



TOOL/UTILITY

Patient Experience: Messaging for Providers

April 2012

Building Awareness and Support

[Name of Market/Alliance] is undertaking a community-wide effort to measure and publicly report the experience patients have in their local doctor's offices. This survey initiative is supported by [Name of any supporting stakeholders/organizations endorsing the effort].

Patient experience will be measured using the [CAHPS Clinician & Group Survey](#) (CG-CAHPS), a free, standardized survey available through the CAHPS program, which is funded and administered by the U.S. Agency for Healthcare Research and Quality. CAHPS surveys are the most widely used surveys for assessing patient experience of care in the United States and are endorsed by the [National Quality Forum](#).

Patients are the best source of information about their experience in the doctor's office, and using patient surveys allows us to measure whether care is patient-centered, one of six essential aims for achieving high-quality health care, according to the Institute of Medicine.

While ensuring a positive patient experience is an important goal in itself, research has shown that patient experience is related to other aspects of health care quality, as well as to the business vitality of a medical practice. A positive patient experience is linked to patients being more likely to follow their doctor's advice and to better patient outcomes. It also has been linked to financial performance, increased patient loyalty, improved employee satisfaction, and a reduction in malpractice suits. [See [Good for Health, Good for Business: The Case for Measuring Patient Experience of Care](#) for specific citations.]

The community-wide measurement and reporting effort will allow medical practices to compare their performance on patient experience to local market peers as well as to national benchmarks provided through the [National CAHPS Benchmarking Database](#).

[Name of Market/Alliance] believes strongly in the maxim: "You cannot improve what you do not measure." The CG-CAHPS survey was developed explicitly to provide actionable information for improvement. Resources exist to help medical practices make systematic changes to improve care, such as the [CAHPS Improvement Guide](#).

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. Learn more about RWJF's efforts to improve quality and equality of care at 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.

Evidence has shown that patient experience can be improved through concerted and systematic efforts. A recent [case study](#) describes the road to improvement at three medical practices.

Discussion of Implementation Strategy

[Note: In general, Alliances will choose one of two strategies to implement community-wide measurement of patient experience of care. Please refer to [this brief](#) for a more in-depth discussion of each approach. Select messaging based on the implementation approach chosen.]

Leveraged Approach	Centralized Approach
[Name of Market/Alliance] will implement community-wide measurement of patient experience by leveraging surveying activity already taking place within practices. This approach allows practices to retain some or all of their current survey questions for purposes of trending while adding CG-CAHPS questions for comparability. A standardized protocol will be developed and monitored by [Name of Market/Alliance] for sampling and data collection to ensure survey results are comparable. As practices can build collection of standard CG-CAHPS items into their existing survey activities without the need to finance a separate survey, very few additional costs are expected. Unlike relying on health plan data to establish the patient population to be measured, all of a practice's patients will be eligible to be surveyed, providing a more representative picture of the experience of patients, regardless of payer. [Name of Market/Alliance] wants to engage providers in developing this measurement activity and believes the resulting data will be most useful if they are collected as part of surveying activities directed by the practice.	[Name of Market/Alliance] will implement community-wide measurement of patient experience using a single vendor that will administer the survey communitywide. Use of a single, centralized vendor will guarantee standardization of sampling and data collection protocol, which will ensure comparability of results among all practices being measured. A single, coordinated survey of patient experience communitywide will help to reduce duplicative surveying and consolidate resources toward one clear source of patient experience data. Practices that were not already measuring patient experience and may not have had the resources to conduct survey activities on their own now have the opportunity to receive information about their performance for this quality indicator. A centralized approach reduces burden on individual practices to manage this surveying activity.

Prior to Public Reporting of Results

[Name of Market/Alliance] will publicly report patient experience scores based on patient survey results at the [physician/practice/medical group] level on [Date]. Measures to be reported include...[could be specific individual measures or composites]. Results will be published via [website address/other source].

[If topbox scores will be used:] Results are reported as topbox scores, which is the percentage of responses in the most positive response category. For example, the proportion of respondents who replied “always” to the survey item that asks how often the doctor carefully listened to them (with “always” representing the most positive answer possible) is the topbox score for that survey item.

Patient experience survey results are being shared with providers before release of the public report so that the data can be reviewed and any concerns can be brought to the attention of [Name of Market/Alliance]. Any response or question about the results should be directed to [Name] by [Date].

Results are being shared in advance to give practices time to prepare any messages about their results they may like to communicate to the public, including their patients. Practices may choose to craft messages that address:

- The practice's support for greater transparency in health care through measurement activities such as the patient experience of care survey. Practices should highlight if they were a leader in either developing or piloting this survey activity.
- The practice's commitment to listening to its patients in order to improve.
- An emphasis on measures where the practice has performed well and a statement affirming the practice's dedication to patient-centered care. An indication of where the practice will next focus its energies to make further improvements.
- An acknowledgement of measures where the practice has performed poorly and a statement on how the practice intends to address this area for improvement. In the case of poor results, a practice also may want to focus attention on other indicators of health care quality where efforts have resulted in measurable improvement in order to demonstrate its commitment to the improvement process.

The patient experience survey results represent an important source of information for practices about their performance in delivering patient-centered care and can be used to identify specific areas for improvement.

Resources exist that can assist your practice in developing an improvement strategy for patient experience, including:

- The [CAHPS Improvement Guide](#), offering a comprehensive presentation of improving the patient experience in a searchable, web-based publication. Plus other CAHPS improvement [resources](#), such as project summaries, reports, and a library of audio and video resources.
- The [Stoeckle Center for Primary Care Innovation at Massachusetts General Hospital](#), providing references for numerous tools and curricula, including a list of resources categorized by survey composite topics.
- A catalog of resources on improving the patient experience available from the [California Quality Collaborative](#), including the [CQC Guide to Improving the Patient Experience](#).