

Measuring the patient experience: how to select a delivery method for best results and minimal effort

Equipe de santé familial académique Montfort

St. Michael's Hospital Academic Family Health Team

Objectives

- Observe the benefit of centralizing the development, implementation, collating, and reporting of a standardized patient experience survey that would require limited resources from FHTs.
- Compare response rates, responses, and respondent demographics from different survey methods including waiting room, web-based, and emailed surveys.
- Reflect on challenges with feeding back survey data to staff to drive improvements in quality of care.
- Reflect on the best method of delivering a patient experience survey in your FHT context.

Question

How do you deliver your patient experience survey? (select all that apply)

1. Waiting room – paper survey
2. Waiting room – tablet survey
3. Emailing a web-based survey
4. Distributing a web-based survey through a different method
5. Other

Question

How often do you sample patients (i.e. how often do you distribute your survey)?

1. Every day
2. Once a week
3. Once a month
4. Once every few months
5. Once a year

Question

How often do you analyze your data?

1. Every day
2. Once a week
3. Once a month
4. Once every few months
5. Once a year

Presenter Disclosure

- Presenter: **Ellie Kingsbury**
- Relationships with commercial interests:
 - **Not Applicable**

Disclosure of Commercial Support

- **No commercial support**

Mitigating Potential Bias

- **Not Applicable**

Measuring the Patient Experience: how to select a delivery method for best results and minimal effort

Ellie Kingsbury

Équipe de santé familiale académique Montfort

2015-10-28

Champlain LHIN FHTs – Who We Are

- Champlain LHIN
 - Population: ~1,176,000 or 9.5% population of Ontario
 - Ontario's easternmost LHIN - covers a large geography, sharing a 465-km-long border with Quebec
- 21 Family Health Teams ~258,000 rostered patients
 - Rural and urban
 - One First Nations and one Inuit
- 3 QIDSS support 21 FHTs
 - Karen Stanton (Petawawa Family Health Team)
 - Bev Atkinson (West Carleton Family Health Team)
 - Ellie Kingsbury (Montfort Academic Family Health Team)

Survey Details

- Second annual Patient Experience Survey held between December 2014 and February 2015.
- Developed by a Survey Strategy Committee, included representation from members of four FHTs (3 Executive Directors and 1 Physician) and one Quality Improvement Decision Support Specialist (QIDSS)
- Created in Gravic Remark OMR Office® software
- Offered in both official languages; electronic and paper formats

Question

When we determine the amount of surveys each FHT must complete we decide by (check all that apply):

1. By roster size?
2. By a 95% confidence level?
3. By an acceptable Margin of Error of 50%?
4. By the amount of chairs in the waiting room?

Question

At the Champlain LHIN FHTs we determine:

1. **By roster size**
2. **By a 95% confidence level**
3. By an acceptable Margin of Error of 50%
4. By the amount of chairs in the waiting room

Goals

- Understand key elements of patient's experience in the Champlain LHIN according to key performance indicators
- While each FHT is distinct and cares for a unique population, results of survey help FHTs establish priorities for improvement

Methods

- FHTs advised of 3 ways that the surveys could be administered:
 - In the waiting room upon arrival: Distribute paper copies or electronically via a tablet
 - Post link on FHT website and invite patients who had an appointment with any health care professional within the last 12 months to complete
 - Email an electronic survey link after the visit, within 3 weeks
- FHTs could use an administrative section to differentiate according to clinics, physicians and/or clinicians

Survey Questions

- 14 multiple choice survey questions categorized into five domains in the *Primary Care Performance Measurement Framework: Access, Integration, Efficiency, Focus on Population Health and Patient-Centredness*
- Includes questions from the *Indicator Technical Specifications Quality Improvement Plan 2015/16* document
- 5 Demographic questions
 - Gender
 - Age
 - Language
 - Years as a patient
 - Number of visits in last 12 months

Results

- 19 out of 21 FHTs participated, with a total of 6608 completed surveys, representing 2.56% of rostered patients at the participating FHTs
- 9 questions were the same for both surveyed years and could be used for benchmarking
- 18 FHTs distributed paper copies; 4 FHTs posted link on website (with very few respondents); 1 FHT via Ocean tablets; 1 FHT emailed survey to patients
- 9 FHTs used the administrative section on survey to differentiate between clinics, physicians, clinicians

Report

- Report provided to all participating FHTs:
 - Aims to provide FHT specific results and not meant to compare FHTs
 - First year blinded; subsequent reports unblinded
 - Also aims at:
 - providing information for the yearly Quality Improvement Plan
 - initiating action within the FHTs
 - enabling FHTs to learn from each other
 - performing benchmarking within a FHT year over year

Question

When we report our survey results, we (check all that apply):

1. Compare data from different physicians/clinicians
2. Compare data from different clinics/sites within a FHT
3. Compare data from different FHTs
4. Compare data with a provincial/national/international benchmark
5. Compare results over time


Question

At the Champlain LHIN FHTs we:

- 1. Compare data from different physicians/clinicians**
- 2. Compare data from different clinics/sites within a FHT**
- 3. Compare data from different FHTs**
- 4. Compare data with a provincial/national/international benchmark**
- 5. Compare results over time**

Lessons Learned/Next Steps

- Questions: Annual revision
- Paper copies: Issue with photocopied vs printed surveys
- Encourage electronic surveying
- Re-assess timelines: Issue date and completion date
- Next survey: Include patient comments?



Measuring the patient experience: how to select
a delivery method for best results and minimal
effort

Tara Kiran, Sam Davie, Morgan Slater, Lisa Miller

Presenter disclosure

- Presenters: Tara Kiran
- Relationships with commercial interests:
 - Grants/Research support: None
 - Speakers bureau/honoraria: None
 - Consulting fees: None
 - Other: None



Presenter disclosure

- Presenters: Sam Davie
- Relationships with commercial interests:
 - Grants/Research support: None
 - Speakers bureau/honoraria: None
 - Consulting fees: None
 - Other: None



Presenter disclosure

- Presenters: Morgan Slater
- Relationships with commercial interests:
 - Grants/Research support: None
 - Speakers bureau/honoraria: None
 - Consulting fees: None
 - Other: None



Presenter disclosure

- Presenters: Lisa Miller
- Relationships with commercial interests:
 - Grants/Research support: None
 - Speakers bureau/honoraria: None
 - Consulting fees: None
 - Other: None



Disclosure of commercial support

- This program has received no financial or in-kind commercial support
- There are no other potential commercial conflict(s) of interest



Mitigating potential bias

- N/a

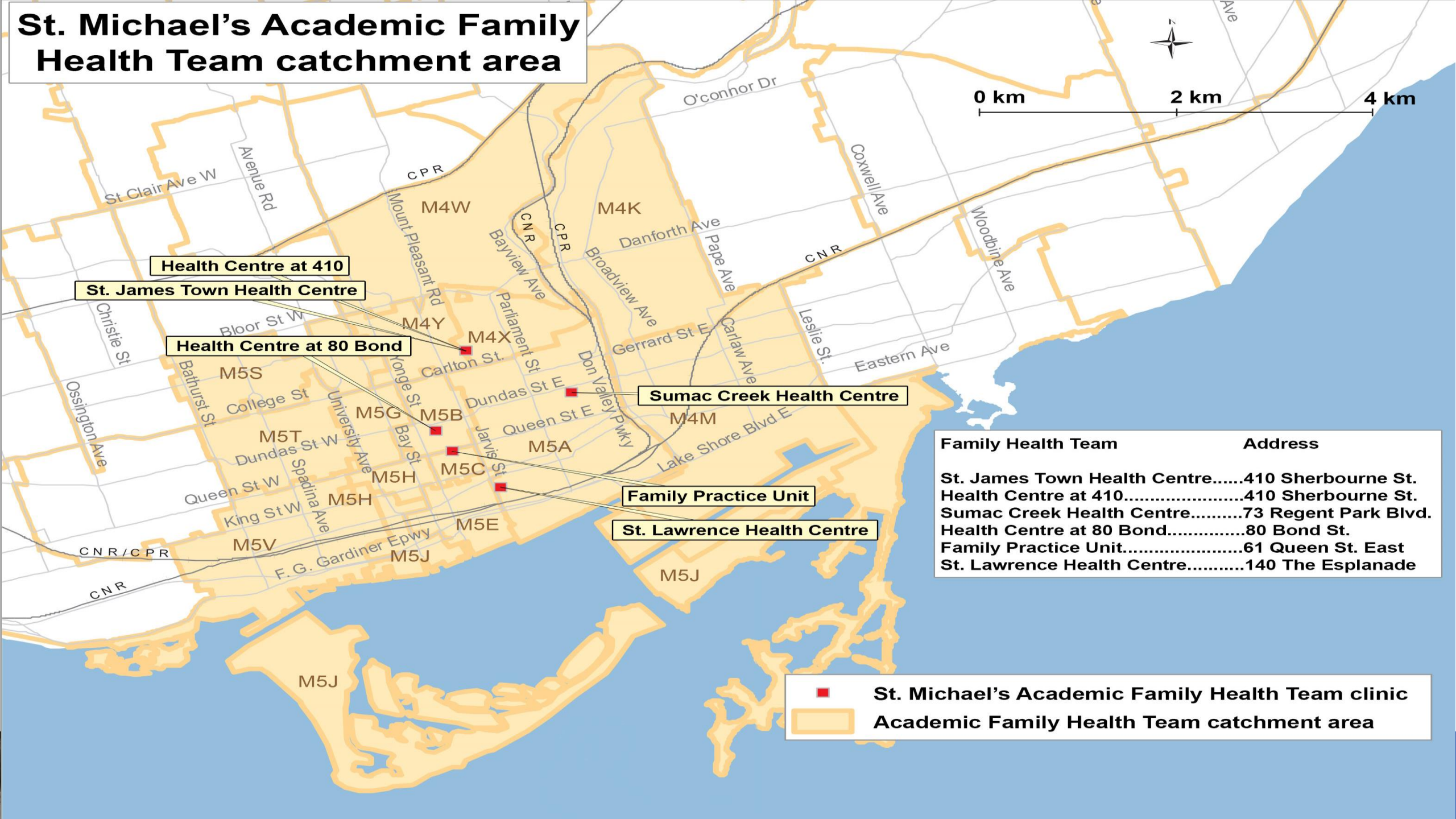


Outline

- Share how we conduct our patient survey
- Compare results of the same survey conducted by email and in the waiting room
- Reflect on challenges of presenting data back to staff to drive QI initiatives



St. Michael's Academic Family Health Team catchment area



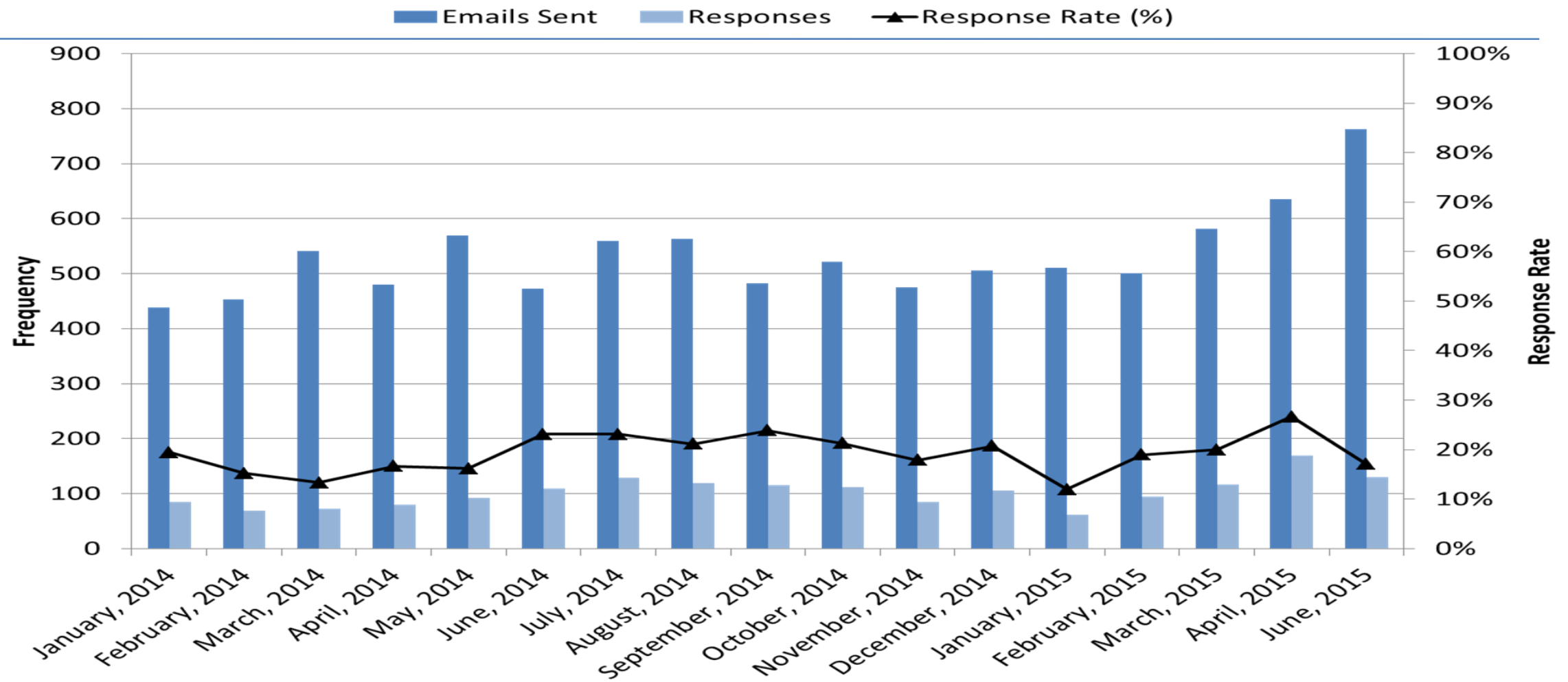
Family Health Team	Address
St. James Town Health Centre	410 Sherbourne St.
Health Centre at 410	410 Sherbourne St.
Sumac Creek Health Centre	73 Regent Park Blvd.
Health Centre at 80 Bond	80 Bond St.
Family Practice Unit	61 Queen St. East
St. Lawrence Health Centre	140 The Esplanade

■ St. Michael's Academic Family Health Team clinic
 Academic Family Health Team catchment area

Our inspiration



SMHAFHT Patient Experience Survey Response Rate



In an average month:
-The survey is sent to about 530 patients
-About 100 patients complete the survey (19%)



We used standard commonwealth questions...

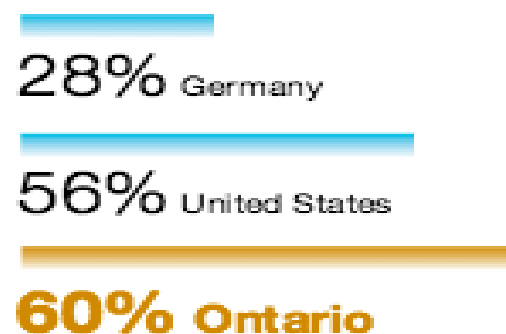
Most Ontarians are not able to see their primary care provider promptly when they are sick

Nine out of 10 Ontarians have a regular primary care provider which is good news, but



60% of Ontarians are unable to see their primary care provider on the same day or next day when they are sick

How do we measure up?*



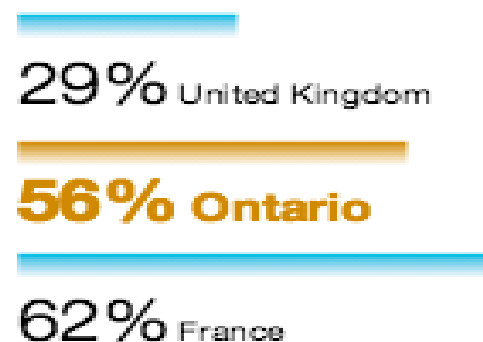
*Data source: 2013 Commonwealth Fund International Health Policy Survey.



56%

of Ontarians have difficulty accessing primary care on evenings or weekends

How do we measure up?*



Measuring Up: HQO's 2014 Yearly Report



...but also wanted to hear what our patients had to say



We augmented our email survey with a waiting room one



Collect data at every touchpoint.

Multi-mode data collection makes it easy to reach every respondent and maximize response rates. Send out your surveys online through web links, personalized email invitations, social media or website pop-ups, collect data through any mobile device or tablet, gather responses offline, or access targeted respondent panels.



	Email	Waiting Room
Data Collection	<ul style="list-style-type: none"> •Low effort/cost (2h/mo x ~6 mo for 500 responses) 	<ul style="list-style-type: none"> •High effort/cost (2 students x 2 months for 500 responses)
Sampling	<ul style="list-style-type: none"> •All patients with emails sampled over 1 year •Reaches those not in clinic •Favours IT-savvy patients •Requires English proficiency 	<ul style="list-style-type: none"> •Random sample of patients visiting clinic over short period •Only patients visiting clinic •Reaches those not IT savvy •Requires English proficiency
Data Analysis	<ul style="list-style-type: none"> •Data exported into Microsoft Excel from FluidSurveys™ 	<ul style="list-style-type: none"> •Data exported into Microsoft Excel from FluidSurveys™



Comparison of two delivery methods

1. Online survey sent via email
 - Data from January – June 2014
 - 594 completed surveys; response rate 20%
2. In clinic waiting rooms (on tablet computers)
 - Data from July – August 2014
 - 606 completed surveys; response rate 56%

Questions:

- Are patients who respond to an emailed survey representative of practice population?
- Are they different from patients who respond to the survey in the clinic?
- Are the responses different?



Demographic differences.... What would you expect?

Are patients in the waiting room different than those you reach via email?

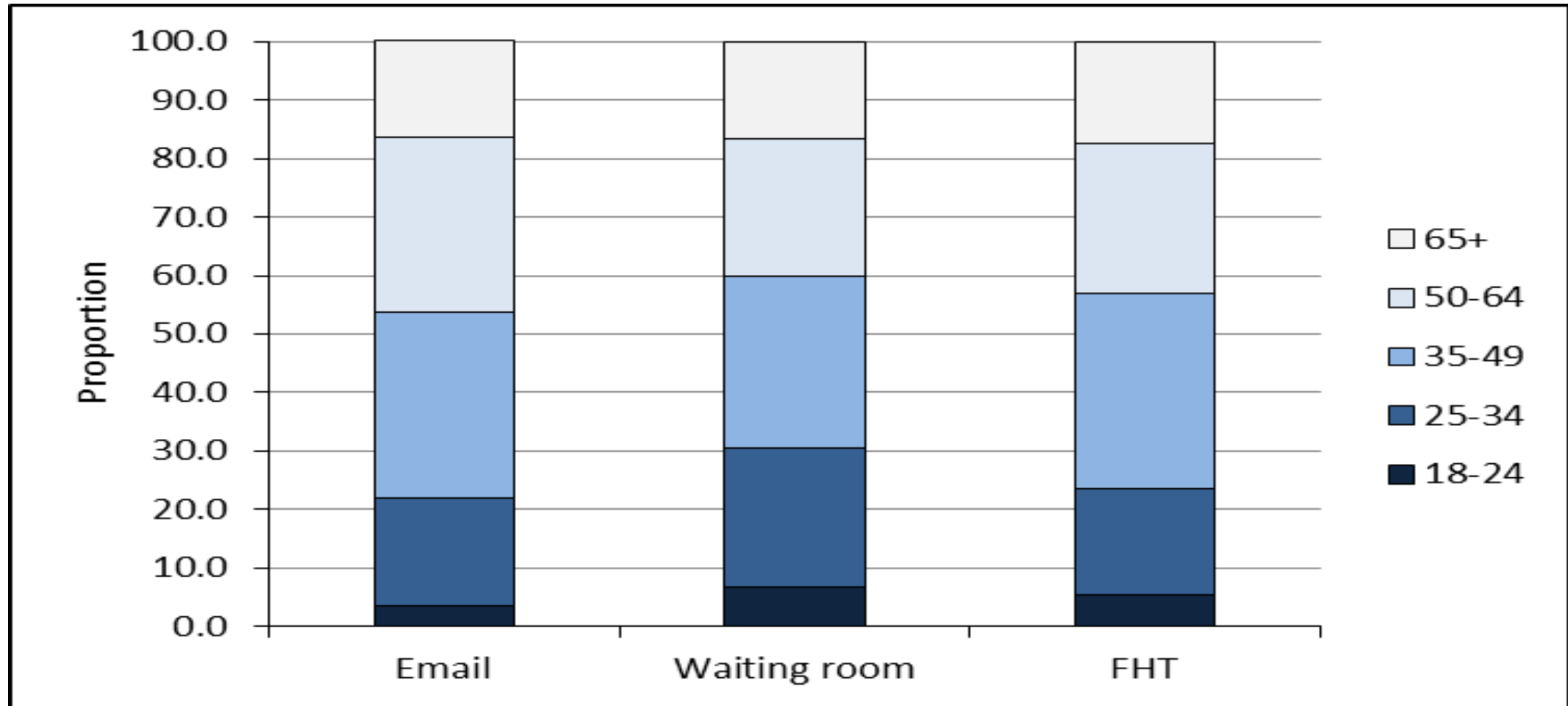
How?

- Older/younger?
- Female/male?
- Higher/lower income?

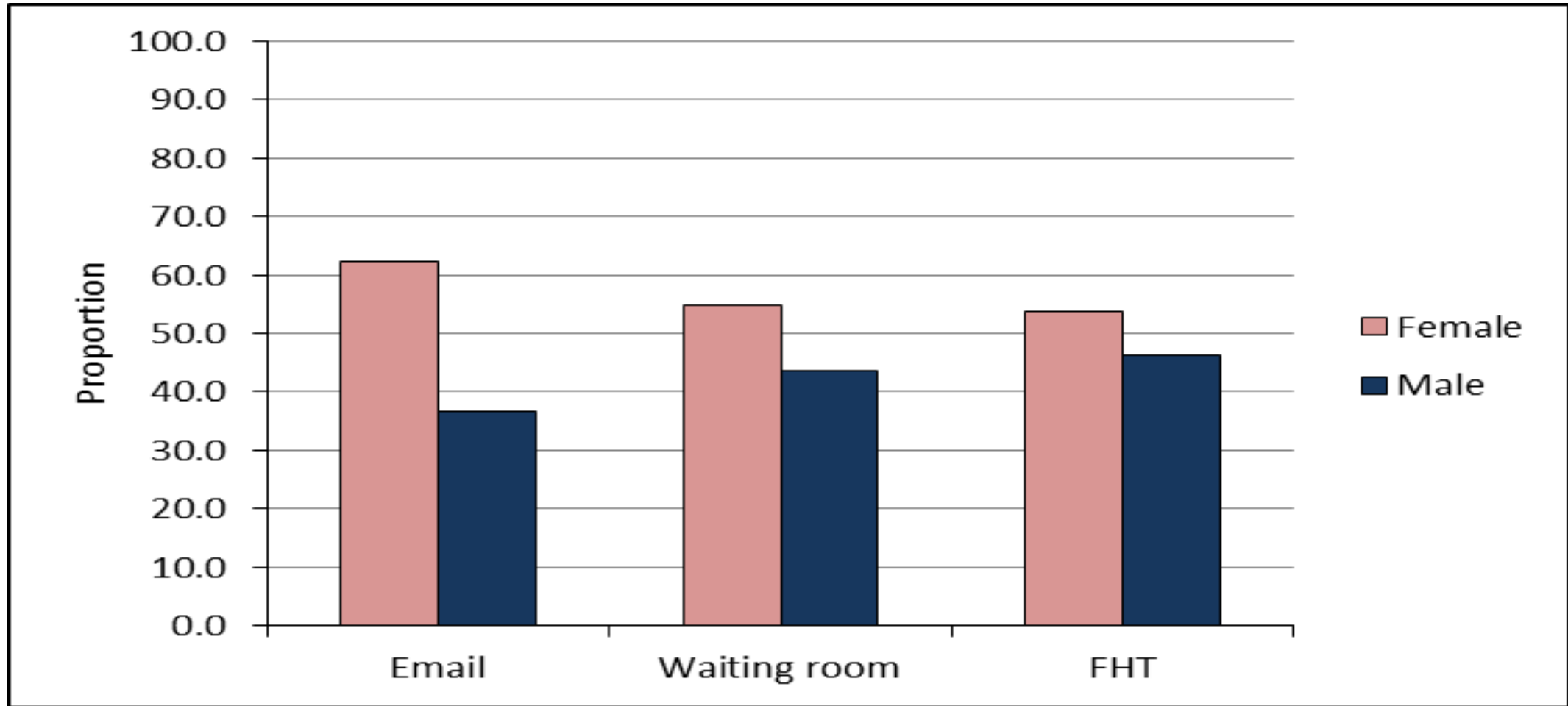
Are the patients you have email addresses for representative of your rostered population?



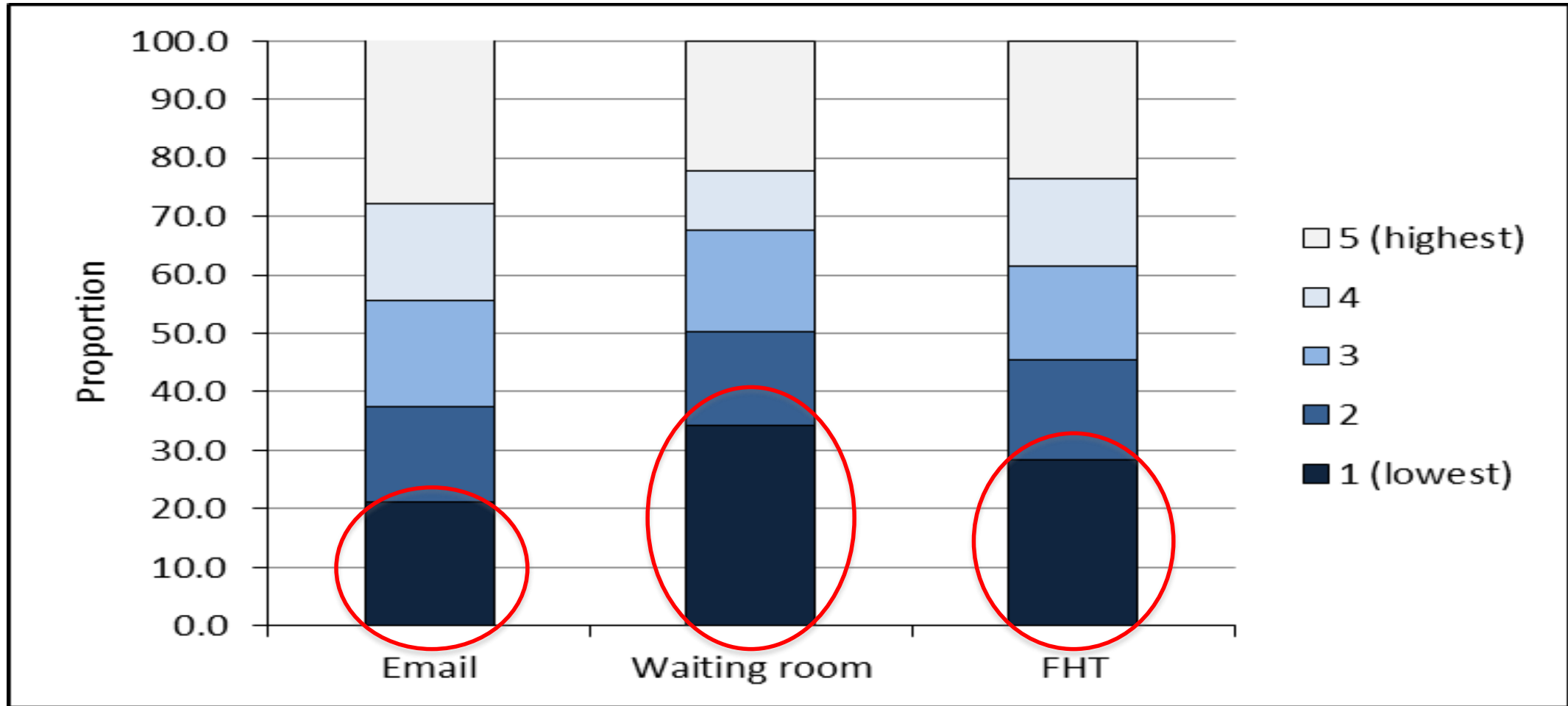
Age



Gender



Income

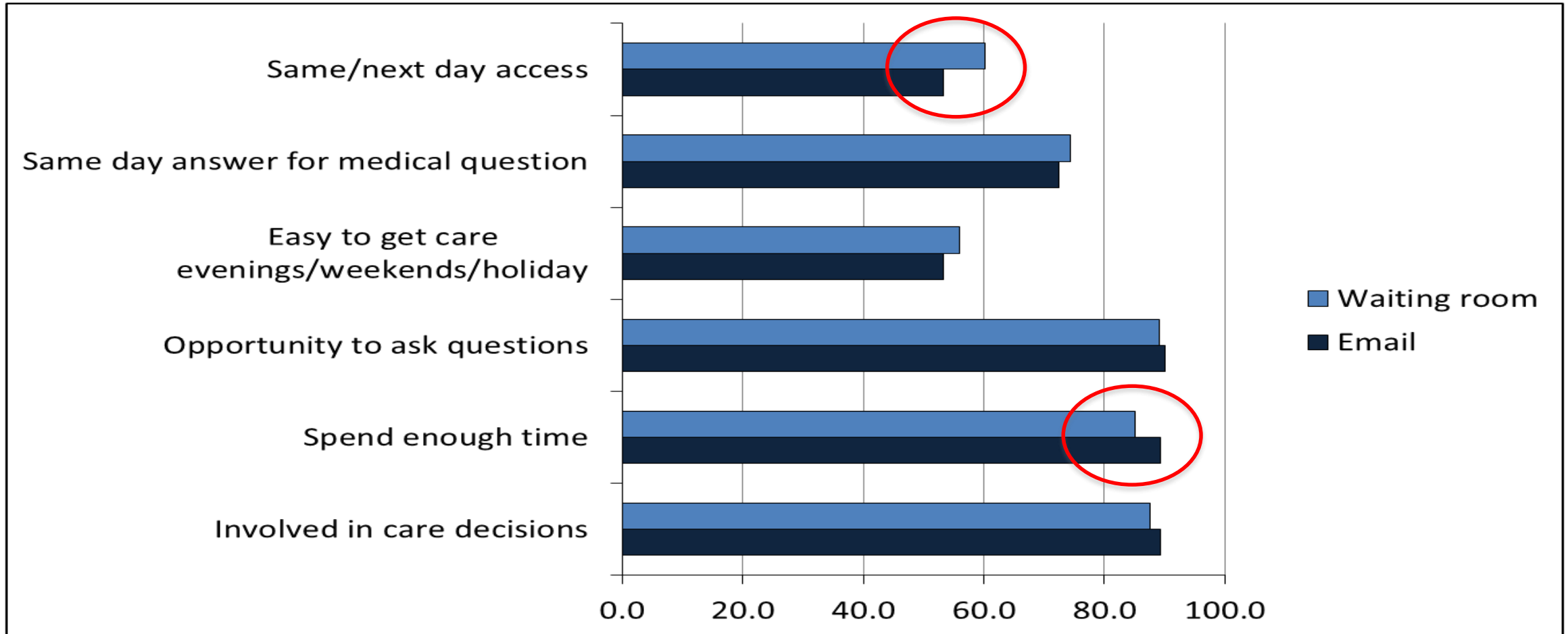


Differences in survey responses.... What would you expect?

Would answers to patient experience questions be different if you were responding online or responding in the waiting room?



Responses to access and patient-centredness questions



What we do now...

Dear Patient,

At the St. Michael's Hospital Academic Family Health Team, we are committed to providing you with the best possible patient experience. Note that our Family Health Team includes these sites:

- Family Practice Unit at 61 Queen**
- Health Centre at 80 Bond**
- Health Centre at 410 Sherbourne**
- St. James Town Health Centre**
- St. Lawrence Health Centre**
- Sumac Creek Health Centre**

To improve our services, we are sending a survey to all of our patients to get their feedback on how we can do better. You are receiving this survey because either you or your family member is a patient with the St. Michael's Hospital Academic Family Health Team and has a birthday this month.

Please take five minutes to tell us about your care experience.



Question

What types of questions do you include in your patient experience survey?

1. Multiple choice (closed-ended) only
2. Open-ended (free text) only
3. Both closed-ended and open-ended questions



Question

At SMHAFHT, we use

1. Multiple choice (closed-ended) only
2. Open-ended (free text) only
3. **Both closed-ended and open-ended questions**



Analyzing Data

	Quantitative	Patient Comments
Easy	✓	✗
Quick	✓	✗
Breadth	✓	✗
Depth	✗	✓

You need both!



Question

When we report our survey results, we (check all that apply):

1. Compare data from different physicians
2. Compare data from different clinics/sites within our FHT
3. Compare data from different FHTs
4. Compare our data with a provincial/national/international benchmark
5. Compare results over time



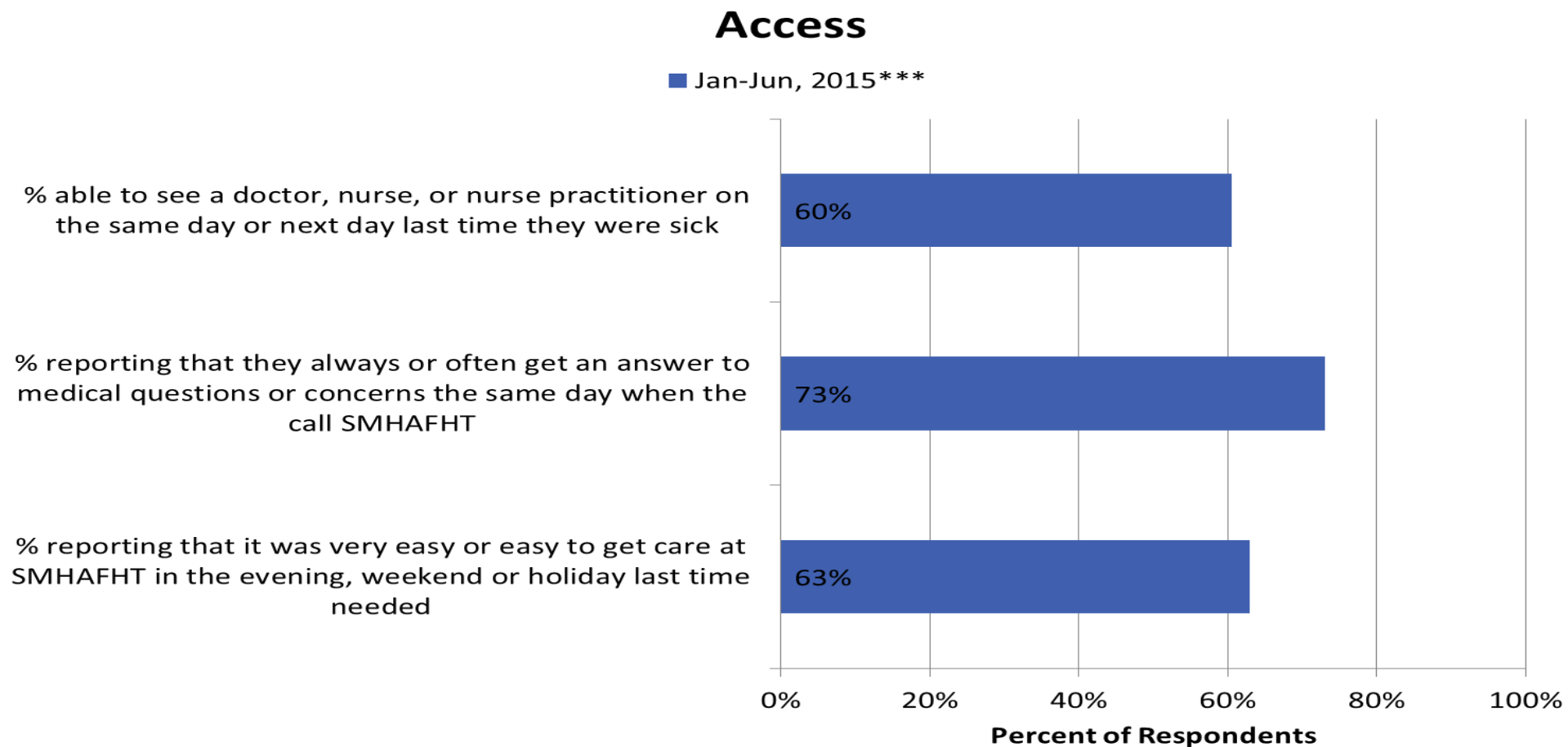
Question

At SMHAFHT, we:

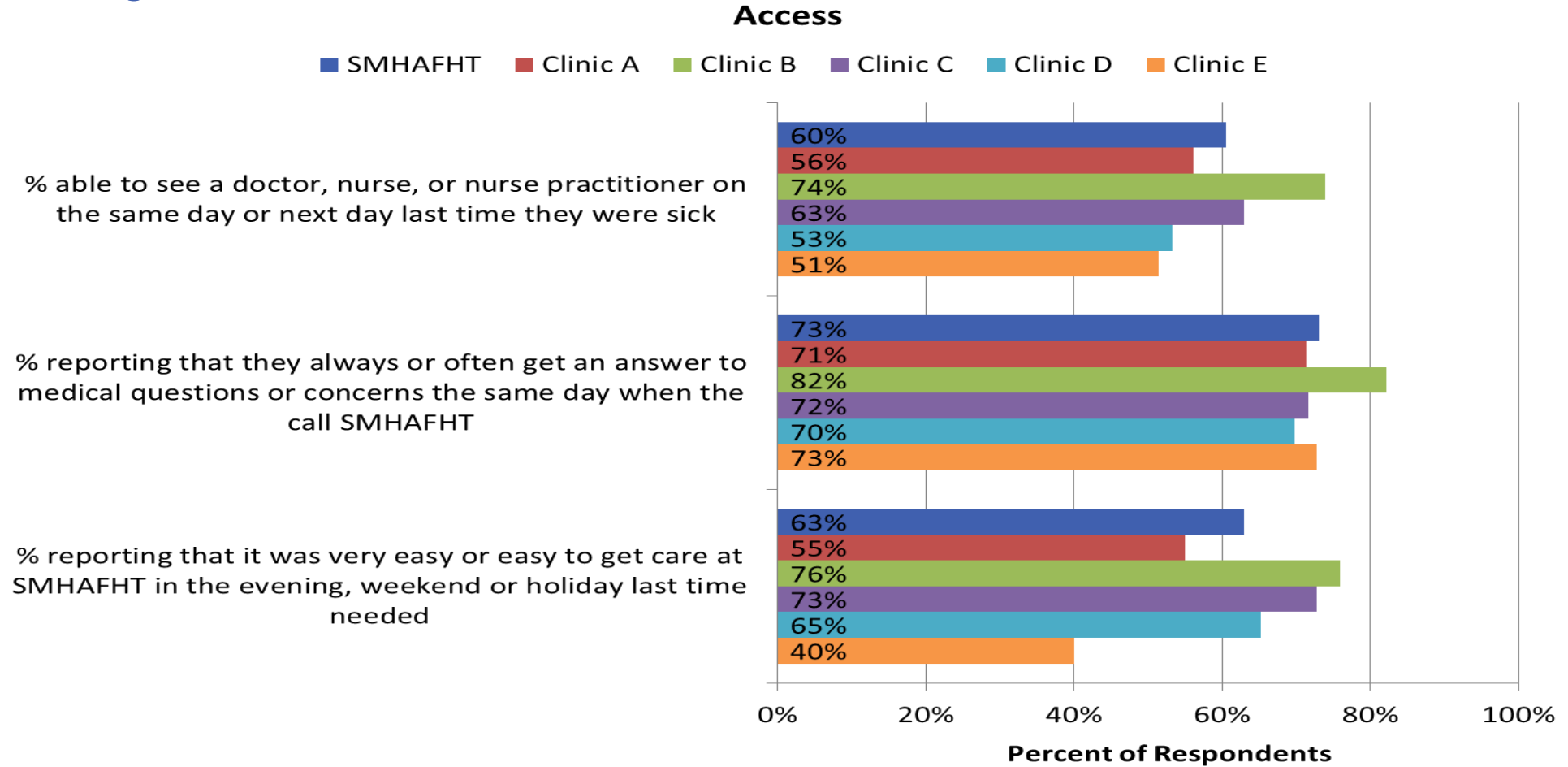
1. Compare data from different physicians
2. **Compare data from different clinics/sites within our FHT**
3. Compare data from different FHTs
4. **Compare our data with a provincial/national/international benchmark**
5. **Compare results over time**



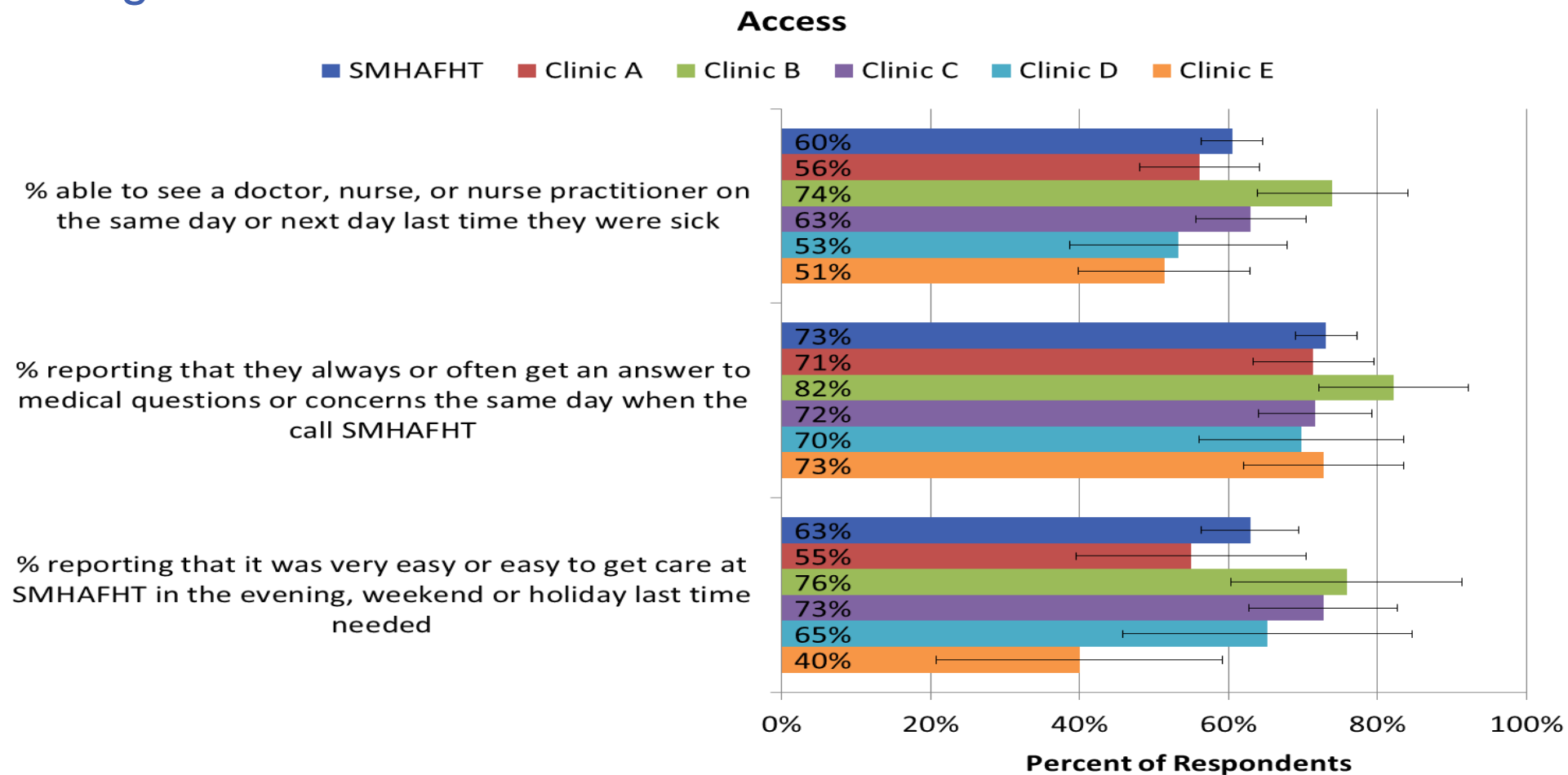
Presenting to Staff



Presenting to Staff



Presenting to Staff



Presenting to Staff

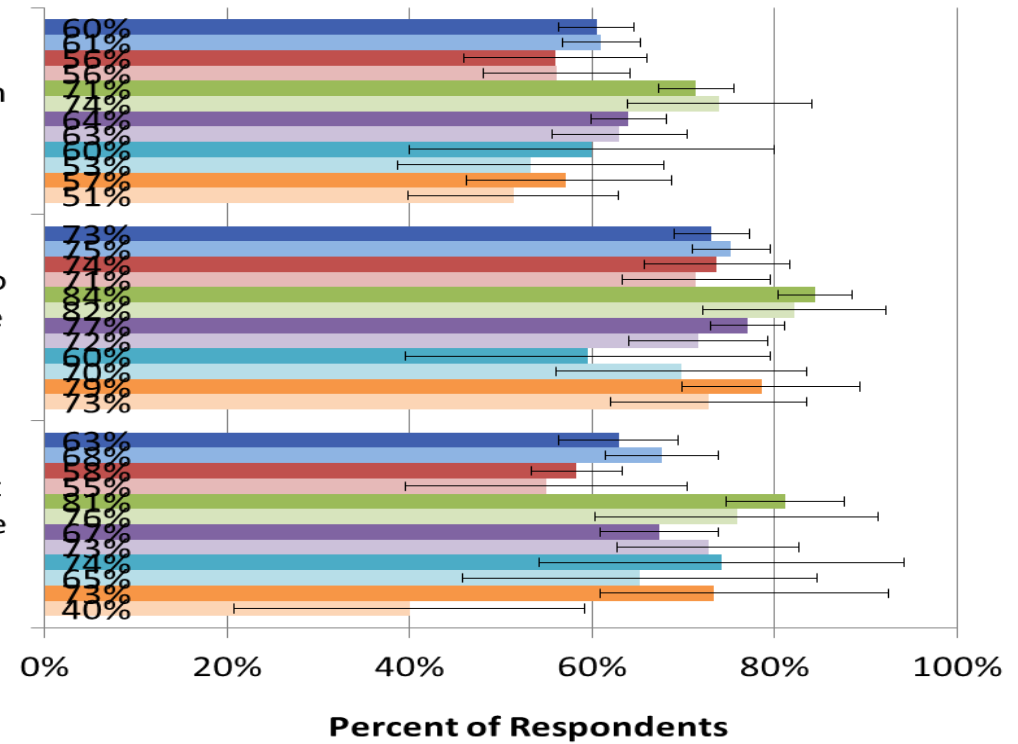
Access



% able to see a doctor, nurse, or nurse practitioner on the same day or next day last time they were sick

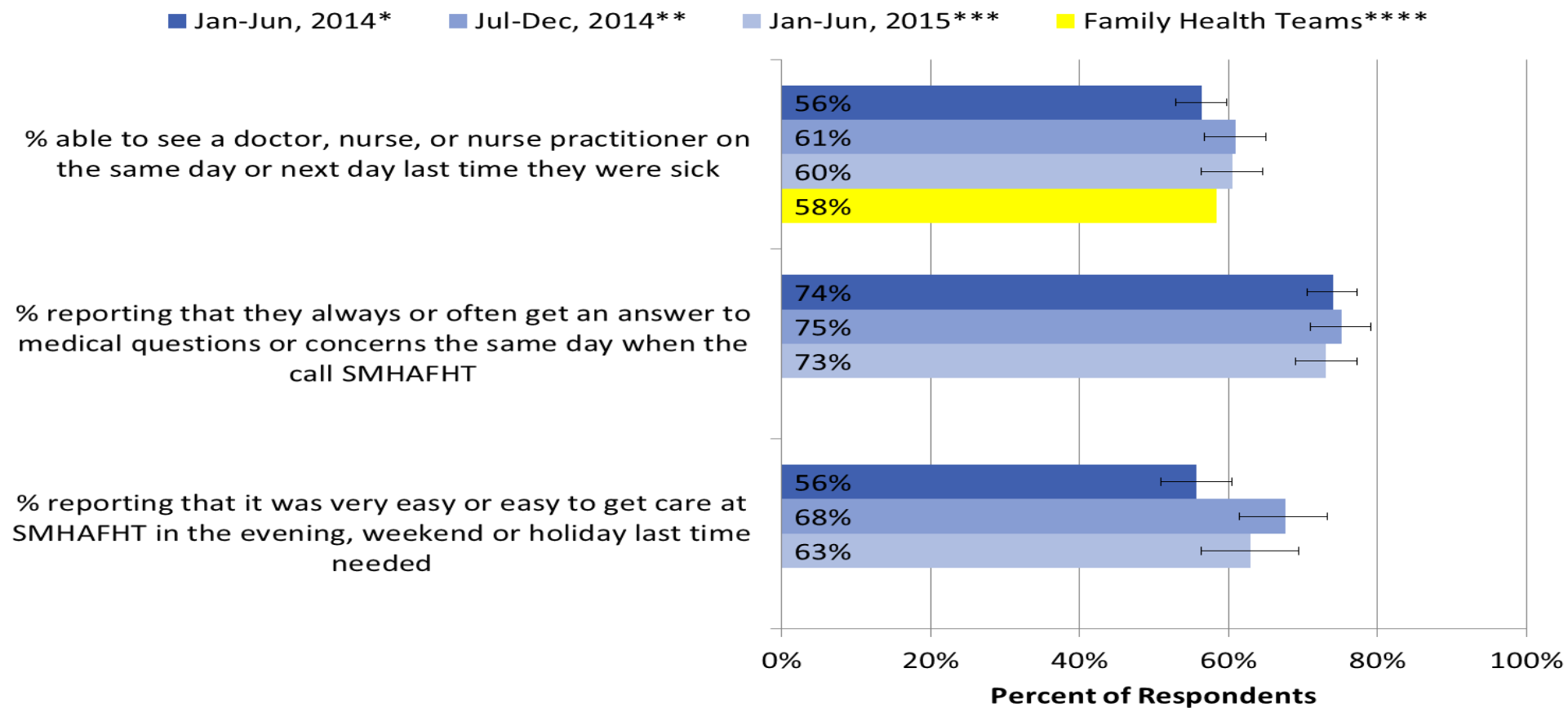
% reporting that they always or often get an answer to medical questions or concerns the same day when the call SMHAFHT

% reporting that it was very easy or easy to get care at SMHAFHT in the evening, weekend or holiday last time needed



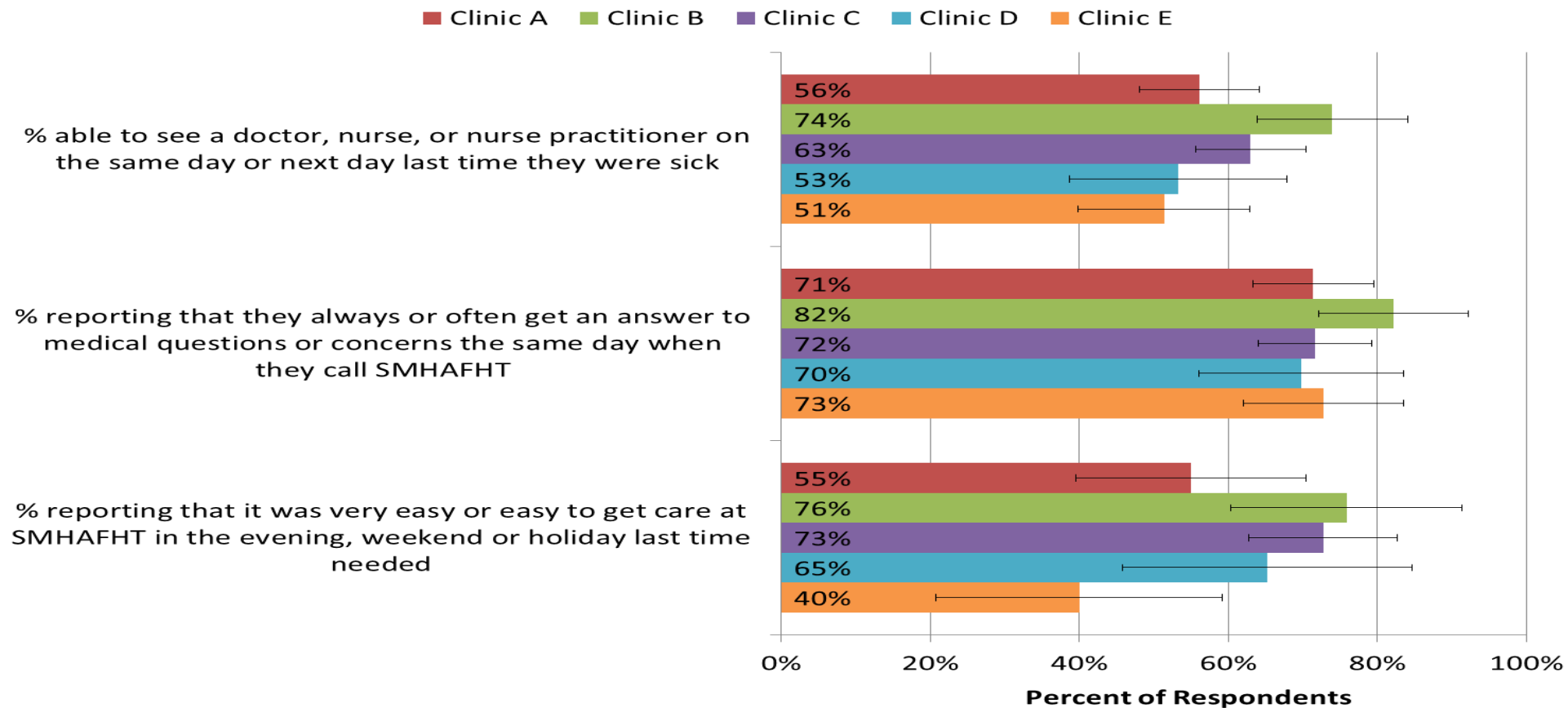
Presenting to Staff

SMHAFHT Access



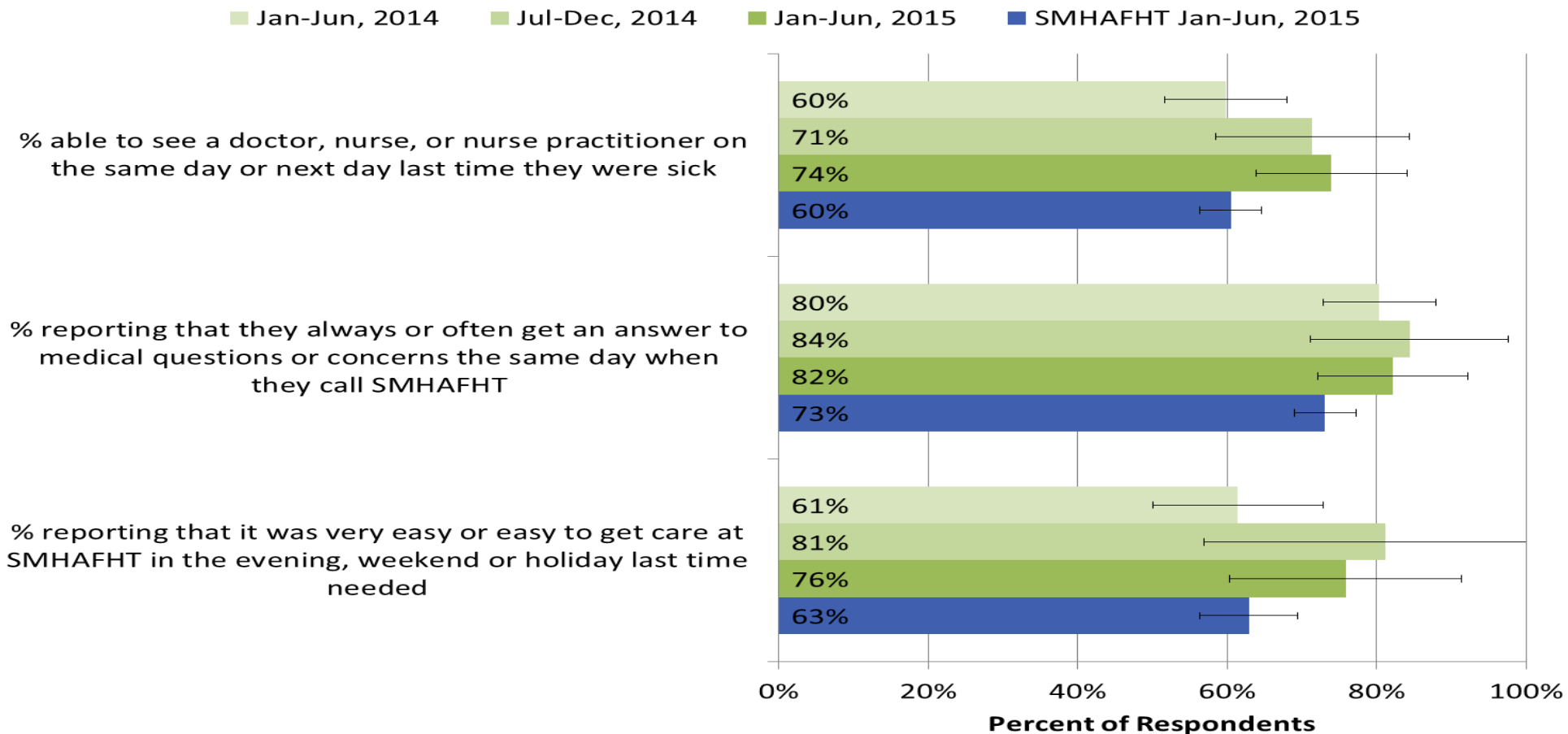
Presenting to Staff

SMHAFHT Access by Site - January-June, 2015



Presenting to Staff

Clinic B Access Over Time



Presenting to Staff

“I appreciate that I can get a same-day appointments, and the staff are friendly and professional.”
(Clinic A)

“Availability and quality of physician. I rarely have to wait more than few days to see my doctor and when she is not available, I have the option to see another one quickly.”
(Clinic C)

“You are always seeing on time without an appointment and they are always knowledgeable.”
(Clinic B)

“seen same day leading to prompt problem resolution”
(Clinic D)

“The ability to get an app't when I need one. I appreciate the fact that if my MD is away I can still be seen by another team member.”
(Clinic E)



Key Messages

- Emailing patients a web-based survey during their birth month is a low-cost, low effort method for obtaining regular patient experience feedback
- Patients responding by email are less likely to live in low income neighbourhoods and differences in patient demographics may influence your patient responses
- Combing open-ended patient comments with quantitative data can provide clinicians with rich feedback and help engage them in QI initiatives





Ellie Kingsbury
ellie.kingsbury@esfam.ca

Tara Kiran
tara.kiran@utoronto.ca

Sam Davie
davies@smh.ca

Morgan Slater
slaterm@smh.ca

Lisa Miller
millerli@smh.ca