Patient Experience Measures from the CAHPS® Clinician & Group Surveys

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Introduction

This document discusses the types of reports you may produce for the CAHPS Clinician & Group Surveys, the types of measures the survey produces, and the composite and rating measures generated by the results of the surveys and associated supplemental items. It also provides a basic overview of how the CAHPS survey items are combined to come up with composite measures; for details on how the CAHPS analysis program calculates composite measures, please see Instructions for Using CAHPS Analysis Programs in the CAHPS Clinician & Group Surveys and Instructions: https://www.cahps.ahrq.gov/Surveys-Guidance/CG/Get-CG-Surveys-and-Instructions.aspx.

For guidance on how to select and display survey scores, refer to *How To Report Results of the CAHPS Clinician & Group Survey*(https://www.cahps.ahrq.gov/~/media/Files/SurveyDocuments/CG/Survey_Results/1309 CG Measures.pdf).

Types of Reports

Users of the CAHPS Clinician & Group Surveys may report the results of the survey publicly to inform health care consumers and/or privately to inform health care providers and other stakeholders and support their efforts to improve patients' experiences with care. While the basic content included in these reports may be the same, the specific content should differ because the purposes differ.

In reports intended for consumers, the goal is to provide information the reader can use to assess and compare the performance of providers and identify those that best meet his or her needs. To that end, the presentation of measures and scores must be concise and easily digestible. For guidance on developing reports of comparative information for consumers, visit –

- The Consumer Reporting section of the CAHPS Web site: https://www.cahps.ahrq.gov/Consumer-Reporting.aspx
- TalkingQuality: https://www.talkingquality.ahrq.gov

A report intended for providers and other internal audiences must also be clear and concise, but can and should contain more information in order to support use of the results to identify relative strengths and weaknesses. These reports need to provide trend data (when available) and different kinds of comparators, such as local or State averages and percentiles. They can also provide a greater level of detail, such as results at the item level, results for supplemental items, and the full range of survey responses (i.e., the percent that gave each possible response). With this information, providers are equipped to analyze their data and take steps towards improving their patients' experiences. For guidance on improving CAHPS survey results, visit the *Quality Improvement* section of the CAHPS Web site:

http://www.cahps.ahrq.gov/quality-improvement/improvement-guide.aspx.

Types of Measures

Like all CAHPS surveys, the CAHPS Clinician & Group Surveys and supplemental item sets generate three types of measures for reporting purposes:

- Rating measures, which are based on items that use a scale of 0 to 10 to measure respondents' assessments of their own or their child's provider. This measure is sometimes referred to as the "global rating" or "overall rating."
- Composite measures (also known as reporting composites), which combine results for closely-related items that have been grouped together. Composite measures are strongly recommended for both public and private reporting because they keep the reports comprehensive, yet of reasonable length. Psychometric analyses also indicate that they are reliable and valid measures of patients' experiences.^{1, 2, 3}
- Individual items, which are survey questions that did not fit into the composite measures. These measures may be included in consumer reports, but they are especially useful in reports for providers and other internal audiences that use the data to identify specific strengths and weaknesses. The core Clinician & Group Survey has only one item that can be reported to consumers on its own: "In the last 12 months, when this provider ordered a blood test, x-ray, or other test for you, how often did someone from this provider's office follow up to give you those results?" The CAHPS Supplemental Item Sets contain many items that can be reported individually to internal audiences but that are not recommended for consumer reports.

Measures Based on Core Items in the CAHPS Clinician & Group Surveys

Because the core items are standardized across the versions of the CAHPS Clinician & Group Survey, the measures are standardized as well. That is, every version of the survey produces the same set of measures that are comparable across providers, regardless of when or where the survey was fielded.

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McGee J, Kanouse DE, Sofaer S, Hargraves JL, Hoy E, Kleimann S. Making survey results easy to report to consumers: How reporting needs guided survey design in CAHPS[®]. Med Care. 1999 Mar;37(3 Suppl):MS32-40.

Solomon LS, Hays RD, Zaslavsky AM, Ding L, Cleary PD. Psychometric properties of a group-level Consumer Assessment of Health Plans Study (CAHPS) instrument. Med Care. 2005 Jan;43(1):53-60.

³ Hays RD, Chong K, Brown J, Spritzer KL, Horne K. Patient reports and ratings of individual physicians: an evaluation of the DoctorGuide and Consumer Assessment of Health Plans Study provider-level surveys. Am J Med Qual. 2003 Sep-Oct;18(5):190-6.

Each of the Clinician & Group Surveys produces the following four measures:

- Getting timely appointments, care, and information (5 items)
- How well providers (or doctors) communicate with patients (6 items)
- Helpful, courteous, and respectful office staff (2 items)
- Patients' rating of the provider (or doctor) (1 item)

The Child Survey generates two additional composite measures:

- Provider's (or doctor's) attention to your child's growth and development (6 items)
- Provider's (or doctor's) advice on keeping your child safe and healthy (5 items)

Appendix A provides measure descriptions and lists the questions for each of the measures in the Adult 12-Month Survey.

Appendix B provides measure descriptions and lists the questions for each of the measures in the Adult Visit Survey.

Appendix C provides measure descriptions and lists the questions for each of the measures in the Child 12-Month Survey.

Measures Based on CAHPS Supplemental Items Designed for the Clinician & Group Surveys

Users of the Clinician & Group Surveys may choose to customize their questionnaires with supplemental items. Among the many supplemental items available for this survey are four sets designed to help assess patients' experiences in specific areas:

- Cultural Competence Item Set (https://www.cahps.ahrq.gov/Surveys-Guidance/Item-Sets/Cultural-Competence.aspx)
- Health Information Technology Item Set
 https://www.cahps.ahrq.gov/Surveys-Guidance/Item-Sets/HIT.aspx)
- Item Set for Addressing Health Literacy (https://www.cahps.ahrq.gov/Surveys-Guidance/Item-Sets/Health-Literacy.aspx)
- Patient-Centered Medical Home Item Set (https://www.cahps.ahrq.gov/Surveys-Guidance/Item-Sets/PCMH.aspx)

These item sets generate several rating and composite measures that can be reported to consumers and other audiences. Like the measures from the core survey, these measures have been validated and tested by the CAHPS Consortium. Users of these

item sets have the option of reporting these measures to complement the main survey measures.

Cultural Competence Item Set

Users of this item set can report three composite measures and one rating measure:

- Providers are polite and considerate (3 items)⁴
- Providers give advice on staying healthy (4 items)
- Providers are caring and inspire trust (5 items)
- Patients' rating of trust in provider (on a scale of 0 to 10) (1 item)

A second rating measure of the interpreter is among items being re-evaluated for the 2.0 version of the Clinician & Group supplemental items.

The remaining questions in the item set cannot be rolled up into composite measures.

Please note that the labels for these measures have not yet been tested with consumers.

Learn more about these measures in *About the Cultural Competence Item Set*: https://www.cahps.ahrq.gov/~/media/Files/SurveyDocuments/CG/Get_Surveys/1312_About Cultural Comp.pdf.

Health Information Technology Item Set

Users of this item set can report three composite measures and one single-item measure:

- Getting timely answers to medical questions by e-mail (2 items)
- Helpfulness of provider's use of computers during a visit (2 items)
- Helpfulness of provider's web site in giving you information about your care and tests (4 items)
- Getting timely appointments through e-mail or a website (1 item)

The remaining questions in the item set cannot be rolled up into a composite measure.

Learn more about these measures in *About the Health Information Technology Item Set.* (https://www.cahps.ahrq.gov/~/media/Files/SurveyDocuments/CG/Get_Surveys/1313 About HIT.pdf)

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⁴ Note: This composite measure is intended to supplement the existing composite measure for provider communication (How well providers communicate with patients), which can be calculated from the core items in the Clinician & Group Surveys.

Item Set for Addressing Health Literacy

Users of this item set can report one composite measure:

• How well providers communicate about medicines (4 items)

The remaining questions in the item set cannot be rolled up into composite measures.

Learn more about this measure in *About the Item Set for Addressing Health Literacy*:

https://www.cahps.ahrq.gov/~/media/Files/SurveyDocuments/CG/Get_Surveys/1311_About Health Lit.pdf

Patient-Centered Medical Home Item Set

Users of this item set can report three patient experience measures:

- Providers pay attention to your mental or emotional health (adult only) (3 items)
- Providers support you in taking care of your own health (2 items)
- Providers discuss medication decisions (adult only) (3 items)

The remaining questions in the item set cannot be rolled up into composite measures.

Please note that these measure labels are provisional; the CAHPS team is testing the labels with consumers and may revise them based on the results of this testing.

Learn more about these measures in *About the Patient-Centered Medical Home Item Set*:

https://www.cahps.ahrq.gov/~/media/Files/SurveyDocuments/CG/Get_Surveys/1314_About_PCMH.pdf

How to Calculate Composite Scores for Reporting

All users of CAHPS surveys can apply the SAS®-based CAHPS Analysis Program (also referred to as the CAHPS macro) to calculate performance scores for individual items—including the rating measure—and composite measures. The analysis programs and instructions for using those programs are available in the *CAHPS Clinician & Group Surveys and Instructions*: https://www.cahps.ahrq.gov/Surveys-Guidance/CG/Get-CG-Surveys-and-Instructions.aspx

The calculation of CAHPS survey composites uses a proportional scoring method, which basically generates a proportion for each response option.

There are three basic steps to this approach:

- 1. Calculate the proportion of patient responses in each response category for each item in a composite.
- 2. Combine these proportions for all items in a composite.
- 3. Adjust for the case-mix of the patients who evaluated each provider to allow comparison of scores across providers.

Appendix E spells out the first two steps in greater detail. The CAHPS Analysis Program handles these calculations as well as the case-mix adjustment.

This approach provides users with several options for reporting. Two recommended strategies are average scoring and "top box" scoring, which involves reporting only the score for the most positive categories (e.g., the proportion of patients reporting "always"). To learn more about these strategies, go to *How To Report Results of the CAHPS Clinician & Group Survey:*https://www.cahps.ahrq.gov/~/media/Files/SurveyDocuments/CG/Survey_Results/1309_CG_Measures.pdf

Appendix A: Measures for the Adult 12-Month Survey

Getting Timely Appointments, Care, and Information

The survey asked patients how often they got appointments for care as soon as needed and timely answers to questions when they called the office.

The survey also asked patients how often they saw the provider within 15 minutes of their appointment time.

Q6	Patient got appointment for urgent care as soon as needed	Response
Q8	Patient got appointment for non-urgent care as soon as needed	OptionsNever
Q10	Patient got answer to medical question the same day he/she phoned provider's office	SometimesUsually
Q12	Patient got answer to medical question as soon as he/she needed when phoned provider's office after hours	Always
Q13	Patient saw provider within 15 minutes of appointment time	

How Well Providers (or Doctors) Communicate with Patients

The survey asked patients how often their providers explained things clearly, listened carefully, showed respect, provided easy to understand instructions, knew their medical history, and spent enough time with the patient.

Q14	Provider explained things in a way that was easy to understand	Response
Q15	Provider listened carefully to patient	OptionsNever
Q17	Provider gave easy to understand information about health questions or concerns	SometimesUsually
Q18	Provider knew important information about patient's medical history	Always
Q19	Provider showed respect for what patient had to say	
Q20	Provider spent enough time with patient	

Helpful, Courteous, and Respectful Office Staff The survey asked patients how often office staff were helpful and treated them with courtesy and respect.			
Q24	Clerks and receptionists helpful	Response Options Never	
Q25	Clerks and receptionists courteous and respectful	SometimesUsuallyAlways	

Patients' Rating of the Provider (or Doctor) The survey asked patients to rate their provider on a scale of 0 to 10, with 0 being the worst and 10 being the best.		
Q23	Rating of provider	Response Options • 0-10

Individual Item: Followup on Test Results		
Q22	Someone from provider's office followed up with patient to give results of blood test, x-ray, or other test	Response Options Never Sometimes Usually Always

Appendix B: Measures for the Adult Visit Survey

Getting Timely Appointments, Care, and Information

The survey asked patients how often they got appointments for care as soon as needed and timely answers to questions when they called the office.

The survey also asked patients how often they saw the provider within 15 minutes of their appointment time.

Q6	Patient got appointment for urgent care as soon as needed
Q8	Patient got appointment for non-urgent care as soon as needed
Q10	Patient got answer to medical question the same day he/she phoned provider's office
Q12	Patient got answer to medical question as soon as he/she needed when phoned provider's office after hours
Q13	Patient saw provider within 15 minutes of appointment time

Response Options

- Never
- Sometimes
- Usually
- Always

How Well Providers (or Doctors) Communicate with Patients

The survey asked patients if their providers explained things clearly, listened carefully, showed respect, provided easy to understand instructions, knew their medical history, showed respect, and spent enough time with the patient during the most recent visit.

Q16	Provider explained things in a way that was easy to understand	Response Options Yes, definitely Yes, somewhat No
Q17	Provider listened carefully to patient	
Q19	Provider gave easy to understand information about health questions or concerns	
Q20	Provider seemed to know the important information about patient's medical history	
Q21	Provider showed respect for what patient had to say	
Q22	Provider spent enough time with patient	

Helpful, Courteous, and Respectful Office Staff

The survey asked patients if office staff were helpful and treated them with courtesy and respect during the most recent visit.

Q27	Clerks and receptionists helpful	Response Options
		Yes, definitely
Q28	Clerks and receptionists courteous and respectful	 Yes, somewhat
		• No

Patients' Rating of the Provider (or Doctor)

The survey asked patients to rate their provider on a scale of 0 to 10, with 0 being the worst and 10 being the best.

Q25	Rating of provider	Response Options
		• 0-10

Individual Item: Follow-up on Test Results		
Q24	Someone from provider's office followed up with patient to give results of blood test, x-ray, or other test Response Options Yes No	

Appendix C: Measures for the Child 12-Month Survey

Getting Timely Appointments, Care, and Information

The survey asked parents how often they got appointments for a child's care as soon as needed and timely answers to questions when they called the office.

The survey also asked parents how often they saw the provider within 15 minutes of their appointment time.

Q13	Child got appointment for urgent care as soon as needed	Response
Q15	Child got appointment for non-urgent care as soon as needed	Options Never
Q17	Respondent got answer to medical question the same day he/she phoned provider's office	SometimesUsually
Q19	Respondent got answer to medical question as soon as he/she needed when phoned provider's office after hours	● Always
Q20	Child saw provider within 15 minutes of appointment time	

How Well Providers (or Doctors) Communicate with Patients

The survey asked parents how often the providers explained things clearly, listened carefully, showed respect, provided easy to understand instructions, knew their child's medical history, and spent enough time with the patient.

Q21	Provider explained things in a way that was easy to understand	Response Options Never Sometimes Usually Always
Q22	Provider listened carefully to respondent	
Q24	Provider gave easy to understand information about health questions or concerns	
Q25	Provider knew important information about child's medical history	
Q26	Provider showed respect for what respondent had to say	
Q27	Provider spent enough time with child	

Helpful, Courteous, and Respectful Office Staff

The survey asked parents how often office staff were helpful and treated them with courtesy and respect.

Q42	Clerks and receptionists helpful	Response Options Never
Q43	Clerks and receptionists courteous and respectful.	SometimesUsuallyAlways

Provider's (Doctor's) Attention to Your Child's Growth and Development

The survey asked parents if the provider (or doctor) talked about their child's growth, behaviors, moods and emotions, and ability to learn and get along with others.

Q31	Respondent and provider talked about child's learning ability	Response
Q32	Respondent and provider talked about age-appropriate behaviors	Options No
Q33	Respondent and provider talked about child's physical development	• Yes
Q34	Respondent and provider talked about child's moods and emotions	
Q37	Respondent and provider talked about how much time child spends on a computer and in front of TV	
Q40	Respondent and provider talked about how child gets along with others	

Provider's (Doctor's) Advice on Keeping Your Child Safe and Healthy

The survey asked parents if the provider talked about keeping their child from getting injured, the food the child eats, physical activity, and household problems.

The survey also asked parents if the provider gave printed handouts or booklets on keeping their child from getting injured.

Q35	Respondent and provider talked about injury prevention	Response Options
Q36	Provider gave information on injury prevention	
Q38	Respondent and provider talked about child's eating habits	• Yes
Q39	Respondent and provider talked about child's physical activity	
Q41	Respondent and provider talked about any problems in the household that might affect child	

Patients' Rating of the Provider (or Doctor) The survey asked patients to rate their provider on a scale of 0 to 10, with 0 being the worst and 10 being the best.		
Q30	Rating of provider	Response Options • 0-10

Individual Item: Follow-up on Test Results		
Q29	Someone from provider's office followed up with respondent to give results of blood test, x-ray, or other test	Response Options Never Sometimes Usually Always

Appendix D: Measures Based on Supplemental Items

Cultural Competence Item Set

Providers Are Polite and Considerate		
CU1	Provider interrupted patient when patient was talking	Response Options
CU2	Provider talked too fast	NeverSometimes
CU6	Provider used a condescending, sarcastic, or rude tone or manner with patient	UsuallyAlways

Providers Give Advice on Staying Healthy		
CU9	Provider talked about a healthy diet and healthy eating habits	Response Options
CU10	Provider talked about exercise or physical activity	NeverSometimes
CU11	Provider talked about things in patient's life that worry patient or cause stress	UsuallyAlways
CU12	Provider asked if patient had felt sad, empty, or depressed	

Providers Are Caring and Inspire Trust		
CU20	Patient could tell provider anything	Response
CU21	Patient could trust provider with medical care	Options • Never
CU22	Provider always told patient truth about health	Sometimes
CU23	Provider cared as much as patient about health	Usually Always
CU24	Provider cared about patient as a person	Always

Patients' Rating of Trust in Provider		
CU25	Overall rating of trust in provider (on a scale of 0 to 10)	Response Options • 0-10

Health Information Technology Item Set

Getting Timely Answers to Medical Questions by E-mail		
HIT5	Patient got an answer to an e-mailed medical question as soon as needed	Response Options Never
HIT6	All of the questions in patient's e-mail were answered	SometimesUsuallyAlways

Helpfuli	ness of Provider's Use of Computers During a Visit	
HIT11	Provider's use of computer or handheld device was helpful to patient	Response Options Yes, definitely Yes, somewhate No
HIT12	Provider's use of computer or handheld device made it harder or easier to talk with him or her	HarderNot harder or easierEasier

Helpfulness of Provider's Web site in Giving You Information About Your Care and Tests		
HIT15	Lab or other test results were easy to find on Web site	Response Options
HIT16	Lab or other test results were put on Web site as soon as needed	NeverSometimes
HIT17	Lab or other test results were presented in a way that was easy to understand	UsuallyAlways
HIT21	Visit notes were easy to understand	

Individual Item: Follow up on Test Results		
HIT3	Patient got an appointment using e-mail or website as soon as needed	Response Options Never Sometimes Usually Always

Item Set for Addressing Health Literacy

How Well Providers Communicate About Medicines		
HL19	Provider gave easy to understand instructions about taking medicines	Response Options
HL21	Provider gave easy to understand explanations about possible side effects of medicines	NeverSometimes
HL23	Provider gave easy to understand written information about medicines	UsuallyAlways
HL24	Provider suggested ways to help patient remember to take medicines	

Patient-Centered Medical Home Item Set

Providers Pay Attention to Your Mental or Emotional Health (Adult only)		
PCMH16	Anyone in provider's office asked if patient had felt sad, empty, or depressed	Response Options
PCMH17	Anyone in provider's office talked about worrying/stressful aspects of patient's life	Yes No
PCMH18	Anyone in provider's office talked with patient about personal problem, family problem, alcohol use, drug use, or a mental or emotional illness	

Providers Support You in Taking Care of Your Own Health		
PCMH12	Anyone in provider's office talked with patient about specific health goals	Response Options
PCMH13	Anyone in provider's office asked if there were things that made it hard for patient to take care of health	YesNo

Providers Discuss Medication Decisions (Adult only)		
PCMH 7	Provider talked to patient about reasons patient might want to take medicine	Response Options Not at all A little Some A lot
РСМН8	Provider talked to patient about reasons patient might not want to take medicine	
РСМН9	Provider asked what patient thought was best for patient	Response Options • Yes • No

Appendix E: Applying the Proportional Scoring Method to Clinician & Group Survey Composites

Given a composite with five items, where each item has four response options, a provider's score for that composite is the proportion of responses (excluding missing data) in each response category. The following steps show how those proportions are calculated:

Step 1 – Calculate the proportion of cases in each response category for the first question:

P11 = Proportion of respondents who answered "never"

P12 = Proportion of respondents who answered "sometimes"

P13 = Proportion of respondents who answered "usually"

P14 = Proportion of respondents who answered "always"

Follow the same steps for the second question:

P21 = Proportion of respondents who answered "never"

P22 = Proportion of respondents who answered "sometimes"

P23 = Proportion of respondents who answered "usually"

P24 = Proportion of respondents who answered "always"

Repeat the same procedure for each of the questions in the composite.

Step 2 – Combine responses from the questions to form the composite

Calculate the average proportion responding to each category across the questions in the composite. For example, in the "Getting Appointments and Health Care When Needed" composite (five questions), calculations would be as follows:

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PC1 = Composite proportion who said "never" = (P11 + P21 + P31 + P41 + P51) / 5
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PC2 = Composite proportion who said "sometimes" = (P12 + P22 + P32 + P42 + P52) / 5

PC3 = Composite proportion who said "usually" = (P13 + P23 + P33 + P43 + P53) / 5

PC4 = Composite proportion who said "always" = (P14 + P24 + P34 + P44 + P54) / 5

To download the analysis programs and instructions for using those programs, go to the *CAHPS Clinician & Group Surveys and Instructions*: https://www.cahps.ahrq.gov/Surveys-Guidance/CG/Get-CG-Surveys-and-Instructions.aspx

To learn more about the scores you can use for reporting purposes, refer to *How To Report Results of the CAHPS Clinician & Group Survey*:

https://www.cahps.ahrq.gov/~/media/Files/SurveyDocuments/CG/Survey_Results/1309_CG_Measures.pdf