

## Physicians' Views on Quality of Care: Findings from the Commonwealth Fund National Survey of Physicians and Quality of Care

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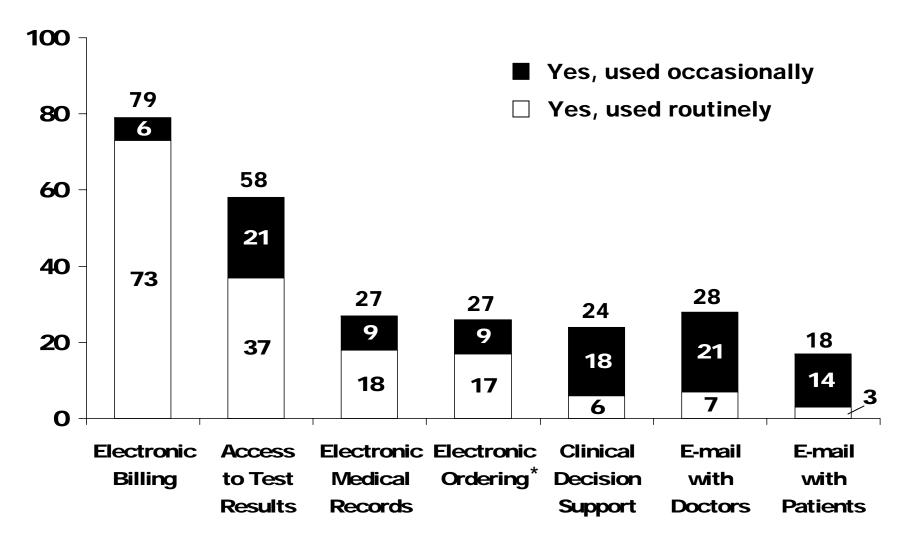
May 2005

# Chapter I Information Technologies: Current Use, Future Plans, and Perceived Barriers

## **Use of Information Technologies** in Clinical Practice

#### Chart I-1. Use of Information Technologies

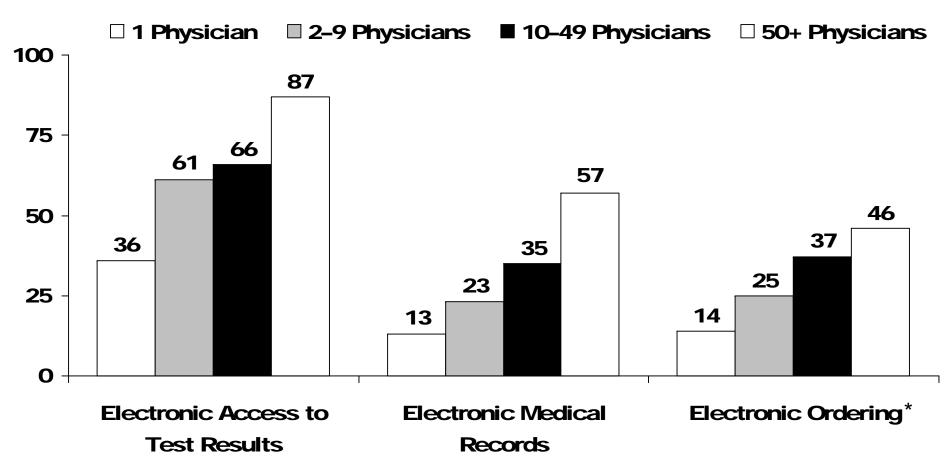
Percent indicating "routine" or "occasional" use



<sup>\*</sup> Electronic ordering of tests, procedures, or drugs.

## Chart I-2. Electronic Access to Patient Test Results, Electronic Medical Records, and Electronic Ordering, by Practice Size

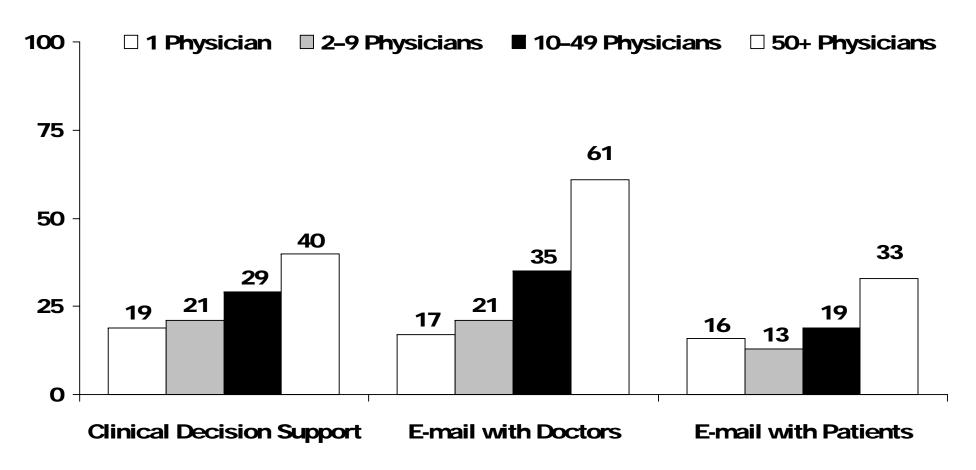
Percent who currently "routinely/occasionally" use the following



<sup>\*</sup> Electronic ordering of tests, procedures, or drugs.

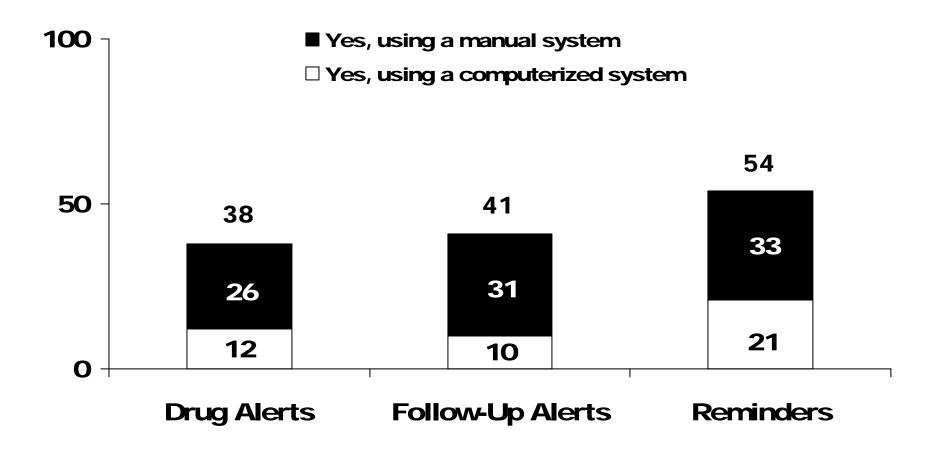
#### Chart I-3. Use of Clinical Decision Support, E-mail with Doctors, and E-mail with Patients, by Practice Size

Percent who currently "routinely/occasionally" use the following



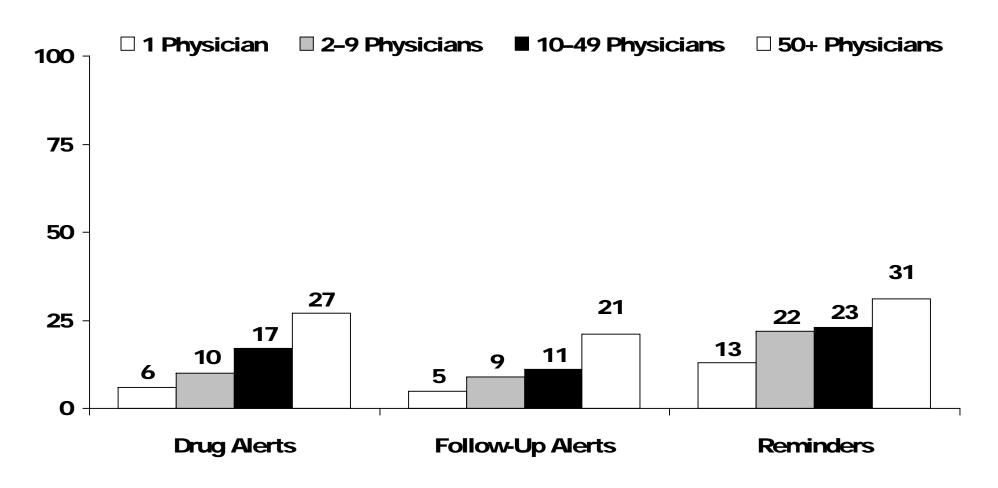
#### Chart I-4. Use of Reminders or Alerts

Percent indicating following tasks currently performed in their office practice



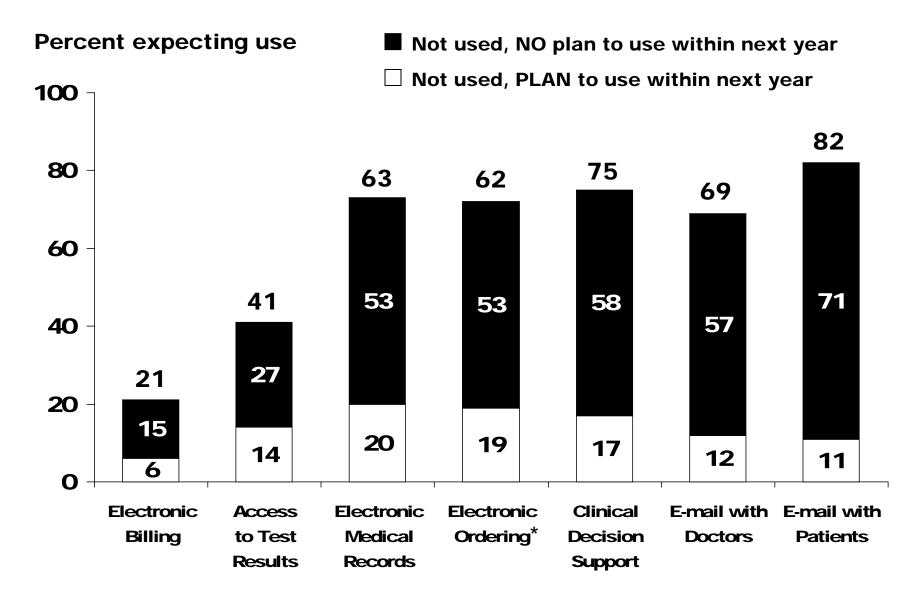
## Chart I-5. Use of Electronic Drug Alerts, Follow-Up Alerts, and Reminders, by Practice Size

Percent who currently use a "computerized system" for the following



#### **Future Use of IT**

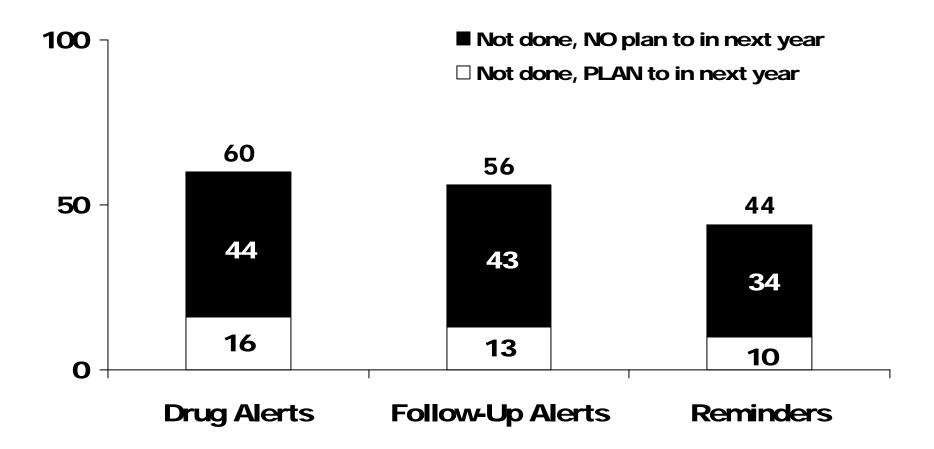
#### Chart I-6. Planned Future Use of IT



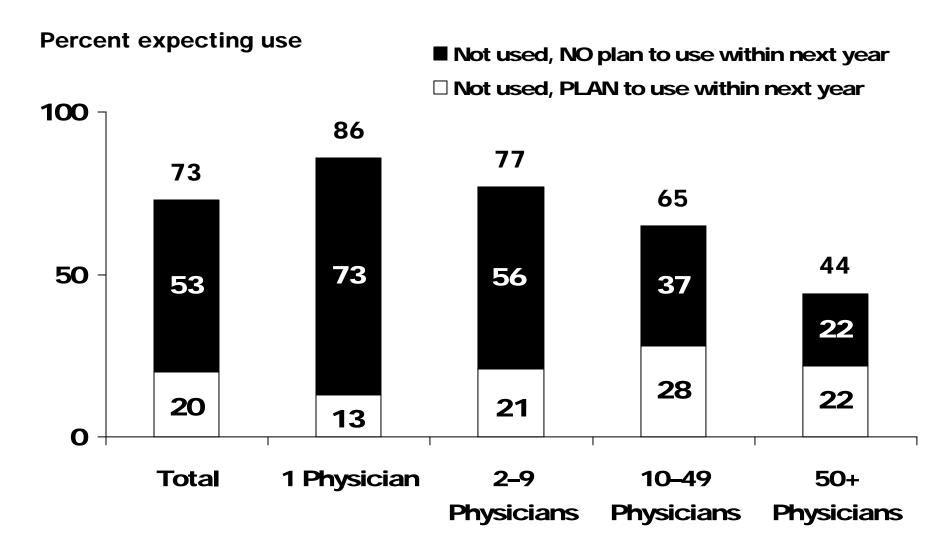
<sup>\*</sup> Electronic ordering of tests, procedures, or drugs.

#### Chart I-7. Planned Future Use of Reminders or Alerts

Percent expecting future use of the following

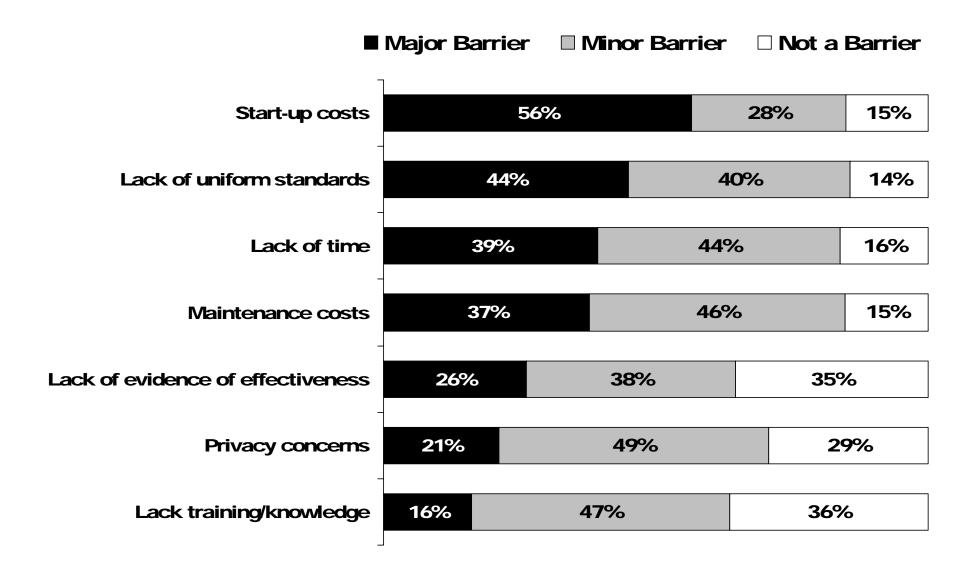


## Chart I-8. Planned Future Use of Electronic Medical Records, by Practice Size



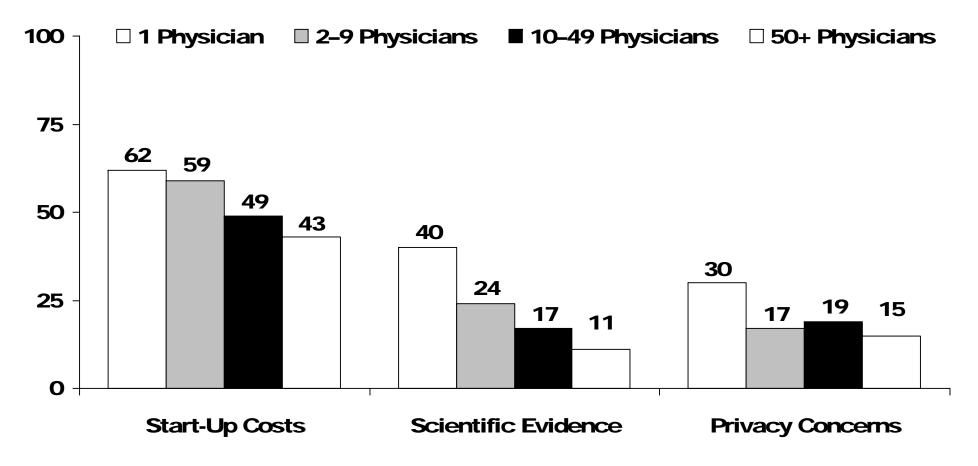
#### **Perceived Barriers to IT Adoption**

#### **Chart I-9. Barriers to Adoption**



## Chart I-10. Barriers to Adoption of Information Technologies, by Practice Size

Percent indicating start-up costs, scientific evidence, or privacy concerns as a "major barrier" to greater use of information technologies



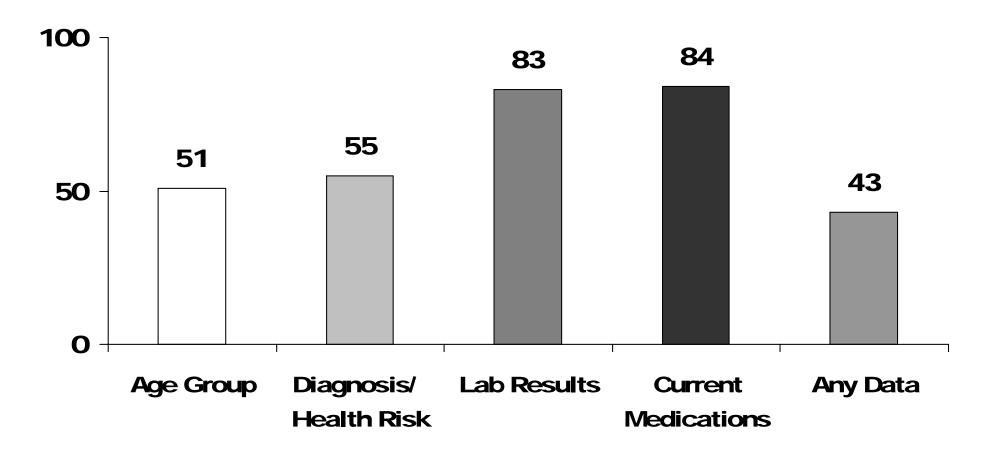
#### **Chapter II**

## Practice-Level and Performance Data: Availability, Sources, and Willingness to Share

#### **Access to Patient Panel Data**

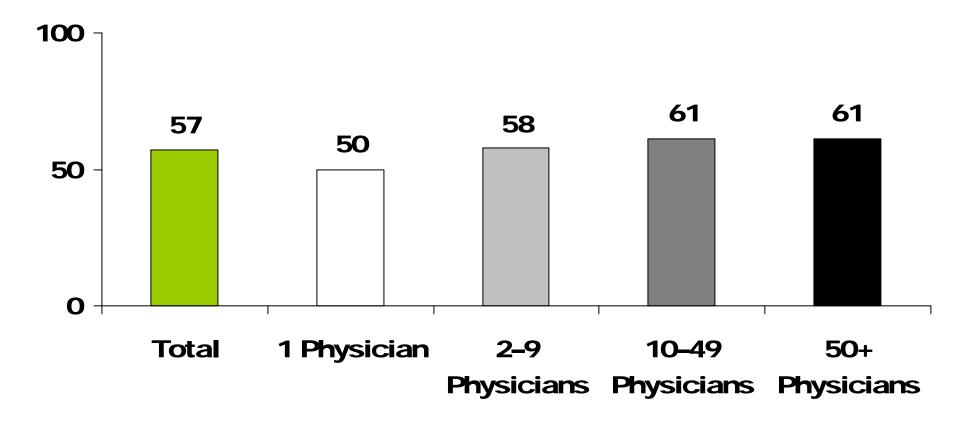
#### Chart II-1. Physicians' Access to Patient Panel Data

Percent indicating "very/somewhat" difficult or cannot generate lists of patients by



## Chart II-2. Physicians' Access to Any Patient Panel Data, by Practice Size

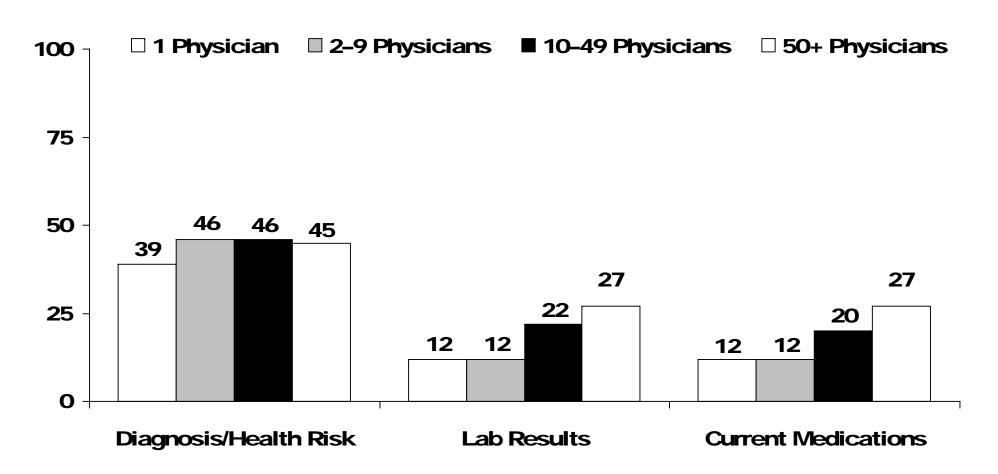
Percent indicating "very/somewhat" easy to generate lists of patients using any\* criteria



<sup>\*</sup> Indicates "very/somewhat" easy to generate lists of patients using any of the following criteria: age group, diagnosis/health risk, lab results, or current medications.

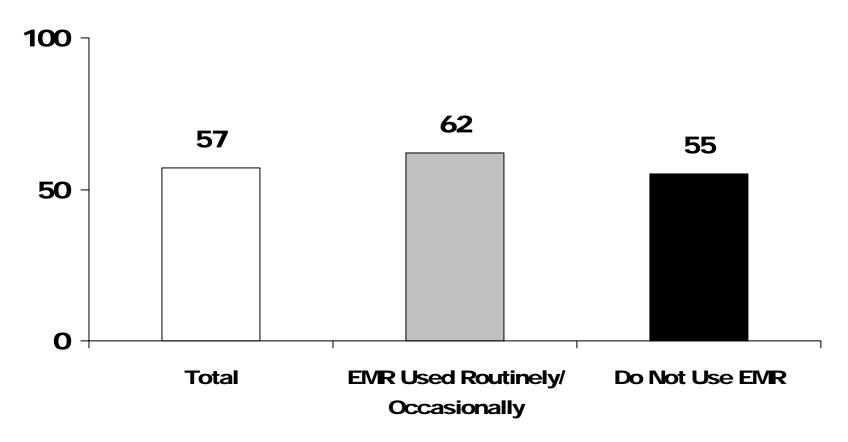
## Chart II-3. Physicians' Access to Patient Panel Data, by Practice Size

Percent indicating "very/somewhat" easy to generate lists of patients by



## Chart II-4. Physicians' Access to Any Patient Panel Data, by Electronic Medical Record Use

Percent indicating "very/somewhat" easy to generate lists of patients using any\* criteria

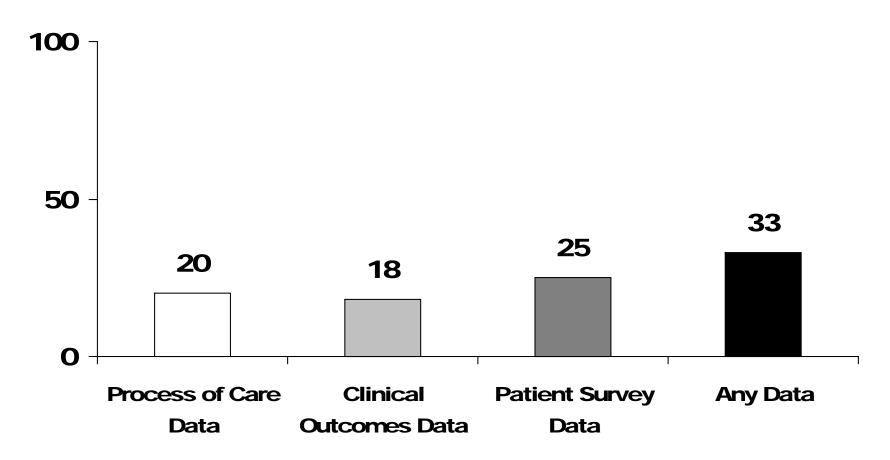


<sup>\*</sup> Indicates "very/somewhat" easy to generate lists of patients using any of the following criteria: age group, diagnosis/health risk, lab results, or current medications.

## Access to Quality-of-Care or Performance Data

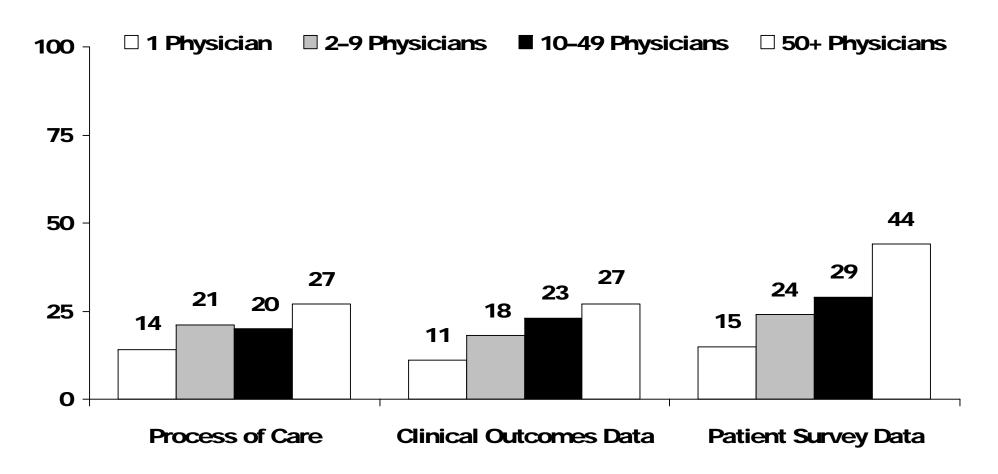
#### Chart II-5. Physicians' Access to Quality-of-Care or Performance Data

Percent receiving data on the following aspects of patient care



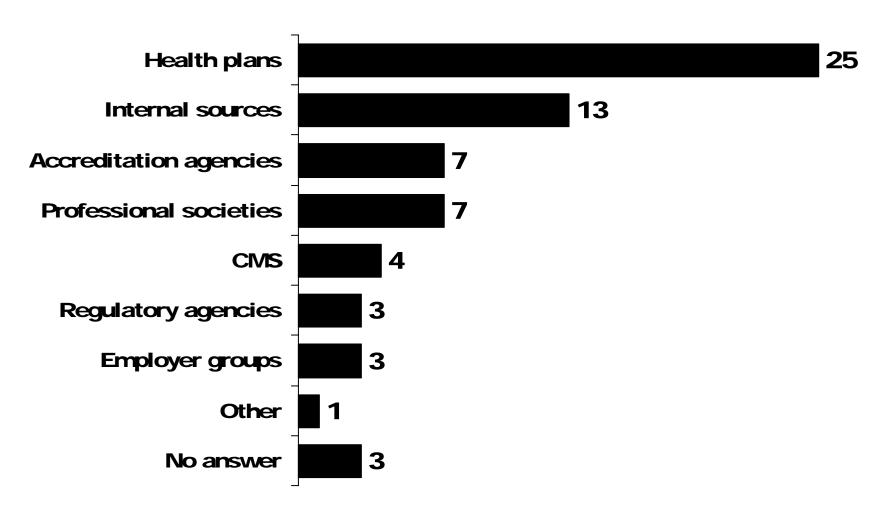
#### Chart II-6. Physicians' Access to Quality-of-Care Data, by Practice Size

Percent receiving data on the following aspects of patient care



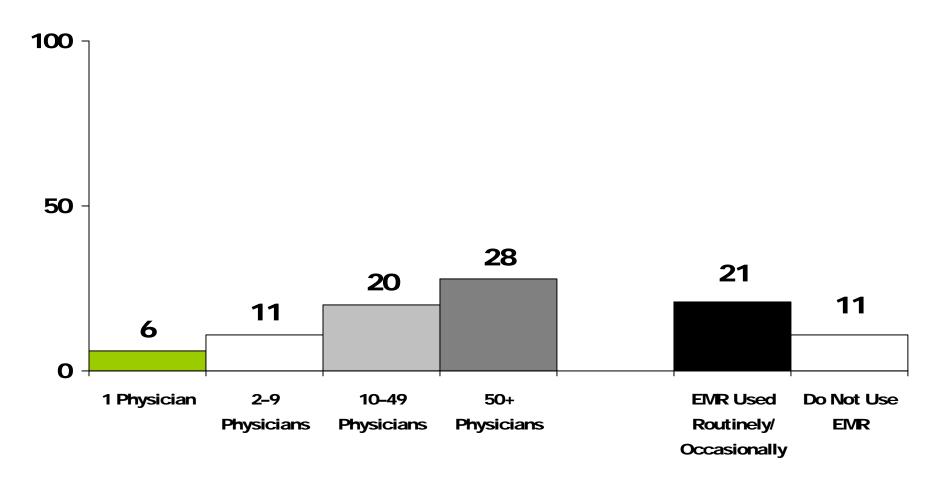
## Chart II-7. Physicians' Sources of Quality-of-Care Data

Percent of physicians indicating each as a source of quality of care data



## Chart II-8. Physicians' Ability to Generate Any Quality-of-Care Data Internally

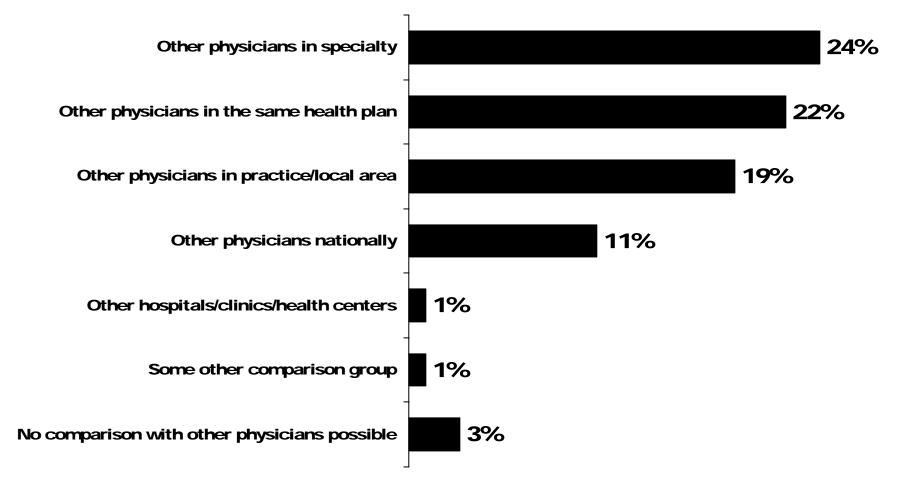
Percent indicating they receive quality-of-care data from internal sources



#### **Ability to Benchmark**

## Chart II-9. Physicians' Ability to Compare Performance

Percent of physicians able to compare themselves to



#### **Sharing Performance Information**

## Chart II-10. Physicians' Willingness to Share Quality-of-Care Data

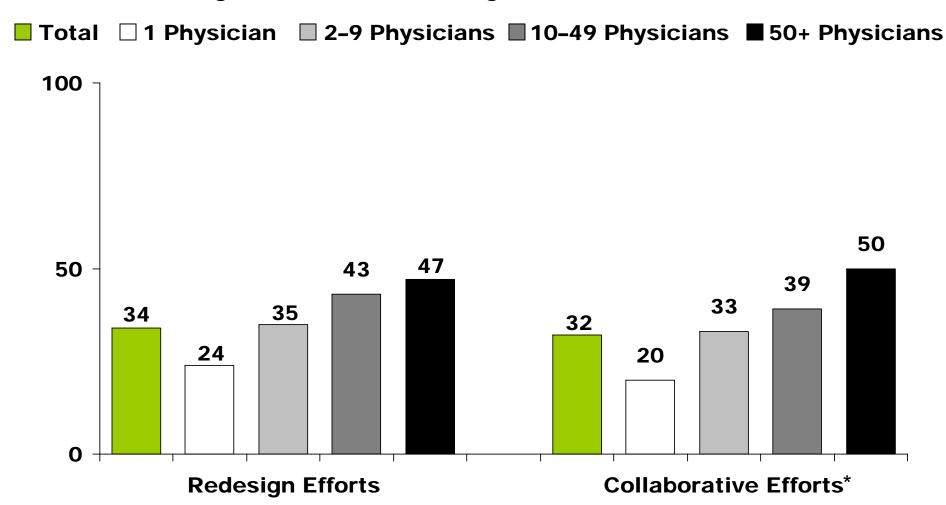
Willingness to share data with:*	Yes, Definitely/ Probably	No, Definitely/ Probably Not
Medical leadership	71%	27%
Physicians' own patients	55%	44%
General public	29%	69%
Other physicians	72%	26%

<sup>\*</sup> Answers to survey question: "To improve high quality of care in the U.S., which of the following do you think should have access to 'Quality of Care' data about individual physicians?"

# Chapter III Physicians' Involvement in Quality Improvement Activities

## Chart III-1. Physicians' Participation in Redesign and Collaborative Activities, by Practice Size

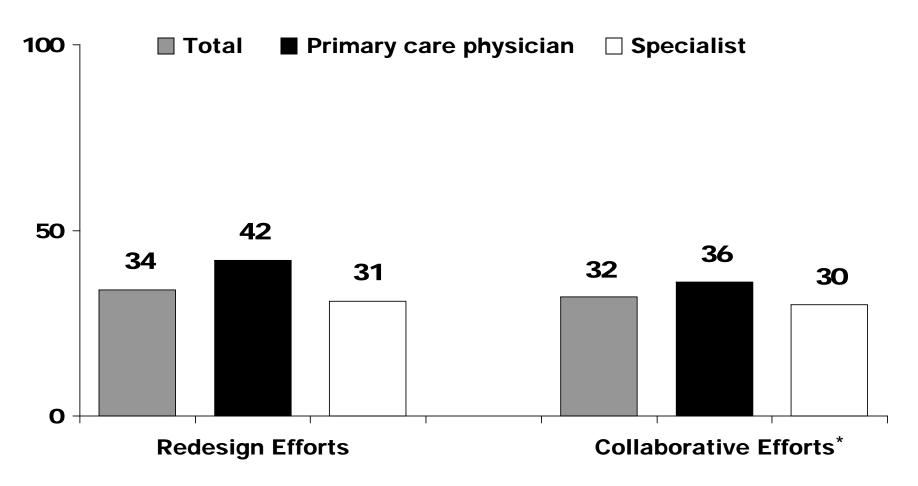
Percent indicating involvement in redesign and collaborative efforts



<sup>\*</sup> Indicates physicians who responded yes to participating in local, regional, or national collaboratives in the past 2 years. Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

## Chart III-2. Physicians' Participation in Redesign and Collaborative Activities, by Physician Type

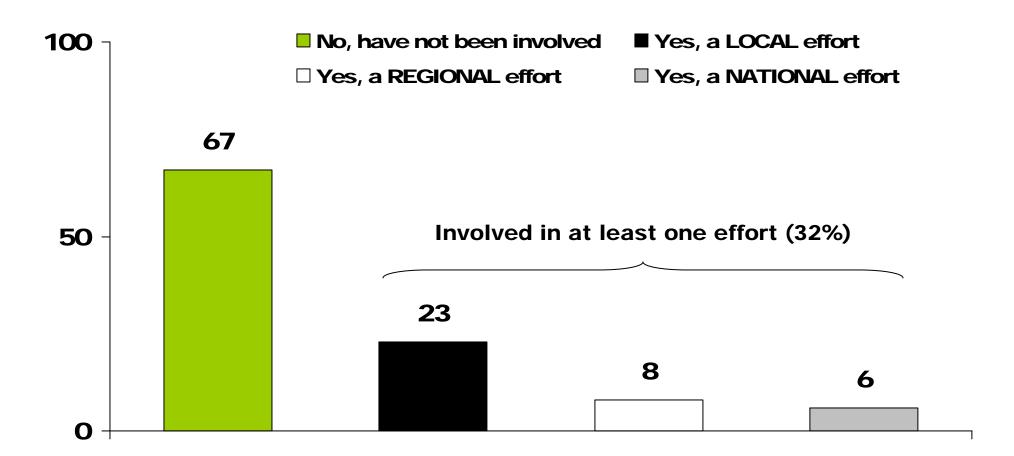
Percent indicating involvement in redesign and collaborative efforts



<sup>\*</sup> Indicates physicians who responded yes to participating in local, regional, or national collaboratives in the past 2 years. Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

## Chart III-3. Physicians' Involvement in Collaborative Efforts to Improve Quality of Care

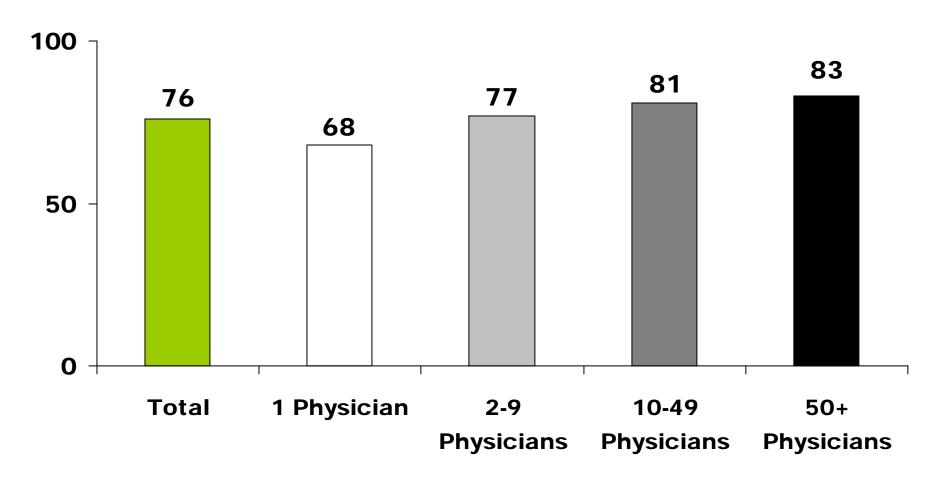
Percent indicating involvement in any collaborative efforts in past two years\*



<sup>\*</sup> Multiple answers possible.

### Chart III-4. Physicians' Opinions on Effectiveness of Collaborative Activities, by Practice Size

Percent saying that involvement in collaborative efforts is "very/somewhat" effective in improving quality of care



## Chapter IV Coordination of Care and Referrals

Percent who

15%

11%

#### **Chart IV-1. Coordination of Care Problems Physicians Observe**

observed problem sometimes or often in past 12 months Patient's medical record, test results, or other relevant clinical 72% information were not available at the time of the scheduled visit Tests or procedures had to be repeated because findings were 34% unavailable or inadequate for interpretation Patient experienced a problem following discharge from a hospital because 26% physician did not receive needed information from the hospital in a timely manner Patient's care was compromised because he/she received conflicting 28% information from different doctors or other health professionals

Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

Patient had a positive test result that was not followed-up appropriately

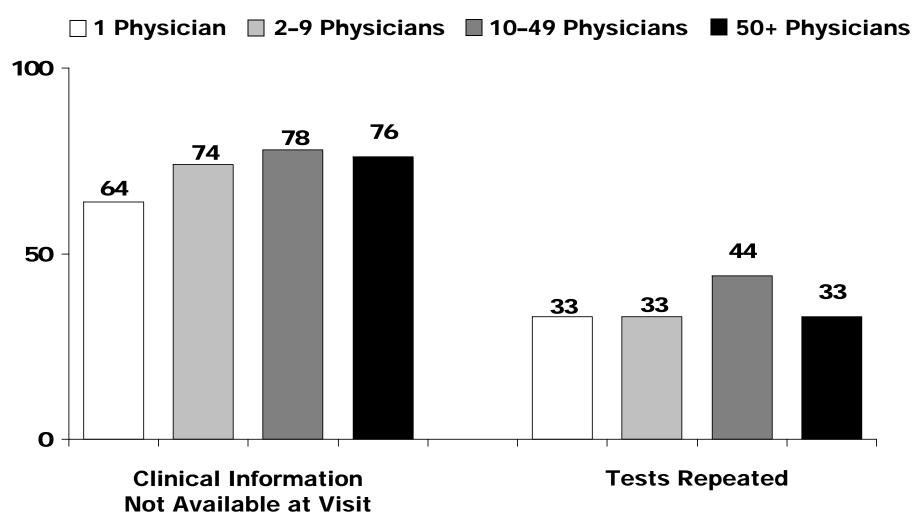
Patient received the wrong drug, wrong dose, or had a preventable

**Coordination of care problems** 

drug-drug interaction

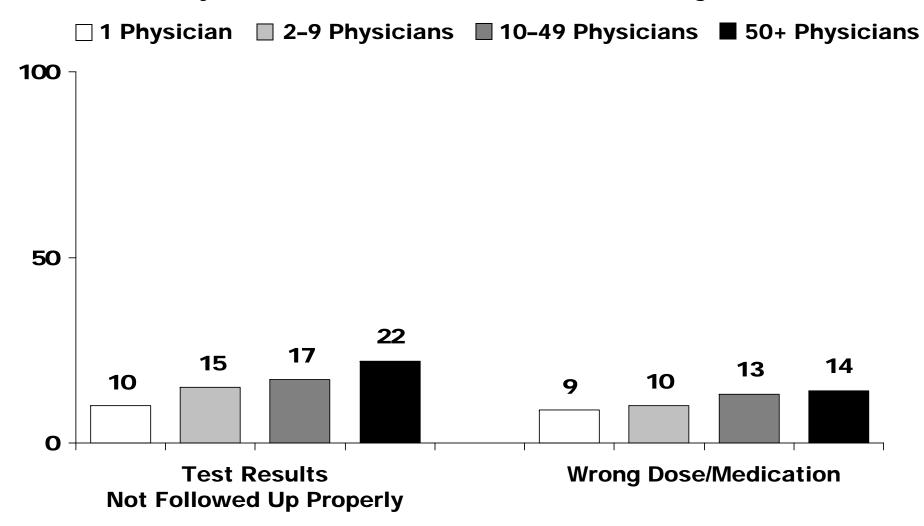
## Chart IV-2. Coordination of Care Problems, by Practice Size

Percent who say "often/sometimes" observed the following



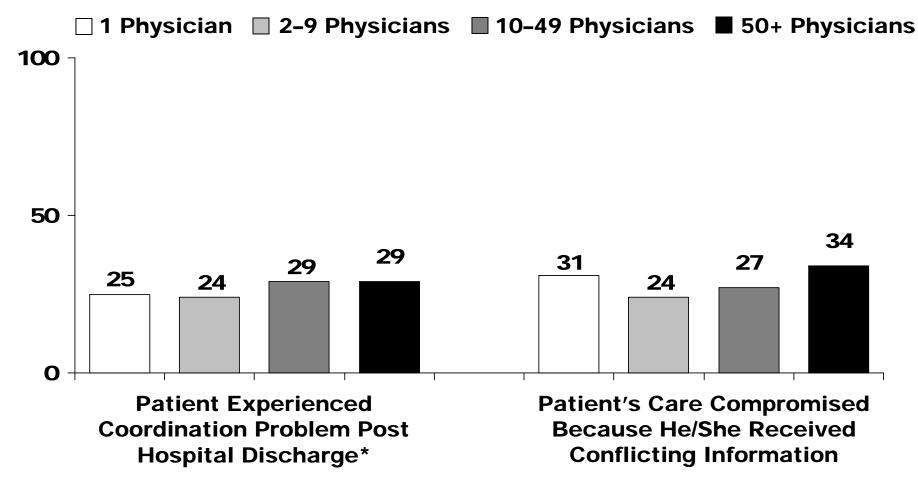
### Chart IV-3. Coordination of Care Problems, by Practice Size

Percent who say "often/sometimes" observed the following



## Chart IV-4. Coordination of Care Problems, by Practice Size

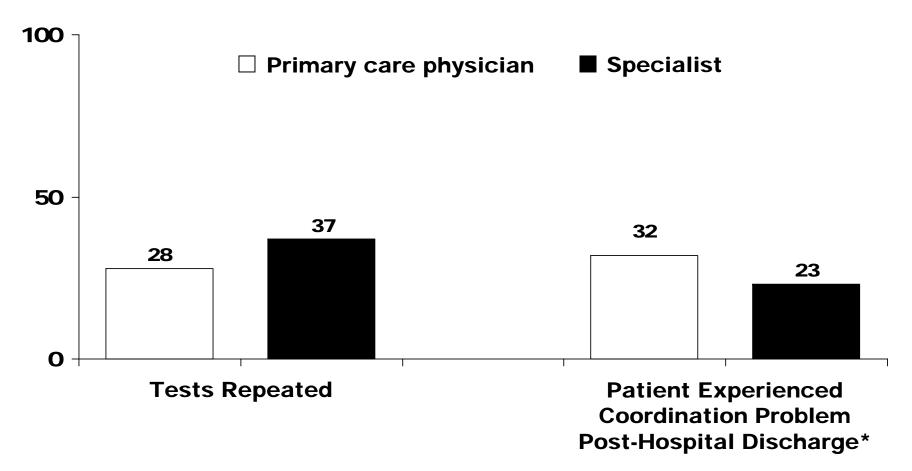
Percent who say "often/sometimes" observed the following



<sup>\*</sup> A patient experienced a problem following discharge from a hospital because his/her physician did not receive needed information from the hospital in a timely manner. Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

## Chart IV-5. Coordination of Care Problems, by Physician Type

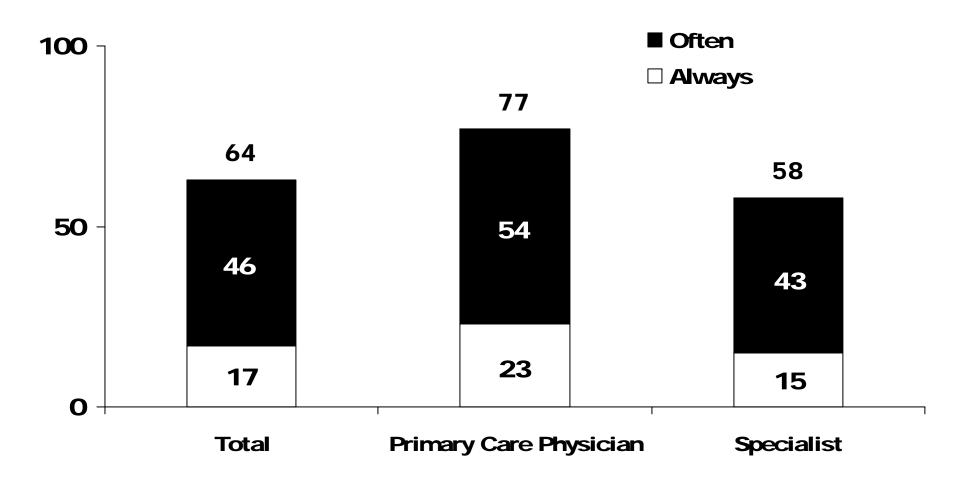
Percent who say "often/sometimes" observed the following



<sup>\*</sup> A patient experienced a problem following discharge from a hospital because his/her physician did not receive needed information from the hospital in a timely manner.

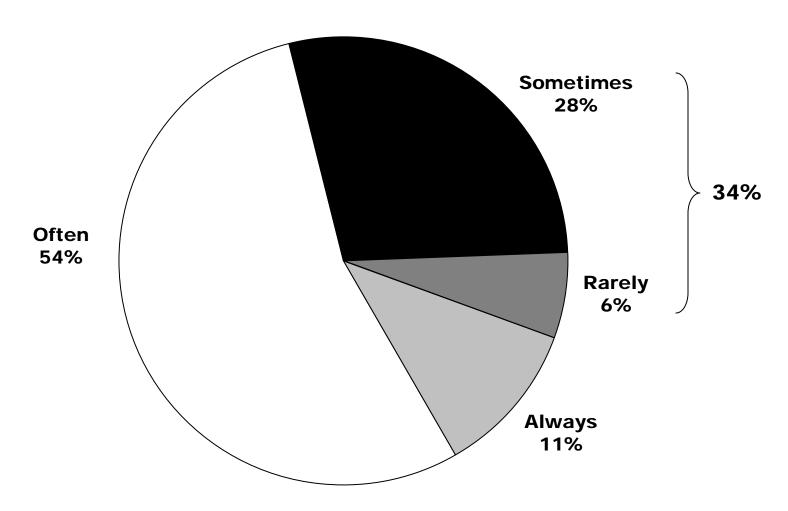
### Chart IV-6. Ability of Physicians to Provide Same-Day Appointments, by Physician Type

Percent indicating how often they can provide same-day appointments



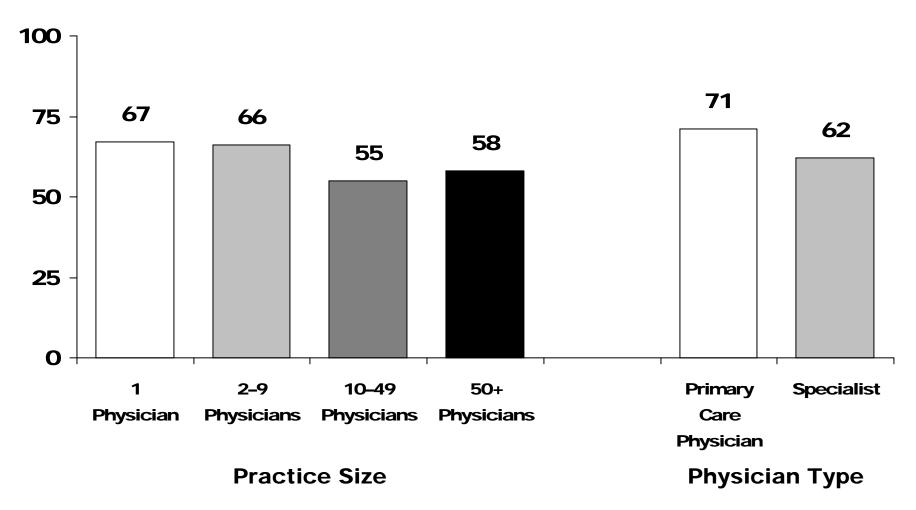
#### Chart IV-7. Receipt of Timely Referral Information

Percent who say they receive timely information about the results of a referral



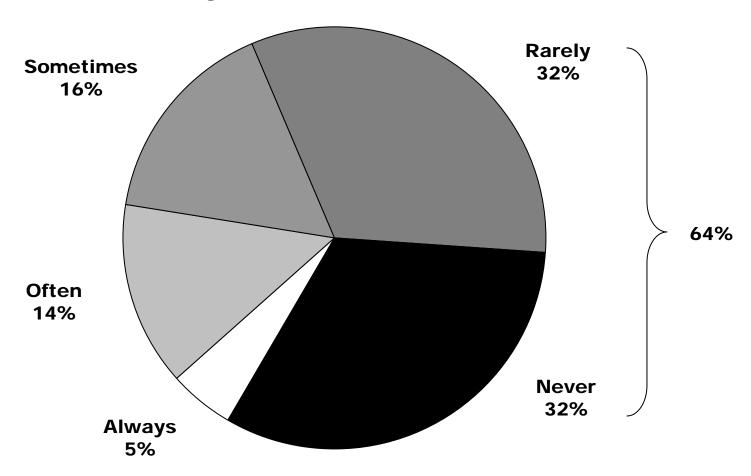
#### Chart IV-8. Receipt of Timely Referral Information

Percent who say they "always/often" receive *timely* information about the results of a referral



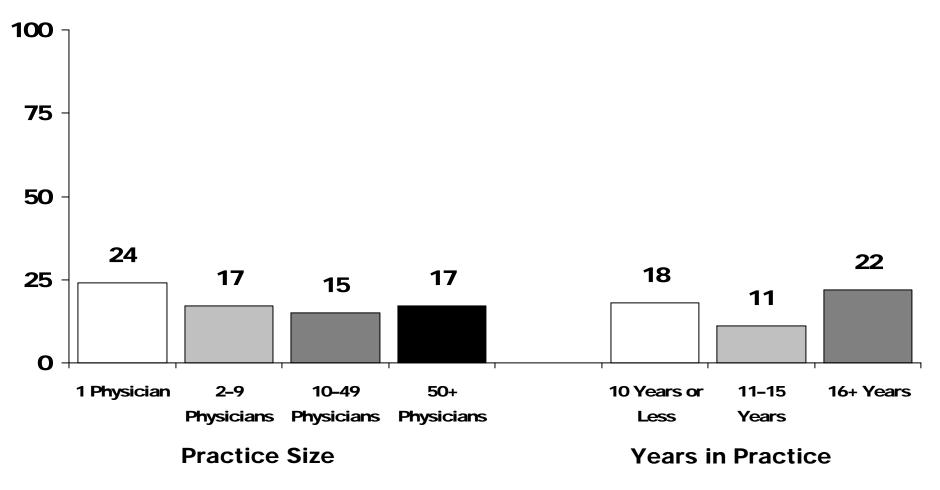
#### Chart IV-9. Availability of Quality-of-Care Data When Making Referrals

Percent indicating how often they have any data about a physician's quality of care when making referrals



#### Chart IV-10. Availability of Quality-of-Care Data When Making Referrals

Percent indicating they "always/often" have data about a physician's quality of care when making a referral



#### Chart IV-11. Relative Importance of Quality-of-Care Data

Percent indicating following information is MORE important than quality-of-care data\*

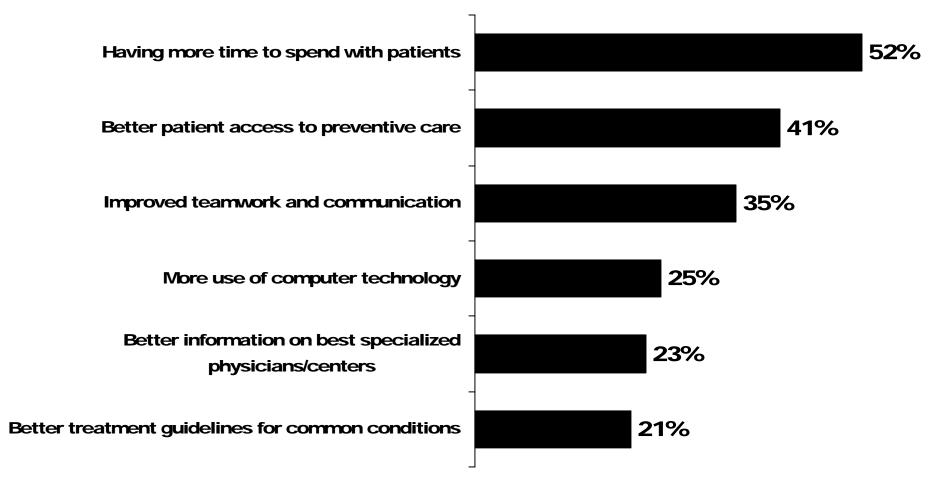
Physician's reputation among peers	42%
Physician's technical qualifications (e.g., training, education, board certification)	25%
Experiences with the physician	64%
Physician's bedside manner, as reported by patients	25%

<sup>\*</sup> Indicates physicians who responded that the above information was more important than quality-of-care data. Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

# Chapter V Strategies to Improve Quality of Care

## Chart V-1. Physicians' Opinions on Strategies to Improve Quality of Care

Percent of physicians who indicate the following are "very effective" in improving quality of care



#### Chart V-2. Physicians' Opinion on Team Care

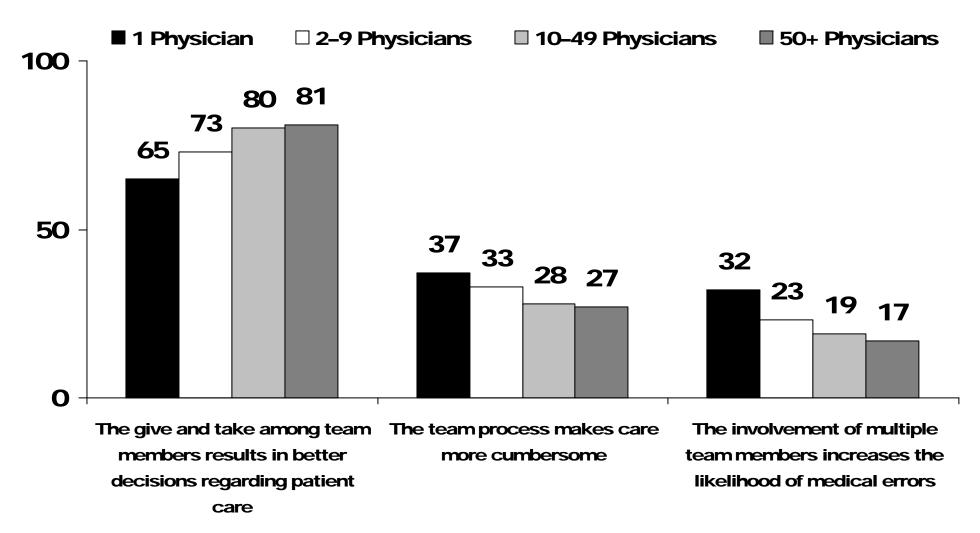
Percent indicating they "agree" or "strongly agree" that\*

The give and take among team members results in better decisions regarding patient care	73%
The team process makes care more cumbersome	32%
The involvement of multiple team members increases the likelihood of medical errors	24%

<sup>\*</sup> Indicates physicians who, based on their experience working in teams, said that they agree or disagree with the above.

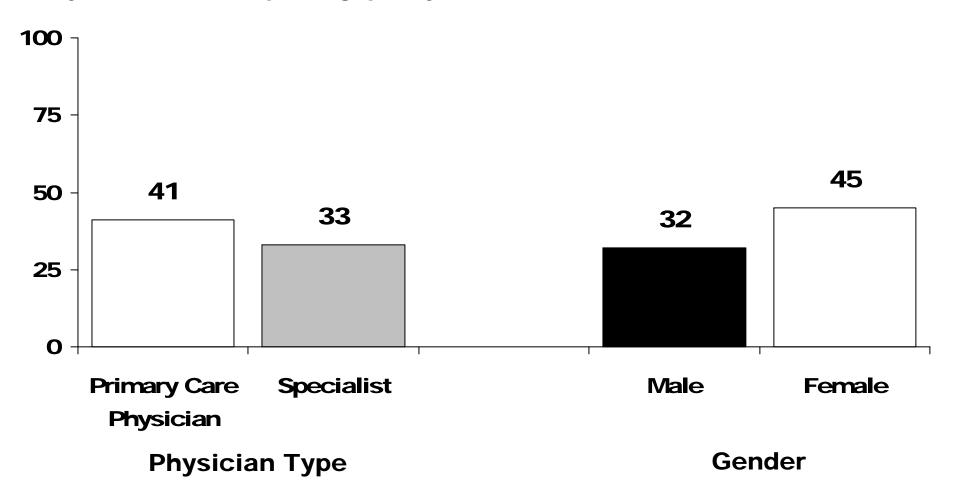
### Chart V-3. Physicians' Opinion on Team Care, by Practice Size

Percent who agree/strongly agree



#### Chart V-4. Physicians' Opinions on Team Care, by Physician Type

Percent who say improved teamwork would be "very effective" in improving quality of care

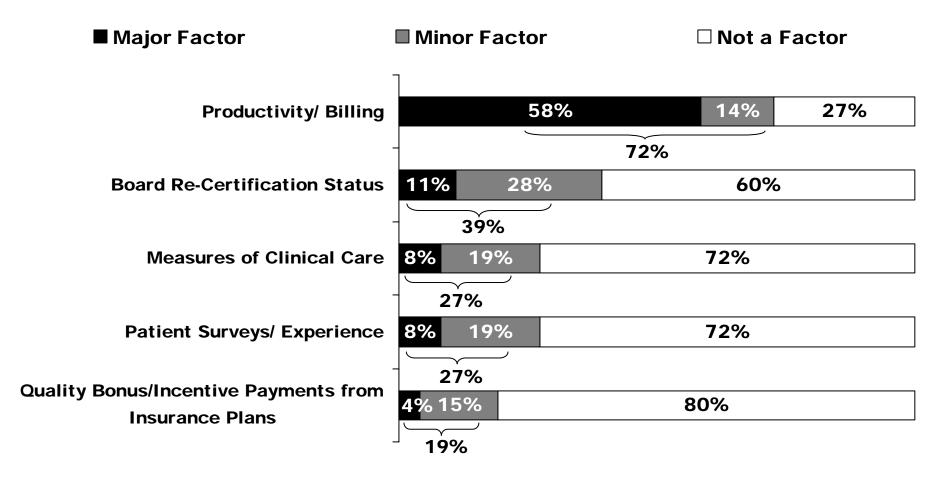


#### **Chapter VI**

# Incentives and Disincentives to Providing Quality Care and Physicians' Satisfaction with Current Practice

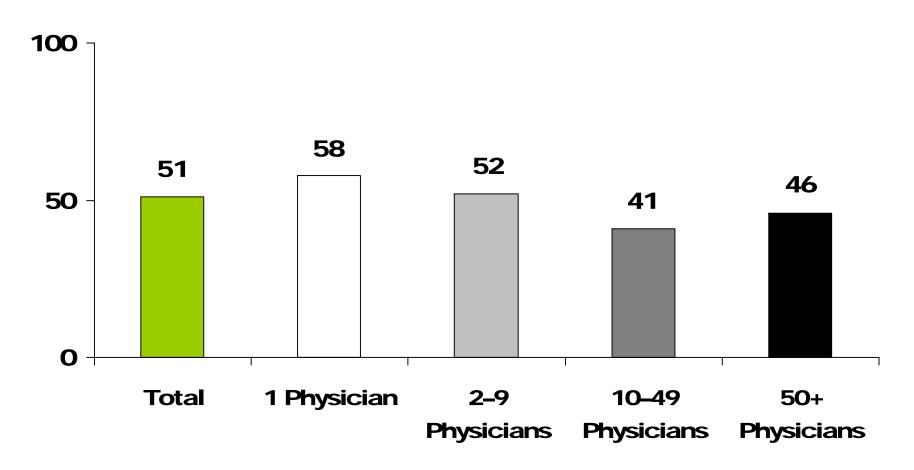
#### Chart VI-1. Factors Affecting Physicians' Compensation

Percent indicating the following as factors in determining compensation or income

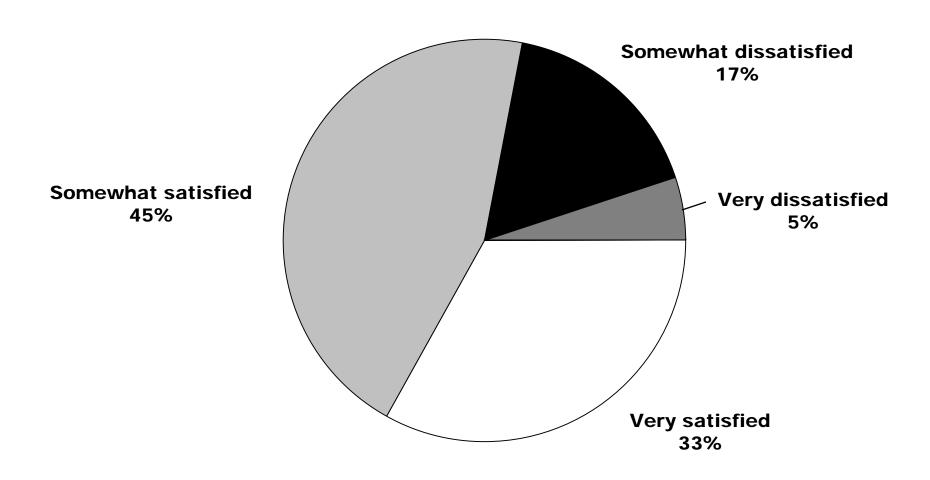


### Chart VI-2. Financial Consequences of Providing High Quality of Care, by Practice Size

Percent indicating that providing high quality of care "often/sometimes" means less income

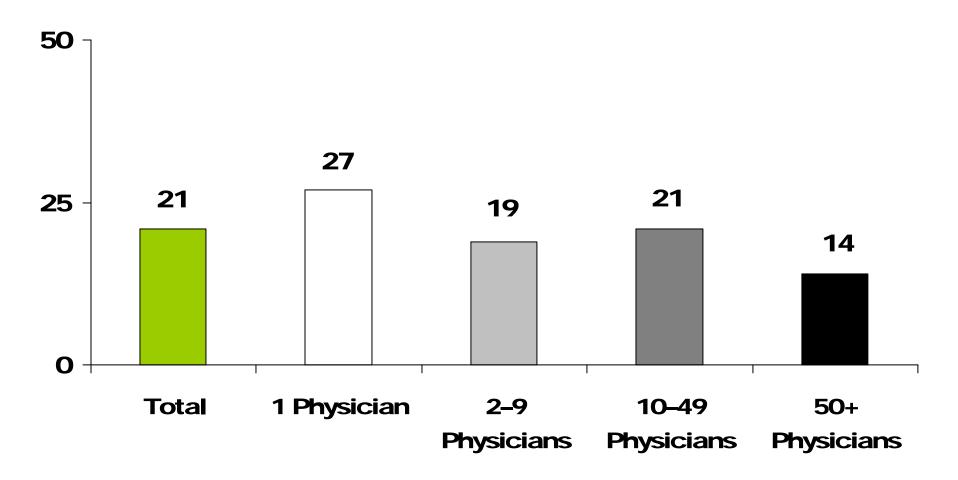


#### Chart VI-3. Physicians' Satisfaction with Current Medical Practice



#### Chart VI-4. Physicians' Dissatisfaction with Current Practice, by Practice Size

Percent "very or somewhat" dissatisfied with current practice



# Appendix Profile of Physician Respondents

Chart A-1. Characteristics of Small and Large Group Physician Practices

Practice Characteristics	Total	1 Physician	2-9 Physicians	10-49 Physicians	50+ Physicians
Percent Distribution		27%	41%	17%	12%
		100%	100%	100%	100%
Practice Setting					
Hospital or public clinic	14	5	15	20	23
Single or multi-specialty group	52	_	78	69	55
Solo	25	93	_	_	_
Other	9	2	6	11	22
Salary Status					
Salaried (yes)	41	16	43	53	72
Ownership of Practice					
Full owner	36	90	20	13	7
Part owner	28	2	45	35	24
Not an owner	35	8	34	52	68
Physician Type					
Primary care	29	26	29	37	28
Specialist	71	74	71	63	72
Hours in Direct Care					
20 hours or fewer	8	10	6	7	8
21-40 hours	30	32	16	35	34
More than 40 hours	62	58	68	58	57