

CBE ID

0308

Title

LBP: Evaluation of Patient Experience

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Full Year 2010

Removal Date

Thu, 02/28/2013 - 09:04

Initial Endorsement

Wed, 11/14/2007 - 19:00

Steward

National Committee for Quality Assurance

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

Percentage of physician mechanisms used to evaluate patient experience based on evidence of the following. •An ongoing system for obtaining feedback about patient experience with care •A process for analyzing the data and a plan for improving patient experience. Note: This standard is assessed as a process that applies to all patients. Evaluation is not based on documentation in individual medical records.

1.7 Measure Type

Process

1.8 Level of Analysis

Clinician: Individual

1.9 Care Setting

Ambulatory Care: Clinic

1.14 Numerator

ELEMENT A: COLLECTS PATIENT EXPERIENCE DATA Patients have an important perspective about quality of care. If patient needs are satisfied, the effectiveness of care is greater.
ELEMENT B: ANALYZES PATIENT EXPERIENCE DATA Providing patients with the opportunity to complete a patient experience survey gives the treatment team valuable performance information based on the patient perspective on care, access to care, quality of communication and degree of satisfaction with care

1.15 Denominator

ELEMENT A: COLLECTS PATIENT EXPERIENCE DATA Documentation requirements: The instrument used to collect patient experience data, e.g., phone survey questions or a paper or electronic survey. The survey instrument addresses the following areas of patient experience.- Patient access to care (e.g., the ability to make an appointment and see physician, timeliness and quality of phone calls, office wait time)- Quality of physician communication with the patient (e.g., response to questions, instructions and information about diagnosis, treatment, medication, follow-up care)- Patient confidence in self-care (e.g., patient knowledge of and ability to provide self-care involving activity, exercise, medications, reporting change in symptoms)- Patient satisfaction with care (may include staff [e.g., explanation and concern, time with physician, staff] and treatment [e.g., pain management, x-ray work, prescriptions, lab work]) Scoring: Yes No 1. Patient access to care ? 2. Quality of physician communication ? 3. Patient confidence in self-care ? 4. Patient satisfaction with care ?
ELEMENT B: ANALYZES PATIENT EXPERIENCE DATA Documentation requirement: Report demonstrating analysis of patient experience with care. The physician must provide a report that includes a compilation of the patient survey information and an analysis that shows, at the least, areas of success and areas needing improvement. Plan for improving patient experience. The report must include a plan for addressing the areas of patient concern or lack of satisfaction with care. Scoring: Yes No Physician analyzes patient experience with care ? Physician has plan for improving experience ?

Risk Adjustment

No risk adjustment or risk stratification

Steward Organization

National Committee for Quality Assurance

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