Implementation of the CAHPS Elicitation Protocol

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Two Options for Administration

- As part of the Clinician & Group Survey
 - To take advantage of the sampling frame for the survey
 - To facilitate linking of narrative responses to responses to closed-ended questions
- On its own
 - To hear directly from specific groups of patients
 - To obtain ongoing feedback when survey is not in the field



Using the Protocol as Part of CG-CAHPS: Key Considerations

- Incorporating items into the survey
- Sampling
- Collecting the data
- Managing content:
 - Preserving privacy
 - Identifying calls for help







Incorporating Items Into the Survey

- Core Items + Supplemental Items = CAHPS Survey
- Place narrative questions before "About You" section
- Add subheading and introduction

In Your Own Words

In your own words, please describe your experiences with this provider and his or her office staff, such as nurses and receptionists.

If you need medical advice or care, please contact your provider's office.



CAHPS Sampling Methodology

- Recommendation: Follow guidance in Fielding the CAHPS Clinician & Group Survey
- Benefits of sampling methodology:
 - Population that's representative of provider's patients
 - Recent users of provider's services

Collecting the Data

- Modes: Phone; Web with follow-up by phone
- Time for administration: 5-6 minutes on average
 - Recommendation: Don't impose limits on time
- Length of comments: Varies from 20 words to more than 300 words
 - Recommendation: Provide ample space to respond



Invitation and Reminder Letters/Emails

Standard recommendations:

- Let respondents know how their comments are likely to be used
- Reassure respondents that their comments will be screened to eliminate any information that is potentially identifiable

Suggested insert:

Our survey includes some questions that ask you to describe, in your own words, your care and your relationship with [PROVIDER'S NAME] and his or her staff. Please describe your experiences as if you were explaining them to your family and friends.



Vendors' Role in Managing Content

- Preserving privacy: Review and redact any potentially identifiable information (including names, phone numbers, and email addresses) from the comments before distributing them to clinicians or including them in a public Web site
- Identifying calls for help: Institute systems to flag any comments that require an immediate response from health care providers

Administering the Elicitation Protocol on Its Own

- Sampling: Random sampling, following basic CAHPS guidelines
- Data collection:
 - Use of Web and telephone
 - Invitation and reminder letters and emails
- Use of responses: Depends on sampling method
- Acknowledging CAHPS



Research Questions To Explore

- Invitation language: What language will motivate responses?
- Anticipating response rates: How many comments should you expect per provider/practice?
- Analyzing responses: When should feedback from individual patients be analyzed and summarized? What are the best ways to do this?
- Sharing responses:
 - What are the most useful ways to present patient feedback to providers?
 - How can patient feedback be provided to consumers in the context of other comparative quality information?

Second Polling Question

Which of the following best describes your interest in using the CAHPS Patient Narrative Elicitation Protocol?

- Yes! I really want to be an early adopter.
- I'm intrigued and will discuss it with colleagues.
- I'd consider it after others have tested it.
- I'm not interested.
- Does not apply to me.

To Ask a Question

