



## GLOSSARY

# Patient Experience of Care

April 2012

This glossary provides brief definitions for commonly used terms related to patient experience of care. Measurement and reporting of patient experience are different from other types of quality measures and therefore introduce terminology that may be unfamiliar to some. We ask your assistance in ongoing improvement to this glossary. If you encounter a term missing from this glossary, please submit your suggested addition to Dale Shaller at [d.shaller@comcast.net](mailto:d.shaller@comcast.net).

### Access

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A *domain* measured by the CAHPS surveys that refers to a patient's ability to get health care appointments, information, and care in a timely manner. For example, the Getting Timely Appointments, Care, and Information *composite* within the CG-CAHPS survey fits under the access *domain* and includes survey items about getting appointments as soon as they are needed, receiving timely answers to medical questions when calling the clinic, and wait time while at the clinic for an appointment.

### CAHPS

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The Consumer Assessment of Healthcare Providers and Systems program produces free, nonproprietary survey instruments designed to support standardized measurement of the experiences of patients and health plan enrollees with care in a variety of settings. They have been developed by prominent research organizations under the auspices of the U.S. Agency for Healthcare Research and Quality ([www.cahps.ahrq.gov](http://www.cahps.ahrq.gov)).

### CG-CAHPS Survey

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The CAHPS Clinician & Group survey asks patients about their experiences with physicians (or other providers) and their staff. Instruments are available for adults receiving primary or specialty care as well as children receiving primary care. A new version of CG-CAHPS is under development to assess patient experiences in a patient-centered medical home (PCMH) practice (see *PCMH survey*).

### About Aligning Forces for Quality

*Aligning Forces for Quality* (AF4Q) is the Robert Wood Johnson Foundation's signature effort to lift the overall quality of health care in targeted communities, as well as reduce racial and ethnic disparities and provide real models for national reform. The Foundation's commitment to improve health care in 16 AF4Q communities is the largest effort of its kind ever undertaken by a U.S. philanthropy. AF4Q asks the people who get care, give care and pay for care to work together to improve the quality and value of care delivered locally. The Center for Health Care Quality in the Department of Health Policy at George Washington University School of Public Health and Health Services serves as the national program office. Learn more about AF4Q at [www.forces4quality.org](http://www.forces4quality.org). Learn more about RWJF's efforts to improve quality and equality of care at [www.rwjf.org/qualityequality/af4q/](http://www.rwjf.org/qualityequality/af4q/).

### About the Author

The Shaller Consulting Group provides technical assistance to *Aligning Forces for Quality* by helping regional Alliances support patient experience measurement and improvement.

## Cognitive Testing

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Cognitive testing uses one-on-one personal interviews to explore respondents' comprehension of the questions, their ability to answer the questions, and the adequacy of the response choices. Testing also helps identify words that can be used to describe health care providers accurately and consistently across a range of consumers and explores whether key words and concepts work equally well in both English and Spanish.

## Completed Survey

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Any survey in which the respondent answers at least half of the key question items.

## Composite

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A set of survey items measuring similar topics that are grouped together to produce a score that is easier for consumers to interpret than individual survey items and often more reliable (see *reliability*). The *CG-CAHPS survey* allows for three composite measure groupings: Getting Timely Appointments, Care, and Information; How Well Doctors Communicate with Patients; and Helpful, Courteous, and Respectful Office Staff.

## Continuous Sampling

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A method of sampling patients to be surveyed on a near real-time basis. For example, practices may compile a list of all patients who have had a visit on a monthly, weekly, or even daily basis and regularly send this information to their survey vendor. The vendor then uses these lists of patient visits as the *sample frame* from which to draw samples of patients to survey. In continuous sampling, the sample frame becomes a rolling file in which patients typically remain eligible to be surveyed as long as their visit was within the last three months.

## Core Question Set

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A set of required questions consistent across all versions of the *CG-CAHPS survey* (including the *PCMH survey*) that lends itself to comparisons of validated *composite* measures across entities.

## Data Collection Mode

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The method used to collect survey responses. Modes include *mail*, *telephone*, *IVR (interactive voice response)*, *web completion*, and *email administration with web completion*.

## Domain

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A major thematic area covered in the CAHPS surveys, which include access, interpersonal care, and administrative services. Each type of CAHPS survey has one or more *composite* groupings that fit within these domains.

## Email Administration with Web Completion

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A survey administration method that uses an email invitation with an embedded URL to link the sampled survey respondent to a web site for online survey completion.

## Field Period

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The period during which data are collected. The field period begins when surveys are first administered (e.g., when surveys are first mailed out or phone calls are first attempted for telephone administration) and continues until data collection stops. Field periods can be defined either by time period (e.g., July 1–Sept. 30) or by a specific milestone (e.g., collect data until 300 survey responses are received).

## Interactive Voice Response (IVR)

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A survey administration method that relies on either voice-activated or touch-tone telephone responses to collect survey data from the sample of respondents.

## Legacy Questions

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Long-standing survey questions used by an organization that have allowed for trending of results over time.

## Look-Back Period (see Measurement Period)

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A span of time prior to the *field period* during which patient visits took place and are eligible for survey measurement. With the *visit survey*, for example, a three-month look-back period is typically used (i.e., all patients who had a visit in the last three months are included in the *sample frame*). The look-back period does not apply to surveys that are administered using *continuous sampling*.

## Mail Mode

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A survey administration method that uses paper surveys, preferably formatted according to CAHPS specifications with a cover letter, for reaching the sample of respondents. Standard mail protocol recommended by the CAHPS Consortium begins with an initial mailing, followed by a postcard reminder 10 days after the initial mailing, and then a second mailing three to four weeks after the first mailing to those who have not responded.

## Measurement Period

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A broad term used across performance measurement to designate the time period during which performance will be examined. In the case of patient experience, the measurement period refers to a specific period in time in which patient visits take place and are eligible to be examined through the use of patient surveys. For survey measurement, the measurement period is sometimes referred to as the *look-back period* because often the measurement period pertains to patient visits that took place during a defined period in the past.

## NQF Endorsement

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Endorsement of a performance measure by the National Quality Forum ([www.qualityforum.org](http://www.qualityforum.org)). NQF endorsed the CG-CAHPS core survey items in July 2007.

## PCMH Survey

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A new CAHPS survey instrument to evaluate the patient-centered medical home model for its effectiveness, efficiency, and patient-centeredness of care. The survey contains the same *core questions* found in the *CG-CAHPS survey* and adds CAHPS supplemental items as well as new items that together assess several important aspects of medical home care.

## Psychometric Testing

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Analyses of data collected using the questionnaire to examine certain properties such as response rates, missing data, completion rates, internal reliability, and site-level reliability.

## Reference Period

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The time period the respondent is being asked to consider when answering the survey question. Respondents may be asked to think about the past 12 months, six months (for Medicaid enrollees), or only about a single visit when answering a question about their experience.

## Reliability

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The extent to which a survey item will produce consistent results.

## Response Rate

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The total number of *survey completes* divided by the total number of patients selected to be surveyed.

## Response Scale

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The set of response choices for each survey question item which measure the frequency of various experiences. The original CG-CAHPS *12-month survey* is available with either a four-point scale (Never/Sometimes/Usually/Always) or a six-point scale (adds Almost Never and Almost Always to the four-point scale). For the *visit survey*, response options for items referring to the most recent visit are an expanded Yes/No scale (Yes, definitely/Yes, somewhat/No).

## Sample

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The set of patients to be surveyed, selected randomly from the *survey frame* and in enough quantity to statistically approximate the experience of all patients eligible to be surveyed.

## Sample Frame

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The complete list of all patients who are eligible to be surveyed based on specifications, from which the *sample* will be drawn.

## Supplemental Survey Items

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A variety of optional questions that can be added to the *core question set* to address specific topics of interest and construct a customized *CG-CAHPS survey*.

## Telephone Mode

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A survey administration method that relies on telephone contact to reach the sample of respondents. Telephone administration often uses computerized assisted telephone interviewing (CATI) to connect a live operator to the sampled respondent. CAHPS protocols suggest at least six attempts be made to connect with the sample of respondents.

## Top-Box Score

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The percentage of responses in the most positive response category. For example, if a report gives the proportion of respondents who replied “always” to the survey item asking how often the doctor carefully listened to them (with “always” representing the most positive answer possible), this would be the top-box score for that survey item.

## Twelve-Month Survey

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The original CG-CAHPS survey version which asks patients about their experience during a *reference period* of the last 12 months.

## Validity

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The extent to which a survey item measures what is intended to be measured.

## Vendor

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An organization with expertise in fielding patient surveys that handles all aspects of survey data collection on behalf of its health care organization client.

## Visit Survey

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The CG-CAHPS survey was developed initially to ask patients about their experiences in the last 12 months. Based on feedback from users of the surveys, the CAHPS Team developed a questionnaire that measures the experiences of patients during a single visit rather than over a period of time. The visit survey frames questions about communication and office staff interactions in terms of the most recent visit and questions about access over the last 12 months.

## Web Completion

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A survey return method that allows the respondent to complete the survey online. Web returns can be used as an option with both mail and email administration methods.

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