Using Data for Measuring Clinical Quality: Provider Attitudes and Experience

New York City Department of Health and Mental Hygiene, New York NY

This is an interview guide designed to be conducted with physicians in an ambulatory setting. The tool includes questions to assess attitudes of users of electronic health records.

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Thank you for agreeing to participate in this DOHMH research study. The purpose of this study is:
- To learn about provider attitudes towards quality measurement; and
- To understand the current challenges providers and practices face obtaining timely and accurate data, reporting, and using data to improve performance; and
- To gauge the potential impact of using an electronic health record (EHR) at the point of care to improve quality.

The interview will take between 45 minutes to 1 hour. Please feel free to interrupt any time if you have questions or concerns. Do you have any questions before I begin?

I. Current Experience with Quality Measurement

1. Tell us about how your practice conducts quality measurement.

   Review with provider:
   - how is quality data received or collected
   - purpose for measurement
     - internal use/quality improvement
     - required for reporting
     - rewards or incentives
   - data source

2. What is your experience with measuring clinical quality?
   - Can you tell us about the challenges you face with measuring clinical quality?
   - Is collecting or reporting on clinical quality burdensome?

   Examples of challenges or value:
   - Data access
   - Reporting
   - Difficult to treat patient population
   - Track specific population
   - Track specific health targets

3. What changes has your practice undergone as a result of measuring clinical performance?

   Examples of measurement impact:
   - practice workflow
   - how you interact with patients
   - staff responsibility for patient follow-up

4. Do you receive incentives or rewards for performance measurement?

   Please describe:
   - Type of incentives/rewards
   - How are incentives/rewards distributed (e.g., to practice, provider, etc).
   - Is the amount sufficient to impact change?
II. Data Quality

5. Describe the data source used for quality measurement.
   a. Do you trust the quality of the data? Please explain.
   b. Do you think the data accurately captures quality of care? Please explain.
   c. Do you think that patient attribution is adequate (i.e., the patients for whom you are measured are actually your patients)?

III. Provider Control

6. Do you think the targets are attainable?
   - [YES] How does your practice currently work towards meeting measurement targets?
   - [NO] Why and what would you change?

7. Do you think the targets are of value to your practice? Why and would you change anything?

8. Do you think the data provided for performance measurement are actionable? How so?

9. Do you think the data provided for performance measurement are timely?

10. How will the implementation of an EHR impact how you measure quality?

Use of Quality Measurement Data

11. Should quality measures be used to publicly recognize providers? Why/why not?

12. Should quality measures be used to offer rewards/incentives to providers? Why/why not?
   - Do you have a preference for how incentives or rewards are provided? (e.g. monetary, Non-monetary, other)

13. How do you define quality of care?

14. What can the Department of Health and Mental Hygiene do to help providers improve the quality of care?

Do you have any questions or other suggestions you’d like to add?

This concludes our interview today. Thank you again for helping us with this study.