

Impact of the Intervention on Patient Experience

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Assessing Intervention Impact on Patient Experience



- Understanding Diffusion and Exposure of Patient Narratives
- Analyzing Impact of Intervention on Patient-Reported Experiences
- Inferences About Narrative Impact, Learning Curves & Diffusion

Diffusion and Exposure 1: Staff Survey Results

Clinicians (physician and physician assistants) are most likely to have seen comments, but supervisors/administrators are most likely to see them frequently





■ Have Seen Comments...

Saw Comments Frequently...

Diffusion and Exposure 2: Intensive Interview Findings



Preliminary Assessment and Diffusion through Practice Administrators

- ➔ Medical Directors Inconsistently Engaged
- ➔ Individual Clinicians Sporadically Engaged
- Targeted Interventions to Leverage Limited Administrative Capacity
 - ➔ Flowed through Administrative Staff to Maximize Leverage

Analysis of the Intervention Impact on Patient Experience



- Measured by survey responses to CG-CAHPS questions and composites
 - Access measures
 - Office Staff performance
 - Provider Communication
 - Care Coordination
- **Data collected** for pre- and post-intervention period: total of 9551 respondents
 - Pre-Intervention: July 2020 July 2021
 - Post-Intervention: August 2021-April 2022
- Analyzed using Difference-in-Difference Regression Models
 - **Compare changes in survey scores** in intervention and control sites, conditioned on pre-intervention scores
 - Control for other attributes: patient-level: age, gender, race/ethnicity, education, physical & mental health practice-level: patient volume, payer mix, campus

seasonality and practice fixed effects

Intervention Impact on Patient Experience



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Inferences about Impact of Narrative Feedback



• Despite Relatively Short-term Assessment and Limited Diffusion

- Patient Narratives Enhanced Most Forms of Staff Learning
- Feedback of Patients Narratives Encouraged Learning and Behavior Change
- Feedback of Patient Narratives Enhanced Patient Experiences Scores in Two (possibly three) Domains

Countervailing Effects Identified for Provider Communication

May be Linked to ACN Being Site for Clinician Training

Questions for Future Research

Longer-term Impact; More Widespread Diffusion within clinical sites, and Impact Outside of Academic Medical Centers