

**Results from The Commonwealth Fund 2009 Survey
of Clinic Patients in New Orleans**

Individual Clinic Results Report for:

New Orleans Musicians Clinic

Prepared by:
The Commonwealth Fund and Social Science Research Solutions

Overview of the Study and Summary of Major Findings

Objective of the Clinic Patient Survey

In an effort to examine access to and quality of care for patients who are served by the burgeoning network of clinics that are recipients of the Primary Care Access & Stabilization Grant in Orleans Parish (PCASG), Louisiana, The Commonwealth Fund conducted a survey of a sample of clinic patients in 2009. Specifically, the goal is to monitor federal and local efforts intended to reorganize the primary care infrastructure following Hurricane Katrina, and assess the impact on patients.

This report compares the experience of your patients to the patients of all PCASG clinic patients included in the study. Sample sizes are small, so the results should be viewed with caution; however, we hope these findings provide some insight to your performance regarding preventive care, chronic disease management, access, and care coordination.

Brief Summary of Survey Methodology

- 20-minute, two-part, in-person interviews conducted in 27 PCASG-supported primary care clinics in Orleans Parish between 2/09-4/09.
- 1,231 clinic patients ages 18 to 64 completed the interview in 22 non-pediatric primary care clinics.
- 280 adults accompanying a child under the age of 18 completed the interview in 16 primary care clinics including 5 pediatric clinics.
- Trained interviewers were situated in a clinic during most or all of its operating hours and attempted to survey all eligible individuals present in the clinic on interviewing days. The overall response rate was 78%. The 20-minute interview was broken into 10-minute pre- and post-appointment sections; those who did not complete the second half of the interview were counted as non-responders.

Key Findings from the Study's Results

Demographics of Clinic Patients in Survey:

- 89% Minority, predominantly African American; 72% uninsured; and 51% with income below 200% FPL.
- More than three quarters of respondents (78%) were living in New Orleans when Katrina hit.
- Of these, 73% indicated prior to Katrina, main source of health care was Charity Hospital or a Charity clinic.

Overall Results of the Clinic Patients Survey:

Compared to the general New Orleans population (2008 Kaiser Family Foundation Survey), PCASG clinic patients have much easier access to care, including reporting that:

- it is very easy to get medical advice during regular office hours via telephone (42% PCASG clinic patients vs. 30% New Orleans population);
- it is very easy to get care after hours (43% vs. 11%); and
- they are able to get an appointment on the same or next day when they are sick (64% vs. 26%).

Although more and more families across the country have seen their health insurance coverage deteriorate and medical bill problems or cost-related delays in getting needed care escalate, compared to a representative U.S. sample (Commonwealth Fund 2007 Biennial Survey), PCASG clinic patients:

- are less likely to experience inefficiencies in care such as test records being unavailable at the time of scheduled appointment, duplicated medical tests, or delays in being told about abnormal test results (4% of PCASG clinic patients vs. 34% of U.S. population);
- are less likely to forgo care due to cost or have accumulated medical debt (34% vs. 40%); and
- express greater confidence in their ability to afford the health care needed if they were to develop a serious illness (49% vs. 30%).

Nearly four in ten surveyed adult patients reported an excellent patient experience, defined as:

- the doctor or health provider in the clinic understood important information about their medical history (98%);
- easy, timely access to medical care by telephone, on evenings and week-ends, or via a same/next day appointment (88%);
- a clinician in the clinic coordinated the care they received from other places or physicians, such as specialists (52%); and
- excellent patient-clinician communications (79%).

Patients who reported having an excellent patient experience were more likely to:

- receive reminders from their doctors to get recommended preventive screening (60% of those with an excellent patient experience vs. 42% with a suboptimal patient experience); and
- receive important preventive care, such as cholesterol and blood pressure checks, and cancer screenings (80% vs. 66%, 96% vs. 90%, and 57% vs. 45%, respectively).
- Chronically ill patients with an excellent patient experience were more likely than those with a suboptimal patient experience to be given a written plan or instructions for managing care at home (80% vs. 73%) and to be contacted after a visit to see how things were going with their condition (73% vs. 63%).

The early experience from the PCASG clinics in Louisiana shows that a comprehensive approach to primary care that is carefully planned and locally implemented – with shared resources and ample support for community clinics – has the potential to provide better quality care for our nation’s most vulnerable populations. Local and national policy recommendations can be drawn from the early experience of patients of the Louisiana Stabilization Grant. A thorough evaluation (conducted by a team at the University of California at San Francisco) will continue to monitor the Louisiana experience and assess if the targeted Federal PCASG resources produce better quality at lower cost.

**Clinic Specific Findings of The Commonwealth Fund 2009 Survey of Clinic
Patients in New Orleans
For
New Orleans Musicians Clinic**

This report contains an individualized site-specific report for the service delivery sites named. Each report features charts with your clinics' performance in relation to the performance of all the PCASG clinics included in the study on a selected number of measures from the report. One chart also features your results to that of the General New Orleans population respectively (as surveyed by Kaiser Family Foundation in 2008).

Due to the limited sample sizes per clinic, the results should be viewed with caution; however, we hope these findings provide some insight to your performance regarding preventive care, chronic disease management, access, and care coordination.

For questions or comments regarding this feedback report, please contact:

Chatrian R. Kanger, MPH
Evaluation Manager / PCASG Project Officer
Louisiana Public Health Institute

ckanger@lphi.org

Ph.: 504.301.9840

www.lphi.org

Feedback From Your Patients:
Site-Level Results From
The 2009 Commonwealth Fund Survey
of Clinic Patients in New Orleans

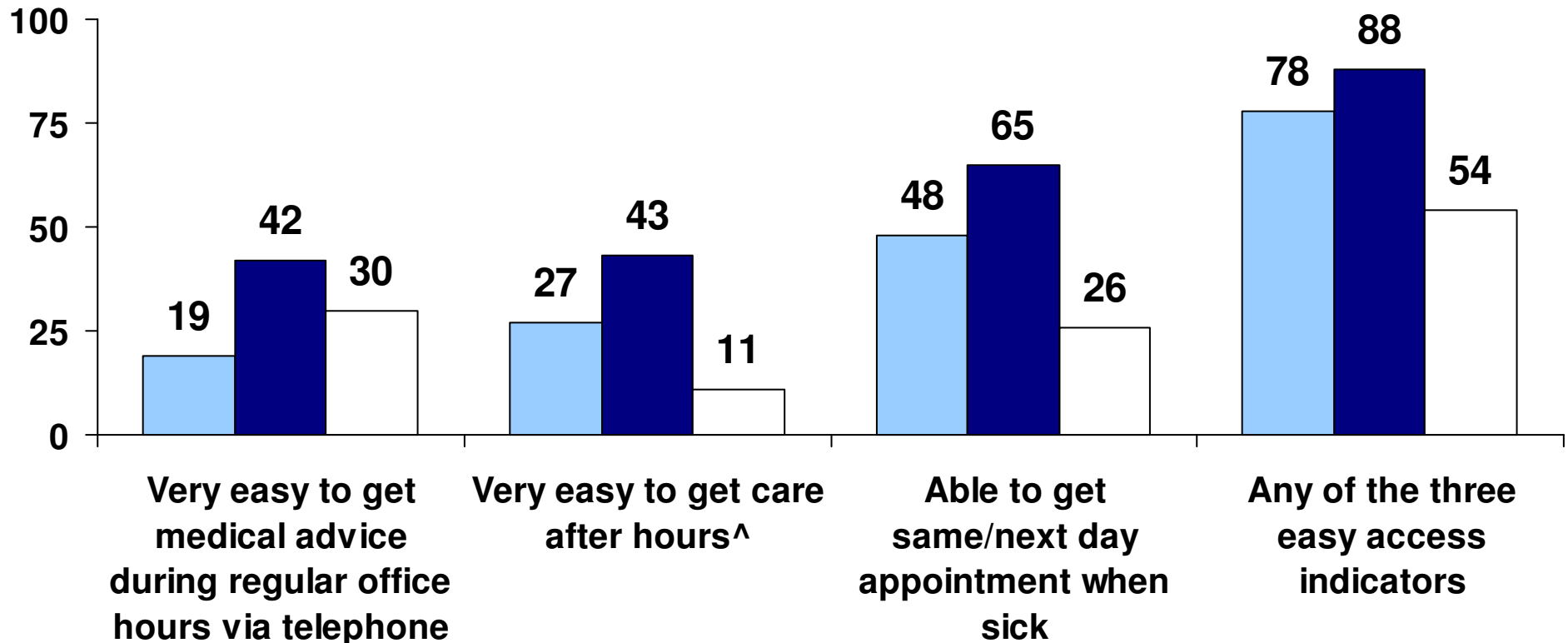
New Orleans Musicians Clinic

Clinic Sample Size = 19

Figure 1: Clinic Patients Reporting Accessibility to Same or Next Day Medical Appointments and After-Hours Care Compared to the General Population in New Orleans

Percent of adults ages 18–64

- New Orleans Musicians Clinic
- Survey of PCASG clinic patients
- Survey of the general population in New Orleans, 2008



[^]After hours includes during the evenings, on the weekends, or on holidays.

Source: *New Orleans Three Years After the Storm: The Second Kaiser Post-Katrina Survey (2008), The Commonwealth Fund 2009 Survey of Clinic Patients in New Orleans.

Table 1: Indicators of Excellent Patient Experience Among Clinic Patients in New Orleans

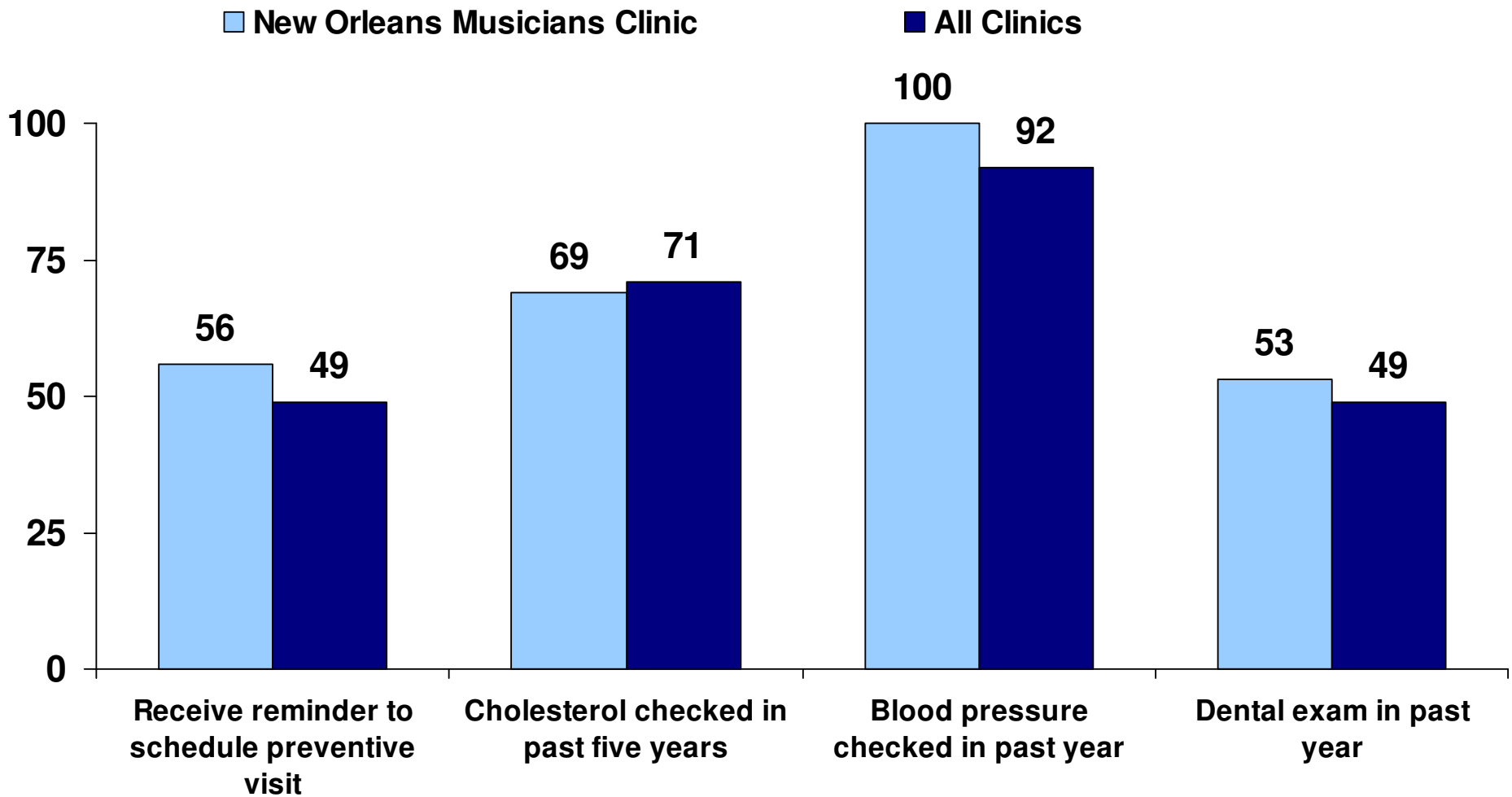
Indicators of excellent patient experience	Site-level Mean Percent (n = 19)	Total Study Percent	Range of Clinic Mean Percent
Doctor or other health provider in this clinic understands important information about your medical history	100	99	97-100
Easy or very easy to access medical advice via telephone during regular practice hours, or get after-hours care, or could make a same day or next day appointment	78	88	71-100
Care transitions are coordinated by a clinician in this clinic¹	93	52	18-94
Patient-clinician communications are excellent²	68	79	63-100
Has all indicators of excellent patient experience	58	37	10-78

¹Coordinated care defined as “yes” to one or more of: (1) someone at clinic helped coordinate or arrange care received from other doctors or places, (2) the doctors in this clinic helped you decide which specialist to see, (3) after you saw this other doctor or specialist, the doctors in this clinic helped you understand or make decisions about the information or care you received from the other doctor.

²Excellent patient-clinician communications defined as “always” to all of the following: how often did a clinician in this clinic (1) listen carefully to you, (2) explain things in a way you can understand, (3) spend enough time with you, (4) involve you in decisions about the best treatment option for you; and “never” to: (5) did you ever leave with important questions about your treatment unanswered?

Figure 2: Percent of Clinic Patients Reporting Receiving Reminders and Obtaining Preventive Care in This Clinic

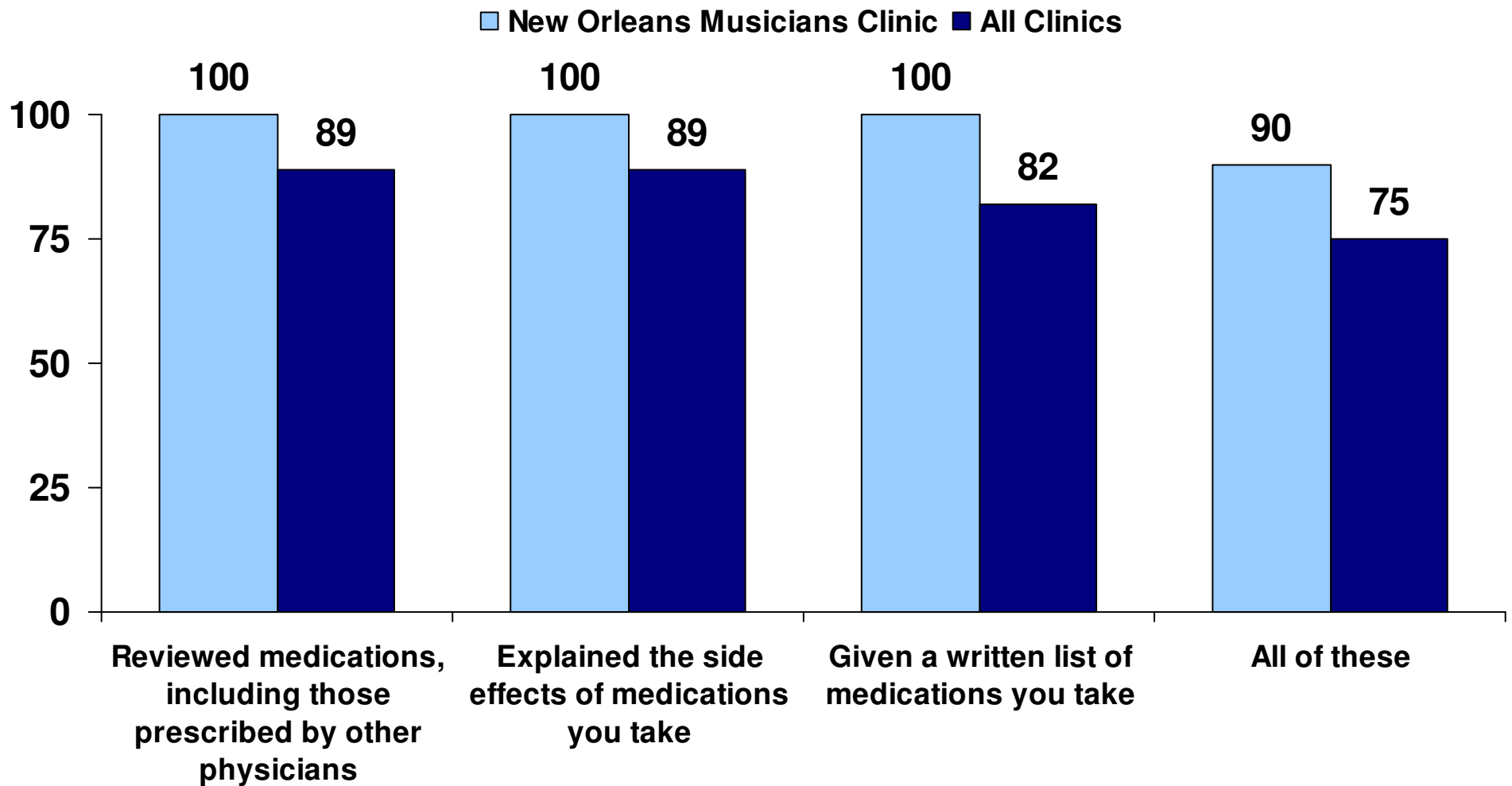
Percent of adults 18–64



Source: The Commonwealth Fund 2009 Survey of Clinic Patients in New Orleans.

Figure 3: Percent of Clinic Patients Reporting Assistance with Medication Management

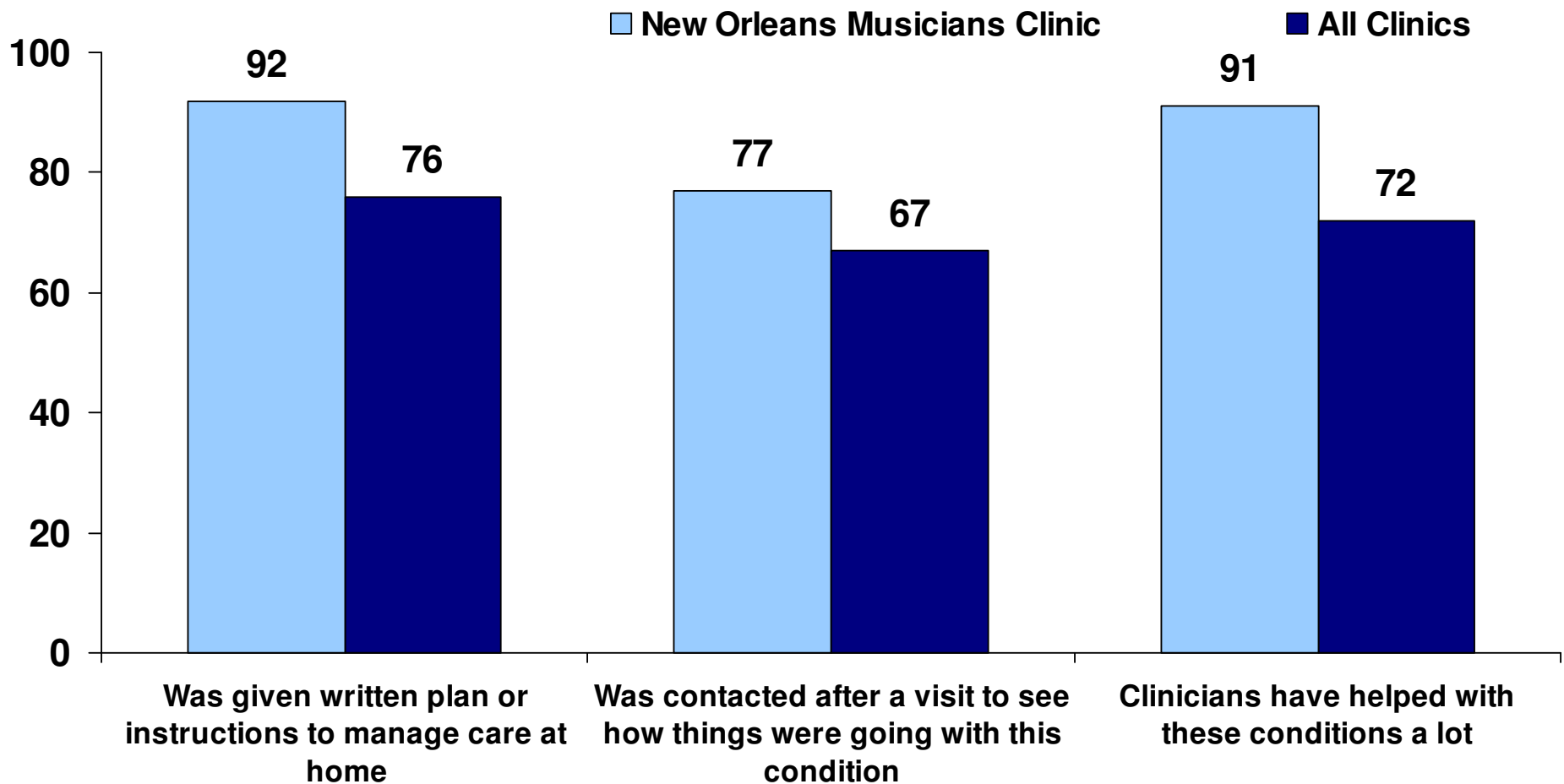
Percent of chronically-ill adults ages 18–64 (n = 13) reporting:



Base: Adults with one or more chronic conditions and taking prescription medications.
Source: The Commonwealth Fund 2009 Survey of Clinic Patients in New Orleans.

Figure 4: Percent of Clinic Patients With One or More Chronic Conditions Reporting Case Management Activities

Percent of adults 18–64 with one or more chronic conditions (n = 13)

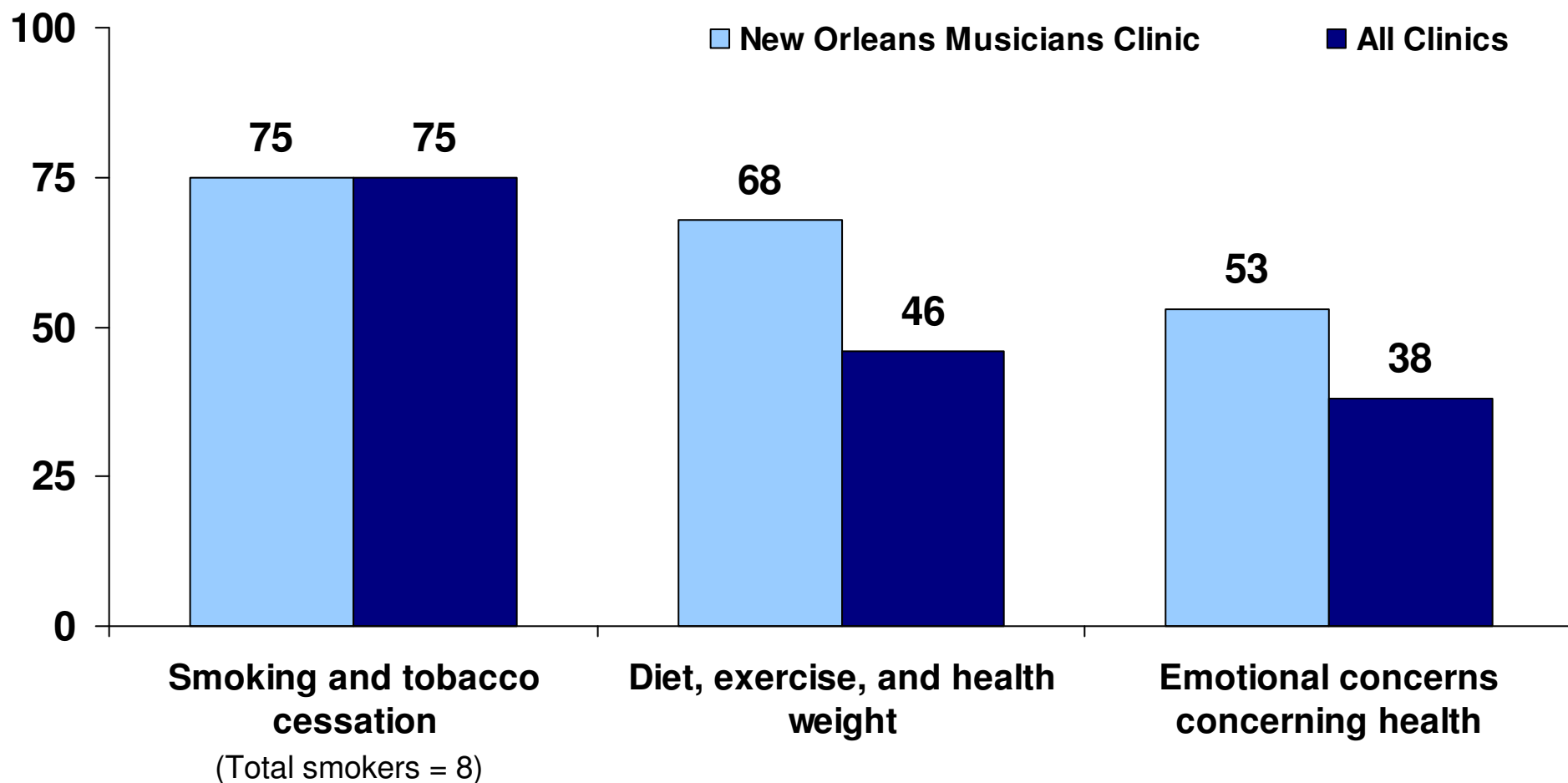


Base: Adults with one or more chronic conditions

Source: The Commonwealth Fund 2009 Survey of Clinic Patients in New Orleans.

Figure 5: Percent of Clinic Patients Who Received Counseling on Healthy Behaviors by a Doctor or Medical Professional

Percent of adults 18–64 reporting receiving counseling on the following:



Source: The Commonwealth Fund 2009 Survey of Clinic Patients in New Orleans.