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Introduction

Administrators of healthcare plans face challenges in collating & reporting clinical outcomes data. This is due to the nature of administrative claims data that is skewed towards clinical processes that under-score traditional activity-based fee for service billing.

Patient engagement data collected through patient experience surveys & patient reported outcomes tools therefore offers a distinct advantage to healthcare funders towards achieving quality improvement & health system performance goals.

We use patient experience data to stimulate health system improvement through publishing a patient experience scorecard at provider level.

After 5 years of publishing patient experience scores at hospital level, we sought to understand whether the publication of the results had indeed achieved the goal of improvement in performance.

Method

- Implemented a patient experience survey in 2010 that collated responses to 22 questions grouped into 8 categories based on the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) methodology.
- Survey conducted through email to patients > 18 years within 6 weeks of discharge from an acute general hospital.
- Results are case adjusted based on:
 - Self-rated health

Language spoken

Age

Gender

- Response lag
- Service line
 - Overnight vs Day admission
- Education level

For the first 5 Years: Results reported to hospitals for the purpose of improvement. Subsequently hospital level results were reported to physicians,



- The 5-year period prior to publication of results (2010-2014) presented an average top box score of 56.8% for the summary score aggregated across the 8 survey categories.
- In the 5-year period that followed publication (2015-2019) the average top box score for the summary score across all categories increased to 61.7%.
- 8.6% increase in the average summary score in the two five-year

2015

2010

2015 onwards: Hospital level results were published on the Discovery website for members to engage with. Survey results were published as aggregated patient experience scores.

Website Publication

Goals:

- 1) Decision aid to empower members with meaningful information to make informed decisions about healthcare choices.
- 2) Strengthening accountability for performance of the healthcare system.

Website presentation of results:

- 1) Overall rating of hospital stay for all hospitals nationally.
- 2) Survey summary scores that capture the best possible (top box) scores for all survey categories.
- 3) Drill downs included, providing category scores at hospital level.
- 4) Results are supported by a description of the reporting methodology.

comparator periods.



- Improvement in scores in the period post-publication compared to pre-publication.
- Categories with the highest increase in improvement:
 Overall rating (question 21) increase of 22.7%, discharge information 17.0% increase and medication information with an 20.8% increase.
- Categories with the lowest improvement, or no improvement: Hospital environment decrease of 0.2%, doctors increase of 4.8%, responsiveness of staff increase of 3.7%.

Conclusion

Patient engagement is a defining pillar of quality improvement, and is an important means of complementing clinical outcomes data. While empowerment is a direct consequence of patient engagement, there are important secondary implications of patient engagement that may contribute to strengthening the performance of healthcare systems through improvement. Through a public reporting strategy involving a website publication of patient experience scores over a five-year period, we **observed improvement in patient experience scores**. Improvement in patient experience categories such as discharge information and medication information have important positive implications for clinical outcomes such as readmissions, which we intend to test in subsequent analysis.