

Patient Experience Measures from the CAHPS® Surgical Care Survey

Types of Measures.....	1
List of Measures in the Surgical Care Survey.....	2
Reporting Surgical Care Survey Measures	2
Appendix: Survey Items Organized by Measure	4

This document reviews the types of patient experience measures associated with the CAHPS Surgical Care Survey, lists the survey's composite and rating measures, and offers basic guidance on reporting the survey results to consumers and other audiences.

Types of Measures

Like all CAHPS surveys, the CAHPS Surgical Care Survey generates three types of results for reporting purposes:

- **Composite measures** (also known as reporting composites) combine results for closely related items that have been grouped together. Composite measures are strongly recommended for both public and private reporting because they allow for reports that are comprehensive, yet of reasonable length. Psychometric analyses also indicate that composite measures from the core items¹ in the survey are reliable and valid measures of patients' experiences.^{2, 3, 4} To learn about the calculation of scores for composite measures, read about [analyzing CAHPS survey data](#).
- **Rating measures** are based on items that use a scale of 0 to 10 to measure respondents' assessments of their surgeon. This measure is sometimes referred to as the "global rating" or "overall rating."
- **Single-item measures** are individual survey questions that did not fit into composite measures. This survey includes several items that can be reported individually. These single-item measures are especially useful in reports for providers and other internal audiences that use the data to identify specific strengths and weaknesses. When reporting single-item measures, it is important to indicate that the measure reflects performance on just one survey question in contrast to the multiple questions represented by composite measures.

¹ Core items are survey questions that are always included in the instrument in order to ensure standardization and comparability across survey users. Supplemental items are optional questions that users can add in order to customize the instrument.

² 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.

³ 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.

⁴ 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.

List of Measures in the Surgical Care Survey

The Surgical Care Survey produces measures that represent the experiences of respondents in the following areas:

- Information to help you prepare for surgery (composite of 2 items)
- How well surgeon communicates with patients before surgery (composite of 4 items)
- Surgeon's attentiveness on day of surgery (composite of 2 items)
- Information to help you recover from surgery (composite of 4 items)
- How well surgeon communicates with patients after surgery (composite of 4 items)
- Helpful, courteous, and respectful staff at surgeon's office (composite of 2 items)
- Patients' rating of the surgeon (single item)

This survey also produces two measures of patient experience with anesthesia care: a composite measure of communication with the anesthesiologist and a rating of the anesthesiologist. Findings from testing of these measures suggest that they are potentially useful for quality improvement efforts but not for public reporting intended to support patients in choosing among surgical practices.

The appendix provides descriptions of each measure and lists the survey questions included in each measure. The measure names, or labels, listed above and in the appendix are recommended for use in both public and private reports. They are the product of expert input as well as extensive testing with consumers.

Reporting Surgical Care Survey Measures

Users of the CAHPS Surgical Care Survey may report the results of the survey publicly to inform health care consumers and/or privately to inform surgeons, medical group, 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 that people can use to assess and compare the performance of surgeons and identify those that best meet their needs. Survey results are typically reported along with other measures of quality and safety. For that reason, the presentation of measures and scores must be concise and easily digestible. The use of composite measures rather than individual items is one way to avoid "information overload" among consumers.

Another strategy is to limit the number of patient experience measures in a report; all measures from the core survey are recommended for consumer reports, but the use of

measures from any supplemental items should be carefully considered. Report sponsors have to weigh the trade-off between offering an array of performance scores and overwhelming consumers with more information than they can process.

For guidance on reporting results of the CAHPS Surgical Care Survey to consumers, refer to advice developed for the CAHPS Clinician & Group Survey:

- [How To Report Results of the CAHPS Clinician & Group Survey](#) (Aligning Forces for Quality, Robert Wood Johnson Foundation)
- [Developing a Public Report for the CAHPS Clinician & Group Survey: A Decision Guide](#) (Aligning Forces for Quality, Robert Wood Johnson Foundation)
- [Aggregating and Analyzing CAHPS Clinician & Group Survey Results: A Decision Guide](#) (Aligning Forces for Quality, Robert Wood Johnson Foundation)

Learn more about reports on quality for consumers:

- [Reporting Results to Consumers](#) (AHRQ CAHPS Web site)
- [TalkingQuality](#) (AHRQ Web site)

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 any supplemental items, and the full range of survey responses (e.g., the percent that gave each possible response). Moreover, these reports can include measures from the supplemental item sets that did not achieve a high enough level of reliability at the suggested sample sizes to be recommended for public reporting. A high level of reliability is not necessary for a measure to provide useful information for quality improvement. With this information, providers are equipped to analyze their performance and take steps towards improving their patients' experiences.

Learn more about [improving patients' experiences with primary and specialty care](#).

Related resource: [The CAHPS Ambulatory Care Improvement Guide](#)

Appendix: Survey Items Organized by Measure

Organizations reporting the results of the CAHPS Surgical Care Survey can use the following labels and descriptions of the reporting measures in reports for consumers and other audiences.

Information To Help You Prepare For Surgery

The survey asked patients whether their surgeon or a health provider from this surgeon's office gave them all the information they needed before surgery and gave them instructions that were easy to understand.

Q3	Before your surgery, did anyone in this surgeon's office give you all the information you needed about your surgery?	Response Options <ul style="list-style-type: none"> ▪ Yes, definitely ▪ Yes, somewhat ▪ No
Q4	Before your surgery, did anyone in this surgeon's office give you easy to understand instructions about getting ready for your surgery?	

How Well Surgeon Communicates With Patients Before Surgery

The survey asked patients whether, before their surgery, the surgeon listened carefully to them, spent enough time with them, encouraged them to ask questions, and showed respect for what they had to say.

Q9	During your office visits before your surgery, did this surgeon listen carefully to you?	Response Options <ul style="list-style-type: none"> ▪ Yes, definitely ▪ Yes, somewhat ▪ No
Q10	During your office visits before your surgery, did this surgeon spend enough time with you?	
Q11	During your office visits before your surgery, did this surgeon encourage you to ask questions?	
Q12	During your office visits before your surgery, did this surgeon show respect for what you had to say?	

Surgeon's Attentiveness on Day of Surgery

The survey asked patients whether their surgeon visited them before surgery and discussed the outcome of their surgery.

Q15	After you arrived at the hospital or surgical facility, did this surgeon visit you before your surgery?	Response Options <ul style="list-style-type: none"> ▪ Yes ▪ No
Q17	Before you left the hospital or surgical facility, did this surgeon discuss the outcome of your surgery with you?	

Information To Help You Recover From Surgery

The survey asked patients whether their surgeon or a health provider from this surgeon's office explained what to expect during recovery, warned them about symptoms that need immediate attention, gave them easy-to-understand instructions about what to do during recovery, and made sure they were physically comfortable or had enough pain relief after leaving the hospital or surgery facility.

Q26	Did anyone in this surgeon's office explain what to expect during your recovery period?	Response Options <ul style="list-style-type: none"> ▪ Yes, definitely ▪ Yes, somewhat ▪ No
Q27	Did anyone in this surgeon's office warn you about any signs or symptoms that would need immediate medical attention during your recovery period?	
Q28	Did anyone in this surgeon's office give you easy to understand instructions about what to do during your recovery period?	
Q29	Did this surgeon make sure you were physically comfortable or had enough pain relief after you left the hospital or surgical facility where you had your surgery?	

How Well Surgeon Communicates With Patients After Surgery

The survey asked patients whether, after their surgery, the surgeon listened carefully to them, spent enough time with them, encouraged them to ask questions, and showed respect for what they had to say.

Q31	After your surgery, did this surgeon listen carefully to you?	Response Options <ul style="list-style-type: none"> ▪ Yes, definitely ▪ Yes, somewhat ▪ No
Q32	After your surgery, did this surgeon spend enough time with you?	
Q33	After your surgery, did this surgeon encourage you to ask questions?	
Q34	After your surgery, did this surgeon show respect for what you had to say?	

Helpful, Courteous, and Respectful Staff at Surgeon's Office

The survey asked patients whether clerks and receptionists at the surgeon's office were as helpful as they thought they should be and treated them with courtesy and respect.

Q36	During these visits, were clerks and receptionists at this surgeon's office as helpful as you thought they should be?	Response Options <ul style="list-style-type: none"> ▪ Yes, definitely ▪ Yes, somewhat ▪ No
Q37	During these visits, did clerks and receptionists at this surgeon's office treat you with courtesy and respect?	

Patients' Rating of the Surgeon

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

Q35	Using any number from 0 to 10, where 0 is the worst surgeon possible and 10 is the best surgeon possible, what number would you use to rate all your care from this surgeon?	Response Options <ul style="list-style-type: none"> ▪ 0-10
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Patient Experience with Anesthesia Care

Note: Testing during the survey development process indicated that these measures would be best suited to efforts to improve patient experience rather than public reporting.

Communication with the Anesthesiologist

Q20	Did this anesthesiologist encourage you to ask questions?	Response Options <ul style="list-style-type: none"> ▪ Yes, definitely ▪ Yes, somewhat ▪ No
Q22	Did this anesthesiologist answer your questions in a way that was easy to understand?	
Q24	Did talking with this anesthesiologist during this visit make you feel more calm and relaxed?	

Patients' Rating of the Anesthesiologist

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

Q25	Using any number from 0 to 10, where 0 is the worst anesthesiologist possible and 10 is the best anesthesiologist possible, what number would you use to rate all your care from this anesthesiologist?	Response Options <ul style="list-style-type: none"> ▪ 0-10
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