

# Putting Patients at the Center of Quality Improvement: Harnessing Experience for Better Care

May 2024

**Presenter:**

Melanie Ridley, HANC-NCCN QI Consultant



# Webinar Instructions

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Figure 1

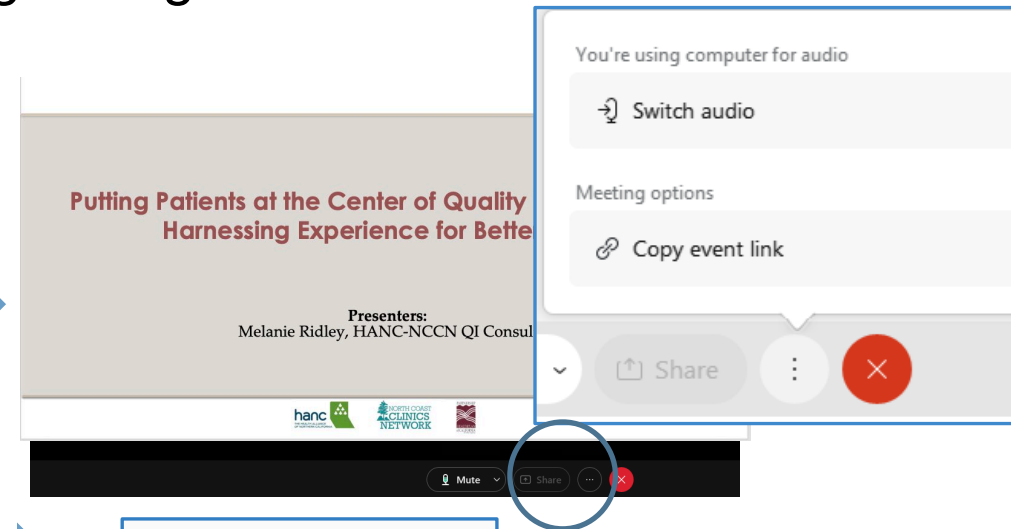
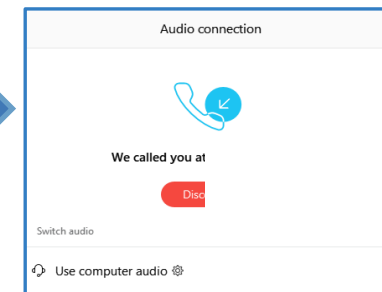


Figure 2 Dial call-in number



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# Chat Instructions

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- Please take a moment and open your chat box by clicking the chat icon found at the bottom right-hand corner of your screen and as shown in **Figure 1**.
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Figure 1



# Putting Patients at the Center of Quality Improvement: Harnessing Experience for Better Care

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# Session Learning Objectives

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**Purpose:** Explore opportunities to incorporate patient experience measurement into current quality improvement activities.

**Participants will be able to:**

- Describe how patient experience impacts clinical outcomes, patient satisfaction, provider/staff satisfaction, and healthcare quality.
- Identify opportunities to assess patient experience data from a QI perspective.
- Apply QI methodology to patient experience improvement activities.
- Discuss strategies for involving patients and their families in the QI process.

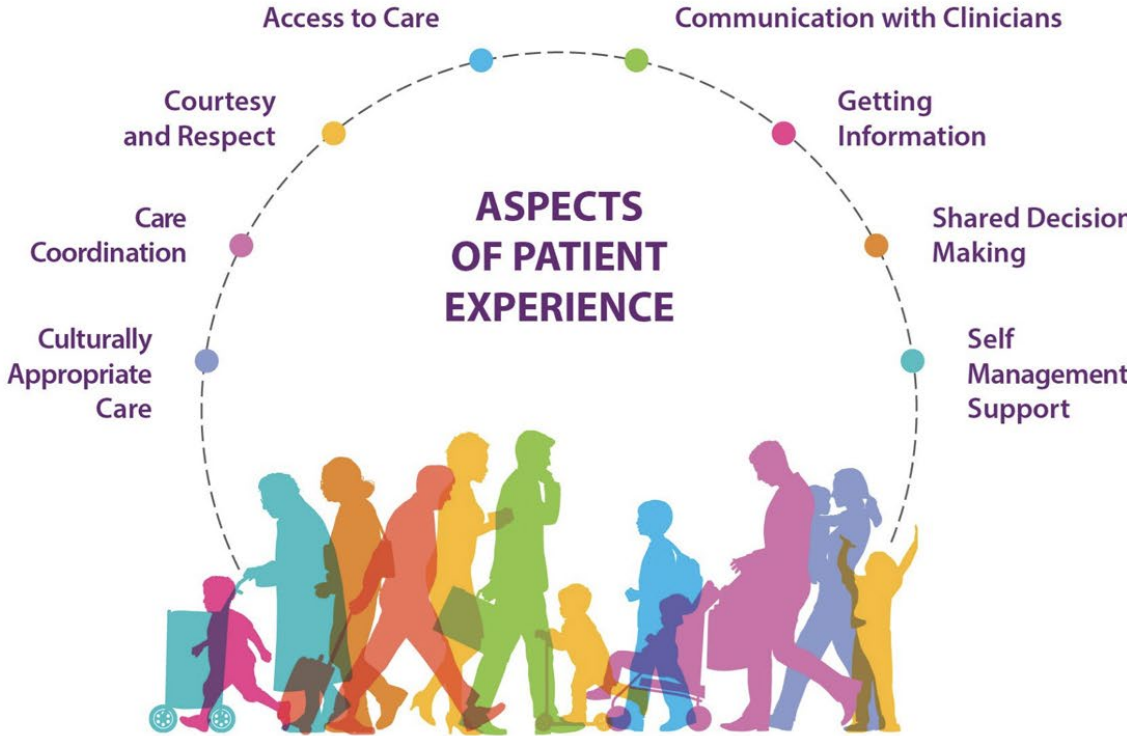
# What is Patient Experience?

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The Beryl Institute definition:

“the sum of all **interactions**, shaped by an organization's **culture**, that influence patient **perceptions** across the continuum of care.”

# What is Patient Experience?



Source: <https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/news-and-events/events/webinars/addressing-emerging-needs-09132023-edgeman-levitan.pdf>



# Why Measure Patient Experience?

Patient experience is strongly associated with:

## Health Outcomes

- Patient adherence with treatment plan
- Process of care measures (e.g. colorectal cancer screening)
- Clinical outcomes (e.g., diabetes in good control)
- Patient Safety

## Practice Outcomes

- Malpractice risk
- Organizational culture and employee engagement (staff and provider experience)
- Financial Performance



# What is Patient Experience?

“patients know best  
how well their health  
providers are meeting  
their needs.”

~ Dr. James Rickert

Source: “Patient-Centered Care: What It Means And How To Get There”, Health Affairs Blog, January 24th, 2012. <https://ahpo.net/assets/patient-centered-care-what-it-means-and-how-to-get-there-blog2.pdf>

# Patient experience vs. patient engagement

## Patient Experience

Patients' perceptions and evaluations of how well their needs and expectations are met by the healthcare system:

- ease of access to medical care,
- quality of communication with healthcare providers,
- responsiveness of staff, and
- overall comfort and cleanliness of the environment

## Patient Engagement

Level of active involvement a patient has in their own healthcare journey:

- maintaining appointments,
- managing chronic conditions,
- asking questions,
- participating in treatment decision-making, and
- adhering to treatment plans

# What Patients and Families Want

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- Patient- and Family-Centered care
- Safe
- Effective
- Timely
- Efficient
- Equitable

# Striving Towards Patient-Centered Care

The World Health Organization defines Patient-Centered Care as:

“respecting and responding to patients’ wants, needs and preferences, so that they can make choices in their care that best fit their individual circumstances”

- Patient experience is increasingly recognized as one of the three pillars of quality in healthcare
- Understanding the patient experience is central to building a model for patient-centered care.
- Patient and family centered care is a growing emphasis for health systems

Source: World Health Organization. Adherence to long-term therapies: Evidence for action. 2003.

# Warm up question

How well does your organization see the world through the eyes of patient and families?

**How is your patient lens?**

**Chat In Your Response:**

Pretty much “eyes shut”

Can make out big issues if we squint

Need corrective lens prescription upgrade but pretty good

“20/20” —and good night vision, too

# How do we measure patient experience?

Agency for Healthcare Research and Quality (AHRQ) developed the Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

**EXPERIENCES WITH YOUR PROVIDER SURVEY**

**YOUR PROVIDER**

1. Our records show that you got care from a provider at the site named below in the last 12 months.

Is that right?

Yes  
 No → If No, go to #26

The questions in this survey will refer to the provider from the site named in Question 1 as "this provider." Please think of that person as you answer the survey.

2. Is this the provider you usually see if you need a check-up, want advice about a health problem, or get sick or hurt?

Yes  
 No

3. How long have you been going to this provider?

Less than 6 months  
 At least 6 months but less than 1 year  
 At least 1 year but less than 3 years  
 At least 3 years but less than 5 years  
 5 years or more

**YOUR CARE FROM THIS PROVIDER IN THE LAST 12 MONTHS**

These questions ask about your own health care. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.

4. In the last 12 months, how many times did you visit this provider to get care for yourself?

None → If None, go to #26  
 1 time  
 2  
 3  
 4  
 5 to 9  
 10 or more times

5. In the last 12 months, did you contact this provider's office to get an appointment for an illness, injury or condition that needed care right away?

Yes  
 No → If No, go to #7

6. In the last 12 months, when you contacted this provider's office to get an appointment for care you needed right away, how often did you get an appointment as soon as you needed?

Never  
 Sometimes  
 Usually  
 Always

7. In the last 12 months, did you make any appointments for a check-up or routine care with this provider?

Yes  
 No → If No, go to #9

8. In the last 12 months, when you made an appointment for a check-up or routine care with this provider, how often did you get an appointment as soon as you needed?

Never  
 Sometimes  
 Usually  
 Always

9. In the last 12 months, did you contact this provider's office with a medical question during regular office hours?

Yes  
 No → If No, go to #11

10. In the last 12 months, when you contacted this provider's office during regular office hours, how often did you get an answer to your medical question that same day?

Never  
 Sometimes  
 Usually  
 Always

PHC23

Source: <https://www.ahrq.gov/cahps/index.html>

## Aspects of Patient Experience Assessed:

- Patient-provider communication
- Ease of scheduling appointments
- Availability of information
- Responsiveness of staff
- Coordination between providers

# What is the CG-CAHPS Survey?

- Consumer Assessment of Healthcare Providers and Systems (CAHPS) initiative, has been supported by the Agency for Healthcare Research and Quality (AHRQ) since 1995.
- CG - Clinician & Group survey tool and H - Health Plan survey tool
- National standard for assessing patient experience in healthcare

## Number of Health Plans and Survey Respondents in 2023

The following table presents the number of Medicaid, Children's Health Insurance Program (CHIP), and Medicare survey respondents and health plans included in the CAHPS Health Plan Survey Database for 2023.

Survey Version	2023	
	Number of Health Plans	Number of Respondents
Adult Medicaid	221	65,261
Child Medicaid	233	103,515
CHIP	69	23,008
Medicare (Adult)	544	266,334

Source: <https://www.ahrq.gov/cahps/index.html>

# CAHPS Survey - Global Rating Questions

## Rating of Provider:

Q18. Using any number from 0 to 10, where 0 is the worst provider possible and 10 is the best provider possible, what number would you use to rate this provider?

Items scored using a proportional “top box” method, which shows the percentage of patients who selected the most positive option (e.g., r 9-10 on the overall rating item).

Composite Measure/Individual Item	Family Practice
Patients' Rating of the Provider	
Rating of provider	77%

Source: <https://www.ahrq.gov/cahps/index.html>



# How CAHPS Scores Are Reported

## Examples of 2023 Health Plan Survey

### - Adult Medicaid Survey 5.1

### “Overall Top Box Scores”

Source: <https://datatools.ahrq.gov/cahps?tab=cahps-health-plan-survey-database&dash=31>

Composite Measure/Individual Item	Database Average
<b>Composite: Getting Needed Care</b>	50%
Easy to get necessary care, tests, or treatment	52%
Got appointment with a specialist as soon as needed	48%
<b>Composite: Getting Care Quickly</b>	54%
Got care for illness, injury or condition as soon as needed	58%
Got check-up or routine care appointment as soon as needed	50%
<b>Composite: How Well Doctors Communicate</b>	75%
Doctor explained things in a way that was easy to understand	74%
Doctor listened carefully	76%
Doctor showed respect for what enrollee had to say	81%
Doctor spent enough time with enrollee	69%
<b>Composite: Health Plan Information and Customer Service</b>	68%

# How CAHPS Scores Are Reported

Examples of 2019 Adult 6-Month Survey 3.0 with/without Patient Centered Medical Home Items

“Overall Top Box Scores”

Composite Measure/Individual Item	Family Practice
Composite: Getting Timely Appointments, Care, and Information	59%
Got appointment for urgent care as soon as needed	59%
Got appointment for check-up or routine care as soon as needed	63%
Got answer to question during regular office hours on same day	56%
Composite: How Well Providers Communicate With Patients	85%
Provider explained things clearly	85%
Provider listened carefully	86%
Provider showed respect	88%
Provider spent enough time	81%
Composite: Helpful, Courteous, and Respectful Office Staff	78%
Office staff was helpful	72%
Office staff courteous and respectful	84%

Source: <https://datatools.ahrq.gov/cahps?tab=cahps-health-plan-survey-database&dash=31>

# CAHPS Survey - Composite Measure Questions

Grouped questions that address a similar domain. An average of the *always* response is reported as the composite score.

## Access Composite:

Q06. In the last 12 months, when you phoned this provider's office to get an appointment for care you needed right away, how often did you get an appointment as soon as you needed?

Q08. In the last 12 months, when you made an appointment for a check-up or routine care with this provider, how often did you get an appointment as soon as you needed?

Q10. In the last 12 months, when you phoned this provider's office during regular office hours, how often did you get an answer to your medical question that same day?

## Communication Composite:

Q11. In the last 12 months, how often did this provider explain things in a way that was easy to understand?

Q12. In the last 12 months, how often did this provider listen carefully to you?

Q14. In the last 12 months, how often did this provider show respect for what you had to say?

Q15. In the last 12 months, how often did this provider spend enough time with you?

# CAHPS Survey - Composite Measure Questions

Grouped questions that address a similar domain. An average of the *always* response is reported as the composite score.

## Coordination of Care Composite:

Q13. In the last 12 months, how often did this provider seem to know the important information about your medical history?

Q17. In the last 12 months, when this provider ordered a blood test, x-ray, or other test for you, how often did someone from this provider's office follow up to give you those results?

Q23. In the last 12 months, how often did you and someone from this provider's office talk about all the prescription medicines you were taking?

## Office Staff Composite:

Q24. In the last 12 months, how often were clerks and receptionists at this provider's office as helpful as you thought they should be?

Q25. In the last 12 months, how often did clerks and receptionists at this provider's office treat you with courtesy and respect?

# Participant question

How does your practice assess patient experience?

## Chat In Your Response:

Use vendor for CAHPS survey

Annual patient satisfaction survey

Brief patient experience poll

Patient interviews

Patient focus groups

Other – please describe

# Why focus on Patient Experience in QI?

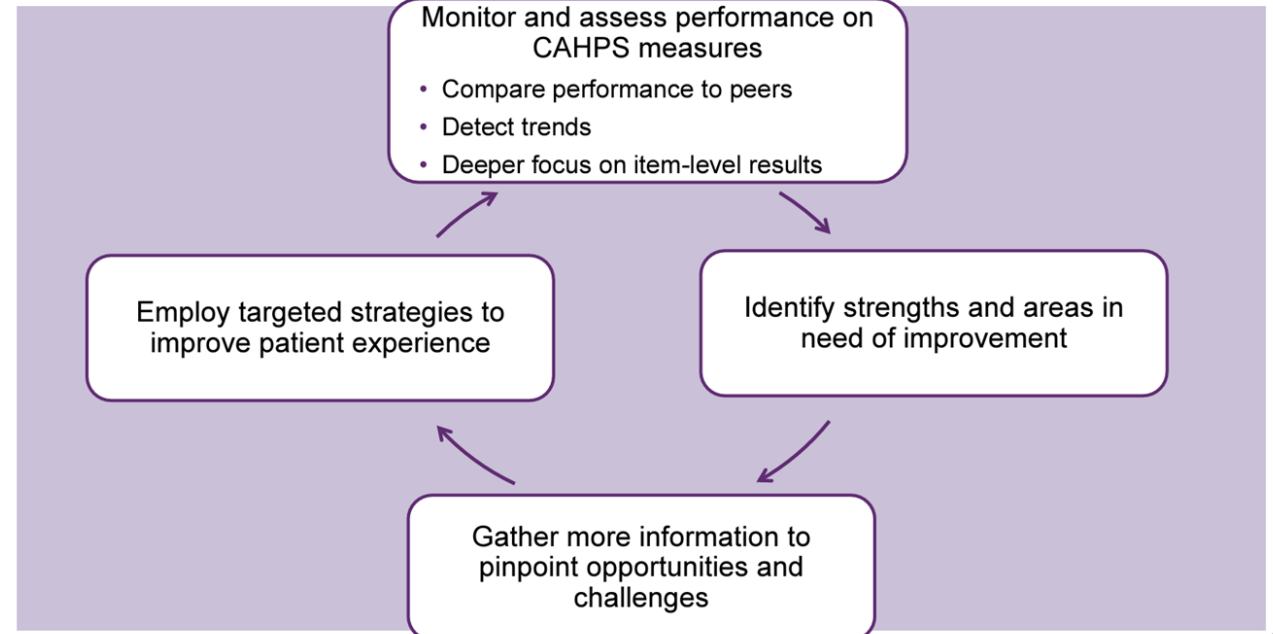
- Improving patient experience has value to patients and families
- At both the practice and individual provider levels, patient experience positively correlates to processes of care for both prevention and disease management. (reword)
- Patient experience impacts how successful patients are in achieving their care goals and plans
- Patients with better care experiences often have better health outcomes

<https://www.facs.org/media/gp3pusph/improvement-guide.pdf>

# Using CAHPS Survey Data for Improvement

- Identify specific areas of patient care and service that need improvement.
- Develop and implement strategies to enhance the patient experience.
- Monitor the impact of quality improvement initiatives over time.
- Enhance patient retention and loyalty by improving satisfaction.
- Fulfill regulatory and accreditation requirements related to patient experience metrics.

## Using CAHPS Surveys To Improve Patient Experience



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<https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/news-and-events/events/webinars/addressing-emerging-needs-09132023-edgeman-levitan.pdf>

# What Is Needed to Apply QI to Patient Experience?

## Information

- Problem identification
- Representative data

## Workforce Engagement

- Willing to receive (-) feedback
- Motivation to do QI
- Trust in others to use for good
- Teamwork & empowered teams

## Resources

- Data collection system (survey)
- Time
- Personnel

## Creative Ideas

- Patient generated ideas
- Actionable ideas from staff

Adapted from: Nembhard, I. Using Narratives in Quality Improvement, <https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/news-and-events/events/webinars/patient-narratives-webinar-quality.pdf>



# Challenges to Applying QI to Patient Experience

## Information

### Challenge:

- Missing information

## Resources

### Challenge:

- Limited Resources

## Workforce Engagement

### Challenge:

- Avoidance of negative feedback or difficult conversations

## Creative Ideas

### Challenge:

- Lack of creative ideas for improvement

Adapted from: Nembhard, I. Using Narratives in Quality Improvement, <https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/news-and-events/events/webinars/patient-narratives-webinar-quality.pdf>

# What Is Challenging for Your Practice?

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## Share in the Chat:

Which of the challenges to improvement patient experience are most difficult for your organization?

- Missing information
- Limited resources
- Human avoidance of neg feedback
- Lack of creative ideas for improvement
- Other

Adapted from: Nembhard, I. Using Narratives in Quality Improvement, <https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/news-and-events/events/webinars/patient-narratives-webinar-quality.pdf>

# Using Patient Narratives in QI

- Different approach to learning through stories
- Patient stories can be unclear or incomplete and are open to different interpretations
- Approach to categorize these experiences
- Patient stories may include emotional responses or personal priorities, providing deeper insights into what patients value
- Patient stories are complex and can't be labeled as positive or negative (likely a mix of both)

## Framework for Using Patient Narratives:

### **WHAT happened?**

(Scope of patient experience)

### **HOW did it happen?**

(actionability of patient experience in QI)-

Grob R, et al. What Words Convey: The Potential for Patient Narratives to Inform Quality Improvement. Milbank Q. 2019. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6422610/#milq12374-bib-0033>

# Using Patient Narratives to Overcome Challenges for QI

## Limited Information Challenge:

- Elaborates on close-ended survey questions
- Identifies additional patient important domains
- Gives specific insight into experiences

## Workforce Engagement Challenge:

- Frequent and useful narrative comments can inspire improvements not only for patient experience but also job satisfaction for staff (reduce burnout)

## Limited Resources Challenge:

- Patient insights for more efficient use of personnel and systems

## Lack of Creative Ideas Challenge:

- Patient comments may offer creative ideas to support QI activities

Grob R, et al. What Words Convey: The Potential for Patient Narratives to Inform Quality Improvement. *Milbank Q.* 2019. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6422610/#milq12374-bib-0033>

# Using the Patient Voice to Guide Improvement Focus

“While quantitative scores provide valuable data, the **qualitative feedback** in the patient’s voice speaks to what is the **root cause** of what’s behind the data. This gives practices a much deeper understanding of what’s going on and **where to focus** their energies to improve care.”

~ Barbra Rabson, MHQP president and CEO

Source: <https://www.mhqp.org/2022/01/05/mhqp-using-artificial-intelligence-to-make-patient-comments-more-actionable/>

# Identifying “Good” in the Patient Voice

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One study found:

Nearly 80% of actionable data contained in the 348 narratives analyzed offered praise for **actions that are not extraordinary, yet are notable because they are both meaningful to patients and not universally practiced**

QI staff can leverage such positive data to:

- reinforce good practices where they are already occurring
- motivate clinicians and staff in need of improvement to up their game

# Importance of Engaging Patients

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## **Distinctive information**

- Elaborates on existing domains in surveys
- Identifies additional important domains

## **Actionable information**

- Gives specific insight into experiences
- Offers creative ideas for improvement

## **Equity in voicing of feedback**

- Elicits the voice of less empowered racially and economically

<https://pxjournal.org/cgi/viewcontent.cgi?article=1621&context=journal>

# Improvement Journey: Doing To / For / With

## Doing To

You know you are *doing to* when:

- We say – you do: schedules
- We waste your time – come to the clinic & wait
- We determine if you are compliant
- When the patient/family say: – I don't know what is the plan of care and what happens next

## Doing For

You know you are doing for when:

- Family presence is defined by the patient
- We keep the patient in mind when designing or improving programs – then ask
- We design the teams to help you – without you
- We manage your expectations about waiting
- We teach you – lots & lots

## Doing With

You know you are doing with when:

- Build on Doing for and move beyond
- Patient/family advisors are on teams to design or improve programs that follow the patient journey
- All key decisions are mutual – including who is on my team
- Health Literacy is everywhere in patient care

Source: [https://app.ihi.org/Events/Attachments/Event-2432/Document-2842/Framework\\_for\\_Patient\\_Experience.pdf](https://app.ihi.org/Events/Attachments/Event-2432/Document-2842/Framework_for_Patient_Experience.pdf)



# Using CAHPS Data for PCMH Transformation

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Example of FQHC use of CAHPS data for QI, included:

- Identifying areas for improvement,
- Formulating actions,
- Benchmarking performance, and
- Monitoring and assessing the progress on the changes made

Source: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5740994/>

# Using the Patient Voice to Guide Improvement Focus

“Recognizing the importance of not only **what care** is provided to patients but also **how effectively** it is provided from the patient perspective has literally changed the conversation of health care leaders today.”

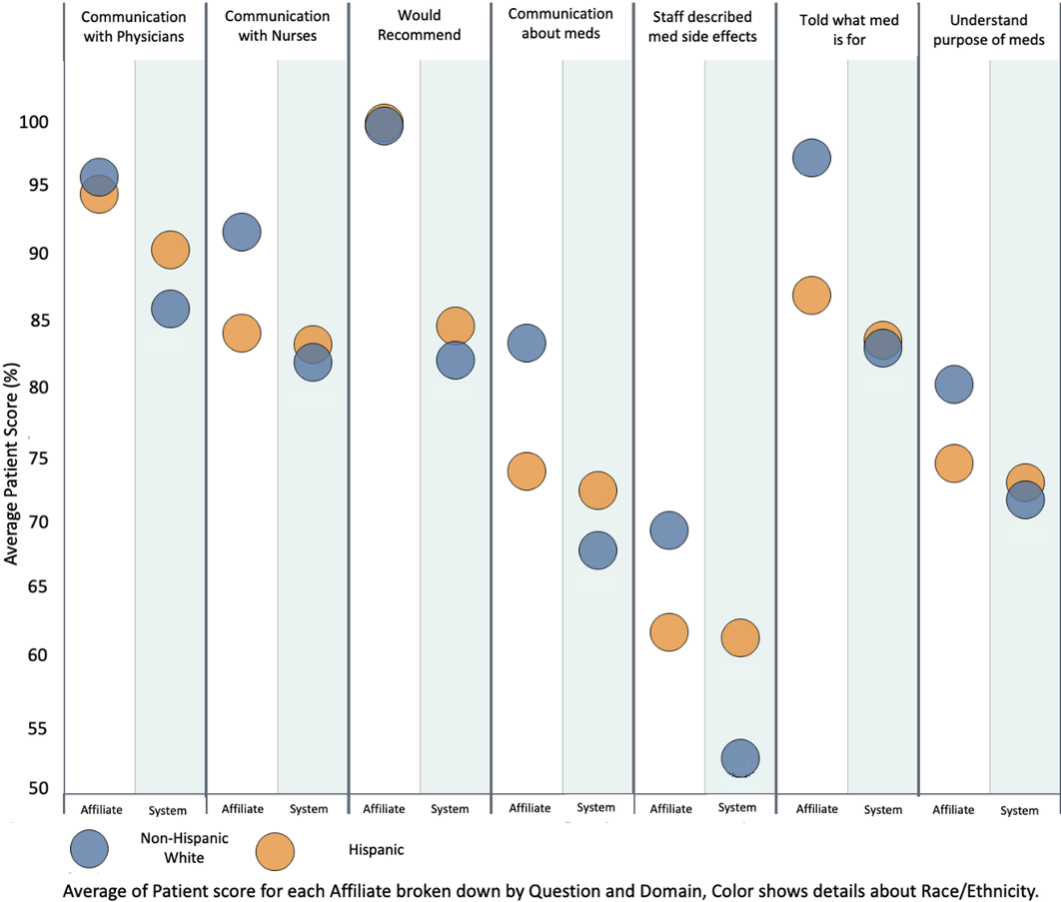
Source: <https://nam.edu/wp-content/uploads/2017/01/Harnessing-Evidence-and-Experience-to-Change-Culture-A-Guiding-Framework-for-Patient-and-Family-Engaged-Care.pdf>

# Case Study: Visualization of Patient Experience Equity Gaps

Using data to quantify patient experience is a crucial first step

Identify and address health and healthcare inequities in terms of patient experience

Prioritize opportunities for improvement



Source: Moreno MR, Sherrets B, Roberts DJ, Azar K. Health equity and quantifying the patient experience: A case study. *Patient Experience Journal*. 2021; 8(2):94-99. doi: 10.35680/2372-0247.1621. <https://pxjournal.org/cgi/viewcontent.cgi?article=1621&context=journal>

# Case Study: Improvement Focus on Patient Experience

## Massachusetts General Hospital/Physicians Organization's

Service Expectations and "ALWAYS" Behaviors:

Effort to establish consistency in customer service across clinical areas

Service department developed Service Expectations and "ALWAYS" Behaviors for various touch points with patients, including during check-in, during check-out, in the hallway, on the phone, and in the exam room

### Service Expectations and "ALWAYS" Behaviors

#### CHECK-IN

##### Service Expectations

- Acknowledge patients' presence
- Ask how you can help
- Inform patients of anticipated wait time
- Ask if there are other questions

##### Associated "ALWAYS" Behaviors

- Greet patients with a warm smile and a pleasant tone of voice and thank them for coming
- Establish eye contact
- If unable to greet patients promptly, acknowledge them and let them know you will be with them shortly
- If physician is running late, let patients know how long the wait could be and apologize
- Periodically round the waiting room and keep patients informed of wait times

#### CHECK-OUT

##### Service Expectations

- Acknowledge patients and ask how you can help
- Verify if patients have any questions
- Thank patients for coming to MGH

##### Associated "ALWAYS" Behaviors

- Ask if patients need any follow-up appointments / tests; explain next steps so they know what to expect
- Ask "Is there anything else I can do for you?"
- If necessary, help patients find their way to their next destination

#### HALLWAY

##### Service Expectations

- Acknowledge patients when in hallway
- Ask patients if you can help
- Provide directions and escort patients to their destination

##### Associated "ALWAYS" Behaviors

- Make eye contact and smile
- Walk beside patients when escorting them to the exam room rather than in front of them
- Stop and ask patients if they have any questions
- Help patients to get to where they need to go
- Let patients get on the elevator first and hold door open for them

# Colorectal Cancer Screening Case Study

## QI Intervention:

- Kaiser Permanente Northern California implemented a FIT-based colorectal cancer screening program.
- Outreach strategy beginning with automated reminders and then personalized outreach for non-responders.
- Personalized outreach: direct mail, telephone calls, and electronic messages, alongside reminders to primary care physicians to recommend screening during clinic visits.
- Enhanced Personalized Outreach: Transitioning to personalized outreach after initial automated attempts significantly boosted screening rates to between 74% and 84% across all racial and ethnic groups.
- Notably, the proportion of minority patients completing screening was higher during this phase compared to White patients.

## Patient Experience Outcomes:

- This case underscores the importance of persistence and customization in patient communication strategies, especially in addressing healthcare disparities among racial and ethnic minoritized groups.

Source: <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2817645>

# Foundational Elements of Patient Experience Improvement

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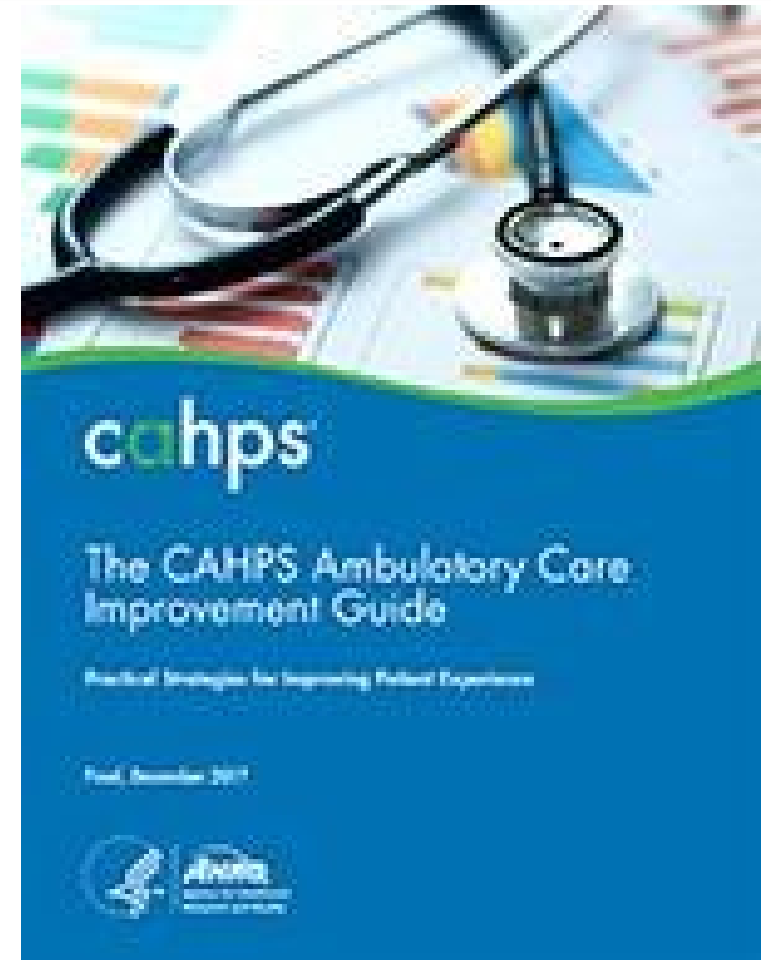
- Leadership and Governance
- Partnerships with patients and families
- Focus on the workforce
- Systematic measurement and feedback
- Supportive technology and infrastructure
- Build environment

Source: <https://www.commonwealthfund.org/publications/fund-reports/2007/oct/patient-centered-care-what-does-it-take>

# CAHPS Improvement Guide

Includes:

- Strategies for approaching improvement
- Ideas on how to determine focus for patient experience improvement activities
- Matching improvement activities to domains in the CAHPS survey



<https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/quality-improvement/improvement-guide/cahps-ambulatory-care-guide-full.pdf>

# Examples of Improvement Ideas

Domains for Patient Experience	Clinician & Group Survey 3.0	Examples of Improvement Projects	Resources
Access to care	Getting Timely Appointments, Care, and Information	Patient empowerment or “activation”: <ul style="list-style-type: none"> <li>Group patient visits and seminars for community residents</li> <li>Open Access Scheduling for Routine and Urgent Appointment</li> </ul>	Open Access: <a href="https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/access/strategy6a-openaccess.html">https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/access/strategy6a-openaccess.html</a>
Communication	How Well Providers Communicate with Patients	Respect for patients’ values and expressed needs <ul style="list-style-type: none"> <li>Patient-provider joint setting of goals through a “Patient Action Plan” or “Shared Care Plan”</li> </ul>	
Office Staff	Helpful, Courteous, and Respectful Office Staff	Welcoming environment <ul style="list-style-type: none"> <li>New patient orientation and facility tour (e.g. prior to the first physician visit)</li> </ul>	
Coordination of care	Providers' Use of Information to Coordinate Patient Care	Pilot test of OpenNotes (c)	OpenNotes: <a href="https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/access/strategy6c-opennotes.html">https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/access/strategy6c-opennotes.html</a>

<https://www.ahrq.gov/cahps/quality-improvement/improvement-guide>



# Resources

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**Agency for Healthcare Research and Quality (AHRQ) Working with Patients & Families as Advisors - Implementation Handbook:** Resource to facilitate patient and family partnerships with health care systems in implementing quality and safety efforts. <http://www.ahrq.gov/professionals/systems/hospital/engagingfamilies/strategy1/index.html>

**Institute for Patient- and Family-Centered Care Organizational Self-Assessment:** Brief organizational assessment tool that can be used to identify organizational priorities for patient- and family-centered care and to facilitate measurement of progress. Available at [http://www.cfhi-fcass.ca/sf-docs/default-source/patient-engagement/bettertogether-organizational-self-assessment\\_eng.pdf?sfvrsn=2](http://www.cfhi-fcass.ca/sf-docs/default-source/patient-engagement/bettertogether-organizational-self-assessment_eng.pdf?sfvrsn=2)

**Webinar:** The Power Of Patient Stories: <https://www.ahrq.gov/cahps/news-and-events/events/webinar-051222.html>

# Questions & Answers

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# Thank you!

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Webinar Evaluation Link: Insert Link here and in chat

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