Virginia Hospital Center Charts a Careful Course for Online Physician Reviews

By Diana Mahoney

The decision by leaders of Virginia Hospital Center (VHC) in 2016 to publicly report its physicians' patient experience data not only was a logical extension of the internal transparency already in place, it was a necessary one considering the proliferation of physician review websites that permit patients and third-party reviewers to grade physicians and hospitals in online forums.

"It is not uncommon to find physicians who have been added to Yelp, or patients that have taken to Vitals.com to comment on the service they received from their provider," Simone L. Holder, director of Performance Optimization, Physician Services at VHC, said in a presentation at the 2016 Press Ganey National Client Conference in Orlando. Unfortunately, the third-party "composite" ratings are frequently powered by insufficient data—some even by just a single review—and the information is often outdated or inaccurate. Further, these sites do not verify the authenticity of the reviews, opening the door for abuse and fraud.

To minimize the likelihood that patients would look to these third-party sites for information on VHC physicians, "we decided to post the information on our own website, where the ratings would be accurate and truly reflective of the patient voice," Holder said. "Ultimately, if your organization doesn't post the comments, someone else will, and the questions they will use to rate the providers are not ones that will provide meaningful improvement insight. It's best to have a solid review in place, based on specific and relevant criteria, and to monitor comments regularly, with physician follow-up and peer review as needed."

Fortunately, the road to external transparency for VHC was partially paved before the decision was made to move forward with online reviews.

Consistent with the growing body of literature confirming the strong relationship between the safety and quality of health care and patient experience performance, leaders of the Arlington, Virginia-based health system understood the importance of creating a consistent patient experience throughout the organization. This objective is reflected in the VHC mission statement, "To Be the Best Health System," as well as its 12 Anchors of Service, which outline the expected patient-centered behaviors and responsibilities of every employee in the organization.

To stay the patient-centered course and measure progress along the journey, VHC had been administering patient experience surveys via mail and email to its hospital, clinician and group, and urgent care patients since 2014 and had an established, effective process in place for reviewing and internally reporting the data across its multispecialty VHC Physician Group (VHCPG).

"Each week, the Performance Optimization Team pulls the survey results and creates a 'greenie report' of percentile ranking and percentage of top-box scores for each domain and CAHPS question, and the physician group sends the report to a distribution list that includes all employees, physician and nonphysician providers, and the VHC System executive suite," Holder said. Additionally, physicians receive a monthly scorecard with their year-to-date performance.

"In addition to the numerical data, we also send out every patient comment—typically uncensored, but occasionally we will edit them prior to distribution if the comment contains obscene language, libel or information that may embarrass an individual," said Holder.

> ## AT A GLANCE
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> - Before posting its physicians' patient experience scores online, Virginia Hospital Center's chief medical officer met with a group of physician leaders to discuss the merits and challenges of doing so.
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> - After addressing provider concerns and incorporating their feedback, the VHC Performance Optimization Team developed detailed criteria that would guide the star rating and comment review process.
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> - The program was tested in a soft launch internally before it went live externally to give providers a sense of what they could expect.

Ready, Set, Go Live

Although VHC staff were accustomed to having their performance rated and shared with their colleagues, system leadership wanted to make sure they understood and were comfortable with the prospect of the information being shared with the public before going live with the online reviews.

"The idea of [external] transparency was first introduced to physicians by a physician, our chief medical officer, Dr. Jeffrey DiLisi, during a Physician Group Quality Council meeting, which included the chair of the council and a mix of physicians from across our multiple specialties," said Pamela J. Kane, vice president and chief operating officer of Physician Services for the VHC Health System.

As part of his presentation, Dr. DiLisi identified local health systems that had already started or were beginning the process of publicly displaying their data, providing those in attendance with a sense of the competitive landscape, Kane said. Providers were then given an opportunity to ask questions and discuss their immediate concerns.

"The open discussion gave us a good read as to how well this would roll out and the resistance or lack of resistance we'd face along the way," Kane said. Among the providers' immediate transparency concerns, the following questions emerged most frequently.

- Why is this necessary?

- Will we have the ability to comment back?

- Can providers pull out comments they don't agree with?

- Do we have to post bad comments?

- Why do we have to post comments about the staff that may negatively influence me?

- Will we post star ratings that are low, and if so, how will that impact referrals to the provider?

- Will the reviews be based on valid sample sizes?

- What about new providers who don't have enough surveys?

- Will this influence our ability to retain new providers?

"The providers had valid concerns and questions at the initial meeting," Kane said, noting that the leadership team committed to addressing each concern in a follow-up meeting. "When we presented the idea for the second time we came prepared with data—specifically, actual data from providers within our own group to provide insight into the type of information that would be presented publicly."

The team explained that provider star ratings would be based on patient responses to six HCAHPS questions.

1. Did this provider give you easy-to-understand information about health questions or concerns?

2. Did this provider explain things in a way that was easy to understand?

3. Did this provider listen carefully to you?

4. Did this provider show respect for what you had to say?

5. Did this provider seem to know important information about your medical history?

6. Did this provider spend enough time with you?

With respect to survey comments, "we created specific inclusion and exclusion criteria," Kane said. All comments related to the patient's experience with the provider in the above six areas would be included with the online ratings for all outpatient primary and specialty care providers with at least 30 survey responses in the past year. Comments that included profane, derogatory or discriminatory language would be suppressed or redacted as necessary, as would those that were irrelevant to the visit experience or which included identifying or protected health information.

The leadership team explained that the VHCPG Performance Optimization Team would review survey comments on a weekly basis and decide to include, edit or suppress them based on the inclusion criteria. "Comments that remain in question after initial review would be marked with a pending status and reviewed with the chair of the Physician Group Quality Council for final determination," Kane said.

In addition to the comment review process, the development team established a protocol for addressing comments about substandard care or communication practices. "When comments include egregious accusations they are investigated and reviewed by the VHCPG peer review committee," Kane said.

Prior to the actual launch, the online rating tool was beta-tested in a "soft go-live," Kane said. "Our providers were already accustomed to seeing their patient comments on a weekly basis, but we wanted to show them internally what the public would see," she explained. "With few concerns, we began our true go-live about one week later."

Early Insights

Although it's too soon to determine the impact the online rating system will have on physician engagement or patient experience performance, the health system leaders believe it is a necessary and valuable tool for managing online reputation and driving improvement. The providers are comfortable with the validity of the sample sizes driving the ratings and they see value in the patient feedback, Holder noted. Additionally, the comments "allow our patients to point out staff members that they think have done an exceptional job," she said. As such, they are an important mechanism for staff recognition.

Already, the star ratings and comments have proven to be an asset for identifying improvement opportunities.

"Through the comments and the weekly data that we report, we are able to identify trends that may have an influence on overall performance," Kane said. For example, multiple comments have indicated patient frustration with the phone-based appointment scheduling system, with a number of patients reporting being left waiting on the line or having to leave a voice message during regular business hours. "It was obvious that the phone and access are areas in which we can improve to better meet the needs of our patients."

Keys to a Successful Transparency Program

The road map to online physician ratings at VHC was carefully laid out to incorporate key checkpoints.

- Engage physician leaders and influencers.
- Encourage your leaders and influencers to discuss the benefits of transparency with their colleagues.
- Create comment criteria.
- Review accusations.
- Show sample data before going live.
- Accept the patients' comments as a gift.

But the most important consideration in getting providers on board with transparency efforts—the one fueling the entire journey, according to Kane—is leaders' commitment to a strategy that ensures the integrity of the information being shared, and their willingness and ability to communicate that strategy through open, honest discussions with providers.

"These discussions should start with the 'why' of transparency," Kane explained. Provider alignment with the mission and vision to better meet patients' needs and reduce their suffering is essential to their engagement in improvement efforts designed to enhance care delivery.

"Patients deserve information. They also deserve compassion, empathy and respect," said Kane. "Taking time to explain this to providers so they see the connection can alleviate stress and create a warm environment of care."