

County of Santa Clara Health System

Professional Research Consultants Communication Technology

Annual Surveillance Report: July 1, 2022 – June 30, 2023

1. DESCRIPTION OF HOW THE SURVEILLANCE TECHNOLOGY WAS USED

The County of Santa Clara Health System (CSCHS) contracts with the Professional Research Consultants, Inc. (PRC) to conduct surveys of patient experience in compliance with Centers for Medicare and Medicaid Services (CMS) regulations for CMS-mandated surveys. PRC conducts surveys via telephone on patients who have had recent hospital stays at Santa Clara Valley Medical Center, O'Connor Hospital, or St. Louise Regional Hospital or have been seen at one of the outpatient clinics to solicit feedback on patient experience. These surveys were recorded and stored on the PRC servers when patients verbally consent to the recording. PRC submitted the mandated reporting to CMS, reported any patient complaints to the hospital, and provided routine reports on patient satisfaction for quality improvement purposes.

PRC only conducts surveys on patients who have been discharged from the hospital or whose outpatient visit has concluded. During the reporting period, PRC performed 30,655 surveys, which included 4,658 for HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems), 1,983 for Emergency Department, 23,238 for CGCAHPS (Clinician and Group Consumer Assessment of Healthcare Providers and Systems), 138 for MIPs (Multi-directional Impact Protection System), and 638 for the Rehabilitation Department.

Limited CSCHS staff had access to listen to the recordings of patient surveys and to access de-identified survey data by logging into the PRC portal. Enterprise Quality & Safety Department system administrators grant access to department leadership to review the survey data, and separate access must be granted to listen to the recordings. There is an audit trail showing when users access the system.

There have been no reports of misuse and the systems are functioning properly and used as defined in the Surveillance Use Policy (SUP).

2. DATA SHARING WITH OUTSIDE ENTITIES

During the reporting period, CSCHS shared the PRC data with CMS per regulation requirements. No other data has been shared with outside entities.

3. COMMUNITY COMPLAINTS OR CONCERNS

CSCHS values community and customers' feedback and has several ways for the patients and customers to file their concerns, questions, or complaints with the Customer Relations, Administration, or Compliance Office.

During the reporting period, CSCHS did not receive any community complaints regarding the PRC surveys.

4. NON-PRIVILEGED INTERNAL AUDITS/POLICY VIOLATIONS

The personnel in charge of the PRC technology was the Senior Health Care Program Analyst in the Quality & Safety division. The users who had access to the PRC system have received a copy of the Surveillance Use Policy (SUP) and obtained their written confirmation that they understand it.

The Health System Ethics, Privacy & Compliance Office performed an audit to confirm the data retention requirements were being followed for this technology. The PRC vendor confirmed that all recordings were deleted within twelve months of recording. CSCHS complied with the Surveillance Use Policy requirements regarding oversight of the technology.

There were no reports of inappropriate use of the PRC system, and no sanctions were necessary related to use of these technologies.

5. EFFECTIVENESS IN ACHIEVING IDENTIFIED PURPOSE

CSCHS used the PRC system to successfully provide the mandated patient experience monitoring required by CMS. This feedback was invaluable to CSCHS and allowed improvements to the patient experience.

6. PUBLIC RECORDS ACT REQUESTS

The Health System Ethics, Privacy & Compliance Office tracked all California Public Records Act requests for CSCHS, and there were no Public Record Act requests that involved data gathering by this system.

7. ANNUAL COSTS

During the current reporting period, the total cost for the Professional Research Consultants Communication Technology Service was \$510,000 and included:

- Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CGCAHPS): \$345,520.50
- Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS): \$103,165
- Multi-directional Impact Protection System (MIPS): \$ 3,415
- Emergency Department: \$43,745
- Rehabilitation Department: \$14,155

During the next reporting period, the approved budget is \$989,000.

The cost is determined by the number of survey interviews completed and/or a base cost for analysis and preparation of web-based reports that are available to the client organization. Each survey unit has a desired number of interviews to be conducted based on total volumes. Completion volume is dependent on the patient willingness to participate in this voluntary survey. Payment for interviews does not exceed the predetermined number to achieve statistical validity.

- Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CGCAHPS): No base fee, \$14.50/interview

- Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS): Base fee \$1,000, \$17.50/interview
- Expanded Inpatient Loyalty Study (Obstetrics/Primary): \$17.50/interview
- Hospital Loyalty Study: Base fee \$6000, \$15.00 per interview
- Hemodialysis Consumer Assessment of Healthcare Providers and Systems (CAHPS): base fee \$1000 \$17.50/interview
- Consumer Assessment of Healthcare Providers and Systems (CAHPS) for Multi-directional Impact Protection System (MIPS): Annual Rate \$4,800 flat rate, No interview charges

The source of funding is from Budget Unit 921 which is an Enterprise Fund.