

## 5. QUALITY OF CARE: PATIENT CENTEREDNESS

5.1. Patients experiences with ambulatory healthcare service (QP-1, QP-2, QP-3, QP-4) [updated on 23 December 2020] [see also the old sheet below]

### 5.1.1. Documentation sheet

Description	Patients experiences with ambulatory care
Calculation	<b>Numerator:</b> number of respondents ( $\geq 15$ years old) who answered to the HIS and who reported they had a good relational experience during the last contact with either a general practitioner (GP) or a specialist in ambulatory care (4 questions, GP or specialist depending on which ambulatory health care provider was contacted last). <b>Denominator:</b> number of respondents ( $\geq 15$ years old) who answered to the HIS and who had a contact with either a GP or a specialist in the 12 months preceding the date of the interview:
Rationale	Patient-centered care is supported by good provider-patient communication so that patient's needs and preferences can be addressed and that patients understand and participate in their own care. <sup>1-3</sup> Unfortunately, a good communication is not easy and requires several competencies (listening, explaining, courtesy...) The measurement of these skills is a challenge and several institutes tackle this issue in their surveys. <sup>1,4,5</sup> In 2011 the OECD has edited a questionnaire on patient experiences with some questions related to the quality of the consultation. <sup>4</sup> On the request of the Federal Public Service Public Health, the Sciensano (the former Belgian Scientific Institute of Public Health) included in the Health interview survey the OECD instrument dedicated to the patient experiences with ambulatory care since the 2013 interview.
Data source	HIS 2013-2018
Technical definitions	Question based on the OECD module <sup>4</sup> : Now, refer to the last time you had a consultation either with a GP; either with a specialist: Q15. Did this doctor spend enough time with you? Q16. Did this doctor explain things in a way that was easy to understand? Q17. Did this doctor give you an opportunity to ask questions or raise concerns about recommended treatment? Q18. Did this doctor involve you as much as you wanted to be in decisions about your care and treatment?
Limitations	Subjective assessment of the "understandable" aspect of information provided by the physician while we do not know if this information was effectively understood; even if respondents without contact with a physician during the last 12 months were excluded, the delay between consultation and survey can be long; focus on ambulatory care only; home visits by GPs excluded.



<b>International comparability</b>	Yes, data based on an OECD module, questions are comparable in all countries but with caution because the way in which the information in different countries is collected (special survey vs overall health survey, sampling scheme, survey organization, etc.) may have an impact on the outcome of the result.
<b>Dimensions</b>	Patient centeredness (Providers skill of communication/Explaining ability); Ambulatory care

### 5.1.2. Results

The following results are based on the Belgian Health interview survey (HIS) 2018.<sup>6</sup>

#### **Q15. Did the doctor spend enough time with you?**

According to the Belgian HIS 2018, 97.5% of patients mentioned their doctor spent enough time with them during consultation (also 97.5% in 2013); this percentage equals 98.2% for general practitioners (97.7% in 2013) and 95.2% for specialists (96.4% in 2013). This rate is similar at all ages, and for both sexes and remains stable between 2013 and 2018.

#### **Analysis by socio-economic status**

There are no significant differences by education level concerning satisfaction of time spent by general practitioners or by medical specialists.

#### **Analysis by region**

The percentage of satisfied patients concerning the time spent by specialists or general practitioners is lower in Brussels (95.9%) than in Flanders (97.8%) or Wallonia (97.2%). After standardisation for age and sex, the single significant difference concerns the comparison Brussels-Flanders.

**Table 1 – Proportion of satisfied patients (15 years old and plus) concerning the time spent by their physician during consultation, by region (2018)**

	General practitioner	Specialist
Flanders	98.5	95.4
Brussels region	96.7	94.5
Wallonia	97.9	95.0

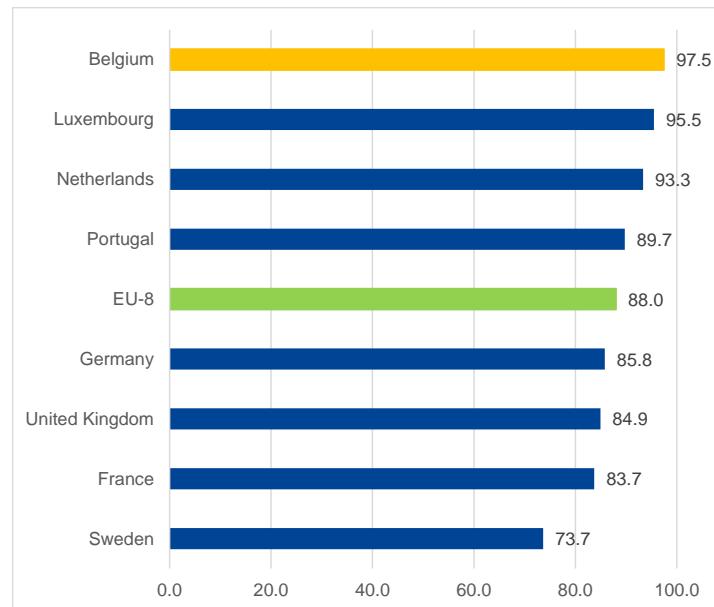
Source: *Health Survey, Belgium, 2018*.<sup>6</sup>

#### **International comparison**

The questionnaire used in the Belgian health interview survey is also used by other countries. This allows some comparisons such as performed by the OECD in the report 'Health at a Glance' published in 2017.<sup>7</sup> Data concern all physicians without distinction between general practitioners and specialists and comparisons are approximate as the years of data collection are not the same in all countries.

Compared with 8 of the EU-15 countries, Belgium ranks first for patient satisfaction related to the time spent by their physician during consultation.

**Figure 1 – Proportion of satisfied patients concerning the time spent by their physician during consultation: international comparison (2017 or nearest available year)**



Sources: *Health at a Glance, OCDE, 2019<sup>7</sup>* – *Health Survey, Belgium, 2018.<sup>6</sup>*

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician. Nearest available year: Belgium and UK (2018); Netherlands (2017); Sweden, France, Germany (2016); Portugal (2015); Luxembourg (2011)

#### **Q16. Did the doctor explain things in a way that was easy to understand?**

In 2018, 97.5% of patients considered that explanations provided by their physician were sufficiently clear (97.7% in 2013). This percentage equals 98.0% for the general practitioner (98.2% in 2013) and 95.9% for the specialist (95.7% in 2013). This high rate is found at all ages, and for both sexes and remains stable between 2013 and 2018.

#### **Analysis by socio-economic status**

There are no significant differences by education level concerning clarity of explanations provided by general practitioners. The percentage of patients indicating that the specialist provided a clear explanation is lower among patients with the lower education level (85.5%) compared to the higher education level (98.2%). This difference is significant after standardization for age and sex.

#### **Analysis by region**

The percentage of patients indicating that the general practitioner or the specialist has provided a clear explanation is lower in Brussels (96.2%) than in Flanders (97.8%) or Wallonia (97.4%). However these differences are not significant after standardisation for age and sex.

**Table 2 – Proportion of patients (15 years old and plus) considering that their physician has provided a clear explanation, by region (2018)**

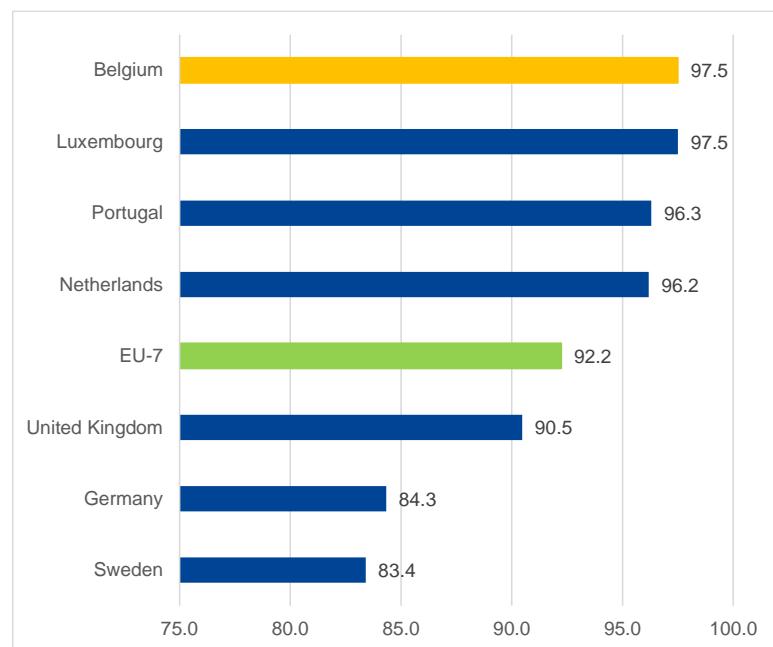
	General practitioner	Specialist
<b>Flanders</b>	98.1	96.7
<b>Brussels region</b>	97.3	94.0
<b>Wallonia</b>	97.9	95.6

Source: *Health Survey, Belgium, 2018.<sup>6</sup>*

## International comparison

Compared with 8 of the EU-15 countries, Belgium ranks first for the clarity of the physician's explanation (with Luxembourg).

**Figure 2 – Proportion of patients considering that their physician has provided easy-to-understand explanations, (2017 or nearest available year): international comparison**



Sources: *Health at a Glance, OCDE, 2019<sup>7</sup> – Health Survey, Belgium, 2018.<sup>6</sup>*

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician. Nearest available year: Belgium (2018); Netherlands (2017); Sweden, Germany, UK (2016); Portugal (2015); Luxembourg (2011)

## **Q17. Did this doctor give you an opportunity to ask questions or raise concerns about recommended treatment?**

In 2018 in Belgium, 97.5% of patients agreed they had the opportunity to ask questions to the doctor or to express their concerns about the treatment, where appropriate (97.6% in 2013). This percentage equals 98.0% for the general practitioner (98.1% in 2013) and 95.7% for the specialist (95.5% in 2013). The percentages remain stable between 2013 and 2018.

This high rate was found for both sexes and at all ages, except in the Walloon Region, where the percentage is slightly lower among patients 75+ (94.4%) than among patients in the 15-24 age group (99.4%).

### Analysis by socio-economic status

There are no significant differences by education level concerning the opportunity to ask questions or to express concerns about treatment, both with the general practitioner and the medical specialist.

### Analysis by region

The proportion of patients indicating that they had the opportunity to ask questions or to express their concerns about the treatment with the general practitioner or with the medical specialist is similar in the three regions (see Table 29)..

**Table 3 – Proportion of patients (15 years old and plus) considering that they had the opportunity to ask questions to their physician or to express their concerns about the treatment, by region (2018)**

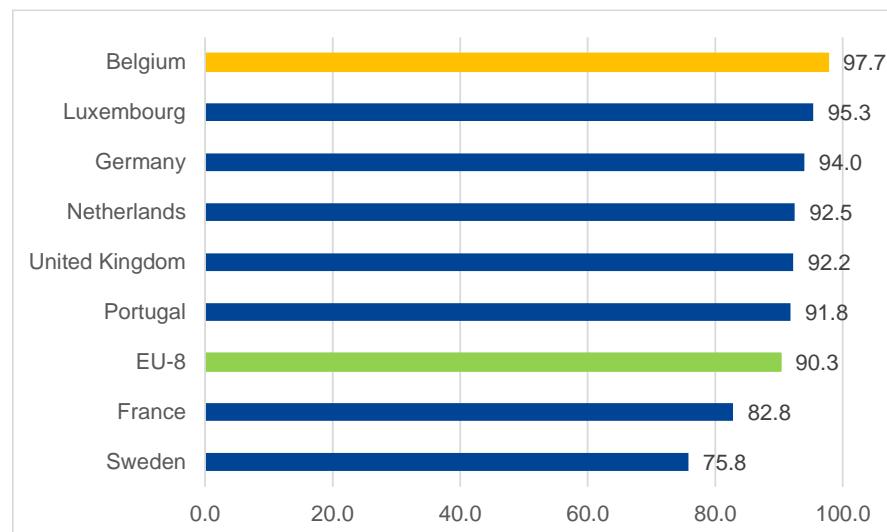
	General practitioner	Specialist
<b>Flanders</b>	98.5	96.4
<b>Brussels region</b>	97.0	93.8
<b>Wallonia</b>	97.4	95.6

Source: *Health Survey, Belgium, 2018.<sup>6</sup>*

## International comparison

Compared with 8 of the EU-15 countries, Belgium ranks first for the patient's perception of their opportunity to ask questions to their physician or to express their concerns about treatment.

**Figure 3 – Proportion of patients considering that they had the opportunity to ask questions to their physician or to express their concerns about the treatment: international comparison (nearest available year)**



Sources: *Health at a Glance*, OCDE, 2015 – *Health Survey, Belgium, 2018*.<sup>6</sup>

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician. Nearest available year: Belgium (2018); Portugal (2015), Luxembourg (2011), Netherlands, Sweden, France, Germany, UK (2010)

#### **Q18. Did this doctor involve you as much as you wanted to be in decisions about your care and treatment?**

In 2018 in Belgium, 95.4% of patients agreed they were sufficiently involved in decisions about their care or treatment, where appropriate (95.2% in 2013). This percentage equals 96.5% for the general practitioner (95.8 in 2013) and 92.0% for the specialist (92.0 in 2013). This high rate is found at all ages, and for both sexes, and remains stable between 2013 and 2018.

#### **Analysis by socio-economic status**

There are no significant differences by education level concerning the feeling of involvement in the decision, both with the general practitioner and with the medical specialist.

#### **Analysis by region**

The percentage of patients indicating that they were sufficiently involved in decisions about their care or treatment is the same in the three regions, both for the general practitioner and the specialist.

**Table 4 – Percentage of patients (15 years old and plus) considering that they were sufficiently involved in decisions about their care or treatment, by region (2018)**

	General practitioner	Specialist
Flanders	96.9	92.7
Brussels region	95.0	91.6
Wallonia	96.0	91.0

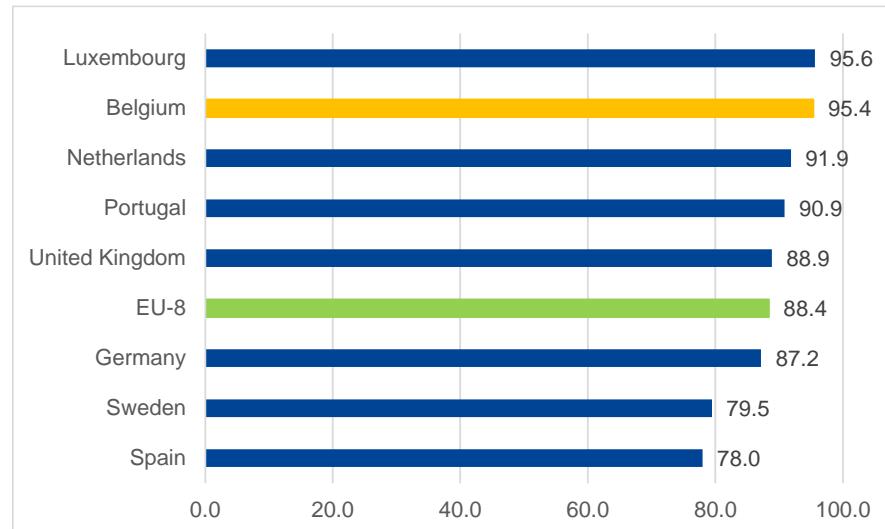
Source: *Health Survey, Belgium, 2018*.<sup>6</sup>

#### **International comparison**

Compared with 8 of the EU-15 countries, Belgium ranks second for the patients perception of their involvement in the decision about their care or treatment (after Luxembourg).



**Figure 4 – Proportion of patients considering that they were sufficiently involved in decisions about their care or treatment: international comparison (2017 or nearest available year)**



Sources: *Health at a Glance, OCDE, 2019<sup>7</sup> – Health Survey, Belgium, 2018.<sup>6</sup>*

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician; Nearest available year: Belgium (2018); Netherlands (2017); Sweden, Germany, UK, Spain (2016); Portugal (2015); Luxembourg (2011)

- The satisfaction level is lower in Brussels for two items: the time spent to the patient by the general practitioner or specialist and the opportunity to ask questions to the specialist. No significant difference was noticed for the clarity of explanations and the patient involvement in decision.
- As it is the first time that these items were included in the Health interview survey, no trends over time can be currently estimated.

- Comparison with 13 European countries showed that Belgium ranks first for patient satisfaction related to the time spent by their physician during the consultation, the clarity of explanations and the opportunity to ask questions. Belgium ranks second for the patients perception of their involvement in the decision about their care or treatment.

## References

- [1] AHRQ. National Healthcare Quality Report 2010 Agency for Healthcare Research and Quality; 2010. 12 october 2011
- [2] OECD. Health Data 2011. Statistics and indicators for OECD countries. In: Organisation for Economic Co-operation and Development; 2011.
- [3] Bates-Jensen BM, MacLean CH. Quality indicators for the care of pressure ulcers in vulnerable elders. Journal of the American Geriatrics Society. 2007;55(2).
- [4] OECD. Health Care Quality Indicators. OECD pilot questions on patient experiences. Paris: Organisation for Economic Co-operation and Development; 2011.
- [5] Westert G, van den Berg M, Koolman X, Verkleij H. Dutch Health Care Performance Report 2008. National Institute for Public Health and the Environment (RIVM); 2008.
- [6] Demarest S, Charafeddine R, Berete F, Drieskens S. Enquête de santé 2018 : L'expérience du patient.. Bruxelles: Sciensano; 2020.
- [7] OECD. Health at a glance. Paris: Organisation for Economic Co-operation and Development; 2019.

## 5.1. Patients experiences with ambulatory healthcare service (QP-1, QP-2, QP-3, QP-4) [Old sheet]

### 5.1.1. Documentation sheet

<b>Description</b>	Patients experiences with ambulatory care
<b>Calculation</b>	<p><b>Numerator:</b> number of respondents (<math>\geq 15</math> years old) who answered to the HIS and who reported they had a good relational experience during the last contact with either a general practitioner (GP) or a specialist in ambulatory care (4 questions, GP or specialist depending on which ambulatory health care provider was contacted last).</p> <p><b>Denominator:</b> number of respondents (<math>\geq 15</math> years old) who answered to the HIS and who had a contact with either a GP or a specialist in the 12 months preceding the date of the interview:</p>
<b>Rationale</b>	Patient-centered care is supported by good provider-patient communication so that patient's needs and preferences can be addressed and that patients understand and participate in their own care. <sup>1-3</sup> Unfortunately, a good communication is not easy and requires several competencies (listening, explaining, courtesy...) The measurement of these skills is a challenge and several institutes tackle this issue in their surveys. <sup>1,4,5</sup> In 2011 the OECD has edited a questionnaire on patient experiences with some questions related to the quality of the consultation. <sup>4</sup> On the request of the Federal Public Service Public Health, the Belgian Scientific Institute of Public Health included in the Health interview survey 2013 the OECD instrument dedicated to the patient experiences with ambulatory care.
<b>Data source</b>	HIS 2013
<b>Technical definitions</b>	<p>Question based on the OECD module<sup>4</sup>:</p> <p>Now, refer to the last time you had a consultation either with a GP; either with a specialist:</p> <p>Q15. Did this doctor spend enough time with you?</p> <p>Q16. Did this doctor explain things in a way that was easy to understand?</p> <p>Q17. Did this doctor give you an opportunity to ask questions or raise concerns about recommended treatment?</p> <p>Q18. Did this doctor involve you as much as you wanted to be in decisions about your care and treatment?</p>
<b>Limitations</b>	Subjective assessment of the "understandable" aspect of information provided by the physician while we do not know if this information was effectively understood; even if respondents without contact with a physician during the last 12 months were excluded, the delay between consultation and survey can be long; focus on ambulatory care only; home visits by GPs excluded.
<b>International comparability</b>	Yes, data based on an OECD module, questions are comparable in all countries but with cautious because the way in which the information in different countries is collected (special survey vs overall health survey, sampling scheme, survey organization, etc.) may have an impact on the outcome of the result.
<b>Dimensions</b>	Patient centeredness (Providers skill of communication/Explaining ability); Ambulatory care



### 5.1.2. Results

The following results are based on the Belgian Health interview survey (HIS) 2013.<sup>6</sup>

#### **Q15. Did the doctor spend enough time with you?**

According to the Belgian HIS 2013, 97.5% of patients mentioned their doctor spent enough time with them during consultation; this percentage equals 97.7% for general practitioners and 96.3% for specialists. This rate is similar at all ages, and for both sexes.

#### **Analysis by socio-economic status**

There are no significant differences by education level concerning satisfaction of time spent by general practitioners. The percentage of satisfied patients concerning the time spent by specialists is slightly higher in patients with higher education level than in groups with lower education level (between 94.7% and 96.5%). After standardisation for age and sex, the single remaining significant difference concerns patient with upper secondary education level.

#### **Analysis by region**

The percentage of satisfied patients concerning the time spent by specialists or general practitioners is lower in Brussels than in Flanders or Wallonia. After standardisation for age and sex, the single significant difference concerns the comparison Brussels-Flanders.

**Table 5 – Proportion of satisfied patients (15 years old and plus) concerning the time spent by their physician during consultation, by region (2013)**

	General practitioner	Specialist
Flanders	98.0	97.1
Brussels region	96.6	93.9
Wallonia	97.5	96.1

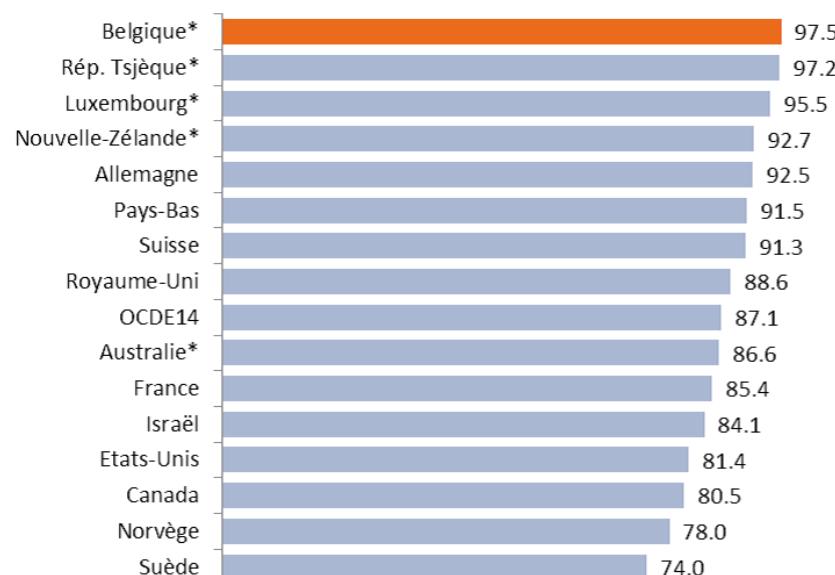
Source: *Health Survey, Belgium, 2013*.<sup>6</sup>

#### **International comparison**

The questionnaire used in the Belgian health interview survey is also used by other countries. This allows some comparisons such as performed by the OECD in the report ‘Health at a Glance’ published in 2013.<sup>7</sup> Fourteen countries are compared after standardisation for age and sex (based on OECD population 2010). Data concern all physicians without distinction between general practitioners and specialists and comparisons are approximate as the years of data collection are not the same in all countries (years were as close to 2013 as possible).

Compared with 13 countries, Belgium ranks first for patient satisfaction related to the time spent by their physician during consultation.

**Figure 5 – Proportion of satisfied patients concerning the time spent by their physician during consultation: international comparison (2013)**



Sources: *Health at a Glance*, OCDE, 2013 – *Health Survey, Belgium*, 2013.<sup>6</sup>

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician

#### **Q16. Did the doctor explain things in a way that was easy to understand?**

In Belgium, 97.7% of patients considered that explanations provided by their physician were sufficiently clear. This percentage equals 98.2% for the general practitioner and 95.5% for the specialist. This high rate is found at all ages, and for both sexes.

#### **Analysis by socio-economic status**

There are no significant differences by education level concerning clarity of explanations provided by general practitioners. The percentage of patients indicating that the specialist provided a clear explanation is lower among patients with the lower education level (85.5%) compared to the higher education level (98.2%). This difference is significant after standardization for age and sex.

#### **Analysis by region**

The percentage of patients indicating that the general practitioner or the specialist has provided a clear explanation is lower in Brussels (96.4%) than in Flanders (98.0%) or Wallonia (97.6%). However these differences are not significant after standardisation for age and sex.

**Table 6 – Proportion of patients (15 years old and plus) considering that their physician has provided a clear explanation, by region (2013)**

	General practitioner	Specialist
Flanders	98.3	96.0
Brussels region	97.4	93.2
Wallonia	98.2	95.7

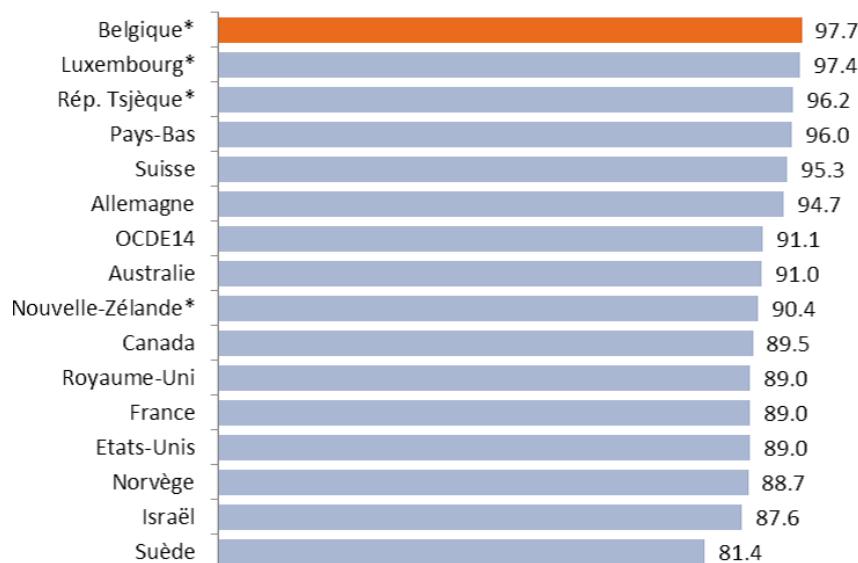
Source: *Health Survey, Belgium*, 2013.<sup>6</sup>



## International comparison

Compared with 13 countries, Belgium ranks first for the clarity of the physician's explanation.

**Figure 6 – Proportion of patients considering that their physician has provided a clear explanation: international comparison (2013)**



Sources: *Health at a Glance, OCDE, 2013 – Health Survey, Belgium, 2013*.<sup>6</sup>

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician

## **Q17. Did this doctor give you an opportunity to ask questions or raise concerns about recommended treatment?**

In Belgium, 97.6% of patients agreed they had the opportunity to ask questions to the doctor or to express their concerns about the treatment, where appropriate. This percentage equals 98.1% for the general practitioner and 95.3% for the specialist. This high rate is found at all ages, and for both sexes.

### **Analysis by socio-economic status**

There are no significant differences by education level concerning the opportunity to ask questions to the general practitioner or to express concerns about treatment. The percentage of patients indicating that they had the opportunity to ask questions or to express their concerns about the treatment with the specialist is lower among patients with the lower education level (88.7%) compared to the higher education level (96.7%). This difference is significant after standardization for age and sex.

### **Analysis by region**

The proportion of patients indicating that they had the opportunity to ask questions or to express their concerns about the treatment with the general practitioner is the same in the three regions. Concerning the specialist, the percentage of patients reporting this opportunity is lower in Brussels than in the other two Regions, but only the difference between Brussels and Wallonia is significant after standardization for age and sex.

**Table 7 – Proportion of patients (15 years old and plus) considering that they had the opportunity to ask questions to their physician or to express their concerns about the treatment, by region (2013)**

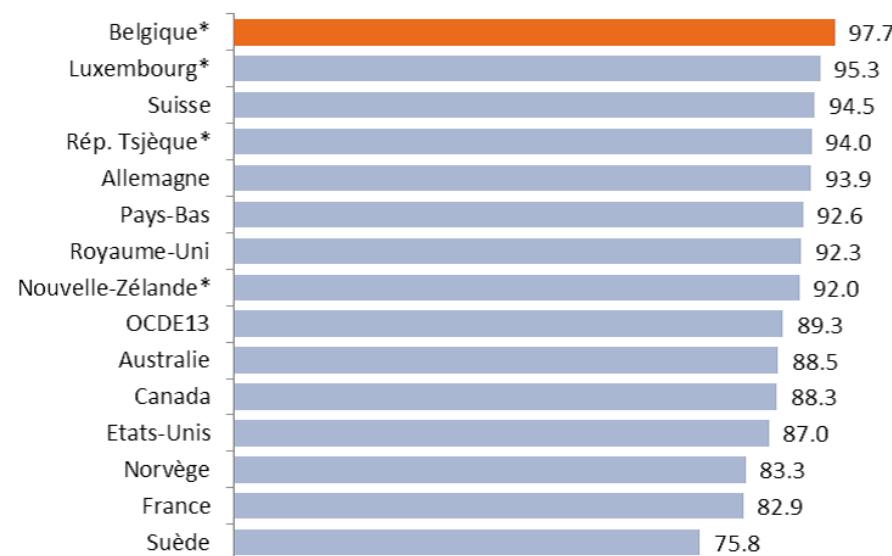
	General practitioner	Specialist
Flanders	98.6	95.4
Brussels region	96.9	91.9
Wallonia	97.4	96.4

Source: *Health Survey, Belgium, 2013*.<sup>6</sup>

## International comparison

Compared with 13 countries, Belgium ranks first for the patient's perception of their opportunity to ask questions to their physician or to express their concerns about treatment.

**Figure 7 – Proportion of patients considering that they had the opportunity to ask questions to their physician or to express their concerns about the treatment: international comparison (2013)**



Sources: *Health at a Glance, OCDE, 2013 – Health Survey, Belgium, 2013*.<sup>6</sup>

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician

## **Q18. Did this doctor involve you as much as you wanted to be in decisions about your care and treatment?**

In Belgium, 95.2% of patients agreed they were sufficiently involved in decisions about their care or treatment, where appropriate. This percentage equals 95.8% for the general practitioner and 92.1% for the specialist. This high rate is found at all ages, and for both sexes.

### Analysis by socio-economic status

There are no significant differences by education level concerning the feeling of involvement in the decision with the general practitioner. The percentage of patients indicating that they were sufficiently involved in decisions about their care or treatment with the specialist is lower among patients with the lower education level (87.1%) compared to the higher education level (93.5%). This difference is significant after standardization for age and sex.

### Analysis by region

The percentage of patients indicating that they were sufficiently involved in decisions about their care or treatment is the same in the three regions, both for the general practitioner and the specialist.

**Table 8 – Percentage of patients (15 years old and plus) considering that they were sufficiently involved in decisions about their care or treatment, by region (2013)**

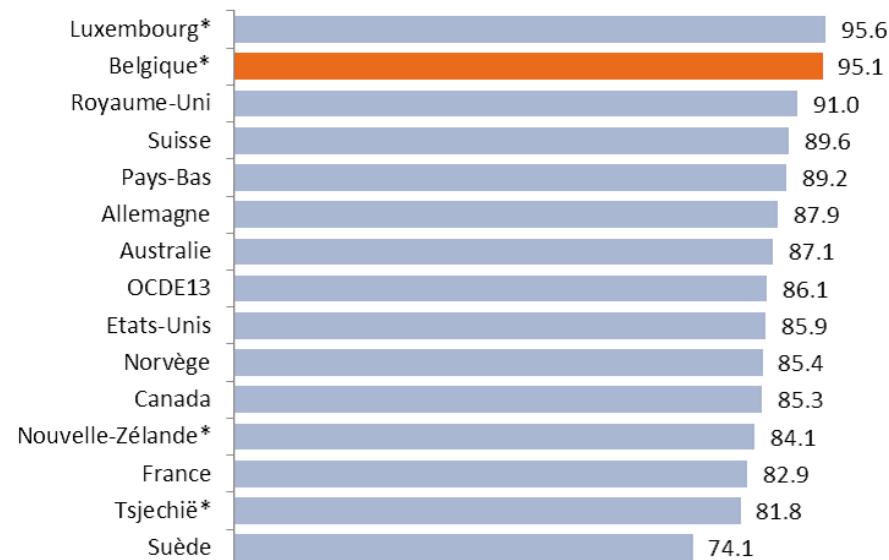
	General practitioner	Specialist
Flanders	96.0	91.8
Brussels region	95.0	92.0
Wallonia	95.8	92.5

Source: *Health Survey, Belgium, 2013*.<sup>6</sup>

## International comparison

Compared with 13 countries, Belgium ranks second for the patients' perception of their involvement in the decision about their care or treatment.

**Figure 8 – Proportion of patients considering that they were sufficiently involved in decisions about their care or treatment: international comparison (2013)**



Sources: *Health at a Glance*, OCDE, 2013 – *Health Survey, Belgium, 2013*.<sup>6</sup>

\*Countries with an asterisk related the experience of the patient with any physician, while for countries without asterisk it is the usual physician

### Key points

- Four items were considered to estimate the patient experiences for both general practitioners and specialists: time spent to the patient by the physician; clarity of explanation; opportunity to ask questions; patient involvement in the decision.
- The patient satisfaction is globally high regarding the four items, both for general practitioners and specialists. No difference was noticed by sex or age.

- Patients with higher education level appear to be slightly more satisfied than patients with lower education level regarding the four items provided by specialist. No difference was found for general practitioners.
- The satisfaction level is lower in Brussels for two items: the time spent to the patient by the general practitioner or specialist and the opportunity to ask questions to the specialist. No significant difference was noticed for the clarity of explanations and the patient involvement in decision.
- As it is the first time that these items were included in the Health interview survey, no trends over time can be currently estimated.
- Comparison with 13 European countries showed that Belgium ranks first for patient satisfaction related to the time spent by their physician during the consultation, the clarity of explanations and the opportunity to ask questions. Belgium ranks second for the patients perception of their involvement in the decision about their care or treatment.

### References

- [1] AHRQ. National Healthcare Quality Report 2010 Agency for Healthcare Research and Quality; 2010. 12 october 2011
- [2] OECD. Health Data 2011. Statistics and indicators for OECD countries. In: Organisation for Economic Co-operation and Development; 2011.
- [3] Bates-Jensen BM, MacLean CH. Quality indicators for the care of pressure ulcers in vulnerable elders. Journal of the American Geriatrics Society. 2007;55(2).
- [4] OECD. Health Care Quality Indicators. OECD pilot questions on patient experiences. Paris: Organisation for Economic Co-operation and Development; 2011.
- [5] Westert G, van den Berg M, Koolman X, Verkleij H. Dutch Health Care Performance Report 2008. National Institute for Public Health and the Environment (RIVM); 2008.
- [6] Van der Heyden J. L'expérience du patient. In: Drieskens S, Gisle L, editors. Enquête de santé 2013. Rapport 3: Utilisation des services de soins de santé et des services sociaux. Bruxelles: WIV-ISP; 2015
- [7] OECD. Health at a Glance 2013. OECD Publishing; 2013.

