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Summary and Chartpack

The Kaiser Family Foundation/Agency for Healthcare Research and Quality/Harvard School of Public Health

National Survey on Consumers' Experiences With Patient Safety and Quality Information

November 2004

Methodology

The National Survey on Consumers' Experiences With Patient Safety and Quality Information is a joint project of the Kaiser Family Foundation, the Agency for Healthcare Research and Quality, and the Harvard School of Public Health. Representatives of the organizations worked together to develop the survey questionnaire and analyze the results.

The survey was conducted by telephone from July 7 to September 5, 2004 among a randomly selected nationally representative sample of 2,012 adults 18 years or older. Interviews were conducted in English and Spanish by Princeton Survey Research Associates. The margin of sampling error is +/-2 percentage points overall. The margin of sampling error will be higher for results based on subsets of respondents. Sampling error is only one of many potential sources of error in this or any public opinion poll.

Before answering questions on medical errors, respondents were all read a common definition of medical errors. They were told, "Sometimes when people are ill and receive medical care, mistakes are made that result in serious harm, such as death, disability, or additional or prolonged treatment. These are called medical errors. Some of these errors are preventable, while other may not be."

Trend data is from the Kaiser Family Foundation/Agency for Healthcare Research and Quality *Americans as Health Care Consumers: The Role of Quality Information* (1996), The Kaiser Family Foundation/Agency for Healthcare Research and Quality *National Survey on Americans as Health Care Consumers: An Update on the Role of Quality Information* (2000), and the Harvard School of Public Health/Kaiser Family Foundation *Medical Errors: Practicing Physician and Public Views* (2002).

The Kaiser Family Foundation is a non-profit, private operating foundation dedicated to providing information and analysis on health care issues to policymakers, the media, the health care community, and the general public. The Foundation is not associated with Kaiser Permanente or Kaiser Industries.

The mission of the Agency for Healthcare Research and Quality (AHRQ), a part of the U.S. Department of Health and Human Services, is to improve the quality, safety, efficiency, and effectiveness of health care for all Americans. AHRQ's research is designed to address the most critical aspects of patient safety improvement: how to identify errors and their causes; collect and report information on patient safety problems; and improve safety through the use of evidence-based interventions, tools, and practices, including health information technology.

Harvard School of Public Health is dedicated to advancing the public's health through learning, discovery, and communication. More than 300 faculty members are engaged in teaching and training the 800-plus student body in a broad spectrum of disciplines crucial to the health and well being of individuals and populations around the world. Programs and projects range from the molecular biology of AIDS vaccines to the epidemiology of cancer; from risk analysis to violence prevention; from maternal and children's health to quality of care measurement; from health care management to international health and human rights.

SUMMARY OF FINDINGS

Five years ago, in November of 1999, the Institute of Medicine (IOM) released a report entitled *To Err Is Human: Building a Safer Health System*, which concluded that 44,000 to 98,000 people die each year in hospitals due to preventable medical errors. The report grabbed the attention of the American public, becoming the most closely followed health policy story of the year according to ongoing surveys conducted by the Kaiser/Harvard Health News Interest Index project. The report also spurred public and private organizations to focus their attention on improving the quality of health care in the United States¹.

After five years of this focused attention on health care quality, the Kaiser Family Foundation, the Agency for Healthcare Research and Quality, and the Harvard School of Public Health conducted the National Survey on Consumers' Experiences With Patient Safety and Quality Information to assess American's perceptions about the quality of health care, their awareness and reported use of quality information in making their health care choices, and their experiences with their health care providers.

This report presents a summary of the key findings from this survey project. More specifically, we first explore how the public thinks about quality, how they make decisions about their health care, and the role quality information plays in their decision-making processes. Next, we examine the public's perceptions about medical errors, their personal experiences with errors, and what they think causes medical errors. Finally, we explore what people think would best prevent medical errors from happening in the future. The last section examines how different subgroups of the population, including seniors, those with chronic health care conditions, and racial and ethnic minorities, think about these issues.

¹ Drew Altman, Carolyn Clancy, and Robert J. Blendon. 2004. "Improving Patient Safety—Five Years after the IOM Report." *New England Journal of Medicine*, 351(20): 2041-43.

I. HEALTH CARE QUALITY

Overall Perceptions

The public is more likely to say that they are dissatisfied with the quality of health care in this country now than they were in 2000. In fact, they are over twice as likely to say health care has gotten worse in the past five years rather than better. Almost half say they are at least somewhat worried about the safety of the medical care they and their family receive. (Charts 1 and 2)

- Over half (55%) of the public say that they are currently dissatisfied with the quality of health care in this country, compared to 44% who reported the same in 2000. Conversely, about four in ten (41%) reported they are satisfied with the quality of healthcare in this country, compared to 54% in 2000².
- Four in ten (40%) say the quality of health care has “gotten worse” in the past five years, compared to 17% who say it has “gotten better” and 38% who say it has stayed about the same.
- Nearly half (48%) of adults say they are at least somewhat worried about the health care that they and their family receive, including 22% who say they are very worried. In comparison, adults say they are somewhat or very worried about the air they and their family breathe (54%), the water they and their family drink (45%) and the food they and their family eat (40%).

Defining and Assessing Quality

When asked in an open ended question to name the most important factor in determining the quality of health care patients receive, there is no general consensus. (Chart 3)

- The percent of the public who say in their own words that the most important factor in determining the quality of health care patients receive is:
 - Health care affordability/cost (14%)
 - Doctor’s qualifications and experience (13%)
 - Total access/availability for everyone (9%)
 - Insurance coverage of care and procedures (8%)
 - The cost and coverage for prescription medicines (3%)
 - Other staff qualified and courteous (3%)
 - Time doctor spends with patient (3%)
 - Low incidence of medical errors (2%)

² Gallup Poll conducted September 11-13, 2000 with 1,008 U.S. adults.

- Results/patient outcome (2%)
- The availability of appointments (2%)
- Ability to choose own doctor (2%)
- Other (23%)³
- Don't know/Refused (16%)

When asked which information would be the most useful in determining the quality of doctors, hospitals and health plans, the public tends to focus on information about experience and training, medical errors and malpractice suits, and the availability of programs for those with chronic illness and the ease of seeing specialists. (Charts 4, 5, and 6)

- When comparing doctors, people are most likely to say information on a physicians experience with a particular procedure, whether a physician is board certified, and the number of malpractice suits filed against physicians would be the most useful. The percent of the public who say each tells them “a lot” about the quality of a doctor:
 - How many times a doctor has done a specific medical procedure (66%)
 - Whether a doctor is board certified, that is, has had additional training and testing in his or her area of specialty (65%)
 - How many malpractice suits a doctor has had filed against him or her (64%)
 - How patients who are surveyed rate how well the doctor communicates (52%)
 - Whether a doctor attended a well-known medical school or training program (37%)
 - Whether a doctor has admission privileges to send patients to a particular local hospital (35%)
 - Whether a doctor has been rated “the best” by a local newspaper or magazine (28%)
 - Whether a doctor charges more than other doctors do (18%)

- When comparing hospitals, people are most likely to say information on medical errors and experience doing particular tests or surgeries would be the most useful. The percent of the public who say each tells them “a lot” about the quality of a hospital:
 - Reports of medical errors or mistakes that lead to harm for patients, such as a wrong dose or kind of medicine being given or the wrong operation being done (70%)
 - How much experience the hospital has in performing a particular test or surgery you or your family may need (65%)
 - How many patients die after having surgery at the hospital (57%)
 - How patients who are surveyed rate the quality of care (52%)
 - Whether the hospital has passed a review and been accredited by an independent organization that evaluates hospitals (50%)

³ All other responses were mentioned by less than 1% of the population.

- The number of patients who do NOT get the standard recommended treatments, such as aspirin after heart attack (47%)
 - How long it takes for the hospital to get back test results (47%)
 - Whether the hospital is a teaching hospital and trains doctors, nurses and other health professionals (44%)
 - Whether the hospital has been rated “the best” by a newspaper or magazine (28%)
- When comparing health plans, people focus on a number of factors, although again information about complaints and medical errors ranks at the top. The percent of the public who say each tells them “a lot” about the quality of a health plan:
 - The number of complaints filed by plan members against the health plan (69%)
 - Whether the plan has programs to help people with chronic illnesses – such as diabetes, heart disease, or HIV – monitor their condition and improve their health (67%)
 - The number of medical errors or mistakes by the plan’s doctors and hospitals that lead to harm for patients (66%)
 - How easy it is for plan members to see specialists, such as orthopedists, allergists and doctors who treat heart problems (65%)
 - The percentage of doctors in the plan who have had a complaint filed against them by patients or lost malpractice lawsuits (62%)
 - The percentage of plan members who get preventive care for things like high blood pressure and breast cancer screening and well-baby care (62%)
 - How quickly patients can get in to be seen by a doctor or get the laboratory tests that they need (61%)
 - How patients who are surveyed rate the quality of care (60%)
 - The range of health benefits available beyond basic medical coverage, such as prescription drugs, eye care, and dental care (58%)
 - Turnover rates of doctors in the plan, that is, the percentage of doctors who leave the plan each year (47%)
 - Whether the plan has passed a review and been accredited by an independent organization that evaluates plans (44%)
 - How much the health plan costs (40%)

II. MAKING DECISIONS ABOUT HEALTH CARE

What Influences Decisions

Similar to what we have found in the past, people looking for quality information about doctors, hospitals, or health plans are most likely to say they seek out this information from people that they know instead of contacting official groups or looking for printed information. However, people are more likely to go online to find health information than they were four years ago. (Chart 7)

- The majority of people say that if they wanted to find information comparing the quality of different doctors, hospitals, or health plans, they would be “very likely” to get this information from friends, family members, or co-workers (65%), or their doctor, nurse, or other health professional (65%). Fewer say they would be very likely to get this information from an Internet site that posts quality information (37%), contact the Medicare program (36%, among those over 65), contact someone at their health plan or refer to materials provided by the health plan (36%), order a printed booklet with quality information (20%), contact a state agency (18%), or refer to a section of a newspaper or magazine (16%).
- The public gave similar responses in 2000, however they were less likely to say they were “very likely” to go online to find health quality information (28% in 2000 vs. 37% in 2004).

The majority of people say that the opinions of friends and family are a good source of information about health plans. However, they were less likely to say this in 1996 and 2000. (Chart 8)

- About six in ten (59%) say that friends and family are a good source of information about health plans because friends and family care about the same things they do when it comes to health care. Slightly more in 1996 (69%) and 2000 (67%) shared this same view.
- Just over one in three (36%) disagree and say friends and family do not have enough knowledge and experience to provide good information about health plans. The public was less likely to say this in 1996 (27%) and 2000 (27%).

In general, people do not trust their employers to give them good information on health plans. In fact, the public’s trust in employers for health plan information has declined over the past eight years. (Chart 8)

- About seven in ten (69%) say they do not trust what employers say about health plans because employers’ main concern is saving the company money on health benefits. Slightly fewer said the same in 1996 (58%) and 2000 (61%).
- One in four (25%) say that employers are a good source of information about the quality of different health plans because employers examine plans closely when deciding which ones to offer. The public was more likely to hold this view in 1996 (36%) and slightly more likely to hold this view in 2000 (29%).

Most people say that the convenience of the location of a doctor or hospital influences their decision making process. (Chart 9)

- About three in four (76%) say when choosing a new doctor or hospital the convenience of the location would influence their decision “a lot” (44%) or “some” (32%). About two in ten (22%) say convenience would influence their decision “only a little” (13%) or it would have no influence (9%).

Exposure To and Use of Quality Information

In comparison to 2000, people now are slightly more likely to have seen and used health care quality information in the past year. However, the vast majority are still not using quality information to make health care decisions. (Chart 10)

- Just over one in three (35%) say that in the past year they have seen information comparing the quality of different health plans, hospitals, or doctors. They were most likely to say they have seen information comparing the quality of health plans (28%) and hospitals (22%), and were less likely to say they have seen information comparing the quality of doctors (11%). About half of those who have seen quality information (49%, or 19% of all Americans) say they used this information to make a decision about their care.
- In 2000, 27% of the public said that in the past year they had seen information comparing the quality of different health plans, hospitals, or doctors. They were most likely to say they had seen information comparing the quality of health plans (23%), and were less likely to say they had seen information comparing the quality of hospitals (15%) or doctors (9%). Just over four in ten of those who say they saw quality information (43%, or 12% of all Americans) say they used this information to make a decision about their care.

Those who saw health quality information on hospitals or health plans and chose not to use it were most likely to say they did not use it because they did not need to make a decision about their care at the time or the information they saw was not specific to their health concerns. (Chart 11)

- The people who saw health quality information but did not use it say that this was because:
 - They did not need to make a decision at that time about their hospital (68%) or health plan (64%).
 - The information they saw was not specific to their personal health conditions or concerns (hospitals 53%, health plans 40%).
 - Factors other than quality, such as location or cost, were more important in their decision making (42% and 35%)
 - The information they saw did not cover the specific hospital/health plan they needed to know about (34% and 38%)
 - The information they saw was confusing or difficult to understand (10% and 23%)

Relative Importance of Quality Information in Decision Making

The public is split as to which is more important when choosing a surgeon or a health plan—the experiences of and recommendations from people they know, or high ratings from experts. On the other hand, most Americans say that when they make decisions about a hospital, familiarity is more important than high ratings. (Chart 12)

- The public is divided as to which they would choose a surgeon who has treated a friend or family member without any problems (48%) or a surgeon with higher ratings (46%).
- The public is also divided about what is more important when choosing a health plan: whether the health plan was strongly recommended to them by friends and family (45%) or if it is highly rated by independent experts (49%).
- About six in ten (61%) say they would prefer to go to a hospital they and their family have used for many years without problems rather than a hospital rated much higher in quality by the experts. One in three (33%) disagree, and would prefer to go to a hospital rated higher by experts.

However, it does appear that in the past eight years health ratings may have taken more of a place in the public’s decision-making process. (Chart 12)

- The percent of the public who say they would prefer:

	<u>2004</u>	<u>2000</u>	<u>9/96⁴</u>
Surgeon who has treated friends and family	48	50	76
Surgeon that is rated higher	46	38	20
	<u>2004</u>	<u>2000</u>	<u>9/96</u>
Plan recommended by friends	45	47	52
Plan highly rated by experts	49	45	43
	<u>2004</u>	<u>2000</u>	<u>9/96</u>
Hospital that is familiar	61	62	72
Hospital that is rated higher	33	32	25

⁴ Note that some of the drop in choosing a familiar surgeon may be due to a slight wording change in the question that was made between the 1996 and 2000 survey.

III. MEDICAL ERRORS

Although most people still say they do not know what the term “medical errors” means, the public is more familiar with the term now than they were two years ago. (Chart 13)

- More than four in ten (43%) people say they know what the term “medical errors” means, just under four in ten (38%) say that they have heard the term but do not know what it means, and about two in ten (19%) say they have never heard the term before. In comparison, in 2002, 31% of Americans said that they knew what the term “medical errors” meant, 28% said that they had heard of the term but did not know what it meant, and 40% said that they had never heard the term before.
- Americans are most likely to say that what they know about preventable medical errors is based mainly on what they have seen, heard or read on television or in newspapers (61%) rather than the experiences of friends and family (18%) or their own experiences (15%).

Americans continue to underestimate the number of people who die each year in hospitals from preventable medical errors. (Chart 14)

- About half (49%) of the public say that 5,000 or fewer deaths occur in hospitals each year due to medical errors. In 1999, the Institute of Medicine estimated this number is between 44,000 and 98,000 people.⁵
- After being read the definition of medical errors, just over one in three (36%) say that medical errors happen “very” or “somewhat” often. About half (52%) say that medical errors happen “not too often” or “not often at all.”

The vast majority say that at least half of the deaths caused by medical errors could be prevented. (Chart 15)

- The vast majority (76%) say that all (11%), three quarters (25%), or half (40%) of deaths caused by medical errors could be prevented. Far fewer (15%) say that one quarter (14%) or none (1%) of the deaths could be prevented.

⁵ Linda Kohn, Janet Corrigan, Molla Donaldson. To Err is Human: Building a Safer Health System. Committee on Quality of Health Care in America, Institute of Medicine. Washington, DC: National Academy Press, 1999.

Personal Experience with Medical Errors

After being read the following definition of a serious medical error:

Sometimes when people are ill and receive medical care, mistakes are made that result in serious harm, such as death, disability, or additional or prolonged treatment. These are called medical errors. Some of these errors are preventable, while others may not be.

About one in three say that they have experienced a medical error in their own care or that of a family member at some point in their life. Of those who experienced medical errors, most say they caused “serious health consequences” such as severe pain, long-term disability, or death. (Chart 16 and 17)

- Thirty-four percent of the public say that they have been involved in a situation where a preventable medical error was made in their care or the care of a family member. This includes 21% who say that the medical error they were involved with most recently had serious health consequences, including severe pain (16%); serious loss of time at work, school, or other important life activities (16%); temporary disability (12%); long term disability (11%); and/or death (8%).

Those who have experienced a medical error are most likely to place responsibility for the error on the physician involved. (Chart 18)

- Among those who say they or a family member has experienced a medical error (34% of Americans), nearly three in four (72%) say the doctor involved has a lot of responsibility for the error. Fewer say the institution involved (39%), nurses (28%), or other health care professionals (27%) have “a lot” of responsibility for the error.

However, few report pursuing malpractice lawsuits after a medical error. (Chart 18)

- Among those who say they or a family member has experienced a medical error, 11% (or four percent of the total public) report they or their family member sued a health care professional for malpractice after experiencing the medical error.
- Of those who say the medical error they or their family member experienced had serious health consequences, 14% (or three percent of the total public) report they or their family member sued a health care professional for malpractice after experiencing the medical error.

Reporting of Medical Errors

In most cases those who have experienced a medical error say that a health professional did not inform them of the error. However, over half of the public believes their own doctor would be likely to tell them if they made a medical error while treating them. (Chart 19)

- Among those who say they or a family member have experienced a medical error (34% of the public), seven in ten (70%) say that the doctor or health professional involved did not tell them that a mistake had been made. About three in ten (28%) say they were told.
- Just over half (54%) of all people believe their doctor would be “very” (23%) or “somewhat” (31%) likely to tell them if a preventable medical error that resulted in serious harm was made in their care. Another one in four (25%) say that it is “not likely” that their physician would tell them and 19% say that it is “not at all likely.”

The vast majority say that physicians should be required to tell their patients if a preventable medical error is made in their care. The vast majority also say that reporting of medical errors should be required and most say that this information should be released to the public. (Chart 20)

- About nine in ten (88%) say that physicians should be required to tell patients if a preventable medical error resulting in serious harm is made in their care. About one in ten (9%) disagree.
- Over nine in ten (92%) say that reporting of serious medical errors should be required. Six percent disagree and say that reporting serious medical errors should be voluntary.
- Nearly two in three (63%) say that if medical errors are reported hospitals should release this information to the public. About three in ten (31%) disagree and say that information on medical errors should be confidential and only used to learn how to prevent future mistakes.

Perceived Causes of Medical Errors

The public is more likely to blame individual health professionals for causing medical errors, rather than the institutions where they work. (Chart 21)

- About half (52%) of people say that mistakes made by individual health professionals are a more important cause of preventable medical errors than the mistakes made by institutions where they work. Just over one in three (36%) Americans disagree, and say mistakes made by institutions are more important.

When read a list of items that are potential causes of medical errors, most people say that seven of the nine are likely causes of medical errors. However, the causes most cited by medical experts such as poor handwriting and lack of computerized medical records fall at the bottom of the public’s list. (Chart 22)

- The percent of the public who say each is a “very important” cause of medical errors:
 - Overwork, stress, or fatigue of health professionals (74%)
 - Doctors not having enough time with patients (70%)
 - Not enough nurses in hospitals (69%)
 - Health professionals not working together or not communicating as a team (68%)
 - Poor training of health professionals (58%)
 - The influence of HMOs and other managed care plans on treatment decisions (55%)
 - Poor handwriting by health professionals (52%)
 - Medical care being very complicated (47%)
 - Lack of computerized medical records (46%)

Preventing Medical Errors

When given a list of potential ways to reduce medical errors, people say many of them would be effective, particularly giving physicians more time with patients. As with the causes of medical errors, there is a discrepancy between what the public thinks will help reduce medical errors and what experts recommend. (Chart 23 and 24)

- The percent of the public who say each would be “very effective” in reducing preventable medical errors:
 - Giving doctors more time to spend with patients (79%)
 - Requiring hospitals to develop systems to avoid medical errors (72%)
 - Better training of health professionals (72%)
 - Requiring hospitals to report all serious medical errors to a state agency (71%)
 - Increasing the number of hospital nurses (67%)
 - Reducing the work hours of doctors in training to avoid fatigue (66%)
 - Using ONLY doctors specially trained in intensive care medicine on intensive care units (66%)
 - Fining and suspending the license of health professionals who make medical errors (54%)
 - More use of computerized medical records and computers instead of paper records for ordering of drugs and medical tests (51%)
 - Limiting certain high-risk medical procedures to hospitals that do a lot of these procedures (49%)
 - Including a pharmacist on hospital rounds when doctors review the progress of patients (42%)
 - Having hospitalized patients be taken care of by hospital doctors rather than their regular doctors (21%)
 - More lawsuits for malpractice (21%)

Many healthcare experts recommend using information technology to help reduce medical errors. Although most say they have experienced problems that would be addressed by technological solutions such as computerized medical records, the public is still more likely to see other options as more effective in preventing medical errors. (Chart 25)

- About seven in ten (69%) say that coordination among all of their different health professionals is a problem. This includes nearly three in ten (28%) who say that it is a “major” problem. Furthermore, about half (48%) say that they have seen a health care professional and noticed that they did not have all of their information and about a third (32%) say they have had to wait for a health care professional or had to come back for another appointment because the health professional did not have their medical information available.
- Perhaps as a result, nearly one in three (32%) people say they or a family member have created their own set of medical records to ensure that their health care providers have all of their medical information.
- Although half (51%) of adults say that having computerized medical records and computers instead of paper records for ordering drugs and medical tests would be “very” effective at reducing errors, as discussed above, they are more likely to say other options such as giving doctors more time with patients would be more effective.

When presented with potential costs to reduce medical errors, Americans seem somewhat willing to contribute. (Chart 26)

- When told that experts believe it will be quite costly to reduce medical errors to a small number, about two in three (65%) say they would be willing to help fund the cost by paying \$5 more when they visit the doctor.
- When told that government agencies will need more information to reduce medical errors to a very small number, six in ten (60%) say they would be willing to send their health treatment information to a government agency. However, if a name and address were also included in this information, the percentage of people willing to participate drops to 33%.

The U.S. Department of Health and Human Services developed Five Steps to Safer Health Care in partnership with the American Hospital Association and the American Medical Association. Most Americans say they have already taken many of the recommended steps. (Chart 27)

- The recommended five steps to safer healthcare are:
 1. Ask questions if you have doubts or concerns.
 2. Keep and bring a list of ALL the medicines you take.
 3. Get the results of any test or procedure.
 4. Talk to your doctor about which hospital is best for your health needs.
 5. Make sure you understand what will happen if you need surgery.

- The percent of the public who say they have:
 - Asked your doctor questions about your health or any treatment that he or she has prescribed (83%)
 - Called to check on the results of medical tests you had done (69%)
 - Checked the medication that a pharmacist gave you with the prescription that your doctor wrote (69%)
 - Talked to a surgeon about the details of surgery such as exactly what they will be doing, about how long it will take, and the recovery process (66%)
 - Brought a list of all of the medications you were taking to a doctors appointment, including non-prescription drugs (48%)
 - Brought a friend or a relative to a doctors appointment so that they can help ask questions and understand what the doctor was telling you (43%)
 - Told a doctor, nurse, or surgeon about any drug allergies when they did not ask for this information (39%)
 - Consulted your doctor about the hospital that you go to (37%)

IV. SPECIAL POPULATIONS

Seniors

Seniors appear to make health care decisions somewhat differently than their younger counterparts. Those 65 and older are slightly less likely than those under 65 to have used quality information about doctors, hospitals, or health plans. Furthermore, seniors are less likely to say they would ask their friends and family for recommendations or go online for information. Seniors are also more likely to say factors such as convenience and familiarity influence their decisions. (Chart 28)

	<u>Seniors</u>	<u>Under Age 65</u>
Percent who say...		
They saw quality information about doctors, hospitals, or health plans and chose to use it	14%	20%
They are “very likely” to ask friends, family members, or co-workers when they want to find information comparing the quality of different doctors, hospitals, or health plans	49	68
They are “very likely” to go to an Internet web site that posts quality information when they want to find information comparing the quality of different doctors, hospitals, or health plans	14	42
When choosing a doctor or hospital the convenience of the location would have “a lot” of influence	53	42
They would prefer to go to a hospital that is familiar rather than highly rated	69	60

Racial and Ethnic Minorities

Blacks are more likely than Latinos and whites to have negative opinions about health care in this country. However, Latinos are the most concerned about the safety of the medical care that they and their family receive. Perhaps this is due to differences in health care coverage and practice. Latinos are the least likely to report having health insurance or to have gone to a doctor visit in the past year. Furthermore, Latinos are the least likely to say they have taken any of the actions recommended in the “Five Steps to Safer Health Care.” (Chart 29)

	<u>Latinos</u>	<u>Blacks</u>	<u>Whites</u>
Percent who say...			
They are dissatisfied with the quality of healthcare in the country as a whole	44%	73%	56%
The quality of health care in this country has gotten worse in the past five years	39	56	38
They are “very concerned” with the safety of the medical care that they and their family receive	41	25	19
They say they have health insurance	62	85	90
They have made a doctors visit in the past year	72	87	85
They have gone to the hospital emergency room in the past year	25	38	25
Asked a doctor questions about their health or any treatment that he or she prescribed	67	84	85
Checked the medication that a pharmacist gave you with the prescription the doctor wrote	59	72	70
Called to check on the results of medical tests	47	67	73
Talked to a surgeon about the details of surgery	43	62	69
Brought a friend or a relative to a doctors appointment	33	35	45

People with a Chronic Disease or Disability

Those who have a chronic disease or disability are more likely to be dissatisfied with the quality of health care in this country and they are more likely to say it has gotten worse in the past five years. They also report more experience with the health industry—they go to the doctor more often than those without a chronic problem, they are more likely to visit the emergency room, and they are more likely to report having an overnight stay in a hospital. Perhaps as a result, those with a chronic condition are more likely to report having experienced a medical error or had problems with the health care system. However, those with a chronic disease or disability are more likely than those without a chronic problem to have taken at least some of the recommended steps to improve the quality of their health care. (Chart 30)

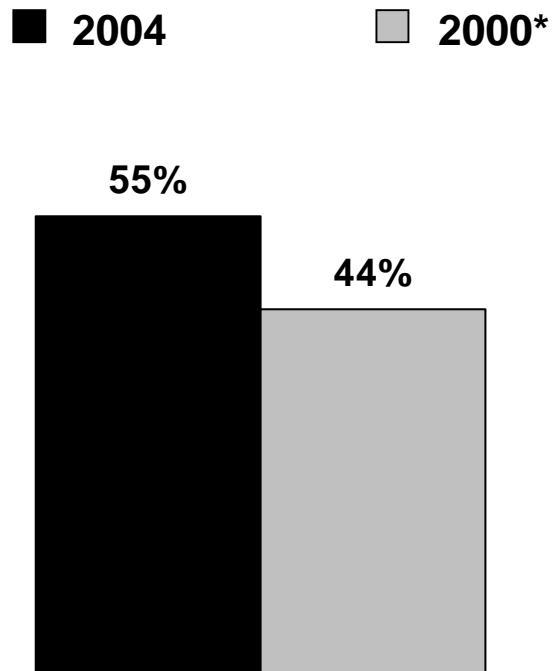
	People With a Chronic Disease or Disability	People Without a Chronic Disease or Disability
Percent who say...		
They are dissatisfied with the quality of healthcare in the country as a whole	66%	53%
The quality of health care in this country has gotten worse in the past five years	50	38
They have gone to the emergency room in the past year	46	22
They have gone to ten or more doctors visits in the past year	41	9
They have had an overnight stay at a hospital in the past year	29	10
They have experienced a medical error in their own care or in the care of a family member	50	30
Seeing a health care professional and noticing that they did not have all of their medical information has happened “very often”	13	4

	People With a Chronic Disease or Disability	People Without a Chronic Disease or Disability
Percent who say...		
Talked to a surgeon about the details of surgery	82	62
Checked the medication that a pharmacist gave them with the prescription the doctor wrote	80	66
They have brought a list of all of the medications they were taking to a doctors appointment	74	42
Told a health professional about drug allergies without being asked for this information	60	34
Consulted their doctor about what hospital to go to	52	34

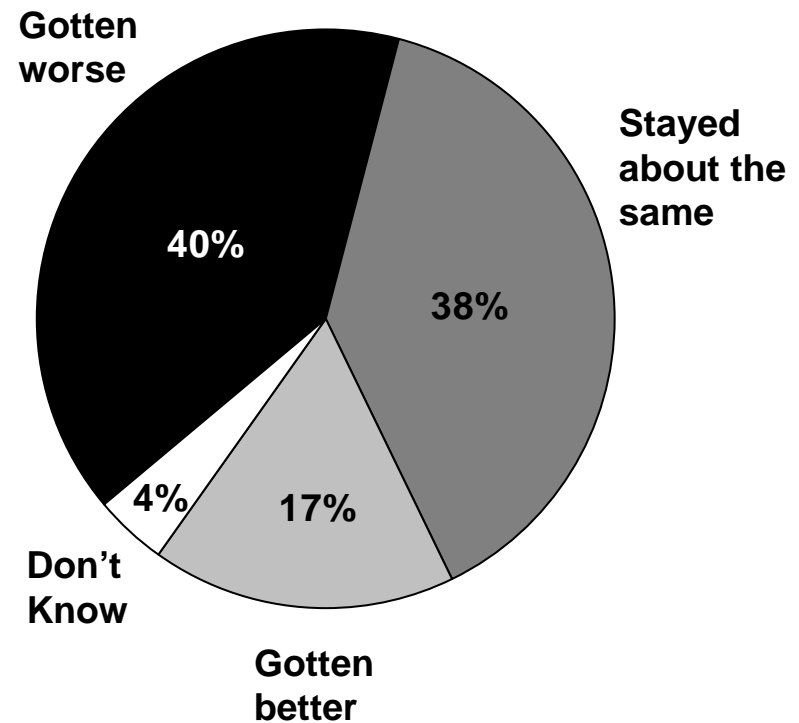
Health Care Quality

Overall Perceptions

Percent who say they are dissatisfied with the quality of health care in this country...



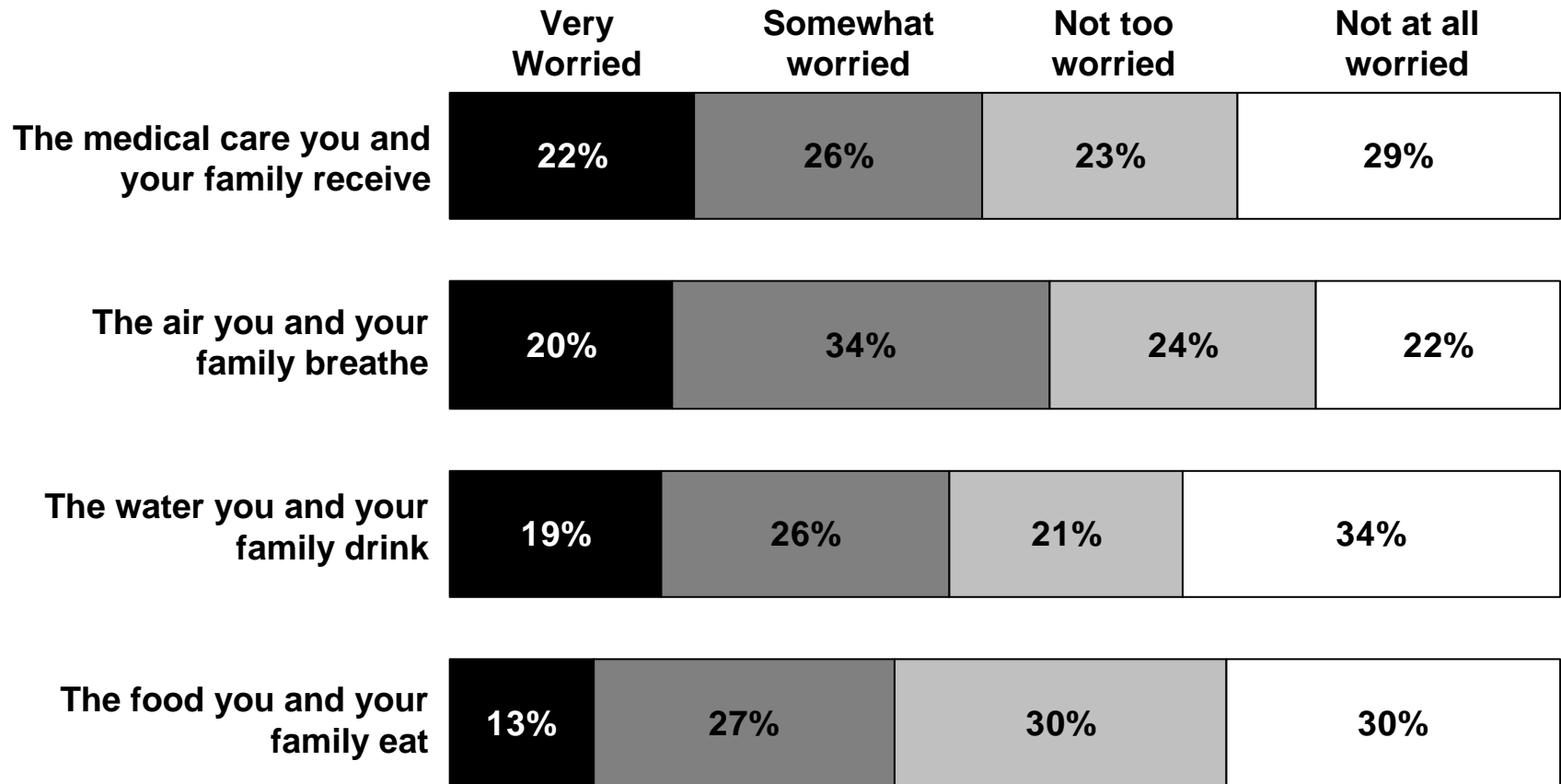
Has the quality of health care in this country...



* Gallup Poll conducted September 11-13, 2000 with 1,008 U.S. adults.

Safety Worries

How worried are you about the safety of...

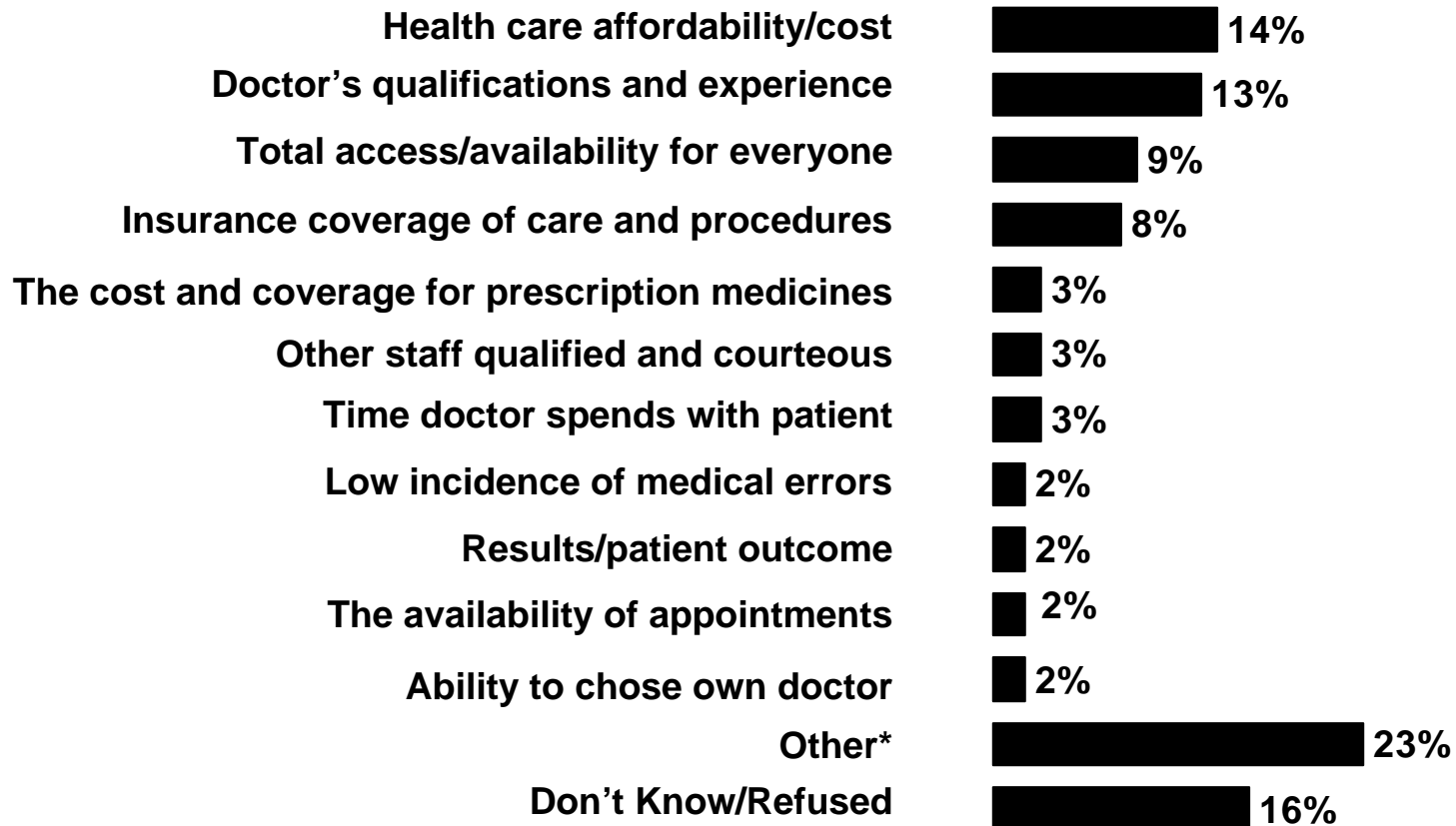


Note: "Don't know" responses not shown

Source: Kaiser Family Foundation / Agency for Healthcare Research and Quality / Harvard School of Public Health *National Survey on Consumers' Experiences with Patient Safety and Quality Information*, November 2004 (Conducted July 7 – September 5, 2004).

Defining Quality

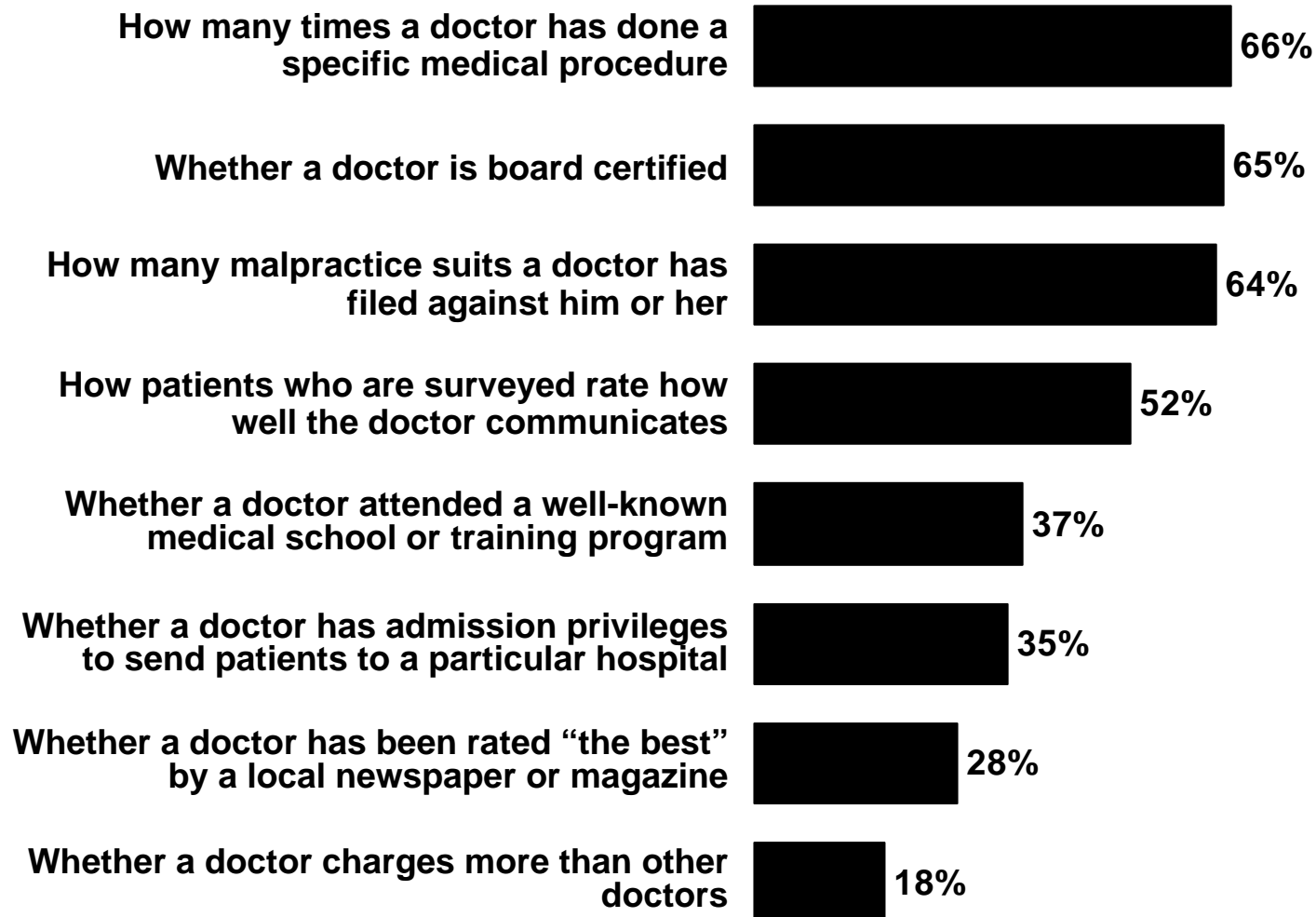
When asked in an open-ended question what is “most important” in determining the quality of health care patients receive, the percent who say...



* Responses mentioned by less than 1% are not shown.

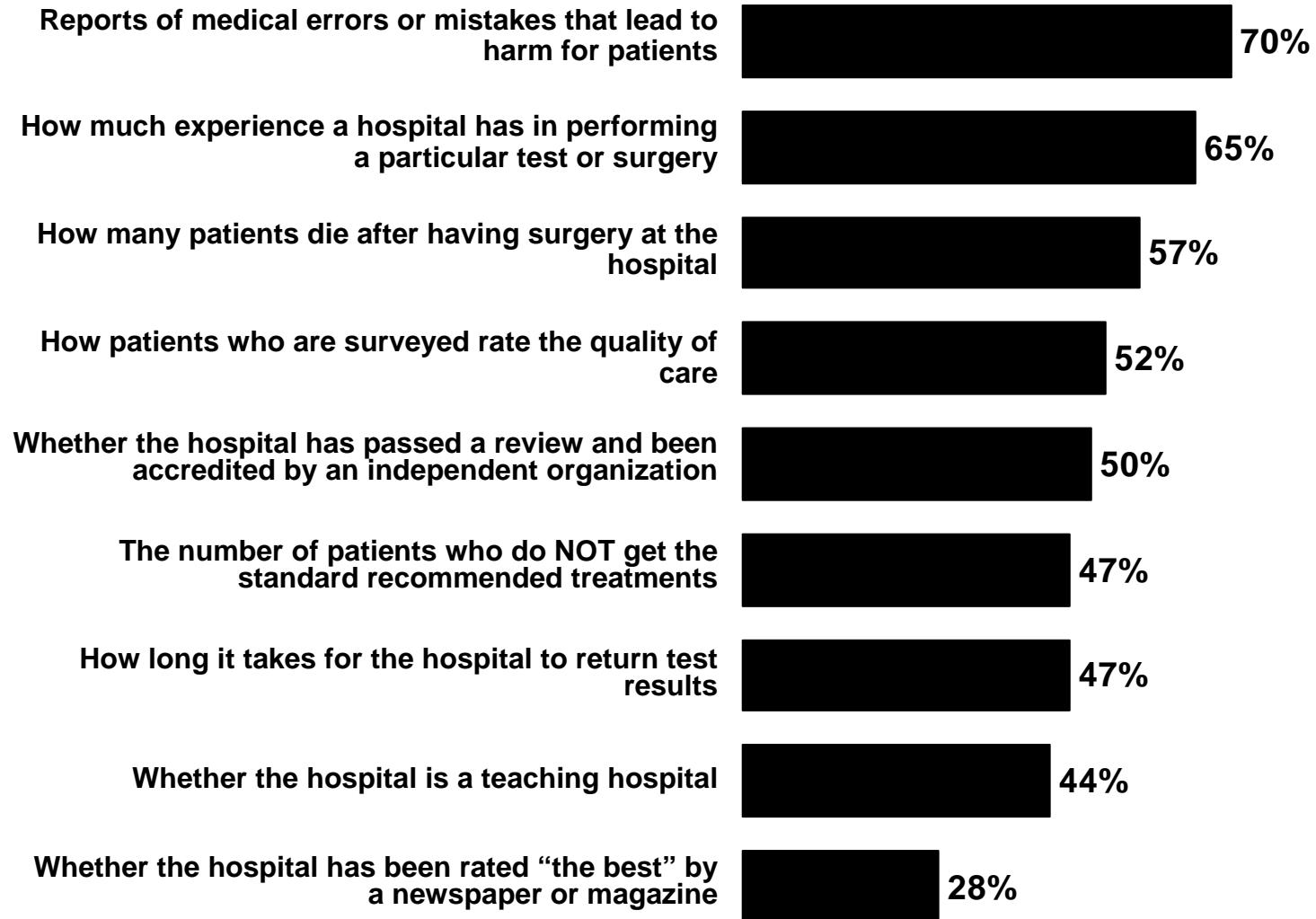
Determining Physician Quality

Percent who say each would tell them “a lot” about the quality of a doctor...



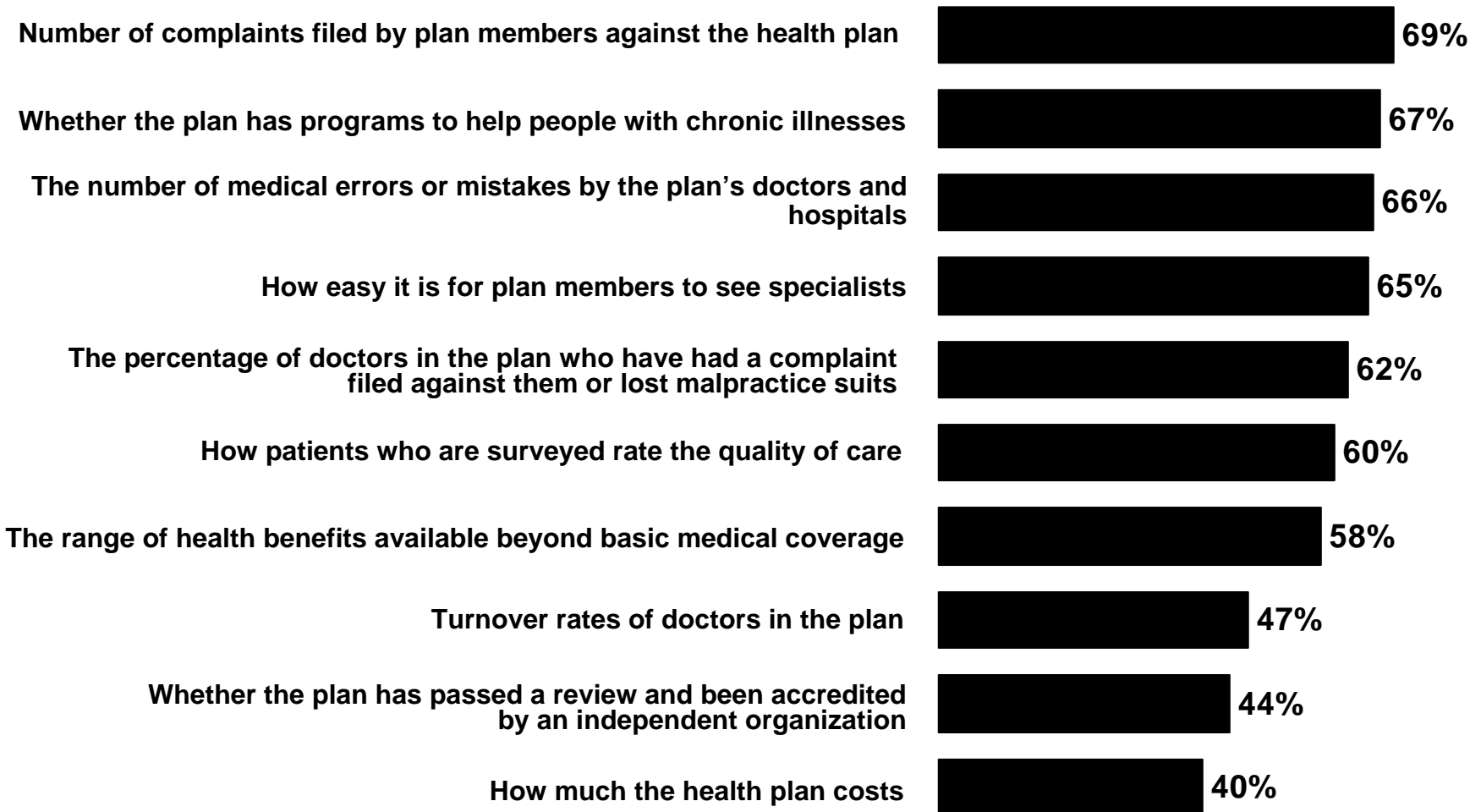
Determining Hospital Quality

Percent who say each would tell them “a lot” about the quality of a hospital...



Determining Health Plan Quality

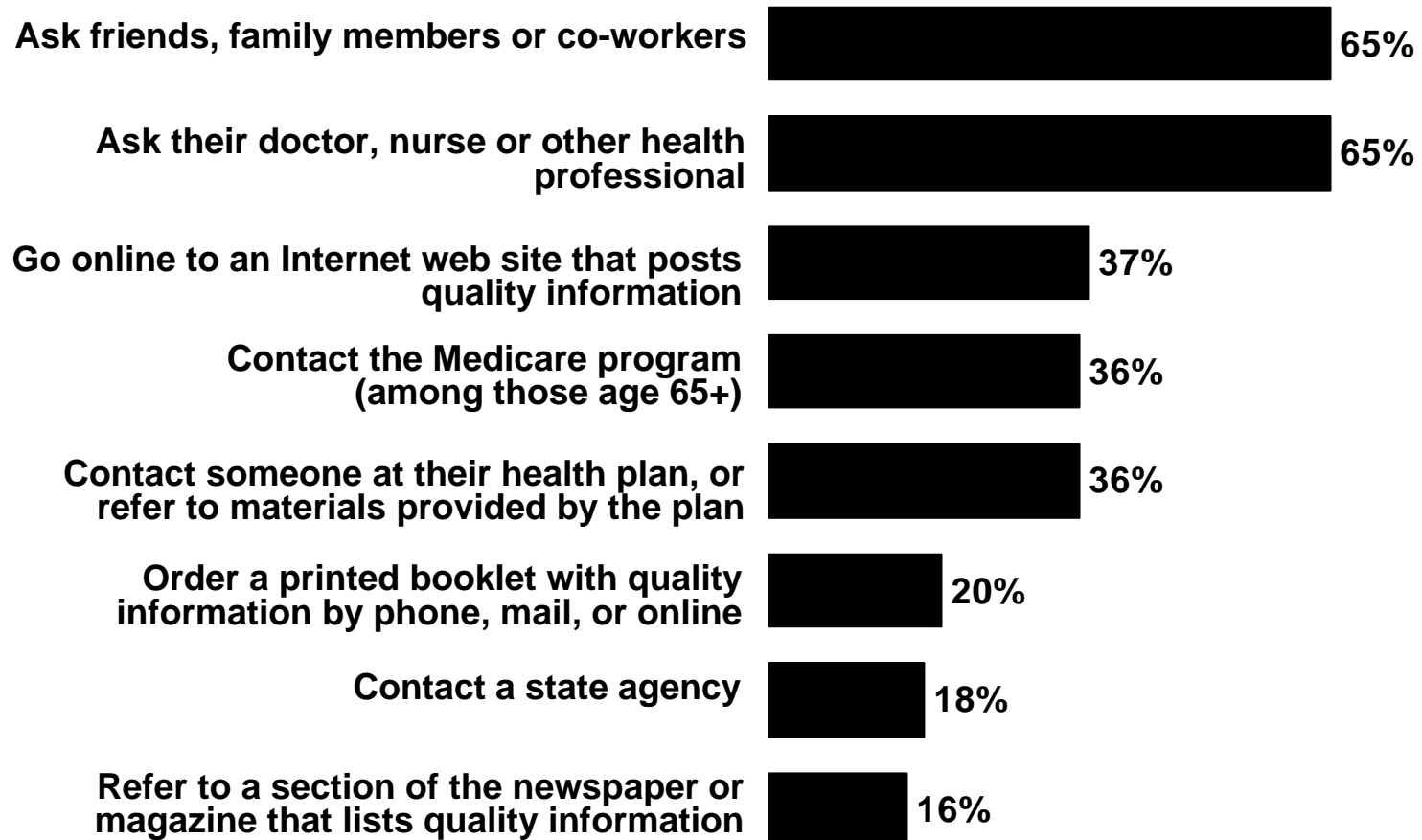
Percent who say each would tell them “a lot” about the quality of a health plan...



Making Decisions About Health Care

Finding Quality Information

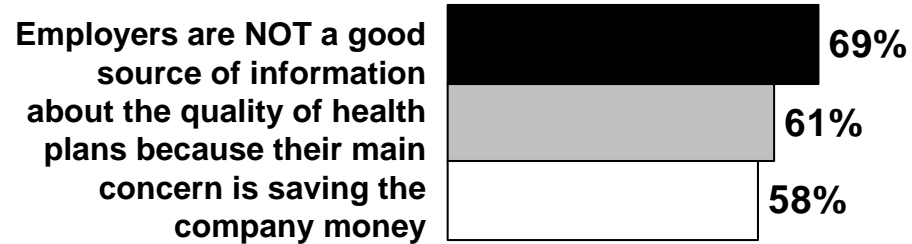
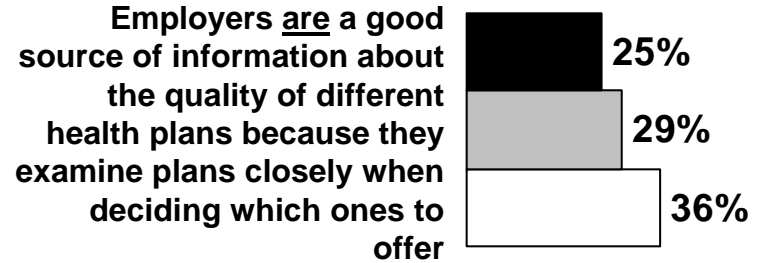
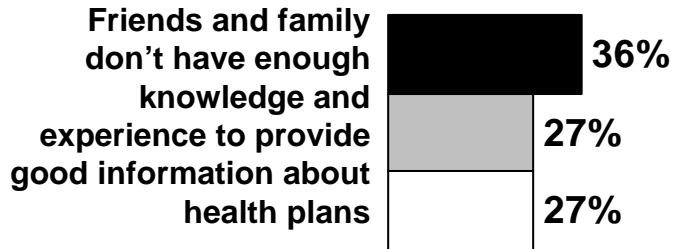
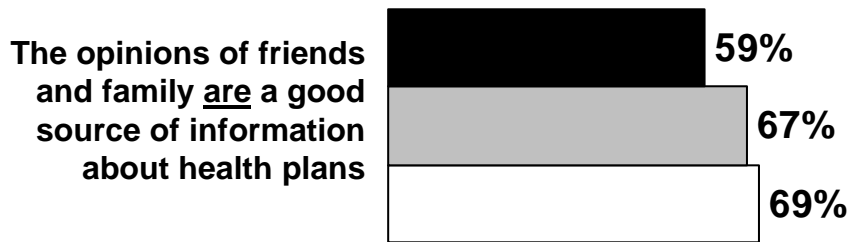
Percent who say they would be “very likely” to do each to try to find health care quality information...



Sources Of Information On Quality

Which comes closer to your view...

■ 2004 ■ 2002 □ 1996

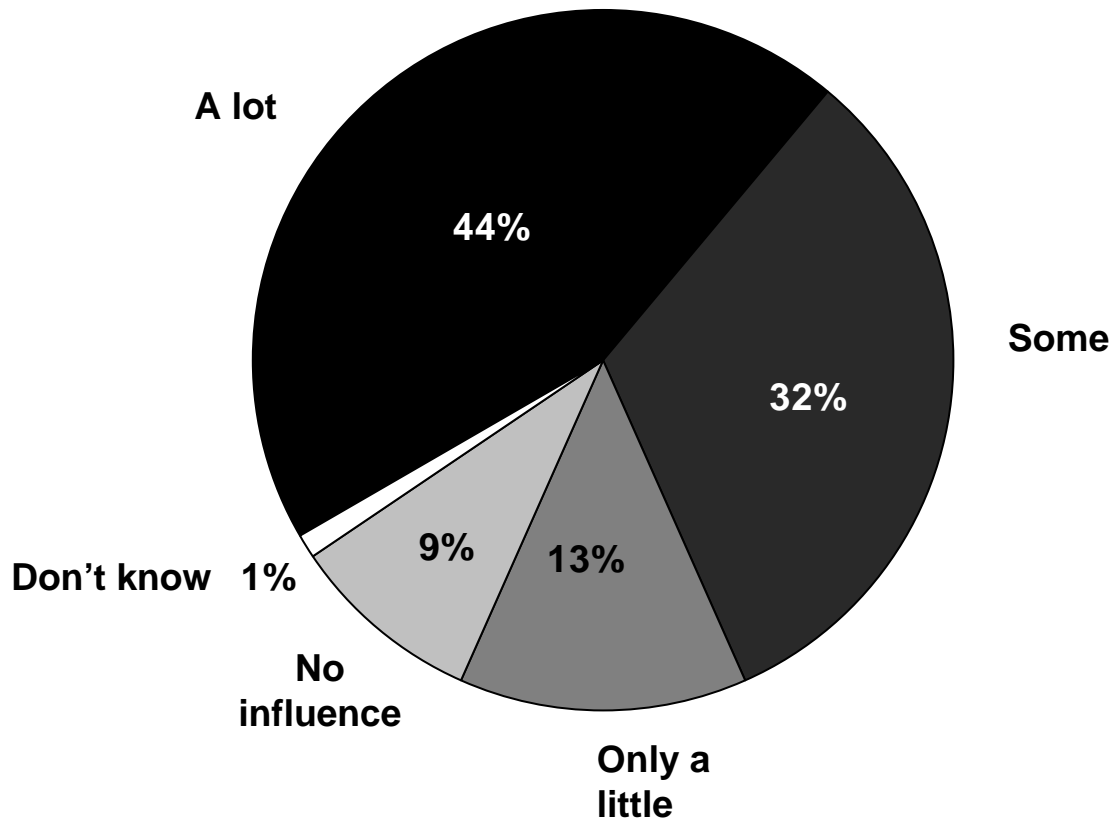


Note: "Don't know" responses not shown

Source: Kaiser Family Foundation / Agency for Healthcare Research and Quality / Harvard School of Public Health *National Survey on Consumers' Experiences with Patient Safety and Quality Information*, November 2004 (Conducted July 7 – September 5, 2004).

Role of Convenience In Decisions

Suppose you HAD TO CHOOSE a new doctor or hospital for you or your family. How much influence would the convenience of the location of the doctor or hospital have in making this choice?

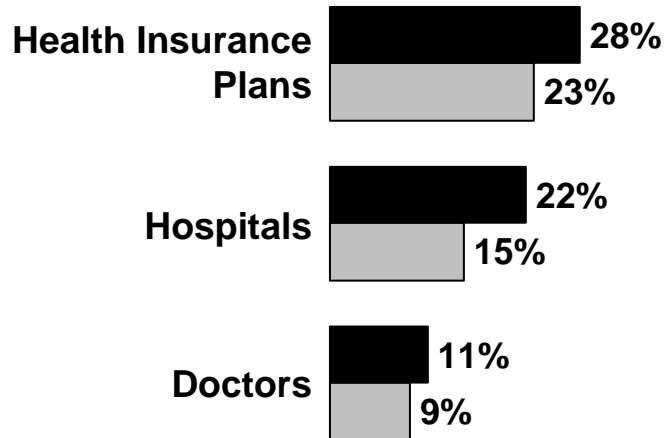


Exposure To And Use Of Quality Information

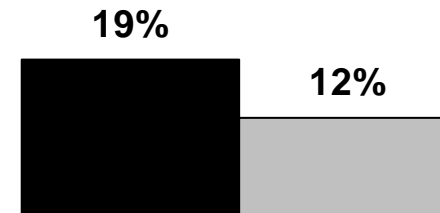
■ 2004

□ 2000

Percent who say they saw information in the past year comparing quality among...



Percent who say they saw quality information in the past year and used this information to make health care decisions...

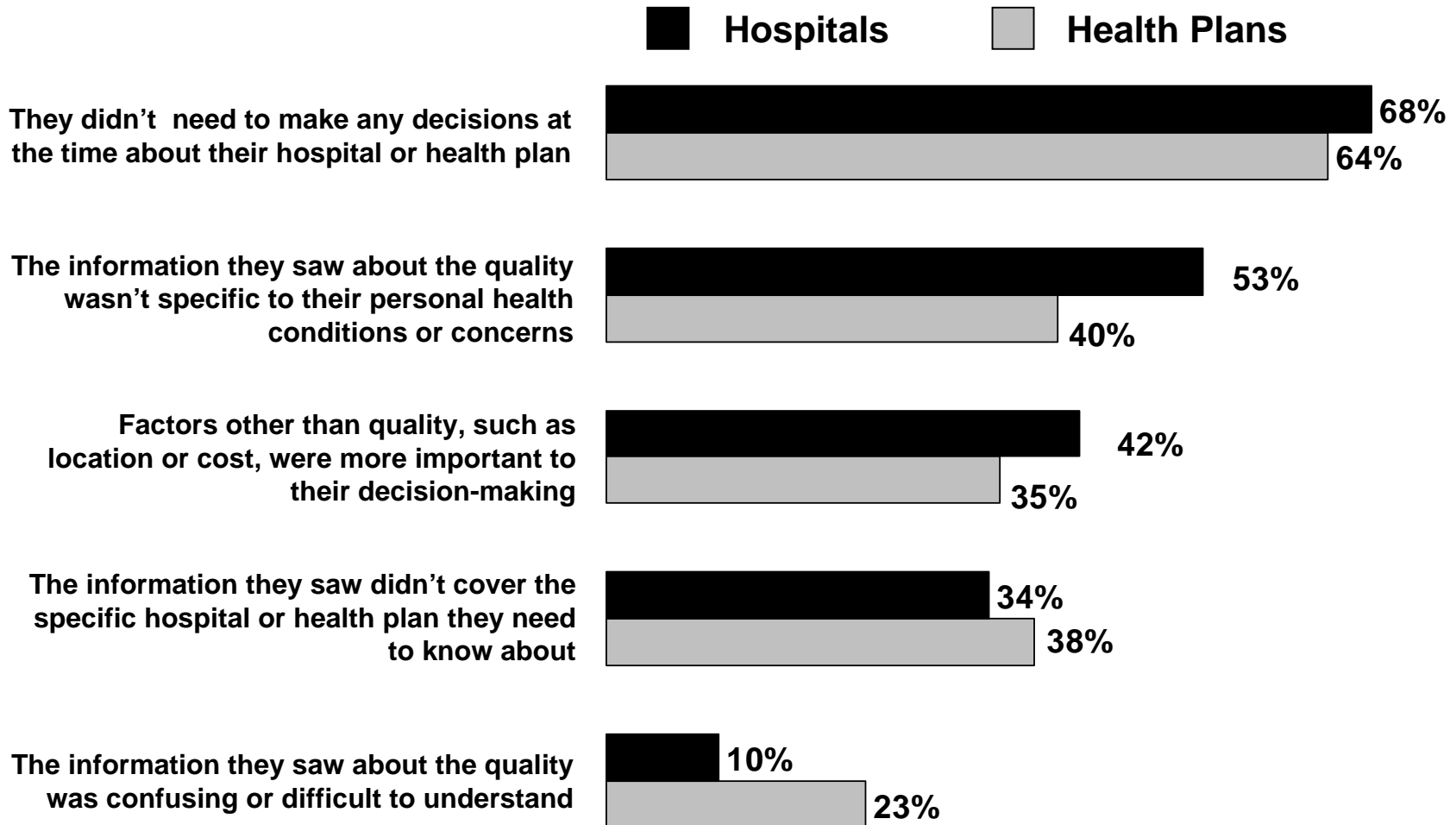


Percent who say they saw information on ANY of the above...



Why People Didn't Use Quality Information

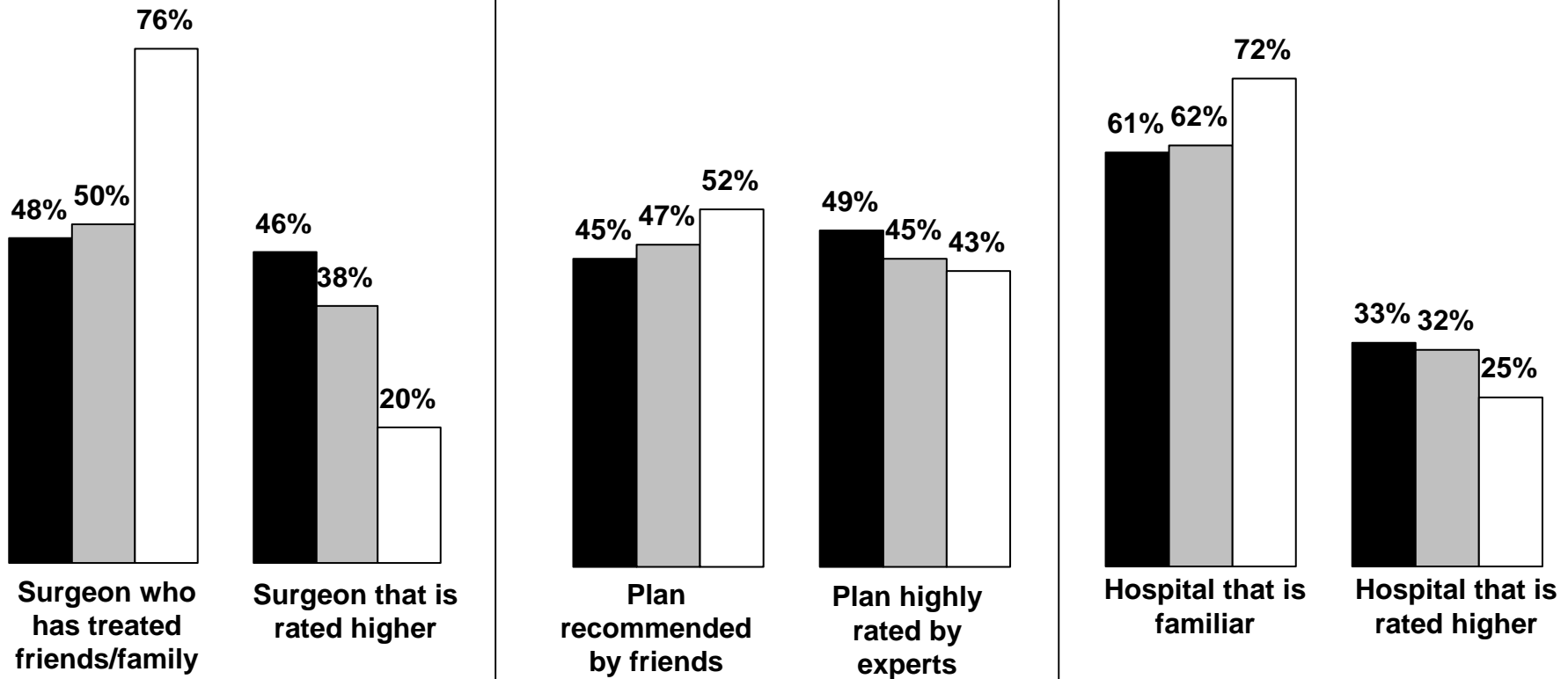
Among those who saw quality information but did not use it, the percent who say this was because...



Relative Importance Of Quality Ratings

Percent of Americans who say they would prefer a...

■ 2004 ■ 2000 □ 1996



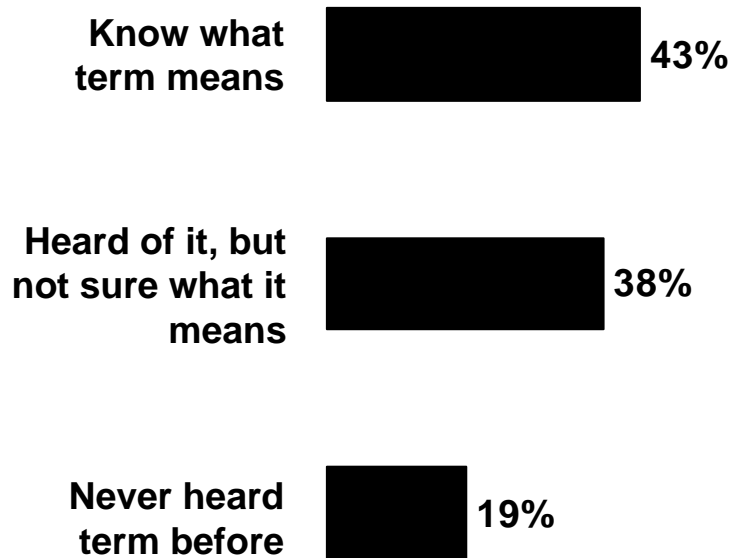
Note: "Don't know" responses not shown

Source: Kaiser Family Foundation / Agency for Healthcare Research and Quality / Harvard School of Public Health *National Survey on Consumers' Experiences with Patient Safety and Quality Information*, November 2004 (Conducted July 7 – September 5, 2004).

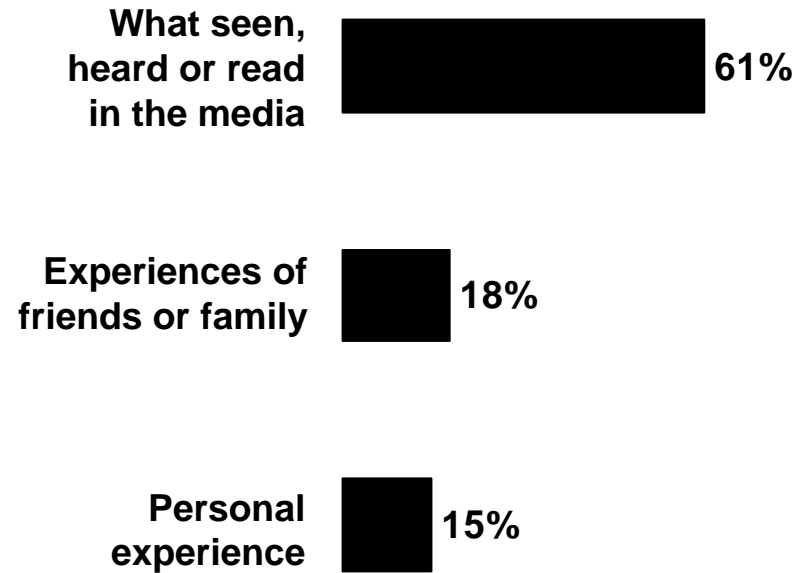
Medical Errors

Medical Errors

How familiar are you with the term “medical error”?

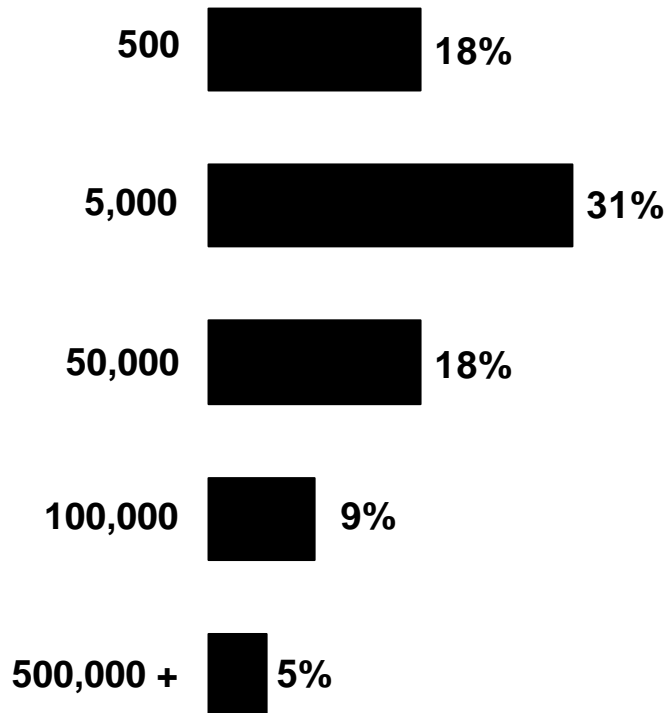


Is what you know about preventable medical errors based mainly on...



Perceived Frequency Of Medical Errors

About how many Americans, do you think, die in hospitals each year as a result of preventable medical errors?

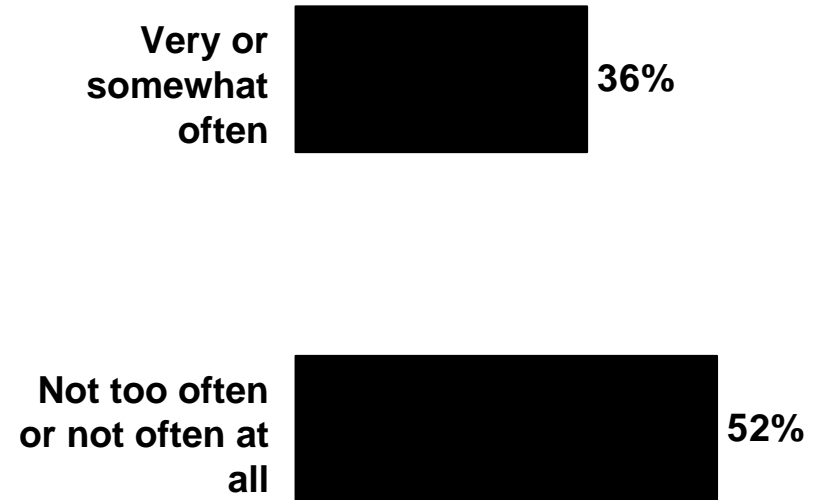


1999 Institute of Medicine estimate of deaths due to medical errors = 44,000-98,000

Note: "Don't know" responses not shown

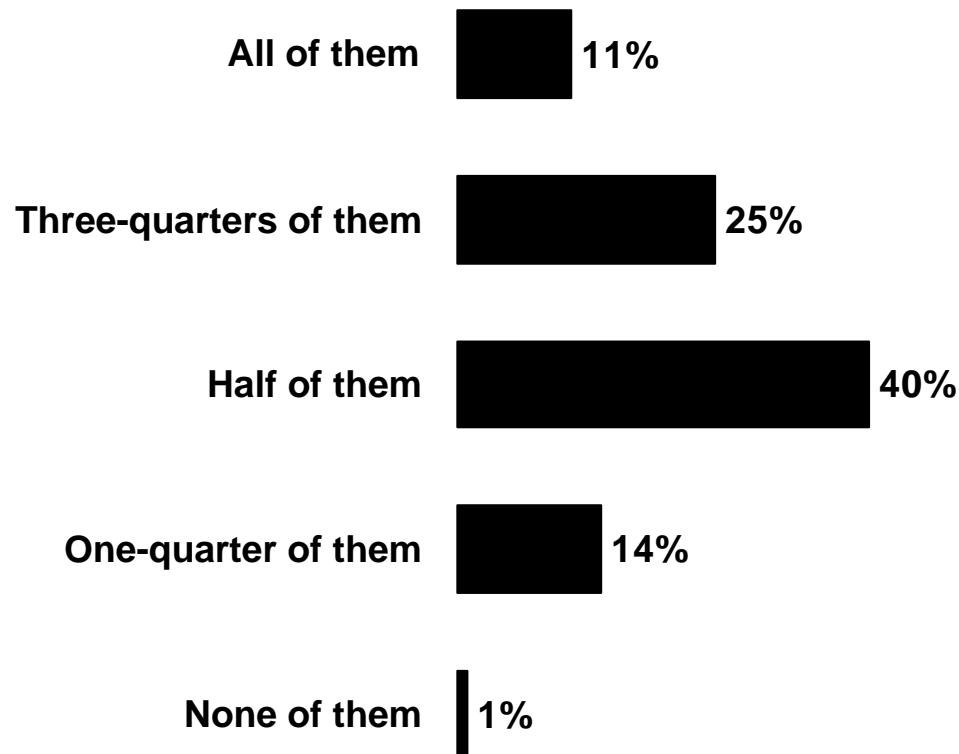
Source: Kaiser Family Foundation / Agency for Healthcare Research and Quality / Harvard School of Public Health *National Survey on Consumers' Experiences with Patient Safety and Quality Information*, November 2004 (Conducted July 7 – September 5, 2004).

When people seek help from a health professional, how often do you think preventable medical errors are made in their care?



Perceptions About Whether Deaths Due to Medical Error Are Preventable

The proportion of deaths due to medical error that respondents feel could be realistically prevented...

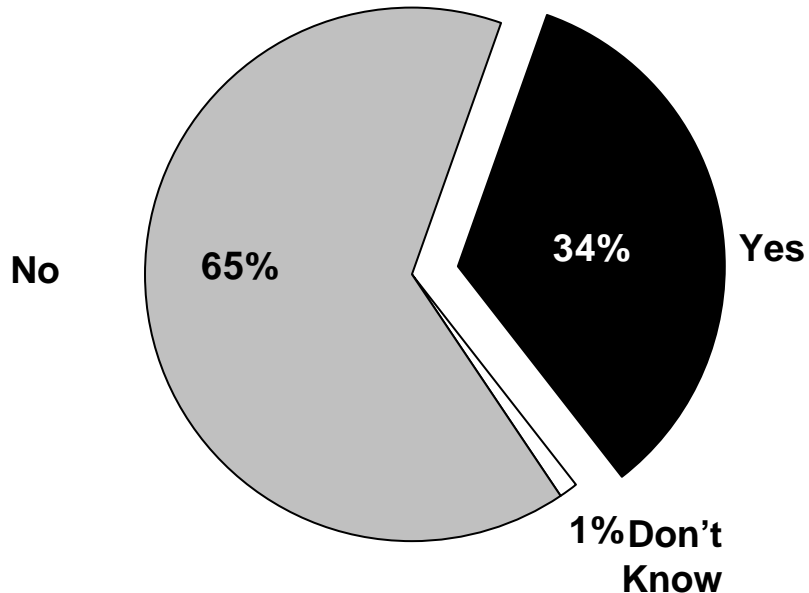


Note: "Don't know" responses not shown

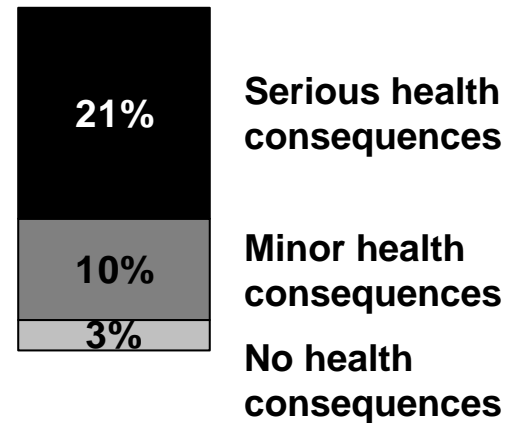
Source: Kaiser Family Foundation / Agency for Healthcare Research and Quality / Harvard School of Public Health *National Survey on Consumers' Experiences with Patient Safety and Quality Information*, November 2004 (Conducted July 7 – September 5, 2004).

Personal Experience With Medical Errors

Have you been personally involved in a situation where a preventable medical error was made in your own medical care or that of a family member?

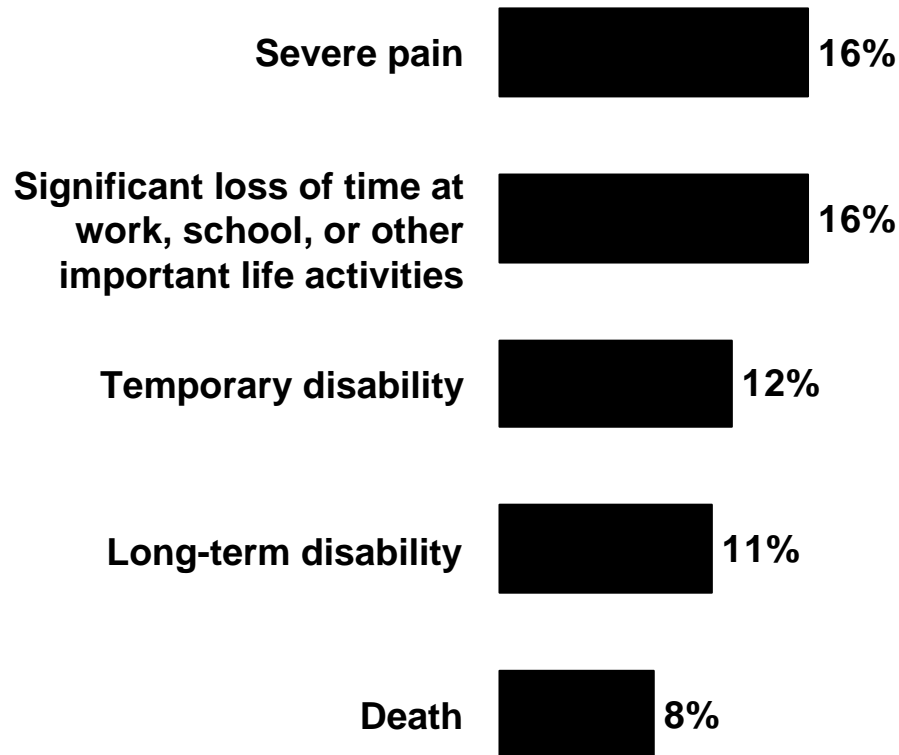


Did the error have serious health consequences, minor health consequences, or no health consequences at all?



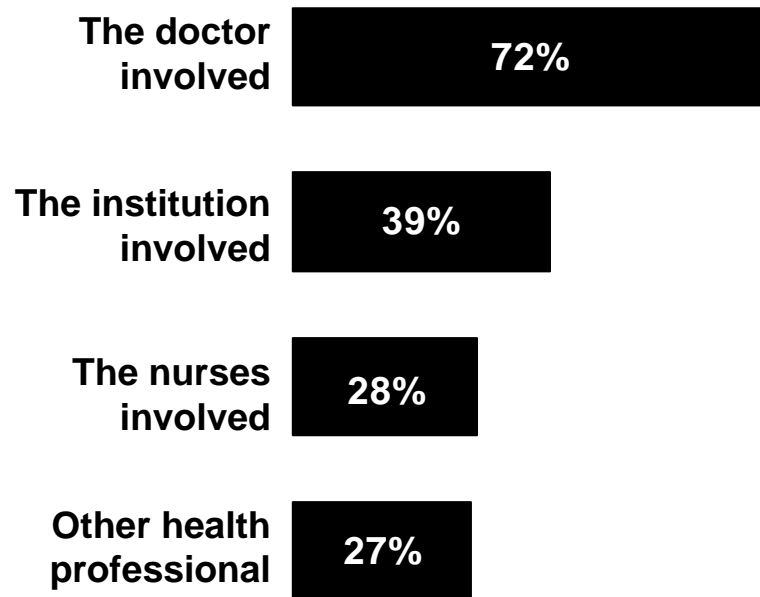
Consequences of Medical Errors

Percent of people who have experienced a medical error that resulted in the following serious health consequences...

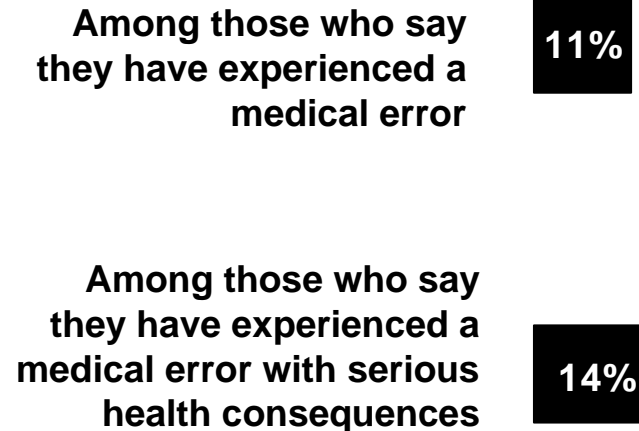


Responsibility for Medical Errors and Malpractice Suits

Among the 34% of people who had experienced medical errors: Percent who say each had “a lot” of responsibility for the error...

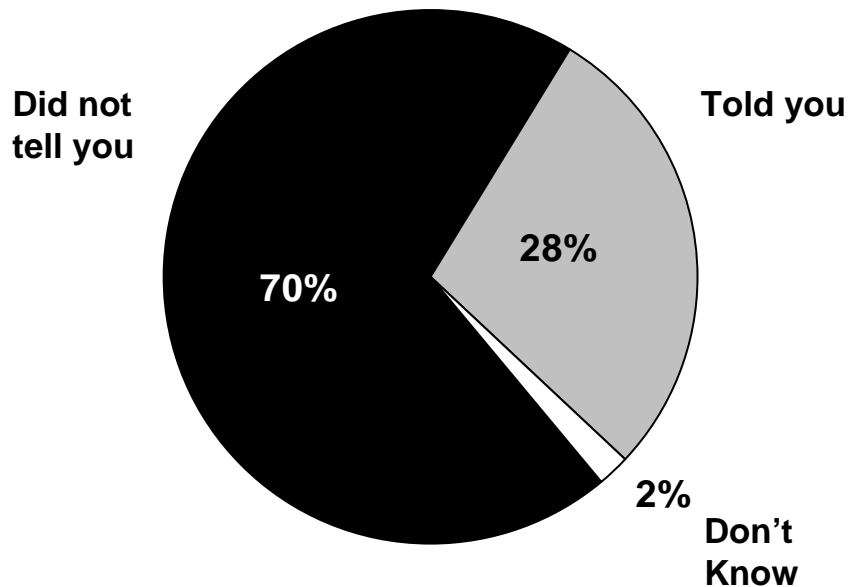


Have you or your family member sued a health care professional for malpractice?

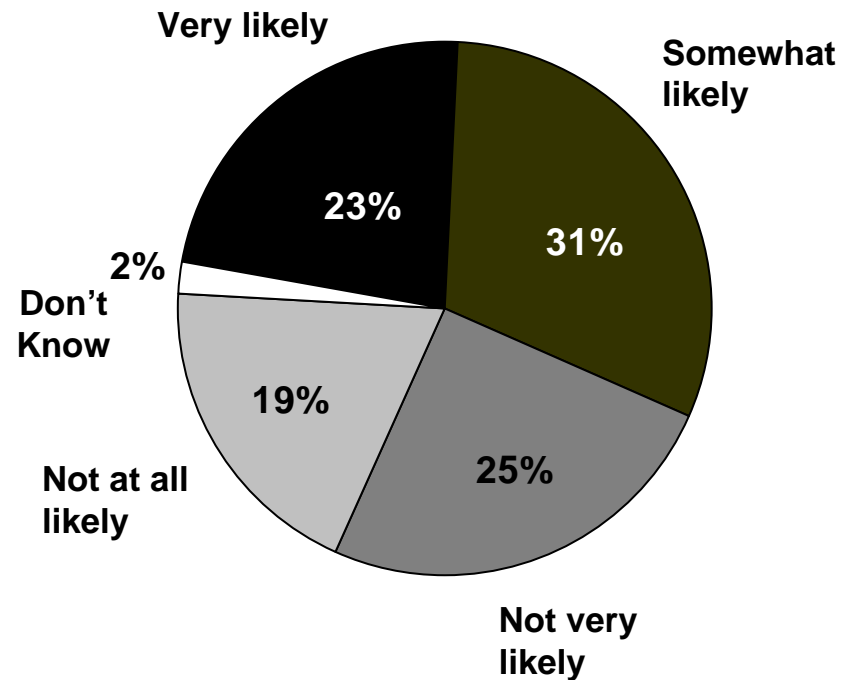


Reporting of Medical Errors

Among the 34% of people who have experienced medical errors: Did the doctor or the health professionals involved tell you that a medical error had been made?

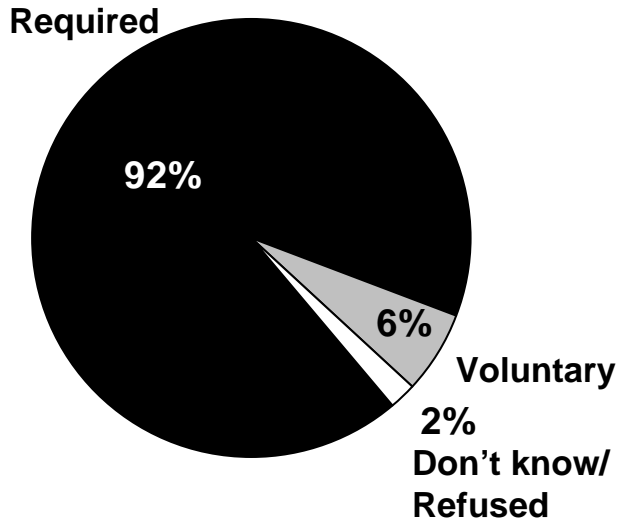


Among total public: If a preventable medical error that resulted in serious harm were made in your care, how likely do you think the doctor would be to tell you?

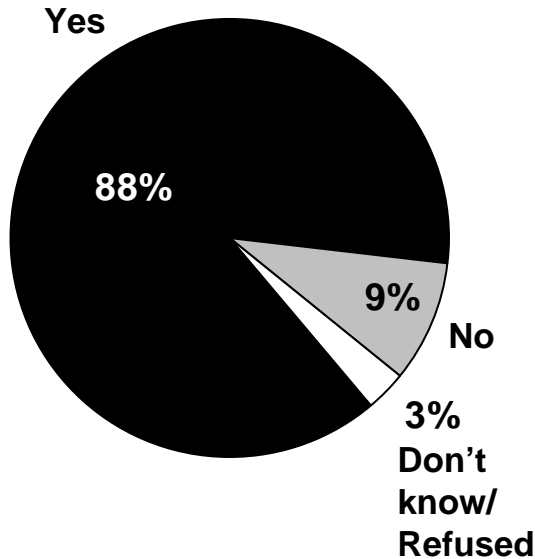


Views On Required Reporting Of Medical Errors

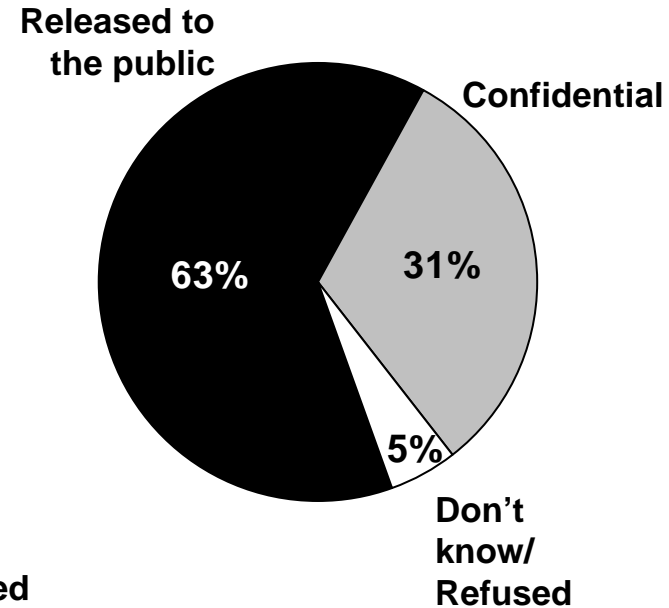
Percent who say reporting of serious medical errors should be...



Should physicians be required to tell patients if a preventable medical error resulting in serious harm is made in their OWN care?

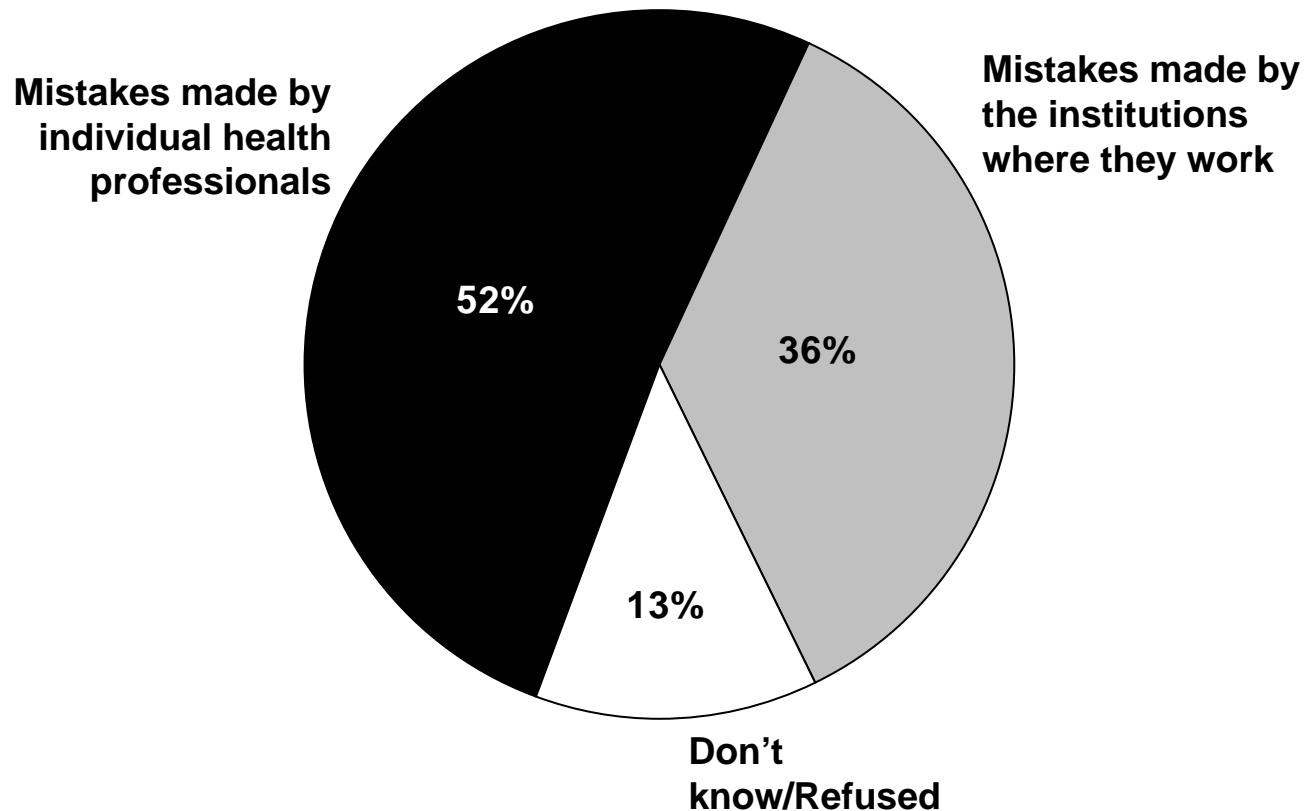


Assuming that medical errors are reported, hospital reports of serious medical should be...



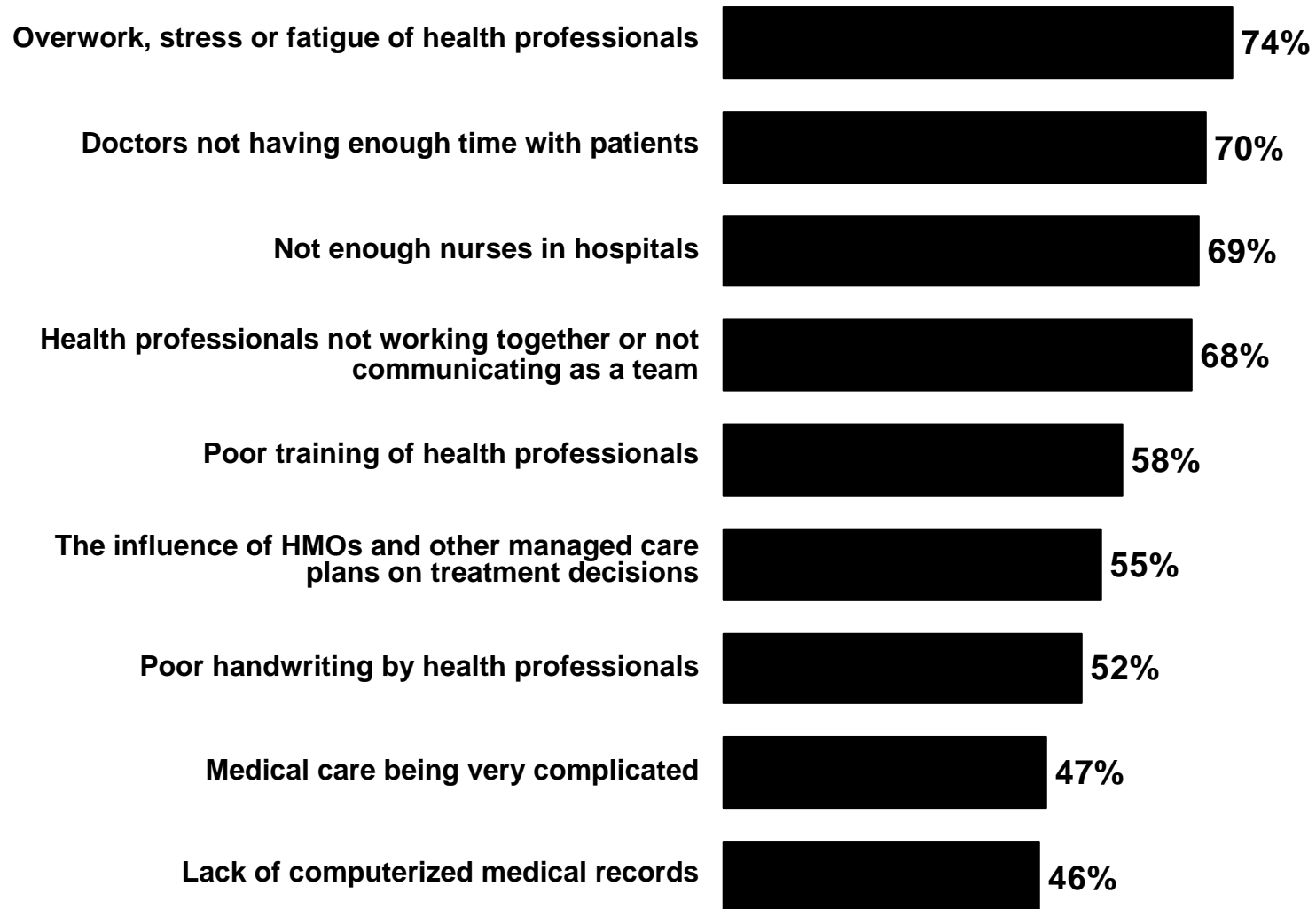
Who is Responsible for Preventable Medical Errors?

Which of the following do you think is the MORE important cause of preventable medical errors that result in serious harm?



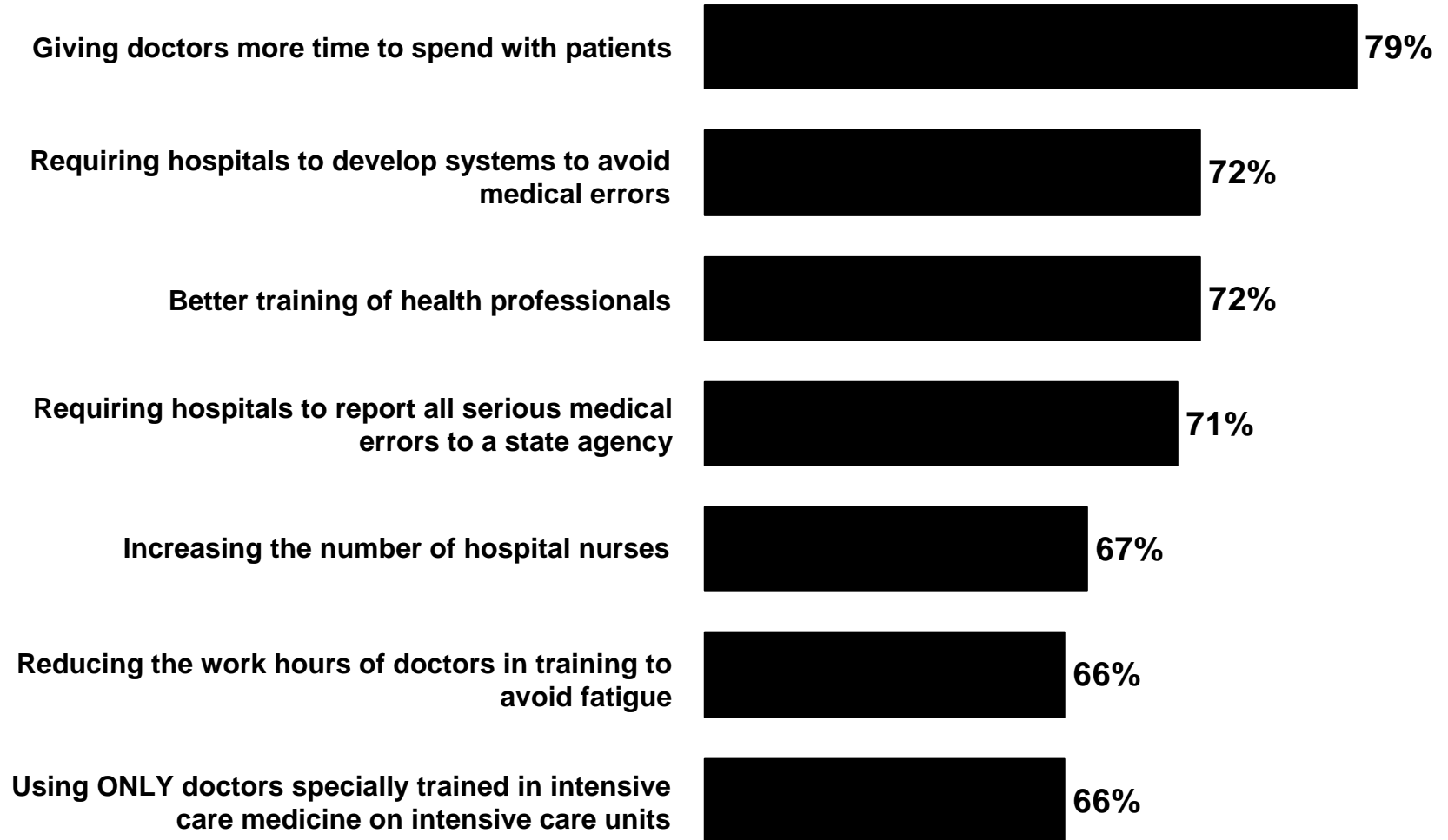
Perceived Causes of Preventable Medical Errors

Percent who say each is a “very important” cause of medical errors...



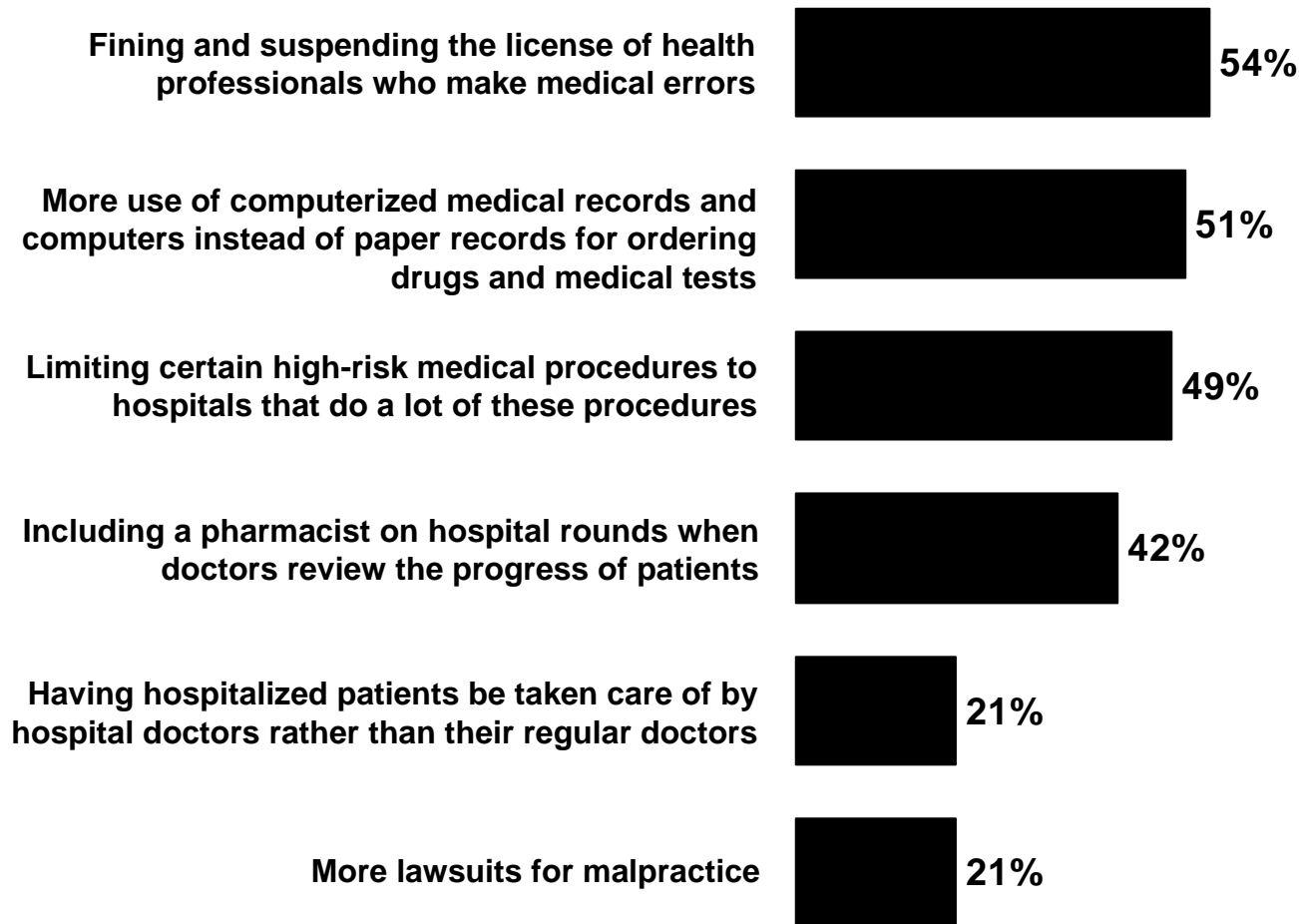
Possible Solutions to Prevent Medical Errors

Percent who feel each would be “very effective” in reducing preventable medical errors...



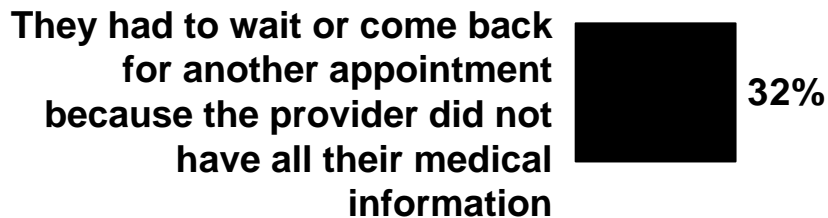
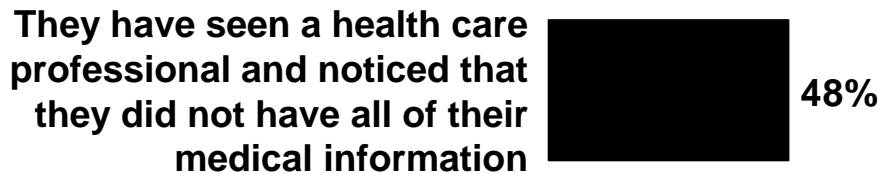
Possible Solutions to Prevent Medical Errors (Continued)

Percent who feel each would be “very effective” in reducing preventable medical errors...

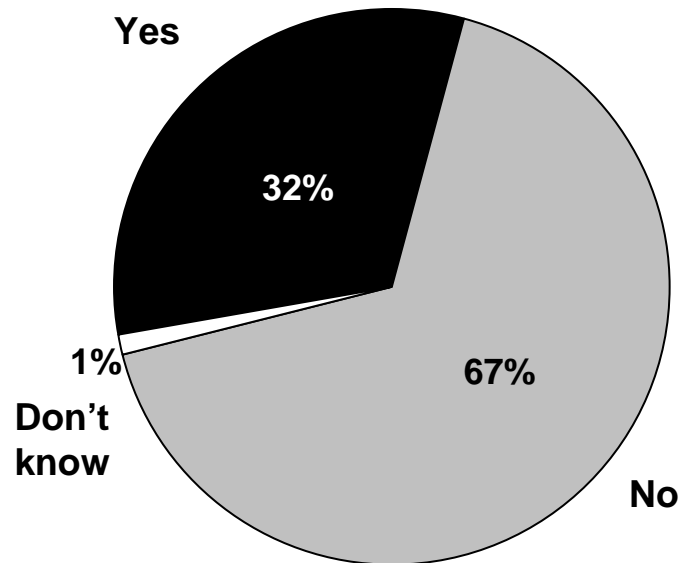


Role Of Information Technology In Reducing Medical Errors

Percent who say...

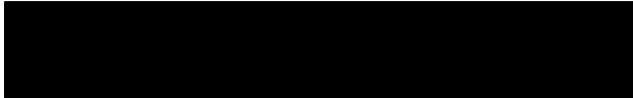


Have you or a family member ever created your own set of medical records to ensure that you and all of your health care providers have all of your medical information?



Willingness To Help Reduce Errors

When told that experts believe it will be quite costly to reduce medical errors to a small number, the percent who say to help fund the cost they would...

Pay \$5 more to see a doctor  65%

When told that many experts believe that government agencies will need more information to reduce medical errors to a very small number, the percent who say they would be willing to send the following to a government agency...

Their health treatment information  60%

Their health treatment information along with their name and address  33%

Steps To Reduce Medical Errors

Percent who say they have...

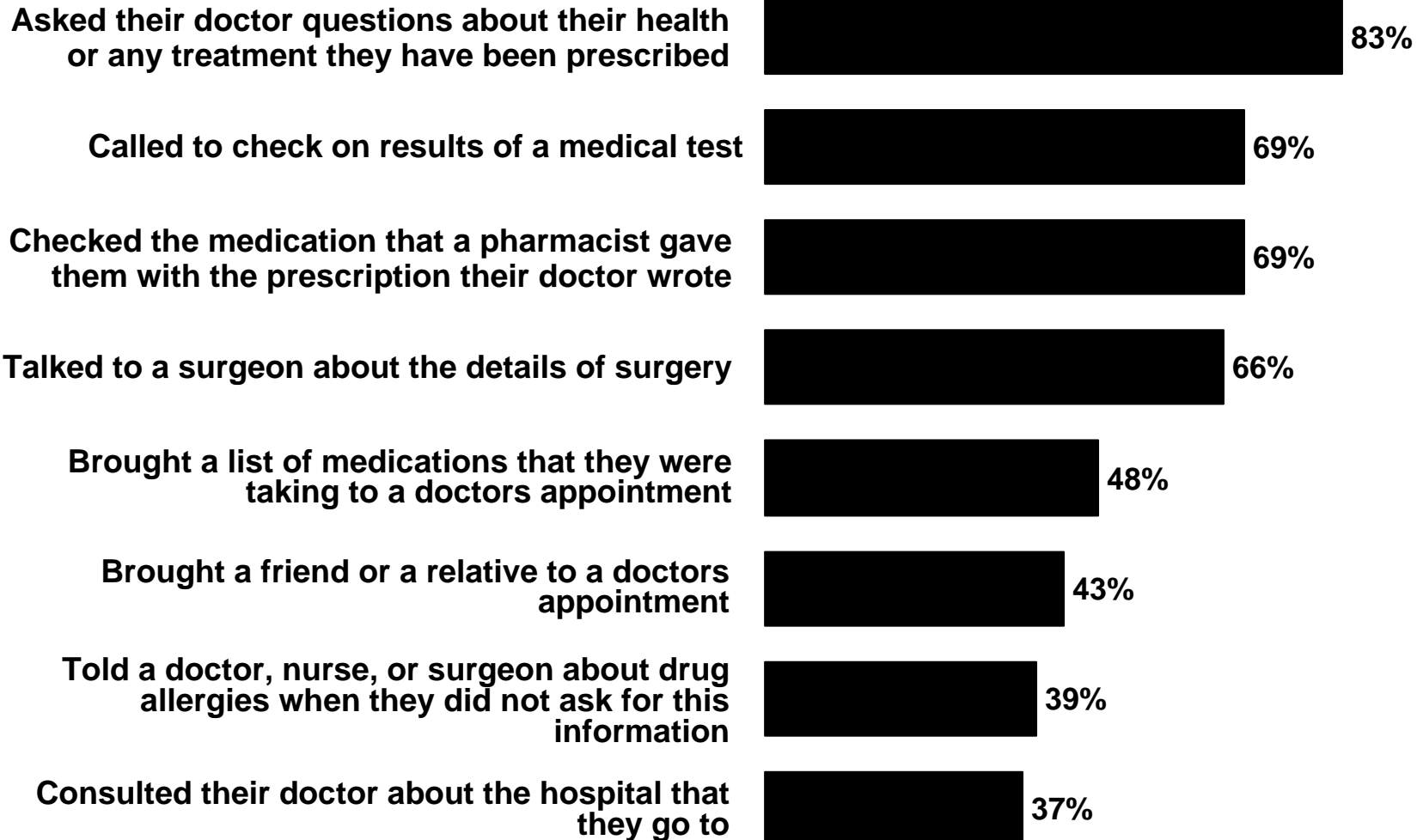


Chart 28
Seniors

Percent who say ...

	<u>Seniors</u>	<u>Under Age 65</u>
They saw quality information about doctors, hospitals, or health plans and chose to use it	14%	20%
They are “very likely” to ask friends, family members, or co-workers when they want to find information comparing the quality of different doctors, hospitals, or health plans	49	68
They are “very likely” to go to an Internet web site that posts quality information when they want to find information comparing the quality of different doctors, hospitals, or health plans	14	42
When choosing a doctor or hospital the convenience of the location would have “a lot” of influence	53	42
They would prefer to go to a hospital that is familiar rather than highly rated	69	60

Racial And Ethnic Minorities

Percent who say ...

	<u>Latinos</u>	<u>Blacks</u>	<u>Whites</u>
They are dissatisfied with the quality of health care in the United States	44%	73%	56%
Health care has “gotten worse” in the past five years	39	56	38
They are “very concerned” with the safety of the medical care that they and their family receive	41	25	19
They have made a doctors visit in the past year	72	87	85
They have gone to the hospital emergency room in the past year	25	38	25
Asked a doctor questions about their health or any treatment that he or she prescribed	67	84	85
Checked the medication that a pharmacist gave you with the prescription the doctor wrote	59	72	70
Called to check on the results of medical tests	47	67	73
Talked to a surgeon about the details of surgery	43	62	69
Brought a friend or a relative to a doctors appointment	33	35	45

Chart 30

People with a Chronic Disease or Disability

Percent who say ...	<i>With</i>	<i>Without</i>
They are dissatisfied with the quality of health care in the United States	66%	53%
Health care has “gotten worse” in the past five years	50	38
They have gone to the emergency room in the past year	46	22
They have gone to ten or more doctors visits in the past year	41	9
They have had an overnight stay at a hospital in the past year	29	10
They have experienced a medical error in their own care or in the care of a family member	50	30
Seeing a health care professional and noticing that they did not have all of their medical information has happened “very often”	13	4
Talked to a surgeon about the details of surgery	82	62
Checked that the medication that a pharmacist gave them with the prescription the doctor wrote	80	66
They have brought a list of all of the medications they were taking to a doctors appointment	74	42
Told a health professional about drug allergies without being asked for this information	60	34
Consulted their doctor about what hospital to go to	52	34

Source: Kaiser Family Foundation / Agency for Healthcare Research and Quality / Harvard School of Public Health *National Survey on Consumers' Experiences with Patient Safety and Quality Information*, November 2004 (Conducted July 7 – September 5, 2004).



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