

Consumer Assessment of Healthcare Providers and Systems® Home and Community Based Services (HCBS) Survey-2023 Findings WV Traumatic Brain Injury Waiver Program

Purpose of the CAHPS® HCBS Survey

Center for Medicare and Medicaid Services (CMS) developed the Consumer Assessment of Healthcare Providers and Systems® (CAHPS®) Home and Community Based Services (HCBS) Survey for voluntary use in Medicaid HCBS programs as a tool for quality assessment and improvement, as well as for public reporting by states that choose to do so. The West Virginia Bureau for Medical Services (BMS) decided to use this survey instrument.

The purpose of the CAHPS® HCBS Survey is to provide BMS and other program stakeholders with information about the TBI Waiver program Respondents' experience with paid staff who support and/or provide their care.

In contrast to other experience or satisfaction surveys that are disability-specific, the CAHPS® HCBS survey was designed so that individuals with diverse types of disabilities (e.g., physical, cognitive, intellectual, behavioral) could respond to the same questionnaire, thus enabling comparisons across programs and disability groups within the state. The CAHPS® HCBS Survey is a tool that BMS selected to use as part of its quality improvement program to monitor quality in all three (3) Waiver programs.

This is the seventh year the CAHPS® HCBS Survey has been administered by Acentra Health with the TBIW Respondents.

Overview of the CAHPS® HCBS Survey*

The CAHPS®HCBS survey asks program individuals to report on their experiences with various aspects of their Traumatic Brain Injury Waiver providers and services, including the personal attendant direct care staff, case manager, transportation services, and their ability to engage in community life.

The CAHPS® HCBS survey includes a maximum of sixty-nine (69) core questions about the participant's experience of care in the following areas:

1. Staff are reliable and helpful
2. Staff listen and communicate well
3. Case Manager is helpful
4. Choosing the service that matter to you
5. Transportation to medical appointments
6. Personal Safety
7. Planning your time and activities
8. Ratings of providers

The survey also begins with a set of three (3) cognitive screening questions and then a set of nine (9) questions to identify the relevant waiver services that the person might use. The survey ends with fifteen (15) demographic questions. Additional questions specific to a Waiver can be added to the Survey tool prior to the demographic section. Based on recommendations from stakeholders, Acentra Health developed the following survey items for the TBI Waiver covered service Non-Medical Transportation.

Survey Item	Survey Item Text
QA	In the last 3 months, how often did you have a way to get out in the community
QB	In the last 3 months, did your Personal Attendant Staff provide transportation to community outings
QC	In the last 3 months, were you able to get in and out of the Personal Attendant's car easily
QD	In the last 3 months, how often did you have a way to get out and complete errands
QE	In the last 3 months, did your Personal Attendant Staff provide transportation to help you complete your errands
QF	In the last 3 months, were you able to get in and out of the Personal Attendant's car easily

*Source: Technical Assistance Guide for Administration of the CAHPS® Home and Community-Based Services Survey. October 2017. CMS.

Collection of Survey Data-TBIW

The survey was administered from February 1st-April 30th, 2024. Eligible Respondents included adults 18 years old or older who had been enrolled and active (receiving either Case Management or Personal Attendant Services) for a minimum of three (3) months. This represented eighty-one (81) potential Respondents. Due to the small program size, all available/willing TBIW Respondents were contacted to participate in the survey.

Before initiation of data collection, a letter notifying eligible Respondents was sent alerting them to expect a telephone call about the survey interview. This was followed by Acentra Health staff making initial telephone contact with the Respondents to introduce the survey, explain its purpose, and determine if the Respondent was willing to participate. If willing to participate, Acentra Health staff then scheduled the interview date and time. The option of in-person or phone interviews was offered this year with the end of the Public Health Emergency (PHE) COVID-19. Some interviews were conducted during the Respondents in-person annual medical eligibility evaluation.

It was also during this initial call that it was determined if a proxy respondent was necessary for the interview. Proxy refers to any help the respondent received in completing the survey; such help ranges from answering all questions for the respondent to providing prompts, translation, or help with assistive technology.

BMS approved the following types of Proxy Respondents for the survey purpose: legal guardians, friends or family who are unpaid, and/or individuals with regular contact with the person.

Fifty-five (55) surveys were conducted and completed. This represents a sixty-seven (67) percentage response rate. Five (5) members opted for in-person interviews, the remaining interviews were conducted by phone.

How to Interpret the Results

The following types of data are presented in this report.

1. Respondent characteristics (e.g., age, sex, race, etc.)

2. Composite measures. These are scores derived by combining groups of related questions.

3. Global ratings and recommendation questions. These questions ask how Respondents rate their staff, and whether they would recommend their staff to family and friends who need that type of help.

Results - Respondent Characteristics

GENDER	n = 55	% of n
Female	16	29%
Male	39	71%

AGE	n = 55	% of n
18 - 24 Years	3	5%
25 - 34 Years	11	20%
35 - 44 Years	13	24%
45 - 54 Years	12	22%
55 - 64 Years	9	16%
65 - 74 Years	5	9%
75 Years +	2	4%

RACE	n = 55	% of n
Black/African American	2	4%
White	49	89%
Other	4	7%

EDUCATIONAL LEVEL	n = 55	% of n
8th Grade or Lower	2	4%
Some High School	13	24%
High School/GED Graduate	29	54%
Some College	6	11%
4 Year College Degree	4	7%

HISPANIC/LATINO/SPANISH	n = 55	% of n
Yes	0	0%
No	55	100%

LANGUAGE SPOKEN AT HOME	n = 55	% of n
English	55	100%
Spanish	0	

LIVING ARRANGEMENT	n = 55	% of n
Lives Alone	19	35%
Lives with Family Member(s)	36	65%
Lives with Other(s)	2	4%

OVERALL HEALTH	n = 55	% of n
Excellent	4	7%
Very Good	18	33%
Good	19	35%
Fair	8	15%
Poor	6	11%

MENTAL/EMOTIONAL HEALTH	n = 55	% of n
Excellent	4	7%
Very Good	15	27%
Good	16	29%
Fair	16	29%
Poor	2	4%

TYPE of SERVICE DELIVERY MODEL (SDM)	n = 55	% of n
Traditional	24	44%
Personal Options	31	56%

Results - Composite Measures

Responses to individual survey questions were combined to form composite measures of beneficiaries' experiences with their Waiver services. Composite measures are useful for reporting the survey results because they efficiently summarize what would otherwise be a large amount of data. This approach

makes it easier for users to understand and interpret the data display. These scores are presented on a 0 to 100-point scale.

COMPOSITE MEASURES	Score	n=55
Staff are Reliable and Helpful	92.0	55
How Well Staff Communicate & Treat You	97.0	55
Case Manager is Helpful	91.5	55
Choosing the Services That Matter to You	85.8	55
Transportation to Medical Appointments	88.5	55
Personal Safety and Respect	97.0	55
Planning Your Time and Activities	80.0	55

Results - Global Ratings and Recommendations

Global ratings and recommendation questions are asking how Respondents rate their staff and whether they would recommend their staff to family and friends who need that type of help. The initial rating was based on a measurement scale of 0 to 10, with zero being the worst provider and ten being the best. These items were transformed to a 0 to 100 scale (by multiplying the response by 10) to be consistent with the presentation of other results.

GLOBAL RATINGS	Score	n=55
Personal Assistance & Behavioral Health Staff	77.8	45
Homemaker	84.6	26
Case Manager	75.7	37

RECOMMENDATION of	Score	n=55
Personal Assistance & Behavioral Health Staff	96.3	54
Homemaker	96.3	54
Case Manager	93.5	46

NO UNMET NEED	Score	n=55
Dressing/Bathing	100	55
Meal Preparation/Eating	100	55
Medication Administration	100	55
Toileting	100	55
Household Tasks	100	55

Results - Additional Items Not reflected in Global or Composite Results

PHYSICAL SAFETY	Score	n=54
<u>Not</u> Hit or Hurt by Staff	100%	54

WAS THE RESPONDENT ABLE TO GIVE VALID RESPONSES?	# of "Yes" Responses	% of "Yes" Responses
Yes	48	87%

DID SOMEONE HELP THE RESPONDENT COMPLETE THIS SURVEY?	# of "Yes" Responses	% of "Yes" Responses
Yes	35	83%

CASE MANAGER HELPFUL? - 2 Questions	# Responses (n)	# of "Yes" Responses	% of "Yes" Responses
11. In the last 3 months, did you get help from your case manager to help make sure that you had all the services you need?	53	47	89%
48. Do you know who your case manager is?	54	44	81%

Non-Medical Transportation (TBIW Service Code)

COMMUNITY OUTINGS	# of Responses	% Usually and Always
In last 3 months, how often did you have a way to get out in the community would you say...	54	93%
ESSENTIAL ERRANDS	# of Responses	% Usually and Always
In the last 3 months, how often did you have a way to get out and complete essential errands?	54	93%

Limitations, Findings and Recommendations:

Limitations

The survey results are limited by the size of the Traumatic Brain Injury Waiver program. All eligible program Respondents were contacted and asked to participate in the survey process. The program size will always be a hindrance in seeking to secure a valid sample size as recommended by the survey developers. Following the lifting of the PHE, survey administration was conducted, allowing for the option of in person interviews, nine (9) percent of the respondents chose in person interviews. In addition to quarantine and isolation procedures for those who have been exposed to or infected with COVID-19, social distancing has been enforced amongst the general population to reduce the transmission of COVID-19. *Social isolation is already a common issue for individuals with TBI, and further separation from family, friends and coworkers has been extremely overwhelming. **

Findings

Any composite scores that fell below 86% were targeted for in-depth review. The following areas of care fell below this quality benchmark for the 2023 survey findings.

AREA of CARE	COMPOSITE SCORE 2023
PLANNING YOUR TIME AND ACTIVITIES	80%
CHOOSING THE SERVICES THAT MATTER TO YOU	85.8%

Each composite score is linked to specific questions within the survey tool. A summary of the questions and average score responses for each composite measure are below.

Composite & Survey Items Scores: PLANNING YOUR TIME AND ACTIVITIES			
Survey Item	Survey Item Text	Average Score	# of Responses to Survey Item
75	In the last 3 months, when you wanted to, how often could you get together with these family members who live nearby? Would you say . . .	70.0	40
77	In the last 3 months, when you wanted to, how often could you get together with these friends who live nearby? Would you say . . .	48.1	27
78	In the last 3 months, when you wanted to, how often could you do things in the community that you like? Would you say . . .	68.8	48
79	In the last 3 months, did you need more help than you get from {personal assistance/behavioral health staff} to do things in your community?	96.4	55
80	In the last 3 months, did you take part in deciding what you do with your time each day?	98.2	55
81	In the last 3 months, did you take part in deciding when you do things each day—for example, deciding when you get up, eat, or go to bed?	98.2	55
Composite Score		80.0	

Seventy (70) percent of the forty respondents (Q 75) stated that when they wanted, they were **Always** able to get together with family members who lived nearby.

Forty-eight (48) percent of the twenty-seven respondents (Q 77) stated that when they wanted, they could **Always** get together with the friends that live nearby.

Sixty-eight (68) percent of the forty-eight respondents (Q 78) stated that when they wanted, they were **Always** able to do things in the community that they like.

Composite & Survey Items: CHOOSING THE SERVICES THAT MATTER TO YOU

Survey Item	Survey Item Text	Average Score	# of Responses to Survey Item
56	In the last 3 months, did your [program-specific term for “service plan”] include none, some, most, all of the things thar are	74.0	53
57	In the last 3 months, did you feel {personal assistance/behavioral health staff} knew what is on your [program-specific term for “service plan”], including the things that are important to you?	98.0	52
Composite Score		85.8	

Seventy-four (74) percent of the Respondents stated that their Service plan included ***ALL of the things that were important to them.***

Ninety-eight (98) percent of the Respondents answered **YES** to the question, “In the last 3 months, did you feel your personal attendant staff knew what is on your service plan including the things that are important to you?”

Recommendations

UMC Recommendations:

1. Maintain the survey data for future comparison and analysis.
2. Review survey results with the TBI Waiver Quality Improvement Advisory Council, TBI Waiver Service Providers and Stakeholders.
3. Continue to integrate brain injury knowledge and skills into the quarterly provider trainings.
4. Consider the use of survey responses for reporting on CMS performance measures. (Service Plan and Health and Welfare measures)
5. Include loneliness/mood screening question(s) on Person-Centered Assessment Social/Emotional Needs sections and address these needs on the Service Plan with new policy release pending in 2024.
6. Consider adding additional questions to the Person-Centered Assessment Social/Emotional Needs sections that includes information about family/friends location, visiting opportunities and address these needs on the Service Plan.

View the Survey Tool

[CAHPS Home and Community Based Services Survey, August 30, 2016 \(medicaid.gov\)](#)

About the Survey

<https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/cahps-hcbs-survey/index.html>

View CMS Home and Community Based Services Quality Measure Set

[HCBS Measure Set SMDL \(medicaid.gov\)](#)

Reference

* Hwang TJ, Rabheru K, Peisah C, Reichman W, Ikeda M. Loneliness, and social isolation during the COVID-19 pandemic. *Int Psychogeriatr.* 2020 Oct;32(10):1217-1220. doi: 10.1017/S1041610220000988. Epub 2020 May 26. PMID: 32450943; PMCID: PMC7306546.

** Brain Injury and COVID-19: Tips for Successful Navigation. April 2021, TBI TARC | tbitarc@hsri.org.