

**ATTACHMENT B1. DRAFT DISCUSSION GUIDE FOR CONSUMER FOCUS  
GROUPS**

## Framework for Displaying Expanded Hospital Quality Indicators on *Hospital Compare* Formative Research

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### **Objectives**

*The purpose of this formative research will be to explore consumers' perceptions of the Institute of Medicine's six aims for improvement as a conceptual and organizational framework for displaying new and existing quality indicators on the Hospital Compare website.*

*In particular, the moderator will focus the discussion on the following:*

- 1. How consumers perceive hospital quality, variations in quality, and what they consider to be indicators of hospital quality.*
- 2. How consumers understand each of the IOM's six aims for improvement, and how they would define them in the context of their understanding of quality:*
  - Safety*
  - Effectiveness*
  - Patient-Centeredness*
  - Timeliness*
  - Efficiency*
  - Equity*
- 3. How consumers respond to the potential use of the six aims as categories for organizing and displaying new and existing measures of hospital quality*
- 4. How consumers understand and interpret new measures in the categories of*
  - Safety (patient safety indicators; hospital-acquired conditions; hospital-acquired infections), and*
  - Timeliness (emergency department care and "throughput" indicators).*

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## Welcome and Overview of Discussion

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### Welcome

- Thank you for agreeing to participate in this discussion today.
- My name is {NAME} and I'll be leading our discussion. I work for a company called {L&M Policy Research Policy Research/Mathematics Policy research}, a health policy research firm.

### Background—explain purpose of the discussion

- We've been hired by the agency that runs Medicare to help them understand how to get useful information to people about hospital services.
- We are helping Medicare think about how to re-organize and display information on a website about hospital services, called *Hospital Compare*. This is meant to give the general public information about specific hospitals in their community, and how well they provide services to their patients.

### Ground rules

- Please be open and frank. We're not looking for "right" answers. If something is unclear or confusing to you, it's bound to be confusing to other people too.
- Also, keep in mind that different people may have different views. Don't feel like you have to agree with each other. And, some of the information we discuss may be familiar to you, while other information is not. I want to hear all points of view. Medicare will use what you say to make the information on the website as helpful and user friendly as possible.
- We're recording these conversations, for research purposes, to help us remember everything that's said, but we will not use anyone's name or share this information beyond our research group.
- Some people working on this project are listening and watching behind the glass, and we are recording this so we can make sure we don't miss anything. In addition, we are streaming this session to staff in CMS since they are not able to attend our session today. Because we're recording, please try to speak in a voice at least as loud as the one I'm using now so that we can make sure the tape is picking up our voices.
- We'll be here about **an hour and a half**. Any questions before we get started?

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## Warm-up and Introduction

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### Warm-up

- To get acquainted, let's start by going around the room for brief introductions. When it's your turn, please tell your first name, where you are from, and how long you've been using the internet to find information on websites.
- Let me start: tell you a bit about myself...

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## Brief Introduction to *Hospital Compare*

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- As I mentioned earlier, we are helping Medicare make improvements to the *Hospital Compare* website. *Hospital Compare* is a tool you can use to look up information about hospitals, including how well they provide care. Are any of you familiar with Medicare's website? Has anyone ever visited *Hospital Compare*?
- I'm now going to briefly show you the website to give you an idea of what it looks like and what kinds of information you can find.

{Moderator will provide a brief overview of *Hospital Compare*, displaying the website using a laptop and projector OR selected screenshots, to give participants a general idea of how the tool can be used to search for information about hospitals, using local geographic area as an example.}

### Overview of discussion

- Today, we're going to talk about how we might think about the quality of hospital care and how we might present information about hospital quality the *Hospital Compare* website.
- We'll also be talking about some new kinds of information that will be added to the site. I'd like to get your thoughts and feedback about that information, and on how that information should be explained, so we can make sure it is as clear as possible.

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## Perceptions of Health Care and Hospital Quality

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{Moderator will probe on perceptions of hospital quality, variations in quality, and quality indicators.}

- What comes to mind when you think about "quality" in health care?
- In your own experience, does the quality of health care vary? In what ways?

- What comes to mind when you think about “quality” in terms of hospital care, in particular?
  - Does the quality of hospital care vary, in your experience? In what ways?
- What would you look for in a high-quality hospital? How would you know if the quality of care in a hospital wasn’t good?

{Moderator will capture key concepts of quality that arise in the discussion and make note them on a flip chart.}

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## Discussion of IOM’s Six Aims

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{The moderator will probe on participants’ response to and understanding of the IOM’s six aims, in the context of the preceding discussion on quality and hospital quality.}

- So, now we have some ideas about how those of us here today think about quality in health care, and in hospitals. Keeping this discussion in mind, I’d like to get your thoughts about some ideas that some other people came up with, in thinking about what good quality health care ought to be.
- Here are some terms that I’d like to get your thoughts about.
  - What do you think about the term “*safety*” when you think about health care?
    - What does that mean to you, in terms of hospital care?
    - Can you think of any examples of hospital care that might not be safe?
  - What about the term “*effectiveness*?”
    - What does that mean to you?
    - What would be some examples of hospital care that is *effective*?  
*Ineffective*?
  - Is the term “*patient-centered*” familiar to you?
    - What does that mean to you?
    - What would be an example of *patient-centered* care? How would you describe care that wasn’t *patient-centered*?
  - What about the concept of “*timeliness*” in health care?
    - What does that mean in the context of hospital care?
    - Can you give examples, from your own experience?
  - Here’s another term to think about: “*efficiency*”
    - What does that mean to you?

- How would you describe *efficient* hospital care? *Inefficient* care?
- And here's the last term: "*equitable*" (or "*fair*").
  - How does that apply to health care?
  - What would be an example of care that wasn't *fair* or *equitable*?
- These terms that we've talked about are six aims that a committee of the Institute of Medicine has identified for the U.S. health care system. Here's how that Committee defines those terms.

{Moderator shows participants a list of brief definitions of these terms, derived from the Institute of Medicine's *Crossing the Quality Chasm* (**Handout #1**)}

- What do you think about these definitions?
- Is there anything different here from the way you were thinking about these terms?
- Does seeing these definitions change the way you think about this?
- Thinking about our discussion earlier about the way you thought about health care quality, what do you think about the Institute of Medicine's six aims? Are they a good way to think about quality, or not?
- Are there some aims that seem more important to you than others? Why?

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## Categories Presenting Hospital Quality Measures

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{After discussing the IOM concepts, the moderator will probe respondents' perceptions of using this framework to categorize hospital quality measures.}

- Earlier, I showed you the *Hospital Compare* website and some of the information that's available there about hospitals. Right now, it includes some very specific information about what hospitals do for patients who have surgery or certain conditions (like heart attack, heart failure, and pneumonia). They will be adding lots of new information.
- I'd like hear your thoughts about how we might organize and present the information, using the categories we've just talked about.

Let me show you the kind of information that would be included in these categories.

{Moderator shows participants table with the categories listed below. (**Handout #2**)}

- **Safety**
- *Effectiveness*
  - Heart Attack care (inpatient only)
  - Heart Failure care (inpatient only)

- Pneumonia care (inpatient only)
- Surgical Care (inpatient only)
- Pediatric Asthma Care (inpatient only)
- Outpatient Surgical Care
- o *Patient-Centeredness*
  - Survey of Patients' Experiences
- o ***Timeliness***
- o *Efficiency*
  - Use of Medical Imaging
- o *Equity/Fairness*
  - Comparison of Care in Different Hospitals
  - Comparison of Care across Geographic Regions.
- We'll talk in more detail about two of the categories – *safety* and *timeliness* – in a little bit.
- What do you think about the kind of information included under the other categories? Is this what you would expect, after our discussion? Is there anything here that doesn't make sense?

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## Safety Measures

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{After reviewing the other categories and the general types of quality measures included in them, the moderator will probe in greater detail participants' responses to and interpretation of *safety* measures. Moderator will probe, in particular, respondents' understanding of reported numbers.}

- Right now, the information on *Hospital Compare* is organized and labeled a different way, but a lot of the information about heart attack, heart failure, pneumonia, surgical care, pediatric asthma, and medical imaging is already available. You can also compare hospitals on these measures, and see how different states compare.
- Some of the new information I'd like us to focus on would fall under the *Safety* category.

**{Moderator will display names and brief "plain language" definitions of measure domains that would be included in the *Safety* category: Serious Complications, Deaths for Certain Conditions, Hospital-Acquired Conditions, Healthcare-Associated Infections (Handout #3)}**

- What do you think about this information?
- Based on what we discussed previously, is this the kind of information you would have expected to see in this category? Why (or why not)?
- What do you think these have to do with hospital *safety*?

**{Moderator will display table showing sample hospital performance on all Hospital-Acquired Conditions measures (in plain language, based on actual rates as reported in hospital-specific reports), with comparisons to national rate (Handout #4).}**

- Now, let's look a little more closely at the Hospital-Acquired Conditions.
- In your own words, what do you think this information is about?
- Based on what you see here, how often would you say these kinds of things happen in hospitals?
  - {probe: do respondents understand that the numbers are *rates per thousand discharges*?}
- Based on what you see here, what would this tell you about *safety* at this hospital?
  - Which of the items shown here is a more serious area of concern for this hospital? Why? How serious are they?
    - {probe: based on numbers of patients affected; based on comparisons to national rates}

**{Moderator will display table showing sample hospital performance on all Hospital-Acquired Infections measures (in plain language, based on actual rates as reported in hospital-specific reports), with comparisons to national rate (Handout #5).}**

- Now, let's look a little more closely at the Hospital-Acquired Infections.
- In your own words, what do you think this information is about?
- Based on what you see here, what would this tell you about *safety* at this hospital?
  - Which of the items shown here is a more serious area of concern for this hospital? Why? How serious are they?
    - {probe: based on numbers of patients affected; based on comparisons to national rates}

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## Timeliness Measures

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{After reviewing the *safety* measures, moderator will probe in greater detail participants' responses to and interpretation of *timeliness* measures. Moderator will probe, in particular, participants' response to including emergency department measures in this category.}

- Now I'd like us to focus on information that would fall under the *Timeliness* category  
**{Moderator will display names and associated measures (in plain language) for each of measure domains that would be included in the *Timeliness* category: Time Spent in the Emergency Department and Care for Chest Pain in the Emergency Department. (Handout #6)}**
- What do you think about this information?
- Based on what we discussed previously, is this the kind of information you would have expected to see in this category? Why (or why not)?
- What do you think these have to do with *timeliness* of care?

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## Review of Organization of Measures

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- We've talked at some length about one way of categorizing this information, and we've looked in some detail at some kinds of information included under two of the categories, including some new information that will be added.
- Now, I'd like to get your reactions to different ways this information might be presented.
- There's a good deal of overlap in the categories we talked about. For example:
  - There was information about **heart attack care** under the *Effectiveness* category and in the *Timeliness* category.
  - Some other measures in the *Effectiveness* and *Patient-Centeredness* categories also relate to *timeliness*
- Some information in different categories relates only to inpatient care; some relates only to outpatient care (for example, emergency department, outpatient surgery, outpatient imaging).
- Some information is positive (showing good things that were done) and some is negative (showing complications or bad outcomes)
- Thinking about how you might look for information about hospitals, how important would it be to you -



- o to be able to sort all the information by condition (e.g., heart attack, heart failure, pneumonia, surgical care, pediatric asthma)?
  - o to sort outpatient (including emergency department) from inpatient care?
  - o to keep different kinds and sources of information separate (e.g., information from patient surveys, information reported by hospitals, information from Medicare billing information; positive vs. negative information—that is, signs that care is going well vs. signs that care is having problems)?
- Are there any other ways you would like to see the information organized?
  - Thinking about different ways of organizing the information, what do you prefer?
  - What do you think now about using the six categories discussed at the beginning, as a way of organizing the information?

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## CLOSING

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Those are all the questions I have for you.

Does anyone have any final thoughts they would like to add?

If you'll give me just a moment, I'll check in with my colleagues. {See if anyone in the back room or on focus vision has anything else on which to probe.}

Thank you very much for taking the time to meet with me today. Your insights have been very helpful!