



AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



Narrative Items for the CAHPS Child Hospital Survey (Child HCAHPS)

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Background

- CAHPS Child Hospital Survey (Child HCAHPS)
 - ▶ Asks questions about several aspects of hospital experience
 - ▶ Helps hospitals identify areas in need of improvement
 - ▶ Used along with other information for Quality Improvement (QI)
 - ▶ Current version includes one open-ended question for parents to provide additional detail on the hospital stay
- Development process follows Common Principles of Rigor in Narrative Elicitation, with goal of achieving:
 - ▶ Completeness
 - ▶ Balance
 - ▶ Representativeness

Child HCAHPS Narrative Item Set, Beta Version



Summary	Item wording
Q1: Most important info	First, thinking about what mattered to you and your child, what would you most like to tell us about your child's recent hospital stay?
Q2: What went well?	Second, we'd like to focus on any experiences during your child's hospital stay that went particularly well. Please explain what happened, how it happened, and how it felt.
Q3: What went poorly?	Next, we'd like to focus on any experiences during your child's hospital stay that you wish had gone differently. Please explain what happened, how it happened, and how it felt.
Q4: Parent Interactions	Please describe your own interactions with your child's doctors, nurses and other hospital staff, and how you got along with them.
Q5: Child Interactions	Please describe how doctors, nurses and other hospital staff interacted with your child , and how they got along with your child.
Q6: Care coordination	How well do you think the different doctors, nurses, and other hospital staff communicated with each other and coordinated your child's care? Please explain how this affected you or your child.

Testing in Progress

- Narrative items vs. Structured Hour-long Interviews

- ▶ **Topics**

- Do the same topics arise?
- Are there topics that are less likely to come up in the narrative item responses?
- Do the issues raised by parents provide detail/context to closed-ended item responses and/or do parents raise issues that are not covered in the closed-ended items?

- ▶ **Actionability**

- What proportion of respondents provide information that is sufficiently detailed for hospitals to take action to address the issue (if desired)?
- Is information obtained in response to narrative items similarly actionable when compared to interviews?

Methods

- 125 participants were recruited from Ipsos Knowledge Network Panel, a diverse and nationally representative panel
 - ▶ Eligibility: Parents of a child who was hospitalized overnight in the past 12 months (*includes both pre- and post- COVID hospitalizations*)
- Process
 - ▶ Participants were assigned to either online (105) or phone (20) survey mode
 - ▶ 40 participants also completed hour-long structured interviews
 - ▶ Responses to narrative items and transcribed interviews were coded

Example responses to item set: A positive experience

Question content (abbreviated)	Parent response
Q1: Most important info	My daughter was so well cared for.
Q2: What went well?	The nurses and doctors were attentive to her and me. They made sure we were both informed and comfortable during our entire stay.
Q3: What went poorly?	Actually, this visit was ideal. I wouldn't have changed a thing.
Q4: Parent Interactions	Each one of them was kind and incredibly informative when I asked questions.
Q5: Child Interactions	They focused on her, made eye contact, and addressed her when they interacted with her.
Q6: Care coordination	All were kind. No one treated us like an inconvenience.

Example responses to item set: A mixed experience

Question content (abbreviated)	Parent response
Q1: Most important info	Stressful. Needed more frequent updates from providers.
Q2: What went well?	Everyone seemed very competent and caregivers seemed to know what they were doing. Hospital facility was excellent.
Q3: What went poorly?	Transition between departments were chaotic, and parents were left feeling lost.
Q4: Parent Interactions	Nurses were great. Doctors were excellent too but clearly [too] pressed for time to explain anything to parents.
Q5: Child Interactions	Child was well cared for.
Q6: Care coordination	Transitions could have been improved between departments.

Example responses to item set: A mixed experience

Question content (abbreviated)	Parent response
Q1: Most important info	The nurse was very pleasant and considerate of my son's needs but the actual doctor should never work with children he did not have the temperament for it.
Q2: What went well?	When we first arrived at the hospital my son was in a lot of pain and very scared but the emergency physician calmed him down and quickly alleviated his pain. He actually had him smiling by telling him some of the worst jokes in creation. Now that guy was made for that job.
Q3: What went poorly?	My son is allergic to aspirin and the attending physician did not pay attention to the records and was about to issue my child something that contain aspirin. I was truly seething with anger
Q4: Parent Interactions	My provider made dealing with the hospital very easy. Other than that one doctor it was fine.
Q5: Child Interactions	Nurses got along well with my son also he enjoyed his time with them. The provider swooped in got the info and was gone.
Q6: Care coordination	Providers all seemed the same quick in quick out. The staff did a stand up job except one physician.

Topics that Commonly Emerged

- Communication
 - ▶ Listening
 - ▶ Explaining
 - ▶ Providing information in a timely way
- Relationships
 - ▶ Emotional rapport
 - ▶ Shared decision making
- Quality
 - ▶ Thoroughness
 - ▶ Care coordination
 - ▶ Patient safety
 - ▶ Efficiency/timing

Topics that Commonly Emerged

- Hospital environment
 - ▶ Physical surroundings
 - ▶ Meals/food
- Parent and child factors
 - ▶ Emotional experiences
 - ▶ Advocacy
- Hospital processes
 - ▶ Admission
 - ▶ Discharge

Feedback from Parents

- Having the ability to provide comments is meaningful
- Be thoughtful about selecting:
 - ▶ Timing of administration (e.g., at time of discharge, some time after discharge)
 - ▶ Mode (in-hospital tablet, phone, online, paper administration)
- Communicate how information will be used and whether or not the patient is identifiable
- Consider preferred language and literacy among parent respondents

Notes reflect conversations with the UCLA Mattel Children's Hospital English and Spanish Parent/Family Advisory Committees

What's Next

- Finalize topic and actionability coding
- Final decisions about wording
- Cognitive testing
- Decisions about additional release of supplementary interview protocol
- Incorporate parent feedback into narrative items guidance document
- Release for widespread use

Thanks!