

“You can’t keep asking what matters to patients but not changing in response to that. If you want to say you care about me, you need to do something about it!”

Objective

Establish numeric patient priorities for primary care performance measurement that reflect the patient-provider partnership.

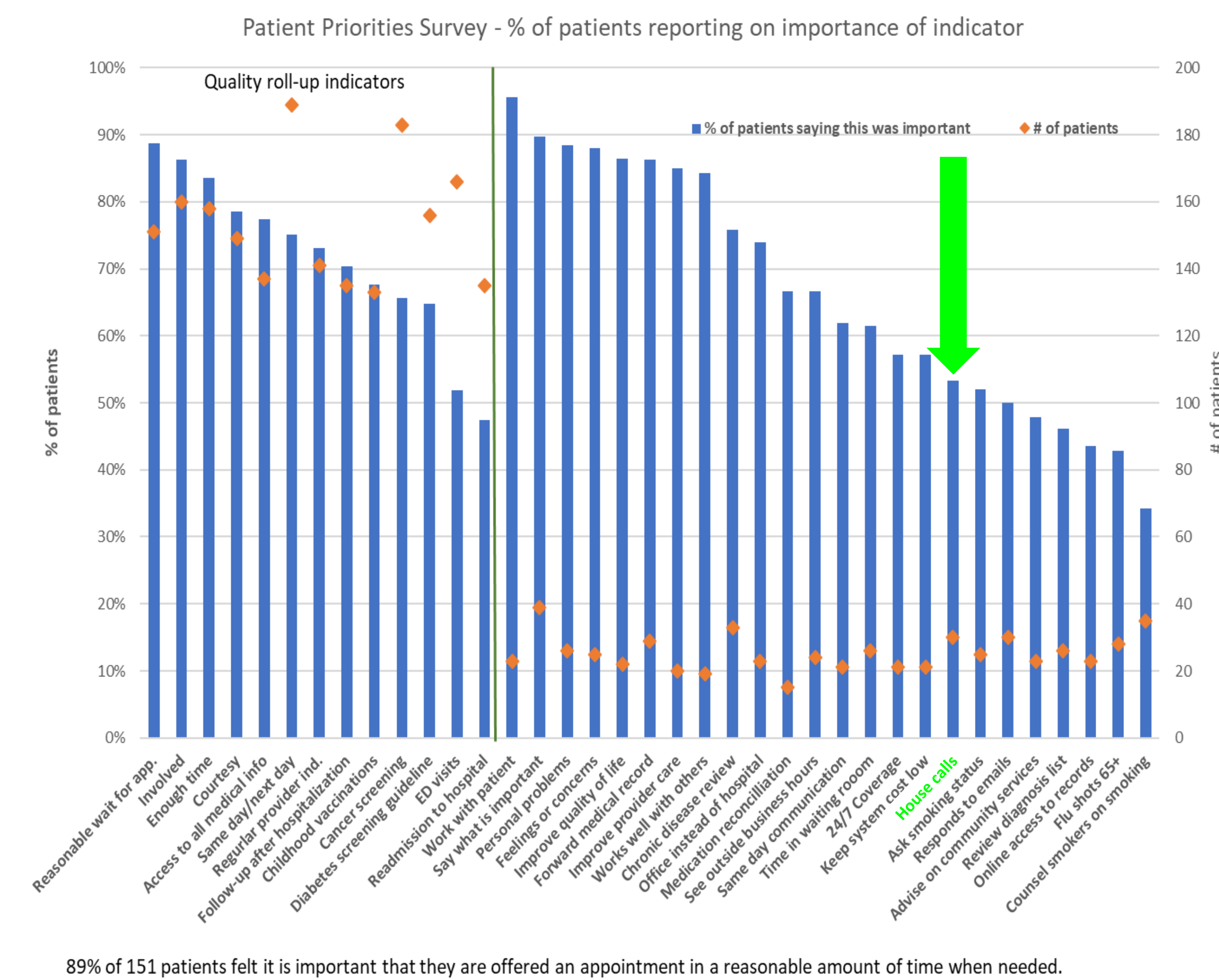
Methods

Patient role: Design questionnaire; guide implementation; interpret and present results.

Survey: Online survey via email from primary care teams and social media from patient advisors and researchers; generate numeric estimates of patient priorities.

Focus groups: Recruited by teams; explore if and how to get numeric data about patient priorities from broader range of patients.

Survey: The numbers



What did patients say?

- So-called ‘soft’ indicators are most important in the patient-provider partnership – consistent with other efforts (1, 2).
- Sicker patients had different priorities – e.g., house calls were more important to them.

Which patients said it?

- 250 patients.
- Mostly middle-aged, healthy, employed women, consistent with other efforts (3).

How did they say it?

- A really difficult questionnaire, hence the decision to follow up with focus groups.

Focus groups: The story *inside* the numbers

What did patients say?

- 1 “Having that caring gut relationship that [your provider] really wishes you well and is in your court.... I think it’s critical” and “I might be more likely to take my meds if I thought they really cared.”
- 2 Patient priorities regarding their relationship with providers must be measured on par with other performance indicators (i.e., numerically).
- 3 “Talk to us!” (vs. surveys) to get broader demographic representation.

Which patients said it? 15 patients in 3 Ontario communities.

“Patients are smart -- they know if you are faking it”

Can we change to measure what *really* matters to patients?

Few of Ontario’s common primary care measures (4) are among the highest priorities of patients.



Can we give up the myth that most of our common primary care measures matter to patients?

The patient-provider relationship is crucial to good patient experiences AND clinical outcomes.



Can we add patient-provider relationship measures to the “hard” data used to measure primary care performance?

Sicker patients want different things from their providers but because they tend not to be part of patient engagement activities, it’s hard to reflect their needs in measurement.



Can we do more to hear from patients who tend not to talk to us, even (or especially) if it’s hard to do?

1: Boivin, A. et al., What Are the Key Ingredients for Effective Public Involvement in Health Care Improvement and Policy Decisions? A Randomized Trial Process Evaluation, The Milbank Quarterly, Vol. 92, No. 2, pp. 319-350.
2: Etz, R.S. et al., Stakeholder Agreement Regarding Primary Care “Measures That Matter”, NAPCRG annual conference, 2016
3: Canadian Foundation for Healthcare Improvement, QUALICOPC Canada — A focus on the aspects of primary care most highly rated by current patients of primary care practices, 2014

