

2018 Patient Satisfaction Data - HCHN Governance Council Briefing

1. HRSA REQUIREMENTS – PATIENT SATISFACTION

QI/QA program must have a plan to measure and evaluate patient satisfaction:

- Frequency: no specific language. Component of periodic QI/QA assessments.
- Methods: grantee determines and also participates in the HCPS*
- Targets: none set by HRSA.

OSV Compliance Check:

1. Sample of patient satisfaction results or other forms of patient input
2. Evidence that patient satisfaction data is shared with governing board

*HRSA sponsors the Health Center Patient Survey (HCPS) approximately every 5 years. Self-reported data on: demographics, health conditions, access and utilization, satisfaction

2. DEFINITIONS

Patient Satisfaction:

Self-reported data on whether personal expectations were met.

Patient Experience of Care:

Objective data that encompasses the range of interactions patients have with the health center (e.g. wait times, access to information, and communication with providers). Experience of care is often evaluated with patient safety and effectiveness (e.g. proper diagnosis or medications given and actual wait times).

Terms are often used interchangeably, but they are not the same thing.

3. CURRENT PRACTICES - CONTRACTORS

Monitoring Tools: annual narrative and site visits

- Quantitative: number of clients who participated in at least one program assessment, planning, or evaluation activity
- Qualitative: brief description of how programs engaged clients. Includes lessons learned, specific demographics (if known), and tools utilized.

Results: 406 patients participated in at least one activity*

Methods: surveys, anonymous comment cards, focus groups, advisory board activities (vary by site and population).

* HCHN sets individual patient engagement targets/learning objectives with each contractor. Range from 5% to 20% of unduplicated patients.

HOW CONTRACTORS USED FINDINGS in 2018

The majority of contractors changed their hours, sites, and/or services as a result of analyzing patient engagement data **AND** visit/demographic data.

Examples include:

- ✓ Neighborcare's Youth Clinic added morning hours at New Horizons and started monthly STI screening outreach
- ✓ Neighborcare's REACH nursing program adjusted prescribing processes for Medication Assisted Treatment
- ✓ ETS-REACH used information to inform the creation of a mentor/peer support group and to start groups by and for African American men and women
- ✓ HMC used information to tailor training/staff professional development needs (e.g. updates on foot care for complex diabetic patients)

4. CURRENT PRACTICES –PUBLIC HEALTH

Self-administered survey implemented at PH clinics on a quarterly basis.
Not specific to patients living homeless but self-reported status is asked.

Are you homeless or do you have an unstable housing situation, such as staying in a shelter, car, tent, temporary housing, or couch surfing?		
Response	Number	Percent
Yes	236	14%
No	1,062	62%
Refused	78	5%
Blank	326	17%
Total Respondents*	1,702	100%

* Total for calendar year 2018

Standard Patient Satisfaction Tool - Public Health

Questions: Likert scale (strongly agree to strongly disagree) and open-ended

1. I am happy with my visit today.

10. I am happy with the interpretation services.

2. Happy with process to schedule appointment.

11. I would recommend this clinic to my friends and family.

3. The hours the clinic is open works for me

12. What is most important to you when you choose a clinic (cost, being treated respectfully, confidentiality, privacy, hours, receiving good care, location, safety, other)

4. The length of time I waited today was okay.

13. What did we do well during your visit?

5. I received the services I wanted today.

14. What can we do to improve our services?

6. I was treated with respect.

Program specific questions: family planning and STD

7. My health care provider explained resources that are available to help with my needs.

Sample comments:

"I wish there was more of your clinics around."

8. Instructions were easy to understand.

"My mouth is a mess and you didn't make me feel bad about it."

"Could you improve your telephone service."

9. My questions were answered.

"Fix the door between the waiting room and exam rooms."

"Stay open later."

"Very satisfied with services."

2018 sample results from patients living homeless – Public Health programs

Happy With Visit

(Q1) Visit	S2	S3	S4
Agree	48	51	61
BLANK	2	3	6
Disagree	4	2	2
Neutral	7	7	12
Strongly Agree	121	112	154
Strongly Disagree	2	2	1
Grand Total	184	177	236

65% (n=154) strongly agree

Received Services Wanted Today

(Q5) Services	S2	S3	S4
Agree	48	50	65
BLANK	3	3	4
Disagree	2	1	
Neutral	8	11	11
Strongly Agree	122	112	155
Strongly Disagree	1		1
Grand Total	184	177	236

66% (n=155) strongly agree

Happy With Hours Clinic Open

(Q3) Clinic Hours	S2	S3	S4
Agree	56	58	79
BLANK		3	1
Disagree	4	3	1
Neutral	12	8	6
Strongly Agree	111	105	147
Strongly Disagree	1		2
Grand Total	184	177	236

62% (n=147) strongly agree

Treated With Respect

(Q6) Respect	S2	S3	S4
Agree	35	38	55
BLANK	1	2	4
Disagree	1	1	2
Neutral	6	4	
Strongly Agree	140	132	174
Strongly Disagree	1		1
Grand Total	184	177	236

74% (n=174) strongly agree

Length of Time Waited

(Q4) Time Waited	S2	S3	S4
Agree	46	57	64
BLANK	3		6
Disagree	9	3	5
Neutral	13	23	13
Strongly Agree	111	92	145
Strongly Disagree	2	2	3
Grand Total	184	177	236

61% (n=145) strongly agree

Health Care Provider Explained Resources

(Q7) Provider	S2	S3	S4
Agree	45	45	65
BLANK	3	3	9
Disagree	2	1	
Neutral	14	9	10
Strongly Agree	119	119	151
Strongly Disagree	1		1
Grand Total	184	177	236

64% (n=151) strongly agree

5. SUMMARY LESSONS LEARNED & ACTION ITEMS

- Limitations with traditional tools (surveys and focus groups) are well-documented. Contractors appreciate flexibility with methods and technical assistance.
- Majority of patient satisfaction data continues to be relational (e.g. individual nurse follow-up with a patient who reports challenges).
- Site specific strategies that focus on broader engagement in care and community hold the most promise (e.g. affinity groups, advisory group).
- HCHN has increased patient experience report backs to twice per year for contractors (e.g. added a July deliverable for mid-point progress check).
- HCHN's next Community Needs Assessment will include targeted listening sessions at Public Health clinics to increase patient feedback (Sept-Nov. 2019)
- Public Health managers and staff review results on a quarterly basis, identify trends, and assign follow-up items.