

19. PATIENTS EXPERIENCES WITH AMBULATORY HEALTHCARE SERVICE (QP-1, QP-3, QP-4)

19.1. Documentation sheet

Description	Patients experiences with ambulatory care:				
•	QP-1: Physician spending enough time with patients during the consultation (% of respondents, contact with doctor (GP or SP))				
	QP-3: Physician giving opportunity to ask questions or raise concerns (% of respondents, contact with doctor)				
	QP-4: Physician involving patients in decisions about care and/or treatments (% of respondents, contact with doctor)				
Calculation	Numerator : number of respondents (≥ 15 years old) who answered to the HIS (2013 or 2018) and who reported they had a good relational experience during the last contact with either a general practitioner (GP) or a specialist (SP) in ambulatory care (GP or specialist depending on which ambulatory health care provider was contacted last).				
	Denominator : number of respondents (≥ 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. 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. In 2011, the OECD has edited a questionnaire on patient experiences with some questions related to the quality of the consultation. On the request of the Federal Public Service Public Health, the Belgian Scientific Institute of Public Health (Sciensano) includes since the Health interview survey 2013 the OECD instrument dedicated to the patient experiences with ambulatory care.				
Data source	HIS 2013, HIS 2018 and HISLink data.				
	In the HISLink project, Sciensano performed a linkage between Health Interview Survey (HIS) 2013/2018 and IMA – AIM data (2013-14/2018), partly to verify the HIS reporting on the use of care but also to overcome the shortcomings of the health insurance data (e.g. information on non-reimbursed health care use is lacking, no link between health care use and health needs, information on socio-demographic background characteristics is scarce). Data extracted from the HIS are covering the following topics: socio-demographic characteristics, health status, lifestyle and health care use.				
Technical definitions	Question based on the OECD module ² :				
	Now, refer to the last time you had a consultation either with a GP; either with a specialist:				
	QP1. Did this doctor spend enough time with you?				
	QP2. Did this doctor explain things in a way that was easy to understand? (indicator not retained in the final list of indicators in this report, see Devos et al. 2019 ³ for results)				
	QP3. Did this doctor give you an opportunity to ask questions or raise concerns about recommended treatment?				
	QP4. Did this doctor involve you as much as you wanted to be in decisions about your care and treatment?				
	Chronic definitions:				

166

	1) HIS: The number of persons reporting to suffer from a chronic disease by answering "yes" to the following question in the HIS; the denominator is the number of respondents of the following question in the HIS (MA_SH02): "Do you suffer from a chronic disease or affection?".
	2) IMA – AIM: Individuals entitled to the status chronic illness. Entitlement is observed through data from the InterMutualistic Agency (IMA – AIM), variables pp3015, pp3016 or pp3017 (see ⁴ for definition of the variables). If the value for one of these 3 variables is equal to 1 or 2, the individual has an entitlement and is assumed to suffer from a chronic condition.
Limitations	It remains subjective assessment
	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.
	Less than 15 years are excluded.
International comparability	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 organisation, etc.) may have an impact on the outcome of the result.
Dimensions	Patient centredness (Providers skill of communication/Explaining ability); Ambulatory care

19.2. Results

QP1. Did the doctor spend enough time with you?

According to the Belgian HIS 2018, 97.5% (95% Confidence Interval (CI): 97.0-97.9) of patients mentioned their doctor (GP or specialist) spent enough time with them during the consultation; this percentage equals that of 2013. A lower satisfaction is reported by young adults (25-44 years: ~96%) than by the very young (15-24 years: 98.3%) and the oldest (≥45 years: ≥97%) (see Table 34).

By province in 2018, the stratification with time spent by the doctor is the highest in West-Vlaanderen (99.0%) and Antwerpen (98.5%) and the lowest in Liège (96.1%) and Brussels (95.9%) (see Figure 55).

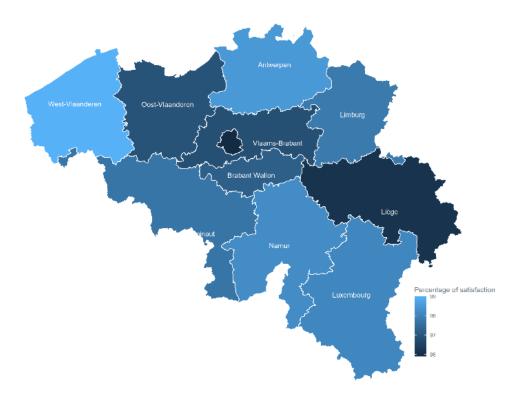
Table 34 – Percentage of satisfaction with time spent by the doctor, by age-group, by year

ago giodoj b		2013	2018		
Age group	%*	95% CI	%*	95% CI	
15-24	98.1	96.8;99.4	98.3	96.7;99.9	
25-34	97.0	95.7;98.3	96.1	94.6;97.6	
35-44	97.8	96.3;99.3	96.5	95.2;97.8	
45-54	96.9	95.4;98.5	98.0	97.2;98.8	
55-64	97.3	97.2;99.2	98.1	97.2;99.0	
65-74	98.2	96.0;99.0	98.1	97.2;99.0	
75+	97.5	96.0;99.0	97.0	95.4;98.5	
Total	97.5	96.9;98.0	97.5	97.0;97.9	

Data: Sciensano, *weighted percentage

8

Figure 55 – Percentage* of satisfaction with time spent by the doctor, by province, 2018



Data: Sciensano, *weighted percentage, Figure: KCE



Analysis by chronic status (entitled to chronic illness status or self-reported chronic disease)

The satisfaction trend differs according to the chronic status. Indeed, among patients without chronic disease (self-reported or no entitlement), satisfaction with the time spent by the doctor deteriorated between 2013 and 2018 (especially among self-reported patients without chronic disease - HIS). Whereas among chronic patients (self-reported, entitled or both), satisfaction increased between 2013 and 2018, this is particularly the case among patients with both chronic disease statuses (+4.4 points of percentage between 2013 and 2018) (see Figure 56 and Table 35). As a result, in 2018, the satisfaction was similar between chronic and non-chronic patients (both based on the entitlement to the chronic illness status or based on self-reported chronic disease).

The analysis by region shows that the satisfaction with time spent by the doctor among patients entitled to the status chronic illness increased in Flanders and Brussels and decreased in Wallonia (2013 versus 2018). In 2018, the satisfaction is the highest in Flanders (98.3%) and similarly lower in Brussels and Wallonia (96.7%) (see Figure 57 and Table 35). Among the population not entitled to the chronic illness status, the satisfaction

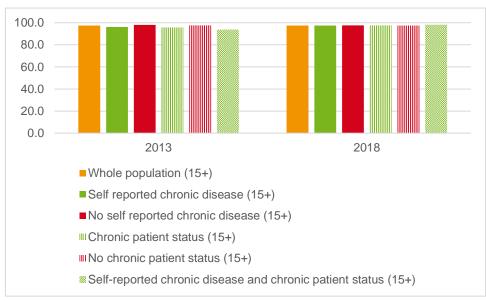
decreased in Flanders and Wallonia and increased in Brussels (2013 versus 2018). In 2018 in Flanders and Brussels, the satisfaction with time spent by the consulted physician is higher in patients entitled to the chronic illness status than in the patients not entitled to chronic status. In Wallonia, the percentage of satisfaction is higher in patients not entitled to the chronic status (see Figure 57 and Table 35).

For the self-reported chronic patients (HIS), the satisfaction increased in every region between 2013 and 2018 and decreased in every region for the non-chronic patients (see Figure 58 and Table 35). In Brussels and Flanders, the patients with self-reported chronic disease are more frequently satisfied than the patients without chronic disease.

Overall, the patients with both chronic status (HIS and RIZIV – INAMI) are even more satisfied (2018: 98.2%) than the patients with only one chronic status (2018: HIS: 97.4% or RIZIV – INAMI: 97.6%). The same observation is made in Flanders and Wallonia. Whereas in Brussels, the percentage of patients satisfied with time spent by the doctor is the highest in the persons entitled to the chronic illness status, but the differences are low (see Table 35).

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Figure 56 – Proportion of satisfied patients (15 years old and plus) about the time spent by their physician during consultation, by chronic status, by year



Data: Sciensano (HISLink); Figure: KCE

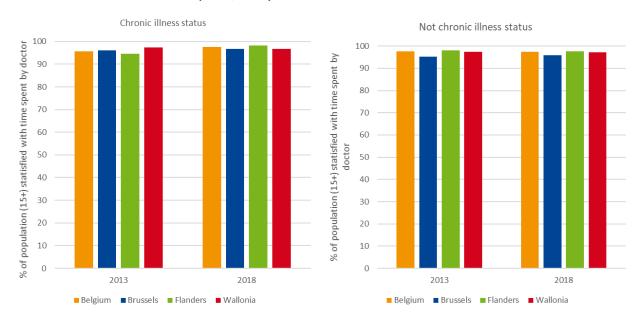
Table 35 – Proportion of satisfied patients (15 years old and plus) about the time spent by their physician during consultation, by region and chronic status (2013, 2018)

		Belgium			
		2013		2018	
	%	% 95% CI % 9		95% CI	
All population	97.5	96.9;98.0	97.5	97.0;97.9	
Self-reported chronic disease	96.2	94.8;97.5	97.4	96.7;98.2	
No self-reported chronic disease	98.1	97.5;98.7	97.6	97.0;98.1	
Chronic illness status	95.7	93.1;98.3	97.6	96.4;98.8	
No chronic illness status	97.6	97.1;98.2	97.4	96.9;97.9	
Self-reported chronic disease and chronic illness status	93.8	90.0;97.7	98.2	91.1;99.3	
		Brussels			

		2013		2018
	% !	95% CI	%	95% CI
All population	96.0	94.7;97.2	95.9	94.9;97.0
Self-reported chronic disease	95.8	93.7;98.0	96.5	94.9;98.1
No self-reported chronic disease	95.7	93.8;97.6	95.4	93.9;96.9
Chronic illness status	96.1	92.7;99.4	96.7	94.5;98.9
No chronic illness status	95.3	93.8;96.9	95.9	94.7;97.1
Self-reported chronic disease and chronic illness status	97.5	93.8;100.0	95.6	92.2;99.0
		Flan	ders	
		2013		2018
	% !	95%CI	%	95%CI
All population	97.9	97.1;98.6	97.8	97.2;98.5
Self-reported chronic disease	96.5	94.6;98.4	98.0	97.0;98.9
No self-reported chronic disease	98.6	97.9;99.3	98.0	97.2;98.7
Chronic illness status	94.6	90.4;98.9	98.3	96.8;99.9
No chronic illness status	98.1	97.4;98.8	97.7	97.1;98.4
Self-reported chronic disease and chronic illness status	92.6	86.9;98.4	98.6	97.0;100
		Wallonia		
		2013		2018
	% !	95% CI	%	95% CI
All population	97.2	96.2;98.1	97.2	96.4;98.0
Self-reported chronic disease	95.6	93.4;97.9	96.9	95.4;98.3
No self-reported chronic disease	97.5	96.4;98.7	97.4	96.4;98.5
Chronic illness status	97.4	95.0;99.7	96.7	94.3;99.1
No chronic illness status	97.3	96.2;98.4	97.2	96.4;98.1
Self-reported chronic disease and chronic illness status	95.4	91.3;99.5	98.3	96.9;99.8

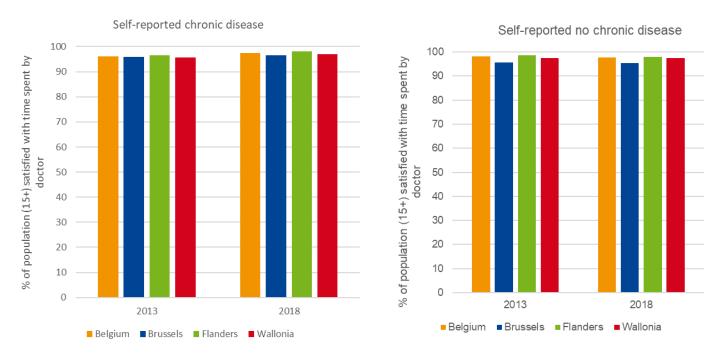
Source: Health Interview Survey, Belgium, 2013;2018.5

Figure 57 – Proportion of satisfied patients (15 years old and plus) about the time spent by their physician during consultation, by region and RIZIV – INAMI chronic illness status (2013, 2018)



Data: Sciensano (HISLink), Figure : KCE

Figure 58 – Proportion of satisfied patients (15 years old and plus) about the time spent by their physician during consultation, by region and HIS chronic status (2013, 2018)



Data: Sciensano (HISLink), Figure: KCE

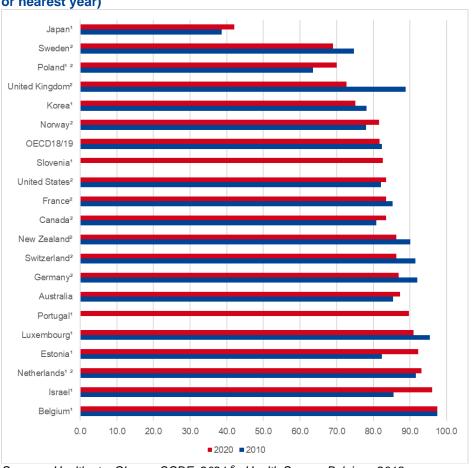
International comparison

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 2021.6 Twenty countries are compared. 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 2020 as possible). Compared with 20 countries, Belgium ranks first for patient satisfaction related to the time spent by their physician during consultation.

No specific analysis is nevertheless performed for chronic patients (compared to non-chronic patients) internationally.

Figure 59 – Proportion of satisfied patients concerning the time spent by their physician during consultation: international comparison (2013-2020 or nearest year)



Sources: Health at a Glance, OCDE, 2021 6- Health Survey, Belgium, 2018.

1. Data from national sources. 2. Data refer to patient experiences with regular doctor or regular practice.

QP3 - Did the doctor give you an opportunity to ask questions or raise concerns about recommended treatment?

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. This high rate is found at all ages but a little lower in the 75+ (96.0%). The rate of satisfaction is stable since 2013 (see Table 36).

Table 36 – Percentage of the patient population aged 15 years and over who report that the doctor gave the opportunity to ask questions or raise concerns about recommended treatment

		2013	2	2018
Age group	% *	95% CI	% *	95% CI
15-24	98.3	97.0;99.6	97.7	95.7;99.7
25-34	97.3	96.0;98.6	97.6	96.4;98.8
35-44	98.4	97.6;99.2	96.8	95.6;98.0
45-54	97.0	95.7;98.3	97.9	97.0;98.7
55-64	98.2	97.4;99.1	97.7	96.4;99.1
65-74	97.6	96.4;98.8	98.4	97.6;99.3
75+	96.3	94.4;98.3	96.0	94.3;97.6
Total	97.6	97.2;98.1	97.5	97.0;98.0

Data: Sciensano, *weighted percentage

By chronic status (entitled and self-reported)

Among patients with self-reported chronic disease, satisfaction with the opportunity to ask questions slightly increased between 2013 and 2018 (+ 1 point of percentage) and slightly deteriorated among patients entitled to chronic illness status and non-chronic patients. But in general, satisfaction with the opportunity to ask questions or raise concerns about treatment does not vary much between 2013 and 2018 and by chronic status (see Figure 60; Table 37).

In 2018 among the patients entitled to the status chronic illness, the satisfaction is the highest in Flanders (98.3%), followed by Brussels (96.7%) and Wallonia (96.6%) and stayed stable between 2013 and 2018 (see Table 37). Among the population not entitled to the chronic illness status, the satisfaction slightly decreased in Flanders and Brussels and increased in Wallonia (2013 vs 2018). In 2018 in Flanders and Brussels, the satisfaction in patients entitled to the chronic illness status is higher than in the patients not entitled to chronic status. In Wallonia, the percentage of satisfaction is higher in patients not entitled to the chronic status (see Table 37).

For the self-reported chronic patients (HIS), the satisfaction increased in Flanders and Wallonia and decreased in Brussels (2013 vs 2018) and decreased in Flanders and increased in Brussels and Wallonia for the non-chronic patients. However, the differences in satisfaction between years are small (see Table 37).

Overall, the patients with both chronic status (HIS and RIZIV – INAMI) are even more satisfied (2018: 97.3%) than the patients with only one chronic status (2018: HIS: 97.1% or RIZIV – INAMI: 96.6%). The same observation is made in Wallonia. Whereas in Brussels and Flanders, the percentage of patients satisfied is the highest for persons entitled to the RIZIV – INAMI chronic illness status (see Table 37).

5

Figure 60 – Percentage of the patient population aged 15 years and over who report that the doctor gave the opportunity to ask questions or raise concerns about recommended treatment, by chronic status and year

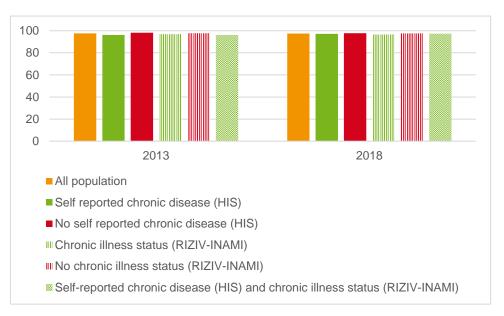
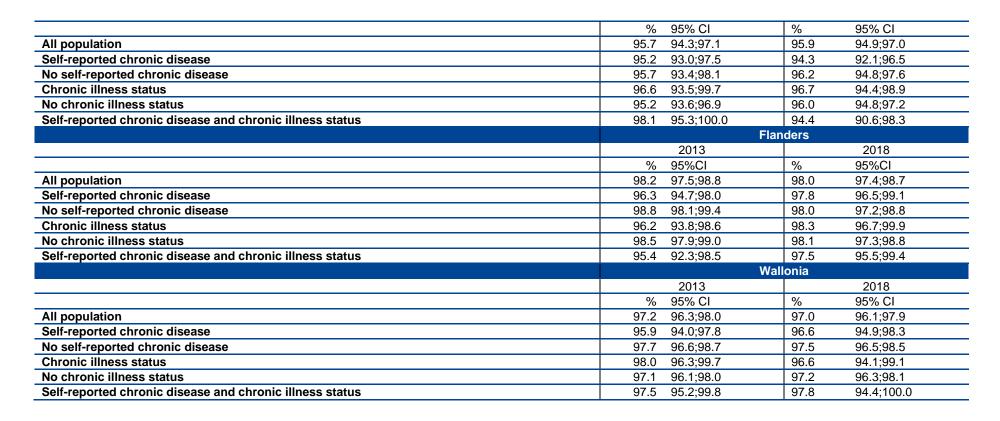


Table 37 – Percentage of the patient population aged 15 years and over who report that the doctor gave the opportunity to ask questions or raise concerns about recommended treatment

		Belgium			
		2013 2018		2018	
	%	% 95% CI % 95		95% CI	
All population	97.6	97.2;98.1	97.5	97.0;98.0	
Self-reported chronic disease	96.1	94.9;97.3	97.1	96.1;98.0	
No self-reported chronic disease	98.2	97.7;98.8	97.7	97.1;98.3	
Chronic illness status	96.9	95.4;98.4	96.6	95.1;98.1	
No chronic illness status	97.8	97.3;98.2	97.6	97.1;98.1	
Self-reported chronic disease and chronic illness status	96.2	94.1;98.3	97.3	95.7;99.0	
		Brussels			
		2013 2018			



International comparison

Since 2013, no update of the international comparison has been performed by OECD. In 2013, compared with 13 countries, Belgium ranked first for the patient's perception of their opportunity to ask questions to their physician or to express their concerns about treatment (for additional results see ³). No specific analysis is nevertheless performed for chronic patients (compared to no chronic patients) internationally.

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

In Belgium. 95.4% of patients agreed they were sufficiently involved in decisions about their care or treatment, where appropriate. This percentage is slightly higher than in 2013 (95.2%). This high rate is found at all ages (see Table 38), and for both sexes.

Table 38 – Percentage of the patient population aged 15 years and over who report that they were sufficiently involved in decisions of the doctor about care and treatment, by year

		2013	2	2018
Age group	% *	95% CI	% *	95% CI
15-24	94.9	92.3;97.4	94.9	92.0;97.7
25-34	94.6	92.7;96.6	94.9	93.2;96.7
35-44	95.6	93.9;97.3	94.2	92.3;96.0
45-54	94.9	93.1;96.6	95.4	93.8;97.0
55-64	95.2	93.3;97.0	96.6	95.4;97.8
65-74	95.9	93.4;97.7	97.4	96.3;98.5
75+	95.5	93.4;97.7	94.2	92.0;96.5
Total	95.2	94.4;95.9	95.4	94.8;96.1

By chronic status (entitled and self-reported)

The patient satisfaction with the involvement in decisions of the doctor slightly increased between 2013 and 2018 regardless of the chronic illness status (see Table 39). Overall the satisfaction in patients with chronic illness status (95.8%) is higher than the patients who are not entitled to the chronic illness status (95.4%).

In 2018 among the patients entitled to the status chronic illness, the satisfaction is the highest in Flanders (96.9 %), followed by Wallonia (94.6%) and Brussels (93.5%) (see Table 39).

For the self-reported chronic patients (HIS), the satisfaction is the highest in Flanders (95.1%), followed by Wallonia (93.6%) and Brussels (91.8%). In contrast to the results of the satisfaction among patients entitled to the chronic illness status, the self-reported chronic patients are less satisfied than the patients who do not self-report chronic disease (see Table 39).

Table 39 – Percentage of the patient population aged 15 years and over who report that they were sufficiently involved in decisions of the doctor about care and treatment, by year and chronic status

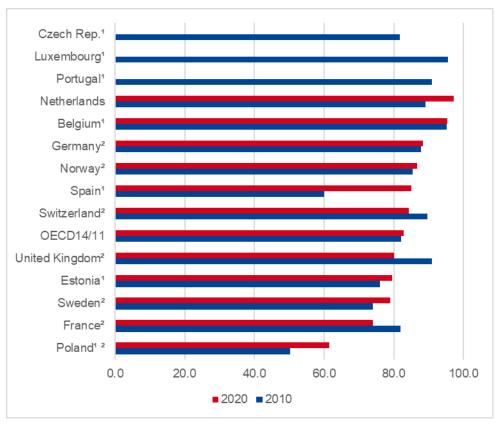
about care and treatment, by year and chronic status	Belgium				
		2013		2018	
	%	95% CI	%	95% CI	
All population	95.2	94.4;95.9	95.4	94.8;96.1	
Self-reported chronic disease	93.2	91.6;94.9	94.3	92.9;95.6	
No self-reported chronic disease	95.7	94.7;96.7	96.1	95.3;96.9	
Chronic illness status	94.7	92.8;96.6	95.8	94.2;97.4	
No chronic illness status	95.3	94.5;96.2	95.4	94.6;96.1	
Self-reported chronic disease and chronic illness status	94.1	91.6;96.7	96.2	94.3;98.1	
		Brus	sels		
		2013		2018	
	%	95% CI	%	95% CI	
All population	94.3	92.8;98.8	93.8	92.6;95.1	
Self-reported chronic disease	93.4	90.5;96.2	91.8	89.3;94.2	
No self-reported chronic disease	94.3	91.9;96.7	94.1	92.4;95.7	
Chronic illness status	94.4	90.3;98.5	93.5	90.5;96.5	

No chronic illness status	94.2	92.5;95.9	94.1	92.8;95.5
Self-reported chronic disease and chronic illness status	96.0	91.8;100.0	91.4	86.9;95.9
		Flanc	lers	
		2013		2018
	%	95%CI	%	95%CI
All population	95.4	94.3;96.4	96.0	95.2;96.9
Self-reported chronic disease	93.1	90.8;95.5	95.1	93.3;96.8
No self-reported chronic disease	95.8	94.5;97.1	96.6	95.6;97.5
Chronic illness status	94.3	91.4;97.1	96.9	95.1;98.7
No chronic illness status	95.6	94.4;96.7	95.8	94.9;96.8
Self-reported chronic disease and chronic illness status		89.6;96.9	97.3	95.3;99.3
		Wallo	onia	
		2013		2018
	%	95% CI	%	95% CI
All population	95.1	93.9;96.3	94.8	93.5;96.1
Self-reported chronic disease	93.4	90.8;96.0	93.6	91.0;96.1
No self-reported chronic disease	95.6	94.0;97.3	95.8	94.1;97.4
Chronic illness status	95.5	92.9;98.3	94.6	91.0;98.1
No chronic illness status	95.1	93.8;96.5	94.8	93.3;96.3
Self-reported chronic disease and chronic illness status	95.6	92.0;99.2	95.6	91.5;99.8

International comparison

Compared with 11 countries in 2020. Belgium ranks second for the patients perception of their involvement in the decision about their care or treatment. No specific analysis is nevertheless performed for chronic patients (compared to non-chronic patients) internationally.

Figure 61 – Proportion of patients considering that they were sufficiently involved in decisions about their care or treatment: international comparison 2010-2020 (or nearest)



Sources: Health at a Glance, OCDE, 2021 ⁶– Health Survey, Belgium, 2018.

1. Data from national sources. 2. Data refer to patient experiences with regular doctor or regular practice.



Key points

- Three items were considered to estimate the patient experiences with doctors: the time spent by the physician, the opportunity to ask questions and the patient involvement in the decision.
- The patient satisfaction is high regarding the three items regardless of the age group, region and chronic status. Overall, the satisfaction is lower for the involvement in the decisions of the doctor than for the two other items (time spent and opportunity to ask questions).
- Comparison with other countries showed that Belgium ranks first for patient satisfaction related to the time spent by their physician during the consultation and second in the patients perception of their involvement in the decision about their care or treatment.

The analysis by chronic status highlighted that:

- 1. Patients with both status (HIS and RIZIV INAMI) are even more satisfied than the patients one chronic status (HIS or RIZIV INAMI).
- 2. Overall the satisfaction with the opportunity to ask questions or raise concerns about treatment does not vary much by chronic status. The satisfaction is very high, regardless of chronic status, region or year.
- 3. In Flanders, the patients entitled to the chronic illness status are more frequently satisfied with the involvement in decisions of the doctor about treatment and care than the patients not entitled to the chronic illness status. When it comes to self-reported chronic disease status, it is the patients without chronic disease who are more frequently satisfied than the patients with chronic diseases, regardless of the region.

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