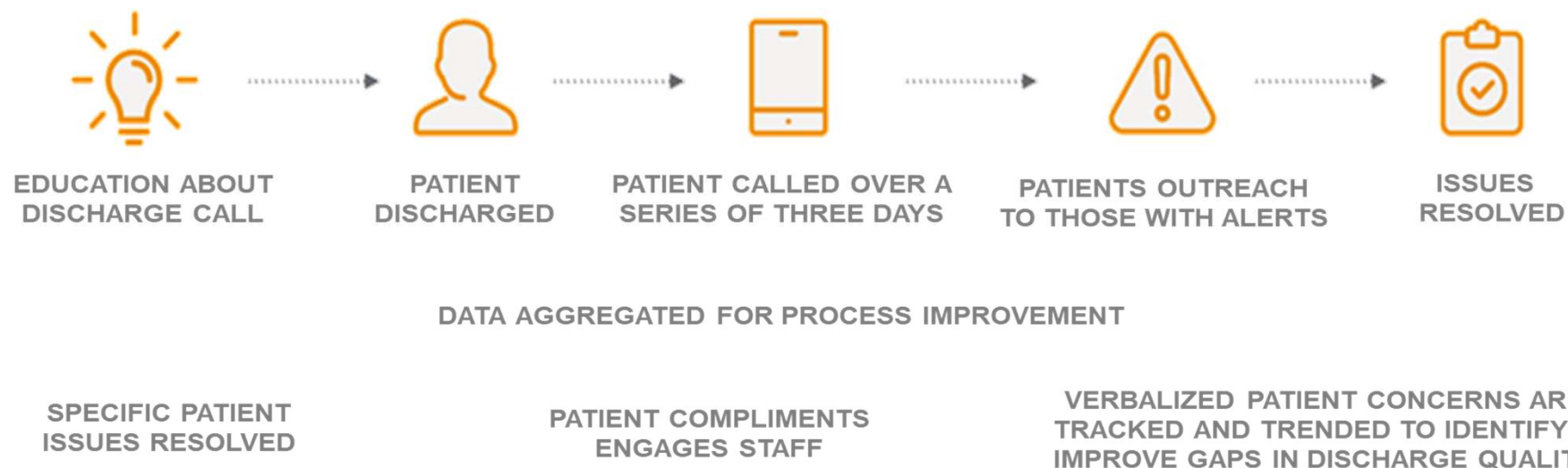
Connect:
Post Discharge
Phone Call
Agenda

- **Program Overview & Goals**
- Avenues to increase patient participation
- Decreasing alert frequency
- Unit Report Review
- Unit Outcomes



Discharge Phone Calls

A Standardized Process Across MD Anderson



Discharge Phone Call Survey

Inpatient Discharge Call Script (Adult)

Questions in BOLD may trigger an Alert based on Patient/Caregiver response noted in ORANGE.

Hello, this is [Alpha Hospital] calling about your recent visit. Is this [patient name]? Please say yes or no.

We want to ensure your transition home was safe and the care you received while at our facility was excellent. We need you to take just a minute or two to answer a few brief questions. Let's get started.

Since you left the facility, would you say your health is better, **worse**, or about the same?

Do you have any questions about your follow up process or care instructions that we have provided? Say **yes** or no.

When you were discharged, were you prescribed any new medications? Say yes or no.

(If 'yes') Were you able to get your prescriptions filled? Say yes or no.

(If 'no') Is there any reason you might not be able to fill your new prescriptions? Say **yes** or no.

Do you have any questions about any of your medications? Say **yes** or no.

Has your follow-up appointment been scheduled? Say yes or no.

Do you have any questions about any of your follow-up appointments? Say **yes** or no.

Are you satisfied with the quality of care you received at the facility? Say **yes** or no.

(If no 'alert' triggered) At this time, do you need a nurse to contact you regarding any other concerns? Say **yes** or no.

Last question!

We like to recognize any employee or doctor who did an excellent job for you while you were in the facility. Are there any employees or doctors you'd like to recognize? Please say yes or no.

(If 'yes') OK. Please say the person's name or describe their job at the tone. When you have finished, please press the pound key.

We're done!

(If no 'alert' triggered) Thank you so much for taking the time to complete these important health questions.

(If 'alert' triggered) Thank you for your time. Someone from the facility will be contacting you in the near future. If you have immediate needs, please call your doctor or dial 911.

Take care. Goodbye.

Outpatient Surgery Discharge Call Script (Adult)

Questions in BOLD may trigger an Alert based on Patient/Caregiver response noted in ORANGE.

Hello, this is [Alpha Hospital] calling about your recent visit. Is this [patient name]? Please say yes or no.

We want to ensure your transition home was safe and the care you received while at our facility was excellent. We need you to take just a minute or two to answer a few brief questions. Let's get started.

Since you left the facility, would you say your health is better, **worse**, or about the same?

Do you have any questions regarding how to manage your pain? Say **yes** or no.

Would you like to be contacted regarding your nausea or vomiting? Say **yes** or no.

Do you have any questions about your follow up process or care instructions that we have provided? Say **yes** or no.

When you were discharged, were you prescribed any new medications? Say yes or no.

(If 'yes') Were you able to get your prescriptions filled? Say yes or no.

(If 'no') Is there any reason you might not be able to fill your new prescriptions? Say **yes** or no.

Do you have any questions about any of your medications? Say **yes** or no.

Has your follow-up appointment been scheduled? Say yes or no.

Do you have any questions about any of your follow-up appointments? Say **yes** or no.

Are you satisfied with the quality of care you received at the facility? Say **yes** or no.

(If no 'alert' triggered) At this time, do you need a nurse to contact you regarding any other concerns? Say **yes** or no.

Last question!

We like to recognize any employee or doctor who did an excellent job for you while you were in the facility. Are there any employees or doctors you'd like to recognize? Please say yes or no.

(If 'yes') OK. Please say the person's name or describe their job at the tone. When you have finished, please press the pound key.

We're done!

(If no 'alert' triggered) Thank you so much for taking the time to complete these important health questions.

(If 'alert' triggered) Thank you for your time. Someone from the facility will be contacting you in the near future. If you have immediate needs, please call your doctor or dial 911.

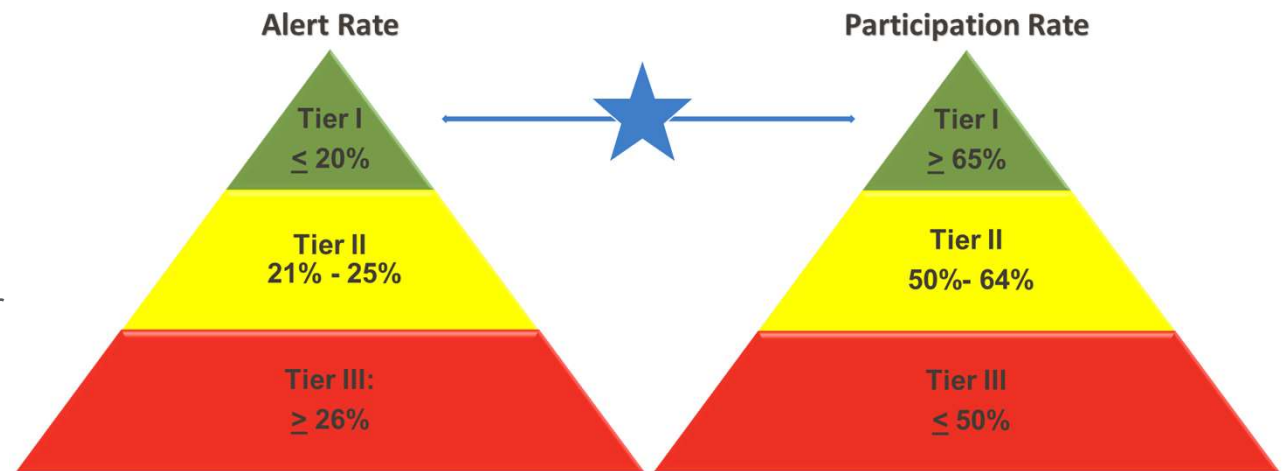
Take care. Goodbye.



Institutional Set Program Unit/Tier Goals

Highest Participation %, Lowest Alert %

- As an institution overall, the goal alert rate set at 23% and the participation rate goal is 67.5%.
- Each quarter units will be provided their tier rankings based on the red, yellow, green rates for both participation and alert frequency.



Discharge Phone Call Toolkit

Purpose:

Provide units resources and guidance on how to improve your discharge phone call program results.



Connect: Post Discharge Phone Call Agenda

- Program Overview & Goals
- **Avenues to increase patient participation**
- Decreasing alert frequency
- Unit Report Review
- Unit Outcomes



How to Increase Program Participation: Patient Discharge Phone Call Flier

- To continue to increase participation rates, staff encouraged to share this flier to patients and or caregivers
- Fliers displayed in patients rooms, printed off to include in discharge packet, etc..

Your care is our top priority

You will receive an automated phone call asking you how you are doing

- The call will come between 11 a.m. and 1 p.m. the day after you leave our care.
- It will come from the phone number **832-750-1010**.
- This is an outgoing line only that cannot receive return calls.

Questions we'll ask

You will be asked the following questions. Based on your response, a nurse will call you back the same day to talk about your concerns.

- Since you left the facility, would you say your health is better, worse, or about the same?
- Do you have any questions about any of your medications?
- It is important that your follow up appointment is scheduled and attended. Is there any reason you would be unable to attend your follow up appointment?
- Are you satisfied with the quality of care you received at the facility?
- Do you need a nurse to contact you regarding any other concerns?

Need help?

If you have questions, contact your center or in case of a medical emergency call 911 or go to the nearest hospital emergency center.

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Making Cancer History™



How to Increase Program Participation: Staff Discharge Phone Call Flier

- To continue to increase participation rates, staff encouraged to educate patients about call so askMDAnderson can support follow up care
- Fliers displayed in break room, nurses station, etc.

Tell patients about discharge calls

All patients discharged home from our inpatient units, outpatient procedural areas and emergency center receive an automated phone call about their care within 24 hours of their discharge.

A team of clinical nurses monitors patients' responses to the automated call and returns questions within 24 hours. The nurses document all notes in OneConnect.

Spread the word and tell your patients about the call they will receive after leaving the hospital. Encourage them to answer their phone.

Questions?

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or

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How to Increase Program Participation: Discharge Phone Call AVS Message

- Every Inpatient and ACCC discharge after visit summary includes a message reminding patient of the discharge phone call
- Staff discharging encouraged to circle or highlight the reminder
- Patients encouraged to save xxx-xxx-xxxx as MD Anderson Discharge Phone Call to prevent number showing as spam

Within 24 hours of leaving the hospital, you will receive an automated phone call about your care from 832-750-1010. Please note this phone line will not accept incoming calls. You will be asked a set of questions related to your health and the service you had during your stay. You will receive a call back from a live staff member should you indicate a need.

Summary of Your Hospitalization

Reason for Hospitalization

Your primary diagnosis was: Malignant Neoplasm of Prostate

Physicians Who Cared for You During Your Hospitalization

Provider	Service	Role	Specialty
MD	—	Attending Provider	Urology

You are allergic to the following

No active allergies

Date Reviewed: 4/2/2022

Patient Belongings Upon Discharge

I am being discharged and acknowledge receipt of the medication/valuables/equipment.

MyChart

Our records indicate that you have an active MyChart account.

You can view your After Visit Summary by going to <https://mychart.mdanderson.org> and logging in with your MyChart username and password. Select Visits, then Appointments and Visits, then select a past appointment.

If you have questions, you can [contact us](#) online or call 1-877-632-6789. Remember, MyChart is NOT to be used for urgent needs. For medical emergencies, dial 911.



Connect: Post Discharge Phone Call Agenda

- Program Overview & Goals
- Avenues to increase patient participation
- **Decreasing alert frequency**
- Unit Report Review
- Unit Outcomes



General Unit Tool Kit Guidance

Guidance in toolkit is adjustment on a continual basis

- Avoid discharging patients still under/experiencing effects of anesthesia
- Provide information to both patients and caretakers
 - If caregiver not present during review of discharge, attempt having the patient call/facetime
- Ensure discharge instructions are detailed and streamlined
- Ensure any instructions are noted in the discharge instructions as RN's can only assist with what is documents
- Provide patients with pertinent information on discharge instructions
 - Ex: patient is both a breast and plastics patient and needs instructions from both teams on how to do self care post discharge



Alert Specific Tool Kit Guidance

Guidance in toolkit is adjustment on a continual basis


- Frequently asked question/alert: “My doctor said my appointment will be on this day, but I do not see it in patient portal, when is my follow up appointment”?
 - Discharging team should set up expectation of when they will see the appointment and center contact information
 - If patient is not familiar with the use of MyChart, a referral can be sent to the askMDAnderson Health Information Specialist team for further assistance. askMDAHIS@mdanderson.org or patient can call
- Medications: If prescribing new medications verify patients know how to take the new medications and if/when to resume medications they were on prior to admission (especially blood thinners)
 - Encourage patients to call the pharmacy to ensure new medication is covered and available.
- Wound care: provide patients with specific wound care instructions



Discharge Phone Call System Reports

- Unit leadership is provided system access and report generating guidance
- Encourage leadership to routinely review individual units results

Discharge Phone Call Portal Report Guide



Creating a Report

1. Login to portal via: <https://connect.nationalresearch.com/Account/Login?ReturnUrl=%2f>
2. Select a report using the "Choose a Report" drop down at the top of the screen.
3. Select the time period: Last week, last month, last quarter, year-to-date, last year, and custom
3. Select the discharge program by clicking the Inpatient and/or Emergency boxes.
4. Click the Choose button to use data from all or specific units.
5. Click Show More Filters to limit data by specific demographics, to change the sort order, or the view of the data.
6. Click View Report and the report will appear on the bottom of the menu
7. Once the report has been run, you can set it up as a subscription for yourself or other approved users by clicking the blue Subscribe button.

Discharge Phone Call Portal Report Descriptions

- **Snapshot Report:** This report gives visibility to the number of alerts within specific units, calls placed, alert resolution, and alert drivers. It offers great insight for leadership, by identifying top performing units and areas for improvement.
- **Participation Report:** The participation report details patient participation (participation defined as having answered at least one of the automated call survey questions) in the discharge call program, specifically in the Response Rate column. It helps illustrate how well we communicate to patients about the program to encourage their participation. If response rates are low, the report may serve as a reminder to educate patients about the program.
- **Transitions Report:** This report monitors alert trends on a weekly, monthly, or quarterly basis. It's great for determining what's driving alerts and tracking the success of improvement efforts.
- **Compliments Report:** Lets staff members see positive recognition from the patients.
- **Alert Notes Report:** Compiles call documentation – the insights provided by staff via descriptive notes taken after alert resolution.
- **Alert Tags Report:** The alert tag report combines selected alert tags with call documentation.

Compliments Report

Report Guidance: Run this report for your unit on a weekly/monthly basis to highlight your staffs great work. This report can be shown in staff meetings, via email, or printed off and post in break rooms

Compliment Examples:

I would like to recognize the entire staff on the floor. I was in the CDU unit for two days. The entire staff, morning and night were wonderful.

The nursing staff that cares for you in the room. They all do an excellent job. They're very caring and polite. They just make you feel like they care.

Doctor in emergency room, and doctor once they sent me to the upstairs room, and then the nurse -- they did an excellent job.

My doctor, she was very awesome. She was very explanatory. Explained everything, letting us know the steps that we need to take, and making me feel comfortable, at ease

My nurse and doctor who was the physician who saw me in the ER. Excellent care, excellent personal interaction. I couldn't have asked for two better people.




Connect: Post Discharge Phone Call Agenda

- Program Overview & Goals
- Avenues to increase patient participation
- Decreasing alert frequency
- Unit Report Review
- **Unit Outcomes**

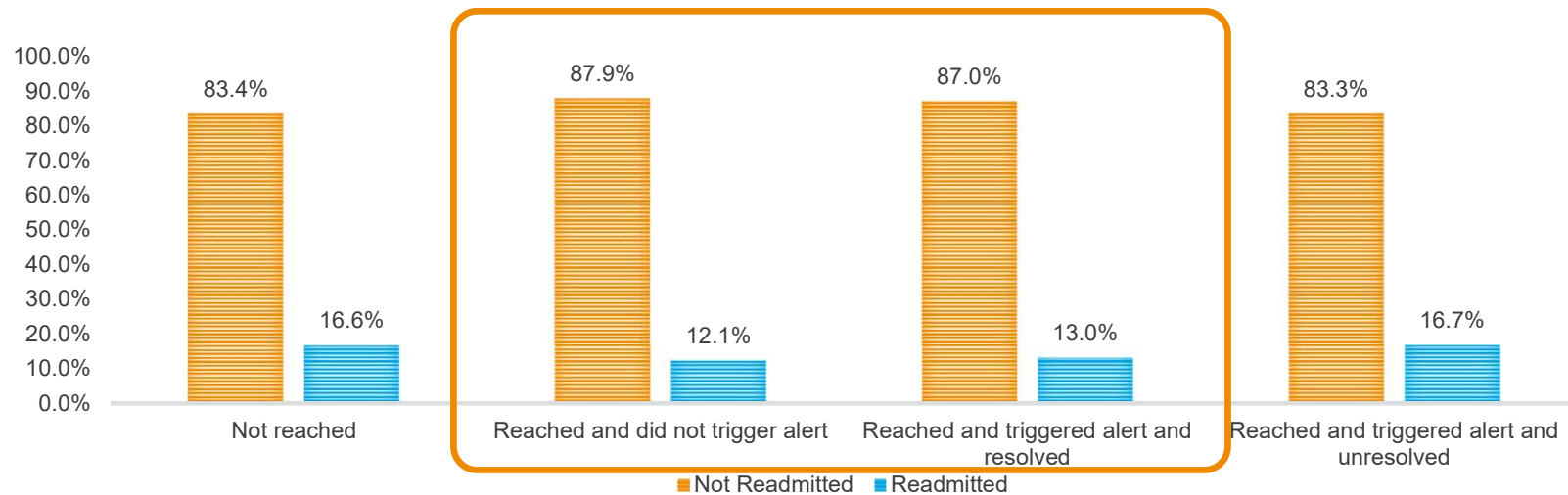


FY22 Quarterly Top Units

Unit	Alert Rate	Participation Rate	Discharge Information PX Score (Peer Rank)	Discharge Information PX Score (Top Box)
MNP10A	20%	78%	76	89
MNP10B	16%	79%	76	89
MN12SW	17%	77%	98	96
MN15NE	13%	74%	90	92
MN20NW	16%	69%	96	95
MN10NE	18%	68%	84	90
MN19NE	20%	65%	99	100



NRC Health Overall Readmission Rates: Inpatient Units



	Number of non-Readmissions	Number of Readmissions	Number of Discharges	Percent Readmission
Not reached	5,247	1,044	6,291	16.6%
Reached and did not trigger alert	7,531	1,041	8,572	12.1%
Reached and triggered alert and resolved	2,332	349	2,681	13.0%
Reached and triggered alert and unresolved	115	23	138	16.7%
Grand Total	15,225	2,457	17,682	13.9%



Questions?

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