

The Patient Voice in Quality Improvement

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CQFP Sessions

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**CLINICAL QUALITY
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**United
Hospital Fund**

*Improving Health Care
for Every New Yorker*

Learning Goals

- Understand how information provided by patients is critical to assessing quality and driving quality improvement.
- Differentiate between process and outcomes measures that are patient reported vs not.
- Interpret patient experience and patient-reported outcomes dashboards to identify opportunities for quality improvement.
- Identify possible interventions to improve quality of patient experience or self-assessed outcomes.

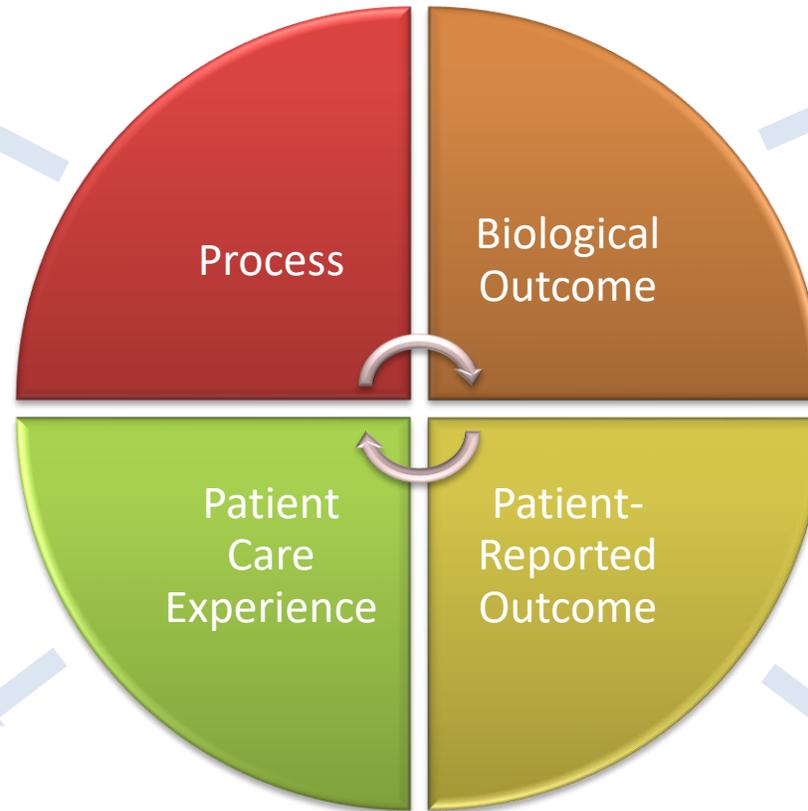


Measures to Assess Quality

Use Case: Diabetes

- Blood test for HgA1c
- Eye exam
- Foot exam
- Assessment of kidney function

- HgA1c < 9
- Non proliferative retinopathy
- Grade I superficial ulcer
- Posterior tibial pulse absent
- Stage II mild CKD



- Provider treated me with courtesy and respect
- Provider spent enough time with me
- Provider explained things in a way that I could understand

- Loss of feeling in left leg
- Burning in right foot
- Swelling in both legs
- Weight gain



“The ultimate judge of quality is the patient, end of story.”

- **Don Berwick**, former Director of CMS and former President of IHI

Do you agree?



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"The ultimate judge of quality is the patient, end of story."

Do you agree?

Yes

No

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Patient reported feedback is a valid way to measure quality.

Completely agree

Maybe

No way

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Patient Experience and Quality Improvement



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*What is The Patient Experience?**

The sum of all ***interactions***, shared by an organization's ***culture***, that influence patient ***perceptions*** across the ***continuum*** of care

The Beryl Institute definition: <http://www.theberylinstitute.org/>



CAHPS Surveys

Consumer Assessment of Healthcare Providers and Systems - CAHPS surveys ask patients to report on their experiences with a range of health care services at multiple levels of the delivery system.

Several surveys ask about experiences with ambulatory care Providers such as health plans, physicians' offices, and Behavioral health plans, while others ask about experiences with care delivered in facilities such as hospitals, dialysis centers, and nursing homes



HCAHPS

Hospital
Consumer
Assessment of
Healthcare
Providers and
Systems



Why HCAHPS?

H-CAHPS®

Hospital Consumer Assessment of Healthcare Providers and Systems

- CMS Requires all acute care hospitals to participate
 - Financial implications
- Public reporting and transparency allows for patient choice where to get healthcare (<http://medicare.gov/hospitalcompare>)
- Data suggests that a better patient experience improves outcomes

HCAHPS Domains

DOMAINS

Overall Rating of Hospital 9-10

Would Recommend

Communication with Nurses

Communication with Doctors

Responsiveness of Staff

Pain Management

Communication about Medications

Hospital Environment – Cleanliness & Quietness

Discharge Information

Care Transitions



HCAHPS: Communication with Doctors Questions

QUESTIONS

1. During this hospital stay, how often did doctors treat you with courtesy and respect?
2. During this hospital stay, how often did doctors listen carefully to you?
3. During this hospital stay, how often did doctors explain things in a way you could understand?



HCAHPS: Communication with Nurses Questions

QUESTIONS

1. During this hospital stay, how often did nurses treat you with courtesy and respect?
2. During this hospital stay, how often did nurses listen carefully to you?
3. During this hospital stay, how often did nurses explain things in a way you could understand?



HCAHPS Advocacy: Pain Management

OLD:

- During this hospital stay, did you need medicine for pain?
- During this hospital stay, how often was your pain well controlled?
- During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?

NEW:

- During this hospital stay, did you have any pain?
- During this hospital stay, how often did hospital staff talk with you about how much pain you had?
- During this hospital stay, how often did hospital staff talk with you about how to treat your pain?



Public Reporting – CMS Care Compare

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Long-term care hospitals



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Resources & information
Check out important things to consider when choosing a provider.



Info for health care providers
Find out how to keep your information up-to-date in our tools.

Looking to explore and download provider data? [Visit the data catalog on CMS.gov](#)

<https://www.medicare.gov/care-compare/?providerType=Hospital&redirect=true>



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CGCAHPS: Provider Communication Quality Questions

QUESTIONS

During this visit, did this provider explain things in a way that was easy to understand?

During this visit, did this provider listen carefully to you?

During this visit, did this provider give you easy to understand information about your health questions or concerns?

During this visit, did this provider seem to know the important information about your medical history?

During this visit, did this provider show respect for what you had to say?

During this visit, did this provider spend enough time with you?



Patient Experience as a Measure of Quality

- Patient experience surveys provide robust measures of quality
- Measures in healthcare, a service industry, **should** include assessment of the extent to which patient and provider **have a common understanding of patient's situation**
- Improved patient engagement leads to lower resource utilization and greater patient satisfaction
- Patient-reported measures not only strongly correlate with better outcomes, but **largely capture patient evaluation of care-focused communication with nurses and physicians**

Manary, M.P., Boulding, W., Staelin, R., Glickman, S.W. (2013). The patient experience and health outcomes, *NEJM*, 368(3):201-3.

Information provided, courtesy of Michael Bennick, MD, Associate Chief of Medicine and Medical Director, Patient Experience, Yale-New Haven Hospital.



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Patient experience measures are a valid measure of quality.

Completely
Agree

Maybe

No way

Patient experience data can be a useful tool for quality improvement.

Completely agree

Maybe

No way

Patient experiences measures should be part of value based and/or P4P programs.

Completely agree

Maybe

No way

Patient Reported Outcomes

Pillars of Quality:
Structure-Process-Outcomes



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Why Patient Reported Outcomes?

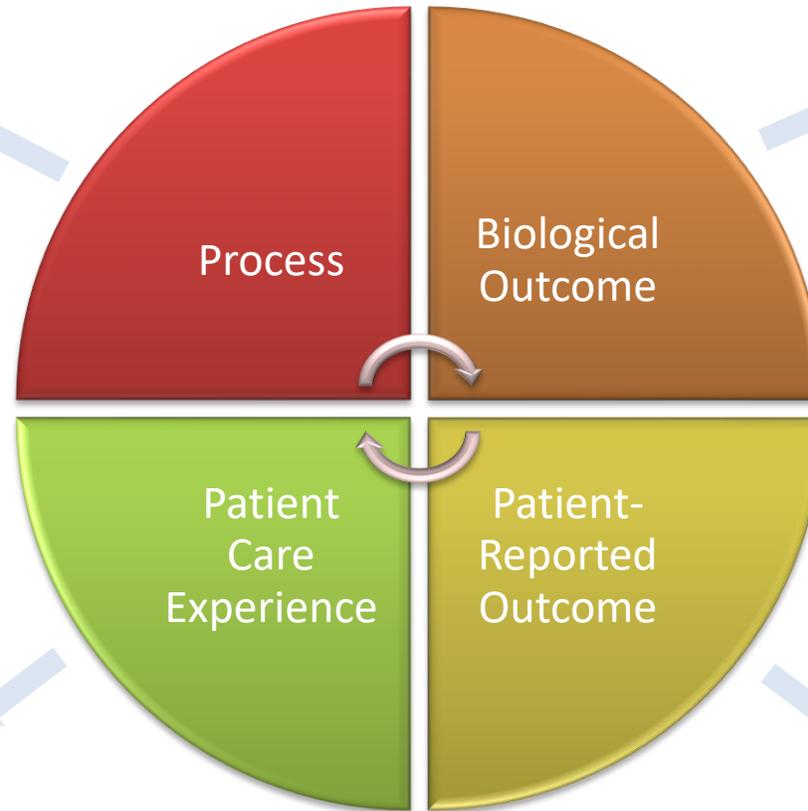


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Patient Reported: Experience *and* Outcomes

- Patient experience measures **how care was provided** – from the “eye of the person”.
- Patient-reported outcomes (PROs) measure the **result of that care** - through the “eye of the person”. Some examples:
 - Level of pain
 - Functional status – ability to walk, impact on ADLs
 - Changes in symptom burden – cough, headaches, vision
- Both types of measures share this criteria:
 - Objective, validated questions



Evolution of PRO Measures

Phase 1. **Proof of Concept** (late 1980s)

- Landmark paper: The Medical Outcomes Study. An application of methods for monitoring the results of medical care. [JAMA](#). 1989 Aug 18;262(7): [Tarlov AR, Ware JE Jr, et al](#))

Phase 2: **Outcome Measure Development and Endorsement** (2000-2010)

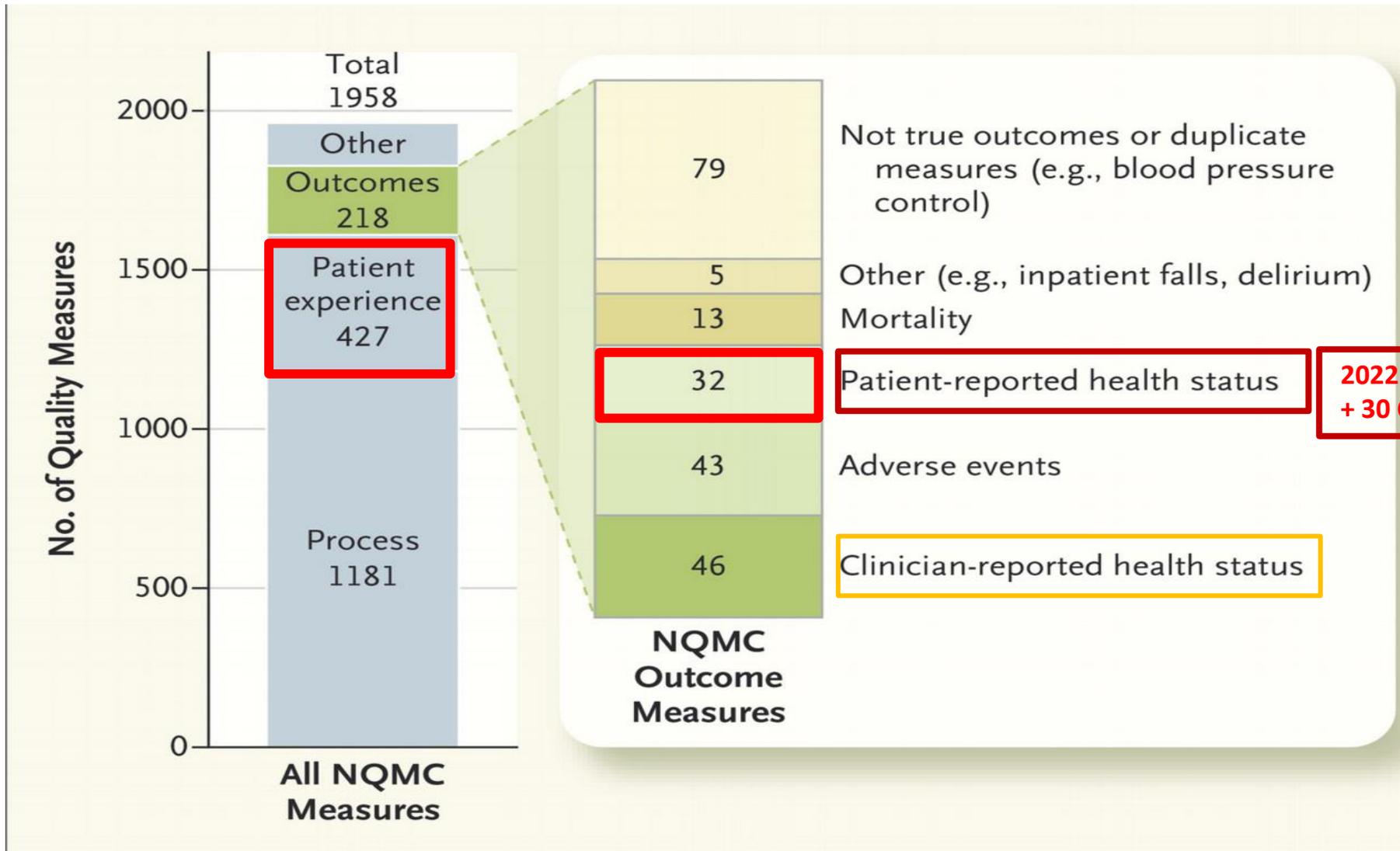
- National Attention and Investment by NIH, CMS, NQF, NCQA

Phase 3. **Use of Outcomes/Value-based payment** (2010->ongoing)

- NCQA PROM-PM initiative
- CMS adopts PROMs in the HIQP : required in CMS HQR (2 measures: THA/TKA), MIPs, APMs, commercial payers



Phase 2. Categories of Quality Measures

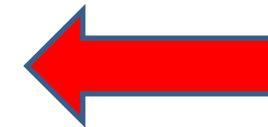
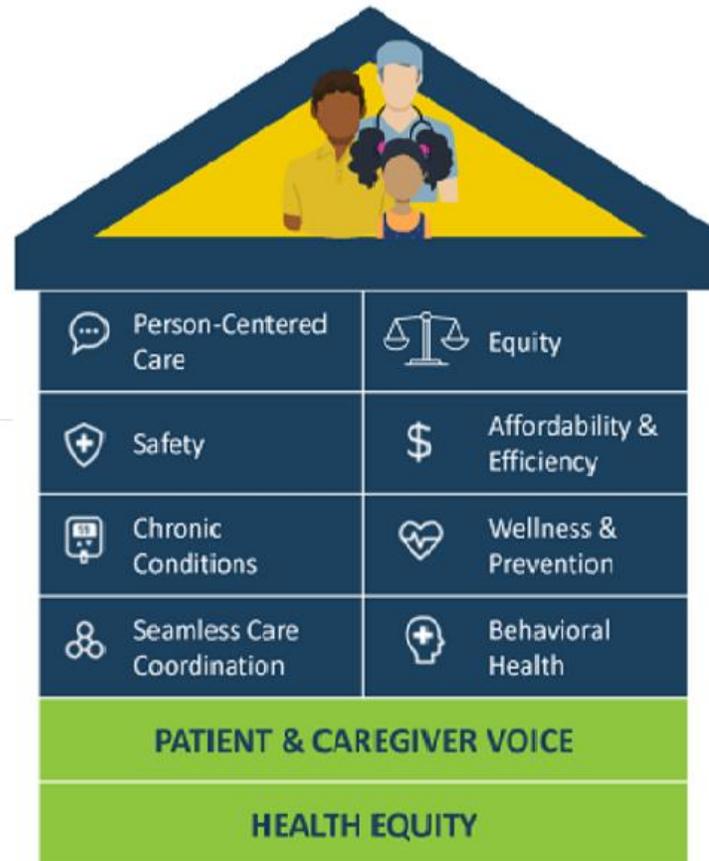


Phase 3. The Times are a Changin'...



Patient Experience and Reported Outcomes As Foundation of Health Equity CMS 2022 Meaningful Measures 2.0

Building Value-Based Care &
Promoting Health Equity



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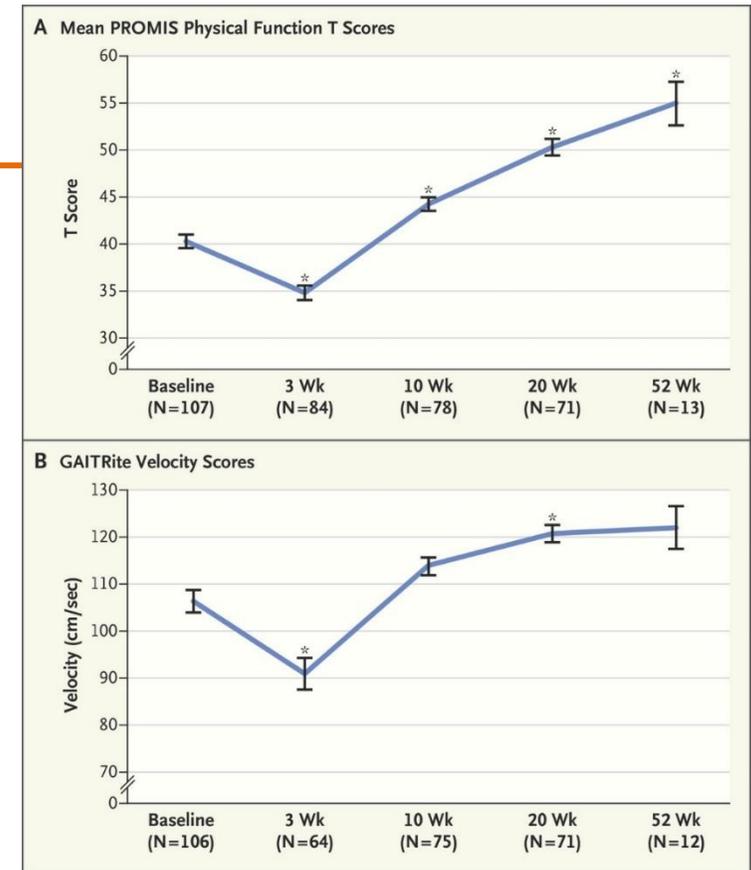
Types of PROMs

Condition specific – some examples

- Depression – PHQ-9
- Cardiomyopathy – Kansas KCCQ
- Post Knee Surgery – KOOS
- Cataract surgery

Generic PROMs – some examples

- Symptom burden
- Level of function: physical, social, mental
- Health status: HRQOL (Health-Related Quality of Life) – SF-36

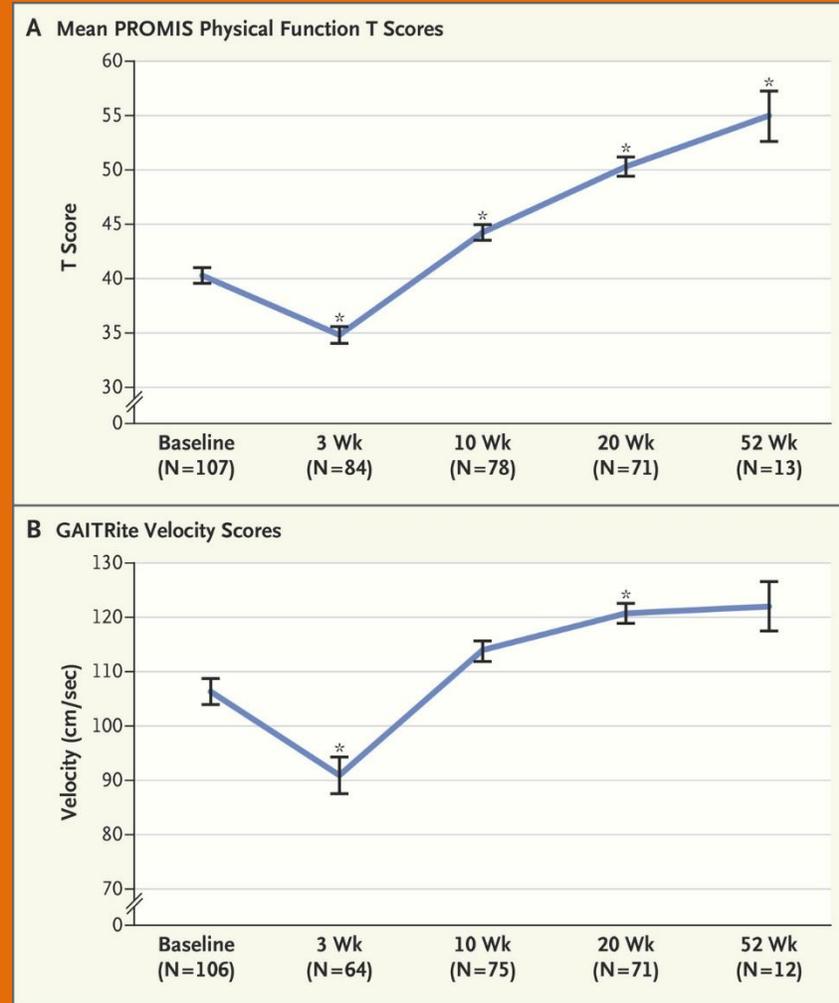


PROMIS Pain Assessment - Sample

In the past 7 days...		Not at all	A little bit	Somewhat	Quite a bit	Very much
1	How much did pain interfere with your day to day activities?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2	How much did pain interfere with work around the home?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3	How much did pain interfere with your ability to participate in social activities?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4	How much did pain interfere with your household chores?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5	How much did pain interfere with the things you usually do for fun?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
6	How much did pain interfere with your enjoyment of social activities?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5



Physical Function Assessments after Knee-Ligament Reconstruction.



PROMs: Practical Applications

- Patient management and personalized, goal-based care plans
- Shared Decision Making
- Care Coordination
- Quality Improvement
- Population Health
- Value-based payment programs



PROMs Adoption in Practice: Challenges

Technical

- Data collection: when, how
- Use of information: interpretation and application

Workflow: disruption of clinical workflow and demand shift in approaches to interaction with patients

Patient and cultural factors: disabilities (cognitive, functional), use of proxies, literacy

Financial: costs related to collection and analysis of new measures



Patient-reported outcome measures are a valid measure of quality.

Completely Agree

Maybe

No way

Patient-reported outcome data can be a useful tool for quality improvement.

Completely Agree

Maybe

No way

Patient-reported outcome measures should be part of value based and/or P4P programs.

Completely Agree

Maybe

No way

THE VOICE OF THE PATIENT

EXERCISE – Post Partum Care

1. Work in break-out groups
2. Review HCAHPS Data
3. Review PROM Data
4. Consider areas you'd want to improve as well as possible intervention(s)
5. Prepare your report back to the group



THE VOICE OF THE PATIENT

EXERCISE – Post Partum Care

Your CEO calls you into her office to talk about how things are going with CQFP.

She tells you that she's really excited that you are learning so much and asks you to work on a project. She says to you: we want our post-partum care to be recognized as the best in the country. I'm concerned that our HCAHPS scores do not show a 4-5 star experience. She also shares with you a report showing post-partum patient reported data. "Could you review the data, engage your team, and develop a plan to get patients to give us the top mark for being the best in the country?"

She looks forward to hearing back from you.



The Voice of the Patient – HCAHPS DATA

														Unit: Postpartum		HCAHPS Scorecard												
														Medical Director: [REDACTED]		Updated: 2/11/2019												
														PCD: [REDACTED]														
Postpart	Quarter-to-Date Star Rating:	★ ★ ★ ☆ ☆ (3.44)																										
	Year-to-Date Star Rating:	★ ★ ★ ☆ ☆ (3.25)																										
Postpart	Year-to-Date Star Rating:	★ ★ ★ ☆ ☆ (3.38)																										
														Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	2018 YTD	Change from CY 2017	2018 Target
HCAHPS Performance																												
Patient surveys received (by discharge date)					59	59	48	65	58	62	59	59	49	67	49	40	674											
Rated 'as Best Hospital Possible'				★ ★ ★ ☆ ☆ (3)	63.8	67.8	76.6	66.2	70.7	72.1	57.6	58.6	67.3	58.2	65.3	82.5	66.6	+2.5	64.6									
Will definitely recommend to others				★ ★ ★ ★ ☆ (4)	76.3	83.1	85.1	78.5	86.2	83.9	72.9	70.7	77.6	71.6	77.1	95.0	79.3	+4.4	75.4									
Communication about medicines				★ ★ ★ ☆ ☆ (3)	63.0	76.3	60.7	60.5	71.7	71.4	59.1	65.2	64.0	63.9	65.7	63.6	65.7	+4.2	66.6									
Communication with doctors				★ ★ ★ ★ ☆ (4)	81.2	90.3	86.1	90.8	86.2	83.2	88.7	75.7	79.6	79.5	86.4	92.5	84.8	+2.5	84.7									
Room and environment were <u>clean</u>				★ ★ ★ ★ ☆ (4)	69.5	72.9	75.0	65.6	72.4	85.0	71.2	69.5	79.6	78.8	73.5	77.5	74.0	+10.8	69.4									
Room and environment were <u>quiet</u>				★ ★ ★ ★ ☆ (4)	75.9	67.8	70.8	73.8	75.4	88.5	62.7	55.9	75.0	74.6	67.3	65.0	71.3	+2.9	70.5									
Communication with nurses				★ ★ ★ ★ ☆ (4)	78.5	83.1	75.0	81.8	87.9	79.6	78.0	74.6	79.6	85.5	77.6	89.2	80.8	+4.1	81.2									
Responsiveness of staff				★ ★ ★ ☆ ☆ (3)	63.4	75.7	60.7	59.7	69.6	68.7	67.4	71.2	62.7	65.9	60.5	69.1	66.2	+3.5	68.3									
Pain communication				☆☆☆☆ N/A	63.0	69.4	57.3	73.1	70.3	65.8	56.0	63.7	60.7	51.6	62.2	60.5	63.1	-	TBD									
Discharge information				★ ★ ☆ ☆ ☆ (2)	85.1	84.2	84.8	82.3	91.1	80.0	83.9	78.1	82.7	83.4	83.7	82.0	83.4	-3.0	91.0									
Post-discharge care				★ ★ ★ ★ ☆ (4)	55.6	53.9	51.5	64.6	64.4	64.0	58.6	54.7	68.2	58.7	58.1	58.8	59.3	+1.2	62.1									
Rolling Quarter Star Rating:					3.25			3.69			2.94			3.44														

-Star ratings are approximated using survey responses based on discharge date. Domain-specific stars are based on QTD scores.
 -Star approximations are based on CMS thresholds for discharges between 1/2016 and 12/2016.
 -Pain communication domain is not included in the star calculation.



The Voice of the Patient – Patient Reported Outcomes

Maternity Care Quality Dashboard

Quality Domain	Quality Category	Quality Measure	Yr. 2018
Clinical	Severe Maternal Morbidity	Maternal Need for ICU	****
		Length of Stay	*
		Late Maternal Complications	**
		Transfusion	****
	Neonatal Morbidity	Birth Injury	****
		Spontaneous Pre-Term Birth	****
		Iatrogenic Pre-Term Birth	***
Patient-Reported Outcomes	Patient-Reported Health Status	Health-Related Quality of Life	****
		Incontinence	****
		Pain with Intercourse	***
	Breastfeeding	Success with Breastfeeding	***
		Confidence with Breastfeeding	***
	Role Transition	Mother-Infant Attachment	***
		Confidence in Caring for Baby	*
	Mental Health	Post-Partum Depression	**
Patient-Reported Care Experience	Patient Experience with Care	HCAHPS	See HCAHPS Report



THE VOICE OF THE PATIENT

Report Back to Group

1. What did you identify as opportunities for improvement?
2. Pick one opportunity
3. Discuss a potential intervention for improvement
4. What measure would you use to assess impact of intervention?



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