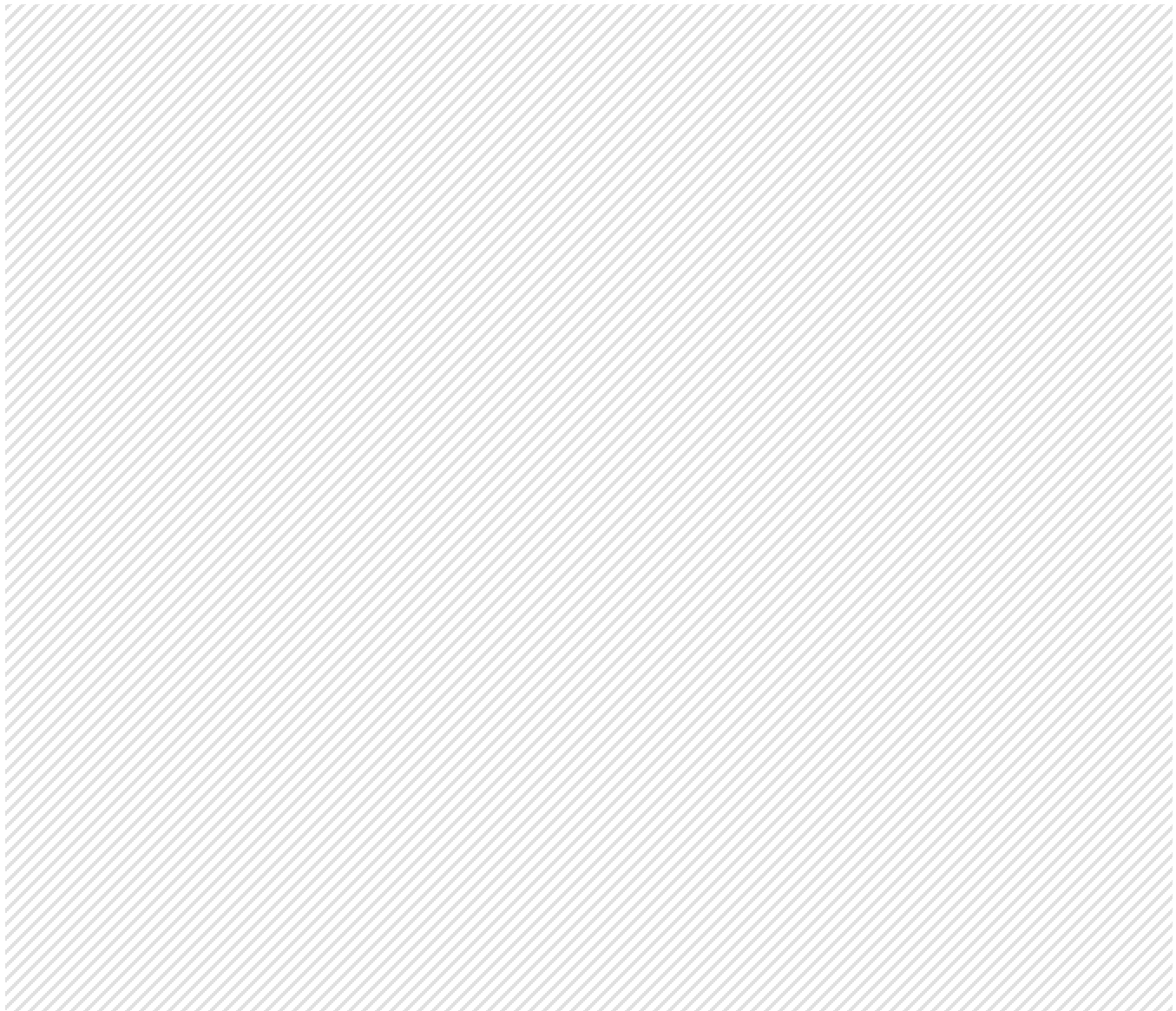


Customer Relations and CAHPS

Core Competency Inservice

January 2020



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Table of Contents

Introduction	3
<i>Internal Customers</i>	<i>3</i>
<i>External Customers</i>	<i>3</i>
The Importance of Good Customer Relations.....	3
<i>Patient choice.....</i>	<i>3</i>
<i>Quality of care.....</i>	<i>4</i>
Building Good Customer Relations	4
Customer Relations on the Telephone	5
<i>Clear communication</i>	<i>5</i>
<i>Effective Service.....</i>	<i>5</i>
Patient Satisfaction Surveys	6
<i>HCAHPS</i>	<i>7</i>
<i>OAS CAHPS</i>	<i>7</i>
<i>Assuring the Best Possible Survey Responses.....</i>	<i>8</i>
References.....	9

Introduction

Whatever role you have within the facility, you are in the business of customer service. Whether you are a housekeeper, nurse, unit secretary, or dietician, good customer relations are an important part of everyone's job. Who is a customer? A customer is **anyone to whom you provide service**.

There are 2 basic types of customer

- Internal customer
- External customer

Internal Customers

It may seem strange to think of fellow staff members as customers, but internal customers are other people who work at the facility. They include physicians and other professionals, employees of other departments, and other staff members. They are the other people that you provide service to in your facility. Some employees or departments serve mostly internal customers. Their job is to provide service to other departments or employees, such as Human Resources and Computer Information Systems.

External Customers

External customers are people who come into the facility from the outside. They include patients, visitors, and families. They might also include others, such as outside companies, delivery people, and other community members or organizations.

In your job, you may work with many customers: other employees, patients, families, visitors, physicians, and vendors. It is common to have both internal and external customers. For example, nursing staff follow the directions of physicians to provide patient care. These are just two of the many customers that nursing staff serve.

The Importance of Good Customer Relations

The key to good customer service is to treat other people the way you would like to be treated. In dealing with internal customers, maintaining good customer relations is important. It can help to provide a good working environment and a quality standard of care. When working with patients and families, maintaining good customer relations is of the utmost importance.

Patient choice

Patients have a choice about where they go for healthcare services. Although many health plans limit choices, patients may choose their insurance coverage based on the choice of facility they choose to be treated in. If

customer service is not good and if patients do not feel that a facility cares about them, they may take their business elsewhere.

Quality of care

When patients go to a facility to seek health care, they become dependent on someone else. They must trust providers and clinicians to tell them what is wrong with them and to treat their illness. Patients experience a real lack of empowerment. They feel that they are not in control of what is happening to them. They may have questions about what is happening, what will be done, and how long it will take. A vital component of customer service is to answer all their questions and give them confidence that the facility will provide the quality of care they want. Many factors can cause patients to feel a lack of empowerment such as:

- being assigned a room
- being given a number
- being given an ID bracelet and patient number
- asked very personal questions
- being seen by different people who come in and out of the room at various times

Even though these things may be necessary for hospital personell to care for the patients, these can make patients feel that they have no control. Understanding how a patient may feel in this situation can result in better and more considerate care. It is an important component of customer relations.

Building Good Customer Relations

The key to good customer service is to treat others the way you would want to be treated or the way you would want your loved ones to be treated in a similar situation. It often means simply being courteous and helpful. Above all, remember that things that may be routine for you are NOT routine for patients or their families.

There are many small things that you can do to make a patient feel more confident and cared for:

- Knock when you enter a room, even if the door is open
- Introduce yourself
- Call the patient by name
- Explain what you are going to do
- Use terms that the patient can understand
- If you do not know the answer to a question, find out
- In reception and/or public areas, there are also steps that you can take to build good customer relations:
 - Always acknowledge a person's presence
 - Keep patients informed if there will be a delay
 - It is important to acknowledge a person's presence. Even if you cannot stop, at least make eye contact and smile so that people know they have been seen. Then return and provide assistance as soon as possible.

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- In some cases, patients may need to wait before being seen. If so, explain why and give a reasonable estimate of how long the wait will be. If the wait is long, keep them informed

Customer Relations on the Telephone

We all use the telephone on a regular basis. Most of us take it for granted. We do not often think about using the telephone as a skill. If using the telephone is a part of your job, however, your telephone skills can be very important. Good customer service is often a question of courtesy. This is also true when dealing with customers on the telephone.

Remember that the people you speak with on the telephone are your customers. When you use the telephone as a part of your job, you are providing customer service. Your telephone skills reflect on your facility. Providing effective telephone service is a part of building good customer relations. It is your chance to make a good impression for your facility.

Courteous customer service on the phone includes:

- Answering the phone by the third ring whenever possible
- Stating your name and title and the name of your department
- Addressing customers by name
- Listening carefully
- Taking messages courteously
- Transferring calls carefully
- Asking questions tactfully
- Your tone of voice is also an important part of building good customer relations on the telephone
- Smile (even though it can't be seen, it will affect how you sound)
- Speak clearly
- Be polite.

Clear communication

When people speak face to face, much of the communication is non-verbal. This includes: Facial expressions, gestures and body language.

Non-verbal communication does not occur in a telephone conversation. This means that there is a greater chance of a failure in communication. There are steps that you can take to make sure telephone communication is clearly understood by both yourself and the other person.

- If you are giving instructions, ask for feedback to make sure that they are correctly understood
- Repeat any information you are given so that the other person can correct any errors
- Write down any messages you need to pass on to someone else.
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Effective Service

The goal of telephone communication is to provide effective customer service.

This means:

- Being sensitive to the customer's needs
- Providing the information the customer requires
- Telephone communication is part of the customer's relationship with the facility. Your customers include everyone to whom you provide service on the telephone, such as patients, family members, and other employees.

Patients and family members need to feel that they are important and that the facility cares about them. Fellow employees need a courteous and supportive work environment. The service that you provide on the telephone is an important part of building a trusting relationship with your customers.

Effective telephone service also means providing the information customers require, such as:

- Avoiding saying, "I don't know"
- Avoiding putting customers on hold for long periods
- Avoiding transferring a caller to a string of different departments
- No one expects you to know the answer to every question. If you are asked a question and you do not know the answer, tell the caller that you will find out and return the call. Then do it promptly.
- Do not put customers on hold without asking permission. If there is a long wait, check back frequently to give an update and to ask if they would like to continue holding.

As a customer, it is very frustrating to be transferred to department after department. If you must transfer a caller, be sure that you transfer the call to a department that can provide the information needed. If you are not sure, offer to find out the information and call the customer back. Also, when you do transfer a call to another phone, make sure that the call is connected before you hang up.

Finally, when you take a message for someone else, it is important to get all the necessary information. Record the name of the caller and time of the call, as well as the subject. Be sure to indicate whether a return call is required.

Patient Satisfaction Surveys

The Centers for Medicare & Medicaid Services (CMS) develop, implement and administer several different patient experience surveys. These surveys ask patients (or in some cases their families) about their experiences with, and ratings of, their health care providers and plans, including hospitals, home health care agencies, doctors, and health and drug plans, among others. The surveys focus on matters that patients themselves say are important to them and for which patients are the best and/or only source of information. CMS publicly reports the results of its patient experience surveys, and some surveys affect payments to CMS providers.

HCAHPS

- Hospital Consumer Assessment of Healthcare Providers and Systems survey is the first national, standardized, publicly reported survey of patients' perspectives of hospital care.

OAS CAHPS

- CAHPS Outpatient and Ambulatory Surgery Survey asks adult patients about their experiences receiving care in Medicare-certified hospital outpatient surgery departments (HOPDs) and ambulatory surgery centers (ASCs).

Three broad goals have shaped CAHPS:

1. First, the survey is designed to produce data about patients' perspectives of care that allow objective and meaningful comparisons of hospitals on topics that are important to consumers.
2. Second, public reporting of the survey results creates new incentives for hospitals to improve quality of care.
3. Third, public reporting serves to enhance accountability in health care by increasing transparency of the quality of hospital care provided in return for the public investment.

As of July 2007, hospitals receiving Medicare and Medicaid funding must report HCAHPS results or lose up to 2% of that funding. As of October 2012, those hospitals may receive additional, incentive funding as a result of HCAHPS performance. The intent is to incentivize improvement in patient satisfaction, and, indirectly, the quality of care. A standardized survey enables between-facility comparisons of patient experiences. In effect, survey results will be used to compare and rate hospitals and other facilities and organizations according to how well they meet their patients' expectations. The results are publicly reported.

Healthcare facilities and organizations now have a dual incentive to address barriers to patient satisfaction: 1. Reimbursement will depend, to some extent, on survey performance, and 2. Knowledgeable consumers will make utilization decisions based on publicly available survey information.

Healthcare facilities may use one or more of the following survey technologies: mail, telephone, mail with telephone follow-up, or active voice recognition (automated phone survey technology). Official language versions include Chinese, English, Russian, Spanish, Vietnamese, and Portuguese. All are available to the public.

Patients are surveyed between 48 hours and six weeks after discharge. A random sample of all adult patients, not just those receiving Medicare, is chosen from a variety of diagnoses.

CMS publishes participating hospitals' HCAHPS results on the Hospital Compare website (www.hospitalcompare.hhs.gov) four times a year, with the oldest quarter of patient surveys rolling off as the most recent quarter rolls on. A downloadable version of HCAHPS results is also available through this website. The survey focuses primarily on critical aspects of patients' healthcare experiences (communication with nurses and doctors, the responsiveness of staff, the cleanliness and quietness of the environment, pain management, communication about medicines, discharge information, overall rating of hospital, and would they recommend the hospital).

Assuring the Best Possible Survey Responses

You pride yourself on the care you provide. And you want your organization to benefit from the quality of care you provide. The following section explains how to assure that your patient responds to the CAHPS survey in a way that most positively represents the care you provided.

In some of the survey questions ‘Always’ is the best only answer. Even though the survey question allows for the following responses: Always, Usually, Sometimes, Never. However, ‘Always’ is the only answer reported to consumers for those domains. This standard particularly applies to the following situations:

- Meeting patient requests, especially bathroom requests, and answering call lights
- Maintaining room and bathroom cleanliness
- Managing pain
- Providing information about medications
- Providing information about post discharge activities and medications
- Maintaining a comfortable and quiet (especially at night) environment

The challenge, therefore, is to assure that your patient answers ‘Always’ as often as possible. Keep in mind that these surveys take place well after the hospital stay. The patient’s recollection of details of nursing care will likely be incomplete, and survey responses will be heavily influenced by only a few incidents that may stand out in the patient’s memory. The following behavioral techniques will help your patient to remember the good care you provide.

1. Make your good care explicit.
 - Making your care explicit may be the most powerful behavioral technique you can use to reinforce your patient’s memory of good care. When performing any care that falls into one of the seven ‘Always’ categories, announce what you are doing to the patient. In other words, explicitly state to the patient that you are providing care in one of those seven categories. For example:
 - When entering a room to answer a call light, say to the patient, “I am answering your call light, Mrs. Brown.” When leaving the room, make a statement that again reminds the patient of what you’ve done, such as, “I’ve answered your call light; is there anything else I can do for you?” If possible, incorporate your ‘announcement’ into the first and last things you say to the patient.
 - Use this technique in every situation in which you are providing care in those ‘Always’ categories. Making your care explicit will reinforce your patient’s memory and will predispose your patient to recalling your high quality care much later on when completing the survey.
2. Communicate the right message.
 - Verbal and non-verbal interaction with the patient and family members must always indicate respect and caring. A professional appearance helps meet the patient’s expectations for how a professional should look. Confident and open body language and posture will indicate a willingness to listen and respond. Good grammar and word usage reinforces that message.
 - Every now and then, however, it is hard to be nice, yet it is much easier than many other risk management strategies. It is imperative to remember that when you are tired, harassed, or you

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- find yourself in a high-stress situation, stop..... take a deep breath, and simply be cheerful and friendly. You will feel better, and it might keep you out of the courtroom someday. Here are some specific things you can do to show your patients that you care when you are in a high-stress situation.
- If you have to keep your patient waiting, tell them what to expect. Never leave your patients hanging in limbo.
 - Give the patient your full attention.
 - Don't interrupt. Listen carefully to what your patients have to say, especially when you're in a hurry.
 - Respect your patients' privacy.
 - Treat patients as people, not medical conditions. A patient with potential breast cancer won't appreciate being referred to as 'the breast mass
 - Involve patients in decision making. Don't be a 'care dictator'
 - Don't be critical of other care the patient has received. Nurse's criticism of other nurses who have taken care of the patient can give rise to highly unnecessary game-playing and is in very poor taste. It can also give rise to law suits!
 - Make sure your fellow nurses show your patients the same consideration that you do. This is also a part of your role as the patient's advocate
 - 3. Focus on trouble areas.
 - CMS tracks and summarizes HCAHPS results by state. Not surprisingly, certain items always trend lower than others, and these trends are fairly consistent regardless of the state. Please refer to the following website for a look at these interesting trends:
http://www.hcahponline.org/Files/Report_July_2015_States.pdf
 - From this information, you can assume, for example, that patients consider hospitals noisy at night, are puzzled about their medications, and don't feel they can reliably get help quickly. Know your facilities results and compare those with the national trends at the site above.
 - Bottom line, by focusing on the problem areas, and utilizing the behavioral techniques you've learned, you can strongly influence your patient's recall of the care you provide, and impact your organization's survey results.

The CAHPS rating depends, to a large extent, on the patient's relationship with their professional healthcare provider. Hospital reimbursement and consumer choice are dependent upon those ratings. Therefore, the healthcare professional/patient relationship, your relationship with your patient, is critical to the hospital's bottom line.

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