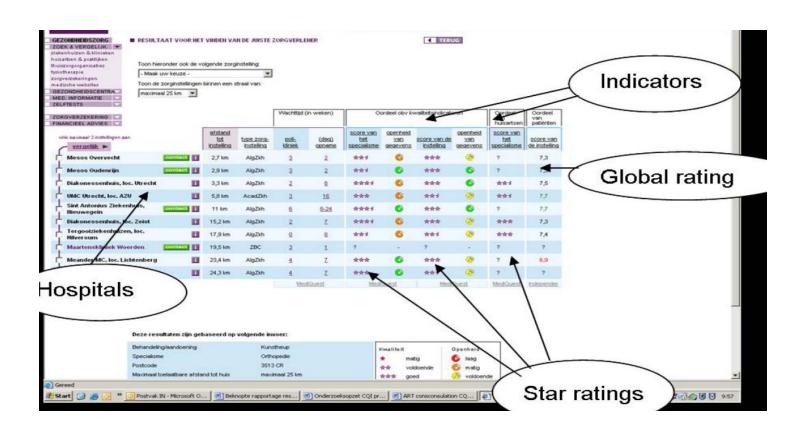
# Using Performance Information— What Presentation Formats Support Consumer Decision Making?

Health Care Transparency Summit – December 3, 2013





## Approach to Evidence Review

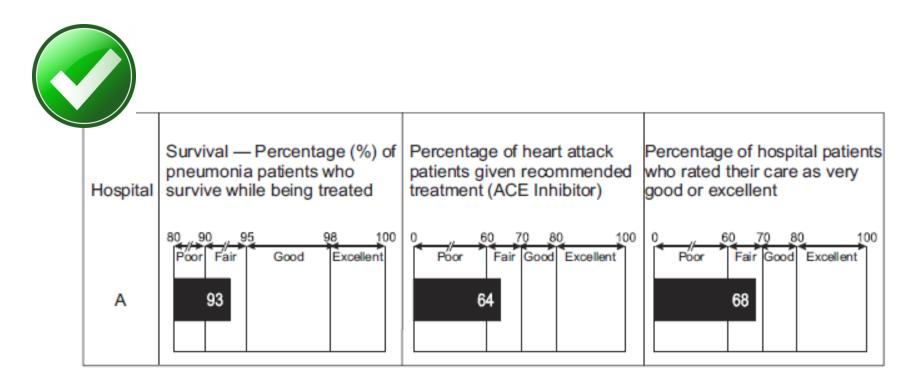
- Structured review of the published evidence
  - Seminal papers as primary source of search terms—e.g., quality of care, mandatory or voluntary reporting, consumer health information, decision making
  - Use of 7 electronic bibliographic databases
  - Limits imposed—10 years, English language
  - Initial yield of 1,011 unique titles
  - 28 titles retained following 2-stage review title/abstract review + full article review



### What Works?

- 1. Easy to read and understand graphics, multiple presentations, framing
- 2. Evaluative, interpretive approaches

## **Example 2—Evaluative Format**



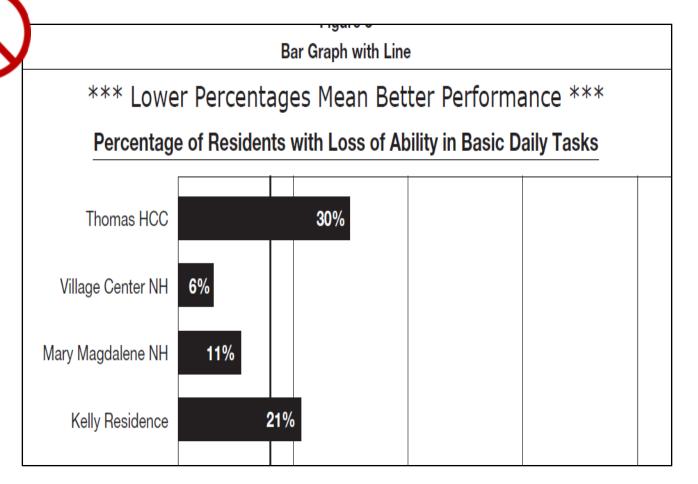
### **Evaluative Format**



**Evaluative Table with Words** 

	Compared to the State Average, How the Nursing Homes Performed on the Following Quality Measures				
	Residents with Loss of Ability in Basic Daily Tasks	Residents with Pressure Sores	Residents with Pain	Residents in Physical Restraints	Residents with Infections
Adams Nursing Home	Average	Better	Average	Worse	Data Not Available
Clarke Center	Average	Better	Average	Average	Data Not Available
Glenwood Specialty Hospital	Average	Average	Average	Average	Better
Delmore Rehab and Health Ctr.	Worse	Average	Better	Better	Average

# Numeric Table or Bar Charts





#### What Works?

- 1. Easy to read and understand graphics, multiple presentations, framing
- 2. Evaluative, interpretive approaches
- 3. Explanatory messages and strong signals

# Example 1—Cost Data + Strong Quality Signal

Examples Of Co	st Data Presented	To Respondents With	A Strong Quality	/ Signal
Group 1	Quality data (str	ong signal)		Cost data
<b>Doctor</b> Dr. Friedman Dr. Hunter	Uses treatments proven to get results Better Better	Has safeguards to protect patients from medical errors Better Better	Is responsive to patients' needs and preferences Better Better	Careful with your health care dollars

# **Cost With and Without Weak Quality Signal**

Group 1	Quality data (weak signal)			Cost data	
<b>Doctor</b> Dr. Peters	Diabetes patients tested for blood sugar (%)	Uses electronic health record Yes	Patients say office staff is helpful (%) 80	Careful with your health care dollars	
Dr. Peters Dr. Rabin	75 75	Yes	80	•••	

	Access data			
Doctor	Saturday hours	Driving distance (miles)	Same-day office visits	Cost data
GROUP 1°				
Dr. White Dr. Ramsey Dr. Abbot Dr. James Dr. Albright Dr. Casey	9:00-noon 9:00-3:00 None 9:00-3:00 None 9:00-noon	6 5 10 5 8	No Yes Yes Yes No Yes	•••••



### **Ongoing Challenges**

- Subjective information, informal sources, referrals remain a strong force
- U-shaped, optimal range of information
- Common, intuitive symbols—e.g., "\$\$\$"—not always effective
- Consumer characteristics and skills mediate effectiveness of presentation format
- Those with low health literacy and numeracy skills and elderly consistently disadvantaged



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