

Consumer Assessment of Healthcare Providers and Systems® Home and Community Based Services (HCBS) Survey-2022 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 sixth year the CAHPS® HCBS Survey has been administrated by Kepro 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, Kepro 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, 2023. 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 seventy-two (72) potential Respondents. All eligible potential Respondents were contacted to participate in the survey due to the small program size.

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 Kepro staff making initial telephone contact with the Respondents to introduce the survey, explain its purpose, and upon receipt of verbal consent, schedule the interview date, place, and time. It was during this initial call that the participant was informed that due to the COVID-19, Public Health Emergency (PHE), phone interviews were only being offered. 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.

Thirty (30) surveys were conducted and completed.

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 similar 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 = 29	% of n
Female	7	24%
Male	22	76%

AGE	n = 30	% of n
18 - 24 Years	2	7%
25 - 34 Years	4	14%
35 - 44 Years	10	34%
45 - 54 Years	8	28%
55 - 64 Years	2	7%
65 - 74 Years	3	10%
75 Years +	1	3%

RACE	n = 30	% of n
Black/African American	3	10%
White	26	87%
Other	1	3%

EDUCATIONAL LEVEL	n = 30	% of n
8th Grade or Lower	3	10%
Some High School	7	23%
High School/GED Graduate	16	53%
Some College	2	7%
4 Year College Degree	2	7%

HISPANIC/LATINO/SPANISH	n = 30	% of n
Yes	0	0%
No	30	100%

LANGUAGE SPOKEN AT HOME	n = 29	% of n
English	29	100%
Spanish	0	

LIVING ARRANGEMENT	n = 30	% of n
Lives Alone	3	10%
Lives with Family Member(s)	26	87%
Lives with Other(s)	1	3%

OVERALL, HEALTH	n = 30	% of n
Excellent	6	20%
Very Good	4	13%
Good	12	40%
Fair	7	23%
Poor	1	3%

MENTAL/EMOTIONAL HEALTH	n = 30	% of n
Excellent	3	10%
Very Good	4	13%
Good	12	40%
Fair	8	27%
Poor	3	10%

Type of Service Delivery Model (SDM)	n = 30	% of n
Traditional	10	33%
Personal Options	20	67%

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=30
Staff are Reliable and Helpful	98.9	30
How Well Staff Communicate & Treat You	96.6	30
Case Manager is Helpful	94.1	27
Choosing the Services That Matter to You	93.8	28
Transportation to Medical Appointments	92.5	30
Personal Safety and Respect	99.1	29
Planning Your Time and Activities	92.7	30

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=30
Personal Assistance & Behavioral Health Staff	86.2	29
Homemaker	95.2	21
Case Manager	76.9	26

RECOMMENDATION of	Score	N=30
Personal Assistance & Behavioral Health Staff	82.1	28
Homemaker	85.2	27
Case Manager	66.7	27

NO UNMET NEED	Score	n=30
Dressing/Bathing	100	0
Meal Preparation/Eating	97	29*
Medication Administration	100	30
Toileting	100	11
Household Tasks	100	23

***One respondent's answer was not scored by the interviewer, resulting in a less than 100% score. During data analysis, this was discovered. The Kepro interviewer contacted the respondent to assess if an unmet need existed and to address.**

Results-Additional Items Not reflected in Global or Composite Results

*One respondent’s answer was unclear, this, excluding from the score.

PHYSICAL SAFETY	Score	N=30
<u>Not</u> Hit or Hurt by Staff	100%	29 *

Was the respondent able to give valid responses?	# of "Yes" Responses	% of "Yes" Responses
Yes	19	70%

Did Someone help the respondent complete this survey	# of "Yes" Responses	% of "Yes" Responses
Yes	16	80%

Case Manager Is 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?	29	29	100%
48. Do you know who your case manager is?	29	28	97%

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...	29	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?	29	86%

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. Survey administration was conducted during COVID 19 PHE and could impact the scoring on items such as community outings, planning activities and getting to visit family and/or friends. 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. *

Findings Any composite scores that fell below 86% were targeted for in-depth review. There were no composite measures that fell below the quality threshold. Improvements in members’ experience with care in the following domains were noted from the previous year’s results.

Area of Care	Composite Score 2022	Composite Score 2021	Composite Score 2020
Transport Medical Appointments	92.5%	85.6%	84.8%
Planning your time and activities	92.7%	80.4%	75.0%

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)

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.