Measuring & Improving the Patient Experience of Care

Surveys, Tools and Approaches

Summer Boslaugh, Q Corp
Erin Connelly, Multnomah County Health Department

October 17, 2013
Welcome!

Type questions into the Questions Pane
Patient-Centered Primary Care Institute
History and Development

• Launched in 2012
• Public-private partnership
• Broad array of technical assistance for practices at all stages of transformation
  – Learning Collaboratives
  – Website (www.pcpici.org)
  – Webinars & Online Learning
• Ongoing mechanism to support practice transformation and quality improvement in Oregon
Oregon’s PCPCH Model is defined by six core attributes, each with specific standards and measures

• **Access to Care**
  – “Be there when we need you”

• **Accountability**
  – “Take responsibility for us to receive the best possible health care”

• **Comprehensive Whole Person Care**
  – “Provide/help us get the health care and information we need”

• **Continuity**
  – “Be our partner over time in caring for us”

• **Coordination and Integration**
  – “Help us navigate the system to get the care we need safely and timely manner”

• **Person and Family Centered Care**
  – “Recognize we are the most important part of the care team, and we our responsible for our overall health and wellness”

*Read more: [http://primarycarehome.oregon.gov](http://primarycarehome.oregon.gov)*
Presenters

Summer Boslaugh
Program Manager
Quality Corp

Erin Connelly
QI Coordinator
Multnomah County
Objectives

- Describe the difference between patient experience and patient satisfaction
- Review survey instruments and fielding methodologies
- Discuss how to begin working within your organization to improve patient experience
- Share experiences from Multnomah County Health Department primary care clinics
Persistent Myths

• Myth #1: Patient experience is nice but not necessary
• Myth #2: Patients won’t answer more than 10 questions
• Myth #3: Surveys used for accountability cannot be used for improvement
• Myth #4: It’s impossible to improve scores
Agenda

• Measuring
  – What is patient experience?
  – Why does it matter?
  – How can it be measured?
  – Overview of CAHPS
  – CG-CAHPS Survey for Assessing PCMH

• Public Reporting

• Improving Patient Experience
  – Strategies for improvement
  – Resources for improvement
### Satisfaction Versus Experience

- Patient experience surveys are similar to patient satisfaction surveys, but they are not the same.
- They go beyond ratings by asking patients to **report on their experiences** with health care services.
- More specific, actionable, understandable, and objective than general ratings alone.

<table>
<thead>
<tr>
<th><strong>Patient Satisfaction</strong></th>
<th><strong>Patient Experience</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Rating scale: excellent to poor</td>
<td>Rating scale: never, sometimes, usually, always</td>
</tr>
<tr>
<td>Reflects respondent expectations</td>
<td>Measures experience against what would be ideal</td>
</tr>
<tr>
<td>Doesn’t suggest actions to improve ratings</td>
<td>Highlights actionable areas for improvement</td>
</tr>
</tbody>
</table>
Why do it?

• **Ethical Case**
  – It is the right thing to do

• **Business Case**
  – Patients who have a good experience will tell others

• **Matches the Triple aim**

• **Quality improvement**
  – To know where you are, you need to measure
Strategies for Measurement

• Standardized patient surveys
  – Proprietary tools (most focus on “satisfaction”)
  – Public domain instruments (CAHPS)
• User-posted online ratings and reviews
• Targeted rapid cycle surveys
• Focus groups and interviews
• Walk-throughs
• Shadowing
• “Mystery shopping”
About CG – CAHPS

- CAHPS = **Consumer Assessment of Healthcare Providers and Systems**
- Most widely used survey tools for assessing the patient’s experience with care
- Endorsed by National Quality Forum
- Initiated and funded by AHRQ since 1995
- Consortium members include: AHRQ, CMS, RAND, Yale/Harvard, and Westat
Core CAHPS Design Principles

• Focus on topics for which **consumers are the best or only source** of information

• Include **patient reports and ratings** of experiences – not “satisfaction”

• Base question items and survey protocols on **rigorous scientific development and testing**, as well as extensive stakeholder input

• All surveys and services are in the **public domain**
Clinician & Group Surveys (CG-CAHPS)

• Multiple versions to meet user needs
  – 12-month
  – Visit
  – Patient-Centered Medical Home (PCMH)

• Adult and child versions

• All versions measure the same “core” concepts
  – Composite measures
  – Rating measure
CG-CAHPS Core Surveys Composites

- **Access: Getting Appointments and Health Care When Needed**
  - Getting appointments for urgent care
  - Getting appointments for routine care
  - Getting an answer to a medical question during regular office hours
  - Getting an answer to a medical question after regular office hours
  - Wait time for appointment to start

- **Global Rating of Provider**
  - 0-10 rating

- **How Well Providers Communicate**
  - Provider explanations easy to understand
  - Provider listens carefully
  - Provider gives easy to understand information
  - Provider knows important information about medical history
  - Provider shows respect for what you have to say
  - Provider spends enough time with you

- **Courteous and Helpful Office Staff**
  - Clerks and receptionists were helpful
  - Clerks and receptionists treat you with courtesy and respect
CG-CAHPS PCMH Survey Domains

CG-CAHPS Core Composites
- Access to Care*
- Communication*
- Office Staff*
- Global Rating*

PCMH Composites
- Comprehensiveness*
- Self Management Support*
- Shared Decision Making*
- Coordination of Care
- Information about Care and Appointments
- Access to Care

*Composite recommended for public reporting
# CG-CAHPS Survey Versions

<table>
<thead>
<tr>
<th>Description</th>
<th>12-Month</th>
<th>Visit</th>
<th>PCMHC</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Asks about experiences with ambulatory care in the last 12 months</td>
<td>Some items ask about experiences in the last 12 months; others ask about the most recent visit</td>
<td>Same as the 12-Month version, plus additional items to measure medical home concepts not covered by the core items</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of questions in adult survey</th>
<th>34 items</th>
<th>37 items</th>
<th>52 items</th>
</tr>
</thead>
</table>

## Timeframe by domain:

<table>
<thead>
<tr>
<th>Access</th>
<th>12 months</th>
<th>12 months</th>
<th>12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provider communication</td>
<td>12 months</td>
<td>Most recent visit</td>
<td>12 months</td>
</tr>
<tr>
<td>Office staff</td>
<td>12 months</td>
<td>Most recent visit</td>
<td>12 months</td>
</tr>
<tr>
<td>Provider rating</td>
<td>Not time-specific</td>
<td>Not time-specific</td>
<td>Not time-specific</td>
</tr>
</tbody>
</table>

## Additional domains:

<table>
<thead>
<tr>
<th>Recommend provider</th>
<th>Can be added</th>
<th>Included</th>
<th>Included</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attention to mental health</td>
<td>Can be added</td>
<td>Can be added</td>
<td>Included</td>
</tr>
<tr>
<td>Self-management support</td>
<td>Can be added</td>
<td>Can be added</td>
<td>Included</td>
</tr>
<tr>
<td>Shared decision-making</td>
<td>Can be added</td>
<td>Can be added</td>
<td>Included</td>
</tr>
</tbody>
</table>

All can be used for internal quality improvement and public reporting
Psychometric Properties

• Visit Survey’s 3-point Yes-No response scale has large ceiling effects
  – Items are too easy to “endorse,” which leads to a high percentage of “top box” responses

• 12-Month Survey’s 4-point Never-to-Always response scale has greater discrimination
  – Useful for both external assessment and internal improvement
## Visit Survey Percentile Distributions

<table>
<thead>
<tr>
<th>Composite/Item</th>
<th>10%</th>
<th>20%</th>
<th>30%</th>
<th>40%</th>
<th>50%</th>
<th>60%</th>
<th>70%</th>
<th>80%</th>
<th>90%</th>
<th>95%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Getting Timely Appointments, Care, and Information</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Got appt for urgent care as soon as needed</td>
<td>51%</td>
<td>55%</td>
<td>58%</td>
<td>60%</td>
<td>63%</td>
<td>66%</td>
<td>68%</td>
<td>71%</td>
<td>76%</td>
<td>80%</td>
</tr>
<tr>
<td>Got appt for check-up or routine care as soon as needed</td>
<td>53%</td>
<td>59%</td>
<td>63%</td>
<td>66%</td>
<td>69%</td>
<td>72%</td>
<td>75%</td>
<td>79%</td>
<td>84%</td>
<td>88%</td>
</tr>
<tr>
<td>Got answer to phone question during regular ofc hrs same day</td>
<td>61%</td>
<td>66%</td>
<td>69%</td>
<td>71%</td>
<td>74%</td>
<td>77%</td>
<td>79%</td>
<td>82%</td>
<td>85%</td>
<td>89%</td>
</tr>
<tr>
<td>Got answer to phone question after hours as soon as needed</td>
<td>48%</td>
<td>54%</td>
<td>58%</td>
<td>61%</td>
<td>64%</td>
<td>67%</td>
<td>70%</td>
<td>74%</td>
<td>80%</td>
<td>84%</td>
</tr>
<tr>
<td>Wait time to be seen within 15 minutes of appointment time</td>
<td>43%</td>
<td>50%</td>
<td>56%</td>
<td>59%</td>
<td>63%</td>
<td>67%</td>
<td>70%</td>
<td>75%</td>
<td>82%</td>
<td>88%</td>
</tr>
<tr>
<td><strong>How Well Providers Communicate With Patients</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provider explained things clearly</td>
<td>85%</td>
<td>88%</td>
<td>89%</td>
<td>90%</td>
<td>91%</td>
<td>92%</td>
<td>93%</td>
<td>94%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>Provider listened carefully</td>
<td>86%</td>
<td>89%</td>
<td>90%</td>
<td>91%</td>
<td>92%</td>
<td>93%</td>
<td>94%</td>
<td>95%</td>
<td>96%</td>
<td>98%</td>
</tr>
<tr>
<td>Provider gave easy to understand instructions</td>
<td>88%</td>
<td>90%</td>
<td>91%</td>
<td>92%</td>
<td>93%</td>
<td>94%</td>
<td>95%</td>
<td>96%</td>
<td>97%</td>
<td>98%</td>
</tr>
<tr>
<td>Provider knew important info about medical history</td>
<td>84%</td>
<td>87%</td>
<td>89%</td>
<td>90%</td>
<td>91%</td>
<td>92%</td>
<td>93%</td>
<td>94%</td>
<td>95%</td>
<td>97%</td>
</tr>
<tr>
<td>Provider showed respect</td>
<td>75%</td>
<td>79%</td>
<td>81%</td>
<td>83%</td>
<td>85%</td>
<td>86%</td>
<td>88%</td>
<td>90%</td>
<td>92%</td>
<td>94%</td>
</tr>
<tr>
<td>Provider spent enough time</td>
<td>90%</td>
<td>92%</td>
<td>93%</td>
<td>94%</td>
<td>95%</td>
<td>96%</td>
<td>96%</td>
<td>97%</td>
<td>98%</td>
<td>99%</td>
</tr>
<tr>
<td><strong>Helpful, Courteous, and Respectful Office Staff</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office staff was helpful</td>
<td>85%</td>
<td>88%</td>
<td>90%</td>
<td>91%</td>
<td>92%</td>
<td>93%</td>
<td>94%</td>
<td>95%</td>
<td>97%</td>
<td>98%</td>
</tr>
<tr>
<td>Office staff showed courtesy and respect</td>
<td>82%</td>
<td>85%</td>
<td>87%</td>
<td>89%</td>
<td>90%</td>
<td>91%</td>
<td>93%</td>
<td>94%</td>
<td>95%</td>
<td>97%</td>
</tr>
<tr>
<td><strong>Patients’ Rating of the Provider</strong></td>
<td></td>
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<td>70%</td>
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<td>82%</td>
<td>84%</td>
<td>86%</td>
<td>89%</td>
<td>91%</td>
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</tbody>
</table>
Forces driving PCMH survey

National, state, and regional reporting initiatives are converging around use of 12-month version at the practice site level

- Oregon Health Authority Patient-Centered Primary Care Home recognition
  - Points towards recognition tier, Standard 1. A) and 6. C)
- Comprehensive Primary Care Initiative
  - CMS will be fielding the survey for the 70 participating Oregon clinics
- NCQA Practice Recognition
- Accountable Care Organizations
  - Final rules require CG-CAHPS (7 domains)
  - 5 of 7 ACO domains are in PCMH survey
- Growing patient expectations
From the Clinician’s Perspective

• Creates high performance practices/units and integrally links to care redesign efforts
• Strengthens ability to recruit and retain excellent staff
• Improves clinician and staff satisfaction
• Reduces cost of rework
Caveat Emptor: Example of User-posted Review

Pacific Family Practice Medical Group
After Hours Medical Care

52 reviews for Pacific Family Practice Medical Group After Hours Medical Care

52 reviews in English

Jean S.
San Francisco, CA

Agreed with all the 0-1 star reviewers. This is my 1st review on Yelp to absolutely advise against going to this office. I'm still waiting for follow ups (lord knows why a patient would want a follow up??). I've worked in high volume hospitals before and never have I seen follow ups denied repeatedly, over, and over again by multiple answering machines, front desk people, email systems, etc. Doctors/nurses/PAs refuse to do their job and due diligence post-appointment by hiding behind automated answering machines.

Fact of the matter is, if you're on your death bed, you might as well stay there than going to Pacific Family Practice since the results will be the same and you can at least use your copay to buy yourself one more drink.
PATIENT EXPERIENCE REPORT
We use results from surveys that patients fill out about their experiences to help you compare care in Oregon.

Patient Experience for The Doctor's Clinic
Research shows that patients really care about good communications with their doctor, access to care when they need it, and being treated with courtesy and respect by all staff at a doctor's office. Patient experience is measured using surveys that ask patients how they viewed their care based on these important things. These surveys ask patients whether or not, or how often, certain events occurred. The scores below show how well a doctor's office rated on four important areas of patient experience.

Adult Care

<table>
<thead>
<tr>
<th>The four areas of patient experience</th>
<th>How this clinic compared to the Oregon clinic average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Getting Timely Appointments, Care and Information</td>
<td>45% [Green] [Blue] [Orange] [White]</td>
</tr>
<tr>
<td>How Well Providers Communicate with Patients</td>
<td>76% [Green] [Blue] [Orange] [White]</td>
</tr>
<tr>
<td>Helpful, Courteous, and Respectful Office Staff</td>
<td>65% [Green] [Blue] [Orange] [White]</td>
</tr>
</tbody>
</table>
Improving Patient’s Experience of Care

- Use patient experience of care data and comments to create thoughtful reward and recognition programs for all staff
  - Include stories in practice newsletters and local papers.
  - Provide tuition reimbursement to attend educational programs, and financial incentives for worthy employees.
- Provide regular educational programs and webinars on topics relevant to improving the patient’s experience of care
- Include a review of patient experience of care data and comments in all senior leadership meetings.
- Create formal patient/family advisory councils and patient/family faculty programs for all major services and practices.
Improving Patient’s Experience of Care

- Implement employee surveys to identify barriers to culture change and quality of work life for all staff
- Expand service excellence training programs for all front-line staff
- Implement HR policies to link hiring, orientation, training, staff education, and performance evaluations to quality and safety goals
- Implement leadership interviews of patients who have experienced a medical error and/or who have had an experience of care on a quarterly basis.
  - Share stories from these interviews in leadership meetings and with front line staff.
Improving Patient Experience: A Comprehensive Strategy

1. CG-CAHPS Survey
   - Use a vendor if possible
   - Collect survey data at the clinician level, whenever possible
   - Benchmark locally and nationally

2. Supplemental Patient Feedback
   - Practice walkthroughs
   - Shadow – repeated real-time observation of patients and families as they move through each step of their health care journey
   - Focus groups
   - Comment cards

3. Engaging Patients and Families
   - Patient and Family Advisory Council
   - Patient Partners
Surveying Patient Experience of Care at MCHD

Erin Connelly
Quality Improvement Coordinator
Multnomah County Health Department

October 17, 2013
Why do we measure patient experience of care?
We Measure Patient Experience
Because...

• Patients with better care experiences have **better health outcomes**
  • (Source: The CAHPS Improvement Guide, AHRQ)

• It helps us **identify and target** where we need to improve

• It’s a **key indicator** in our industry
Our Current Survey

25 items plus 2 open-ended questions:

• Access to appointments, wait times, etc.
  – (5 questions)

• Patient-centered, team-based care
  – (10 questions)

• Patient demographics/health status
  – (10 questions)

• What do we do really well? What can we improve?
  – (2 open ended questions)
Patient Satisfaction Survey Results
All Primary Care
Oct 2012

Quick Stats:
- 92% Surveys Returned
- 54% said that visits were always well organized and running on time (goal 70%) - Increased 8%!
- 67% responded always to all patient centeredness measures (goal 70%) - Increased 7%!
- 69% strongly agreed that they would recommend their care team to their family and friends (goal 70%) - Increased 5%

Core Measures:
Below is a summary of each of the core patient satisfaction measures. It shows the performance of each clinic relative to the target of 70%. Each of these measures are summarized using only the highest rating (Always and Strongly Agree). The Patient Centeredness measure is composed of 5 questions: listen carefully, show respect, explain things in a way I can understand, spend enough time, and treat me as a partner in caring for my health.

Patient Centeredness:

Comparison of Patient Centeredness Measures

All five individual patient centeredness measures are above the target of 70%!

In the last 6 months, how often did your healthcare team...

- Listen carefully?
- Show respect for what you had to say?
- Explain things in a way you can understand?
- Spend enough time with you?
- Treat you as a partner in caring for your health?

Total Patient Centeredness Rollup

Appointments and Front Desk:

When you needed an appointment for care from this clinic, how often do you get an appointment as soon as you think you need it?
When you contact this clinic by phone, how often are you treated with courtesy and respect?
When you visit this clinic, how often are the front desk staff as helpful as you think they should be?

Pt. History, Behavioral Health, and Team Phone:

In the last 6 months, how often did your healthcare team...

- boom to know important information about your medical history and health needs?
- show concern about your emotional well-being and how you were feeling?
- Your opinion was easy to reach a member of your healthcare team by phone when you had questions or concerns?
Patient Feedback Led to...
Why we participated in the CAHPS Pilot

- Wanted to align with community standard

- Value of all using the **same instrument** – can compare, benchmark

- Value of learning collaborative
Findings

Plusses
- Valuable to see benchmarks
- Seamless experience for clinics

Things to look into
- Language needs
- Other methods of delivery?
Approach & Next Steps

• **Survey instrument:** A combination of CAHPS and internal survey

• **iPad pilot**

• **Supplement with qualitative or “day in the life” activities**
Questions

Type questions into the Questions Pane
Resources

• CAHPS Improvement Guide
• Forces Driving Implementation of the CAHPS Clinician & Group Survey
• Myth Busting: Using the CG-CAHPS 12-Month Survey for Quality Improvement
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