

STUDER GROUP TOOLKIT

*Aligning Actions to Improve Patients' Perception
of Care with the New H-CAHPS Initiative*

H-CAHPS

CAHPS® Hospital Survey

WHY WE CREATED THIS TOOLKIT

AND HOW WE HOPE IT WILL HELP YOUR ORGANIZATION

Many organizations have asked us how they can be better prepared to implement the new CAHPS[®] Hospital Survey.* (H-CAHPS) These organizations want to make sure that their employees are ready to utilize the new process in ways that are consistent with the organizations' goal of ensuring high quality patient care.

We have found that many of the organizations we work with are very well prepared for implementing H-CAHPS, regardless of the measurement tool they use. What is often needed is an adjustment to specific actions—such as the key words that they are using with their patients.

In this toolkit we have identified actions that have proven successful with hundreds of hospitals, and we have linked those actions to the H-CAHPS questions and categories.

At Studer Group, we use the Healthcare Flywheel[®] as a foundation for our work. The Healthcare Flywheel is based on the premise that the good always want to get better. It shows how organizations can create momentum for change by engaging the passion of their employees to apply prescriptive actions in order to achieve excellent results. Our hope is that by using the recommended actions in this toolkit, you can keep the flywheel turning in your organization. (For more about the Healthcare Flywheel, see page 10).

We are always interested in learning—please let us know how these prescriptive actions work for your organization, and how we can help you further.

Thank you for helping make health care a better place for employees to work, physicians to practice medicine, and patients to receive care.

**Consumer Assessment of Healthcare Providers and Systems (CAHPS) was previously referred to as Consumer Assessment of Health Plans Survey. The name was changed to reflect the expansion of the programs focus from health plans to the broader health care system.*

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SECTION ONE:

H-CAHPS OVERVIEW

The Centers for Medicare and Medicaid Services (CMS) and the Agency for Healthcare Research and Quality (AHRQ) developed the H-CAHPS initiative *“to provide a standardized survey instrument and data collection methodology for measuring patients’ perspectives on hospital care.”**

Specific survey instrument and measurement methodologies have been developed, with the intention of national implementation in 2006. In January 2006, the U.S. Office of Management and Budget (OMB) approved the use of the CAHPS Hospital Survey, and national implementation is scheduled to move ahead.

The sponsoring organizations also say, *“H-CAHPS can be viewed as a core set of questions that can be combined with a customized set of hospital-specific items. H-CAHPS is meant to complement the data hospitals currently collect to support improvements in internal customer services and quality related activities.”** CMS and AHRQ will have required training sessions for those organizations who want to administer the survey, including vendors or hospitals, prior to the national implementation. These training sessions start in early 2006.

To learn more about Hospital CAHPS, please visit the following Web sites:

- For general information: www.cms.hhs.gov/quality/hospital or www.ahrq.gov
- For information about training: www.hcahpsonline.org

Email addresses to comment or to ask questions:

- To communicate with CMS staff about implementation issues: Hospitalcahps@cms.hhs.gov
- To communicate with AHRQ staff on survey development issues: Hospital-CAHPS@ahrq.gov
- For technical assistance, contact the Arizona QIO: hcahps@azqio.sdps.org

H-CAHPS Survey Questions:

Listed on pages 16—20 are the questions contained in the H-CAHPS survey as of December 2005.

*Centers for Medicare and Medicaid Services website, December 2005

SECTION TWO:

STUDER GROUP RECOMMENDED ACTIONS AND H-CAHPS

Studer Group has worked with many organizations for the purpose of improving operational excellence. All of these organizations experience gains when they follow appropriate prescriptive actions, regardless of their measurement tool.

We encourage you to stay committed to the basics. Activities such as rounding on employees and patients, conducting discharge phone calls, and using key words that explain to patients what you are doing in order to reduce their anxiety are actions you should take to improve the patient care experience. For example, one of the issues addressed in most survey tools is how staff communicated with the patient and family members. Consider how a patient would perceive communication if the nurse manager explained:

“At our organization, we want to make sure we are always communicating with the patient. One of the ways we do this is through a patient communication board in your room. We ask all our staff who are caring for you to use this board to write their name and important information that you should know about, such as today’s test procedures. We also have written the name of the doctor who is caring for you while you are in the hospital and your referring physician. To help us in our commitment to providing very good care, please let us know if we can improve our efforts at any time.”

It is important to always use language your staff can relate to and understand. Studer Group coaches have learned that by calling the survey tool “the patients’ perception of our core clinical and operational competencies” the staff will better relate to it. By doing so, we align behavior to achieve what we all want: a patient and family who are confident in their caregivers, are less anxious, are compliant with treatment, and tell everyone that the care they received was provided by a competent and compassionate group of individuals.

Improving our patients’ perception of care represents all the best things about health care. It leads us to what brought us to a career in health care in the first place: purpose, worthwhile work, and making a difference.

Studer Group Recommended Actions:

The following table on pages 5–9 provides Studer Group’s recommended actions so an organization may improve the patients’ perception of care related to each question or topic presented on the H-CAHPS survey.

Studer Group Recommended Actions

H-CAHPS SURVEY QUESTION:	STUDER GROUP RECOMMENDED ACTION AND STEPS:
<p>Your Care from Nurses—During this hospital stay:</p> <ul style="list-style-type: none"> • How often did nurses treat you with courtesy and respect? • How often did nurses listen carefully to you? • How often did nurses explain things in a way you could understand? • After you pressed the call button, how often did you get help as soon as you wanted it? 	<ul style="list-style-type: none"> ■ Conduct nurse leader rounding on patients for courtesy, communication, explanation, and responsiveness to call. ■ Implement AIDET: Five Fundamentals of Patient Communication as an overall communication platform to address most of the core questions on the survey (See AIDET overview on page 11). ■ Introduce/implement Key Words at Key Times using the language of the survey during rounds. <ul style="list-style-type: none"> • <i>“Is there anything else I can do for you? I have time.”</i> • <i>“We are committed to providing you with very good/excellent care. As part of our commitment, we will treat you with courtesy and respect, listen carefully to you, and explain things so you can understand.”</i> • <i>“I would like to make notes while you are talking because what you are saying is important. Is that OK with you? I am listening.”</i> • <i>“I want to make sure that I explain the procedure in a way that you can understand. Do you have any questions?”</i> ■ Address call lights effectively: <ul style="list-style-type: none"> • Round frequently on the patient to anticipate needs such as pain medication, toileting, and positioning. • Ask, <i>“Is there anything else I can do before I go? I have time.”</i> • Check the environment of the room for call light, telephone, lights, TV, garbage can in reach, bedside table next to the bed, full water pitchers, etc. • Tell the patient when you will return. <i>“Mr. Johnson, it looks like you are comfortable. I will be back to check on you in about an hour.”</i> • When someone answers a call light they should say, <i>“How may I help you?”</i> The request may not require a nurse and we want to promote a philosophy that any staff can help by responding to requests.

H-CAHPS SURVEY QUESTION:	STUDER GROUP RECOMMENDED ACTION AND STEPS:
<p><i>(Your Care from Nurses, continued)</i></p>	<ul style="list-style-type: none"> • During the first hour of the shift, nurses should spend five minutes with each patient going over the plan of care and asking the patient if there are one or two things that would make the care excellent. • The nurse then documents that need or request on the white board so all staff are aware of the most important need for that patient and can be responsive. The key words would be <i>“Mr. Johnson, I want you to know we are listening carefully to your needs so I am going to write this on our board. This way, we can be sure everyone knows what’s important to you.”</i>
<p>Your Care from Doctors—During this hospital stay how often did doctors treat you with:</p> <ul style="list-style-type: none"> ■ Courtesy and respect? ■ Listen carefully to you? ■ Explain things in a way you could understand? 	<ul style="list-style-type: none"> ■ Physicians: <ul style="list-style-type: none"> • Ensure that staff “manages up” physicians to patient and families. <i>“Dr. Smith is a very good listener. You are fortunate to have him...”</i> • Implement AIDET: Five Fundamentals of Patient Communication (See overview on page 11). • Sit at the patient’s bedside. ■ Introduce/implement Key Words at Key Times using the language of the survey during rounds: <ul style="list-style-type: none"> • <i>“I will listen carefully to what you say to me.”</i> • <i>“I want to make sure that I explained the ... (procedure) in a way that you could understand. Do you have any questions?”</i>
<p>The Hospital Environment—During this hospital stay, how often:</p> <ul style="list-style-type: none"> ■ Were your room and bathroom kept clean? ■ Was the area around your room quiet at night? 	<ul style="list-style-type: none"> ■ Ensure that the environmental service director conducts rounds. ■ Ensure that the environmental service staff use AIDET: Five Fundamentals of Patient Communication: <ul style="list-style-type: none"> • Acknowledge: <i>“Good morning, Mrs. Smith...”</i> • Introduce: <i>“My name is Barbara. I will be taking care of your room today. I have worked in housekeeping for more than 17 years. I have cleaned thousands of rooms and receive more than 20 hours of training yearly on environmental services. We strive to deliver very good care and it will be my pleasure to serve you during your stay.”</i>

H-CAHPS SURVEY QUESTION:	STUDER GROUP RECOMMENDED ACTION AND STEPS:
<p><i>(The Hospital Environment, continued)</i></p>	<ul style="list-style-type: none"> • Duration: <i>“I will be in your room for about 10 minutes. Is now a good time?”</i> • Explanation: <i>“I will begin by emptying your trash and then I will mop the floors and clean your bathroom. When I finish I will check with you to be sure I have not missed anything.”</i> • Thank you: <i>“I have finished cleaning. Is there anything I have missed? Is there anything I can do for you before I leave? I have time.”</i> • Place a tent card at the bedside with the environmental service number stating, <i>“Call us for cleaning needs.”</i> <ul style="list-style-type: none"> ■ Install a noise meter at nursing station. ■ Conduct a quiet campaign. ■ Introduce/implement Key Words at Key Times, using the language of the survey during rounds: <ul style="list-style-type: none"> • <i>“May I close your door for your privacy and quiet?”</i> • <i>“I am here to clean your room . . .”</i> • <i>“Did I miss anything...?”</i>
<p>Your Experiences in this Hospital:</p> <ul style="list-style-type: none"> ■ During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan? ■ How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted? ■ During this hospital stay, did you need medicine for pain? ■ During this hospital stay, how often was your pain well controlled? ■ During this hospital stay, how often did the hospital staff do everything they could to help you with your pain? 	<ul style="list-style-type: none"> ■ Explain hourly comfort rounds at every shift. ■ Use Key Words at Key Times to focus on managing expectations of pain: <ul style="list-style-type: none"> • Say to the patient: <i>“We want you to be completely satisfied with your care. We work very hard to help meet your physical comfort needs which include help with things like hygiene, bathing, and getting to the bathroom. We will help you manage any pain you might have.”</i> • Manage up the doctor: <i>“Your doctor wants you to be as comfortable as possible and has ordered pain medicine to help you manage your pain.”</i> • Conduct nonverbal communication: Post the pain scale in each patient room with a message that states <i>“Pain control—our medical center respects and supports the patient’s right to the best possible management of pain.”</i>

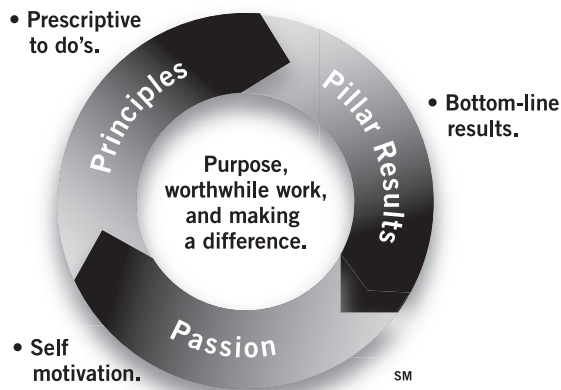
H-CAHPS SURVEY QUESTION:	STUDER GROUP RECOMMENDED ACTION AND STEPS:
<p><i>(Your Experiences in this Hospital Stay, continued)</i></p> <ul style="list-style-type: none"> ■ During this hospital stay, were you given any medicine that you have not taken before? ■ Before giving you any new medicine, how often did hospital staff tell you what the medicine was for? ■ Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand? 	<ul style="list-style-type: none"> • Manage up the staff: <i>“We want you to be very satisfied with our management of your pain. Our staff is specifically trained to help manage your pain.”</i> • Ask about pain medicine: Set select times to use key words to ask about pain medicine such as before breakfast, before therapy, or while performing care for personal needs. Document the patient’s response and be proactive at the next opportunity. ■ Incorporate Key Words into discharge phone calls: <ul style="list-style-type: none"> • <i>“We are focusing on pain management at our hospital; was there anything we could have done differently to help you manage your pain?”</i> • <i>“Is there anything I can do for you? I have the time. . .”</i> • <i>“I will do everything I can to help you with your pain.”</i> • <i>“Your physician has ordered a new medication for you, let me tell you what it is for . . .”</i> • <i>“Let me also describe possible side effects.”</i> • <i>“If you experience any of these symptoms, let me know right away.”</i> • <i>“Do you have any questions? I want to make sure that you understand.”</i> ■ Use the 1–10 pain scale and then round back to check on the degree to which medication worked. Tell the patient when the nurse will be back to check on him or her. <ul style="list-style-type: none"> • In-service other departments on key words for pain and processes to follow through for the patient.
<p>When You Left the Hospital:</p> <ul style="list-style-type: none"> ■ After you left the hospital, did you go directly to your own home, to someone else’s home, or to another health facility? ■ 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? 	<ul style="list-style-type: none"> ■ Introduce/implement Key Words at Key Times using the language of the survey during rounds: <i>“I want to make sure that you will have everything you need when you go home.”</i> ■ Ensure that case management rounds on patients to find out if they have all the help they will need when they leave. Ask if the physicians and nurses talked with the patient about their post-stay care. ■ Conduct multidisciplinary rounds.

H-CAHPS SURVEY QUESTION:	STUDER GROUP RECOMMENDED ACTION AND STEPS:
<p><i>(When You Left the Hospital, continued)</i></p> <ul style="list-style-type: none"> ■ 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? 	<ul style="list-style-type: none"> ■ Understand that discharge planning is part of the care plan and is discussed daily with the patient and family. ■ Conduct discharge phone calls: <ul style="list-style-type: none"> • Review discharge instructions during discharge phone call. Make sure the patient has these in writing. • Manage up the discharge phone call during the hospitalization. Let the patient know that a staff person will call the patient after they have gone home.
<p>Overall rating of the hospital:</p> <ul style="list-style-type: none"> ■ Using any number from 0–10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay? ■ Would you recommend this hospital to your friends and family? 	<ul style="list-style-type: none"> ■ Introduce/implement Key Words at Key Times using the language of the survey during rounds. For example, <i>“Our goal is to provide you with (very good/excellent) care. We want you to think of us as the best possible hospital.”</i> <ul style="list-style-type: none"> • If the patient does not feel like the hospital is the “best possible,” then find out what you should do to become the best. • Ask if there is anything you could have done so that the patient would recommend your hospital to others.

SECTION THREE:

STUDER GROUP RESOURCES

THE HEALTHCARE FLYWHEEL®



In the book *Good to Great*, Jim Collins writes about great organizations benefiting from the flywheel effect where the power of continued improvement and the delivery of results create momentum. Applying this concept to health care, the Studer Group developed the Healthcare Flywheel to help organizations understand the journey in creating great places for employees to work, physicians to practice, and patients to receive care.

The beginning of this journey is not a launch or a kick off. It is simply recognition that all we do should start at the core of the organization: our values. In this way, we center or balance the flywheel. In health care, we have great purpose, do worthwhile work, and have the opportunity to make a difference. This is our hub.

From here, the **first step** to creating movement is to connect the dots to our hub so that people truly believe that they can make a difference. This inspiration is what allows organizations to implement initial changes.

The second part of our flywheel is when we give organizations very prescriptive to do's, called Nine Principles® to achieve results. From measuring the important things, to rounding for outcomes, to implementing an objective performance measurement system, to discharge phone calls, these prescriptive To Do's—when implemented—will continue to turn the flywheel.

The third part of the flywheel process is when the organization starts to see bottom-line results under the Pillars, which provide a framework for prioritizing the desired results in step two. Instead of focusing on what is not getting done, the organization focuses on what is getting done.

In studying great health care organizations, we find what motivates people is the accomplishment of desired results. By tying results back to purpose, worthwhile work, and making a difference, the organization is inspired to follow more prescriptive behaviors to achieve even greater results, thereby creating a self-perpetuating culture of excellence, fueled by the momentum of the flywheel.

AIDET: FIVE FUNDAMENTALS OF PATIENT COMMUNICATION

AIDET is a framework for communicating with patients and their families as well as with each other. This framework can be used as we communicate with other staff and colleagues especially when we are providing an internal service.

What Is AIDET? AIDET Stands For:

A	I	D	E	T
Acknowledge	Introduce	Duration	Explanation	Thank You

It is a simple acronym that represents a very powerful way to communicate with people who are often nervous, anxious, and feeling vulnerable. It allows us, as trained health care professionals, to share our experience, knowledge, and training; demonstrate empathy; and establish trust.

What Are the Results and Advantages of Using AIDET?

- Decreased anxiety
- Increased compliance
- Increased clinical outcomes
- Increased patient and physician satisfaction



The five individual components of AIDET allow staff to communicate effectively with patients as they focus on those questions and concerns that the majority of patients have. By proactively addressing these through AIDET, we are telling patients that we are highly trained, compassionate professionals who put the patients' interests and comfort first.

Here are the details of each the AIDET components:

A	<p>ACKNOWLEDGE:</p> <p><i>Goal: Establish trust by demonstrating empathy.</i></p> <ul style="list-style-type: none"> ■ Tell the patient that you have been expecting them ■ Acknowledge their pain or concerns
I	<p>INTRODUCE:</p> <p><i>Goal: Reduce anxiety by sharing with the patients the skill set and experience of those that will be touching them.</i></p> <ul style="list-style-type: none"> ■ Introduce self: Name, role, and department Certification, training, skills, and experience ■ Establish successful handoff to others by introducing others: Co-workers, other departments, and physicians
D	<p>DURATION</p> <p><i>Goal: Reduce anxiety by establishing time expectations.</i></p> <ul style="list-style-type: none"> ■ Time to wait before test, procedure, exam, to see the doctor ■ Time of test, exam, etc. ■ Time until the patient can leave ■ Time to get results
E	<p>EXPLANATION</p> <p><i>Goal: Enlist patient in care plan.</i></p> <ul style="list-style-type: none"> ■ Explain the test, procedure, visit, etc. ■ Explain what will be taking place in terms the patient can understand
T	<p>THANK YOU</p> <p><i>Goal: Thank the patient for trusting us and letting us care for them. Provides final opportunity for patient to share any concerns or questions.</i></p> <ul style="list-style-type: none"> ■ Thank them for choosing your organization. ■ Ask if he or she has any final questions or concerns.

WEB SITE RESOURCES

- www.studergroup.com
- H-CAHPS Toolkit Resource
- Hardwired Results, Physician Engagement, Issue 4
- Tool, Patient Perception of Care: What to Do if Your Scores are Low
- Article, Key Words at Key Times
- Insights, AIDETSM: Five Fundamentals of Patient Communication
- Insights, Making Key Words at Key Times Work
- Insights, Maximizing Your Patient Satisfaction Survey
- Insights, One Step that Creates a Large Leap in Patient Satisfaction with Physicians
- Insights, Pain Management
- Insights, Seven Steps of Driving Patient Satisfaction - One Question at a Time
- Insights, It's Patient Perception of Care, Not a Number
- To reorder additional H-CAHPS Toolkits, go to www.studergroup.com

FIRE STARTER PUBLISHING RESOURCES

Books:

- *Hardwiring Excellence*, by Quint Studer
- *101 Answers to Questions Leaders Ask*—informative answers to real questions from the field.

Training Videos:

- Must HavesSM Video Series—a video/DVD training series focusing on hardwiring the five Must HavesSM.
- highmiddlelowSM Performer Conversations—a video/DVD training series focusing on retaining high performers, developing skills of middle performers, and confronting low performers.
- AIDETSM Five Fundamentals of Patient Communication—a video/DVD training focusing on reducing anxiety and increasing patient compliance.

Software:

- Leader Evaluation ManagerSM—performance management software system that automates the Annual Evaluation, 90-Day Plan, and Monthly Report Card.

- Idea Management Software, Results through Innovation—productivity tools and software to encourage and cultivate the intellectual capital of your employees.
- Rounding ManagerSM, Results through Rounding for Outcomes—productivity software to enable health care organizations to capture and monitor operational and performance data in real time.

Order directly through **www.firestarterpublishing.com** or call Fire Starter Publishing at **1-866-354-3473**.

OTHER STUDER GROUP RESOURCES

For information regarding our Institutes, conferences, publications, and magazine Hardwired Results®, log onto www.studergroup.com or call Studer Group at 1-850-934-1099.

STUDER GROUP GLOSSARY OF TERMS

AIDETSM:

Five Fundamentals of Patient Communication—Acknowledge, Introduce, Duration, Explanation, and Thank You—are five behaviors to use in every patient/family encounter to anticipate, meet, and exceed the expectations of the customer.

Communication Board:

A message board organized and aligned by Pillars and placed strategically in an organization or department to communicate consistent messages and key information to the staff and physicians. Most organizations use the five Pillars—Service, People, Quality, Financial, and Growth—to organize and communicate the information.

Connecting the Dots:

To use key words to link actions to the goals and values of the organization and help others understand what you are doing and why. This can be done throughout all activities, i.e. awards, announcements, thank yous, staff meetings, new policies, etc.

Hardwire:

The process by which an organization, department, team, or individual integrates a behavior or action into the daily operations to ensure it becomes a habit and is done.

Harvest Wins:

The action of taking positive information learned and sharing it with others. This action will not only help people feel they have purpose, do worthwhile work, and make a difference, but will also allow others to learn from others success. Behavior that is rewarded and recognized will be repeated.

Healthcare Flywheel®:

A teaching tool/diagram that illustrates the power that Purpose, Passion, Principles, and Pillar Results have in creating momentum in an organization. Studer Group developed the Healthcare Flywheel to help organizations understand the journey in creating great places for employees to work, physicians to practice, and patients to receive care.

Key Words at Key Times:

Key words at key times are things said and done to “connect the dots” and help patients, families, and visitors better understand what you are doing. They align your words with your actions to give a consistent experience and message.

Manage Up:

Positioning others in a positive light. It is a form of communication at all levels that aligns your own skills, your co-workers, other departments, and physicians to the goals of your organization. Example: Letting your supervisor know to attend a celebration regarding achievement of results or to pass on positive information regarding an area so that they can be recognized. This makes you and your organization better, and aligns everyone to working on the right goals.

Must HavesSM:

Specific actions and “to do’s” common to organizations achieving exceptional results. These Must HavesSM are based on the Nine Principles® and evolved from the Studer Group partnering with more than 250 organizations to identify these actions. The Must HavesSM are (1) Rounding for Outcomes, (2) Employee Thank You Notes, (3) Selection and the First 90 Days, (4) Discharge Phone Calls, (5) Key Words at Key Times, and (6) Aligning Leader Evaluations with Desired Behaviors.

Nine Principles®:

A sequenced step-by-step process and roadmap to attain desired results, and help leaders develop and achieve an excellence-based culture. The Nine Principles® are (1) Commit to Excellence, (2) Measure the Important Things, (3) Build a Culture Around Service, (4) Create and Develop Leaders, (5) Focus on Employee Satisfaction, (6) Build Individual Accountability, (7) Align Behavior with Goals and Values, (8) Communicate at all Levels, and (9) Reward and Recognize Success.

Pillar:

A foundation and framework used to set organizational goals and the evaluation process. Once the goals for each Pillar are set for the organization as a whole, they are cascaded throughout—from the division level to department or unit level, to individual leader. Most organizations use the five Pillars—Service, People, Quality, Financial, and Growth. These can be customized to fit specific language or organizational terms, or other Pillars can be added, such as Community. These Pillars then lay the framework for consistent evaluations, communications, and work planning.

Rounding for Outcomes:

Communicating with employees, physicians, and patients in such a way that there is a specific purpose to walk away with specific outcomes.

SECTION FOUR:

H-CAHPS SURVEY QUESTIONS

Listed below are the questions contained in the survey as of December 2005:

YOUR CARE FROM NURSES:

1. During this hospital stay, how often did nurses treat you with courtesy and respect?
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always

2. During this hospital stay, how often did nurses listen carefully to you?
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always

3. During this hospital stay, how often did nurses explain things in a way you could understand?
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always

4. During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always
 - 5 I never pressed the call button

YOUR CARE FROM DOCTORS:

5. During this hospital stay, how often did doctors treat you with courtesy and respect?
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always

6. During this hospital stay, how often did doctors listen carefully to you?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

7. During this hospital stay, how often did doctors explain things in a way you could understand?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

THE HOSPITAL ENVIRONMENT:

8. During this hospital stay, how often were your room and bathroom kept clean?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

9. During this hospital stay, how often was the area around your room quiet at night?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

YOUR EXPERIENCES IN THIS HOSPITAL:

10. During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan?

- 1 Yes
- 2 No (*If No, go to Question 12.*)

11. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

12. During this hospital stay, did you need medicine for pain?

- 1 Yes
- 2 No (*If No, go to Question 15.*)

13. During this hospital stay, how often was your pain well-controlled?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

14. During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

15. During this hospital stay, were you given any medicine that you had not taken before?

- 1 Yes
- 2 No (*If No, go to Question 18.*)

16. Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

17. Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

WHEN YOU LEFT THE HOSPITAL:

18. After you left the hospital, did you go directly to your own home, to someone else's home, or to another health facility?

- 1 Own home
- 2 Someone else's home
- 3 Another health facility (*If Another, Go to Question 21.*)

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?

- 1 Yes
- 2 No

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?

- 1 Yes
- 2 No

OVERALL RATING OF HOSPITAL:

Please answer the following questions about your stay at the hospital named on the cover. Do not include any other hospital stays in your answer.

21. Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?

- 0 Worst hospital possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best hospital possible

22. Would you recommend this hospital to your friends and family?

- 1 Definitely no
- 2 Probably no
- 3 Probably yes
- 4 Definitely yes

ABOUT YOU: There are only a few remaining items left.

23. In general, how would you rate your overall health?

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor

24. What is the highest grade or level of school that you have completed?

- 1 8th grade or less
- 2 Some high school, but did not graduate
- 3 High school graduate or GED
- 4 Some college or two-year degree
- 5 Four-year college graduate
- 6 More than four-year college degree

25. Are you of Spanish, Hispanic or Latino origin or descent?

- 1 No, not Spanish/Hispanic/Latino
- 2 Yes, Puerto Rican
- 3 Yes, Mexican, Mexican-American, Chicano
- 4 Yes, Cuban
- 5 Yes, other Spanish/Hispanic/Latino

26. What is your race? Please choose one or more.

- 1 White
- 2 Black or African-American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native

27. What language do you mainly speak at home?

- 1 English
- 2 Spanish
- 3 Some other language (please print): _____



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913 Gulf Breeze Parkway, Suite 6
Gulf Breeze, FL 32561
Phone: 850-934-1099
www.studergroup.com