Evaluating Patient Experience in 2020
Agenda

Setting a Course for the Future

Feedback

New Opportunities for Obtaining Patient

Challenges

Care Experiences Importance and
Current ways of evaluating care experiences are not working. COVID-19 pandemic and shutdown amplified these concerns.
How did we get here?

What do we need for the future?
In 2001, IOM included patient-centeredness as a core component of quality care. Cross-selling the Quality Chasm, IOM defined patient-centeredness as "providing care that is respectful of and responsive to individual patient preferences, needs, and values, and ensuring that patient values guide all clinical decisions."
<table>
<thead>
<tr>
<th>Measure Category</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
<th>2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complaints, and Access</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1.5</td>
</tr>
<tr>
<td>Clinical Process Measures</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Outcome</td>
<td>3</td>
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Care experiences is core component of quality ratings.
CAHPS brought legitimacy to care experiences surveys

**PRINCIPLES FOR SURVEY DESIGN**

- Focus on aspects of care for which the patient is the best or only source of information
- Ask patients to report on only care they have experienced or only source of information
- Use explicit reference and/or can observe time, event, and the facility that is the focus of the clinician, organization, or timeframe
- Can be self-administered

**RIGOROUS DEVELOPMENT PROCESS**

- Literature reviews and environmental scans
- Focus groups with patients
- Stakeholders and other key input from healthcare providers
- Cognitive testing of survey questions and reporting labels
- Field testing

Developed for accountability and public reporting

https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/about-cahps/cahps-program-brief.pdf
Incorporating patient-centeredness results in PCMH evaluation.

We worked with CAHPS team to develop a survey specifically for Medical Homes.

Concerns about connection to quality
Lack of financial incentives
Resources for implementation
Survey length
Barriers to implementation

Distinction in Patient Experiences

We worked with CAHPS team to develop a survey specifically for Medical Homes.

Shared decision-making
Self management support
Behavioral health
Coordination
Information

PCMH supplement

Office Staff
Coordination
Communication
Access
Core

Provider-level coaching
Monitor trends
Identify areas for improvement
Practices use CAHPS for quality improvement

Practices use CAHPS for quality improvement

(Quigley et al 2015)
Today, rapid consumer ratings are commonplace. My wife and I were in town for our honeymoon and had an awful experience with another hotel in the area. This Hampton location saved our honeymoon. They were able to accommodate a last minute stay for five nights. Pretty disappointed. The staff was kind throughout the duration and things seemed relatively clean. However, we had multiple electrical issues. The staff was kind through the duration and things seemed relatively clean. However, we had multiple electrical issues. My wife and I were in town for our...
Most CAHPS surveys are completed by mail or telephone. Technology has changed since 1995 when CAHPS started.
CAHPS Response Rates are dropping, even in Medicare.
Half of commercial health plans include a net promoter question on their CAHPS survey.

Providers and plans are interested in customer relationship.
New tools focus add attention to relationship and support

Response options:

- Definitely, Mostly,
- Somewhat, Not at all

<table>
<thead>
<tr>
<th>Item</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Over time, my practice helps me stay healthy.</td>
</tr>
<tr>
<td>2</td>
<td>Over time, this practice helps me to meet my goals.</td>
</tr>
<tr>
<td>3</td>
<td>My community.</td>
</tr>
<tr>
<td>4</td>
<td>The care I get in this practice is informed by knowledge of</td>
</tr>
<tr>
<td>5</td>
<td>The care I get takes into account knowledge of my family.</td>
</tr>
<tr>
<td>6</td>
<td>My doctor or practice stands up for me.</td>
</tr>
<tr>
<td>7</td>
<td>My doctor and I have been through a lot together.</td>
</tr>
<tr>
<td>8</td>
<td>This doctor or practice knows me as a person.</td>
</tr>
<tr>
<td>9</td>
<td>My practice coordinates the care I get from multiple</td>
</tr>
<tr>
<td>10</td>
<td>That affect my health.</td>
</tr>
<tr>
<td>11</td>
<td>In caring for me, my doctor considers all of the factors.</td>
</tr>
<tr>
<td>12</td>
<td>This practice is able to provide most of my care.</td>
</tr>
<tr>
<td>13</td>
<td>The practice makes it easy for me to get care.</td>
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Experience:
For each item, choose the response that best fits your

Etz et al., A New Comprehensive Measure of Person-Centered Primary Care Measure (PCPCM)

CAHPS narrative elicitation protocol offers tools for gathering comments as complement to standardized surveys. Developed based on criteria: complete, balanced, meaningful, and representative comments as complement to standardized surveys.

When you think about the things that are most important to you, how do your provider and the staff in his or her office measure up?

Please describe how you and your provider relate to and interact with each other. You, and how it felt to you.

Please explain what happened, how it happened, and how it felt to you.

Please explain what you wish had gone differently. Please explain what you wish had gone differently, how it happened, and how it felt to you.

What are the most important things that you look for in a healthcare provider and the staff in his or her office?

What are the most important things that you look for in a healthcare provider and the staff in his or her office?
Telehealth: new opportunities and concerns for care experiences

Virtual video visits for established patients were preferred by patients and had similar ratings in “overall quality of the visit” compared to in person visits. (Donelan et al, AJMC, 2019)

Access to technology
Teaming
Responsiveness
Care access and coordination
Communication

Taskforce on Telehealth Policy: Leverage telehealth’s digital aspects to improve timeliness, targeting, and engagement in assessing patient experience

## CONTENT
- Telehealth
- Culture and trust
- Relationship
- Communication
- Access

## METHODS
- Interviews and focus groups
- Qualitative methods like targeted information on vulnerable groups
- Short item wording
- Mobile-device ready
- Actionable
- Timely

## GOALS
- Rapid-cycle improvement
- Accountability as a by-product
- Access to new topics that arise
- Culture and trust
- Relationship
- Communication
- Access

Care Experiences: Plan for the Future
Key Takeaways

- Simplicity tools suitable for electronic data collection
- Information on new care delivery approaches
- Timely, actionable data that support improvement and accountability
- Insight on experiences of diverse and vulnerable populations

Today’s approaches should provide clinicians and organizations should be accountable for improvement. Care experiences are a key component of quality, and health care clinicians and organizations should be accountable for improvement.