

Patient Satisfaction: Introducing Two Novel Methods of Collection

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Patient Satisfaction: Introducing Two Novel Methods of Collection

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Introduction

- Working under the support of the CEO of the University of South Florida (USF) Physicians Group, we examined how providers are evaluated.
- The change from traditional fee-for-service to a reimbursement model that includes quality metrics and patient satisfaction is upon us, **but how can this be measured?**
- In an effort to address the concerns of existing models, we answered this question in two novel modalities:
 - A Pilot Study with the USF Department of Family Medicine to administer point-of-care surveys utilizing iPad tablets.
 - Implemented a paper survey model similar to third party vendors, but using in-house services.

Methods

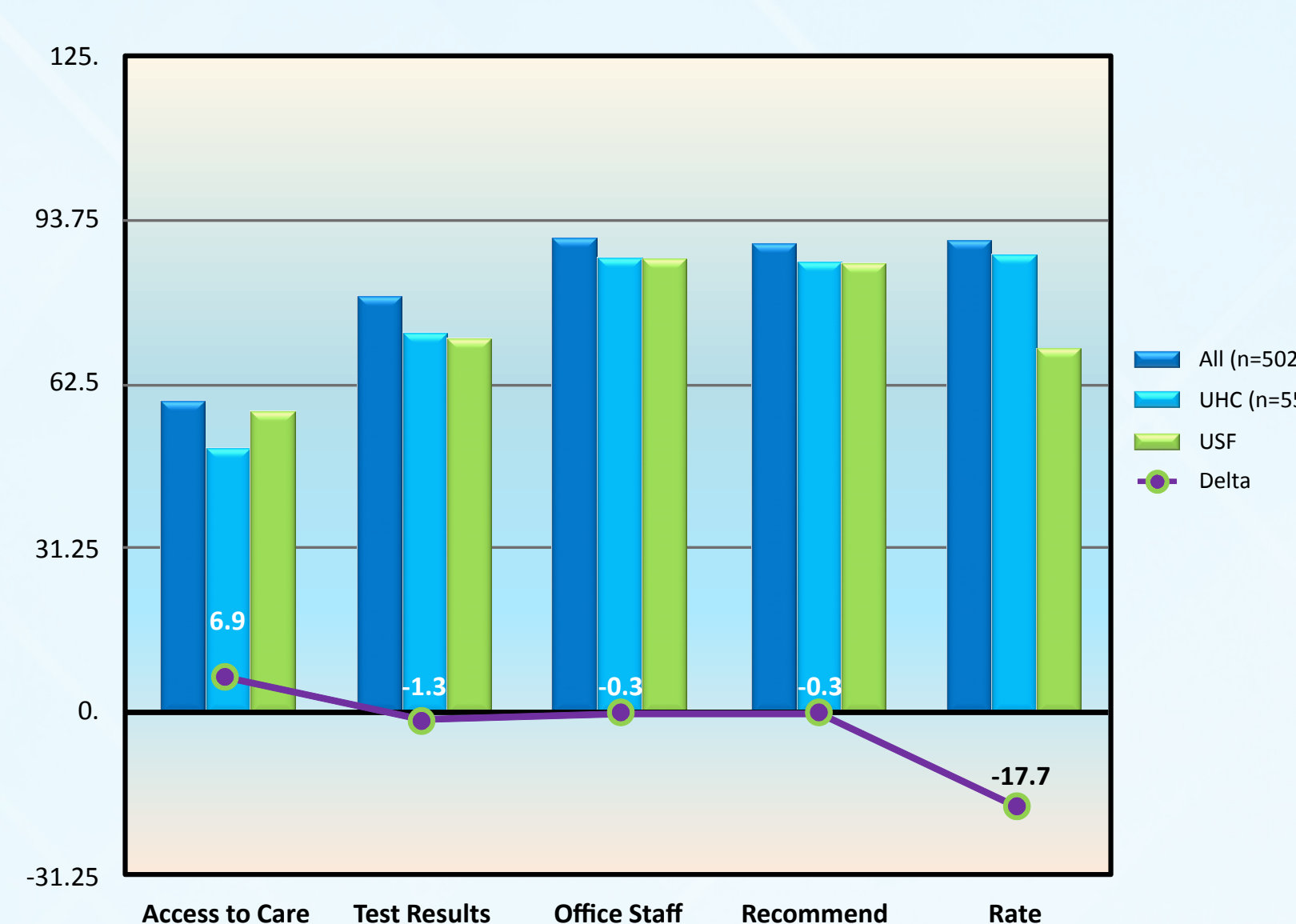
- AHRQ CG-CAHPS Visit Survey 2.0 was administered on iPad tablets through Qualtrics surveying software
- Surveys were offered to patients at the Family Medicine clinic during the time period after the provider left the exam room, and concurrent with the medical assistant/nurse preparing discharge documentation for the patient.
- Nearly 8,000 paper surveys were also sent out across 5 departments: Orthopedics, Dermatology, Neurology, Pediatrics, and Obstetrics & Gynecology
- Paper surveys were sent out in accordance with the University Health Consortium (UHC) Pilot Study.
- Patients were identified through the USF scheduling department to select patients that had scheduled office visits during a three month window.

Results

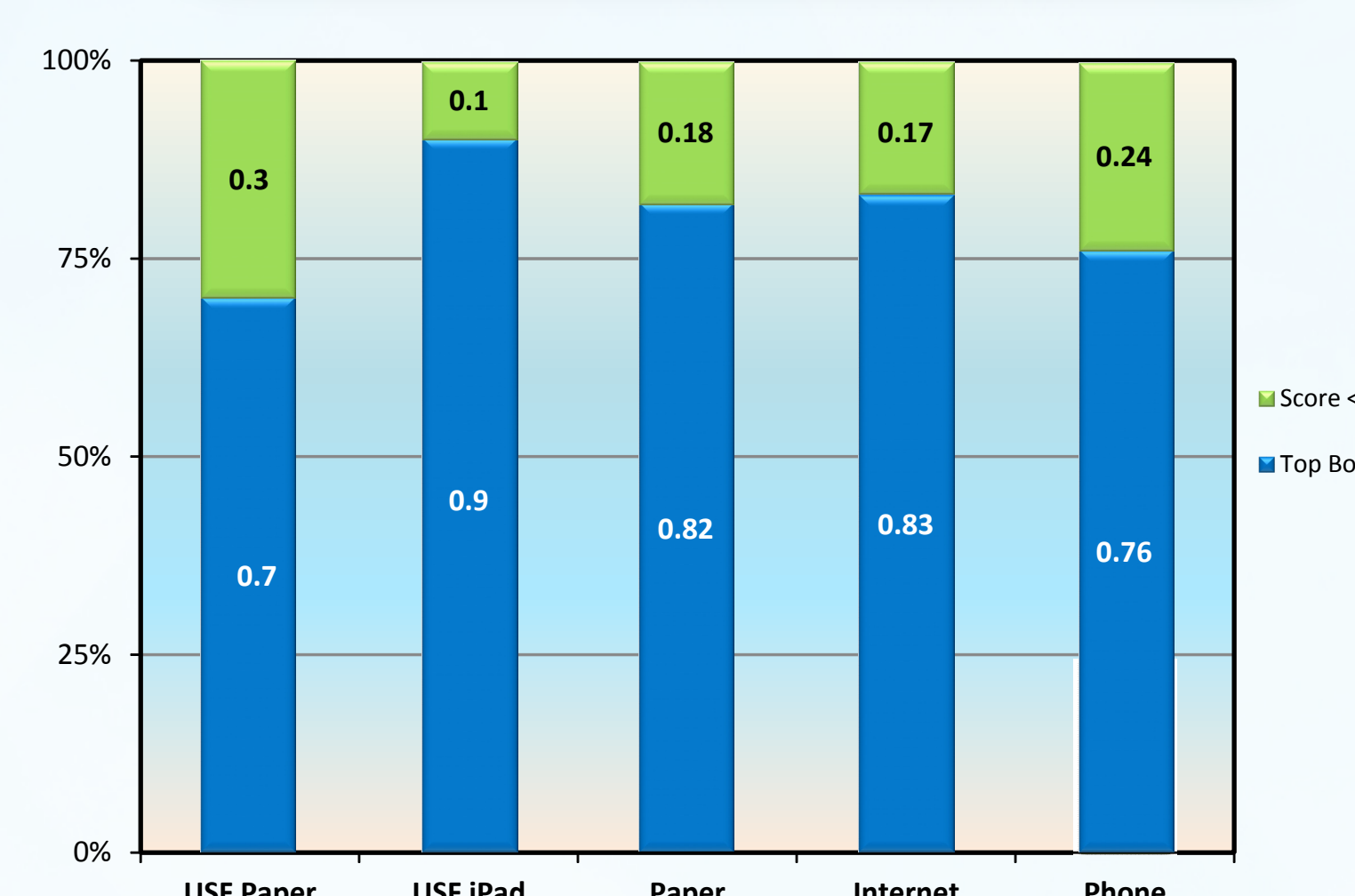
How do we evaluate providers?



- 99% of patients offered the survey completed it (100 out of 101 patients asked).
- Respondents took between 3 minutes – 14 minutes to complete the 37 question survey.
- 28% of patients took between 3-5 minutes
- 54% of patients took between 5-8 minutes
- 18% of patients took more 8 or more minutes
- Demographic composition of survey respondents (n=100) closely approximates that of the National CG-CAHPS AHRQ database (n=260,000).



	All (n=502)	UHC (n=55)	USF	Delta
Access to Care	59.3	50.9	57.8	6.9
Test Results	79.8	73	71.7	-1.3
Office Staff	90.8	87.1	86.8	-0.3
Recommend	89.6	86.1	85.8	-0.3
Rate	90.3	87.4	69.7	-17.7



Discussion

- As there is no direct benchmarking cohort for point-of-care data collected by tablet, our results were compared with AHRQ CG-CAHPS database for the Visit Survey 2.0 relative to other Family Medicine practices and Academic Medical centers nationally
- Similarly, we benchmarked our results against surveys completed by mail and phone.
- The modal adjustment of point-of-care data is unknown, and a limitation of our analysis.
- Paper surveys utilizing in-house resources achieved outstanding results with a 19.2% response rate amongst 5 departments.

Conclusions

- Point of care patient satisfaction surveying provides the opportunity for immediate feedback, which can be analyzed real-time.
- Electronic survey interfaces (iPad, email) for patient satisfaction data will likely grow in adoption, and we believe our experience offers some insight for organizations seeking to obtain information about the patient care experience on-site.
- Future integrations of iPad surveys must balance the potential for bias with the added benefit of increased participation and ease of access from the patient perspective.
- We believe the development of internal resources to study patient satisfaction can serve as a model for both cultural change and organizational readiness that breeds opportunity. If more traditional means of paper surveys are preferred, the process of surveying with in-house resources has been demonstrated with great success.

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