



STATE OF WASHINGTON  
**DEPARTMENT OF HEALTH**  
PO Box 47852 · Olympia Washington 98504-7852

May 19, 2016

The Honorable Eileen Cody, Chair  
House Health Care & Wellness Committee  
Post Office Box 40402  
Olympia, Washington 98504-0402

Dear Representative Cody:

Senate Bill 6485 (Chapter 261, Laws of 2004) was enacted to improve the regulatory environment for hospitals. The legislation requires state agencies, including the Department of Health, to make an anonymous evaluation instrument available to the hospitals they inspect or audit.

The agency compiles the results of the evaluations and replies to the legislature annually. Enclosed is the 2015 report covering evaluations from September 2014 to August 2015.

Since last year's report the department has implemented strategies to increase the number of hospitals and hospital employees participating in the survey. Department inspectors now promote the survey at the entrance and exit conference portion of the hospital inspection, and a follow-up survey reminder system is now being used. These strategies were implemented in the spring of 2015 and a slight increase in the number of responses, from 12 to 14, was noted. The effectiveness of these strategies will be monitored and revised as needed.

The survey is available online, posted to our [hospital inspection webpage](#).

If you have any questions about this process or the results, please call me at 360-236-2927 or email me at [lisa.hodgson@doh.wa.gov](mailto:lisa.hodgson@doh.wa.gov).

Sincerely,

Lisa Hodgson, Director  
Office of Health Professions and Facilities

Enclosure

cc: Members, Senate Health Care Committee  
David Postman, Governor's Office  
John Wiesman, Department of Health  
Martin T. Mueller, Department of Health

# Results of Hospital Survey/Audit Customer Satisfaction Survey September 2014 – August 2015

From September 1, 2014 through August 31, 2015, hospital inspection teams from the Department of Health's Office of Investigation and Inspection conducted 35 state licensing hospital inspections. Fourteen representatives from those hospitals responded to the customer satisfaction survey. Two of the 14 hospitals did not complete all questions.

Some survey questions were revised January 1, 2015. The content of the questions remained the same, but they were reworded or reorganized in order to provide clarity. The revised questions are noted in the survey results below.

## Survey Results Summary -- 14 Hospitals

**Question 1:** Please select the agency involved in the inspection or audit.

Department of Health, Inspections and Investigations: 100 percent (14 out of 14).

**Question 2:** Were the standards and codes applied consistently throughout the inspection or audit?

93 percent (13 out of 14) responded "yes."

**Question 3:** Did you understand the inspection findings (deficiencies) or audit findings you were cited for? If you answer is *no*, please explain:

93 percent (13 out of 14) responded "yes."

Comments:

- *"One room number cited for a location of an alcohol based gel dispenser was not identifiable by facility staff or the OFM inspector."*
- *"One citation led to significant discussion with the DOH and the Fire Marshal's offices. It has been resolved."*

**Question 4:** On a scale of 1-5, with "1" being highly inaccurate and "5" being highly accurate, how accurately do you believe the inspection findings or audit findings reflect your hospital's compliance with the regulations? Feel free to provide further explanation of your response.

42 percent (five out of 12) rated the inspection/audit findings a "5."

50 percent (six out of 12) rated the inspection/audit findings a "4."

8 percent (one out of 12) rated the inspection/audit findings a "3."

Comment:

- *"There were a couple of issues that were open for interpretation, but this was minimal."*

**Question 5:** On a scale of 1 to 5, “1” being very poor and “5” being very good, rate the inspection or audit staff on the following criteria:

Courteous/Professional:

91 percent (nine out of 12) rate staff a “5” or very good.

9 percent (three out of 12) rate staff a “4.”

Knowledgeable:

75 percent (nine out of 12) rate staff a “5” or very good.

17 percent (two out of 12) rate staff a “4.”

8 percent (one out of 12) rate staff a “3.”

Prepared:

84 percent (10 out of 12) rate staff a “5.”

8 percent (one out of 12) rate staff a “4.”

8 percent (one out of 12) rate staff a “3.”

Fair:

84 percent (10 out of 12) rate staff a “5.”

16 percent (two out of 12) rate staff a “4.”

**(2014) Question 6:** To what extent did the inspection process improve patient care and compliance with state law without placing unnecessary administrative burden on your facility?

Comments:

- *“To re-focus on infection prevention practices.”*
- *“The findings were relevant and they shared improvement strategies.”*
- *“Clear expectations and explanations were provided.”*

**(2015) Question 6:** On a scale of 1 to 5, “1” being very poor and “5” being very good, rate how the inspection process improved patient care without placing unnecessary administrative burden on your facility.

33 percent (three out of nine) rated the inspection a “5.”

56 percent (five out of nine) rated the inspection a “4.”

11 percent (one out of nine) rated the inspection a “3.”

**(2014) Question 7:** Do you have any recommendations for improvements on future inspections?

Narrative comments received:

- *“One survey member was a little abrupt, but knowledgeable. He seemed abrupt when dealing with the hospital leader assigned to his*

*team, he was courteous with staff however.”*

- *“Excellent work by surveyors.”*
- *“Interview of staff should not be in private when findings are based on staff ability to answer questions. We were told staff were unable to answer questions, but staff report not understanding what was being asked of them.”*

**(2015) Question 7:** On a scale of 1 to 5, “1” being very poor and “5” being very good, rate how the inspection process improved compliance with state law without placing unnecessary administrative burden on your facility.

33 percent (three out of nine) rated the inspection process a “5.”

56 percent (five out of nine) rated inspection process a “4.”

11 percent (one out of nine) rated inspection process a “3.”

**(2014) Question 8:** Do you have any other general comments about the overall process or staff interactions?

Narrative comments received:

- *“The survey was very well conducted. I felt like I had good communications from the team on the expectations of the survey.”*
- *“The surveyors assigned to our facility were clearly well prepared and experiences in health care.”*

**(2015) Question 8:** Do you have any recommendations for improvements on future inspections?

Two out of nine responded “yes.”

Comments:

- *“Have a more structured agenda and time line.”*
- *“An agenda to at least identify what day certain interviews will take place will be helpful. The team changed the schedule quite a few times which placed some difficulties on staff attempting to facilitate the survey, which was intensified by our very limited hospital staff trying to accommodate 7 surveyors at one time.”*

**(2015) Question 9:** Do you have any other general comments about your interactions with our staff?

Three out of nine responded “yes.”

Comments:

- *“Staff was very good at sharing info and not talking down to hospital staff.”*
- *“In general the DOH staff was very courteous, consultative, and*

*considerate of our staffing limitations.”*

- *“All of the surveyors were collaborative and knowledgeable, and while they held us accountable, they were kind and non-threatening. Much appreciated, especially for the front line staff.”*

**(2015) Question 10:** Do you have any other general comments about the overall inspection or audit process?

One out of nine responded “yes.”

Comments:

- *“More of a learning and positive experience than has been in past.”*

### **Comparison to Previous Years**

During the past year, the department has worked to improve the Hospital Customer Satisfaction response rate by promoting the survey multiple times during the on-site inspection and sending out automatic survey reminders via email to recently inspected hospitals. These strategies were implemented in the spring of 2015. While not enough time has passed to fully evaluate the effectiveness of these new strategies, a slight increase in the number of responses, from 12 to 14, was noted.

In addition to working toward improving response rates, the department also reviewed the survey tool and made revisions to provide clarity and gather more accurate and measurable data. Two-part questions were revised to ask each question separately; for example, a question asked “To what extent did the inspection process *improve patient care and compliance with state law...*?” This was revised to ask each question separately, resulting in more targeted responses. Some questions were also changed from requiring free text responses to rating scales, allowing for easier comparison of data from year to year.

Those who participated in the survey had comparably positive responses and feedback to last year’s report. The majority of respondents indicated that standards and codes were applied consistently, they understood the citations, and the inspection accurately reflected hospital compliance with regulations and improved patient care and hospital compliance without unnecessary administrative burden.

Positive comments regarding the inspection process and interactions with inspection staff were received. The majority of respondents indicated that inspection staff was courteous, knowledgeable, prepared and fair. Recommendations for process improvement were also received and reviewed with the department’s inspection staff.

Providing excellent customer service continues to be a priority for the department. The Hospital Customer Satisfaction survey is used as a process improvement tool to evaluate and enhance service to our customers. The department will continue to work with customers to encourage participation in the improvement of the inspection process.