

# Conceptualization and Operationalization of a Patient-Centered Measure of Perceived Access

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# 2010 State of the Art (SOTA) Conference

## *Improving Access to VA Care*

- **Co-Chairs**
  - John Fortney, PhD
  - Peter Kaboli, MD
- Principal Deputy Under Secretary for Health
- Assistant Deputy Under Secretary for Health
- Director of Connected Care
- Director Healthcare Transformation Office
- Director Office of Rural Health
- Networks Directors
- Chief Medical Officers
- Chief Research and Development Officer
- Directors of HSR&D and QUERI
- HSR&D Center and MIRECC Directors
- 60 HSR&D and University-based investigators

# Re-conceptualization of Access

- **Access to Care**

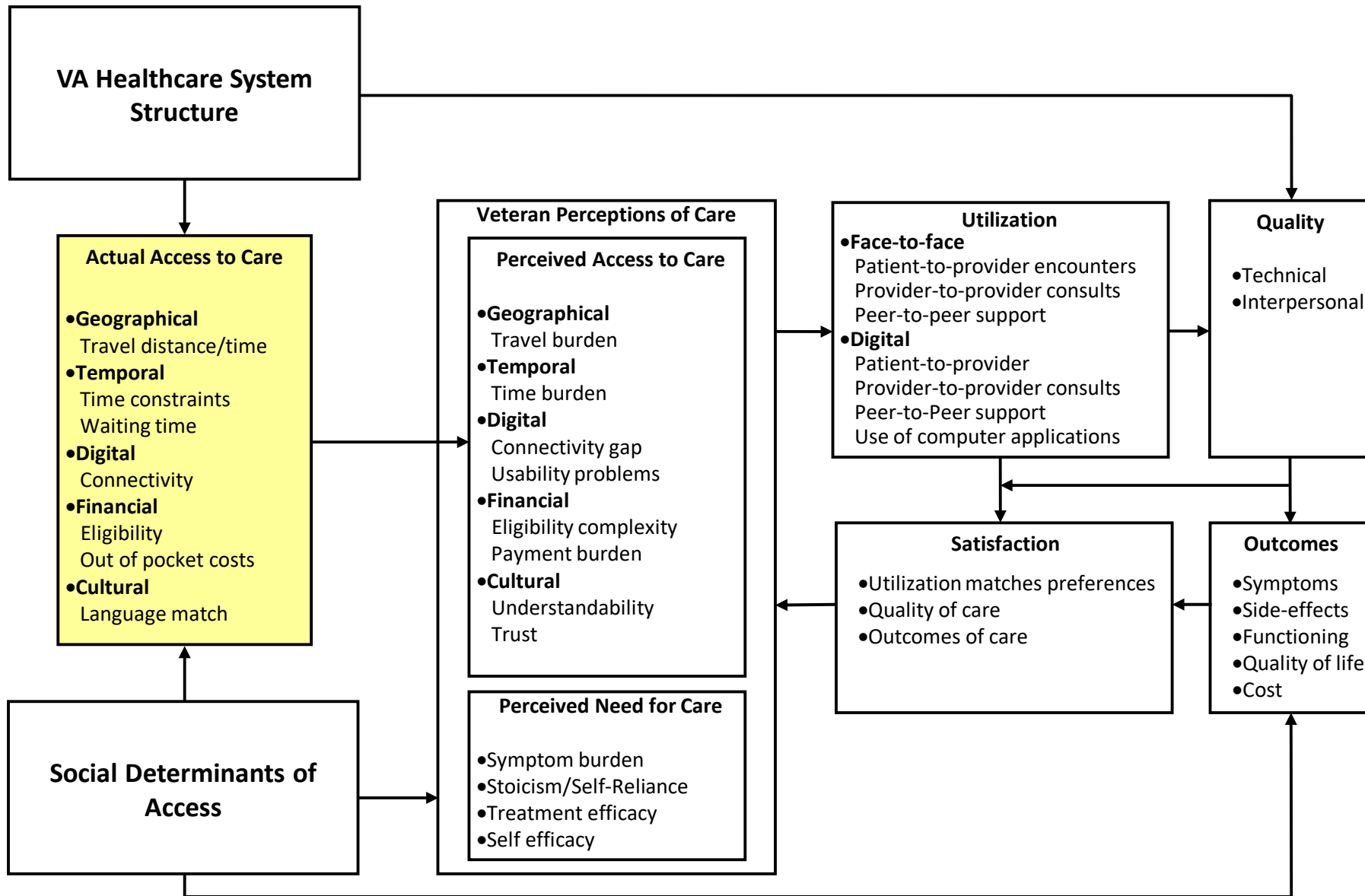
- *represents the opportunity and potential ease of having face-to-face and virtual interactions among a care team (including a patient, and their formal providers, informal caregivers, peers, and computer applications).*

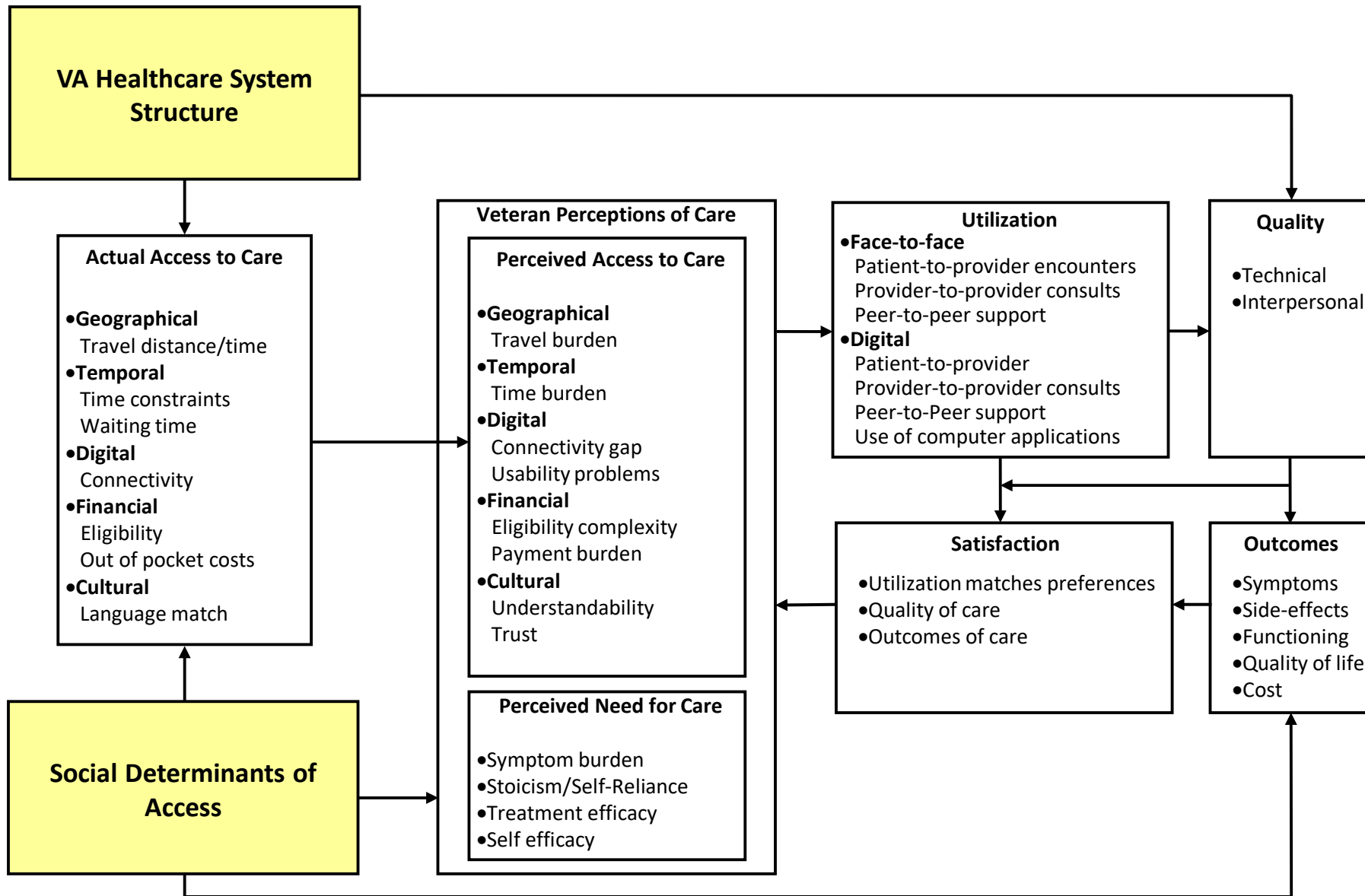
- **Actual Access to Care**

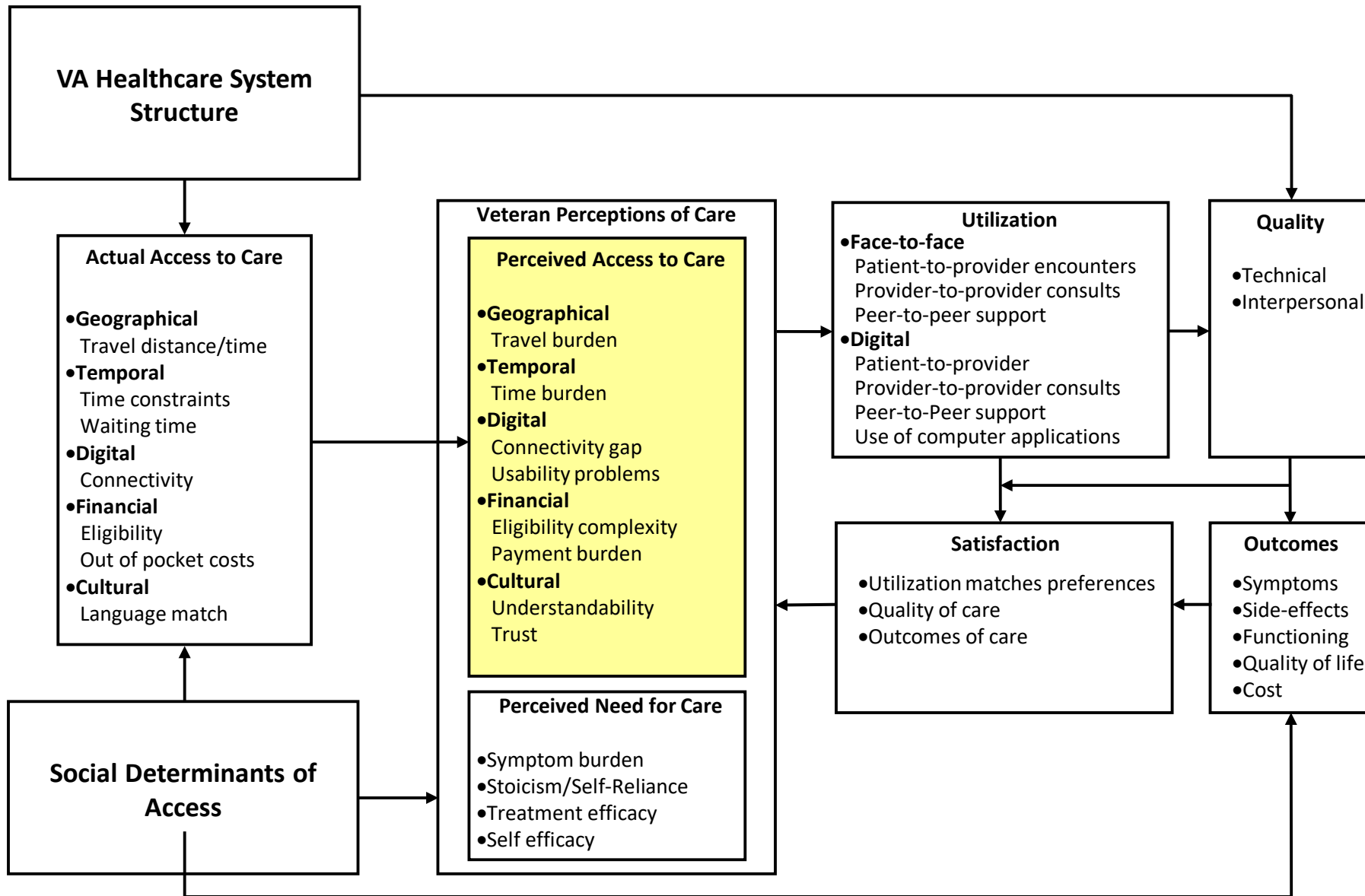
- *represents those directly-observable and objectively measurable dimensions of access that predict perceived access to care.*

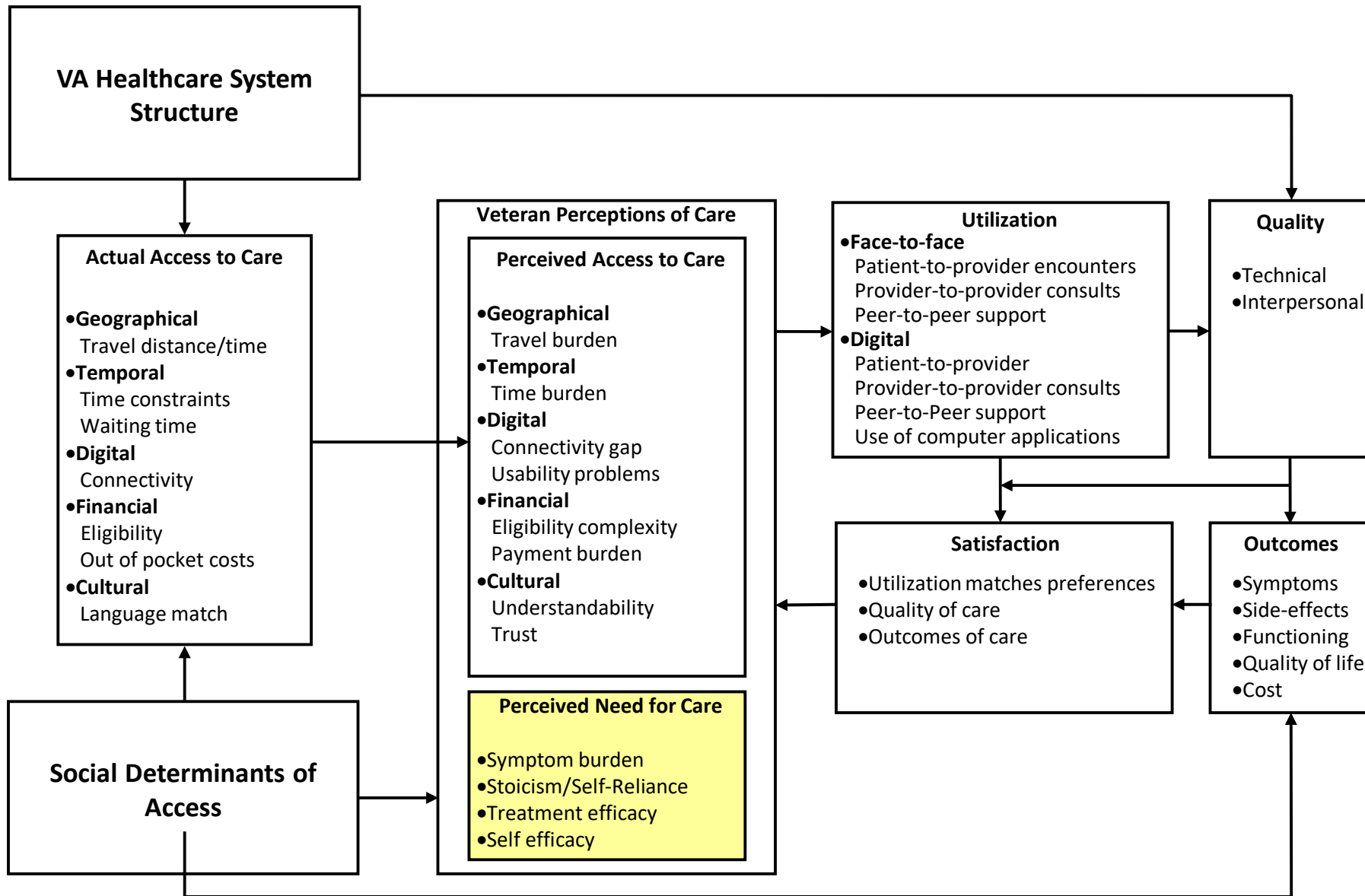
- **Perceived Access to Care**

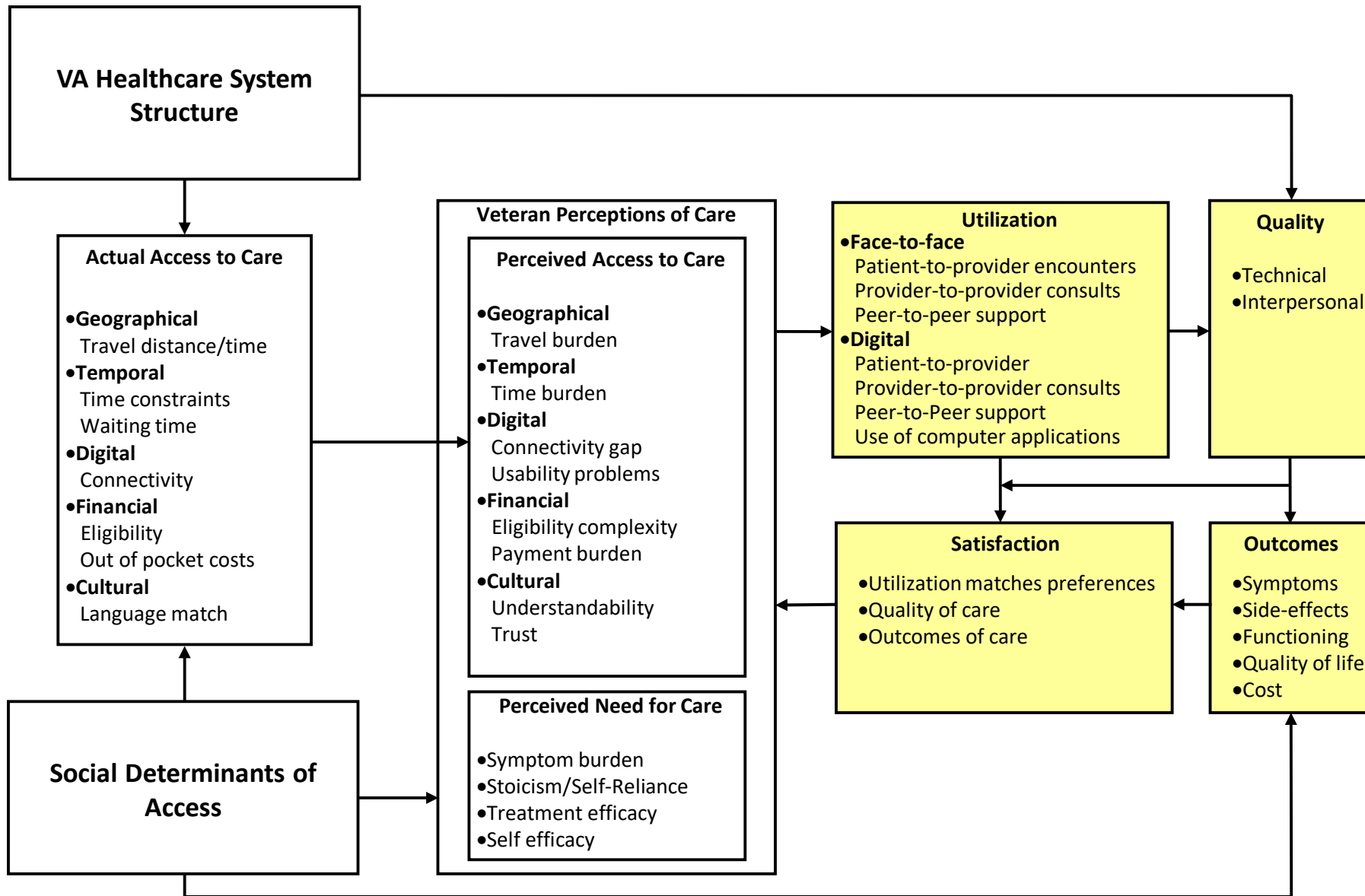
- *represents those self-reported and subjective dimensions of access that predict utilizing healthcare services.*













# Access is not....

- Social Determinants of Access
  - Having insurance
  - Having transportation
  - Having broadband
- Healthcare System Structure
  - After hours clinics
  - Telemedicine
- Attitudinal barriers
  - Self-reliance
  - Stoicism
- Utilization
  - Continuity of care
  - Having a regular source of care
  - Timely use of services
- Quality of care
- Outcomes

# Focus on Actual or Perceived Access

- Actual Access

- Advantages

- *Some* access domains are easy to measure for entire population

- Disadvantages

- Some access domains are impossible to measure
    - Indirectly related to utilization (mediated by perceived access)
    - Gameable

- Perceived Access to Care

- Advantages

- Can measure ALL domains of access
    - Not “gameable”
    - Patient centered
    - Varies according to Veteran’s social determinants and disabilities
    - Directly related to utilization

- Disadvantages

- Requires primary data collection on a sample

# Issues on measuring perceived access

- Access for Whom?
  - Must measure perceived access for a population in *need*
    - Veterans without need for a service will not have accurate perceptions of access
    - Access will not predict utilization for those without need
- Access to What?
  - Must measure perceived access to services which the patient can recognize
    - Facility (e.g., VAMC or CBOC)
    - Easily recognizable treatments (e.g., mental health counseling)
    - Services that are wanted/needed for a specific disorder (e.g., PTSD)

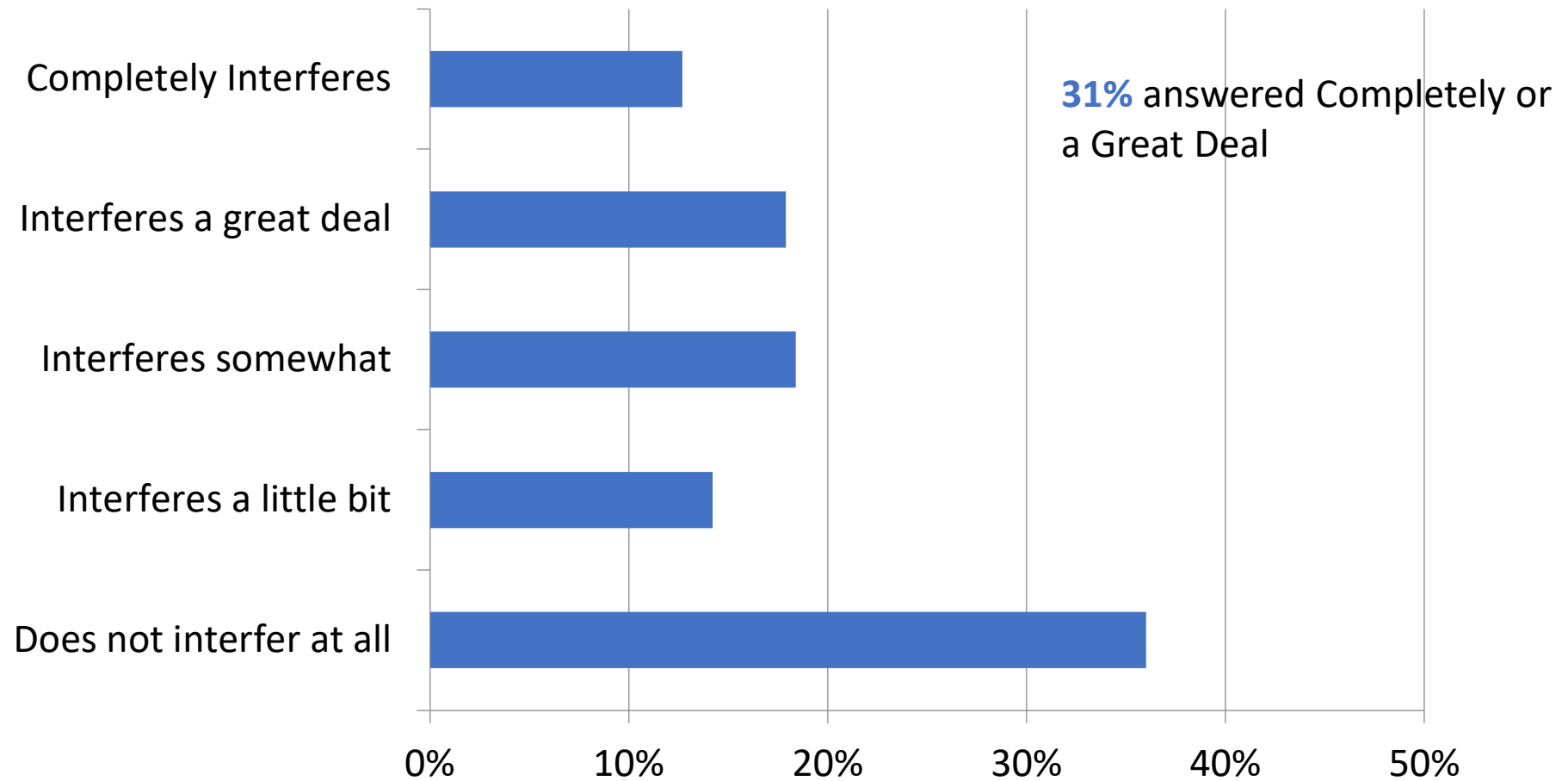
# Measuring Perceived Access: *The example of TRUST*

- VA - Implementing Telemedicine Outreach for PTSD (TOP)
  - Survey of 600 rural Veterans with PTSD not engaged in specialty mental healthcare
- VA – Perceived Access Inventory
  - Qualitative interviews with 80 Veterans with depression, PTSD and/or alcohol use disorder
  - Survey of 100 Veterans with depression, PTSD, and/or alcohol use disorder both using and not using mental health services
- Federally Qualified Health Centers – SPIRIT trial
  - Survey of 1000 primary care patients with PTSD and/or bipolar disorder

# TOP Implementation Study (VA)

1. How much does lack of trust in VA providers interfere with getting the PTSD services you want?
  - *Completely interferes*
  - *Interferes a great deal*
  - *Interferes somewhat*
  - *Interferes a little bit*
  - *Does not interfere at all*

# Lack of trust in VA providers



# Perceived Access Inventory (VA)

Did you ever lack trust in any of your VA mental healthcare providers?

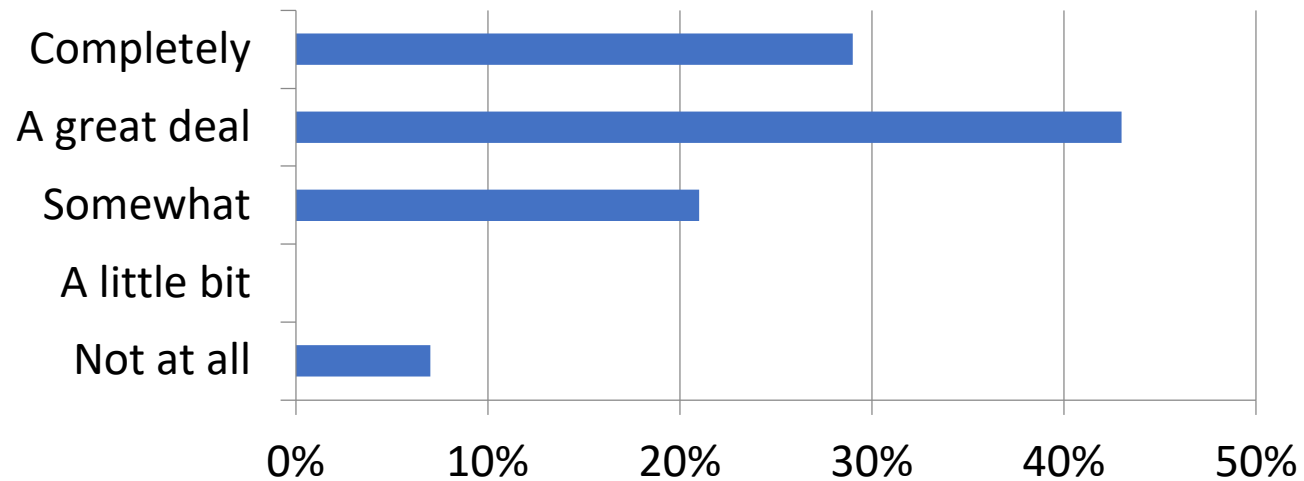
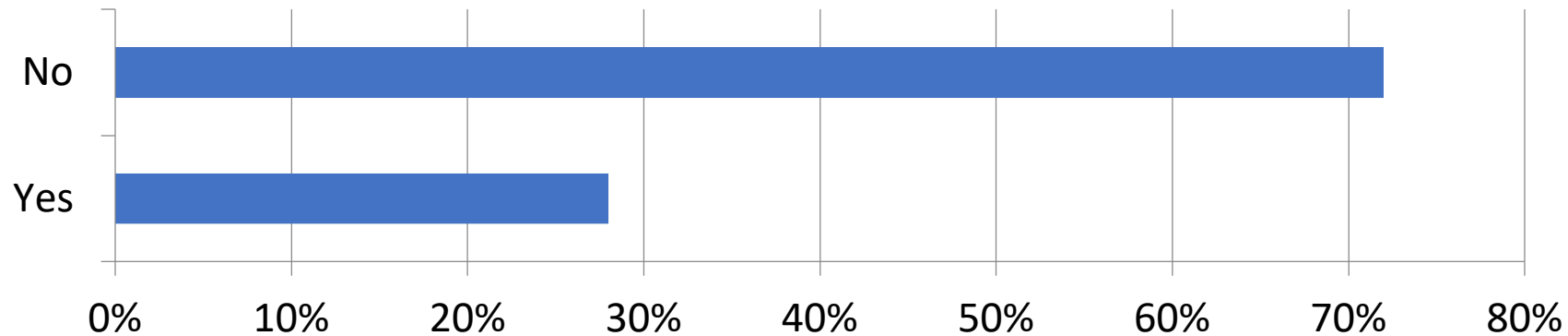
Yes

No (*skip to next question*)

How much did that interfere with getting the VA mental healthcare you needed?

- Completely
- A great deal
- Somewhat
- A little bit
- Not at all

# Lack of trust in VA providers



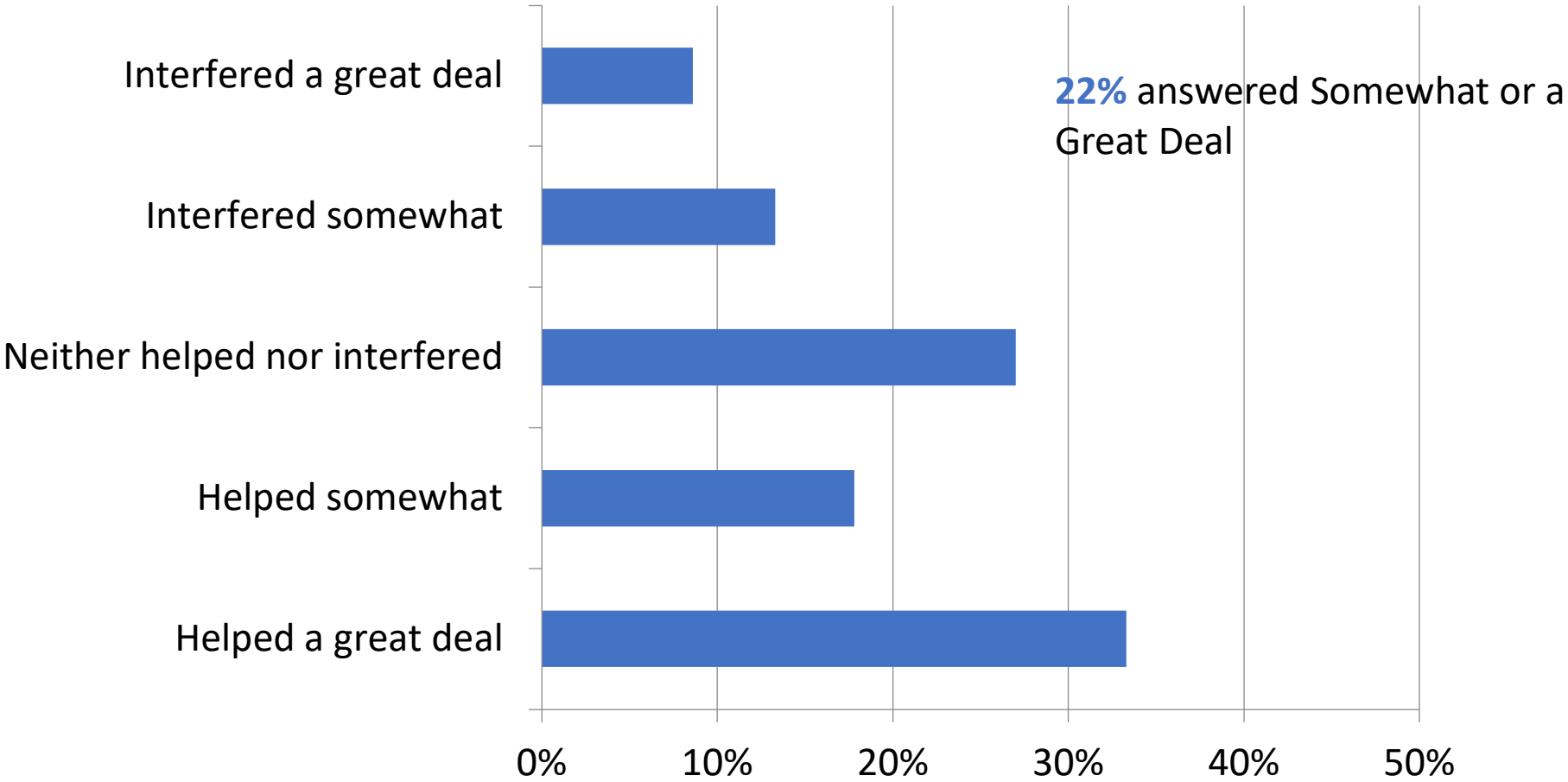
**20%** answered Yes to Part 1 and Completely or a Great Deal to Part 2.



# SPIRIT Trial (Federally Qualified Health Centers)

1. How much did your trust in providers affect getting the mental health care you needed?
  - *Helped a great deal*
  - *Helped somewhat*
  - *Neither helped nor interfered*
  - *Interfered somewhat*
  - *Interfered a great deal*

# Trust in Community Health Center Providers



# Questions and Comments