Lecture 4: Satisfaction, Responsiveness and Patient Experience

Patient Experience: Main Challenges

1. What is of interest? (Satisfaction, Responsiveness or Experience)
2. Who are we interested in? (Population, patients or general public?)
3. Is there data?
4. Is data comparable across countries?
5. How do we adjust for expectations?
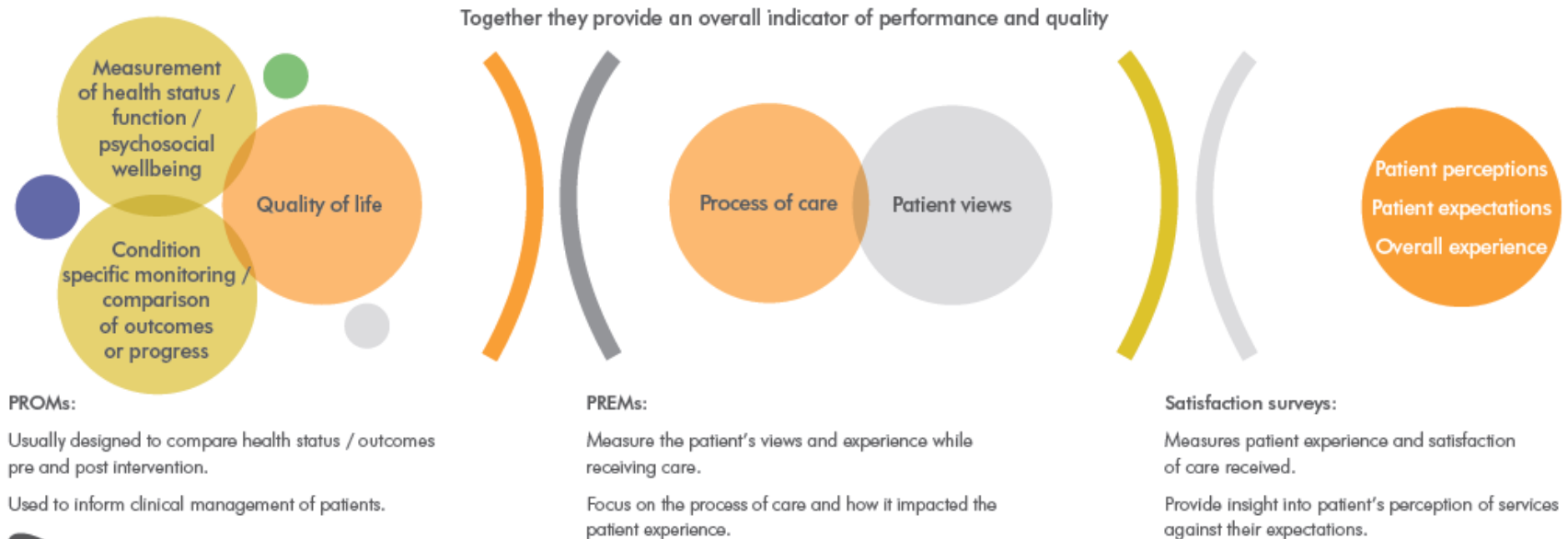
What do we want to measure?

- Satisfaction?
  - Perceptions of care received/available
- Responsiveness?

  How well the health system meets the legitimate expectations of the population for the non-health enhancing aspects of the health system, includes

  (Respect for Persons – respect for: dignity, individual autonomy and confidentiality & Client Orientation – right to prompt attention to health needs, basic amenities of health services, right to access and right to choice)

- Patient Experience?
  - Focuses on patient views of processes of care received

A typology of metrics

Figure 5: Differentiating between PROMs, PREMs and satisfaction measures

Together they provide an overall indicator of performance and quality

PROMs:

Usually designed to compare health status / outcomes pre and post intervention.

Used to inform clinical management of patients.

PREMs:

Measure the patient's views and experience while receiving care.

Focus on the process of care and how it impacted the patient experience.

Satisfaction surveys:

Measures patient experience and satisfaction of care received.

Provide insight into patient's perception of services against their expectations.

10

[1] http://www.england.nhs.uk/2013/07/30/nhsfft/

Responsiveness ≠ responsiveness even within WHO

Dimension	WHR 2000: grouping and weighing	Multi-Country Survey 2000/2001	World Health Survey 2002
	Respect for persons		
Dignity: Respectful treatment and communication	16.7%	4 questions	2 questions
Confidentiality of personal information	16.7%	2 questions	2 questions
Autonomy: Involvement in decisions	16.7%	3 questions	2 questions
Clarity of **Communication**	Not included	4 questions	2 questions
	Client-orientation		
Prompt attention: Convenient travel and short waiting times	20%	2 questions	2 questions
Quality of basic amenities: Surroundings	15%	3 questions	2 questions
Access to family and community support: Contact with outside world and maintenance of regular activities	10%	3 questions	2 questions
Choice of health care provider	5%	3 questions	1 question

... but: Responsiveness ≠ responsiveness even within WHO

Dimension	WHR 2000: grouping and weighing	Multi-Country Survey 2000/2001	World Health Survey 2002
	Respect for persons		
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Prompt attention: Convenient travel and short waiting times	20%		2 questions
Quality of basic amenities: Surroundings	15%	questions	2 questions
Access to family and community support: Contact with outside world and maintenance of regular activities	10%	3 questions	2 questions
Choice of health care provider	5%	3 questions	1 question

… and no updates of these surveys

Responsiveness level by degree of expectations in EURO
Percent reporting 'Very good' or 'Good' responsiveness

The higher the expectations, the lower the responsiveness ...
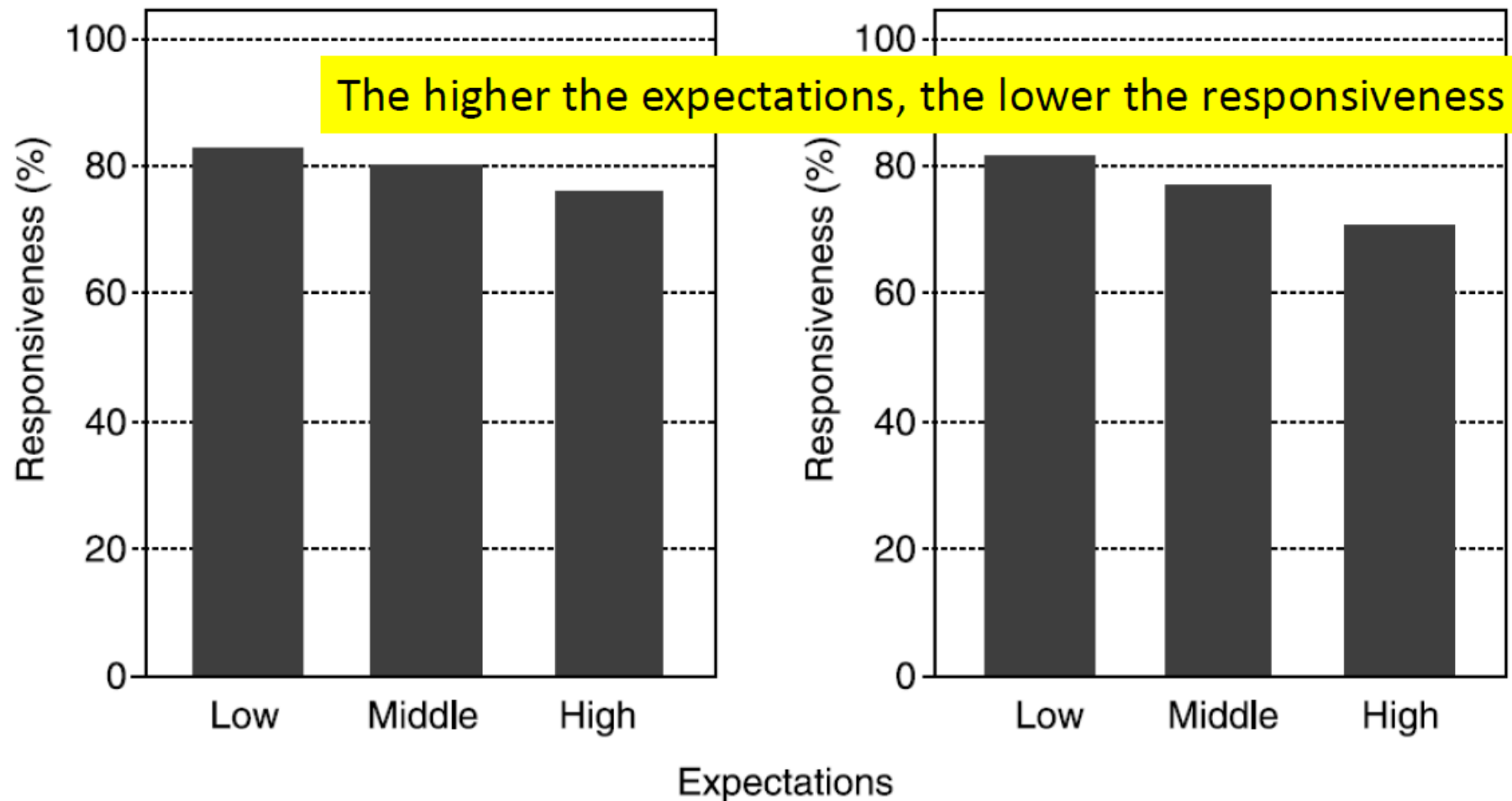
Figure 8.1 Relationship between overall responsiveness and population expectations for 29 countries of the WHO European Region

Source: Üstün et al. 2003 (World Health Survey 2002).

Choice by degree of expectations in EURO
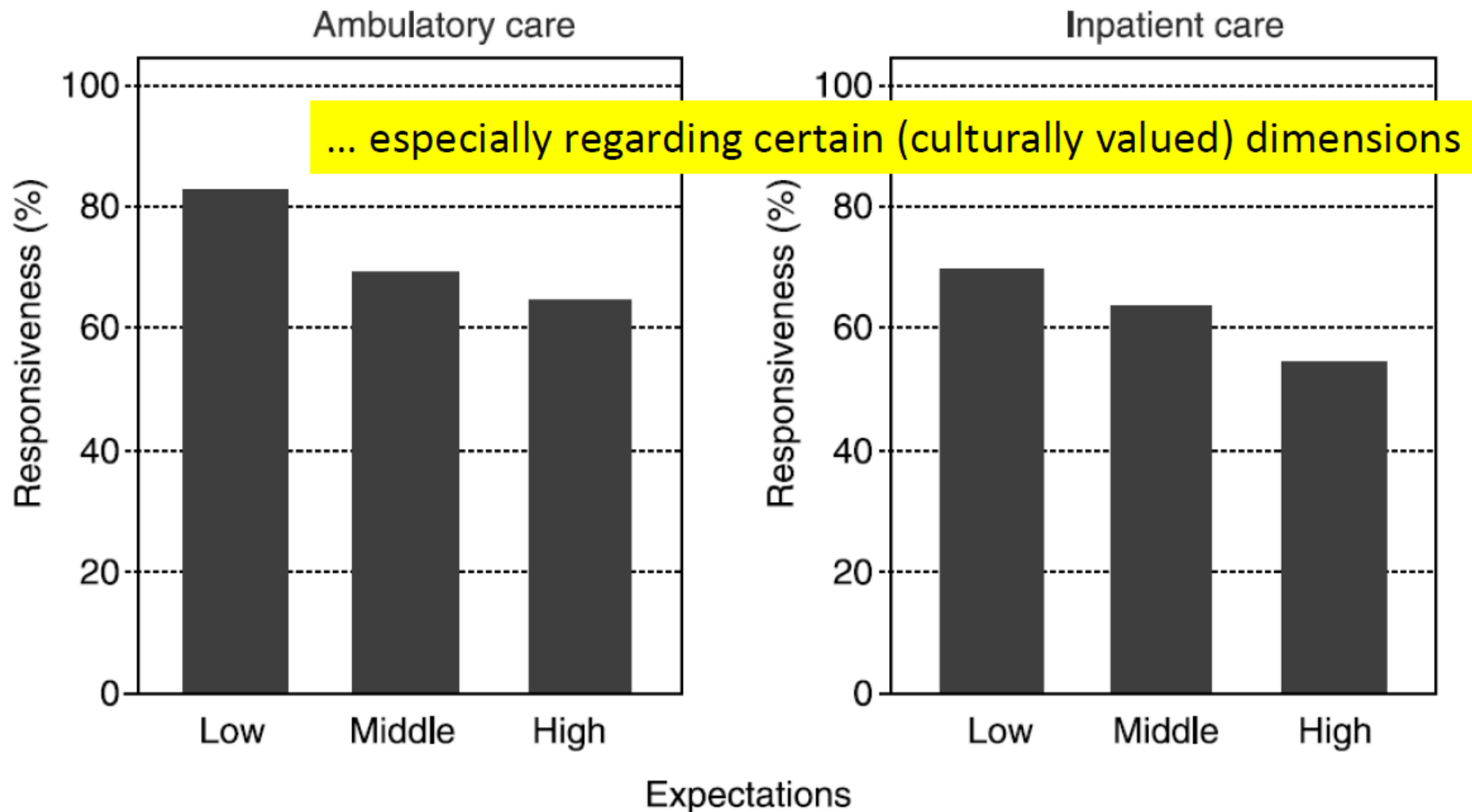### Percent reporting 'Very good' or 'Good' responsiveness

... especially regarding certain (culturally valued) dimensions

Figure 8.2 Relationship between responsiveness for choice of health care provider and population expectations for 29 countries of the WHO European Region

Source: Üstün et al. 2003 (World Health Survey 2002).

Domains of Responsiveness: Vignettes

Respectful treatment
'[Anya] took her baby for a vaccination. The nurse said hello but did not ask for [Anya's] or the baby's name. The nurse also examined [Anya] and made her remove her shirt in the waiting room.

Q1: How would you rate her experience of being greeted and talked to respectfully?
Q2; How would you rate the way her privacy was respected during physical examinations and treatments?'

Communication
'[Rose] cannot write or read. She went to the doctor because she was feeling dizzy. The doctor didn't have time to answer her questions or to explain anything. He sent her away with a piece of paper without telling her what it said.

Q1: How would you rate her experience of how clearly health care providers explained things to her?
Q2: How would you rate her experience of getting enough time to ask questions about her health problem of treatment?'

Confidentiality
'[Simon] was speaking to his doctor about an embarrassing problem. There was a friend and a neighbour of his in the crowded waiting room and because of the noise the doctor had to shout when telling [Simon] the treatment he needed.

Q1: How would you rate the way the health services ensured [Simon] could talk privately to health care providers?
Q2: How would you rate the way [Simon's] personal information was kept confidential?'

Quality of basic amenities
'[Wing] had his own room in the hospital and shared a bathroom with two others. The room and bathroom were cleaned frequently and had fresh air.

Q1: How would you rate the cleanliness of the rooms inside the facility, including toilets?
Q2: How would you rate the amount of space [Wing] had?'

†The table provide examples only and not an exhaustive list of possible vignettes for each domain. The response categories that were available to respondents were 'very good', 'good', 'moderate', 'bad' and 'very bad'.

Rice et al. (2012)

Rank	Country (not-adjusted)	Country (adjusted)
1	Austria	Denmark
2	Denmark	Finland
3	Sweden	Sweden
4	Czech Republic	Belgium
5	United Kingdom	France
6	Greece	United Kingdom
7	Finland	Netherlands
8	Hungary	Uruguay
9	France	Czech Republic
10	Ireland	Estonia
11	Belgium	Austria
12	UAE	Ireland
13	Uruguay	Greece
14	Latvia	Spain
15	Bosnia	Croatia
16	Estonia	Mauritius
17	Netherlands	UAE
18	Croatia	Germany
19	Germany	Slovenia
20	Spain	Latvia
21	Slovenia	Portugal
22	Slovakia	Hungary
23	Italy	Mexico
24	Mauritius	Bosnia
25	Portugal	Malaysia
26	Malaysia	Slovakia
27	Mexico	Italy

Adjustment for 'Dignity' domain using vignette analysis

Adapted from: Rice et al (2012) **Vignettes and health systems responsiveness in cross-country comparative analyses** *Journal of the Royal Statistical Society Series A*

EXHIBIT 4D. PATIENT-CENTERED CARE MEASURES

	Source	Raw Scores (Percent)											Ranking Scores										
		AUS	CAN	FRA	GER	NETH	NZ	NOR	SWE	SWIZ	UK	US	AUS	CAN	FRA	GER	NETH	NZ	NOR	SWE	SWIZ	UK	US
OVERALL BENCHMARK RANKING													5	8	10	7	3	6	11	9	2	1	4
Communication																							
Patients reporting always or often getting telephone answer from doctor the same day (base: have a regular doctor and tried to contact by phone)	2013	79	67	63	90	84	80	78	84	82	75	73	6	10	11	1	2	5	7	2	4	8	9
Doctor always or often explains things in a way that is easy to understand	2013	88	88	88	94	90	91	88	86	88	94	88	5	5	5	1	4	3	5	11	5	1	5
Received clear instructions about symptoms to watch for and when to seek further care after surgery or when leaving the hospital (base: those who had surgery or been hospitalized)	2011	82	83	65	70	77	80	69	70	85	88	92	5	4	11	8	7	6	10	8	3	2	1
Continuity and Feedback																							
With same doctor 5 years or more	2011	64	64	80	72	80	69	70	47	65	59	57	7	7	1	3	1	5	4	11	6	9	10
Doctor routinely receives and reviews data on patient satisfaction and experiences with care	2012	56	15	1	35	39	51	7	90	15	84	60	4	8	11	7	6	5	10	1	8	2	3
Regular doctor always or often knows important information about patient's medical history	2011	84	80	88	91	79	89	76	66	96	94	84	6	8	5	3	9	4	10	11	1	2	6
Engagement and Patient Preferences																							
Specialist always or often involves patient as much as they want in decisions about care and treatment (base: saw or needed to see specialist in past 2 years)	2011	77	77	61	63	79	75	65	67	85	87	71	4	4	11	10	3	6	9	8	2	1	7
Doctor or health care professional discussed patient's main goals or priorities in caring for condition (base: has chronic condition)	2011	63	67	42	59	67	62	51	36	81	78	76	6	4	10	8	4	7	9	11	1	2	3
Specialist always or often tells you about treatment choices (base: saw or needed to see specialist in past 2 years)	2011	72	72	49	70	82	78	52	61	92	85	80	6	6	11	8	3	5	10	9	1	2	4
Regular doctor always or often encouraged you to ask questions	2011	71	62	55	66	59	70	33	44	79	80	75	4	7	9	6	8	5	11	10	2	1	3
Doctor or health care professional gives clear instructions about symptoms, when to seek further care (base: has chronic condition)	2011	66	66	56	64	64	63	44	49	84	80	75	4	4	9	6	6	8	11	10	1	2	3

<mark>Examples of questions from the Picker PPE-15</mark> survey showing derivation of problem scores1

When you had important questions to ask a doctor, did you get answers you could understand?
 1. ☐ Yes, always
 2. ・ Yes, sometimes
 3. ・ No
 4. ☐ I had no need to ask
Sometimes in hospital one doctor or nurse will say one thing and another will say something quite different.
Did this happen to you?
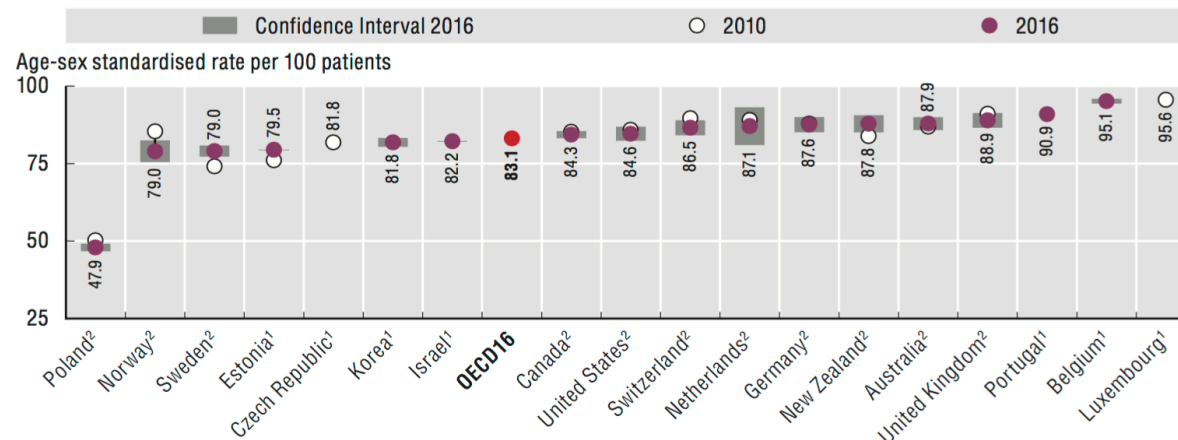 1. ・ Yes, often
 2. ・ Yes, sometimes
 3. ☐ No
Did doctors talk in front of you as if you weren't there?
 1. ・ Yes, often
 2. ・ Yes, sometimes
 3. ☐ No
Did you want to be more involved in decisions made about your care and treatment?
 1. ・ Yes, often
 2. ・ Yes, sometimes
 3. ☐ No

6.3. Doctor involving patient in decisions about care and treatment, 2010 and 2016 (or nearest year)

Confidence Interval 2016 | ○ 2010 | ● 2016

Age-sex standardised rate per 100 patients

Values (2016): Poland² 47.9, Norway² 79.0, Sweden² 79.5, Estonia¹ 81.8, Czech Republic¹, Korea¹ 81.8, Israel¹ 82.2, **OECD16 83.1**, Canada² 84.3, United States² 84.6, Switzerland² 86.5, Netherlands² 87.1, Germany² 87.6, New Zealand² 87.8, Australia² 87.9, United Kingdom² 88.9, Portugal¹ 90.9, Belgium¹ 95.1, Luxembourg¹ 95.6

Note: 95% confidence intervals have been calculated for all countries, represented by grey areas.
1. National sources.
2. Data refer to patient experiences with regular doctor.
Source: Commonwealth Fund International Health Policy Survey 2016 and other national sources.

StatLink ⬛ http://dx.doi.org/10.1787/888933603393

6.1. Doctor spending enough time with patient in consultation, 2010 and 2016 (or nearest year)
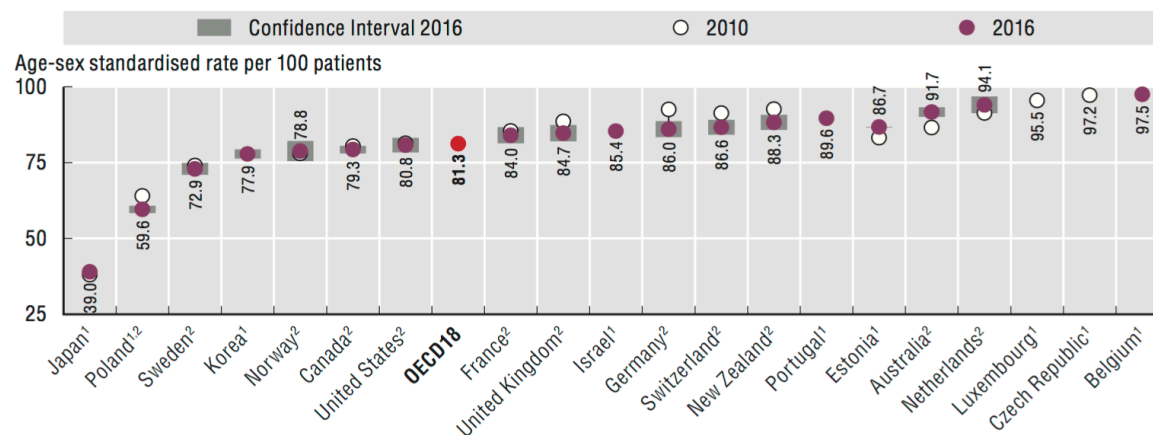
Confidence Interval 2016 | ○ 2010 | ● 2016

Age-sex standardised rate per 100 patients

Values (2016): Japan¹ 39.0, Poland¹² 59.6, Sweden² 72.9, Korea¹ 77.9, Norway² 78.8, Canada² 79.3, United States² 80.8, **OECD18 81.3**, France² 84.0, United Kingdom² 84.7, Israel¹ 85.4, Germany² 86.0, Switzerland² 86.6, New Zealand² 88.3, Portugal¹ 89.6, Estonia¹ 86.7, Australia² 91.7, Netherlands² 94.1, Luxembourg¹ 95.5, Czech Republic¹ 97.2, Belgium¹ 97.5

Note: 95% confidence intervals have been calculated for all countries, represented by grey areas.
1. National sources.
2. Data refer to patient experiences with regular doctor.
Source: Commonwealth Fund International Health Policy Survey 2016 and other national sources.

StatLink ⬛ http://dx.doi.org/10.1787/888933603355

Which of the following statements comes closest to expressing your overall view of the health care system in this country? (Commonwealth Fund, 2010)

1. On the whole, the system works pretty well and only minor changes are necessary to make it work better
2. There are some good things in our health care system but fundamental changes are needed to make it work better
3. Our health care system has so much wrong with it that we need to completely rebuild it
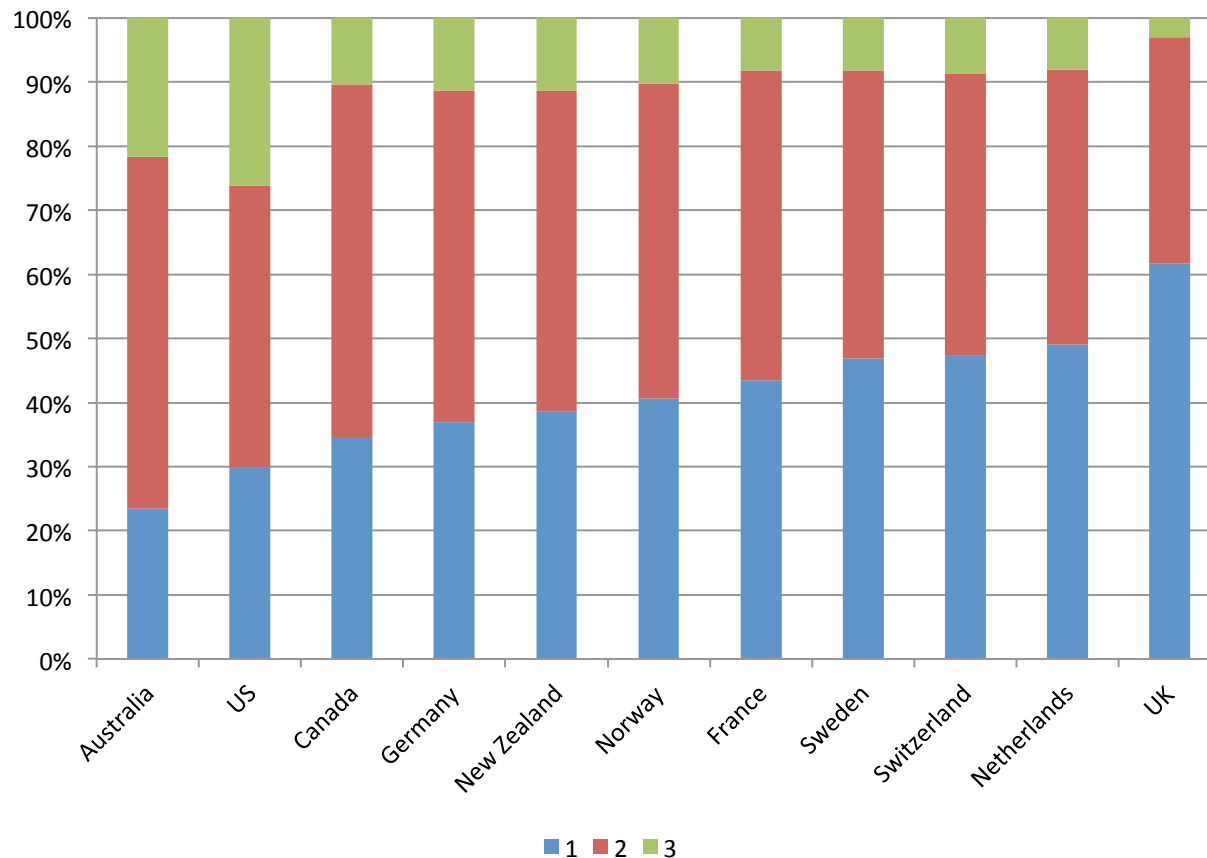
Perceptions are not always consistent across different areas

		Australia	Canada	France	Germany	Netherlands	New Zealand	Norway	Sweden	Switzerland	UK	US
Overall opinion	On the whole, the system works pretty well and only minor changes are necessary to make it work better (Option 1)	23.23	34.31	43.22	36.77	48.53	38.36	40.14	45.88	46.63	61.25	28.94
	There are some good things in our health care system but fundamental changes are needed to make it work better (Option 2)	54.38	54.42	48.22	51.56	42.55	49.78	48.59	43.9	43.5	35.09	42.74
	Our health care system has so much wrong with it that we need to completely rebuild it (Option 3)	21.41	10.29	8.12	11.35	7.94	11.31	10.2	7.98	8.59	3	25.4
	Not sure	0.98	0.82	0.36	0.31	0.44	0.43	0.78	2.24	1.28	0.66	2.39
	Decline to answer	N/A	0.16	0.07	N/A	0.54	0.11	0.29	N/A	N/A	N/A	0.53
How confident are you that you would be able to get affordable care?	Very confident	15.62	23.57	14.85	13.83	19.47	24.48	28.23	30.62	21.78	33.61	26.78
	Confident	50.74	43.54	59.02	55.54	60.4	50.82	46.12	42.52	56.53	58.78	36
	Not very confident	25.57	23.54	22.49	26.93	16.5	20.57	17.5	21.61	19.17	7.02	23.34
	Not at all confident	8.08	9.36	3.64	3.7	3.63	4.13	8.15	5.25	2.53	0.6	13.89
How confident are you that you would be able to get effective treatment?	Very confident	22.33	23.4	22.28	10.49	23.71	31.39	19	18.77	33.01	31.57	34.74
	Confident	54.1	52.57	64.8	72.82	63.67	51.95	52.89	47.75	56.61	62.4	39.54
	Not very confident	18.38	19.7	11.32	14.59	11.64	14.29	20.18	25.97	8.52	5.45	16.56
	Not at all confident	5.19	4.34	1.6	2.1	0.99	2.38	7.93	7.51	1.87	0.59	9.16
Regular doctor rating	Excellent	44	39.96	26.38	13.64	25.35	45.22	30.79	22.16	28.88	28.88	46.82
	Very good	36	36	43.55	31.79	29.72	38.7	36.38	31.32	43.95	50.83	32.34
	Good	15.08	16.53	23.95	49.37	38.59	12.37	23.04	31.85	24.19	18.12	14.68
	Fair	4.3	5.65	5.44	4.5	5.3	2.47	7.1	11.21	2.71	1.66	4.67
	Poor	0.83	2.15	0.67	0.7	1.04	1.24	2.69	3.45	0.27	0.52	1.49

Variation in Satisfaction by confidence in other health system goals – Commonwealth Fund data
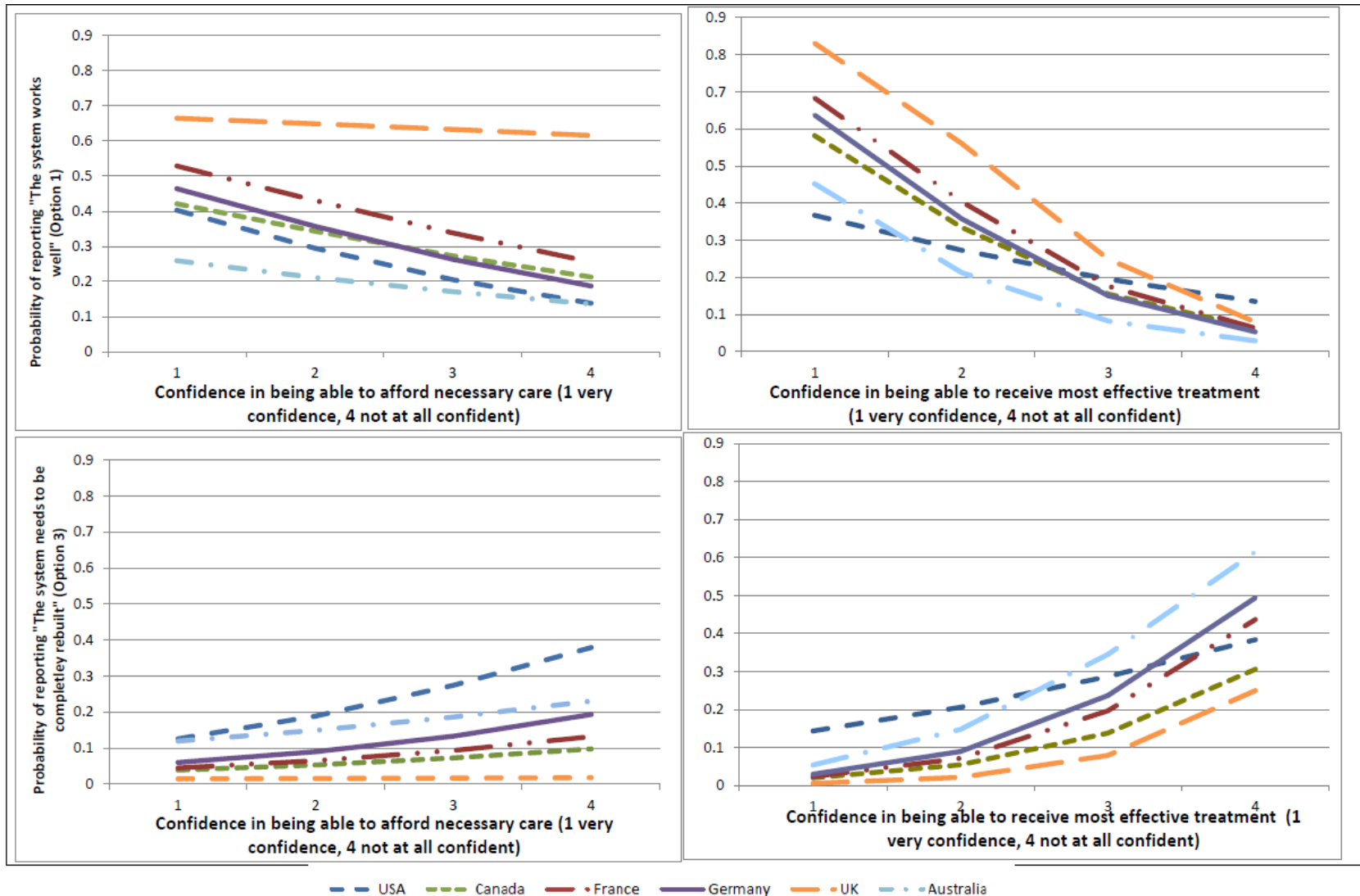
Do experiences explain satisfaction?

- Do patient experiences explain health system satisfaction?
  - Bleich et al (2009) – using WHS – find they explain 10.4% of variation around the concept of satisfaction
  - Papanicolas et al. (forthcoming) – using Commonwealth Fund data – find they explain around 5-1 3% of variation around the concept of satisfaction together with socio-demographic variables.
- Do patient experiences explain satisfaction with more specific areas of the health services?
  - Papanicolas et al. (2014) – using Commonwealth Fund data – find they explain around 13-23% of variation around the concept of satisfaction of GPs together with socio-demographic variables.

Experiences	USA O A E GP	France O A E GP	Germany O A E GP	Canada O A E GP	UK O A E GP	Australia O A E GP	Tot
Waiting for appointment							17
Received conflicting information from providers							13
Waiting a long time for diagnosis							12
Received duplicate tests							10
Doctor allow opportunity for questions*							10
Test not available							9
Doctor knows patient's medical history*							8
Doctor spends enough time with patient*							8
Doctor involves patients in decision making*							8
Skipped needed care due to cost							7
Skipped prescriptions due to cost							7
Believe medical error occurred							6
Skipped medical test due to cost							5
Doctor explains things in easy to understand manner*							5
Access issues due travel difficulties							0
Total number of significant experiences for each perception	2 7 7 9	4 3 3 4	3 3 3 4	5 8 6 8	4 2 5 6	4 9 7 9	

Patient reported-experience as a quality metric

- Data available mostly for:
  - Inpatient care
  - Care by general practitioners
  - US rolling out to other facilities (including home health care, dialysis centers, hospices, and outpatient or ambulatory care)

- What are the concerns?
  - Can patients evaluate quality?
  - What do we adjust for?
  - Is there a ceiling?

- Encourage "bad medicine?"
  - Does it lead providers to focus on wrong priorities?
    - Antibiotics for viral syndromes?
    - Potential for increased opioid prescriptions for pain?

- Is there a link between patient-reported experience and quality?

Jha, NEJM, 2008. Sacks, JAMA Surg. 2015.

OVERALL RATING OF HOSPITAL

Please answer the following questions about your stay at the hospital named on the cover letter. Do not include any other hospital stays in your answers.

21. **Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?**

☐ 0   Worst hospital possible
☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7
☐ 8
☐ 9
☐ 10   Best hospital possible

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68. Overall... (**Please circle a number**)

I had a very
poor experience

I had a very good
experience

0   1   2   3   4   5   6   7   8   9   10

Avoid Unintended Consequences

13. During this hospital stay, how often was your pain well controlled?

¹☐ Never
²☐ Sometimes
³☐ Usually
⁴☐ Always

14. During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?

¹☐ Never
²☐ Sometimes
³☐ Usually
⁴☐ Always

Example: HCAHPS – Pain

Differences between black and white hospital patients in patient experience, adjusted by patients' characteristics, 2009–10.
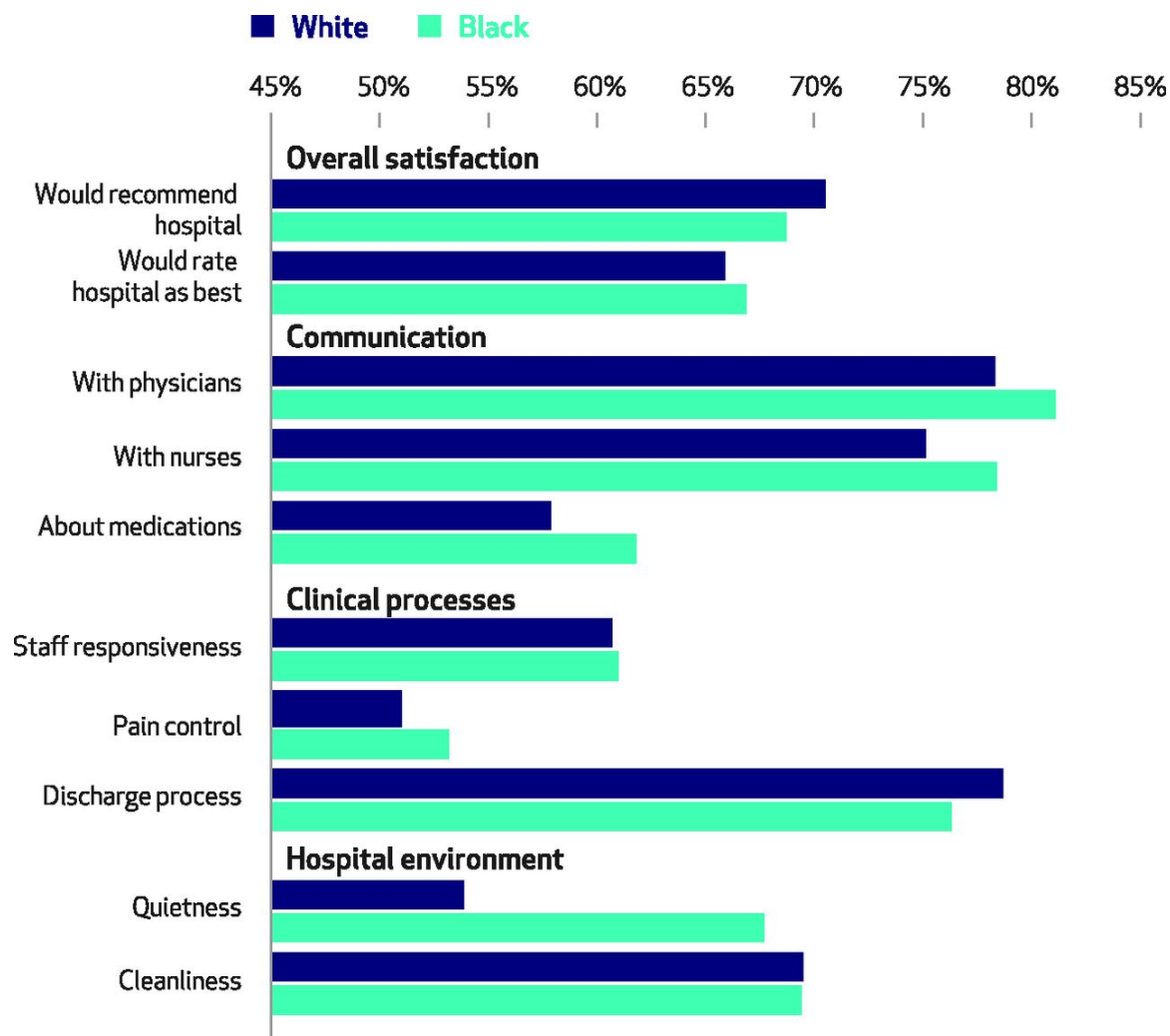
José F. Figueroa et al. Health Aff 2016;35:1391-1398

HealthAffairs

Patient satisfaction with care

- Increasingly measured and incentivized
- No consensus regarding its legitimacy in quality assessment
  - Mixed evidence on its association with quality
    - Some studies showing no correlation with quality while other showing a positive association (quality measured by both outcomes and adherence to guidance)
- Some concerns regarding the metric itself
  - Patients lack medical training and thus cannot assess
  - Patient satisfaction is easily influenced by other factors unrelated to care
  - Patient satisfaction reflects fulfillment of patients a priori desires (such as treatment)

5 points to consider when evaluating satisfaction metrics
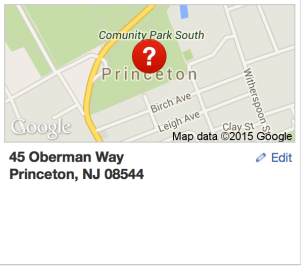
1. Do metrics focus on a specific event or visit or are they general?

2. What do survey instruments measure?

3. Timeliness is important

4. What quality metrics are satisfaction metrics being compared to?

5. What is patient satisfaction

Manary M et al. (2013) The Patient Experience and Health Outcomes. *New England Journal of Medicine*. 368:201-203.

- What do patient ratings actually measure?

- Bias in sample?
  - Who reports?
  - Are reports removed?

Gastric bypass

Admitted 3 times in 1mo

Frustrated with lack of diagnosis

Nursing staff was amazing

England: NHS Choices

Topics — Key Facts	NHS Choices users rating	Care Quality Commission national standards	Recommended by staff	Responding to patient safety alerts	Mortality rate
Sort by — Mortality rate — **Update results**	ⓘ	ⓘ	ⓘ	ⓘ	ⓘ
The Whittington Hospital					☐ Add to shortlist
Tel: 020 7272 3070 Magdala Avenue Magdala Avenue London N19 5NF 5.24 miles away | Get directions 🅿️ ♿	★★★⯪☆ 80 ratings Rate it yourself	❗ Some standards not met **Visit CQC profile**	65 % of staff who would recommend this organisation	❗ Poor - Some alerts not signed off after deadline	✅ Better than expected in hospital and up to 30 days after discharge (0.6259)
Tynemouth Road Medical Practice					☐ Add to shortlist
Tynemouth Road Tottenham London Greater London N15 4RH 5.78 miles away | Get directions	★★★★★ No ratings yet Rate it yourself	**n/a** Data not available	65 % of staff who would recommend this organisation	❗ Poor - Some alerts not signed off after deadline	✅ Better than expected in hospital and up to 30 days after discharge (0.6259)
The Whittington Hospital At Hornsey Central					☐ Add to shortlist
151 Park Road London Greater London N8 8JD 6.12 miles away | Get directions	★★★★☆ 1 rating Rate it yourself	**n/a** Data not available	65 % of staff who would recommend this organisation	❗ Poor - Some alerts not signed off after deadline	✅ Better than expected in hospital and up to 30 days after discharge (0.6259)
The Royal London Hospital For Integrated Medicine					☐ Add to shortlist
Tel: 020 3456 7890 60 Great Ormond Street 60 Great Ormond Street London WC1N 3HR 2.45 miles away | Get directions	★★★★⯪ 23 ratings Rate it yourself	✅ All standards met **Visit CQC profile**	83 % of staff who would recommend this organisation	✅ Good - All alerts signed off where deadline has passed	✅ Better than expected in hospital and up to 30 days after discharge (0.7351)

Ratings ⓘ

3.5 Stars ★★★⯨☆

NHS Choices users' overall rating
Based on **125** ratings for this hospital

Cleanliness	Staff co-operation	Dignity and respect	Involvement in decisions	Same-sex accommodation
★★★★☆	★★★⯨☆	★★★⯨☆	★★★⯨☆	★★★★☆
(123 ratings)	(125 ratings)	(122 ratings)	(123 ratings)	(90 ratings)

Reviews 317 total

Page 1 of 32   Next

Order by: Visited date Department: All departments Subject: All subjects **Filter**

★★★★★ **Scrumpys** gave General Medicine at University College Hospital a rating of 5 stars

Impossible to contact ward T9 Male Section

Impossible to contact ward to ask about patient condition no reply from nurse station.

This causes unessesary worry if visitor lives a long distance away.

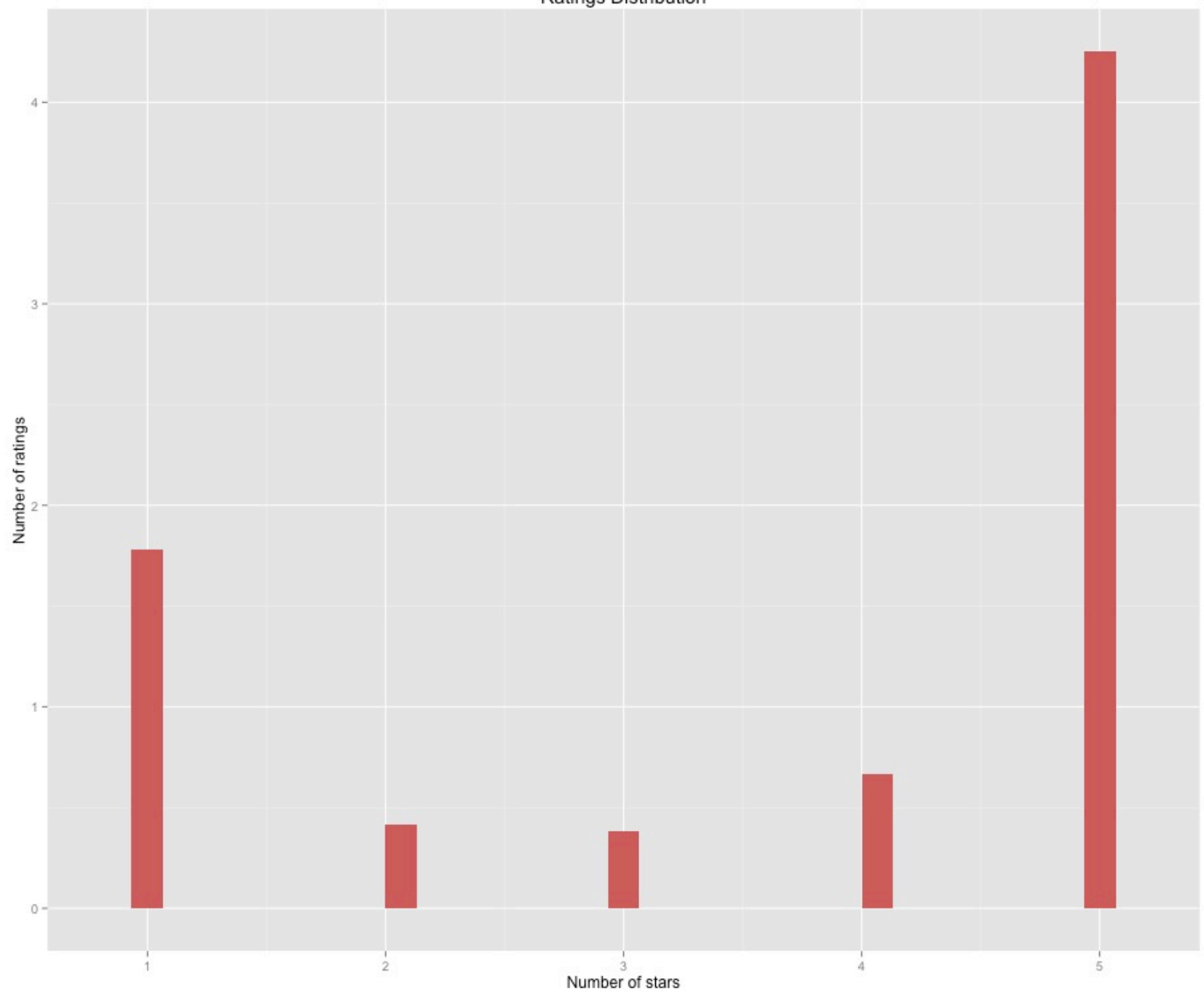The phone just goes onto voicemail but you cannot leave message.

This happens through the day.

Staff needed extra information about patients meds but could not contact staff to tell them.

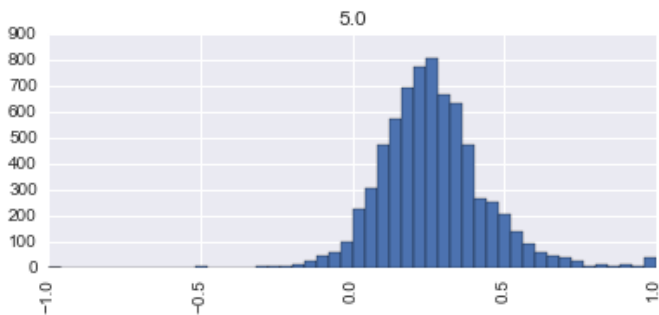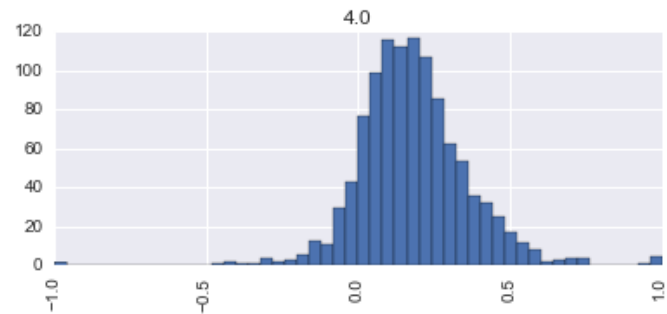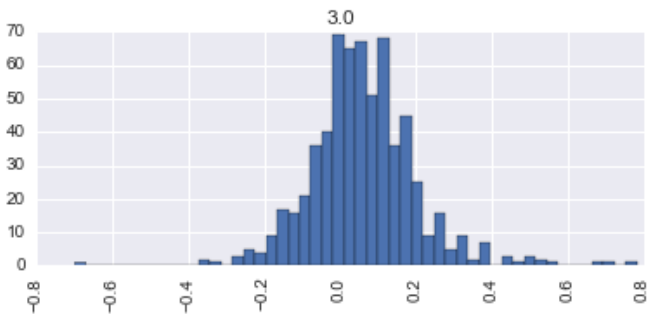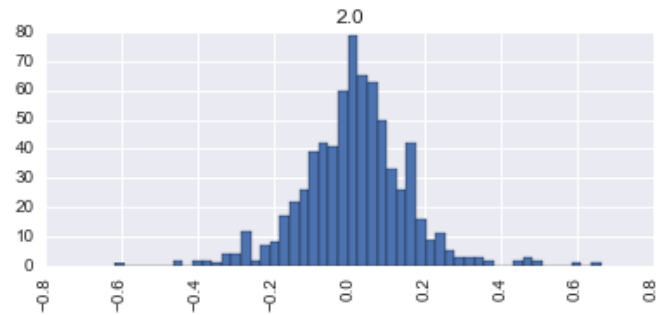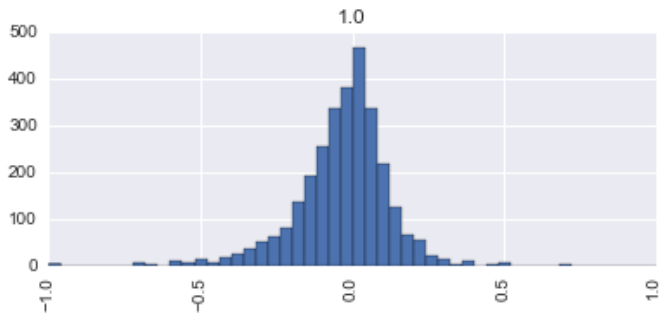Visited in August 2015. Posted on 02 August 2015
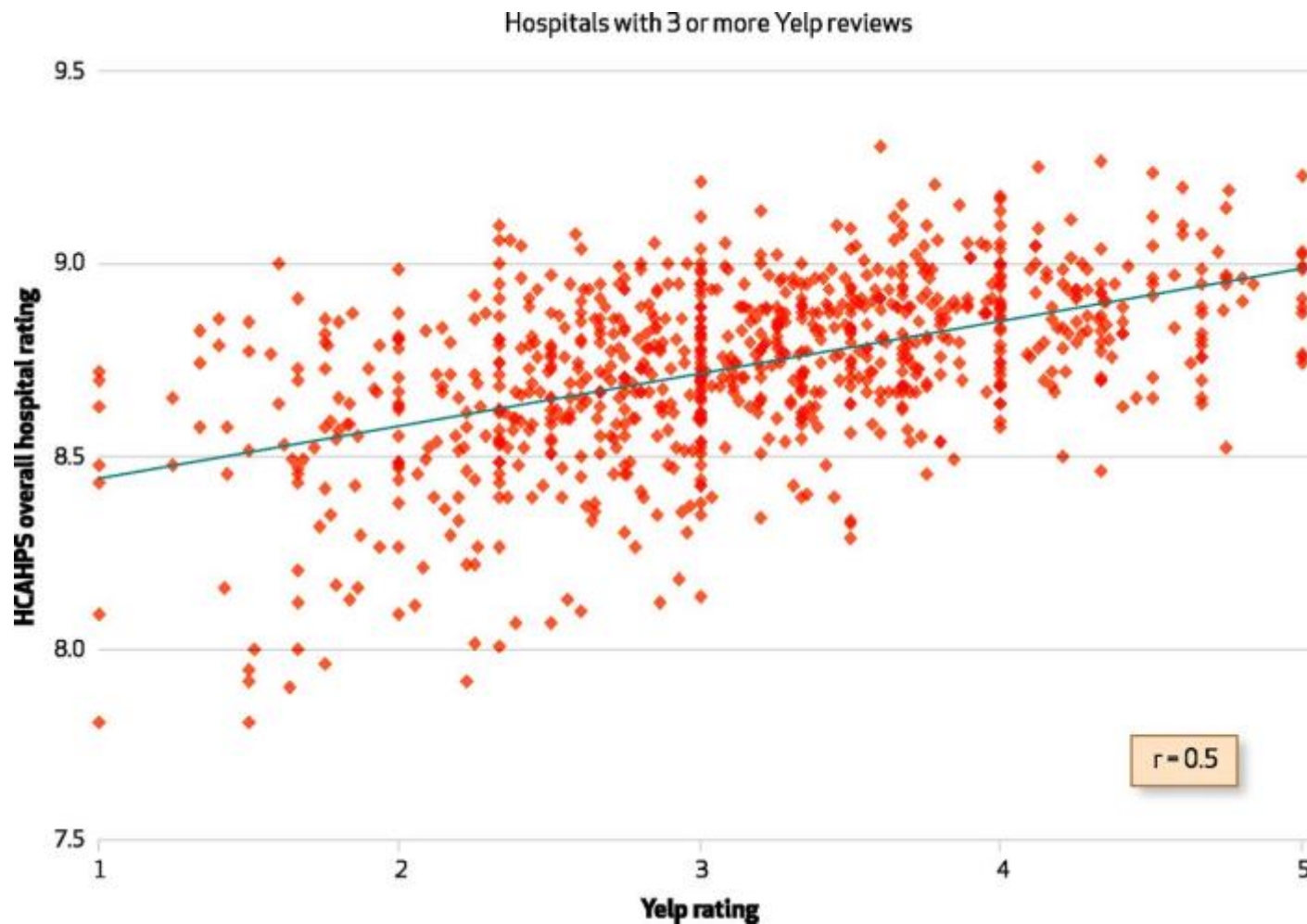
Report as unsuitable

Ratings Distribution

Polarity(Sentiment) of Text, by Star Rating

Correlation of Star Rating and Polarity (Pearson's r) =0.605

Mean Yelp review ratings correlated with HCAHPS survey overall hospital ratings, 2005–14.

Association between patient experience and other quality measures?

Table 3

Comparison of associations between web-based/paper-based ratings and clinical outcomes

Clinical outcome	Spearman ρ for NHS Choices rating and clinical outcome associations	Spearman ρ for NHS Inpatient Survey rating and clinical outcome associations	Z score for comparison of correlation coefficients	p Value
Hospital standardised mortality ratio	−0.20	−0.16	−0.35	0.73
Standardised mortality rate for high risk conditions	−0.23	−0.07	−1.39	0.16
Emergency readmission rate within 28 days	−0.31	−0.25	−0.55	0.58

NHS, National Health Service.

Methodological Challenges

- The self-reported nature of the responsiveness instrument
  - Self-reported data may be prone to measurement error where bias results from groups of respondents

- Reliability, validity, comparability
  - Measures may be reliable with good within-population validity
  - But with very poor comparability across populations
  - Many influences but often of different size, magnitude and direction

- Reporting bias
  - Variations such as these can be expected across individuals. If the variation is random, it will not bias the measurement of socioeconomic-related health inequality
  - But if there is systematic variation in relation to SES or other characteristics, then it would bias the estimation.

Patient satisfaction: way forward

Progress Made	Next Steps

Progress Made

- Introduced and widely accepted a primary goal of health systems.
- Huge progress in measurement in the past decade.
  - Went from no data to cross-country measures
  - Methodologies developed to assist meaningful comparisons (vignettes)
  - More data on patient experiences

Next Steps

- Identify a working concept of patient experiences that is acceptable to all
- Develop standardized questions across countries
- Collect more information on experiences and other factors that can influence expectations
- Use vignettes more routinely
- Put more reliance on specific measures of satisfaction, and less on more system level (abstract) measures