

The Pulse of the Nation

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You've seen her on "CBS News" and "Good Morning America" and on every election eve. Her company, American Viewpoint, regularly takes the "pulse of the nation" to sort out the public's attitudes on everything from the economy to medication safety. Although I cannot do justice to her dynamic in-person presentations, Linda DiVall has the ear of Washington insiders. I had the privilege of seeing Linda in person during our joint appearances at a recent meeting of the Federation of American Hospitals, the national umbrella organization representing the for-profit hospital sector in Washington, DC.

I would like to summarize some of the highlights from her presentation, with a special emphasis on her focus on a national survey of health care issues. You will get to read what the Washington policymakers hear about on a regular basis.

It looks as though losing health care benefits and being able to pay for a family's health care are quickly becoming key economic issues for voters this year. More voters said that losing their health care benefits was a great concern to them, even when compared with "having enough money to retire" or "losing my job" or "having my pay reduced."

Clearly, health care is now at the top of the national agenda. Let us continue our review of the pulse of the nation, and we will slowly shift from a national perspective on the economy to the public's concern over receiving the wrong medication during a hospital stay.

According to Ms. DiVall's research, hospitals still enjoy a generally positive rating from the public at large. While firefighters and paramedics top the list of people and organizations that are viewed favorably by the public, emergency-room workers and hospitals workers are still in the top six or seven categories, receiving what survey experts call "perceptual" positive support. Pharmaceutical companies, regrettably, are far down on the list, just above trial lawyers.

Surprisingly, the level of satisfaction with hospital visits remains high, and nearly 73% of adults questioned say that they have been totally satisfied with a recent hospital experience. It is clear, however, that our professional concern about medical errors and patient safety is beginning to permeate the consciousness of the general public.

Specifically, Ms. DiVall's work demonstrates that 85% of adults say that they have recently seen, read, or heard something about the commission of medical errors by hospitals, doctors, and nurses. Of that group, 53% report that they are very concerned about these problems. The only issue resonating at a higher level is the rising overall cost of health care and the need for a drug benefit for Medicare beneficiaries. In short, the public seems to be very well tuned in to major national issues facing our industry.

I am also happy to report that the respondents say the quality of care is viewed as the most important factor in hospital selection, far ahead of mandated decisions or the geographical location of the services. In other words, quality of care significantly outranked other choices, such as a "hospital that is closest to one's home or even one recommended by my physician." After consumers have selected a hospital, they continue to have concerns about being given the wrong medication during a hospital stay.

For example, 44% of all those questioned said they were worried about receiving the wrong medication in the hospital, with African-Americans far more concerned than any other group. Concurrently, the public worries about the possibility of contracting an infection during a hospitalization, and this particular concern has grown dramatically since calendar year 2001. I interpret this to mean that we have effectively transmitted the message calling for a national approach to improve patient safety and reduce medical errors.

Ms. DiVall and her colleagues have also

discovered that the public has an appetite for a Web site that would evaluate hospitals on new disease treatments and new procedures. Their research confirms that consumers are becoming increasingly more reliant on the Internet in their medical decision-making process. In 2003, 56% of all adults questioned confirmed that they consulted the Internet to research a disease, an illness, or a medical treatment that affected a family member or even a close friend. We have talked about consumerism before in this space, and this research reaffirms the important role of health care consumers.

P&T committee members probably do not have routine access to national survey information gleaned by a respected expert, such as Ms. DiVall. Nevertheless, there are important lessons in the work of American Viewpoint. For me, the take-home message is that voters appear to be smart about their health care decision-making, and they portray a newly found sense of confidence in making these decisions. Consumers are taking ownership of the decision-making process, and Ms. DiVall anticipates that this trend will accelerate.

Once again, then, how ready are we, in the greater P&T community, to embrace a patient population with this newfound confidence? Ms. DiVall's presentation reconfirmed the importance of creating the system changes that will be required to improve patient safety and of the need to implement Web-based tools to reach out to our patients on a regular basis. I sincerely hope that we will be ready for these challenges.

As usual, I am interested in your views. You can reach me at my e-mail address: david.nash@jefferson.edu. The phone number for American Viewpoint is 703-684-3325.

A handwritten signature in black ink that reads "David Nash". The signature is stylized and cursive.