Executive Summary

While outpatient services continue to gain market share as a result of technological and clinical advances and consumer and payer demand, patient satisfaction with these services is also growing, continuing a five-year rise.

Outpatient services commonly include laboratory tests, therapy, diagnostic testing, and many other tests or treatments that typically do not require anesthesia or an inpatient visit. Various studies show a steady rise in care in these settings. For example, the federal Centers for Disease Control and Prevention reports that from 1996 to 2006, visits to medical specialty offices climbed by 29 percent. Such data point to the growing importance for health care providers of customer satisfaction with outpatient services.

This 2009 Outpatient Pulse Report: Patient Perspectives on American Health Care represents the experiences of nearly 2.3 million patients nationwide between January 1 and December 31, 2008. With the economy in severe recession throughout 2008, it is interesting to find that outpatient care continued to meet or exceed patient expectations overall. Patients were most satisfied with tests and treatment and the overall care in the outpatient setting, but were least satisfied with the facilities and registration processes.

According to patients, their top four priorities for improvement in outpatient care all have to do with respect, sensitivity, and teamwork. These priorities are closely identified with a patient’s likelihood to recommend a facility to family and friends. They present critical opportunities for improvement. Topping the list is the ability of staff to respond quickly and effectively to patient concerns and complaints, which can set a facility apart in a competitive marketplace.

Wait time is one of the key predictors of satisfaction in outpatient care, as patients use these facilities to avoid lengthy absences from work or home. Although patient satisfaction is highest in the morning, that is actually when wait times are the longest—those appointments tend to cause less disruption in patients’ schedules. Satisfaction declines throughout the day, even though wait times are consistently in the twenty-one- to twenty-seven-minute range, with twenty-four minutes the average Monday to Friday, when most outpatient care is delivered.

Cancer patients receiving radiation treatments were the most satisfied outpatients in 2008, followed closely by cardiac rehabilitation. That finding is likely traced to patients’ familiarity with caregivers during ongoing treatment. Conversely, outpatient clinic patients are the least satisfied with their experience of care.

These research findings are a part of a series of Press Ganey pulse reports and check-up reports being released throughout 2009. These reports examine the status of health care quality across different care settings and from different perspectives. Their findings and observations highlight the progress being made in the face of today’s challenging health care landscape, call for some needed change, and explore the path to improving the quality of health care in the United States.
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Satisfaction with care in the outpatient setting has increased gradually every quarter since 2004. Outpatient services commonly include laboratory tests, therapy, diagnostic testing, and many other tests or treatments that typically do not require anesthesia or an inpatient visit. Even as the economic climate and medical landscape change, outpatient care continues to meet or exceed patient expectations overall. However, expectations for prompt, compassionate, and comfortable care in the outpatient setting will only increase as competition continues among hospitals and freestanding facilities.

5 Year Trend in Outpatient Satisfaction

Represents the experiences of 2,297,444 patients treated at 1,270 facilities nationwide between January 1 and December 31, 2008
According to patients, the top four priorities for improvement in outpatient care all have to do with respect, sensitivity, and teamwork. These priorities are identified because they are important to patients and are not currently areas of strength among outpatient facilities. They are most important to drive patients to recommend the center to others but patients report that these centers are performing relatively poorly in these areas. Most important is how staff responds when there is a problem (a concern or complaint), reminding us how crucial service recovery is for patient loyalty. Moving from third highest priority in 2007 to fifth this year is the comfort of the waiting room.

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Mean</th>
<th>Correlation</th>
<th>Priority Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Response to concerns/complaints made during your visit</td>
<td>91.4</td>
<td>0.707</td>
<td>1</td>
</tr>
<tr>
<td>Our sensitivity to your needs</td>
<td>91.7</td>
<td>0.697</td>
<td>2</td>
</tr>
<tr>
<td>How well staff worked together to provide care</td>
<td>93.2</td>
<td>0.767</td>
<td>3</td>
</tr>
<tr>
<td>Staff’s concern for your questions and worries</td>
<td>92.8</td>
<td>0.645</td>
<td>4</td>
</tr>
<tr>
<td>Comfort of the waiting area</td>
<td>88.3</td>
<td>0.474</td>
<td>5</td>
</tr>
</tbody>
</table>
While patients may be satisfied with the test or treatment performed and with their overall care in the outpatient setting, they are much less impressed with the facility and registration process. While this may be considered a success in terms of the execution of what patients come in for, the comfort and lack of hassle or stress involved in an appointment are what will differentiate a facility for patients and help create loyalty.
As was the case for patients in 2007, those in 2008 reported the highest satisfaction with radiation treatments, followed by cardiac rehabilitation. This may be due to familiarity with the setting and relationships with caregivers, as patients in both of these specialty groups receive ongoing outpatient care.

This list is limited to the top ten outpatient specialties; specialties below the 10th position are not included.

### Top Ten Services Received by Overall Patient Satisfaction

Represents the experiences of 2,297,444 patients treated at 1,270 facilities nationwide between January 1 and December 31, 2008

<table>
<thead>
<tr>
<th>Service</th>
<th>Mean</th>
<th># Facilities</th>
<th># Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radiation Oncology/Therapy</td>
<td>94.24</td>
<td>23,349</td>
<td>237.00</td>
</tr>
<tr>
<td>Cardiac Rehabilitation</td>
<td>93.54</td>
<td>18,070</td>
<td>494.00</td>
</tr>
<tr>
<td>Mammography</td>
<td>93.32</td>
<td>283,955</td>
<td>788.00</td>
</tr>
<tr>
<td>Bone Densitometry</td>
<td>93.06</td>
<td>11,165</td>
<td>119.00</td>
</tr>
<tr>
<td>Oncology</td>
<td>92.85</td>
<td>11,032</td>
<td>119.00</td>
</tr>
<tr>
<td>Endoscopy</td>
<td>92.81</td>
<td>23,756</td>
<td>98.00</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>92.69</td>
<td>81,101</td>
<td>564.00</td>
</tr>
<tr>
<td>Cardiac Catheterization</td>
<td>92.69</td>
<td>34,641</td>
<td>291.00</td>
</tr>
<tr>
<td>Infusion Clinic</td>
<td>92.50</td>
<td>8,924</td>
<td>101.00</td>
</tr>
<tr>
<td>PET Scan</td>
<td>92.31</td>
<td>8,949</td>
<td>105.00</td>
</tr>
</tbody>
</table>
Weekday treatments lead to more satisfaction among patients than weekend appointments. This is likely because fewer facilities offer non-emergent care on the weekends.
Patients are more satisfied with outpatient appointments that take place earlier in the day. Despite the early wakeup, these appointments are less disruptive to a typical workday. Staff may be more hospitable during the earlier appointments, before any pressures or frustrations have had their chance to build. Patient satisfaction is lowest for appointments near the end of the workday (4:00-6:00 p.m. and later), possibly due to the combination of patients and staff trying to wrap up their day and get home.
Wait time is one of the key predictors of patient satisfaction in any medical setting and outpatient is no exception. After fifteen minutes, satisfaction drops. After thirty minutes, it decreases more dramatically. Patients may be concerned about returning to work or their family in a timely fashion and will be more loyal to your facility if you respect their time. Many medical offices have adopted a policy that patients who are more than fifteen minutes late risk losing their appointment; however, the reverse is generally not true. While it is difficult to balance pressures to fit patients in for timely appointments and to avoid long wait times, facilities that are able to meet both needs through staffing and scheduling reap the benefits in patient satisfaction and loyalty.
As was the case last year, patients receiving outpatient care during the work week are likely to wait the same amount of time, regardless of the day of the week. The average wait time for outpatient care is consistently twenty-four minutes, Monday through Friday, when most outpatient services are received.

The weekends vary—on Saturday there is a below-average wait of twenty-two minutes; but on Sunday, the wait jumps to twenty-eight minutes. This increase likely reflects the limited staff and availability of weekend outpatient services.
Although patient satisfaction is highest in the morning and declines through the day, wait time is consistently between twenty-one and twenty-seven minutes with the longest wait times coming in the morning. However, the thought that morning appointments will generate a shorter wait does not hold true; these appointments merely cause less disruption in a patient’s day.
In general, patient satisfaction with outpatient tests or treatments increases with age. The least satisfied group is the 18 to 34-year-old range. These patients may have higher expectations for prompt service and be particularly critical when they have to wait. They are likely to be most concerned about returning to work in a timely fashion. Along with those in the 35 to 49-year-old group, the least satisfied patients may include the parents of the 0 to 17-year-old group who are under similar pressures for prompt appointments and fast care.
Patient satisfaction with same-day surgery has increased overall since 2004. It is important to recognize that patients undergoing generally non-emergent surgery that does not require a hospital stay are relatively satisfied overall. This makes it all the more critical for surgery facilities to go above and beyond in exceeding patient expectations in order to remain competitive in this industry.

### Trend in Same-Day Surgery Satisfaction

![Graph showing trend in same-day surgery satisfaction](image)

The graph above illustrates the trend in same-day surgery satisfaction over the years. The satisfaction rate has shown a steady increase from 2004 onwards, indicating a positive trend in patient satisfaction with same-day surgery.
As was the case for outpatient tests and treatments, the top priority for same-day surgery patients has to do with service recovery. Especially in a highly competitive market, it is what staff does to remedy problems, issues, and patient concerns and complaints that can differentiate a facility and earn a patient’s loyalty.

Other lower-scoring items upon which patients place great importance include communication when delays occur and concern for patient privacy.

The attractiveness of the surgery center may not seem important, but can differentiate the good from the best in patients’ minds.

Finally, patient education is a critical piece of same-day surgery. Procedures that used to be performed in an inpatient setting are now taken care of with same-day surgery. Patient and their home caregivers must feel completely comfortable about their recovery at home before they leave the same-day surgery facility and must have clear instructions on who to call with questions, signs to watch for, and the plan for follow-up appointments and care.

### National Same-Day Surgery Priority Index

Survey items are correlated to patient ratings of "Likelihood of your Recommending our Ambulatory Surgery Center to others"

Represents the experiences of 1,096,057 patients treated at 1,281 facilities nationwide between January 1 and December 31, 2008

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Mean</th>
<th>Correlation</th>
<th>Priority Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Response to concerns/complaints made during your visit</td>
<td>91.4</td>
<td>0.67</td>
<td>1</td>
</tr>
<tr>
<td>Information provided about delays</td>
<td>83.1</td>
<td>0.51</td>
<td>2</td>
</tr>
<tr>
<td>Our concern for your privacy</td>
<td>91.2</td>
<td>0.54</td>
<td>2</td>
</tr>
<tr>
<td>Attractiveness of the Surgery Center</td>
<td>87.9</td>
<td>0.46</td>
<td>4</td>
</tr>
<tr>
<td>Instructions nurses gave about caring for yourself at home</td>
<td>91.9</td>
<td>0.56</td>
<td>5</td>
</tr>
</tbody>
</table>
Patients whose same-day surgery took place at a hospital-affiliated but freestanding facility reported the highest satisfaction with their care. Interestingly, those who underwent same-day surgery at a hospital had the lowest satisfaction. This may be due to the focus on same-day patients at freestanding facilities, whereas surgeries taking place in a hospital may have to contend with shared operating rooms, recovery rooms, and emergency surgeries delaying the day’s schedule.
As in 2007, patients undergoing surgery or procedures in podiatry or ophthalmology report the highest satisfaction with their care. Patients tend to be most satisfied with less invasive and/or more elective surgery.

This list is limited to the top ten same-day surgery specialties; specialties below the 10th position are not included.

### Top Ten Specialties by Overall Patient Satisfaction

Representing the experiences of 1,096,057 patients treated at 1,281 facilities nationwide between January 1 and December 31, 2008

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Mean</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Podiatry</td>
<td>93.1</td>
<td>1</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>92.8</td>
<td>2</td>
</tr>
<tr>
<td>Cosmetic Surgery</td>
<td>92.5</td>
<td>3</td>
</tr>
<tr>
<td>Colonoscopy</td>
<td>92.2</td>
<td>4</td>
</tr>
<tr>
<td>Orthopedics</td>
<td>91.8</td>
<td>5</td>
</tr>
<tr>
<td>Gastrointestinal</td>
<td>91.7</td>
<td>6</td>
</tr>
<tr>
<td>General Surgery</td>
<td>91.6</td>
<td>7</td>
</tr>
<tr>
<td>Gynecology</td>
<td>91.6</td>
<td>8</td>
</tr>
<tr>
<td>Endoscopy</td>
<td>91.6</td>
<td>8</td>
</tr>
<tr>
<td>Cardiology</td>
<td>91.6</td>
<td>10</td>
</tr>
</tbody>
</table>
Case Study

Introduction
St. Mary Medical Center (St. Mary’s) has partnered with Press Ganey since 2006, utilizing solutions services and tracking patient satisfaction scores to improve the quality of care it provides. Recently, St. Mary’s decided to focus improvement efforts on its outpatient services.

“As anyone in the health care industry will tell you, outpatient is a main focus,” says Janice Ryba, chief executive officer of St. Mary’s. “Building relationships with physicians and patients results in patients returning for service, and we find it’s working for us.”

How St. Mary’s built these relationships with patients in the outpatient setting was through a common sense approach: examining its Press Ganey patient satisfaction scores, identifying areas for improvement, and working to meet the needs of its physicians to ultimately meet the needs of the patients.

Outpatient Successes: Digital Mammography Services
When it comes to tests, patients and physicians want results—and the faster the better. Part of the success of St. Mary’s mammography services comes from meeting this patient expectation. St. Mary’s hired dedicated radiologists who specialize in mammography and are trained to provide “same-day results.” Knowing this was a huge patient satisfier, St. Mary’s strove to do more. Now, St. Mary’s can also boast that, for some patients, a same-day biopsy with results can be performed. Tammie Finn, vice president and chief nursing officer of St. Mary’s, says, “I don’t know of any health care system, particularly in northwest Indiana, that can provide these services in the same day.”

Physicians Are a Part of the Equation
St. Mary’s recognized that physician satisfaction is an important component of increasing patient satisfaction. To ensure regular and easy access to patient radiological films and records, St. Mary’s purchased new software for physician use. One program allows easier physician transcription, while the other allows physicians to access test results within minutes after dictation. Physicians can also remotely review scans and results either at their offices or at home. Not only have these options increased physicians’ satisfaction with their practice, says Ryba, they have also increased the level of service that St. Mary’s can provide by affording faster turnaround times and more satisfied physicians.

Conclusion
Ryba notes that, after enhancing these services, “Our mammography services’ patient satisfaction scores continue to be maintained at or near the 99th percentile.” Further, St. Mary’s saw an increase in volume of 6 percent, and the gross revenues in mammography increased by 13 percent.

St. Mary’s has found that taking an objective, clear view of its data and focusing on what can be done to meet patients’ needs results in higher patient satisfaction and improved volumes and revenues. By bringing physicians into the equation, providing patient care is now easier and faster, two key components to higher outpatient satisfaction scores.

About St. Mary Medical Center
Part of the Community Healthcare System, St. Mary’s is a 190-bed not-for-profit Roman Catholic hospital located in Hobart, Indiana. Outpatient services offered at St. Mary’s include: imaging; non-invasive cardiology; cardiac rehabilitation; pain clinic; laboratory services; wound center; neurology; electrophysiology services; general radiology; respiratory care; cancer care; speech, occupational, and physical therapy; and a new incontinence clinic.

http://www.comhs.org/stmary
Methodology

Press Ganey’s outpatient services and surgery surveys give patients who have been treated in various outpatient settings the opportunity to provide feedback about their experiences. The surveys are used by medical practices, ambulatory surgery centers, and outpatient facilities across the United States to improve the quality of the service and care they deliver.

Highly valid and reliable, each Press Ganey survey consists of a set of standard questions organized into sections. The outpatient services survey contains seventeen standard questions within five sections: Registration, Test or Treatment, Facility, Personal Issues, and Overall Assessment. The Outpatient Surgery survey contains 29 standard questions within six sections: Registration, Nursing, Physicians, Facility, Personal Issues, and Overall Assessment.

Distribution of Surveys
Surveys are mailed to patients soon after discharge, while their experiences are still fresh in mind. Upon receipt by Press Ganey, completed surveys are processed and added to a national database. Press Ganey complies with the Health Insurance Portability and Accountability Act (HIPAA), which establishes national standards for the security and privacy of health data.

Definition and Calculation of Overall Mean Score
Once surveys are returned to Press Ganey, surveys are processed and added to the client’s electronic data storage area. Processing of surveys takes place immediately so that clients can have up-to-the-minute information about their service quality. Responses to survey questions are converted to a series of 100-point maximum scales so that clients can compare different aspects of their performance on a common yardstick. First, for each person who took the survey, responses to the survey questions are translated from a 5-point scale to the 100-point scale. Items rated “Very Good” are awarded 100 points; those rated “Good,” 75 points; items rated “Fair,” 50 points; “Poor,” 25 points; and any items rated “Very Poor” are awarded zero points. Next, each respondent’s individual item scores within a survey section (see above) are averaged to become scores for each section. Finally, section scores are averaged to become that respondent’s overall satisfaction score. The average of all respondents’ overall satisfaction scores is called the client’s Overall Mean Score, and is stored electronically and made available to the client.

Definition of Correlations
A correlation tells us how much a change in one variable (e.g., an item score) is associated with a concurrent systematic change in another variable (e.g., overall satisfaction). A correlation represents the strength and direction of the relationship between two variables numerically, expressed using a correlation coefficient (called r) which can range from – 1.0 to + 1.0. The greater the distance from 0, the stronger the relationship is between the two correlated items. A positive correlation coefficient indicates that as the value of one variable increases, the value of the other variable also increases. A negative correlation coefficient indicates that as the value of one variable increases, the value of the other variable decreases. It is important to recognize that when two variables are correlated it means that they are related to each other, but it does not necessarily mean that one variable causes the other.

Priority Index Calculation
The Priority Index is an ordered list of survey items that shows the areas needing the most improvement. In the Priority Index, survey items are arranged from the “first item to work on” to the “last item to work on.” The Priority Index reflects service issues that clients are performing relatively poorly on that are important to their patients. The index is calculated by looking at two aspects of each survey item’s data: its average score, and how well it mirrors the respondent’s overall satisfaction score, as determined above. Survey items that have low average scores (indicating that the facility’s quality for that aspect of care is lacking relative to other care aspects) and faithfully mirror the respondent’s overall satisfaction score will have high Priority Index scores.
For more than 20 years, Press Ganey has been committed to providing insightful information that allows our more than 7,000 health care client facilities to continuously improve their performance. Our foundation for success is built upon dedication to scientific integrity, relentless responsiveness to our clients’ changing requirements, and an overall passion for helping our clients succeed. By pursuing and acting upon input from our clients, we are consistently able to develop and deliver the newest innovations. We continue to succeed by exchanging knowledge with our clients, and facilitating the exchange of knowledge between our clients.

With more than 11 million surveys processed annually, Press Ganey has the most extensive data and resources for improving patient satisfaction, employee engagement, physician engagement, and patient safety. Press Ganey’s tools and services—measurement tools, consulting services, networking opportunities, and solutions for improvement—use patient, employee, and physician feedback to drive health care improvement initiatives.

All data and findings represent surveys returned by patients, physicians, and employees to Press Ganey clients.

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