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January 19, 2016

Andy Slavitt, Acting Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
Attention CMS-3327-NC  
P.O. Box 8016  
Baltimore, MD 21244-8016

Submitted via [www.regulations.gov](http://www.regulations.gov)

Re: Request for Information to Aid in the Design and Development of a Survey on Patient and Family Member Experiences with Care Received in Long-Term Care Hospitals

Dear Acting Administrator Slavitt:

On behalf of the American Nurses Association (ANA), we are pleased to comment on the request for information (RFI) referenced above. As the only full-service professional organization representing the interests of the nation's 3.4 million registered nurses (RNs), ANA is privileged to speak on behalf of its state and constituent member associations, organizational affiliates, and individual members. RNs serve in multiple direct care, care coordination, and administrative leadership roles, across the full spectrum of health care settings. RNs provide and coordinate patient care, educate patients and the public about various health conditions, and provide advice and emotional support to patients and their family members. ANA members also include the four advanced practice registered nurse (APRN) roles: nurse practitioners, clinical nurse specialists, certified nurse-midwives and certified registered nurse anesthetists.<sup>1</sup>

ANA applauds the goal to develop a survey that supports the National Quality Strategy (NQS) and the associated priority of promoting effective communication and coordination of care. Care coordination and transition care are essential and fundamental to improving patient outcomes and furthering the priorities of the NQS. RNs and APRNs play a pivotal role in providing this care, as chronic care and case management are integral parts of nursing practice. Many RNs and APRNs provide complex chronic care management as a key component of their nursing practice, in various nursing roles and across all health care settings. In designing the survey, we urge CMS to ensure the inclusion of questions that evaluate and measure the role of nurses in providing coordination and transition services.

ANA also commends the focus on ensuring that each person and family are engaged as partners in their care. Patient engagement has been described by the Center for Advancing Health as the

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<sup>1</sup>The Consensus Model for APRN Regulation defines four APRN roles: certified nurse practitioner, clinical nurse specialist, certified nurse-midwife and certified registered nurse anesthetist. In addition to defining the four roles, the Consensus Model describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation.

actions that are taken to benefit from available health care,<sup>2</sup> and the concept of patient engagement is showing promise as a way to improve health outcomes.<sup>3</sup> NQF recently published a report entitled *Person- and Family-Centered Care Final Report - Phase I*,<sup>4</sup> which “sought to review measures that captured the essence of person- and family-centered care including patient and family engagement in care, care based on patient needs and preferences, shared decision-making, and activation for self-care management.” This important document will provide critical information relevant to the development of survey questions and associated experience-of-care measures of engagement.

ANA urges CMS, in developing these survey questions, to remain cognizant of the important role of nursing in patient engagement. Much of what constitutes patient engagement falls squarely within the domain of nursing.<sup>5</sup> Descriptions of the essential role that nurses play in advancing the engagement of patients and families are set forth in a paper from the Nursing Alliance for Quality Care (NAQC), a group consisting of consumer advocacy groups and nursing organizations. The paper, entitled *Fostering successful patient and family engagement: Nursing’s critical role*,<sup>6</sup> emphasizes NAQC’s position that “the active engagement of patients, families and others is essential to improving quality and reducing medical errors and harm to patients,” and notes that “nurses at all levels of education and across all health care settings must play a central role in fostering successful patient and family engagement.” Devising survey questions concerning the role of nursing will be essential to evaluating the experiences of patients and families.

Finally, ANA supports the positions and recommendations set forth in the comment letter submitted by the Association of Rehabilitation Nurses, an Organizational Affiliate of ANA. In particular, we note their comments on patient-centered goals and preferences and consideration of care and transitions post-hospitalization.

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<sup>2</sup>Center for Advancing Health (2010). Engagement. Retrieved from: [www.cfah.org/engagement](http://www.cfah.org/engagement).

<sup>3</sup>Hibbard, J., & Greene, J. (2013). What evidence shows about patient activation: better health outcomes and care experiences; fewer data on costs. *Health Affairs*, 32(2), 207–214; Hibbard, J., Greene, J., & Overton, V. (2013). Patients with lower activation associated with higher costs; delivery systems should know their patients’ scores. *Health Affairs*, 32(2), 216–222; Katon, W., Von Korff, M., Lin, E., Walker, E., Simon, G. E., et al. (1995). Collaborative management to achieve treatment guidelines: Impact on depression in primary care. *Journal of the American Medical Association*, 273(13), 1026–1031; Robinson, J. H., Callister, L. C., Berry, J. A., & Dearing, K. A. (2008). Patient-centered care and adherence: Definitions and applications to improve outcomes. *Journal of the American Academy of Nurse Practitioners*, 20(12), 600–607.

<sup>4</sup>National Quality Forum (2015). *Person- and Family-Centered Care Final Report - Phase I*. Retrieved from: [http://www.qualityforum.org/Publications/2015/03/Person- and Family-Centered\\_Care\\_Final\\_Report\\_-\\_Phase\\_I.aspx](http://www.qualityforum.org/Publications/2015/03/Person- and Family-Centered_Care_Final_Report_-_Phase_I.aspx).

<sup>5</sup>Mason, D., Gardner, D., Hopkins Outlaw, and O’Grady, E. (Eds.). (2015). *Policy & Politics in Nursing and Health Care*. St. Louis, MO: Elsevier, 208.

<sup>6</sup>Sofaer, S., & Schumann, M. (2013). *Fostering successful patient and family engagement: Nursing’s critical role*. Washington, DC: Nursing Alliance for Quality Care. Retrieved from: <http://www.naqc.org/Main/Resources/Publications/March2013-FosteringSuccessfulPatientFamilyEngagement.pdf>.

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We appreciate the opportunity to share our views on this matter. If you have questions please contact Jane Clare Joyner, Senior Policy Advisor ([janeclare.joyner@ana.org](mailto:janeclare.joyner@ana.org)).

Sincerely,

A handwritten signature in cursive script that reads "Debbie D. Hatmaker".

Debbie D. Hatmaker, PhD, RN, FAAN

Executive Director

cc: Pamela Cipriano, PhD, RN, NEA-BC, FAAN, ANA President  
Marla Weston, PhD, RN, FAAN, ANA Chief Executive Officer