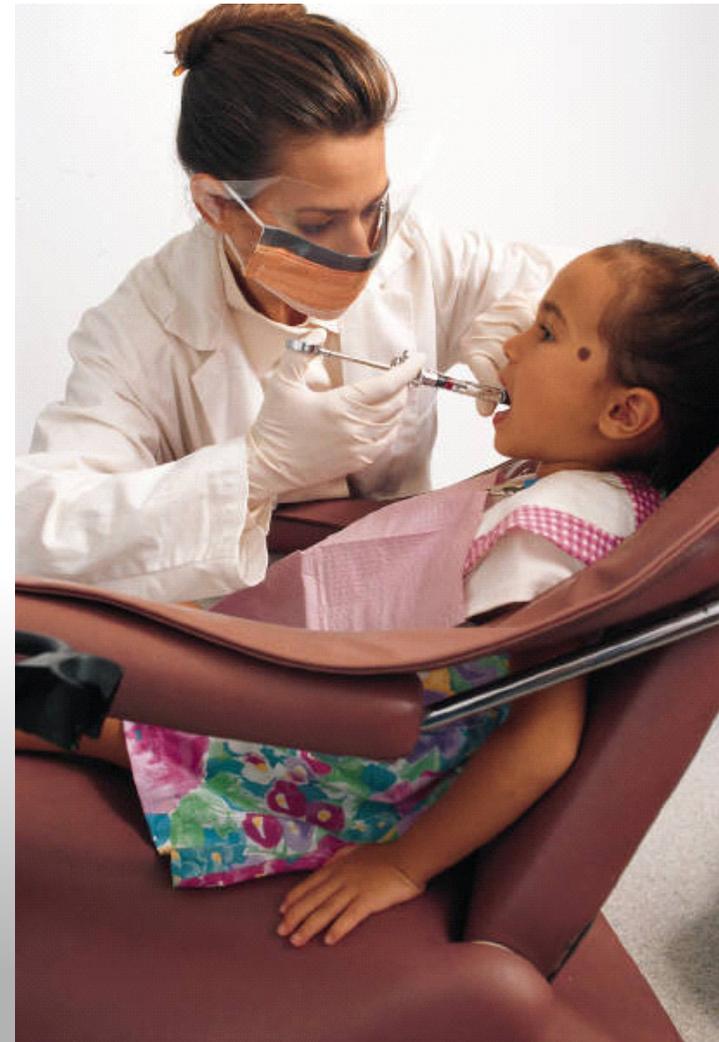


The Leveraged Approach: Integrating Public Reporting and Quality Improvement

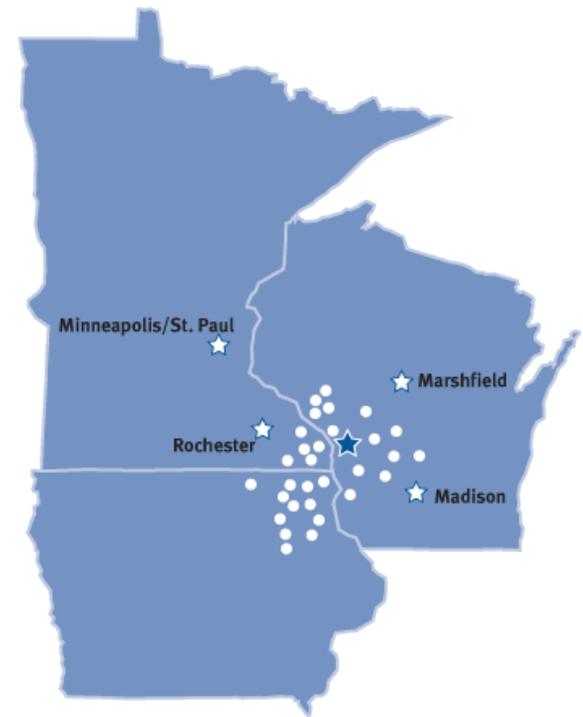
by Tom Schlesinger Ph.D.
Executive Consultant

Gundersen
Lutheran®



Gundersen Lutheran®

- Integrated Delivery System
 - Approximately 6,500 Total Employees
 - 776 providers employed / 474 medical staff
 - 41 clinic locations
 - 325-bed Tertiary Medical Center
 - Level II Trauma Center
- Physician-led organization
- Western Campus of the University of Wisconsin Medical & Nursing School
- Gundersen Lutheran Medical Foundation
 - Residency and Medical Education Programs
 - Clinical Research Program
- Affiliate organizations EMS ambulance service, rural hospitals, nursing homes, hospice, etc.
- Strong Administrative/Medical partnership



How Public Reporting Drives Improvement at Gundersen Lutheran



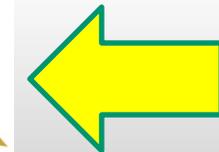
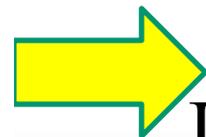
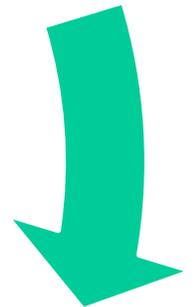
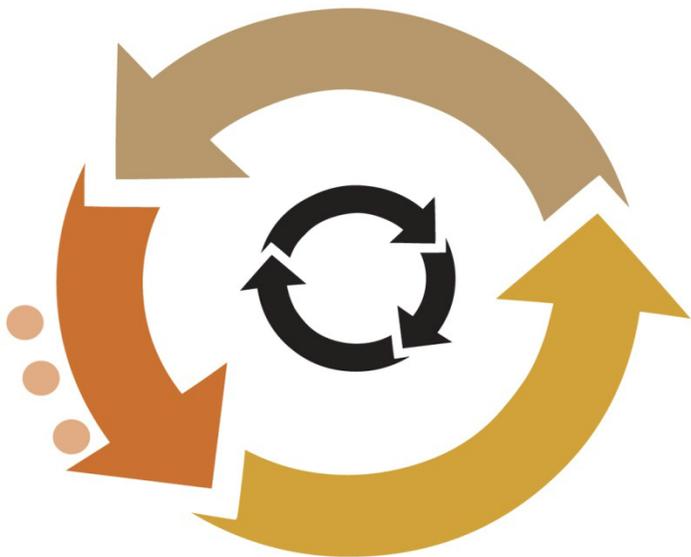
The Model

**Measure
Performance**

Publicly
Report

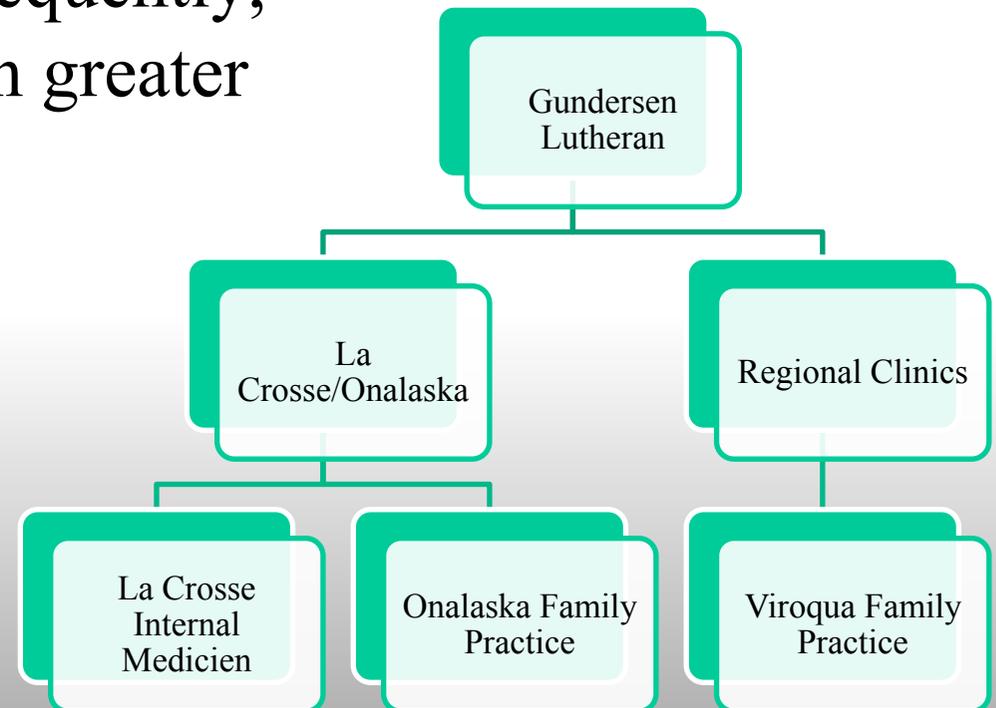
Leadership
Drives
Change

Leadership
Reviews



Our Belief in Transparency

- Transparency drives improvement
- Internal improvement efforts should be based on the publicly reported metrics
 - Although reported more frequently, trended over time, and with greater granularity



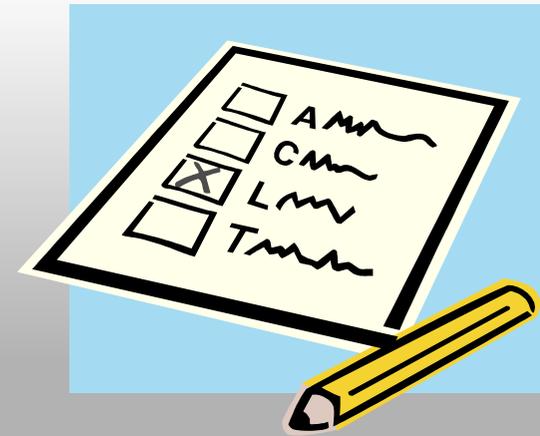
How Do We Use Patient Experience Data

- Organizational Results Reviewed Every Month by Boards of Trustees/Governors
- Departments receive results every quarter
 - Use trended data to measure improvement efforts
- Provider level results 2x per year, trended data

Overall Section <i>n</i> Question	Last Period Mean Score <i>n</i> =73 Trend	Mean Change	This Period Mean <i>n</i> =73	Physician Mean Score
Overall	 93.6	+0.2	93.8	95.3
Care Provider	 93.6	+0.2	93.8	95.3
72 Friendliness/courtesy of CP	 95.9	-0.1	95.8	96.6
72 CP explanations of prob/condition	 95.1	-1.0	94.1	95.3
72 CP concern for questions/worries	 93.2	+2.3	95.5	96.4

Our Goals for the Pilot

- Jumpstart implementation using a single vendor serving 2 or more groups
- Get to public reporting as soon as possible
- Lay groundwork for expanding the number of sites
- Evaluate ability to migrate to CG-CAHPS



Pilot Implementation process

- Used CAHPS C&G Visit Version (hybrid)
- Sampling frame for all 3 WI provider organizations
 - 3 primary care locations
 - All patients with office visits with M.D., PA, NP
 - Surveying occurred from June-August 2010
- Mail methodology
- Integrity of the process thru vendor
 - Sampling, mailing, data input, reporting

Business model and funding

- As physician-led integrated health care organization focused on delivering superior quality and service to the patient
 - Efforts to improve the patient experience are integrated into how we do our work
- Service Excellence Department manages survey process and works with front-line staff



Results

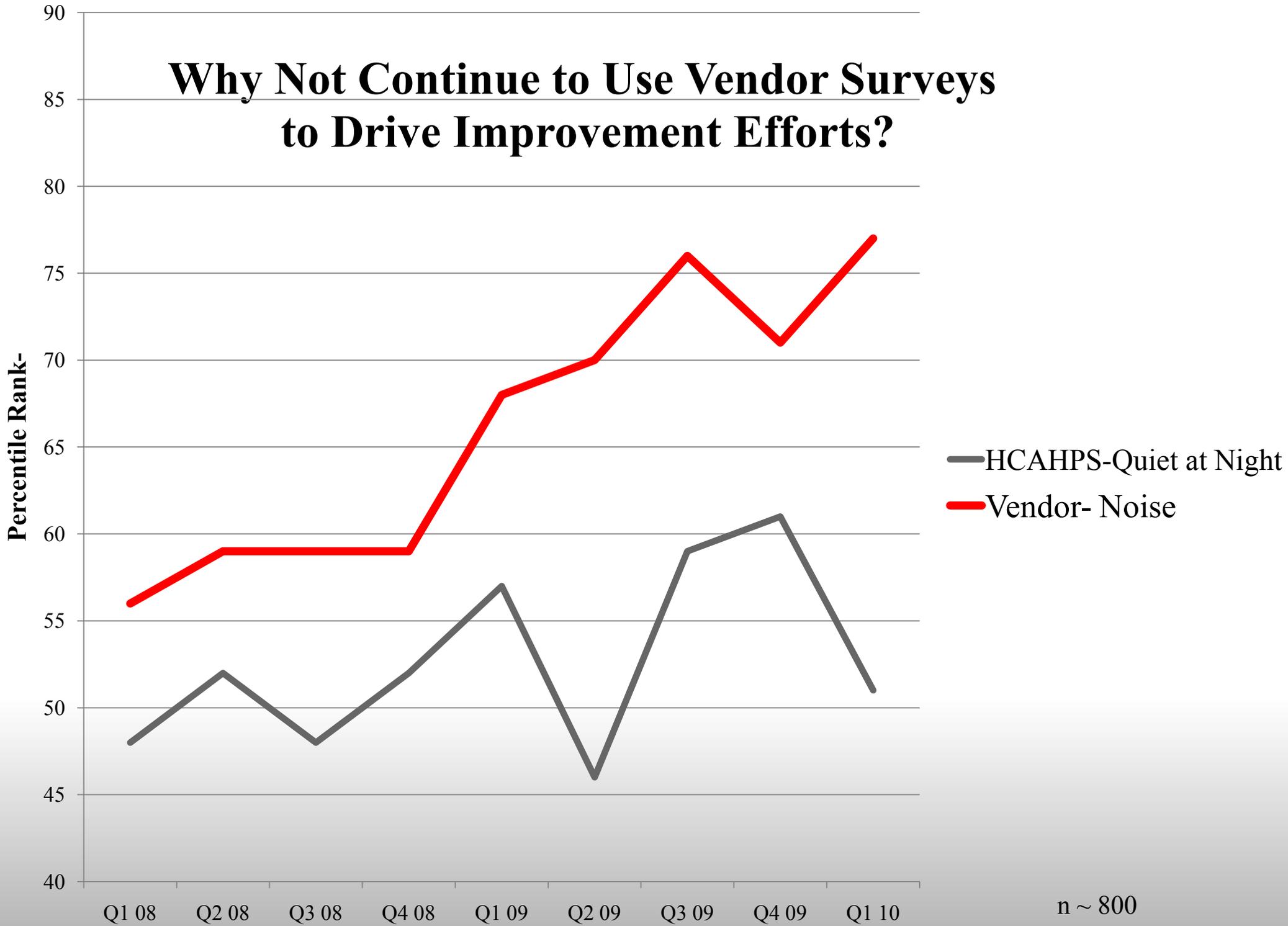
Integration into Existing Process

- Minimal additional cost involved
- Integration into existing sampling and mailing handled smoothly by Press Ganey
- Internal education effort needed to explain the different data to providers
- Two sets of data problematic

Overall Section	n	Question	Last Period Score	r=51	Trend	Mean Change	This Period Mean	r=46
Overall Specialty Rating			94.3		-0.1		94.2	
Overall Specialty Rating ^{††}			94.4		-0.3		94.1	
Access to Care			94.5		+0.1		94.6	
Access to Care ^{††}			94.2		+0.0		94.2	
46		Ease of scheduling appointments	95.6		-1.0		94.6	
46		Courtesy of person scheduling appt	93.6*		+1.0		94.6	
41		Our helpfulness on the telephone	94.1*		+1.6		95.7	
38		Our promptness in returning calls	95.9		-3.1		92.8	
46		Ability to get desired appointment ^{† 9}	92.2		+2.4		94.6	

Gundersen Lutheran - LaCrosse Internal Medicine		Received Dates: 6/24/2010 - 10/7/2010	
MEDICAL PRACTICE/CAHPS CLINICIAN AND GROUP TEST RESULTS			
		n	Mail %
Our records show that you got care from the provider named below. Is that right?	Yes	277	98.6%
	No	4	1.4%
Is this the provider you usually see if you need a check-up, want advice about a health problem, or get sick or hurt?	Yes	244	87.5%
	No	35	12.5%
How long have you been going to this provider?	Less than 6 months	48	17.6%
	At least 6 months but less than 1 year	16	5.9%
	At least 1 year but less than 3 years	41	15.0%
	At least 3 years but less than 5 years	38	13.9%
	5 years or more	130	47.6%

Why Not Continue to Use Vendor Surveys to Drive Improvement Efforts?



n ~ 800

Wisconsin Collaborative for Healthcare Quality - WCHQ.ORG

Sort	^	Sort	Sort	Sort	Sort	Sort
CLINIC	Able to get appointments and care when needed ?	Helpful and courteous office staff ?	Effective doctor-patient communication ?	Received test results from the doctor's office ?	Rating the doctor as a "9" or "10" ?	Willing to recommend the doctor to other people ?
	Always	Definitely Yes	Definitely Yes	Yes	Rating the doctor as a "9" or "10" with 10 being the best possible score	Definitely Yes
Benchmark Pilot Average (WI)	 64%	 94%	 92%	 91%	 78%	 91%
<u>Gundersen Clinic, Ltd.</u> Viroqua Clinic	 75%	 95%	 94%	 87%	 80%	 93%
<u>Prevea Health</u> East Mason	 73%	 96%	 94%	 91%	 80%	 92%
<u>Gundersen Clinic, Ltd.</u> LaCrosse Internal Medicine	 69%	 97%	 94%	 93%	 84%	 93%
<u>Prevea Health</u> East DePere	 66%	 93%	 91%	 92%	 76%	 91%

Next steps

- Transition to publicly reported CAHPS question sets, possibly with supplemental vendor questions
- Work through a vendor that will store the data and trend it over time
- For the public reporting, I would recommend that the results indicate statistically significant differences
- Start out reporting data by clinic site
 - Evaluate reliability of physician-level data

Discussion