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

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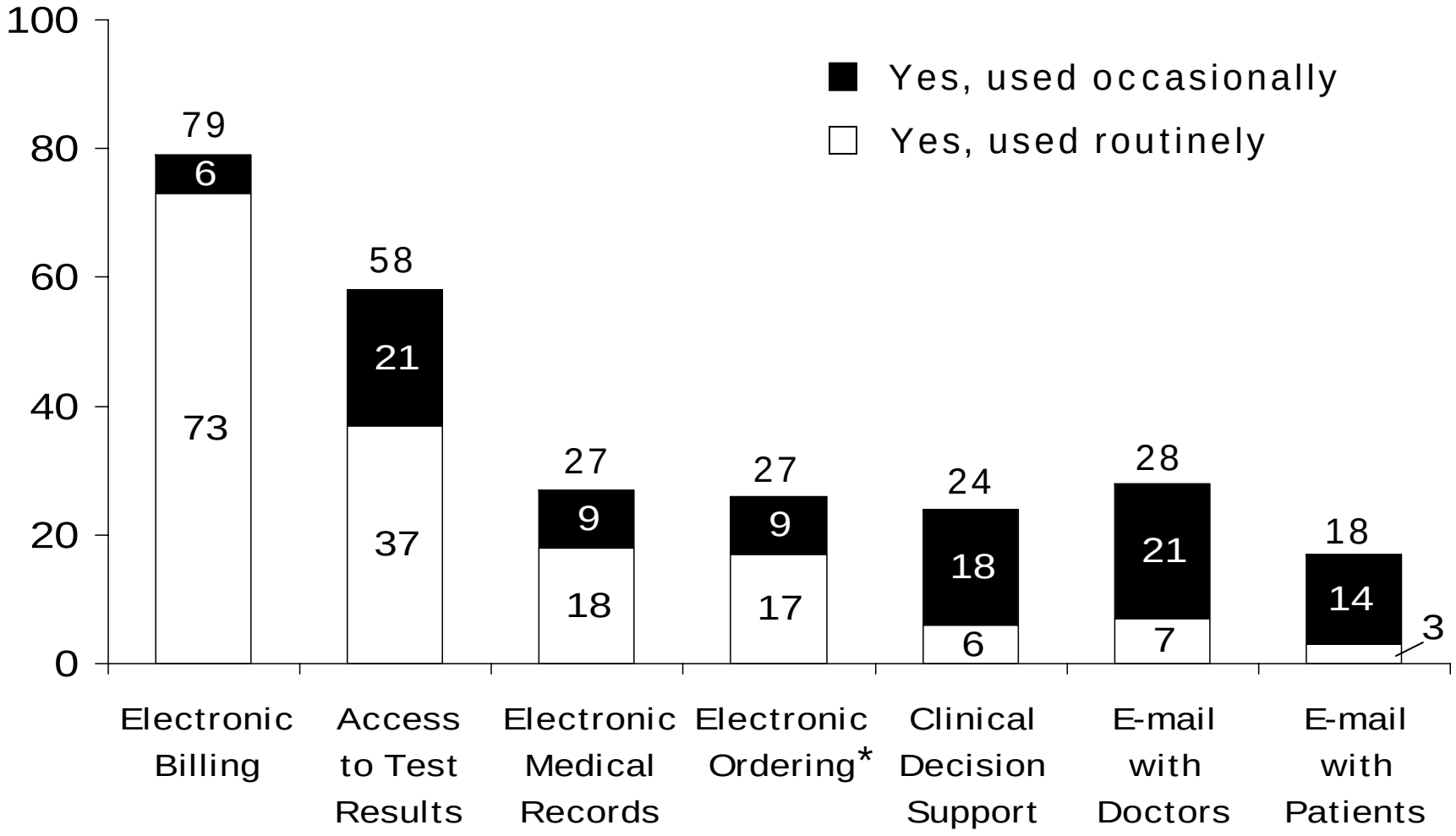
Chapter I

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

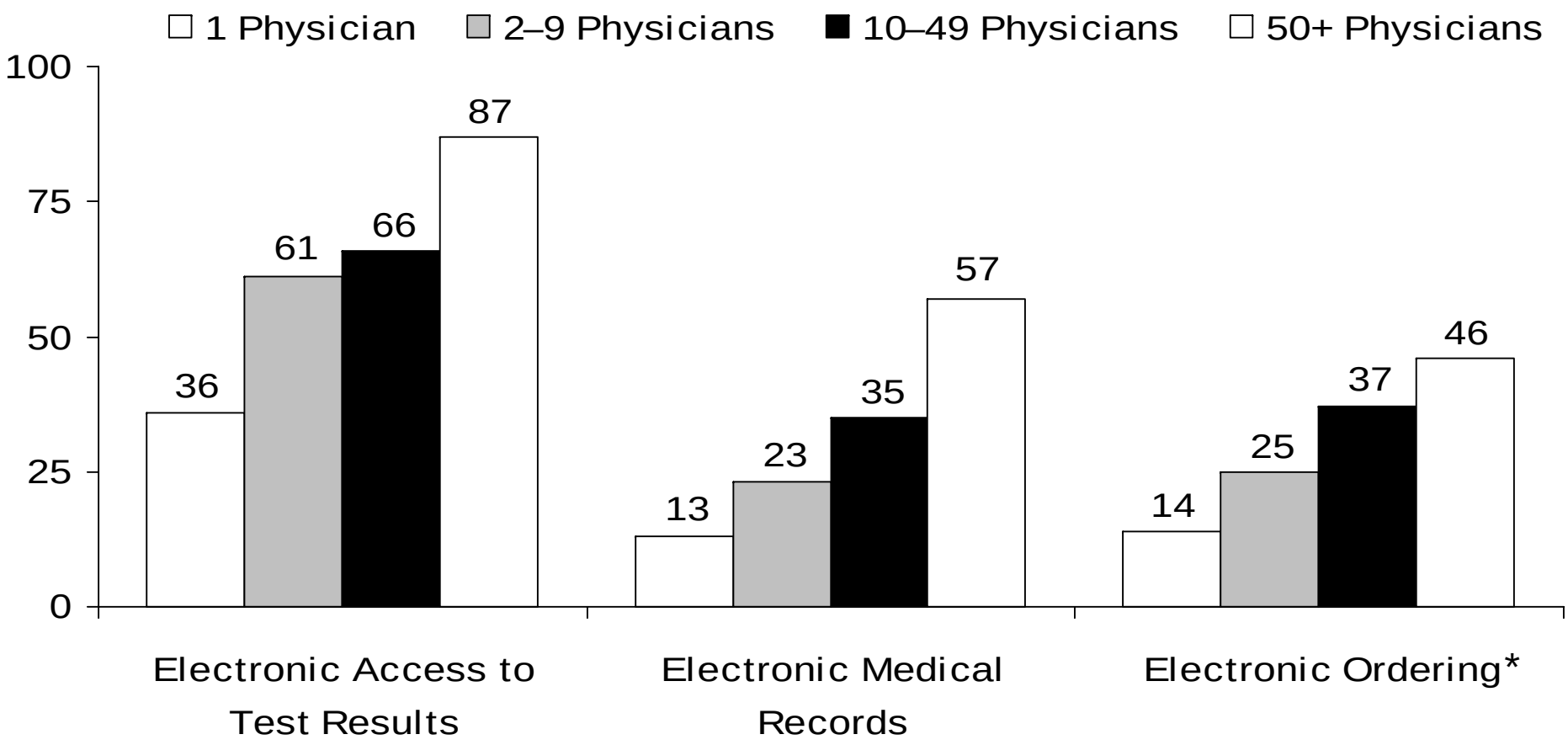


* Electronic ordering of tests, procedures, or drugs.

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

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

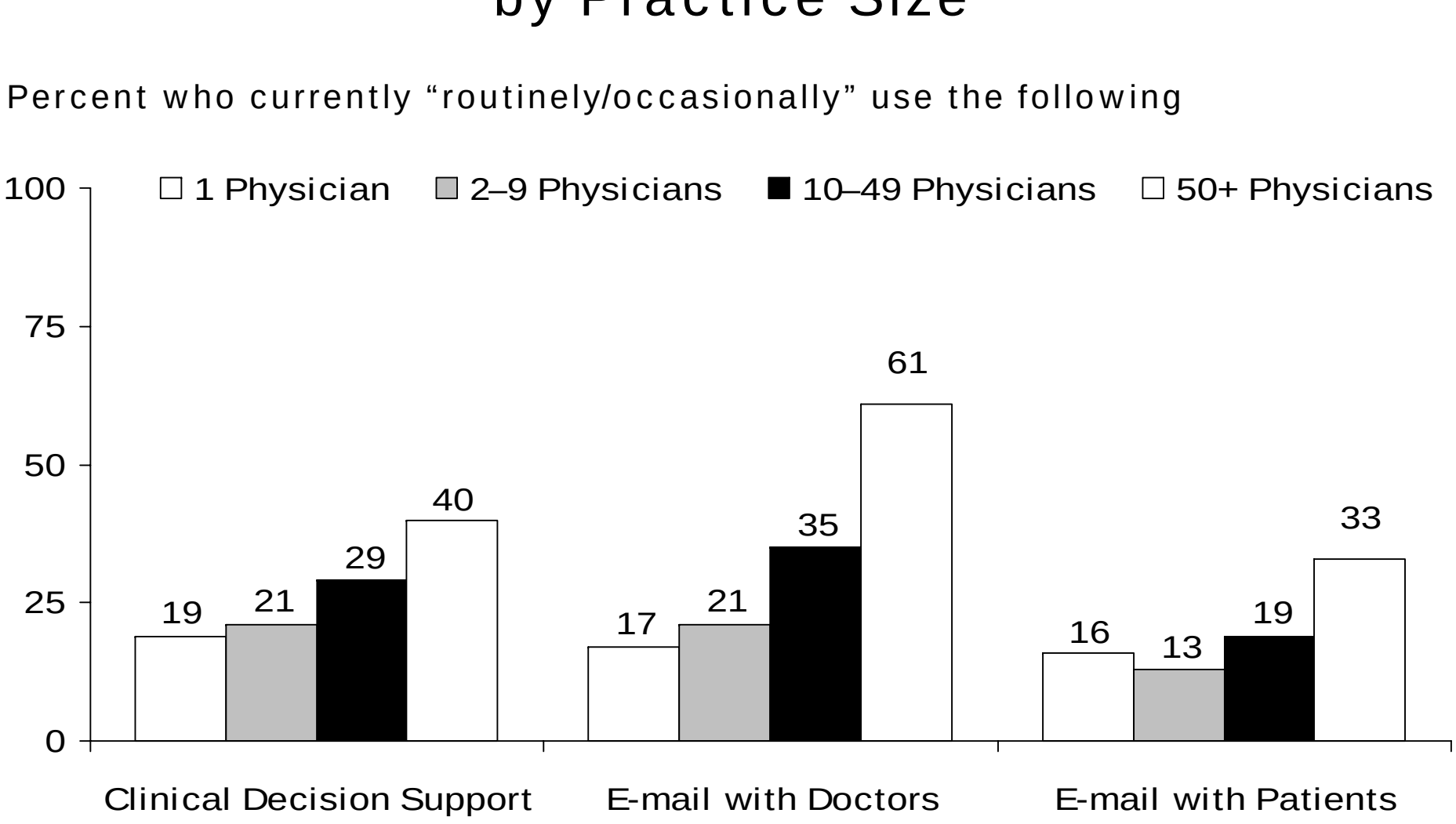
Percent who currently "routinely/occasionally" use the following



* Electronic ordering of tests, procedures, or drugs.

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

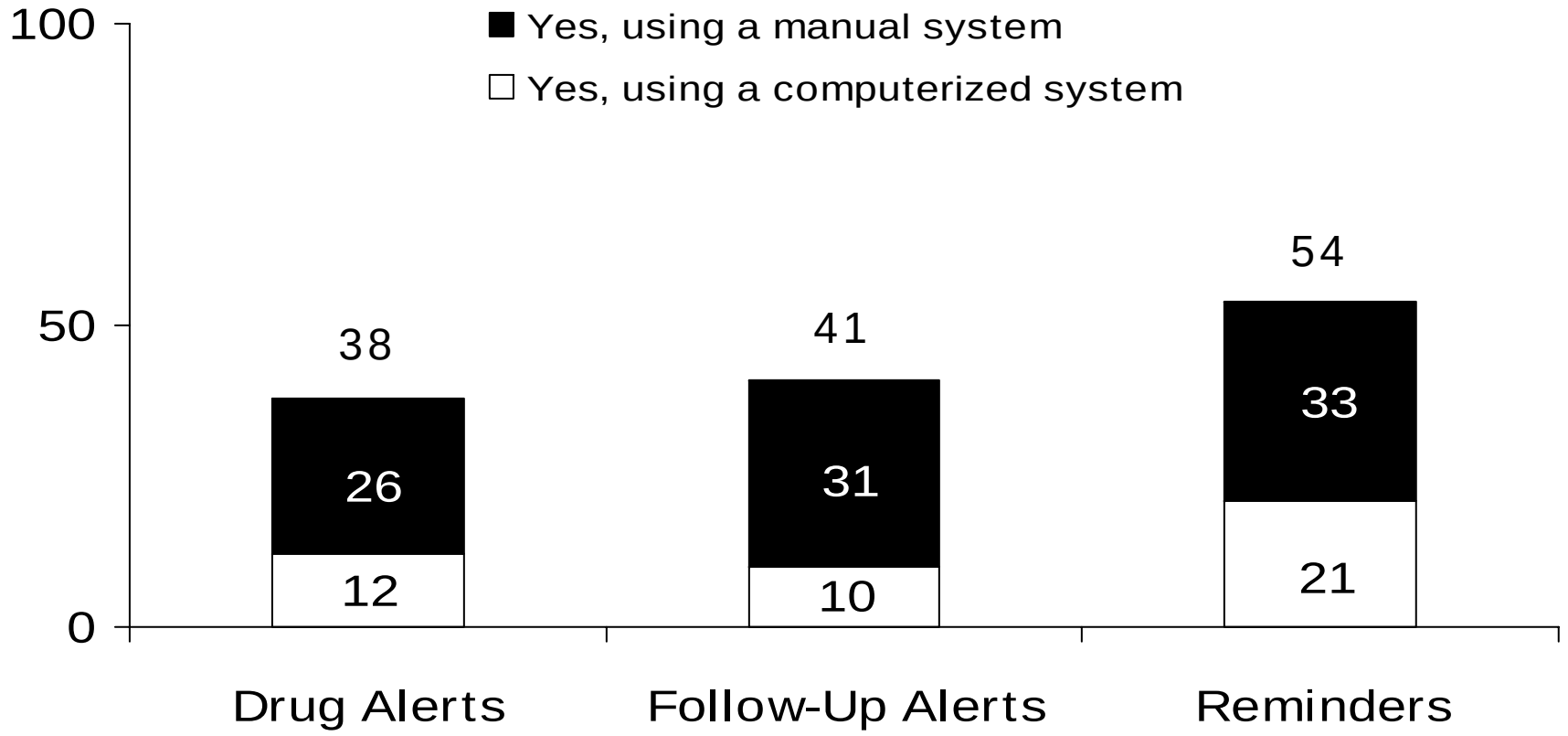
Chart I-3. Use of Clinical Decision Support, E-mail with Doctors, and E-mail with Patients, by Practice Size



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

Chart I-4. Use of Reminders or Alerts

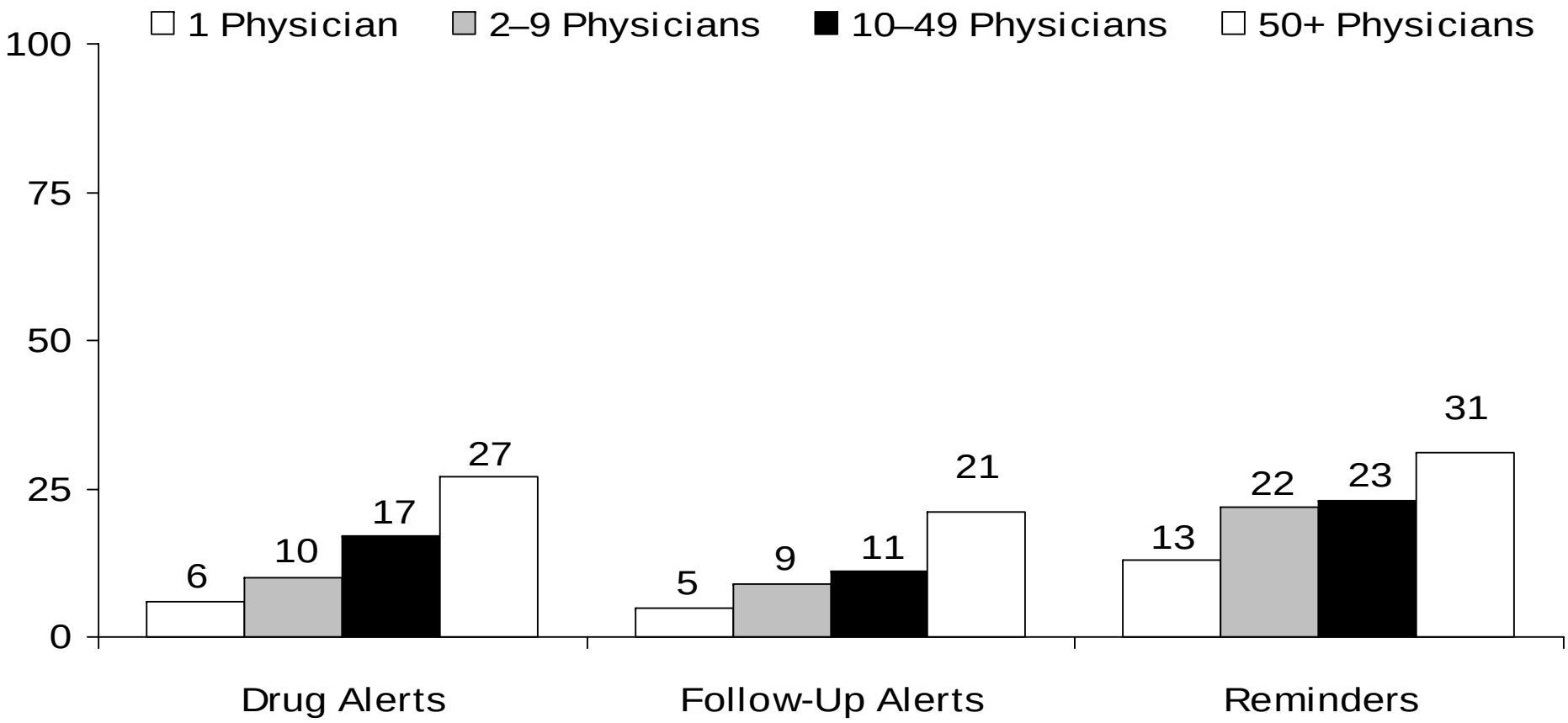
Percent indicating following tasks currently performed in their office practice



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

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

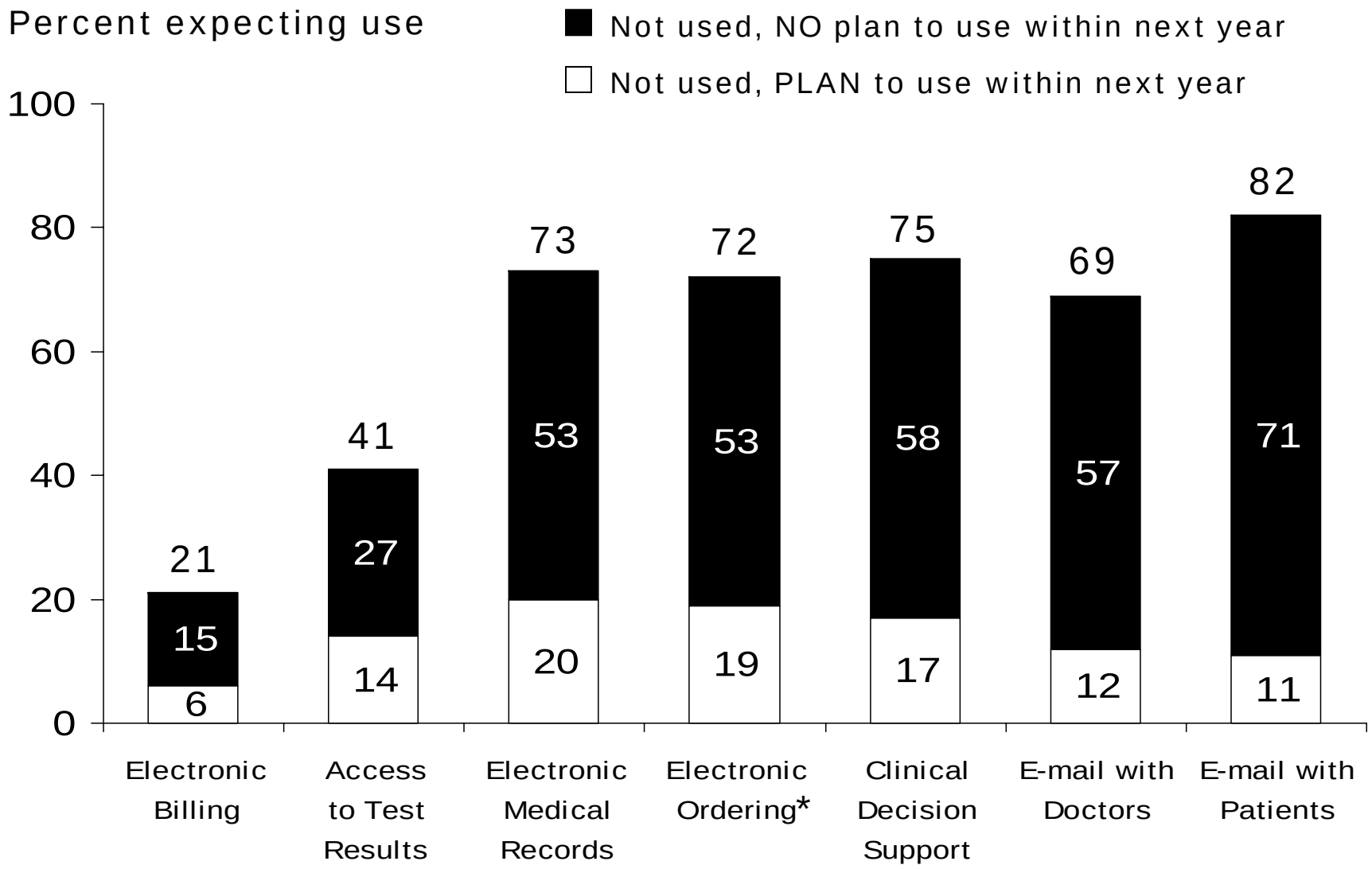
Percent who currently use a "computerized system" for the following



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

Future Use of IT

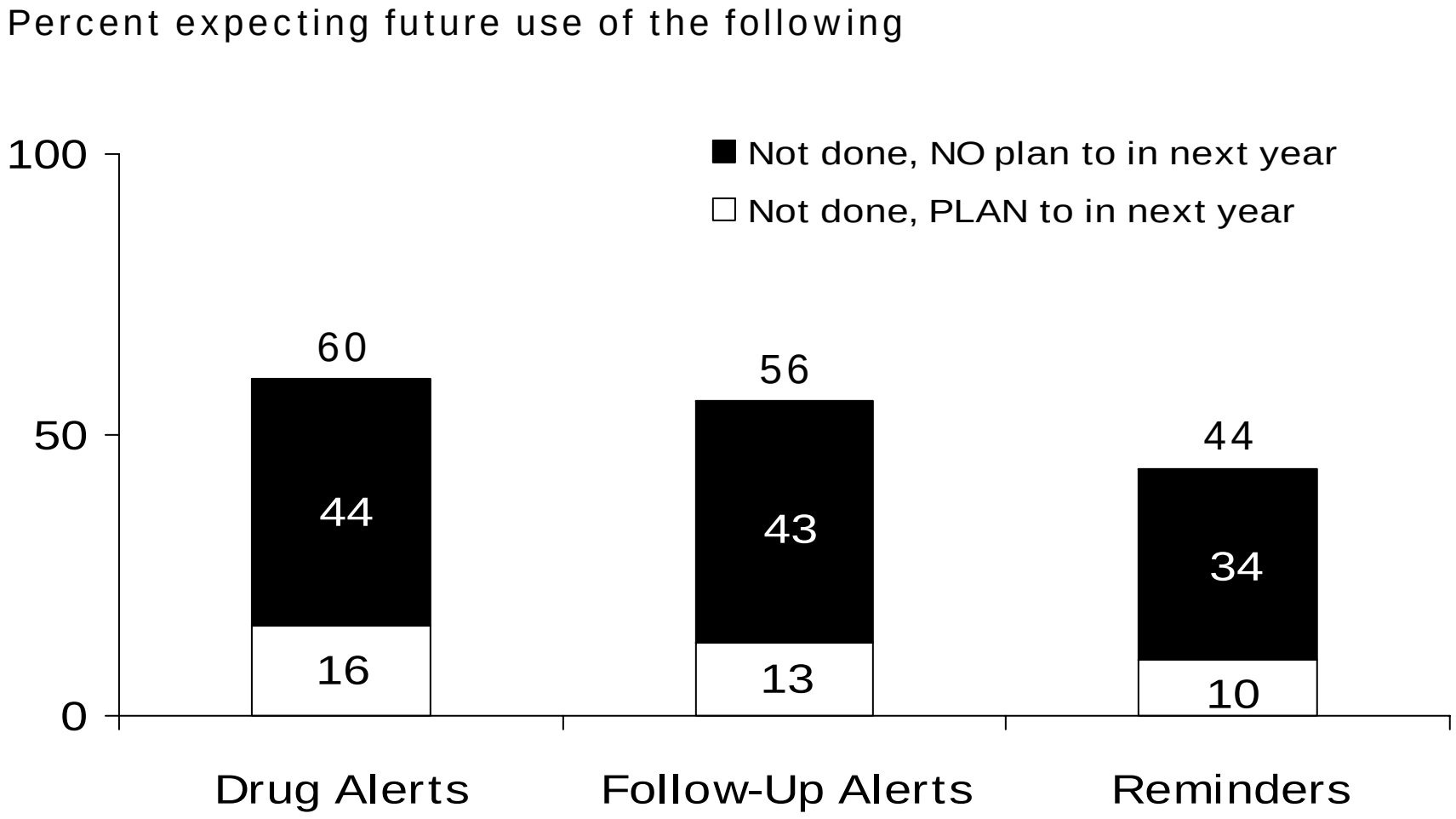
Chart I-6. Planned Future Use of IT



* Electronic ordering of tests, procedures, or drugs.

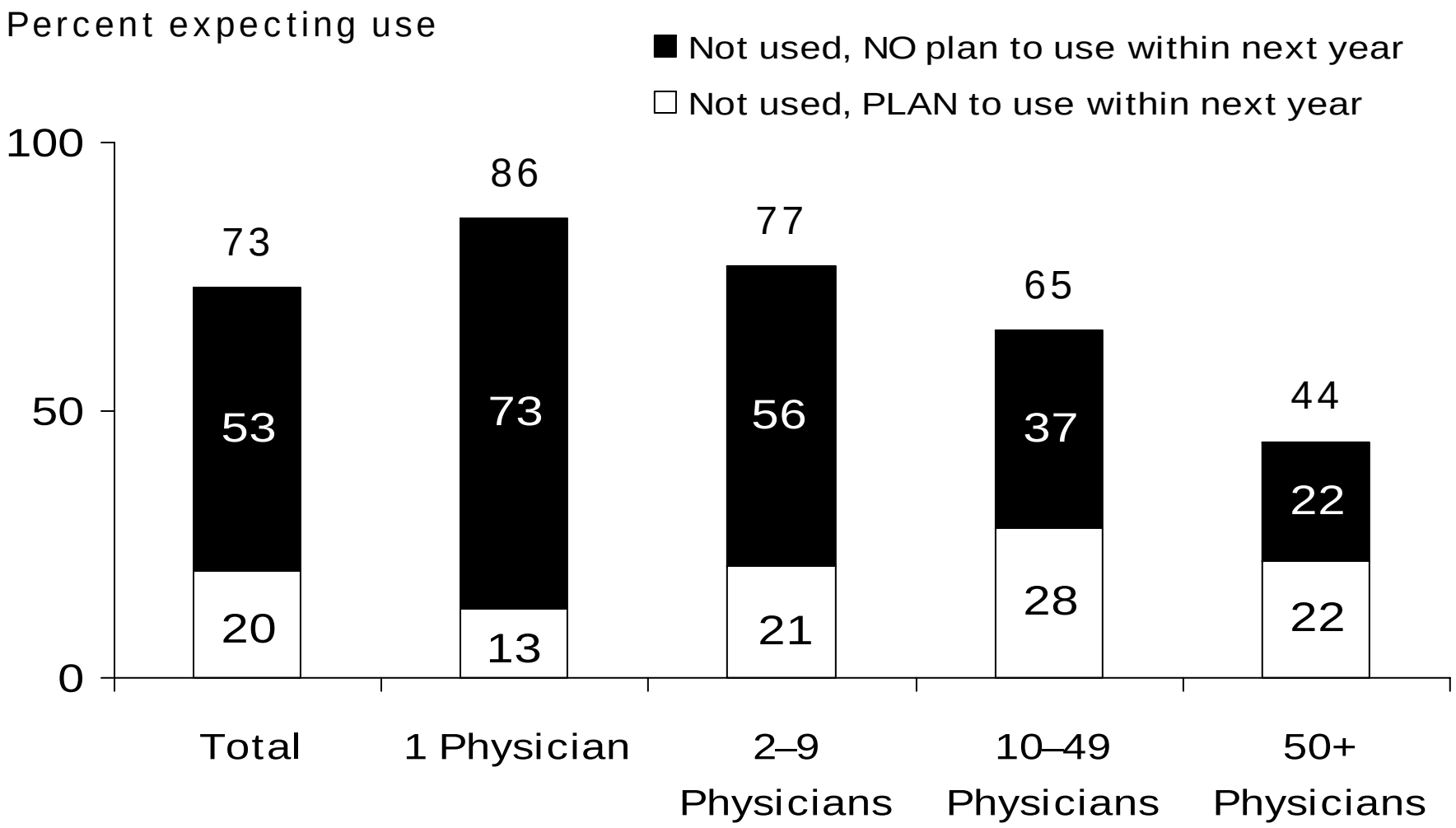
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

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



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

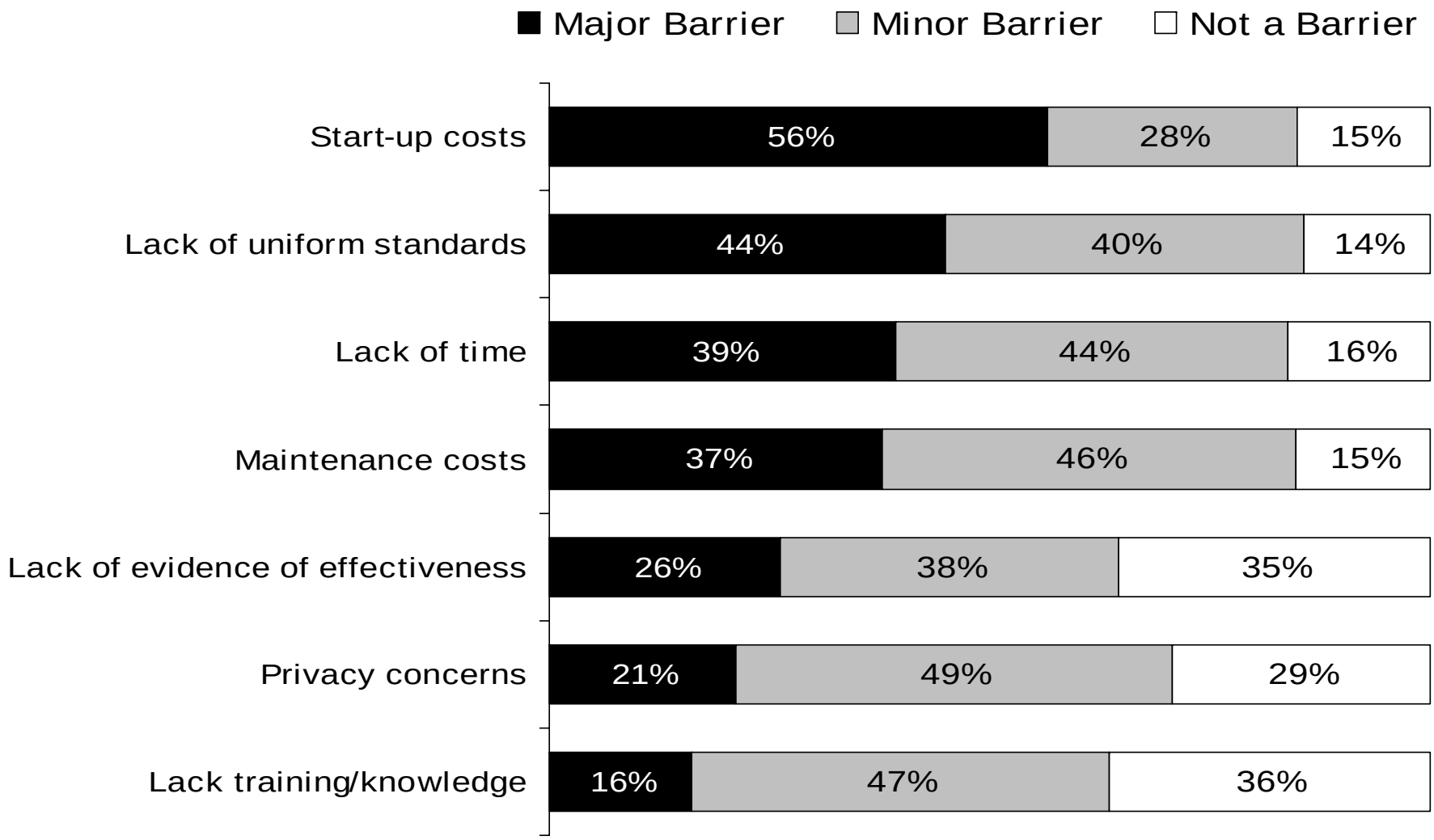
Chart I-8. Planned Future Use of Electronic Medical Records, by Practice Size



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

Perceived Barriers to IT Adoption

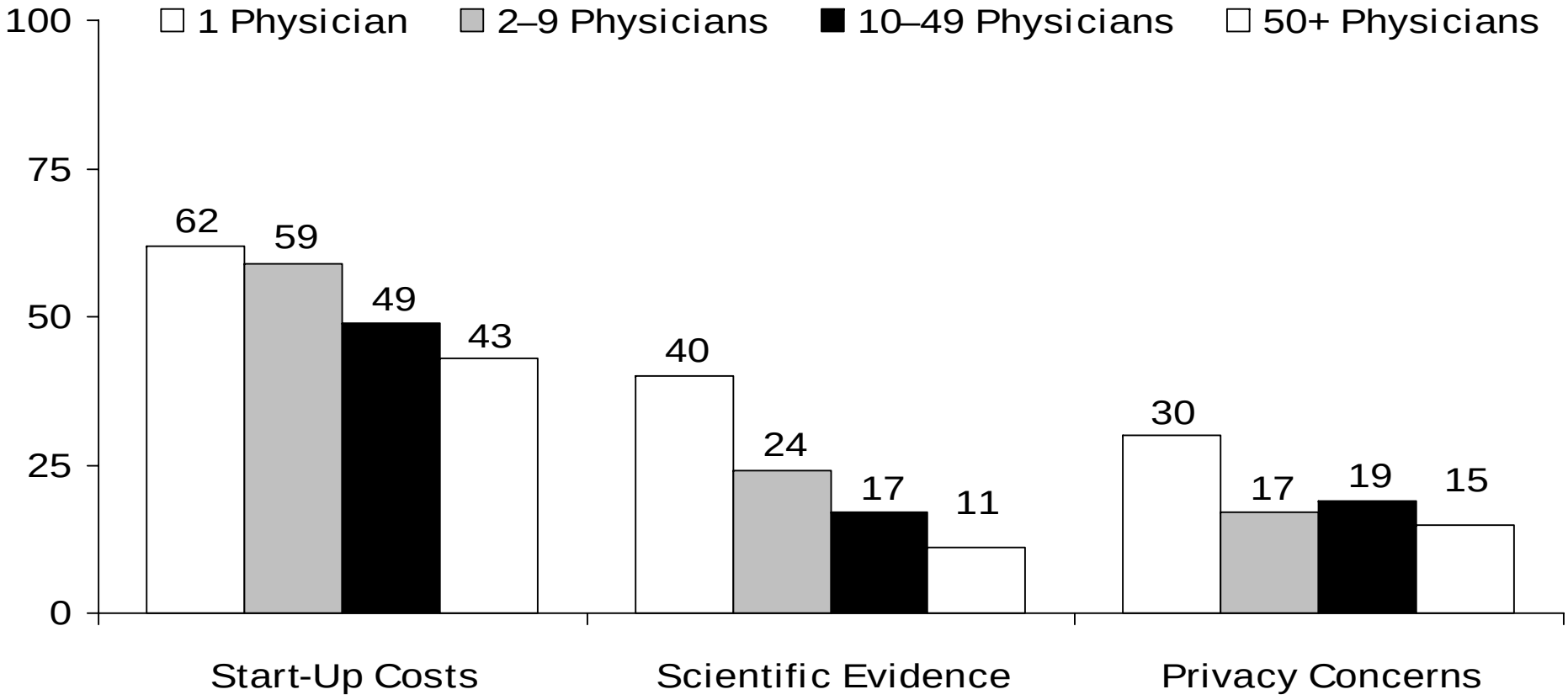
Chart I-9. Barriers to Adoption



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

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



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

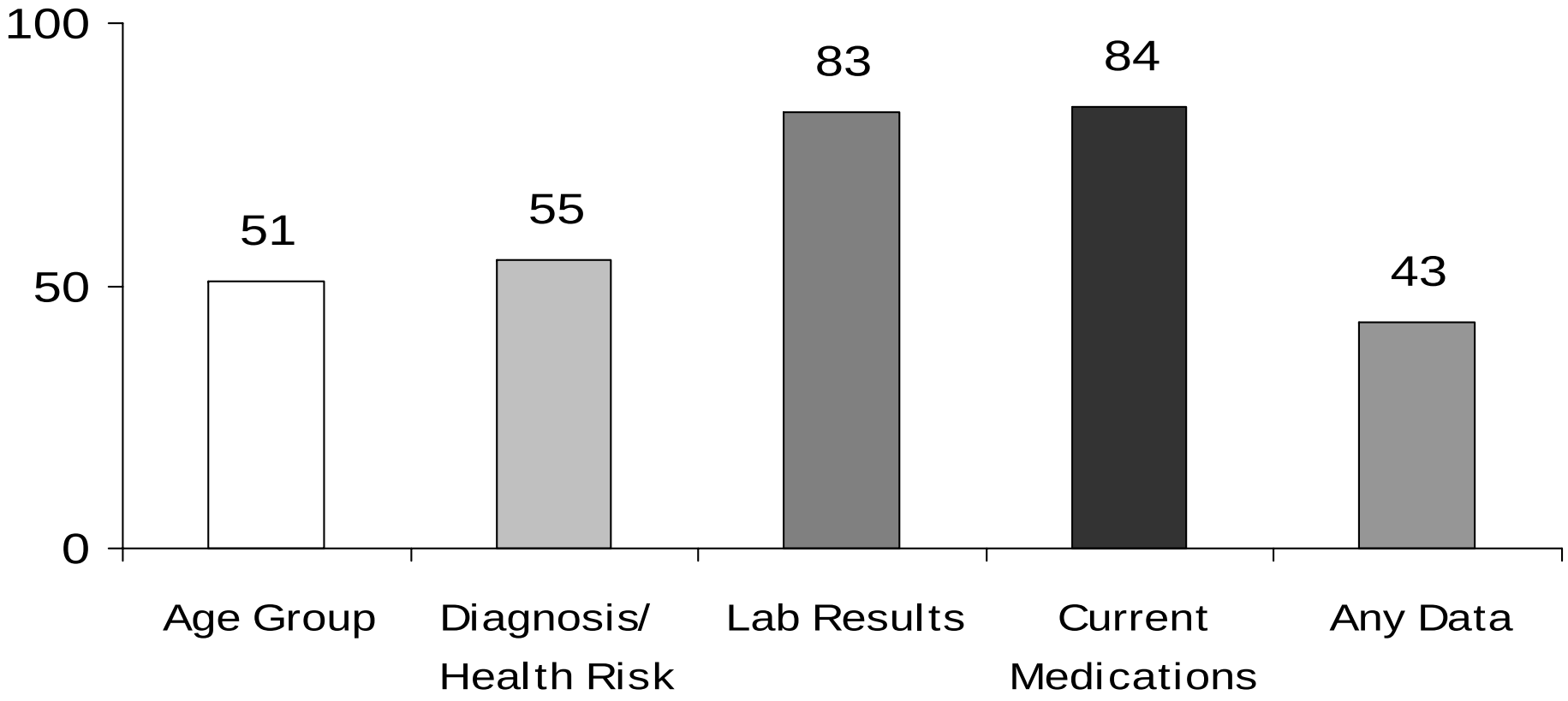
Chapter II

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

Access to Patient Panel Data

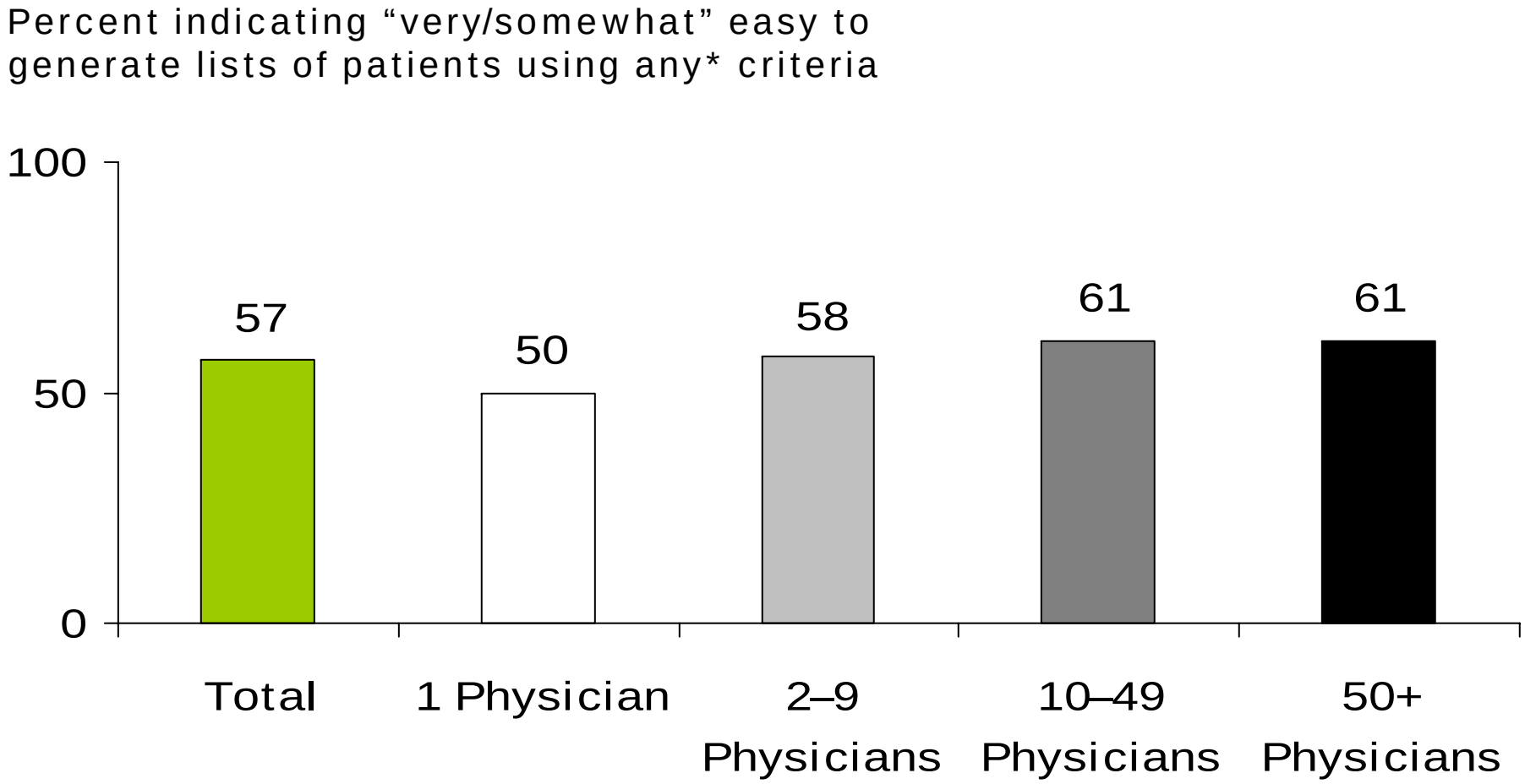
Chart II-1. Physicians' Access to Patient Panel Data

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



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

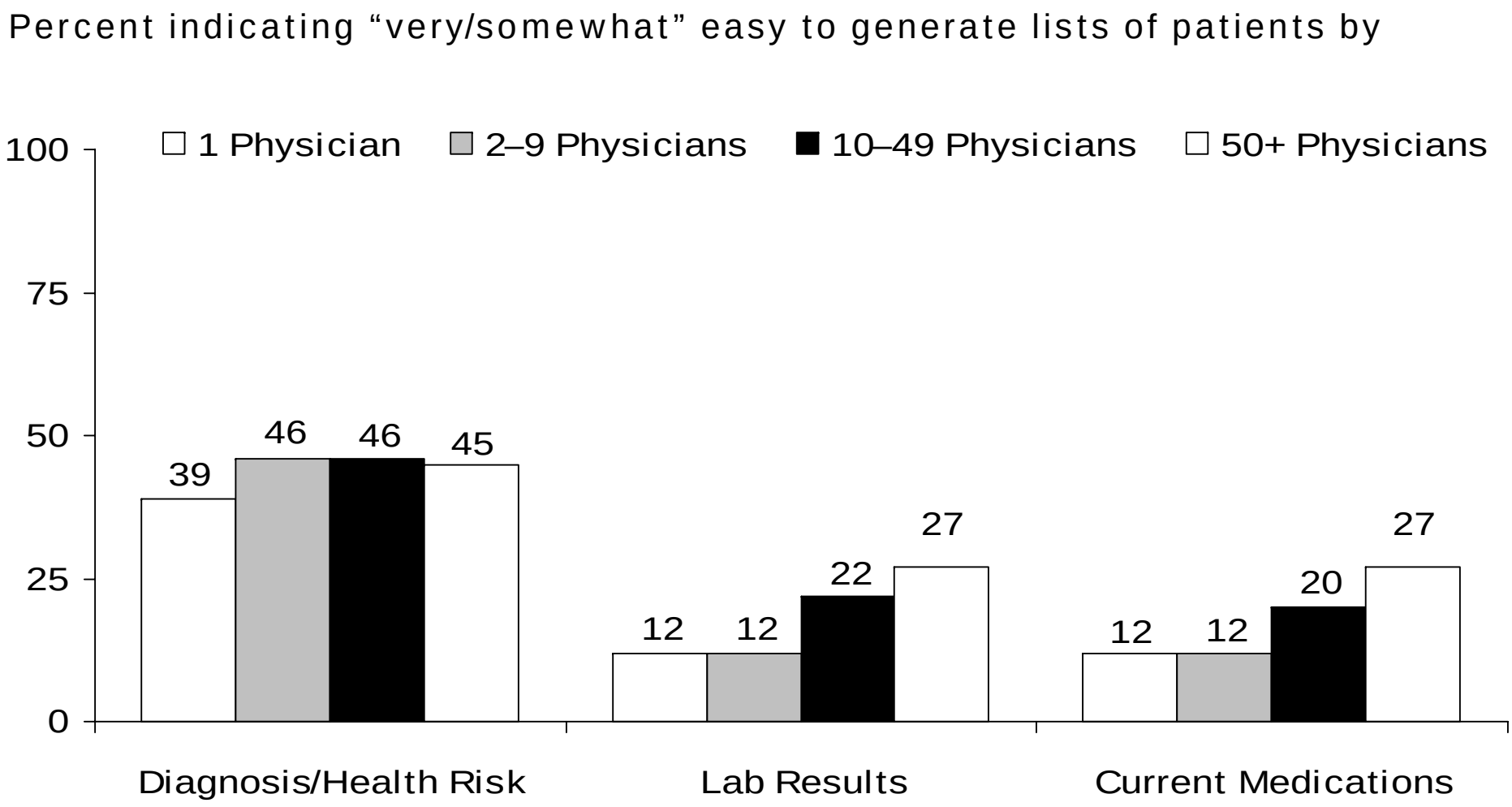
Chart II-2. Physicians' Access to Any Patient Panel Data, by Practice Size



* 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.

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

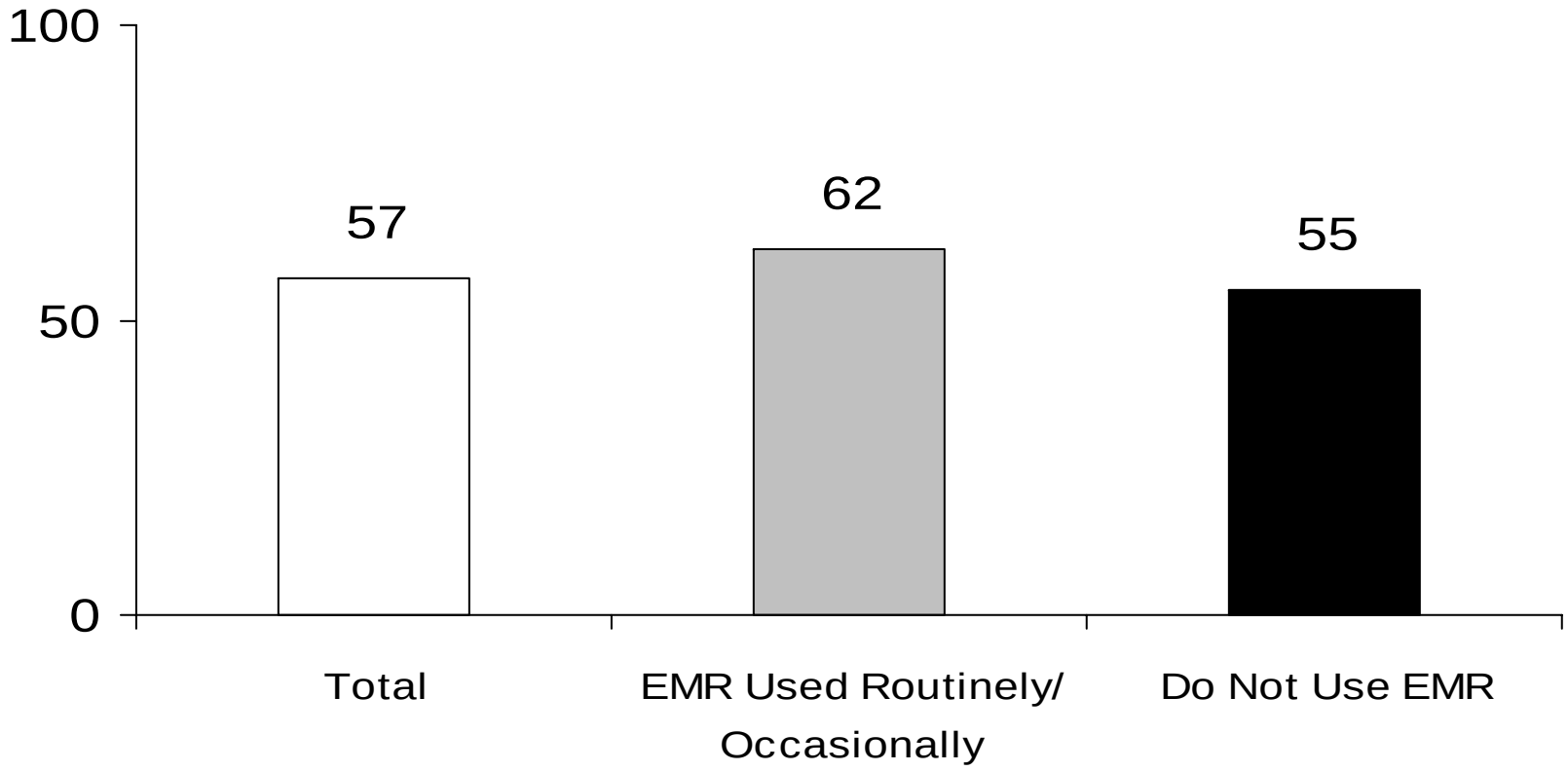
Chart II-3. Physicians' Access to Patient Panel Data, by Practice Size



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

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

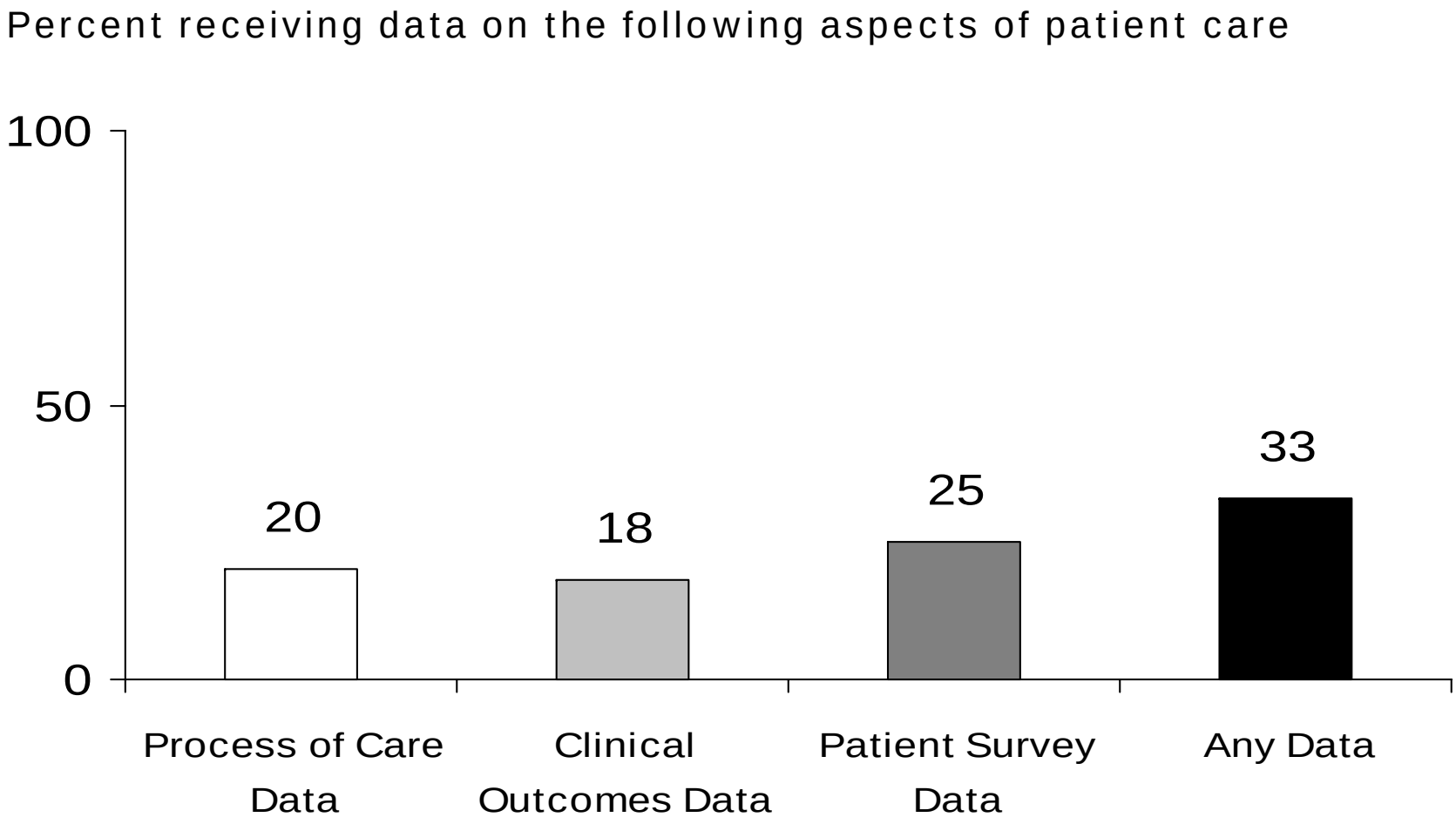


* Indicates "very/somewhat" easy to generate lists of patients using any of the following criteria: age group, diagnosis/health risk, lab results, or current medications.

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

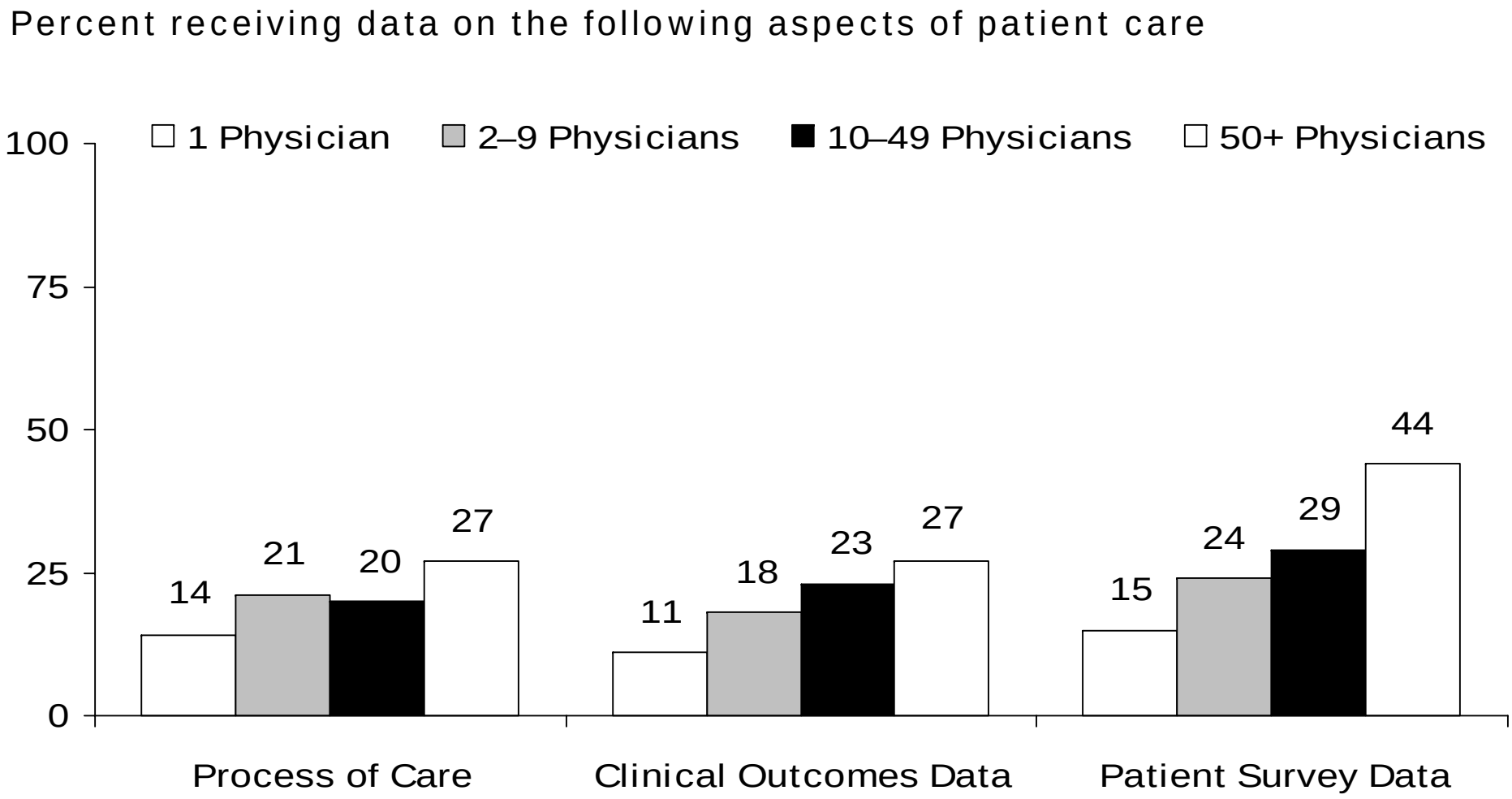
Access to Quality-of-Care or Performance Data

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



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

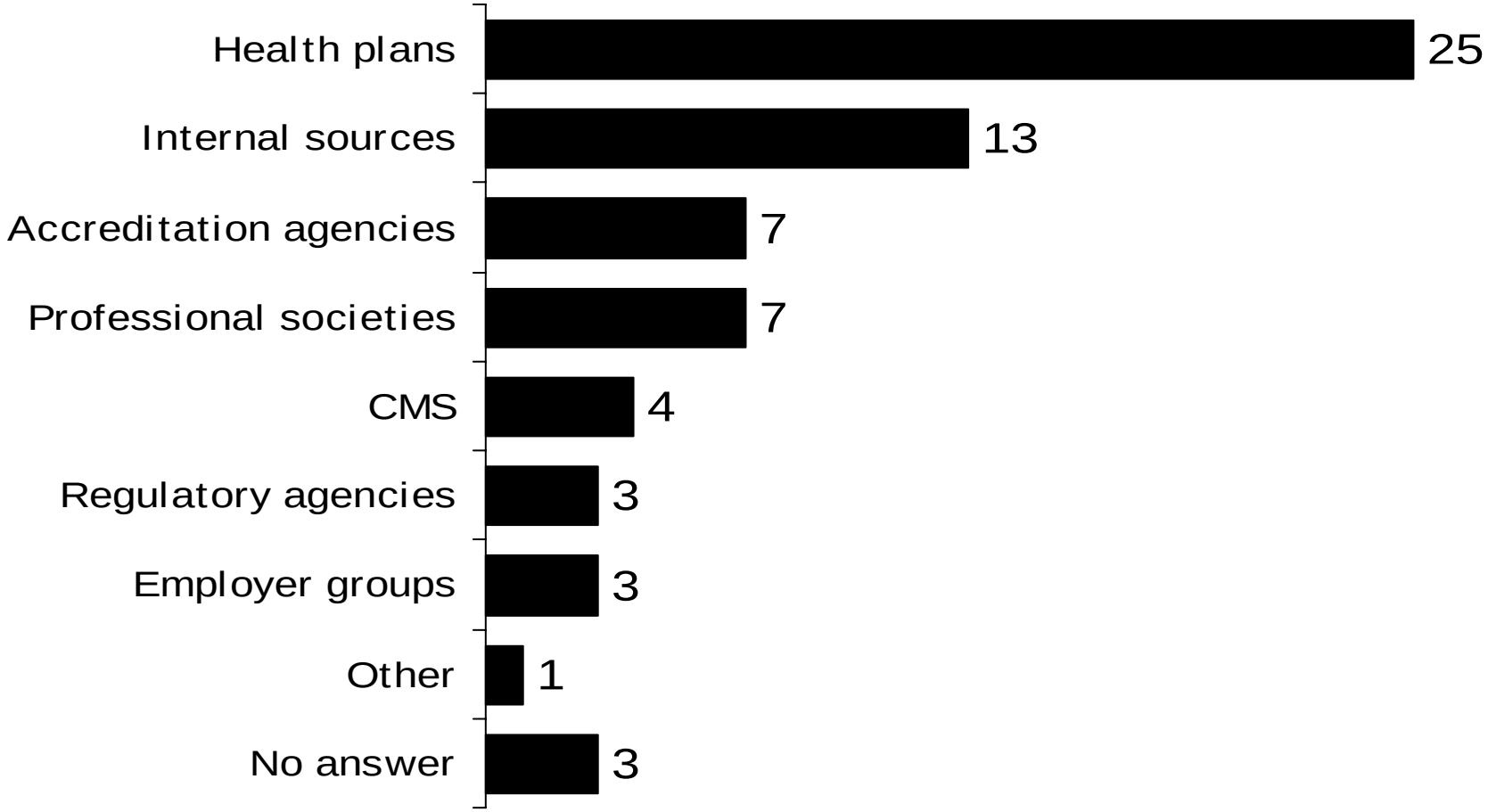
Chart II-6. Physicians' Access to Quality-of-Care Data, by Practice Size



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

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

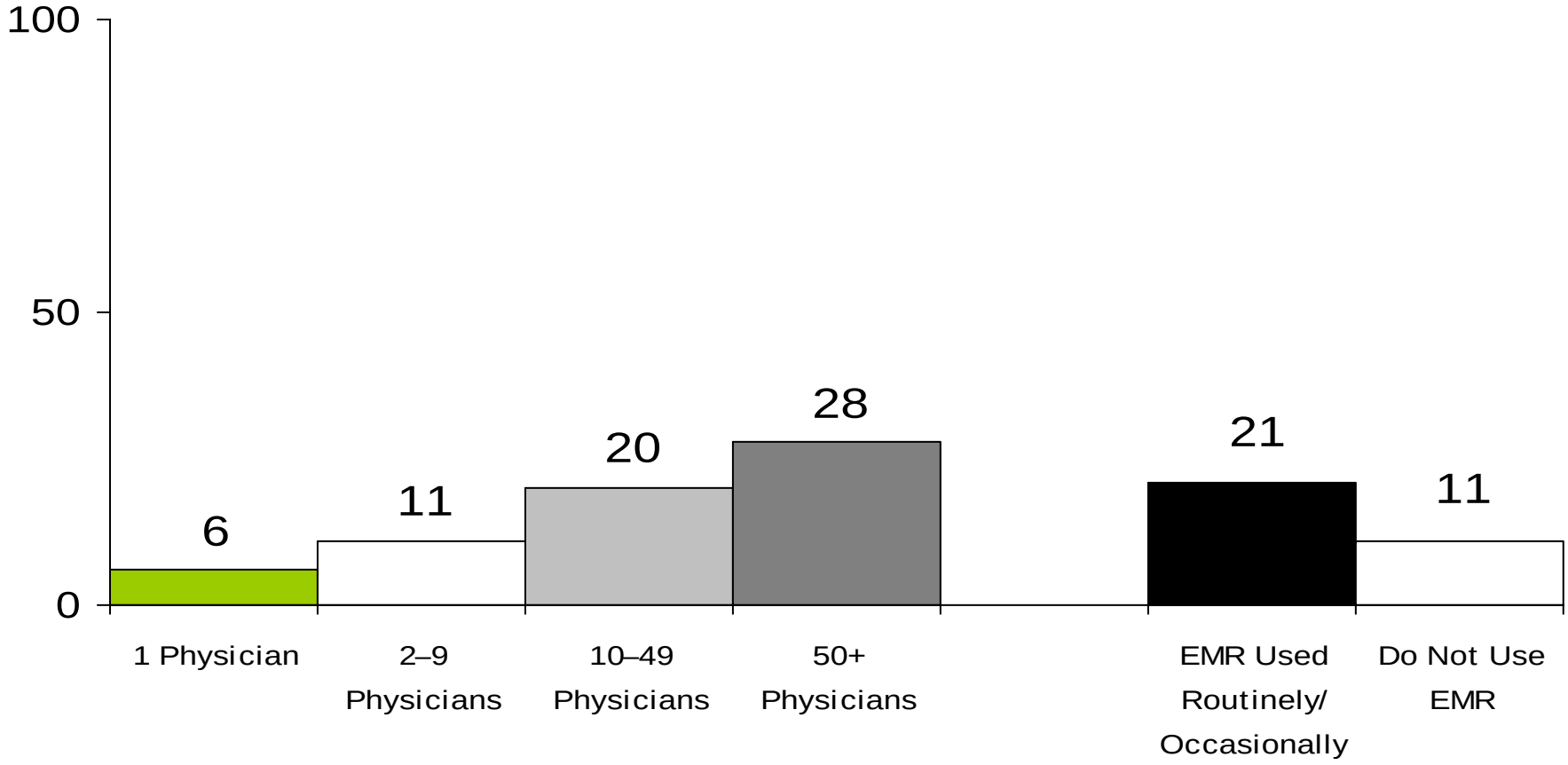
Percent of physicians indicating each as a source of quality of care data



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

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

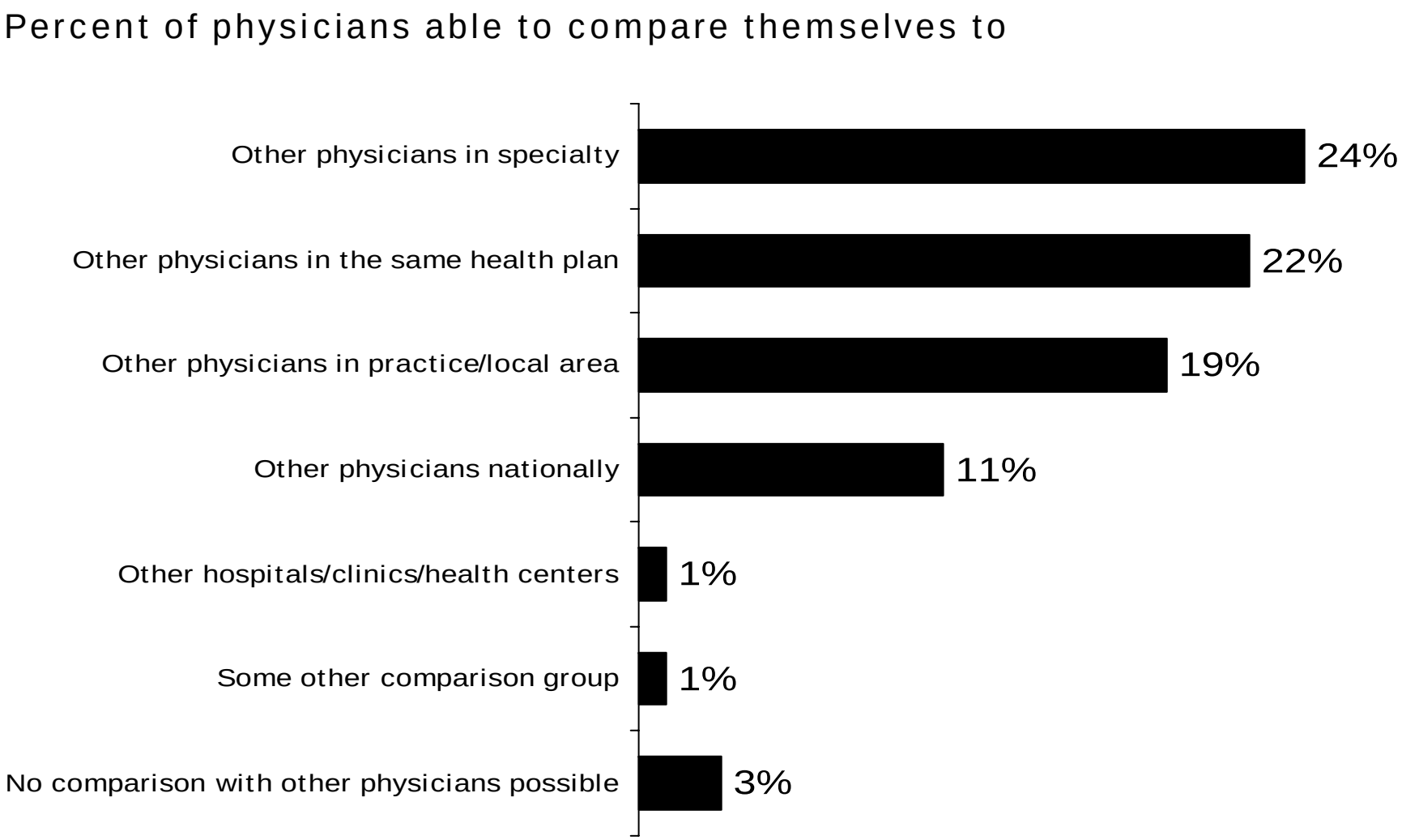
Percent indicating they receive quality-of-care data from internal sources



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

Ability to Benchmark

Chart II-9. Physicians' Ability to Compare Performance



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

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%

* 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?"

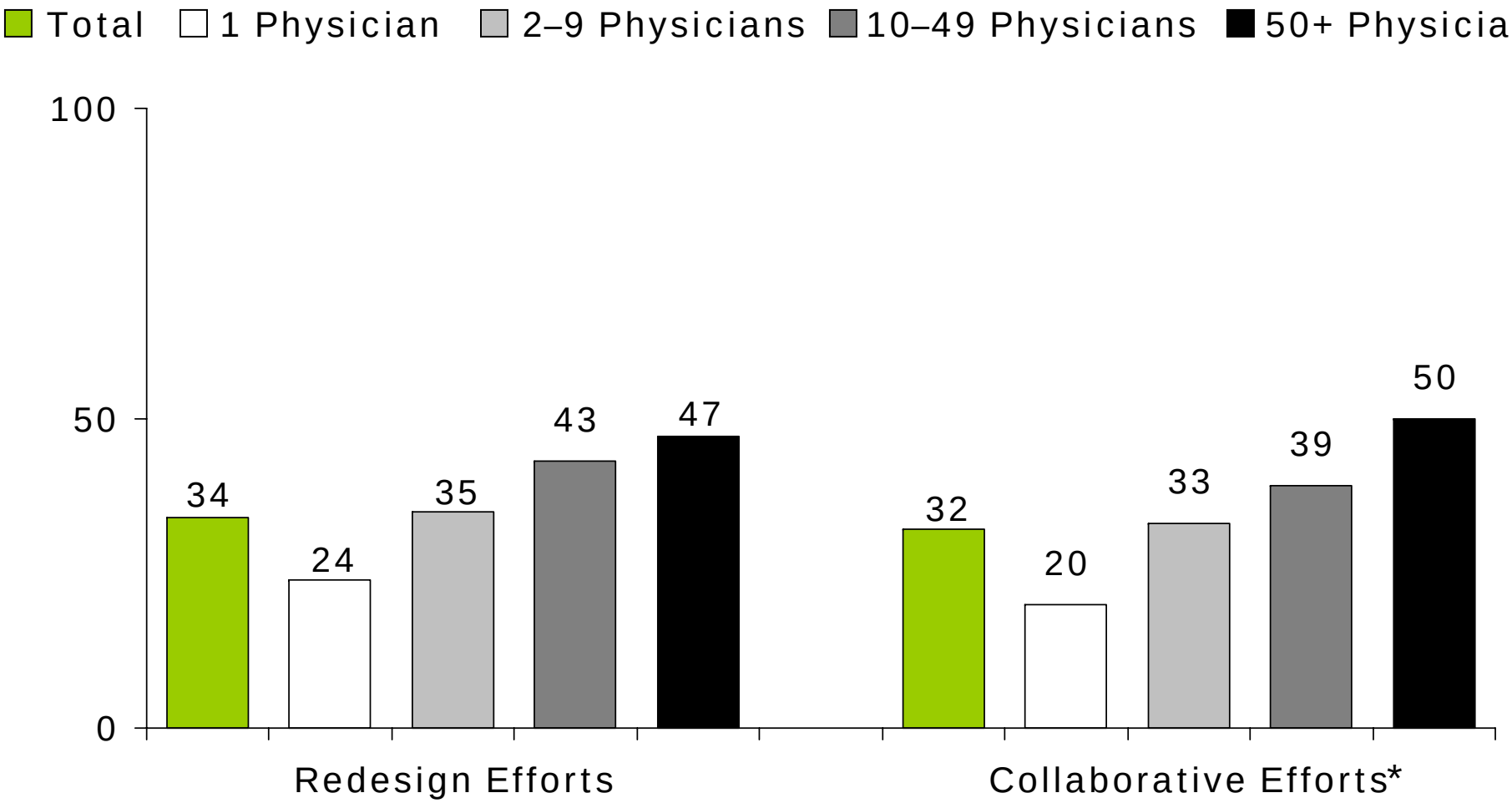
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

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

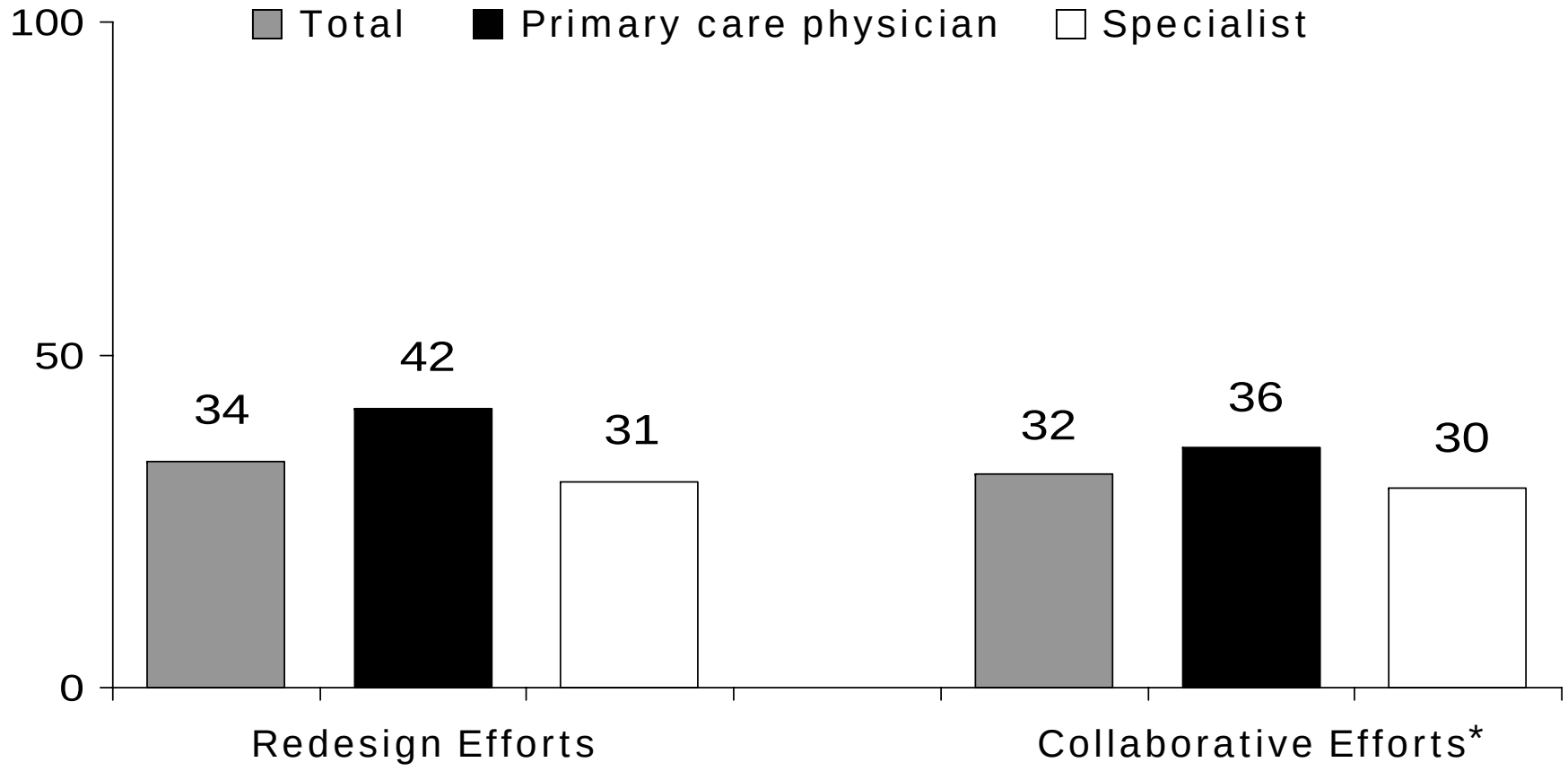


* Indicates physicians who responded yes to participating in local, regional, or national collaboratives in the past 2 years.

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

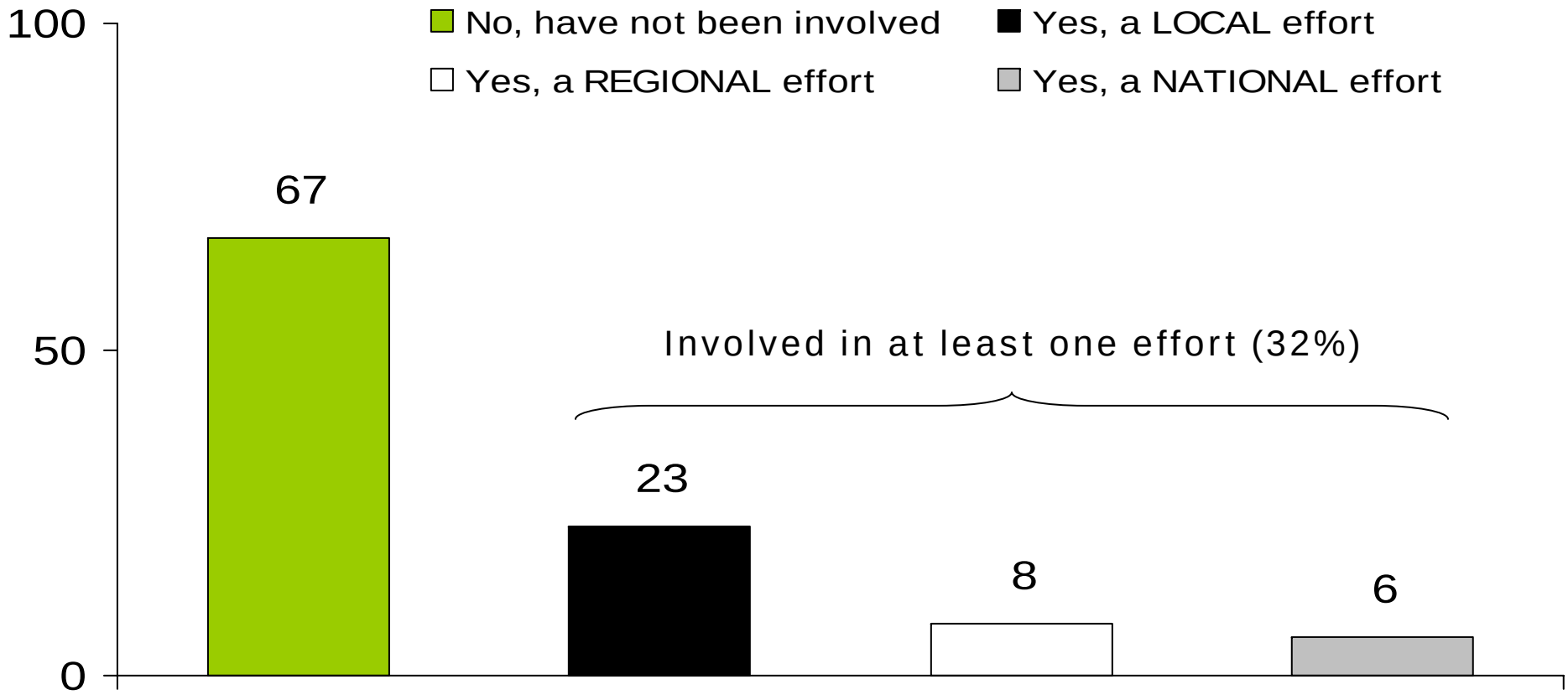
Percent indicating involvement in redesign and collaborative efforts



* 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*

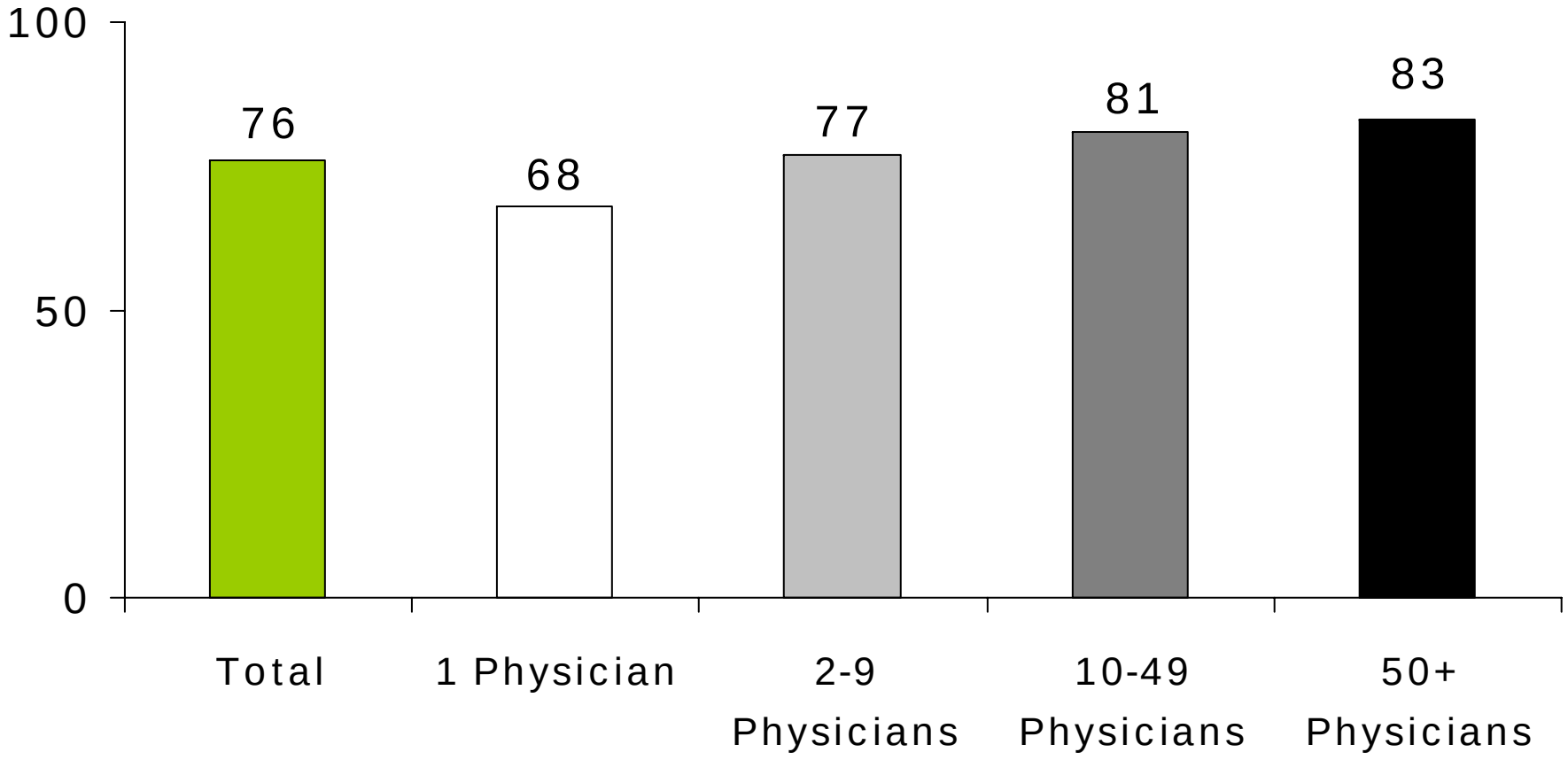


* Multiple answers possible.

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

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



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

Chapter IV

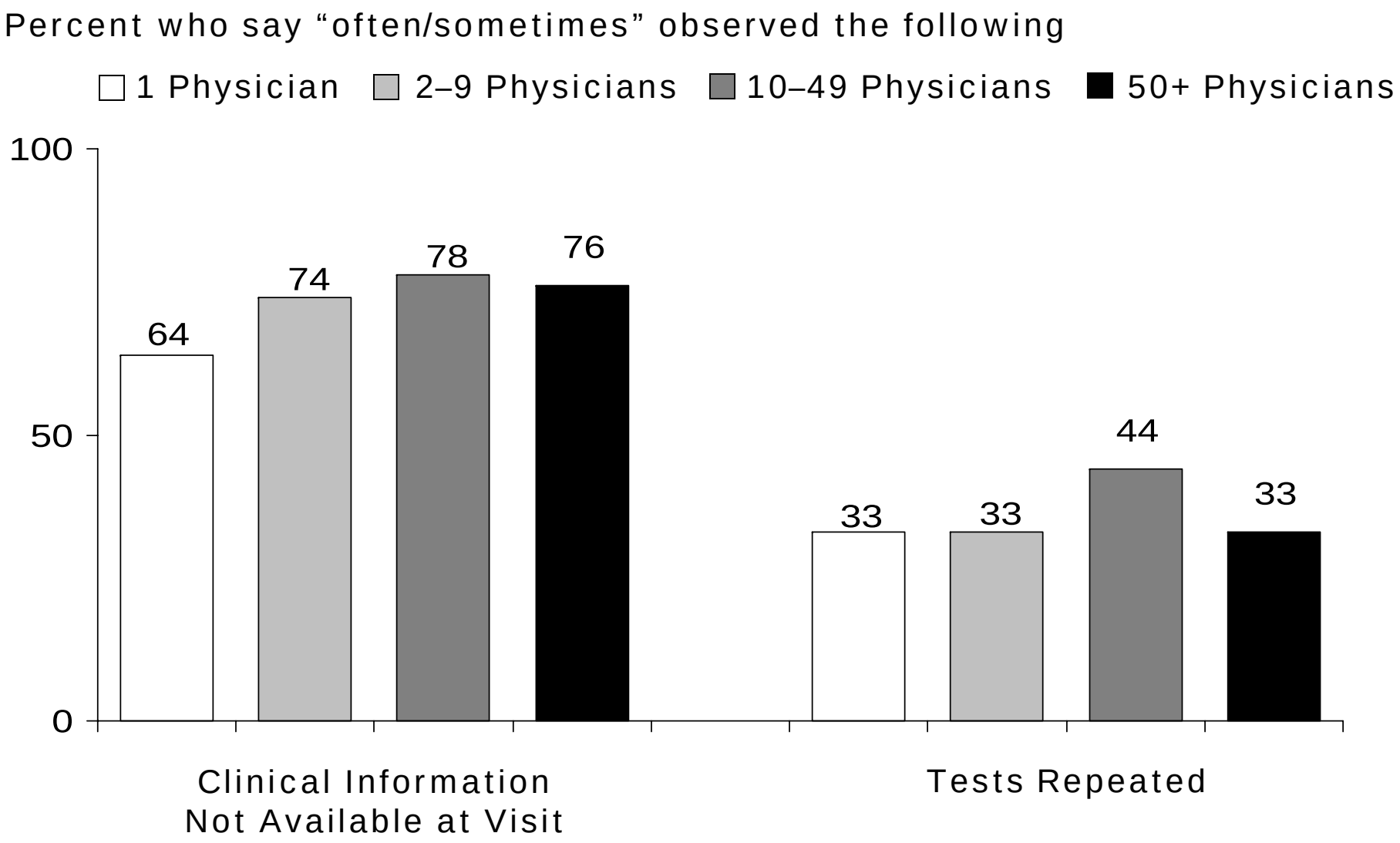
Coordination of Care and Referrals

Chart IV-1. Coordination of Care Problems Physicians Observe

Coordination of care problems	Percent who observed problem sometimes or often in past 12 months
Patient's medical record, test results, or other relevant clinical information were not available at the time of the scheduled visit	72%
Tests or procedures had to be repeated because findings were unavailable or inadequate for interpretation	34%
Patient experienced a problem following discharge from a hospital because physician did not receive needed information from the hospital in a timely manner	26%
Patient's care was compromised because he/she received conflicting information from different doctors or other health professionals	28%
Patient had a positive test result that was not followed-up appropriately	15%
Patient received the wrong drug, wrong dose, or had a preventable drug-drug interaction	11%

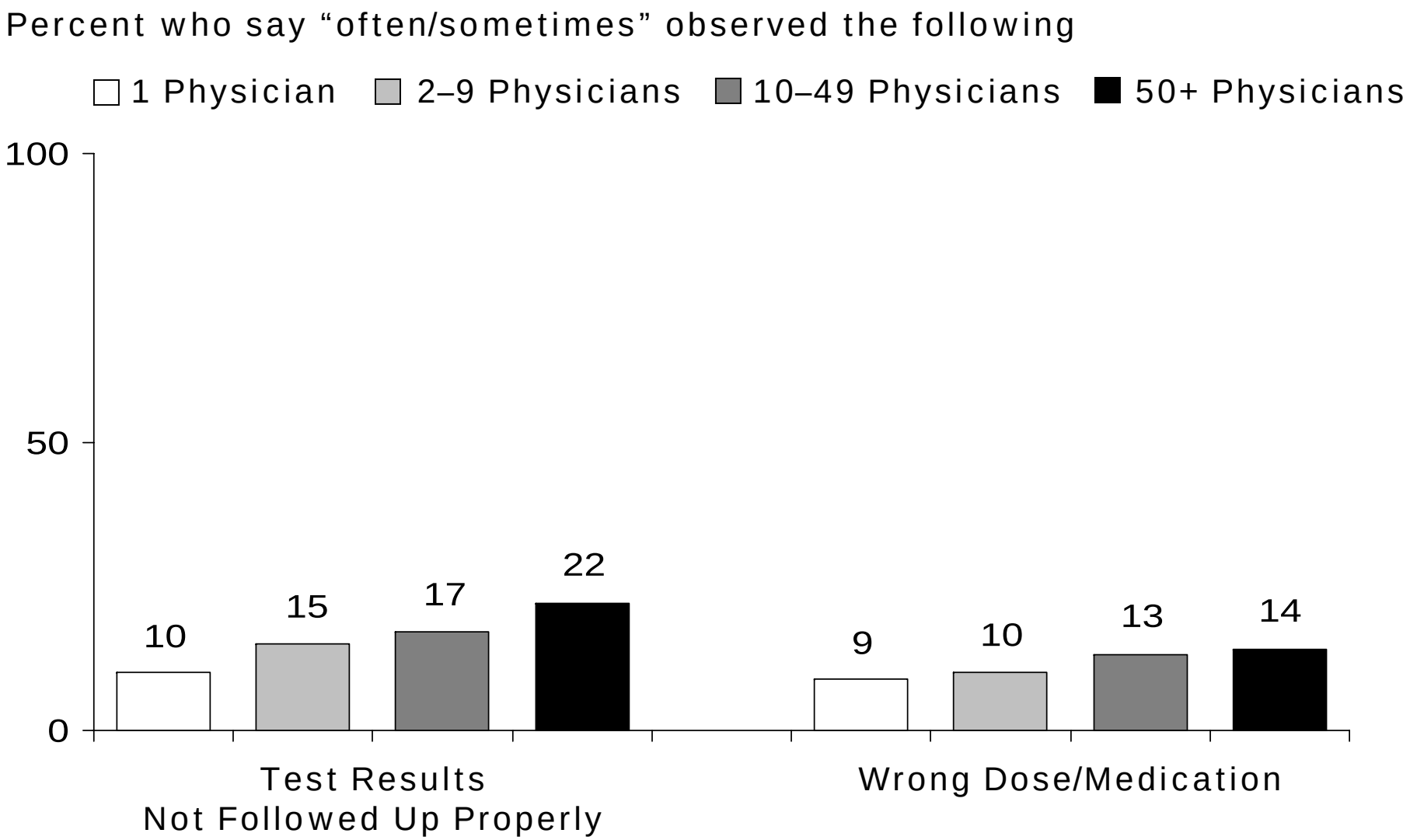
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

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



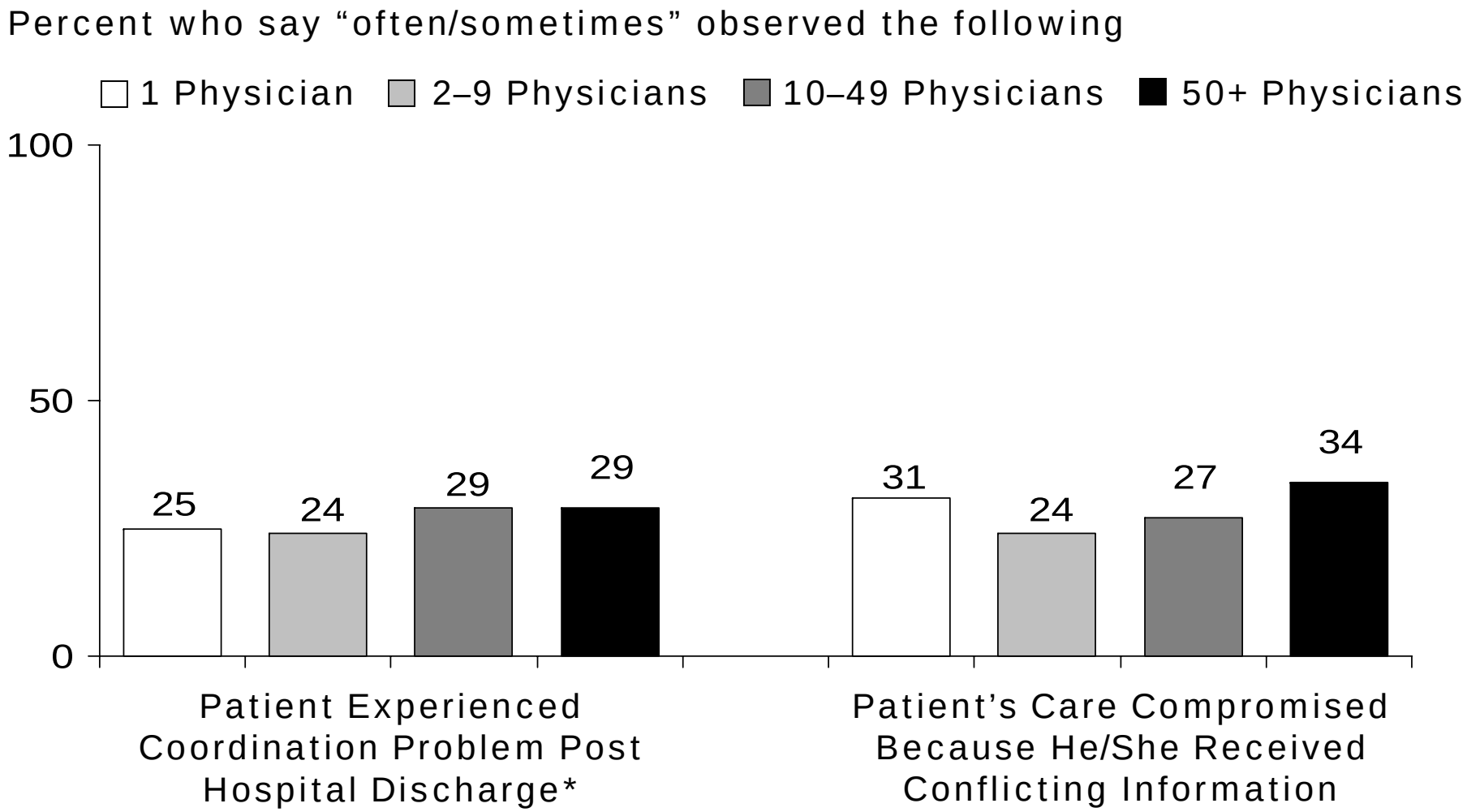
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

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



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

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

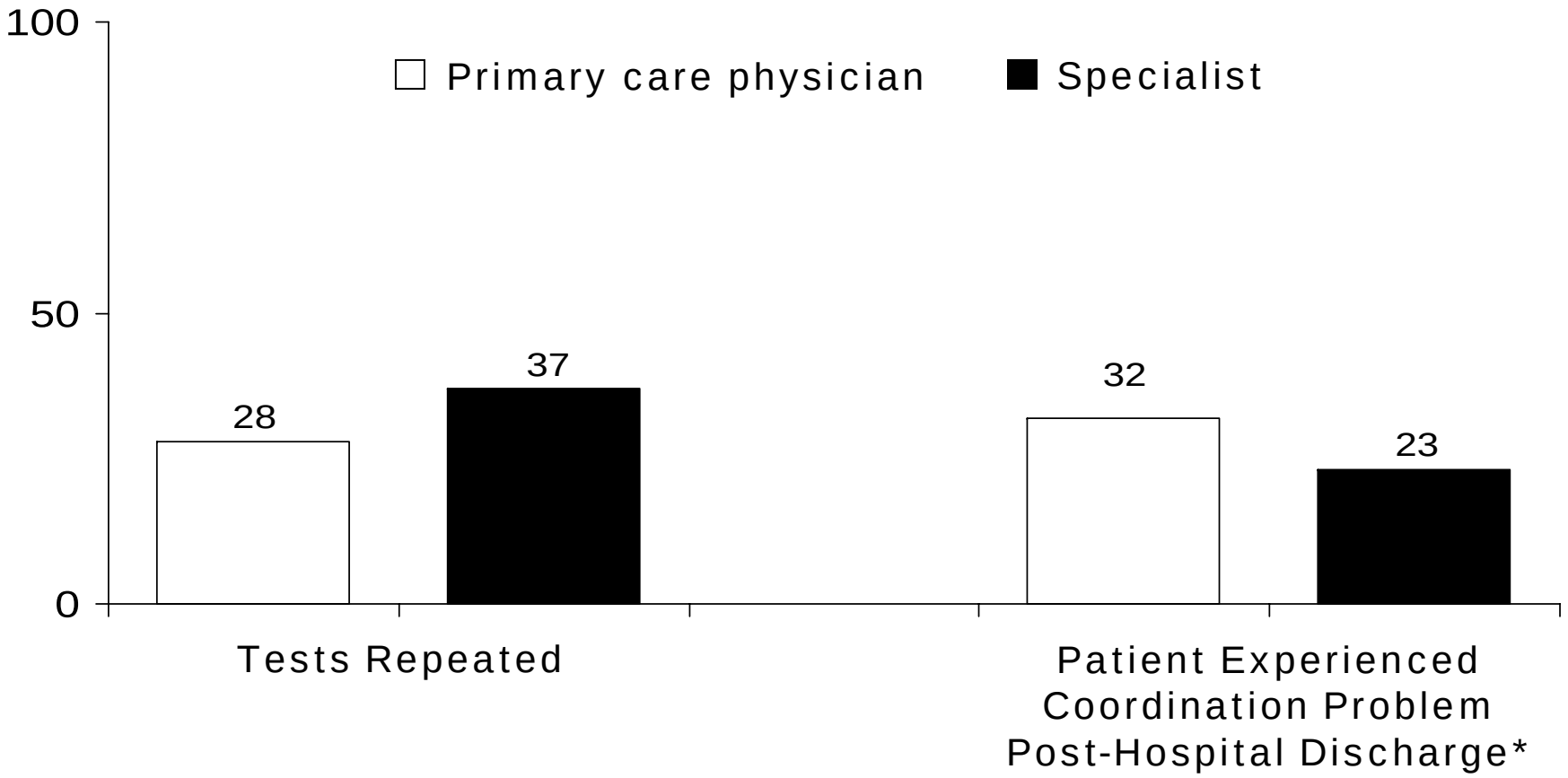


* A patient experienced a problem following discharge from a hospital because his/her physician did not receive needed information from the hospital in a timely manner.

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

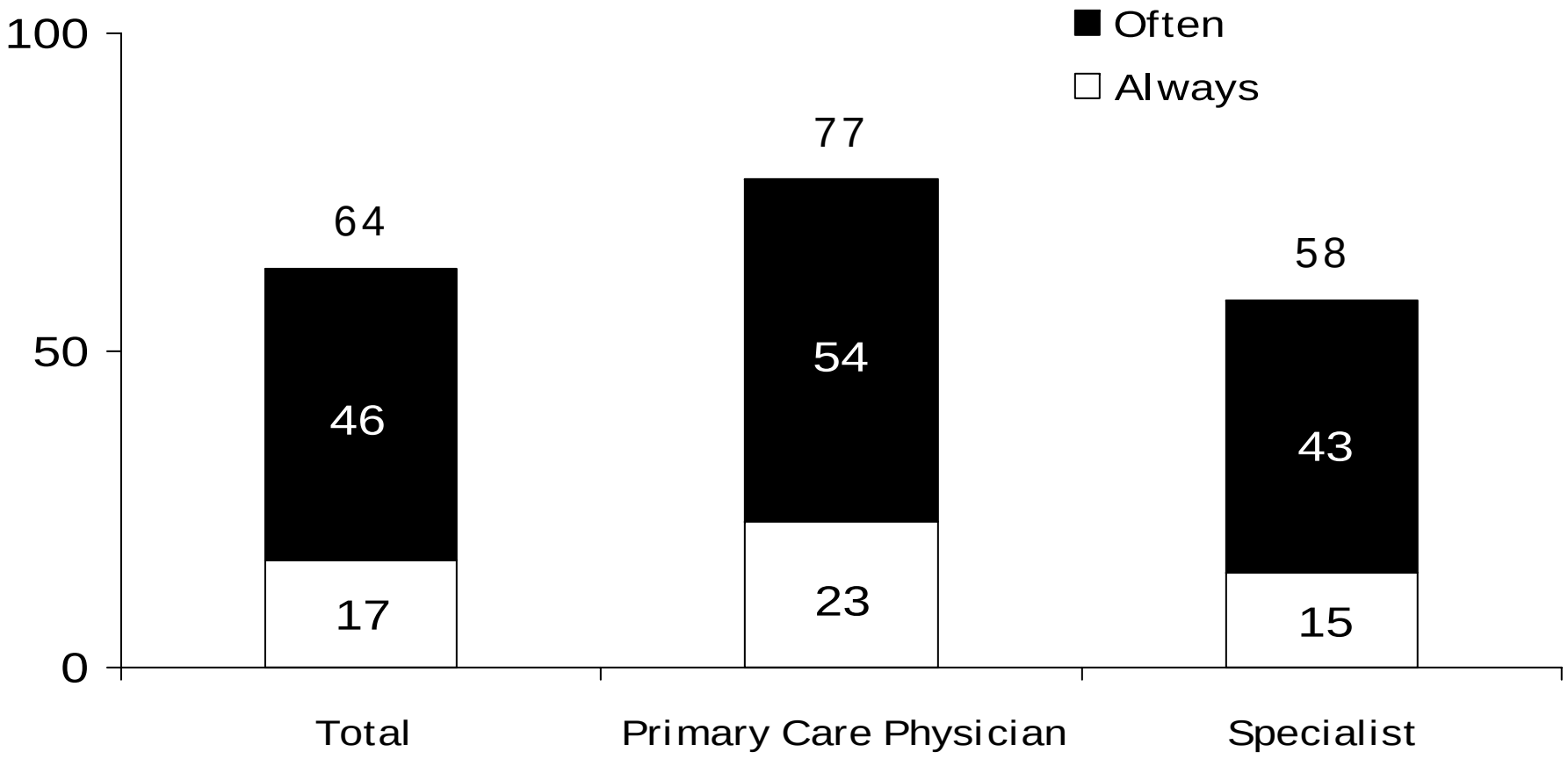


* A patient experienced a problem following discharge from a hospital because his/her physician did not receive needed information from the hospital in a timely manner.

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

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

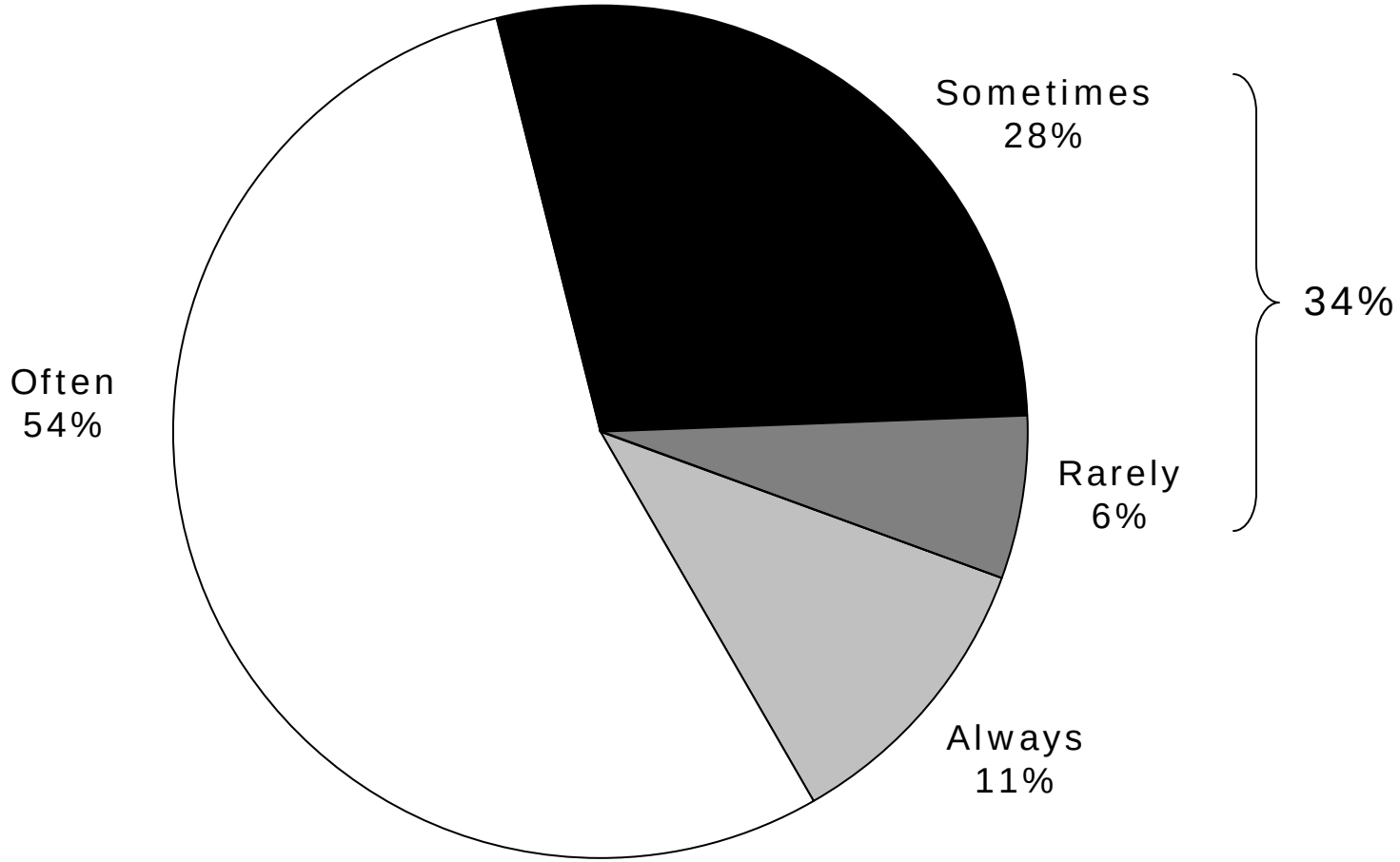
Percent indicating how often they can provide same-day appointments



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

Chart IV-7. Receipt of Timely Referral Information

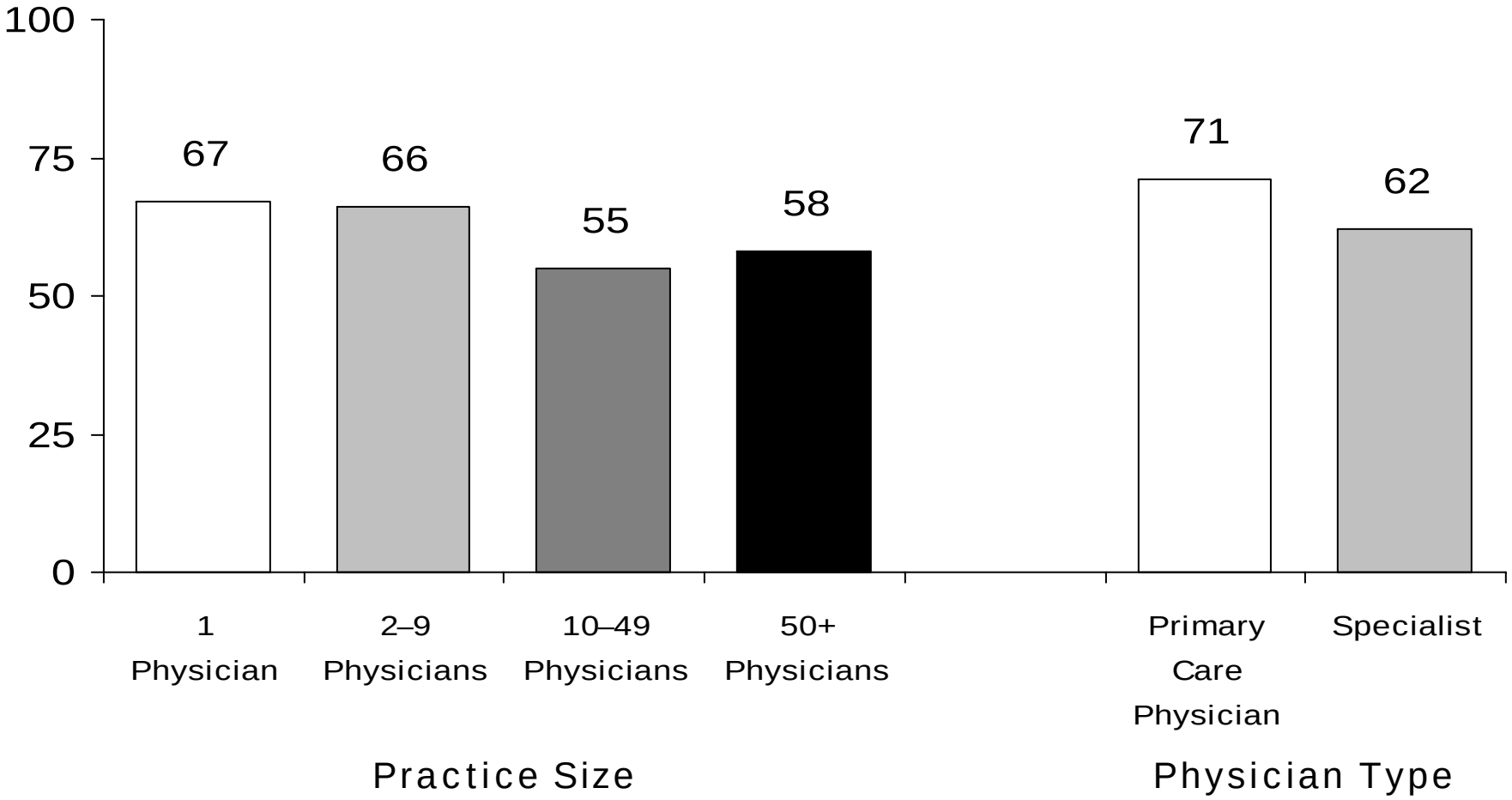
Percent who say they receive *timely* information about the results of a referral



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

Chart IV-8. Receipt of Timely Referral Information

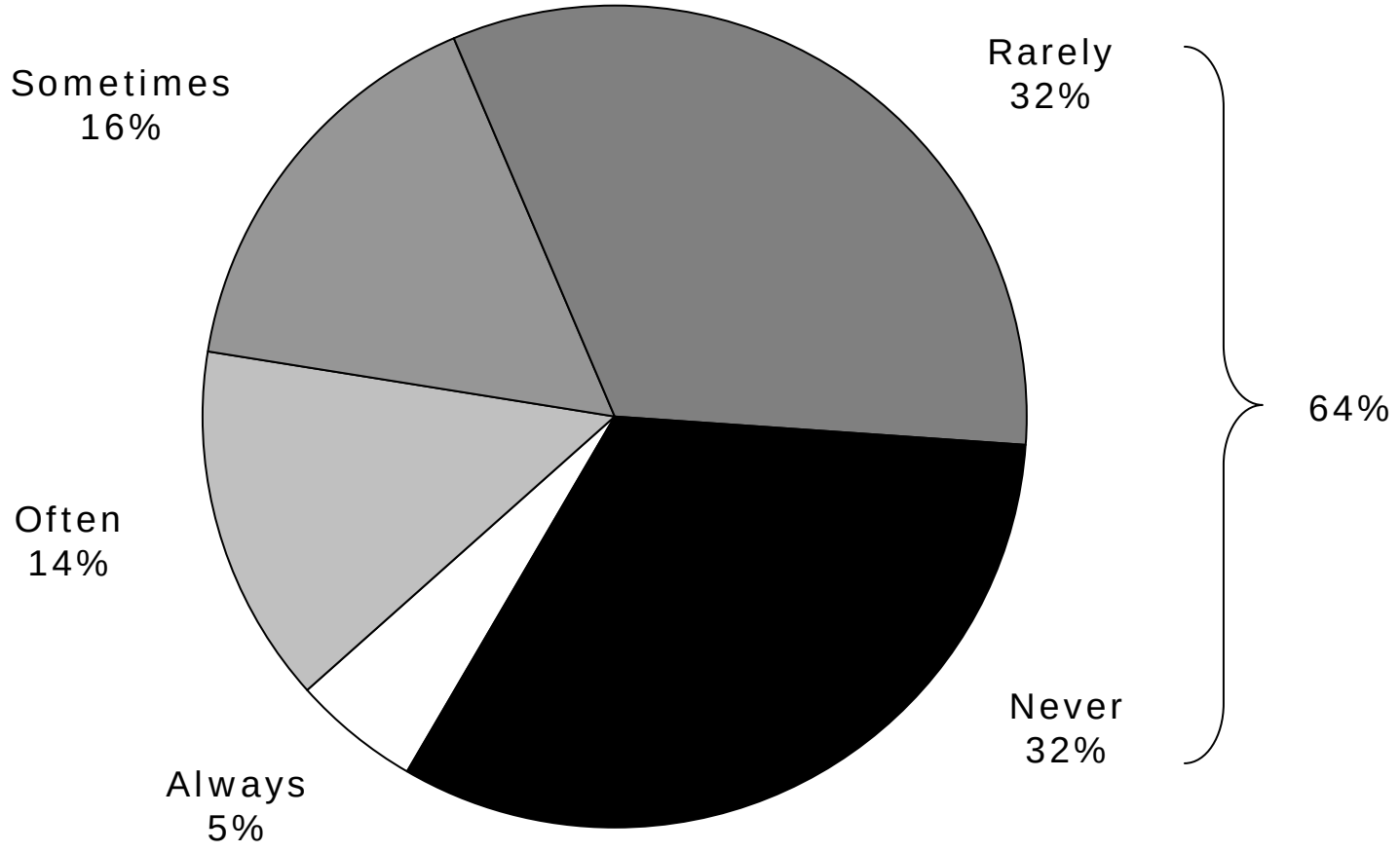
Percent who say they "always/often" receive *timely* information about the results of a referral



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

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

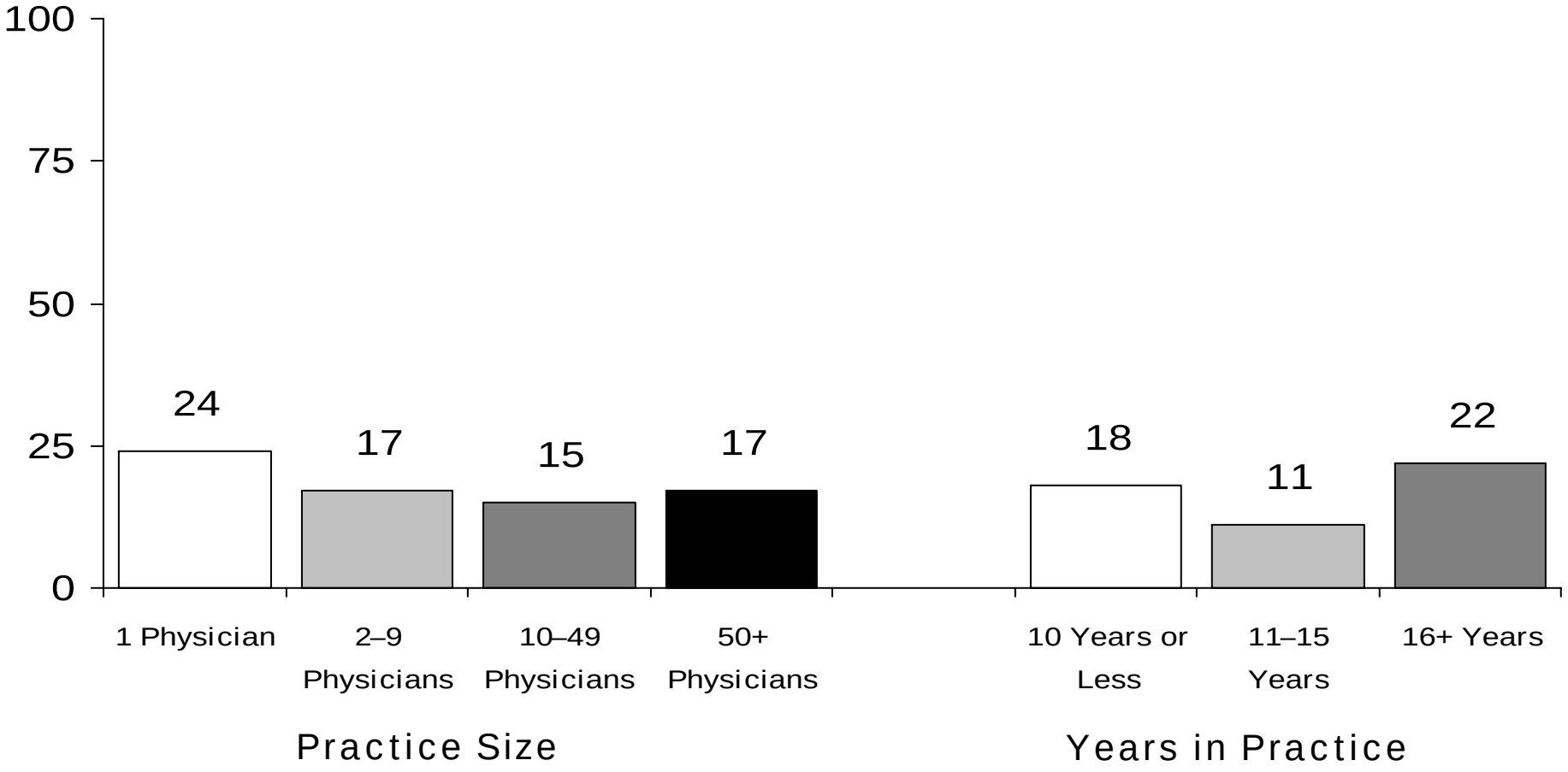
Percent indicating how often they have any data about a physician's quality of care when making referrals



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

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



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

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%

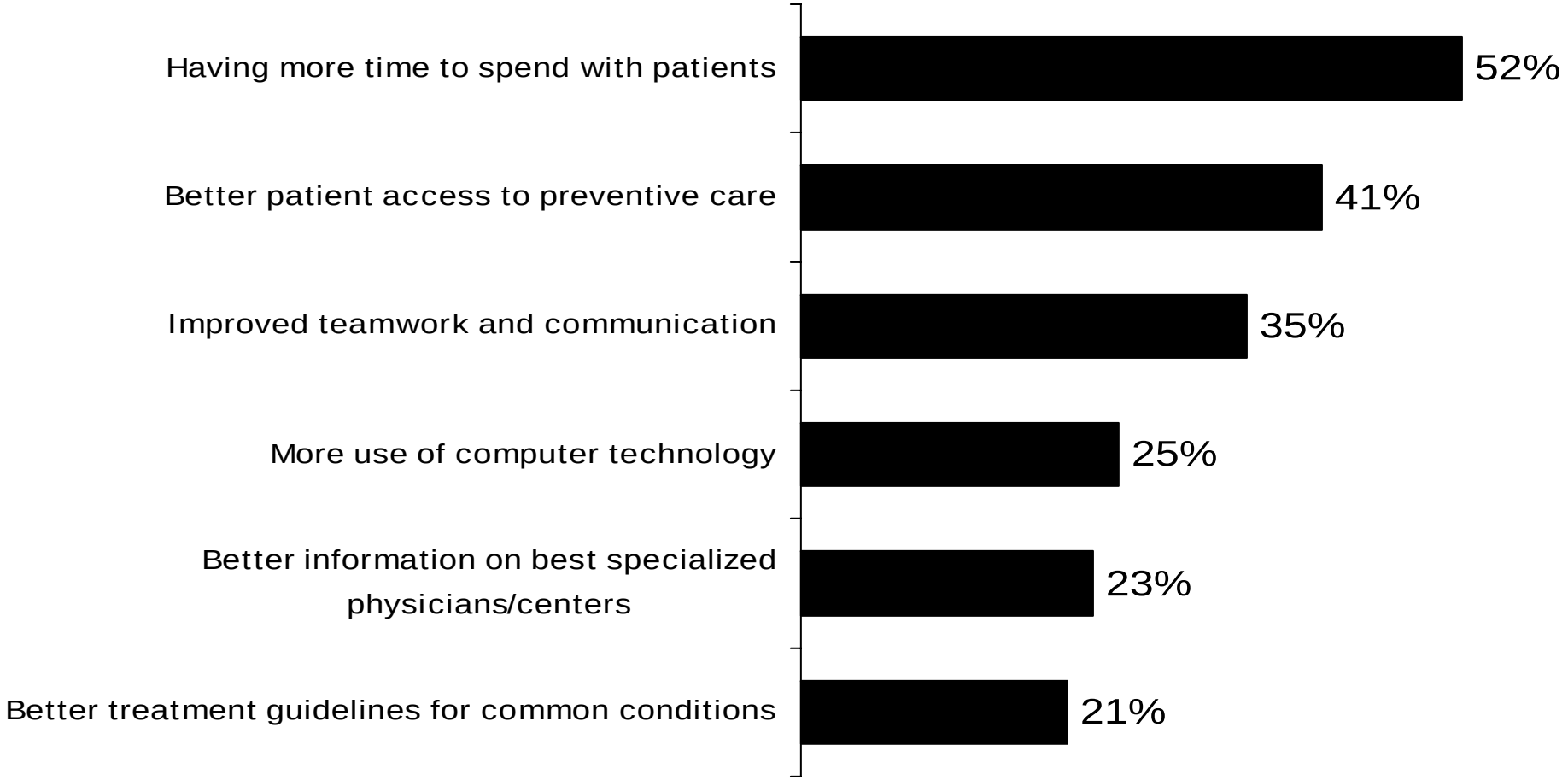
* Indicates physicians who responded that the above information was more important than quality-of-care data.
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

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



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

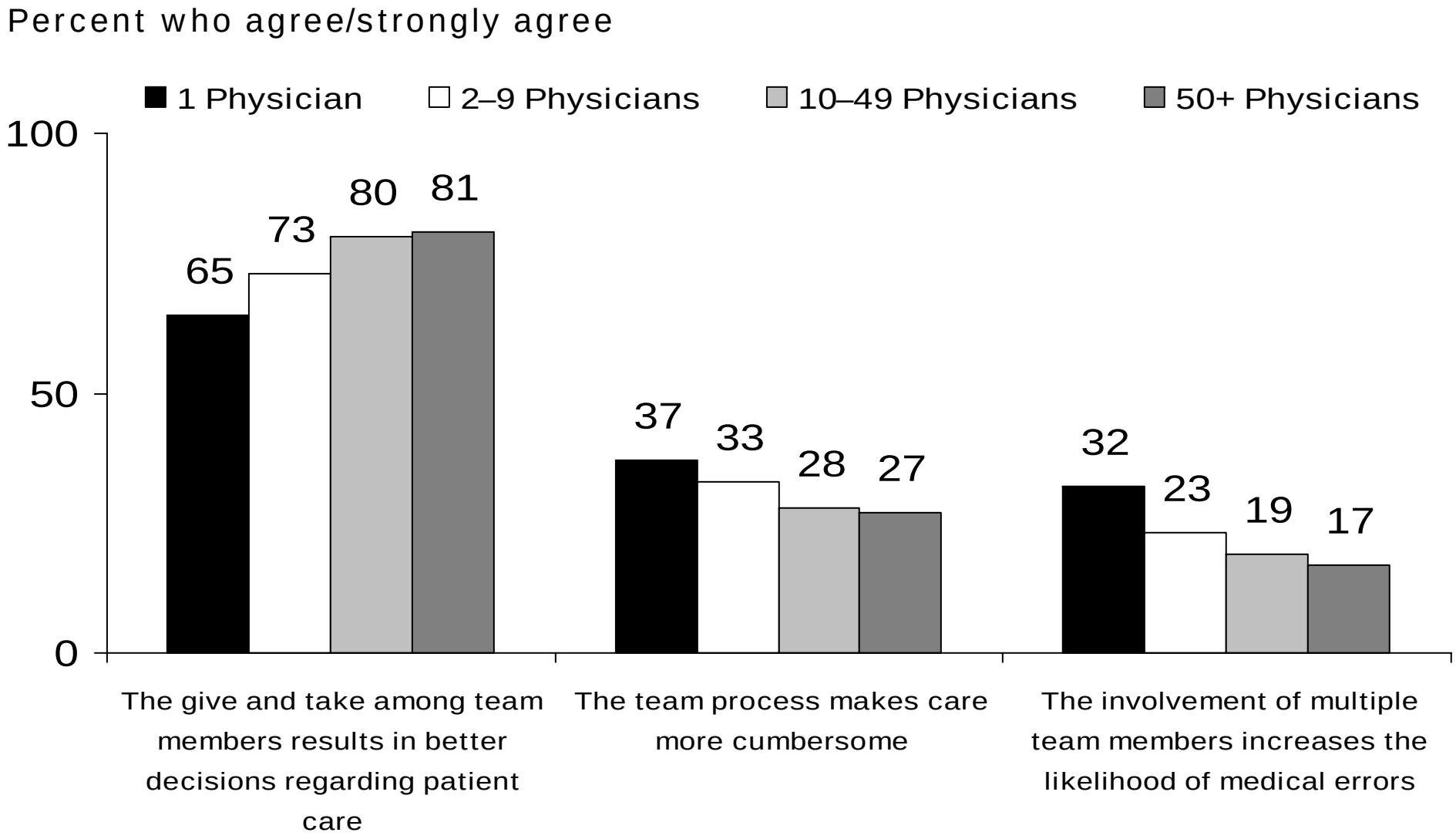
Chart V-2. Physicians' Opinion on Team Care

	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%

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

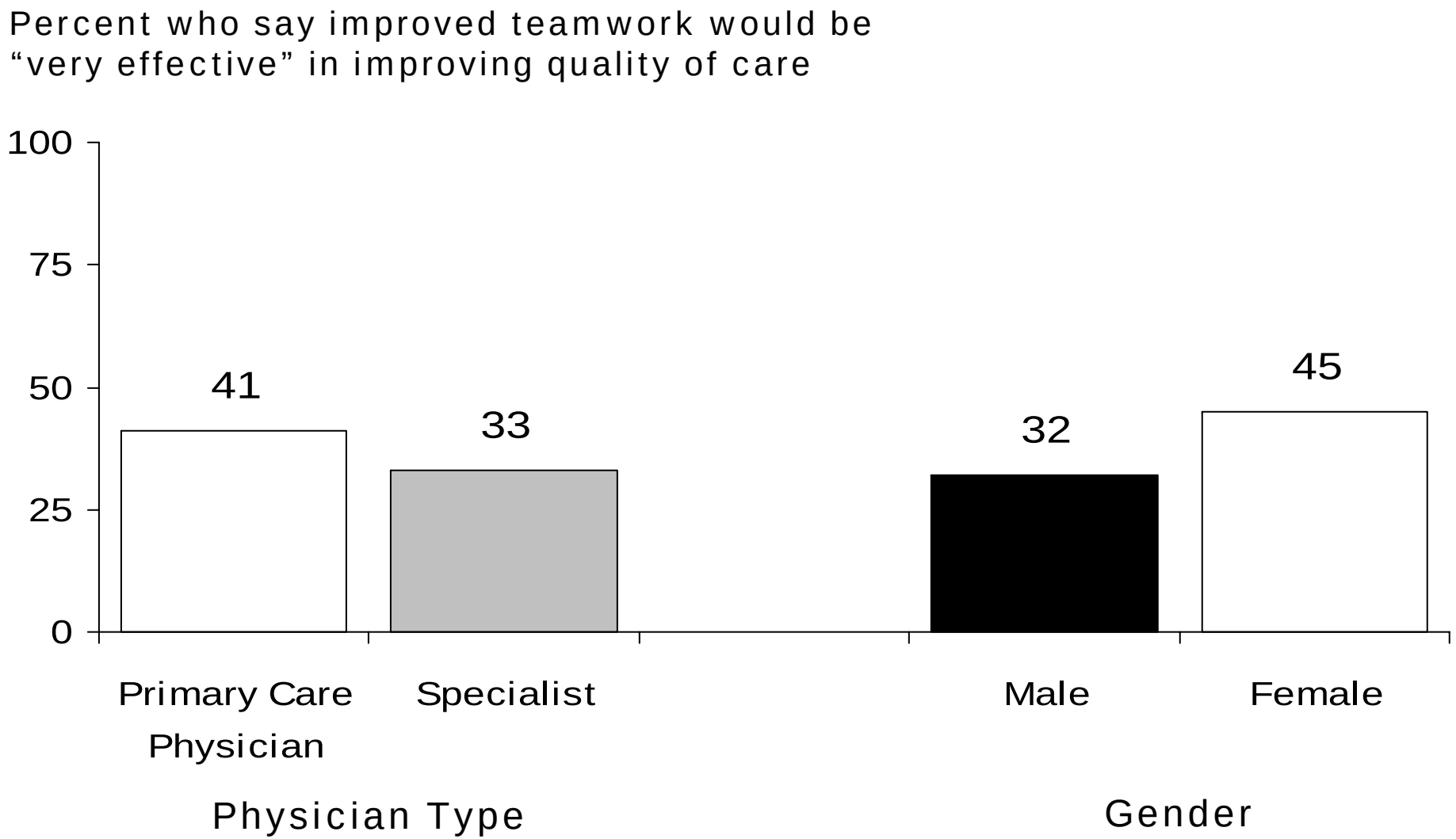
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

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



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

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



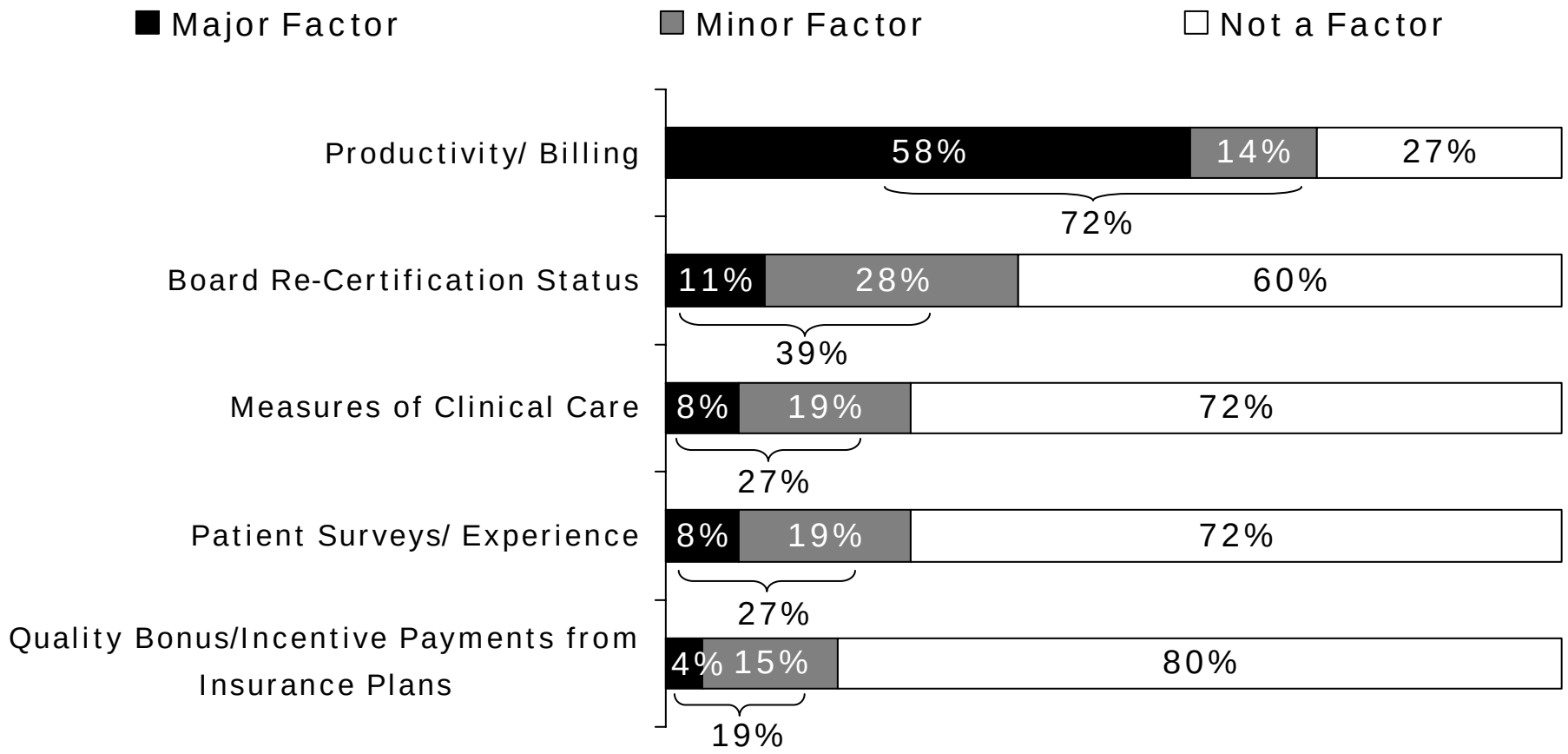
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

Chapter VI

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

Chart VI-1. Factors Affecting Physicians' Compensation

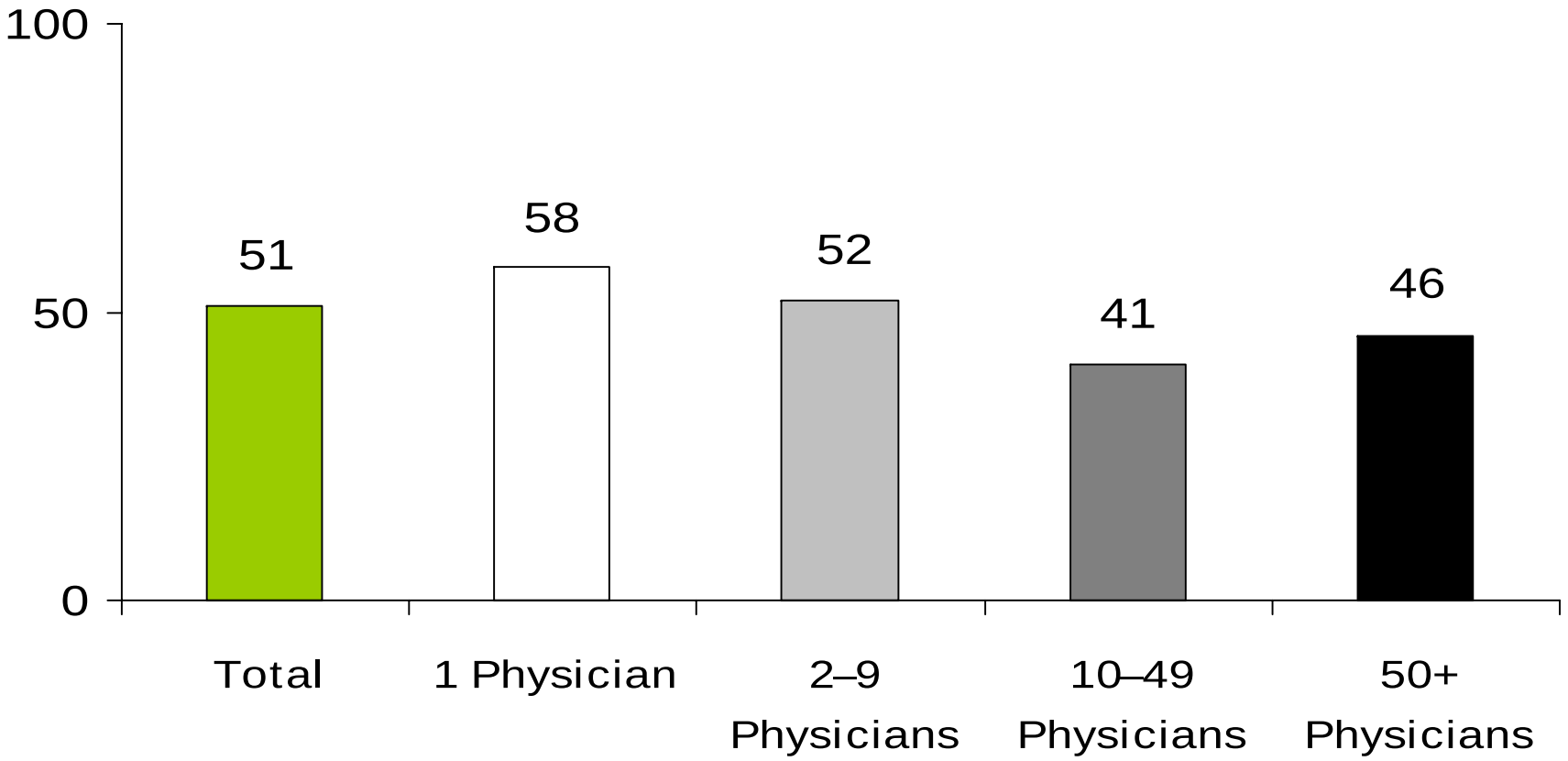
Percent indicating the following as factors in determining compensation or income



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

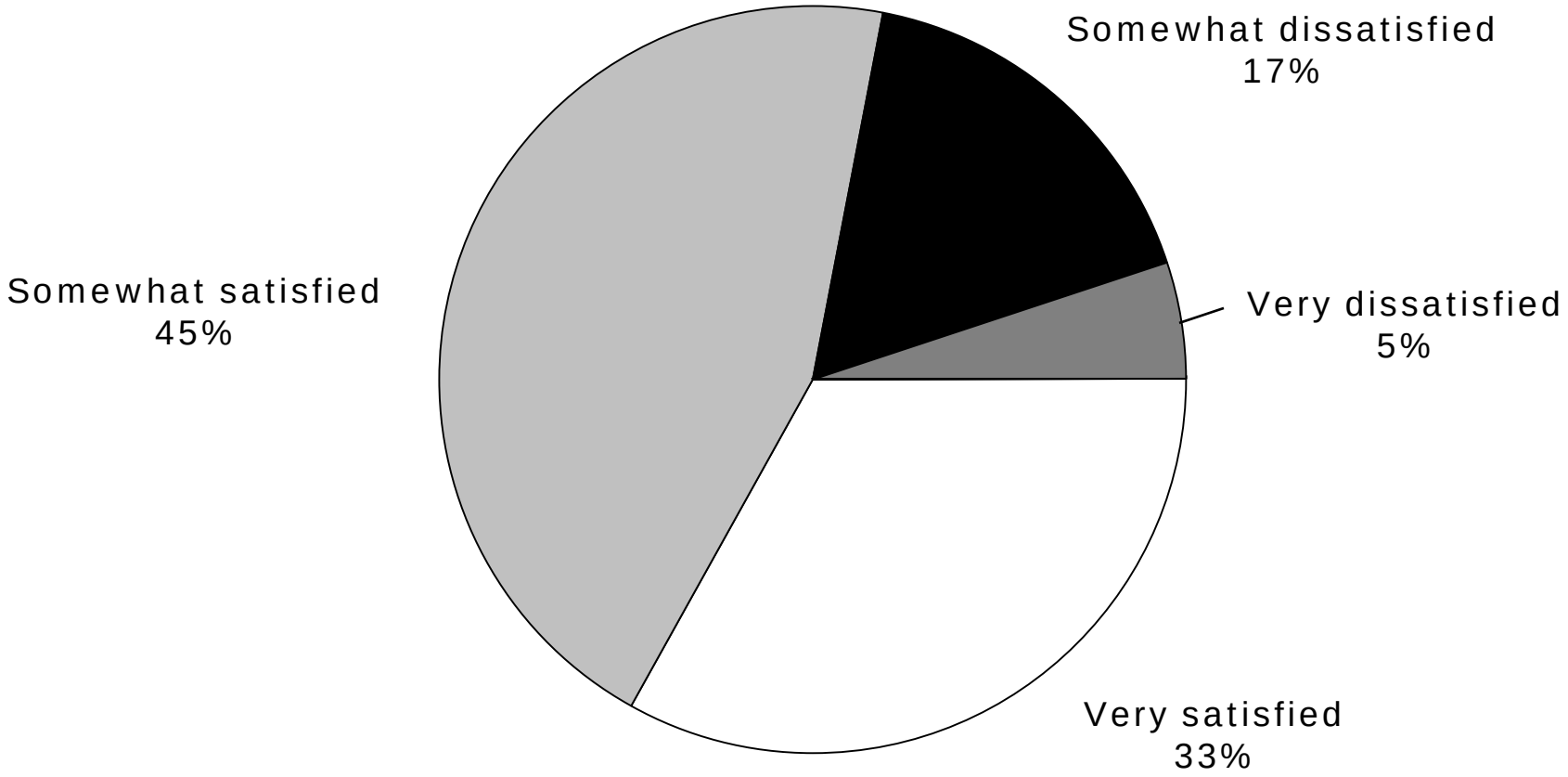
Chart VI-2. Financial Consequences of Providing High Quality of Care, by Practice Size

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



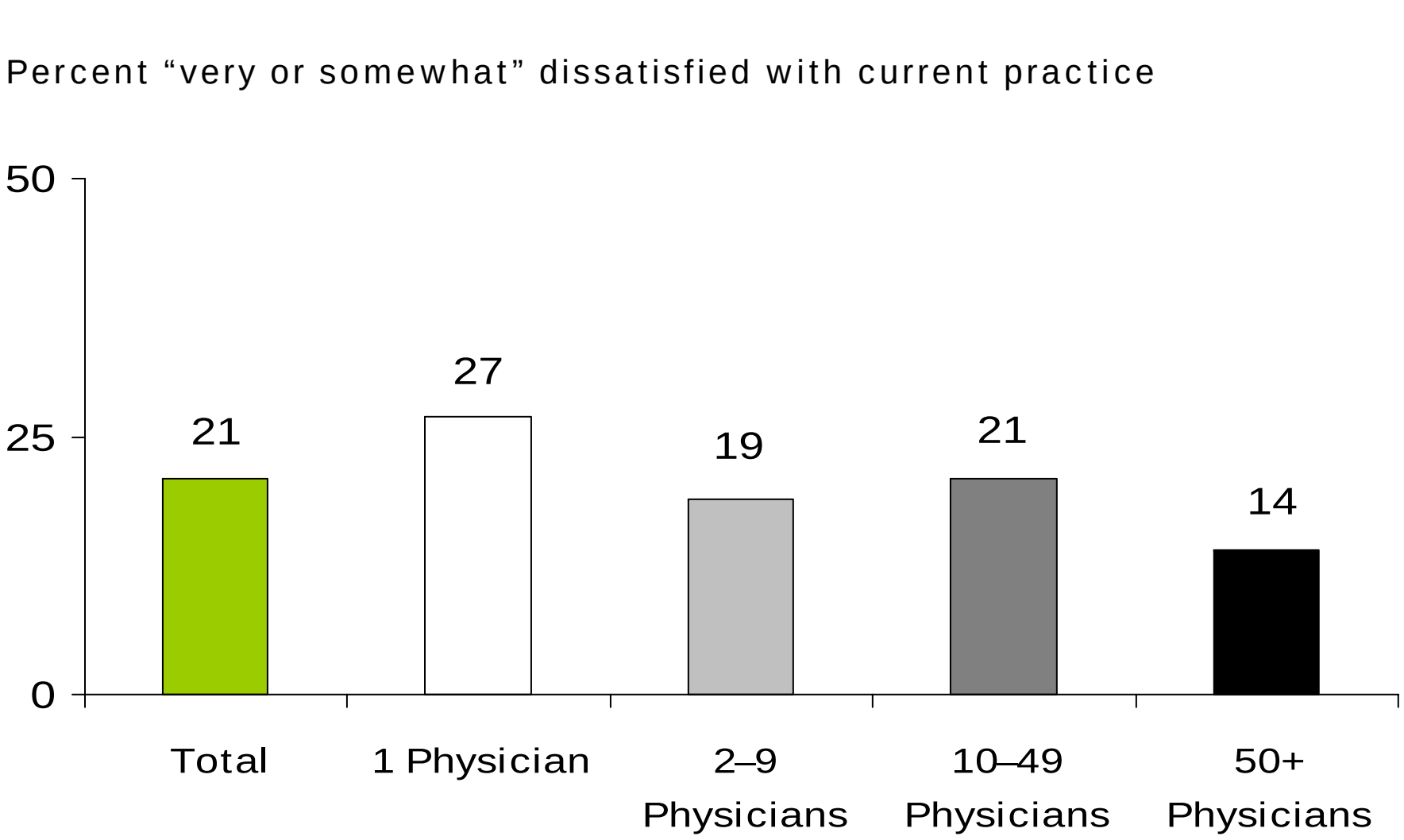
Source: The Commonwealth Fund National Survey of Physicians and Quality of Care.

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



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

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



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

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

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