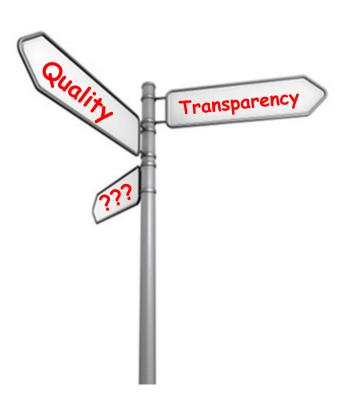


Dresden Medical School, Department of Public Health

Patient assessments in surgery:

Variables which contribute most to increase satisfaction



Joachim Kugler, Tonio Schoenfelder, Tom Schaal, Joerg Klewer

Presenter Disclosures

Presenter: Prof. Dr. Joachim Kugler

(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose

1 Background

- Patient assessments important outcome measures, e.g., health care providers use patient satisfaction ratings for internal evaluations of their own performance as complement to other methods of quality assessment and assurance
- Hospital Value-Based Purchasing Program: patient evaluations of hospital care became even more relevant since satisfaction ratings have been linked to Medicare reimbursement

A hospital's Total Performance Score for the FY 2013 Hospital VBP Program:

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Total (0.70 x Total Clinical Performance = Process of Care Domain + Experience of Care Domain Performance Score)

Output

(0.30 x Total Patient Experience of Care Domain Performance Score)
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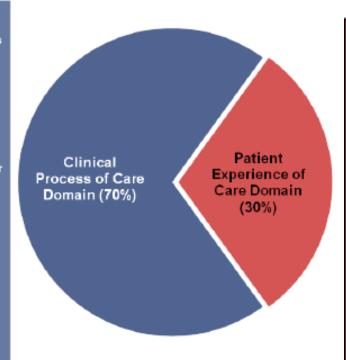
Source: Frequently Asked Questions, Hospital Value-Based Purchasing Program, March 2012, www.CMS.gov

1 Background

Hospital Value-Based Purchasing

12 Clinical Process of Care Measures

- 1. AMI-7a Fibrinolytic Therapy Received Within 30 Minutes of Hospital Arrival
- AMI-8 Primary PCI Received Within 90 Minutes of Hospital Arrival
- 3. HF-1 Discharge Instructions
- 4. PN-3b Blood Cultures Performed in the ED Prior to Initial Antibiotic Received in Hospital
- PN-6 Initial Antibiotic Selection for CAP in Immunocompetent Patient
- 6. SCIP-Inf-1 Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision
- 7. SCIP-Inf-2 Prophylactic Antibiotic Selection for Surgical Patients
- 8. SCIP-Inf-3 Prophylactic Antibiotics
 Discontinued Within 24 Hours After Surgery
- SCIP-Inf-4 Cardiac Surgery Patients with
 Controlled 6AM Postoperative Serum Glucose
- 10. SCIP-Card-2 Surgery Patients on a Beta Blocker Prior to Arrival That Received a Beta Blocker During the Perioperative Period
- 11. SCIP-VTE-1 Surgery Patients with Recommended Venous Thromboembolism Prophylaxis Ordered
- 12. SCIP-VTE-2 Surgery Patients Who Received Appropriate Venous Thromboembolism Prophylaxis Within 24 Hours



8 Patient Experience of Care Dimensions

- 1. Nurse Communication
- 2. Doctor Communication
- 3. Hospital Staff Responsiveness
- 4. Pain Management
- 5. Medicine Communication
- 6. Hospital Cleanliness & Quietness
- 7. Discharge Information
- 8. Overall Hospital Rating

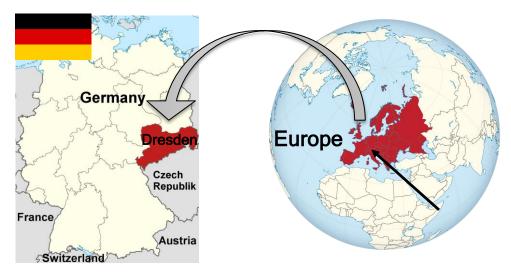
2 Study objective

- > For hospitals important to understand:
- which factors are the most relevant with regard to patient satisfaction and
- which factors associated with patients' assessments are alterable by different allocation of resources.

Aim of this study

 To assess which aspects of the hospital stay contribute most to increase satisfaction of surgical patients





- Study data were obtained from
 - 55 hospitals
 - in the area of Dresden (federal state Saxony)
 - eastern part of Germany, total population of 1.65 million (2011)

- Analyzed study sample included 4.293 surgical inpatients aged
 15 years and older who were discharged in 2012
- Hip and knee replacement surgery
- Gall bladder operation
- Carotid artery surgery
- Pacemaker implantation

Analyzed study sample included 4.293 surgical inpatients aged
 15 years and older who were discharged in 2012

> Hip and knee replacement surgery

	Germany	Rank compared with OECD countries	OECD average
Hospital discharges for major diseases			
Diseases of the circulatory system, per 1 000 population	35.7	1	19.6
Cancer, per 1 000 population	24.5	2	13.5
Procedures carried out as inpatient cases (involving an overnight s	tay in hospital)		
Cataract surgery per 100 000 population	178	7	118
Tonsillectomy per 100 000 population	157	3	80
Percutaneous coronary interventions (PTCA) per 100 000 population	624	1	177
Coronary bypass per 100 000 population	116	2	47
Appendectomy per 100 000 population	151	7	126
Cholecystectomy per 100 000 population Inguinal and femoral hernia per 100 000 population Prostatectomy (transurethral) per 100 000 males	ost ,favo	urite'	4 0 7
Prostatectomy (excluding transurethral) per 100 000 males	ocedure	in Germa	_
Hysterectomy (vaginal only) per 100 000 females	110	-	113
Caesarean section per 1000 live births	314	9	261
Hip replacement per 100 000 population	295	1	154
Knee replacement per 100 000 population	213	2	122
Breast-conserving surgery per 100 000 females	232	1	108

Г	Bitte zutreffende Ant		in aus	male	n!		[\Box $$	
Umfrage zur Patientenzufr	riedenheit in Sächsischen Krankenh			nhäu	sern		bitte nicht aus	Ulen!		
In welchem Krankenhaus sind Sie im Jahr 2010 bzw. 2011 behandelt worden? (bei mehreren Krankenhausaufenthalten bitte ein Haus auswählen, auf das sich ihre Antworten beziehen) bits nicht ausfüllen!										
Name des Krankenhauses										
2. Sind Sie männlich										
3. Wie ait sind Sie? Jünger als 15 Jahre 21 - 30 Jahre 41 - 50 Jahre 61 - 70 Jahre älter als 80 Jahre										
□ 15 - 20 Jahre □ 31 - 40 Jahre □ 51 - 60 Jahre □ 71 - 80 Jahre										
4. Wie off waren Sie in den vergangenen fünf Jahren in einem Krankenhaus? □ 1 - 2 mai □ 3 - 5 mai □ mehr als 5 mai (□ keinmai)										
5. Durch wen sind Sie in das Krankenhaus eingewiesen worden? (bitte nur eine Antwort ankreuzen)										
☐ Hausarzt ☐ Facharzt ☐ Selbsteinwelsung (ohne ärztliche Einwelsung)										
	gung aus einem anderen									
6. Wie würden Sie ihren Gesund □ ausgezeichnet □ gut	Wie würden Sie ihren Gesundheitszustand vor Einweisung in das Krankenhaus beschreiben? □ ausgezeichnet □ gut □ mittelmäßig □ schlecht									
7. Was war der Grund für Ihre Be	7. Was war der Grund für Ihre Behandlung? (bitte beziehen Sie Ihre Antwort bei mehreren Krankenhausaufenthalten pur auf den Aufenthalt im unter 1. oenannten Krankenhaus)									
☐ Geburfshilfe	Geburtshilfe Herzschriftmacher-implantation Anderer Grund (bitte nennen):									
☐ Künstliches Hüftgelenik ☐ Künstliches Kniegelenik										
☐ Gallenblasen-Operation	☐ Gynākologische Operation									
8. Bitte bewerten Sie ihren Kran		r folg	enden	Gesl	chtsp	unkte	n:			
2=gut, 3=befriedigend, 4=ausrei						traf auf	, ,			
đ=ungenügend)		1	2	3	4	5	6	nicht beurtellen	mich nicht zu	
Wie war die Aufnahme im Kra	_									
Wie waren die Arzfe über Von Krankheitsverlauf informiert?	geschichte und									
We verständlich wurden ihre beantwortet?		_		_		-				٦
Wie schätzen sie die Betreuü (Haben sie sich z.B. genügen	d Zelt genommen?)									
Wie verständlich wurden Sie 0 Informiert?	ber Ihre Operation									
Wie verständlich wurden Sie (Informiert?						_				
Wie verständlich wurden Sie ü Medikamente aufgeklärt?	per einzunenmende									
Wie schätzen Sie Organisation Untersuchungen, z.B. Röntger										
Wie beurtellen Sie die Wahrur Untersuchungen?	ng Ihrer Privatsphäre bei									
Wie wurden Sie auf die Zeit na vorbereitet?	nch Ihrer Entlassung									

- Data set was obtained through a validated, self-administered questionnaire
- Response rate about 24% (Total: n=17.887)
- Questionnaire was sent after discharge
- Participation was completely anonymous and voluntary

- Survey participants were
 - Policy holders of five different health insurances
 - Insurances cover about 85% of the total population
- In order to ensure all patients receive the same questionnaire, the statutory health insurances were chosen as source of contact
- Study participants were randomly selected











malen! **Questionnaire: 42 items** Omfrage zur Patientenzufriedenneit Sachsischen Krankenhäusern **Patient** Age (age groups) n Jahr n bitte ien) demographic data •15-20 (gender & age) •21-30 •61-70 •41-50 •71-80 2. Sind Sie... männlich weiblich •51-60 •80+ Wie alt sind Sie? ☐ jünger als 15 Jahre ☐ als 80 Jahre 15 - 20 Jahre □ 31 - 40 Jahre □ 51 - 60 Jahre □ 71 - 80 Jahre ngenen fünf Visit Source of admission (self, emergency, by medical practitioner, by specialist) Length of stay (assessed by patients as ☐ Hausarzt ☐ Facharzt appropriate, too short, too long) Verlegung aus einen ■ Notfall/Unfall Length of stay in days 6. Wie würden Sie Ihren Gesundheitszustand ☐ mittelmä ausgezeichnet □ gut Number of prior hospital stays 7. Was war der Grund für Ihre Behandlung? Occurrence of complications nur auf den Aufenthalt im unter 1. genannten k (Yes/ No) ☐ Herzsch Geburtshilfe ☐ Herzkat ☐ Künstliches Hüftgelenk Halssch 5 Items Künstliches Kniegelenk ☐ Gynäkologische Operation ☐ Brustkrebs-Operation Gallenblasen-Operation

(Formularnummer)

		ter folgenden Gesichtspunkten:				
Patient satisfaction (18 Items)	1=sehr gut, -mangelhaft,	-	point-rating scale ranging from			
(======================================	6 "excellent to 1 "very	"excellent" to 1 "very poor"				
Wie war die Aufnahme im Krankenhau	s organisiert?					
Wie waren die Ärzte über Vorgeschich	te und	Information about	Ĭ			
Organization:		treatment:				
Organization of admittance	ce,	clear reply of inquiries	s by			
discharge, and organizati	_	doctors,				
procedures and operation		information about me	dication,			
informiert?	o por autori	operation, anesthesia				
Corvice veriables:		Totornorconal acros				
Service variables:	of food	Interpersonal aspe	H			
Accommodation, Quality of food		Kindness of doctors and nurses, individualized medical care				
Cleanliness			- Care			
Untersuchungen, z.B. Röntgen, ein?			,- <u>-</u>			
Wie beurteilen Sie Untersuchungen? Overall Satisfaction						
Wie wurden Sie auf Willingness to return to same provider vorbereitet? (Yes/ No)						
1126068824			J			

Data analysis

Logistic Regression using "overall satisfaction" as dependent variable

1. Associations between "overall satisfaction"/ and assessed variables?

Pre-selection of variables: Influence on dependent variables? (Chi²-test, U-test, KW-Wallis-test, p≤ 5%)

No: excluded

Yes

2. Performance of logistic regression

Dependent variable:

Overall satisfaction with the hospitalization

Sample characteristics (N= 4.293 *)

→

Gender

female male 57.9% 42.1%

>

Age groups

15-50 51-60 61-70

15-50 51-60 61-70 71-80 80+ 9.0% 12.4% 26.5% 39.6% 12.4%

>

Perceived length of stay

Appropriate Too short Too long

74.3% 9.7% 3.3%

→

Length of stay in days

1-2 3-7 8-14 >14

6.3% 34.0% 45.5% 12.4%



Complications (discharge)

Yes No 11.4% 88.6%



Perceived health status prior to hospitalization

perfect good fair bad 1.5% 23.4% 36.1% 39.0%

^{*}Presented data are valid percent without missing cases

Patient Satisfaction

Overall satisfaction

Excellent/
good very poor
87.0%

13.0%

Willingness to return

Yes
86.9%
No Not sure
9.7%

Significant influence Yes No of complications: Median: 4.69 Median: 5.24

Significant influence Appropriate Too long Too short of perceived LOS: Median: 5.29 Median: 4.59 Median: 4.90

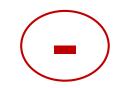
Influence of age, sex, actual

LOS in days, and selfperceived health status:

None found (n.s.)

Patient Satisfaction /





Most positive ratings				
Item	% satisfied			
Kindness of doctors	93.5%			
Kindness of nurses	93.7%			
Kindness of service personnel	92.6%			
Cleanliness	90.5%			
Organization of admittance	90.3%			

Most negative ratings				
Item	% satisfied			
Clear information about medication	63.7%			
Organization of discharge	70.6%			
Doctors' knowledge of patient anamnesis	76.0%			
Organization of pro- cedures and operations	79.8%			
Quality of food	79.9%			

Satisfied = ratings of "excellent"/ "very good"

Results of the logistic regression analysis

Variable	Overall satisfaction OR (95% CI), P
Kindness of nurses	1.81 (1.30-2.52), <0.001
Kindness of doctors	n.s.
Kindness of service personnel	1.89 (1.17-3.03), <0.01
Organization of admittance	1.37 (1.01-1.71), <0.01
Organization of discharge	1.23 (1.01-1.49), <0.05
Organization of procedures & OP	n.s.
Accommodation	1.71 (1.32-2.29), <0.001
Cleanliness	n.s.
Quality of food	n.s.
Occurrence of complications	n.s.
Clear information about undergoing treatment: -clear reply of inquiries by doctors, clear information about medication, anesthesia, operation	n.s.

5 Conclusions

- This research suggests that
 - ➤ Organization of admittance^{1,2}
 - ➤ Interpersonal aspects of care^{1,2}, particularly the interaction between nurses^{3,4,5}, service personal and patients
 - Accommodation⁴
- are strong drivers of overall satisfaction and willingness to return
- are more important to patients in surgery than technical aspects of care
 - Providing information about hospital stay neither associated with satisfaction nor willingness to return^{1,4}
- ✓ Health care organizations should focus on those aspects in order to increase satisfaction of surgical patients

6 References

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Thank You!

