Health Care Administrator’s Manual

This brief document is designed to provide key information about the Primary Care Satisfaction Survey for Women (PCSSW) to health care professionals. The technical details of the validity and reliability of PCSSW are documented in the Researcher’s Manual.

Overview of the PCSSW Survey and Services Provided Through the Women’s Healthcare Quality Assessment Center

About the survey: The PCSSW survey is a stand-alone patient satisfaction survey developed to accurately evaluate how well your clinic or practice is providing high-quality women’s health care, from the patient’s perspective. The survey items have been thoroughly tested and empirically validated for your use through academic research grants. We strongly recommend that the original items are used in order to maintain the quality of the survey and accuracy of results. The survey is free for public use without limitation or restriction.

Versions: There are 2 versions of the PCSSW. Version 1 (V1, downloadable as ssw_ver1) contains only the PCSSW items. Version 2 (V2, downloadable as ssw_ver2) includes patient demographic and health visit history items plus the PCSSW. The latter version allows the user to analyze results by patient and visit characteristics.

Items and Scales

The PCSSW includes 24 items forming three scales, each scored separately. An overall score is currently not supported with this tool. To view the items, please visit the Download Center.

Communication: 9 items related to interaction between the patient and the health professional during the visit. (PCSSW V1: Items 1f. to 1n.; PCSSW V2: items IIf. to IIln.)

Administration and Office Procedures: 5 items addressing interactions with the office staff and office environment. (PCSSW V1: Items 1a to 1e; PCSSW V2: items IIa. to IIe.)

Care Coordination and Comprehensiveness: 10 items focused on experience during the past 12 months with regard to referrals, getting all of the care needed, and information and consideration of women’s health topics at the clinic. (PCSSW ver1: Items 2a. to 2j.; PCSSW ver2: Items IIIa. to IIIj.)

Each PCSSW scale item is rated on a five-point scale from “1= not at all satisfied” to “5= extremely satisfied”. A score for each scale is calculated by summing the items, with the individual’s scale mean for non-missing items imputed if there were fewer than 25% missing items on the scale.
**Overall Care:** General items assessing today’s visit and over last 12 months (from the Consumer Assessment of Health Plans Study) are included for your convenience, and may be compared to norms derived from the National Centers of Excellence in Women’s Health.

**Referencing the PCSSW**

We request use of the following credit line when you use this instrument in professional publications, “This survey was developed from a grant from the Agency for Healthcare Research and Quality (R01 HS10237-01A1) and contracts from the DHHS Office of Women’s Health (no. 00T00215901D).”

**How to collect the survey data:** The PCSSW survey data may be collected by telephone interview, by mail, or by point-of-care (either by survey or hand-held computer).

**How to Score the PCSSW**

Each PCSSW item is rated on a five-point scale from “1=not at all satisfied” to “5=extremely satisfied”. A score for each scale is calculated by summing the items, with the individual’s scale mean for non-missing items imputed if there were fewer than 25% missing items on the scale.

We have provided an easy-to-use Microsoft Excel formatted data entry tool to allow data input and scoring. This spreadsheet will calculate your scores for basic reporting purposes. The program does not provide statistical adjustment for patient demographics or other covariables of interest. More advanced users may want to develop programs to compute PCSSW scores in statistical packages such as SAS or SPSS.

**Interpreting PCSSW Results**

The PCSSW tool is intended for both research use and health care improvement applications. The PCSSW score means may be used to test differences between groups or over time. Please refer to the Researcher’s Manual for estimates of means and standard deviations for statistical planning purposes.

**Norms**

The PCSSW score means (both versions) may be qualitatively interpreted from the National Centers of Excellence in Women’s Health norms available free from the Women’s Healthcare Quality Assessment Center (WHQA). The norms reveal typical PCSSW scores among centers with dedicated programs documented to provide high-quality women’s health care compared to community care. As such, the range of PCSSW scale score means obtained by the National Centers of Excellence in Women’s Health may be viewed as representative of high quality of care. By comparing your clinic scores...
to this set of benchmarks (see medians below), you can gauge how close your practice comes to a level of excellence defined by this national program.

The medians and range for the subscale scores are shown below. For this indexing to be valid, your survey will need approximately the following specifications:

A random sample of patient names selected for inclusion
A sample size of N=200 completed surveys per center (or unit of comparison)
A response rate of 60% or greater among those contacted

Staff at the WHQA can provide consultation and advice on the use of indexing.

**PCSSW Medians for the National Women’s Health Centers of Excellence program**

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Median</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Staff and Administration</td>
<td>20.12</td>
<td>19.05 - 22.43</td>
</tr>
<tr>
<td>Provider Communication</td>
<td>30.91</td>
<td>28.41 - 32.46</td>
</tr>
<tr>
<td>Care Coordination</td>
<td>36.25</td>
<td>35.17 - 38.85</td>
</tr>
</tbody>
</table>

**Your Goals**

In addition to norms, we encourage health organizations to adopt internal standards of “excellence” based upon their local expertise and familiarity with primary care practice and quality. PCSSW items may be examined in terms of item response frequencies to determine aspects of care that represent strengths and weaknesses within each subscale. For example, a clinic might set a goal of having > 90% of all patients surveyed report that they are “extremely satisfied” with all aspects of care.

**Indexing:** PCSSW subscale scores may be interpreted by indexing them against results from the National Centers of Excellence in Women’s Health to determine whether your clinic results are similar to those of a national program designed to provide high-quality primary health care to women. The medians and range for the subscale scores are shown above. For this indexing to be valid, your site will need the following specifications:

A random sample of patients drawn to complete the survey
A sample size of N=200 completed surveys per center (or unit of comparison)
A response rate of 60% or greater among those contacted

Staff at the WHQA can provide consultation and advice on the use of indexing and survey design.
Contract Services

Data Collection: If your healthcare organization does not have access to data collection services, the WHQA can provide referrals to both private and academic survey centers from which you may request data collection and fee schedules. Please send us an inquiry or email a request for such assistance to Dr. Roger Anderson (rtanders@wfubmc.edu).

Benchmarking. Statistical benchmarking is available to users of the PCSSW survey. Site comparisons are made with original National Centers of Excellence in Women’s Health program data with adjustment for case-mix (such as age, ethnicity, plan and provider characteristics) to quantitatively determine how well your site has performed in delivering women’s primary care relative to the national program (Note: only pooled site data, without patient or site identifiers, is available). A customized PCSSW Results Report, detailing your clinic or center’s strengths, areas needing improvement, and achievement will be prepared. This service can be obtained, at cost. Contact Dr. Anderson (rtanders@wfubmc.edu) for more information.