

Patient Experience Matters



**A Stakeholder Meeting convened by
the Dirigo Health Agency's
Maine Quality Forum**

March 6, 2012

Goals for Today



- Learn about the value of patient experience surveys
- Describe plans for voluntary statewide implementation in Maine
- Solicit your support and participation

Why Patient Experience Matters



- Patients with positive experiences are **more likely to seek preventive care** and to follow instructions for better managing their health.
- Good patient experience of care is related to **more activated and engaged patients** who are more adherent to advice and treatment plans.
- Better care experiences lead to **better outcomes** of care and fewer malpractice claims.
- Physicians cannot improve unless first measure.

Role of the Maine Quality Forum



- MQF is statutorily charged with responsibility to monitor and improve the quality of health care in Maine.
- LD 1444 further requires the MQF to:
 - Collect quality of care data on health care organizations and practitioners.
 - Publicly report quality data for use by consumers
- Patient experience is a core element of quality.

Overview of Statewide Strategy



- Voluntary participation
- Use of a nationally recognized instrument
- Leverage provider survey efforts where possible
- Secure a preferred rate for survey administration for in practices not currently engaged in survey efforts
- Use a single portal for national/regional benchmarking
- Publicly report in Maine at practice level

Why Patient Experience Matters: A National Perspective

Dale Shaller, MPA
Principal, Shaller Consulting Group
March 6, 2012

Overview

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

IOM's 6 Aims for Improvement

Safety

Effectiveness

Patient-Centeredness

Timeliness

Efficiency

Equity

IOM Definition

“Health care that establishes a *partnership among practitioners, patients, and their families*...to ensure that decisions *respect patients' wants, needs, and preferences* and that patients have the *education and support* they need to *make decisions and participate* in their own care.”

Patient-centered care is strongly correlated with other key outcomes

- Health Outcomes:
 - Patient adherence
 - Process of care measures
 - Clinical outcomes
- Business Outcomes:
 - Patient loyalty
 - Malpractice risk
 - Employee satisfaction
 - Financial performance

Approaches to measurement

- Standardized patient surveys
 - Proprietary tools (most focus on “satisfaction”)
 - Public domain instruments (CAHPS)
- Patient comments
 - User-posted online narrative anecdotes
- Other approaches for internal improvement
 - Targeted rapid cycle surveys
 - Focus groups and interviews
 - Walkthroughs and shadowing
 - “Mystery shopping”

CAHPS Program

- 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

CAHPS Family of Surveys

- Ambulatory Care Surveys
 - *CAHPS Clinician & Group Survey (CG-CAHPS)*
 - CAHPS Health Plan Survey
 - CAHPS Surgical Care Survey
 - CAHPS Home Health Care Survey
- Facility Surveys
 - CAHPS Hospital Survey (H-CAHPS)
 - CAHPS In-Center Hemodialysis Survey
 - CAHPS Nursing Home Survey

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

CAHPS Clinician & Group Survey

- Multiple versions to meet user needs
 - Visit version
 - 12-month version
 - Patient-centered medical home (PCMH) version
 - Adult and child versions
- Core questions are the same across versions
- Supplemental questions can be added for specific topics

CG-CAHPS PCMH Survey



* NQF endorsed

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 PCMH Survey

Item Count

	Adult Survey	Pediatric Survey
CG-CAHPS Core	34	55
PCMH Item Set	18	11
CG Core+PCMH Total Items	52	66

Forces driving PCMH survey

- NCQA Practice Recognition
 - Option to gain Distinction in Patient Experience Reporting
<http://www.ncqa.org/tabid/631/default.aspx>)
 - Accountable Care Organizations
 - Final rules require CG-CAHPS (7 domains)
 - 5 of 7 ACO domains are in PCMH survey
 - Medical home demonstrations
 - CMS, HRSA, private payers
 - Growing patient expectations
-

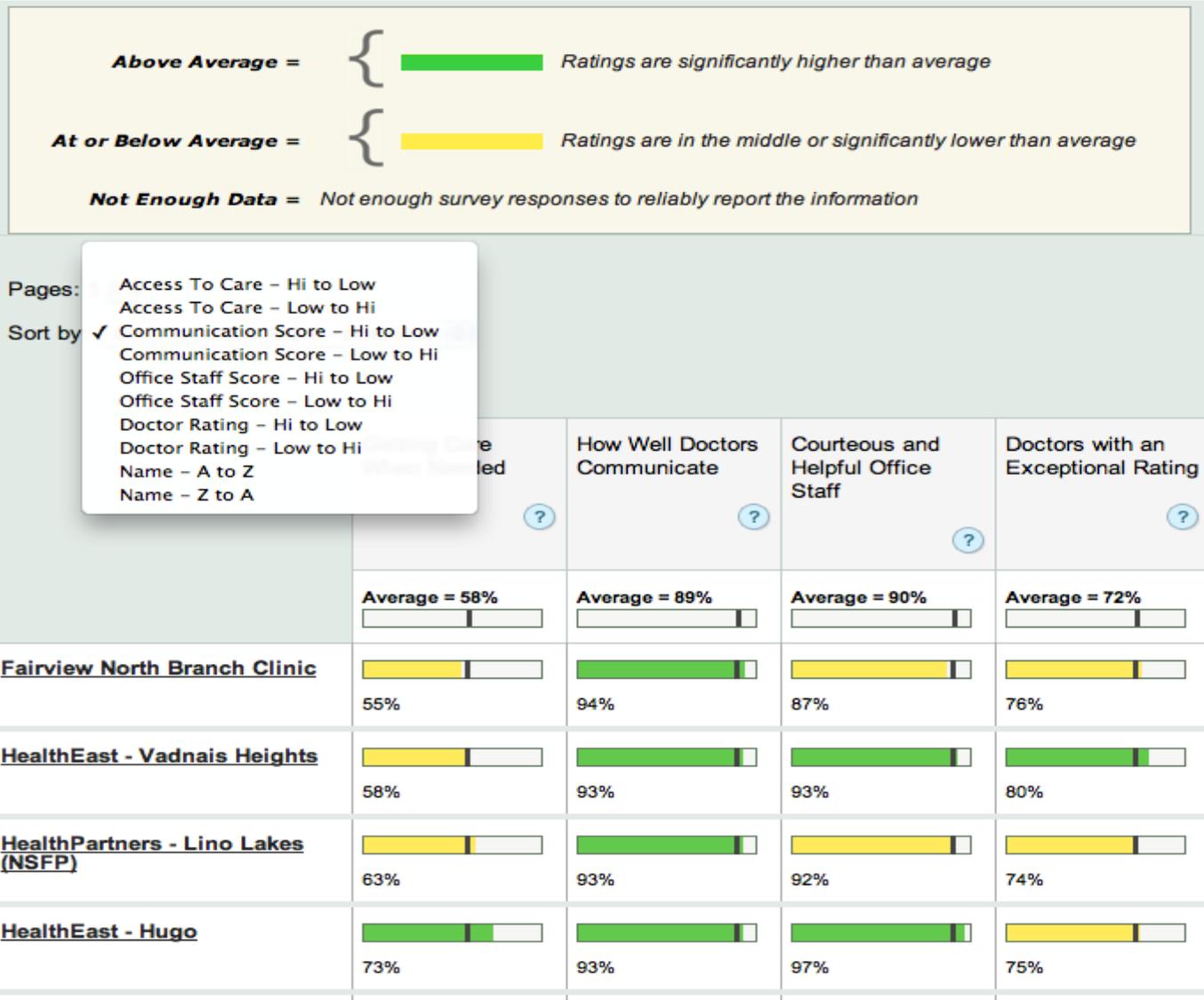
Overcoming persistent myths

- 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

Public reporting of CG-CAHPS

- Aligning Forces for Quality (AF4Q)
 - 16 Alliances all committed to public reporting and improvement goals
- Medicare Physician Compare in 2013
- NQF Measures Application Partnership
 - Recommends use of CG-CAHPS for all Federal measurement/reporting/payment programs
- State mandates (e.g, Minnesota)
- Hospital and health system reports

MNHealthScores (www.mnhealthscores.org)



MHQP (www.mhqp.org)

q & a

helpful resources

technical appendix

disclaimer

acknowledgements

letters of support

hospital quality

Sign Up for MHQP's Email List

Enter Your Email:

Join

f t in

click on the measure name to learn more information about the measure
click on the stars to learn about how patients answered each survey question

Doctors' Office	How Well Doctors Communicate with Patients	How Well Doctors Coordinate Care	How Well Doctors Know Their Patients	How Well Doctors Give Preventive Care and Advice
Andover Pediatrics, P.C. (Pediatric Survey), The Pediatric Physicians' Organization at Children's View Website	★★★★	N/D	★★★☆☆	★★☆☆☆
Cambridge Health Alliance Cambridge Pediatrics (Pediatric Survey), Partners Community Health Care (PCHI), Cambridge Health Alliance View Website	★★★★	★★★★	★★★★	★★★☆☆
Westwood/Mansfield Pediatrics (Pediatric Survey), The Pediatric Physicians' Organization at Children's View Website	★★★★	★★★☆☆	★★☆☆☆	★★★★

Click on a doctors' office to view results on all measures

The CAHPS Database

- National repository of data for selected CAHPS surveys
- Two major applications:
 - **Benchmarking** to evaluate health system performance and support quality improvement
 - **Research** on consumer assessments of quality
- Funded by AHRQ and administered by Westat through the CAHPS User Network

CG-CAHPS Database Composition

(as of December 2010)

CG-CAHPS Version	N of Practice Sites	N of Respondents
Adult 12-month 4-pt	235	41,834
Adult 12-month 6-pt	339	180,588
Child 12-month 6-pt	52	4,883
Adult Visit	469	103,442
TOTALS	1,095	330,747

Online Reporting System

- Supports selected CAHPS surveys maintained by CAHPS Database
 - CAHPS Health Plan Survey
 - CG-CAHPS Survey
- Public portal available to everyone
 - Ability to view summary-level data only
- Password-protected portal accessible only to participants who contribute data
 - Ability to view your own results compared to selected benchmarks

Stillwater Medical Group

You are here: [Comparative Data](#) > [Clinician & Group](#) > Top Box Score Results



The CAHPS Benchmarking Database Clinician & Group

Hello, [Dale Shaller](#) | [Logout](#) | [Manage Rep](#)
[Logout as kamezcua@lakeview.org](#)

Step 1: Select Field Period: 2010

Step 2: Select Survey Type: Adult Primary Care Visit 4 Point

Step 3: Select Group/Practice: [Choose one or more Practice Sites](#)

[Choose one or more Practice Sites](#)

- Stillwater Medical Group
- Curve Crest
- Lakeview Hospital Campus
- Somerset

Choose the Group or Practice report to be displayed. Select the name, or hold down the Control (Ctrl) key and select multiple names with the pointer in the drop down to view multiple reports. To deselect, hold control key and point to Group or Practice to be deselected.

SMG Group Scores: Access to Care

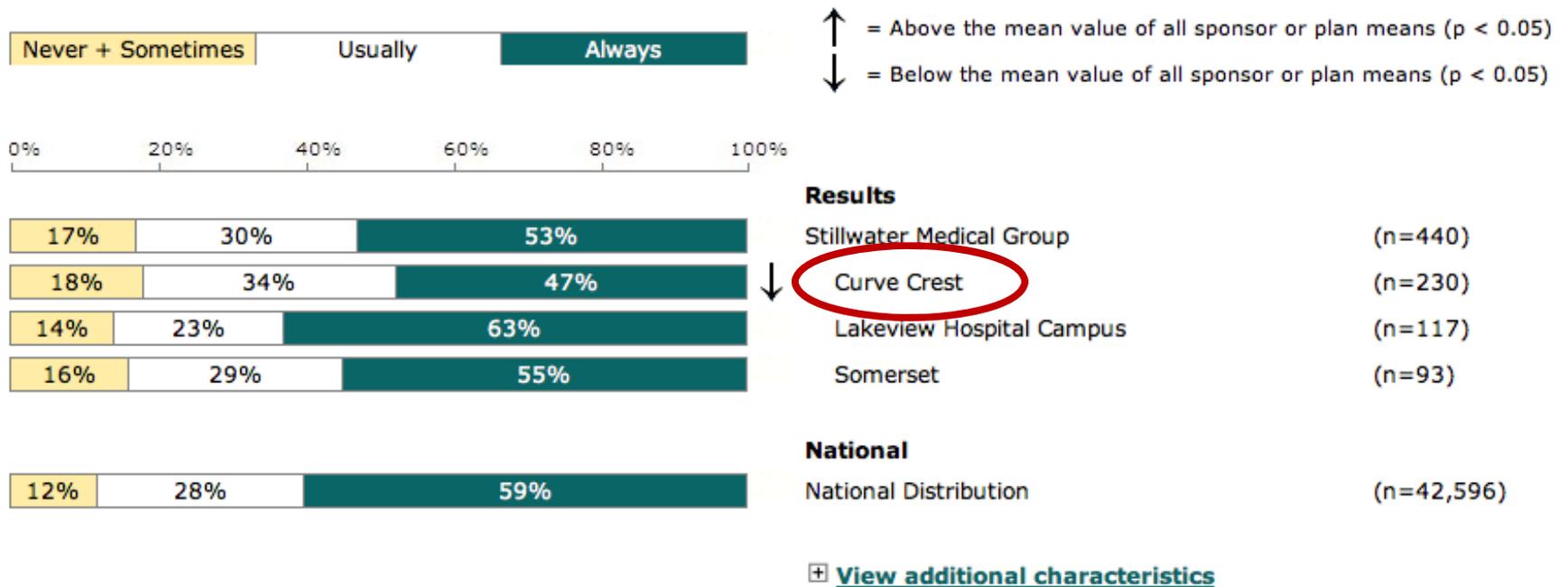
Stillwater Medical Group

Results for Stillwater Medical Group Percentile Top Box Score:

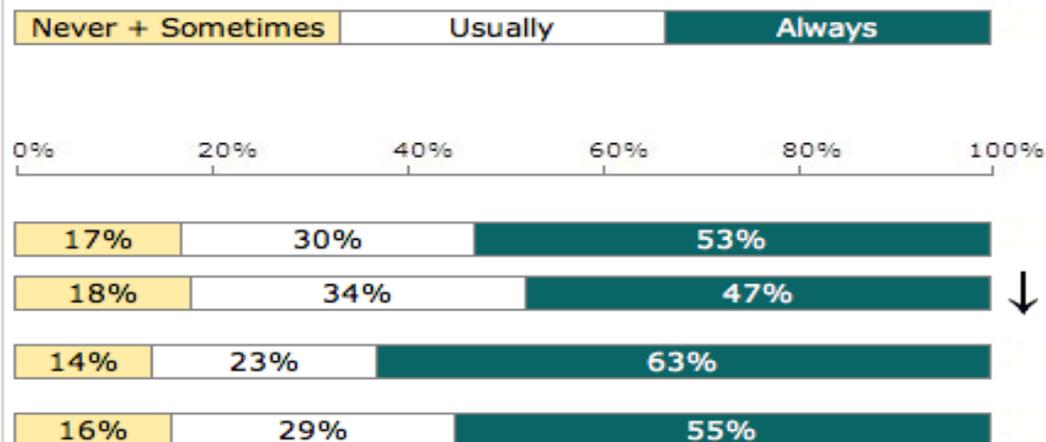
Composite/Item	Selected Group/Site	CAHPS DB Overall	90 th Percentile	75 th Percentile	50 th Percentile	25 th Percentile
<i>Getting Timely Appointments, Care, and Information</i>	58%	59%	73%	66%	59%	52%
Got appointment for urgent care as soon as needed	64%	64%	81%	74%	66%	58%
Got appointment for check-up or routine care as soon as needed	69%	68%	83%	77%	71%	63%
Got answer to phone question during regular office hours on same day	53%	59%	78%	69%	60%	52%
Got answer to phone question after hours as soon as needed	63%	59%	80%	68%	58%	48%
Wait time to be seen within 15 minutes of appointment time	41%	43%	61%	52%	43%	33%

Identification of Problem Site

Q10 Got answer to phone question during regular office hours on same day



Q10 Got answer to phone question during regular office hours on same day



↑ = Above the mean value of all practice site means (p < 0.05)
 ↓ = Below the mean value of all practice site means (p < 0.05)

Results
 Stillwater Medical Group (n=440)

↓ Curve Crest (n=230)
 Lakeview Hospital Campus (n=117)
 Somerset (n=93)

National



National Distribution (n=42,596)

[View additional characteristics](#)

Region



Midwest (n=22,048)
 Northeast (n=13,938)
 South (n=3,339)
 West (n=3,271)

Physician Specialty



Family Practice (n=12,671)
 Internal Medicine (n=8,688)
 OB/GYN (n=1,182)

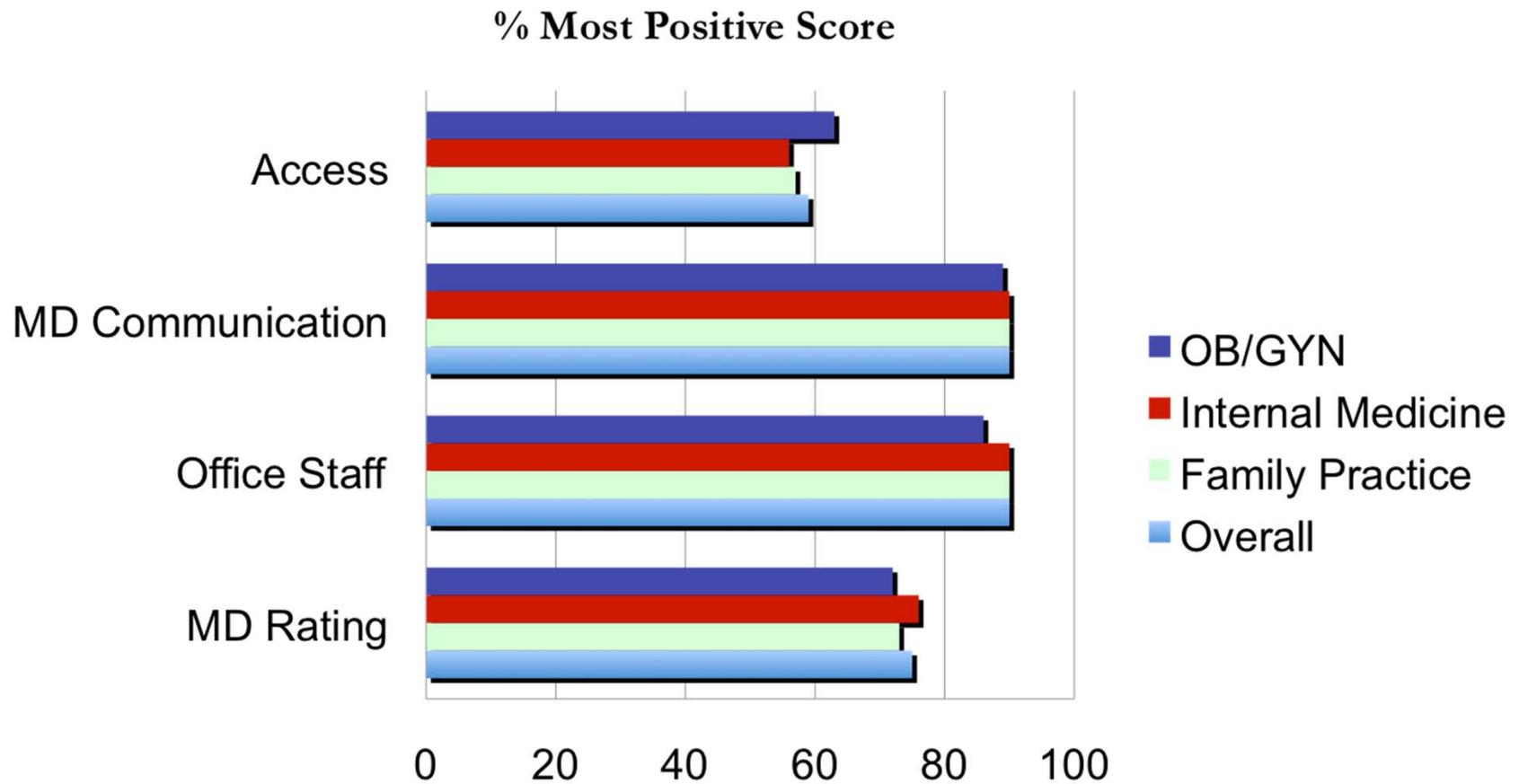
N/A Pediatrics



Other Primary Care (n=164)
 Surgical (n=586)
 Other Specialty (n=2,491)

Physician Specialty Comparisons:

Visit Version Top Box Scores



CAHPS Improvement Guide



U.S. Department of Health & Human Services

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AHRQ Agency for Healthcare Research and Quality
Advancing Excellence in Health Care

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www.ahrq.gov

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The CAHPS Improvement Guide

Practical Strategies for Improving the Patient Care Experience

[Why Improve Patient Experience?](#)

Learn how improving patient experience may lead to positive clinical and business outcomes.

[Are You Ready to Improve?](#)

Learn about the behaviors of organizations that are successful in providing positive experiences with care.

[Analysis of CAHPS Results](#)

Explore strategies for identifying the best opportunities for improvement.

[Quality Improvement Steps](#)

Learn how to implement interventions to achieve specific performance goals.

[Browse Interventions](#)

Find strategies for improving specific aspects of patients' experience with care.

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Spotlight

[Presentations on Quality Improvement](#)

[Patient-Centered Care: What Does It Take?](#)

[Planetree's Patient-Centered Care Improvement Guide](#)

CAHPS User Support Services

- Survey and Reporting Kits
 - Instruments and guidance
 - <https://www.cahps.ahrq.gov>
- CAHPS Technical support
 - E-mail: CAHPS1@ahrq.gov
 - Phone: 800-492-9261
- CAHPS Database Technical support
 - E-mail: NCBD1@ahrq.gov
 - Phone: 888-808-7108

Contact Information

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Patient Experience Matters



Implementation of a Statewide Strategy

Implementing Statewide Experience Surveying: Experience from AF4Q Pilot

Lisa M. Letourneau MD, MPH

Maine Quality Counts

March 2012



Maine AF4Q Patient Experience Pilot

- 3 AF4Q communities (ME, Detroit, WI) selected by RWJF in 2010 to “jump-start” public reporting
- Communities used “leveraged” strategy, using existing survey vendors
- In ME, primary care practices statewide invited
- 6 practices using Avatar volunteered:
 - EMMC – 3 practices
 - Redington Fairview – 3 practices
- Fielded CG-CAHPS survey June-Sept 2010 (replacing usual Avatar survey)

Public Reporting of Results

- Used Maine's existing site for public reporting of clinical quality data for Maine PCPs – i.e. MHMC: Pathways to Excellence / GBM
 - www.mhmc.info
 - www.getbettermaine.org
- Report results at practice level
- Report results when practices reach 250+ completed survey per practice

Public Reporting of Results

- Report results using ‘top box’ scoring – i.e. % patients whose responses indicated excellent performance for a given measure
- Report on 6 measures from CG-CAHPS survey
 - 3 individual survey questions:
 - Overall doctor rating
 - Willingness to recommend
 - Follow up test results
 - 3 composite measures:
 - Access to care; dr communication; staff courtesy & respect

Maine Doctor Ratings

What Patients Say:

A survey of patient experiences when visiting their doctor's office

[Ratings Explained](#)

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Six primary care doctor offices volunteered to be the first in Maine to publicly report the result of patient surveys.

Patients were surveyed about their experience with things that should happen during every visit, such as getting timely care and information, having doctors communicate well, and having office staff treat them with courtesy and respect.

The scores below indicate how often patients reported good experiences and how highly they rate their doctors.

Participating Physician Groups

- Husson Family Medicine
- Husson Internal Medicine
- Family Medicine of Brewer
- Norridgewock Health Center Internal Medicine
- Redington Family Practice
- Redington Medical Primary Care

Higher scores are better.

	Rating of Doctor	Willingness to Recommend	Follow Up on Test Results	Getting Timely Appointments, Care, and Information	Doctor-Patient Communication	Courteous and Helpful Office Staff
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National Comparison*	77%	88%	86%	54%	91%	90%
Family Medicine of Brewer	Data collection in process					
Husson Family Medicine <small>Number of patient surveys: 357</small>	77%	90%	86%	62%	92%	95%
Husson Internal Medicine <small>Number of patient surveys: 467</small>	75%	88%	90%	62%	91%	95%
Norridgewock Health Center Internal Medicine	Data collection in process					
Redington Family Practice	Data collection in process					
Redington Medical Primary Care	Data collection in process					

www.getbettermaine.org

<p>See how your selected Practices compare for Quality ratings:</p> <p> <input type="radio"/> Good <input type="radio"/> Better <input checked="" type="radio"/> Best </p> <p>* Practices can only receive a "Best" rating in the Safe category</p> <p>> Where do these ratings come from?</p> <p>Adult Care ratings for your selected practices (Last updated on Thu, 02/23/2012 - 12:20)</p>		<p>Eastern Maine Medical Center - Husson Internal Medicine</p> <p>302 Husson Ave Ste. 1 Bangor, ME 04401 (207) 947-6141 > See details</p>	<p>Add / change selections</p>	<p>Add / change selections</p>	<p>Add / change selections</p>
<p>Effective Provides the care that experts recommend</p>					
<p>Diabetes Care</p> <p>Download a diabetes checklist for your doctor</p>	<p>Ratings explained</p>	<p>Better</p>			
<p>Heart Disease Care</p> <p>Download a heart disease checklist for your doctor</p>	<p>Ratings explained</p>	<p>Better</p>			
<p>Safe Has systems to prevent medical errors</p>					
<p>Systems to track test results, send reminders, avoid medication errors</p>	<p>Ratings explained</p>	<p>Best</p>			
<p>Patient Experience What patients say about this practice</p>					
<p> How Patients Have Rated Their Experiences</p>	<p>Collected Survey</p>				
<p>Overall Doctor Rating</p>	<p>75%</p>				
<p>Willingness to Recommend</p>	<p>88%</p>				
<p>Follow Up on Test Results</p>	<p>90%</p>				
<p>Access to Care</p>	<p>62%</p>				
<p>Office Staff Courtesy and Respect</p>	<p>95%</p>				
<p>Doctor Communication</p>	<p>91%</p>				

Ratings Explained: What Patients Say:

A survey of patient experiences when visiting their doctor's office

[Return to Ratings](#)

This is the specific questions and rating methods used to create the patient experience survey:

Category	Questions That Make Up the Score	Top Box Scoring
Rating of the Doctor	Rating of the doctor on a scale from 0 to 10, where 0 is the worst doctor possible and 10 is the best doctor possible	% with score of 9 or 10
Willingness to Recommend	Would you recommend this doctor's office to your family and friends?	% patients who scored "Yes, definitely"
Follow up on Test Results	<ol style="list-style-type: none"> 1. During your most recent visit, did this doctor order a blood test, x-ray, or other test for you? (If yes,) 2. Did someone from this doctor's office follow up to give you those results? 	% patients who scored "Yes, definitely"
Doctor-Patient Communication	<ol style="list-style-type: none"> 1. Doctor explained things in a way that was easy to understand 2. Doctor listened carefully to patient/[respondent] 3. Doctor gave easy to understand instructions about taking care of health problems or concerns 4. Doctor knew important information about patient's/ medical history 5. Doctor respected patient's/[respondent's] comments 	Mean % patients who scored "Yes, definitely" for the 5 questions in this composite
Courteous and Helpful Office Staff	<ol style="list-style-type: none"> 1. Clerks and receptionists were helpful 2. Clerks and receptionists were courteous and respectful 	Mean % patients who scored "Yes, definitely" for the 2 questions in this composite
Getting Timely Appointments, Care, and Information	<ol style="list-style-type: none"> 1. Patient got appointment for urgent care as soon as needed [for the child] 2. Patient got appointment for non-urgent care as soon as needed 3. Patient got answer to medical question the same day he/she phoned doctor's office 4. Patient/[Respondent] got answer to medical question as soon as he/she needed when phoned doctor's office after hours 5. Patient saw doctor within 15 minutes of appointment time 	Mean % patients who scored "Always" for the 5 questions in this composite

Statewide Survey Design



- Voluntary
- Target population/practices:
 - Adult patients of primary care and specialty care practices.
 - Parents of children served by pediatric practices

Survey Instrument



- **Primary Care Adult:** CG-CAHPS Adult core with PCMH Items
- **Primary Care Child:** CG-CAHPS Child core with PCMH items
- **Specialist Adult:** CG-CAHPS core with specialist supplemental items to be determined with provider input

Sample Frame



- Practices will sample at the individual provider level.
- Sample sizes will be based on guidelines developed by AHRQ (45 **completed** surveys per physician)
- Public reporting will be at the practice level.

Survey Administration: 2 Approaches



- Health systems/practices with existing patient survey in place
 - Leverage existing surveys by working with vendors to replace/supplement existing surveys with common instrument for limited period.
- Practices without existing survey
 - DHA will competitively bid for a single vendor to administer the survey at preferred rate

Survey Costs



- Participating practices will be responsible for survey costs. DHA will support survey analysis for practice-level public reporting.
- Pending availability of funds, DHA may offer subsidies to defray costs up to a maximum per physician.
- Practices receiving any subsidy must:
 - Conform to survey guidelines
 - Agree to public reporting of survey results at practice level on DHA website.

Survey Analysis and Reporting



- Practices or vendors will submit survey results to the CAHPS Benchmarking Database following submission guidelines.
- Participating practices will receive practice-level survey results with statewide and national comparisons.
- Practice level survey data will be publicly reported on the DHA website.
- Work group established to define format and structure for public reporting.

Next Steps: What We Need from You



- **Today** - Complete green form identifying best person to contact within your organization for follow-up.
- **Post-Meeting** – Complete electronic survey that will be sent to organizational contacts to collect information on your current patient experience survey activities, what vendor/survey you use and the number of practices implementing.
- **Project Timeline**
 - July –September 2012 – in the field
 - Early 2013 – Publicly reporting at practice level