2026 Oregon Rural Health Conference Presentation Slides

FROM 10% TO A STRONGER PATIENT VOICE

Using an MBQIP improvement grant to strengthen HCAHPS participation and build a sustainable patient experience program

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Blue Mountain Hospital District | Oregon Rural Health Conference | October 2026

CONTEXT

Why patient voice matters in a rural hospital

- In a Critical Access Hospital, small survey volumes can make every returned survey especially meaningful.
- A low response rate limits how confidently leaders can interpret patient experience trends and target improvement.
- Our project focused first on participation—then on building the culture and systems needed to act on what patients tell us.

10%

Project baseline HCAHPS response rate

Baseline documented in the MBQIP improvement grant.

≥15%

Grant target

At least a 50% relative increase by September 30, 2026.

OUR JOURNEY

A vendor transition became an improvement opportunity

2025

Survey Solutions by ICAHN

Baseline HCAHPS domain results and patient comments

2026

Press Ganey

New survey vendor and more active response-rate monitoring

2026

MBQIP project

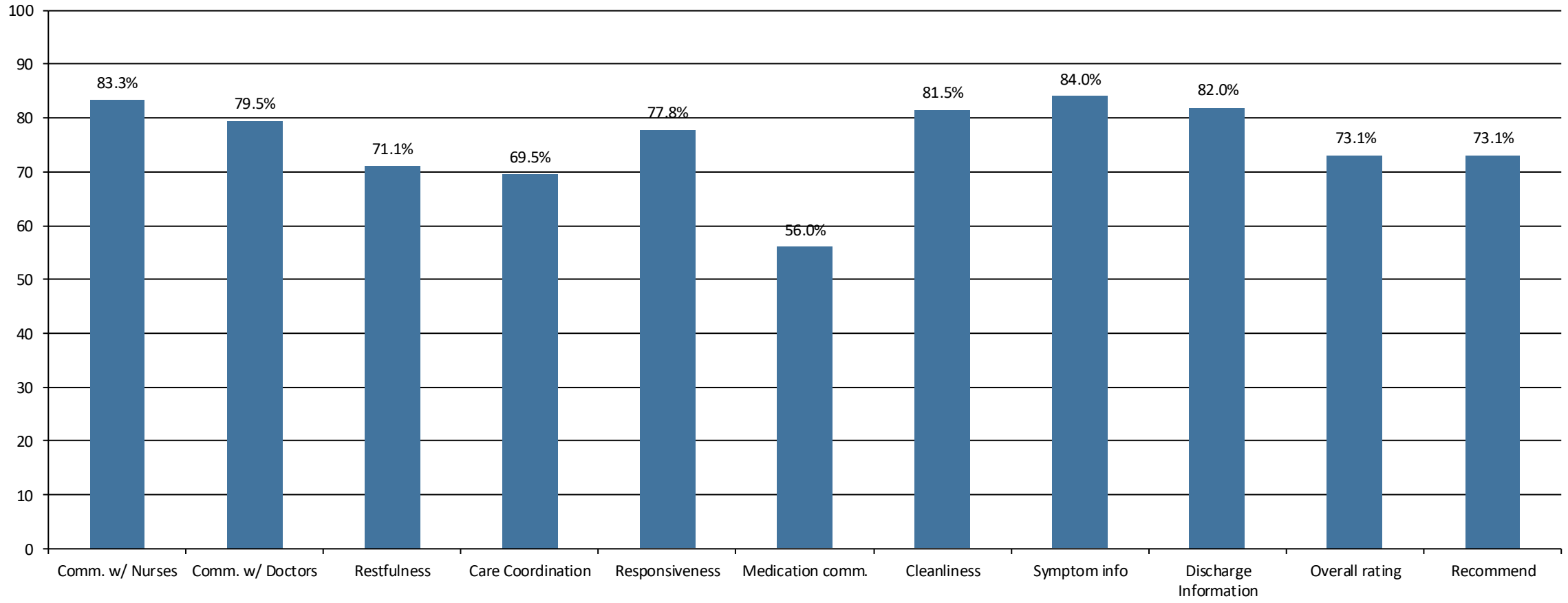
Education, outreach, manager engagement and monthly tracking

The important comparison is not simply “old vendor vs. new vendor.” It is how the transition gave us a clearer structure for monitoring participation and turning feedback into action.

BASELINE

Where we started: 2025 Survey Solutions baseline

Top-box results from the former survey vendor



Range: 56.0%–84.0% | Lowest domain: Communication about Medicines (56.0%) | Highest: Information About Symptoms (84.0%)

PROBLEM

The challenge behind the scores: limited participation

10%

Baseline response rate

The grant identified low participation as the central problem to address.

13

2025 written comments

9 positive and 4 negative comments in the uploaded Survey Solutions annual comments export.

11

Domains tracked

2025 Survey Solutions domain report included 11 major top-box measures.

Why this mattered

- Small numbers can create large percentage swings.
- Low participation can make it harder to know whether feedback represents the broader patient population.
- Our first improvement target was therefore simple: hear from more patients.

INTERVENTION

What we changed

The grant funded more than advertising—it supported a structured participation strategy.

STAFF EDUCATION

12-week HCAHPS education campaign, department talking points and manager huddles.

PATIENT AWARENESS

Neutral education explaining that honest feedback helps the hospital improve.

COMMUNITY OUTREACH

Newspaper, website, newsletter and other local awareness activities.

DATA DISCIPLINE

Monthly Press Ganey response-rate monitoring and pre/post comparison.

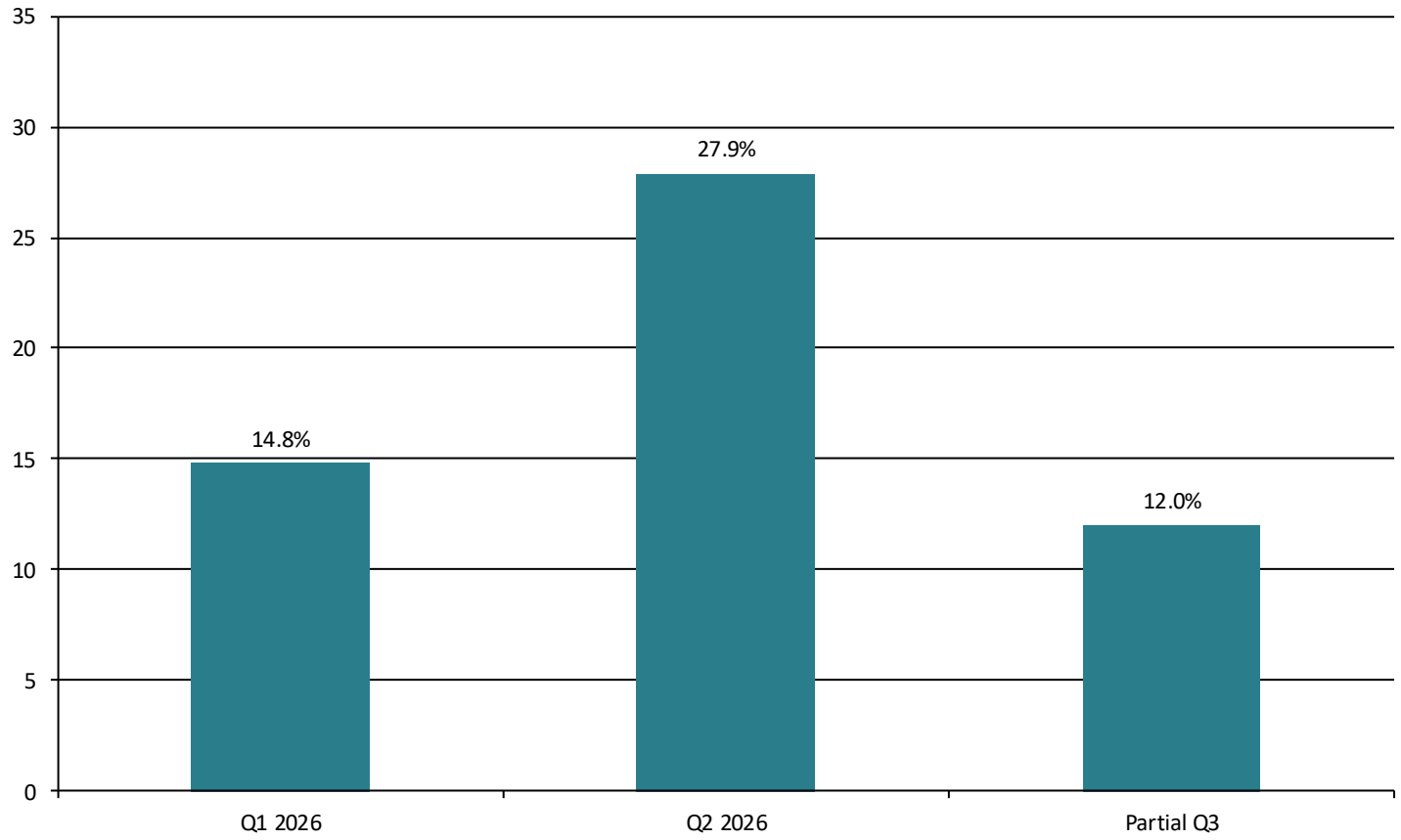
SUSTAINABILITY

Department toolkits, competencies, leader rounding and patient experience governance.

RESULTS

Press Ganey response rate: a strong Q2 gain

Q3 is partial through September 10, 2026.



14.8%

Q1

4 returned / 27 sent

27.9%

Q2

12 returned / 47 sent

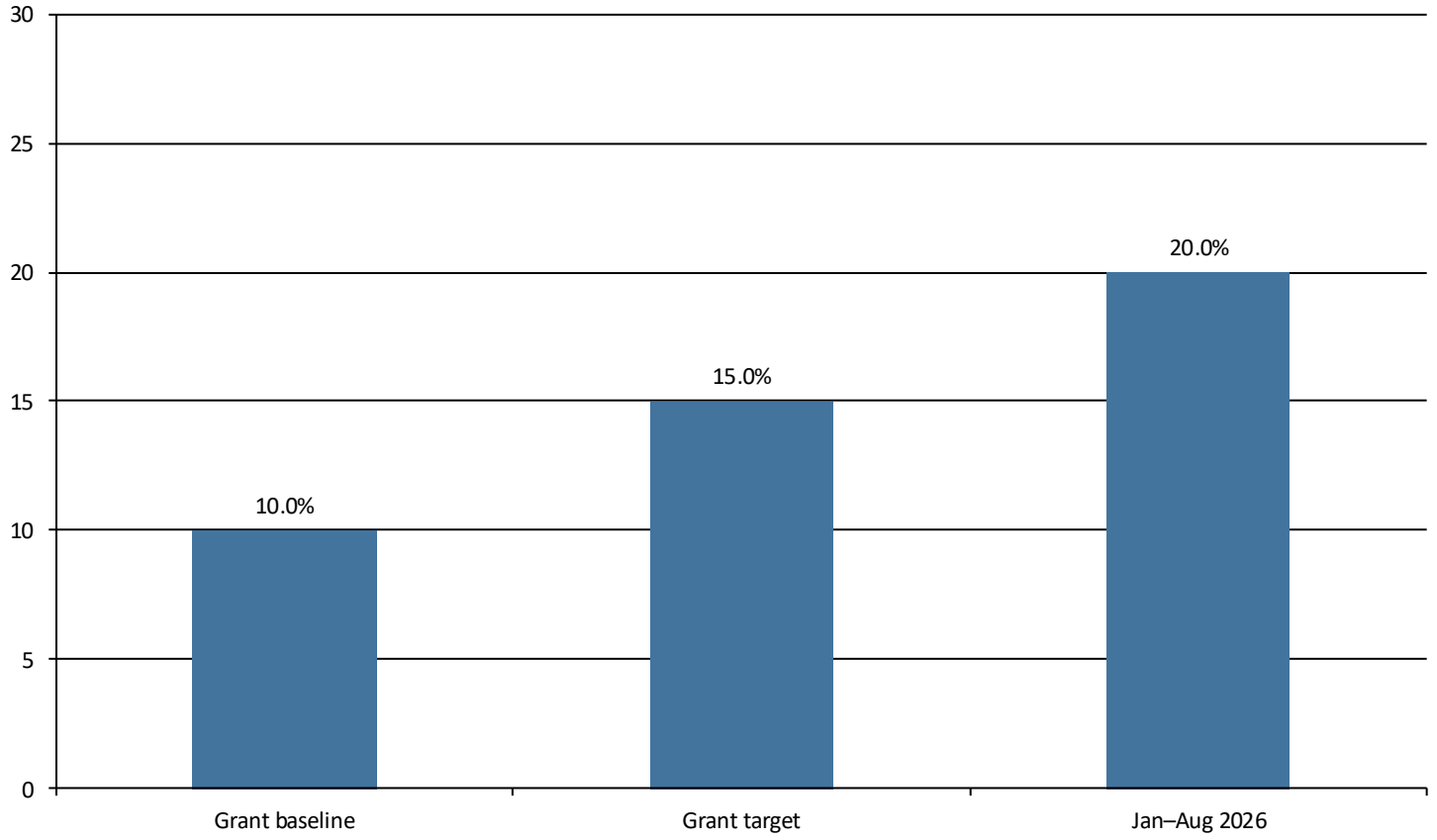
12.0%

Partial Q3

3 returned / 26 sent; period is incomplete

RESULTS

By August, the cumulative response rate had doubled



20.0%

Jan–Aug cumulative

19 returned; 100 sent; 5 undeliverable

+5.0 pts

Above grant target

20.0% compared with the ≥15% goal

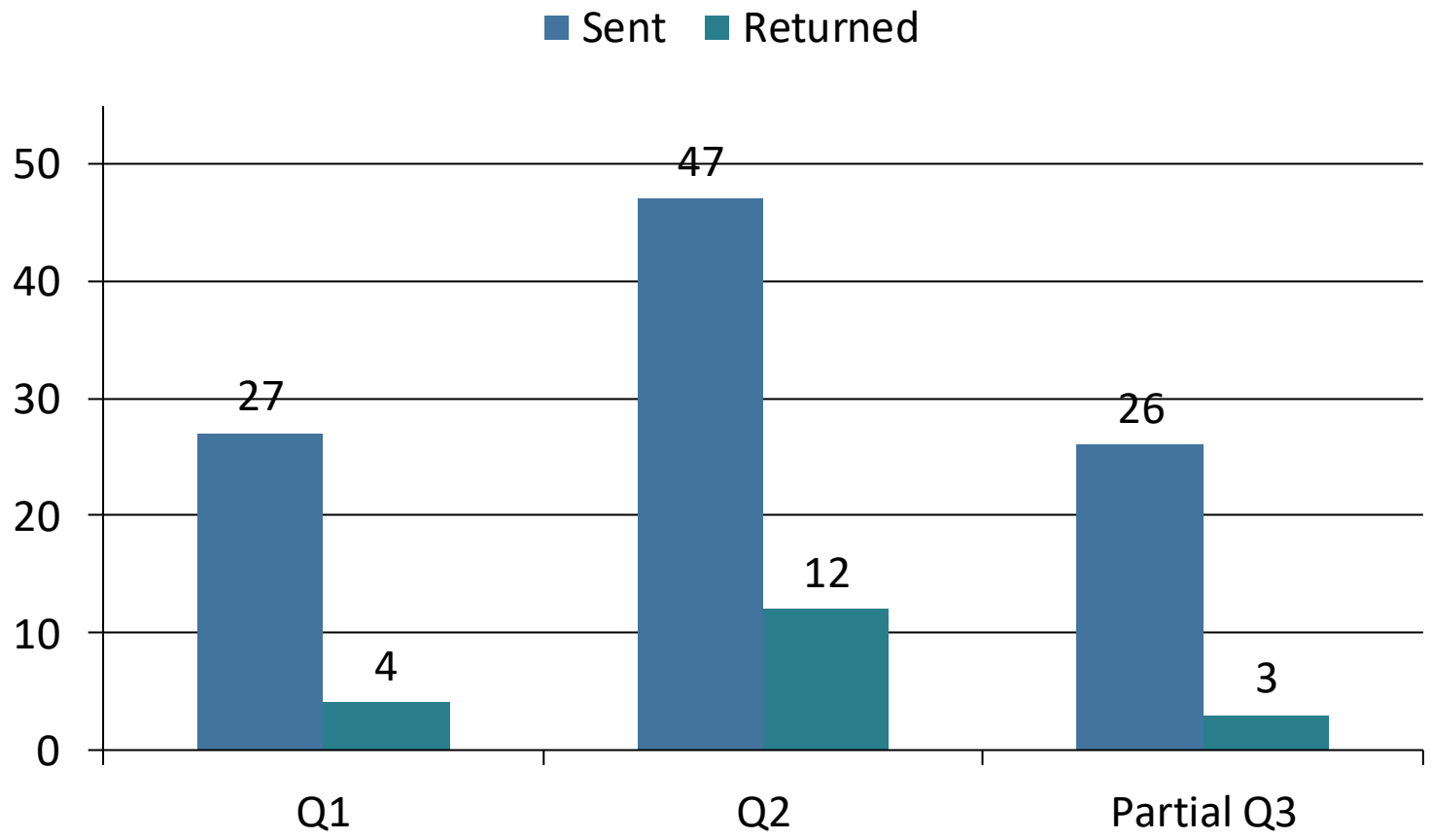
+100%

Relative improvement

Compared with the 10% project baseline

The numbers behind the response rate

Response rates should be interpreted alongside survey volume.



Rural data lesson

- Q2 combined the highest survey volume with the strongest response rate.
- Partial Q3 includes only 26 surveys sent and should not be treated as a completed-quarter result.
- We report counts with percentages to keep the story transparent.

Press Ganey performance overview: Q2 2026

Inpatient Performance Overview • Current period 04/01/2026–06/30/2026

55.26%

PG Overall Top Box

n=11; score goal 50.00%

7th

Percentile Rank

Peer group: All PG Database (N=660)

+16.80 pts

Q1 → Q2

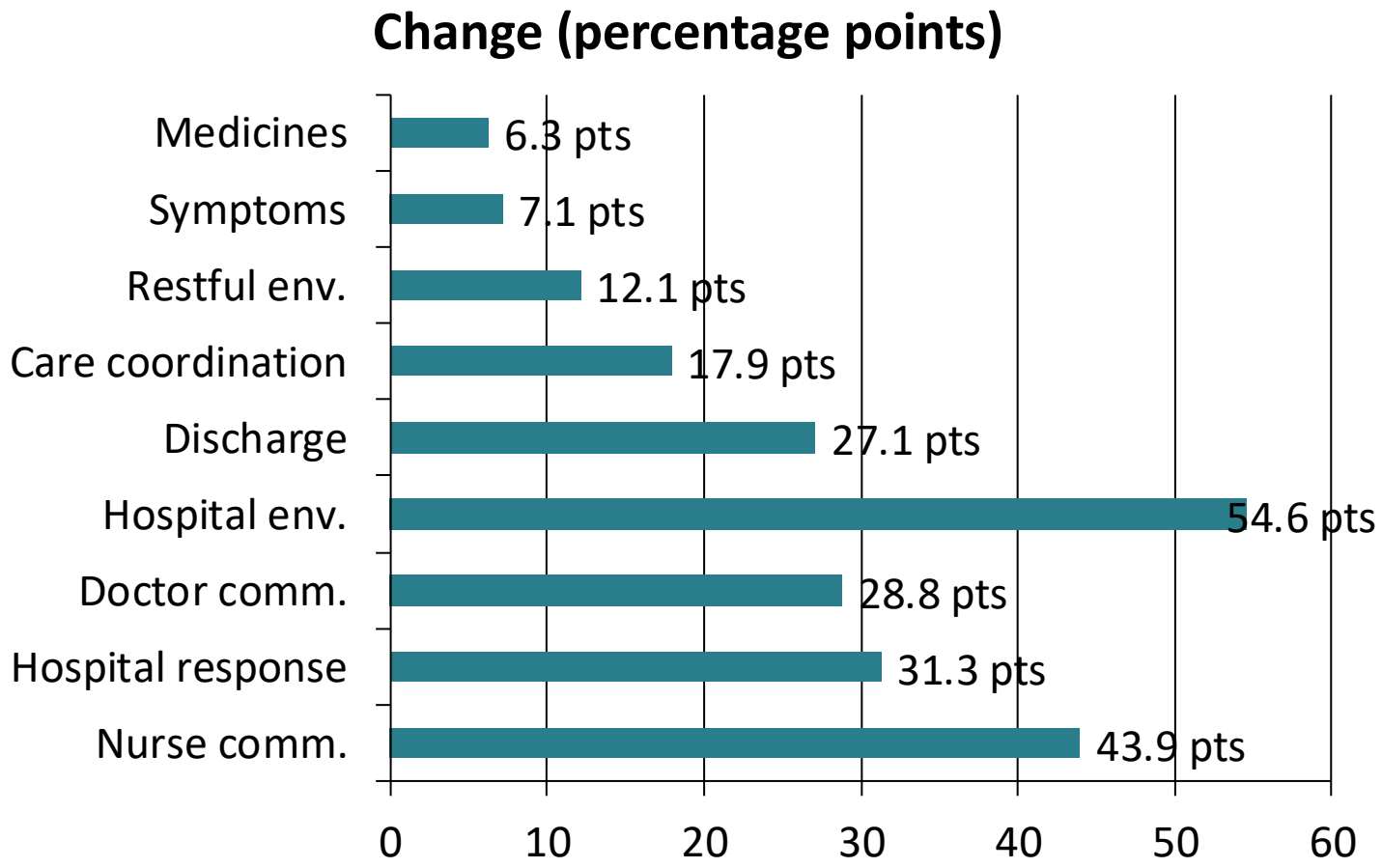
38.46% → 55.26%

The story we can now show more clearly

- Overall inpatient top-box performance increased from 38.46% in Q1 2026 to 55.26% in Q2 2026.
- Blue Mountain Hospital moved from the 1st to the 7th percentile in the Press Ganey peer group.
- Q2 exceeded the 50% score goal.
- The vendor transition and improvement interventions occurred together, so we should not attribute the improvement to the vendor alone.

The strongest Q2 gains were in communication and environment

Press Ganey CAHPS section performance: Q2 2026 compared with Q1 2026



Q2 2026 highlights

- Communication with Nurses: 93.94%, +43.94 points
- Hospital Environment: 54.55%, +54.55 points
- Response of Hospital Staff: 81.25%, +31.25 points
- Communication with Doctors: 78.79%, +28.79 points
- Discharge Information: 77.08%, +27.08 points

PG Nurses also improved to 59.09% (+21.59); PG Doctors to 50.00% (+10.00).

INTERPRETATION

What can—and cannot—be compared across vendors

VALID COMPARISONS

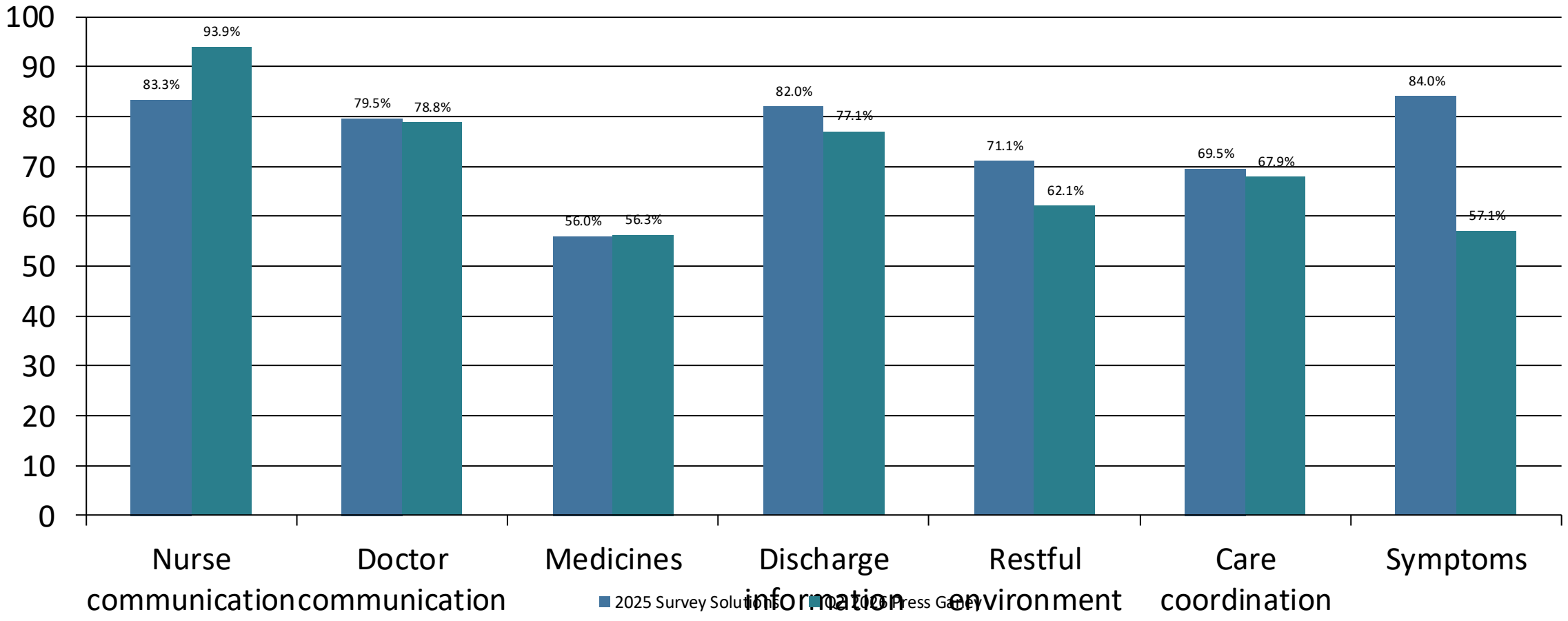
- Response-rate improvement against the 10% project baseline
- Survey volume and returned surveys
- Patient comment themes
- Operational improvements in how BMH monitors and uses feedback

USE CAUTION

- Direct domain-score comparisons require equivalent questions, scoring and reporting periods
- The uploaded Press Ganey files contain response-rate data—not 2026 domain scores
- Partial Q3 should not be compared with a completed quarter as if the periods were equivalent
- Vendor transition and improvement interventions occurred together

What the new data adds to the Survey Solutions story

Selected CAHPS section results with comparable labels; directional context only.



Important interpretation The labels are similar CAHPS sections, but the vendor reports should not be treated as perfectly interchangeable scoring systems. The value is identifying persistent strengths/opportunities while Q2 Press Ganey establishes a new baseline.

The data matters because the comments tell us why

2024 Survey Solutions comments

10

Total comments

9 positive / 1 negative

2025 Survey Solutions comments

13

Total comments

9 positive / 4 negative

Themes in the comments included compassionate nursing care, respect, teamwork and exceptional rural care—alongside concerns involving rest and clinical communication.

Our goal is not simply more surveys. It is a stronger, more representative patient voice that can guide improvement.

PATIENT VOICE

Press Ganey adds a second layer of patient feedback

CAHPS surveys do not collect comments; Press Ganey does.

70%

Positive comments

Press Ganey comment rating distribution

20%

Negative comments

Press Ganey comment rating distribution

10%

Mixed comments

Press Ganey comment rating distribution

What this changes for BMH

- Survey scores tell us where performance is moving.
- Comments help explain why patients experience care positively or negatively.
- Combining quantitative scores with patient comments gives Quality and leaders a stronger improvement loop.
- Comments can identify recognition opportunities, service recovery needs and performance-improvement priorities.

Conference takeaway

“We didn't just change survey vendors. We changed how we listen, how we monitor the patient voice, and how we turn feedback into action.”

LESSONS

What we learned as a rural hospital

1	**Start with participation**	Before chasing individual domain scores, make sure enough patients are responding to make the feedback useful.
2	**Make it everyone's work**	Registration accuracy, bedside communication, leadership visibility and community awareness all influence the process.
3	**Use counts with percentages**	Small rural volumes demand context. A percentage without the numerator can mislead.
4	**Keep survey messaging neutral**	Invite honest feedback; never coach patients toward a score.
5	**Build beyond the grant**	Education, rounding, department toolkits and dashboards make the work sustainable.

From grant project to permanent patient experience program

- Monthly patient experience dashboard and Press Ganey monitoring
- Department-specific patient experience toolkits and quick-reference guides
- Leader rounding and manager coaching
- Complaint, grievance and service-recovery trending
- New employee education and annual competency
- Patient Experience Champions and recognition
- Annual program evaluation and new improvement priorities

20.0%

Current cumulative result

Jan–Aug 2026 Press Ganey response rate

≥15%

Grant goal

The project exceeded the stated target by August.

The grant gave us a starting point. The sustainable system is the real outcome.

LISTEN. LEARN. ACT. MEASURE. SUSTAIN.

A stronger patient voice gives a rural hospital better information to improve care—and a better way to show our community that their feedback matters.

Questions?

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Quality Health Care Close to Home