#### **Customer Satisfaction Survey**

#### 2013

## INTRODUCTION

The purpose of this Benchmarking Report is to summarize the differences in customer responses between the 2011 and 2013 administrations of the National Cancer Institute's NCI/CCR/Laboratory of Pathology (LP) Services customer satisfaction survey.

## 2 BENCHMARKING ANALYSIS

Respondents rated their response to each survey question on a five-point Likert scale, with answer choices ranging from Unsatisfactory to Outstanding.

A weight between 1 and 5 was assigned to each possible answer choice and then a mean weighted response to each question was calculated. The mean weighted responses were then converted to a 100-point scale by multiplying by a factor of 20 (e.g.,  $4.0 \rightarrow 80$ ). It is then possible to reach conclusions regarding the top satisfiers and areas of concerns for our customers as a whole. Final scores did not include N/A responses in the final weighted calculations.

| Statement   | Scale                                      | 2009 | 2011 | 2013 |
|---|--|------|------|------|
| Quality of professional interaction and communication with the fellow and resident pathologists             | Unsatisfactory (1) to<br>Outstanding (100) | 87   | 77   | 85   |
| Availability and quality of frozen section (intra-<br>operative) consultations                              | Unsatisfactory (1) to Outstanding (100)    | 85   | 85   | 87   |
| Overall speed for the notification of significant abnormal results  | Unsatisfactory (1) to Outstanding (100)    | 78   | 74   | 80   |
| Quality of professional interaction and communication with the secretarial, technical, and management staff | Unsatisfactory (1) to<br>Outstanding (100) | 77   | 77   | 80   |
| Availability of fellow and resident pathologists  | Unsatisfactory (1) to Outstanding (100)    | 81   | 78   | 85   |
| Overall satisfaction level with customer service provided.  | Unsatisfactory (1) to Outstanding (100)    | 82   | 80   | 87   |
| Quality of presentations and conferences  | Unsatisfactory (1) to Outstanding (100)    | 88   | 88   | 89   |
| Availability of staff pathologists  | Unsatisfactory (1) to Outstanding (100)    | 83   | 83   | 89   |
| Quality of professional interaction and communication with the staff pathologists                           | Unsatisfactory (1) to Outstanding (100)    | 86   | 86   | 90   |
| Communication of relevant information regarding cases submitted   | Unsatisfactory (1) to Outstanding (100)    | 77   | 75   | 85   |
| Overall turnaround time of final report   | Unsatisfactory (1) to Outstanding (100)    | 65   | 70   | 75   |
| Diagnostic accuracy   | Unsatisfactory (1) to Outstanding (100)    | 86   | 80   | 90   |
| Staff pathologist responsiveness to problems  | Unsatisfactory (1) to Outstanding (100)    | 81   | 81   | 88   |

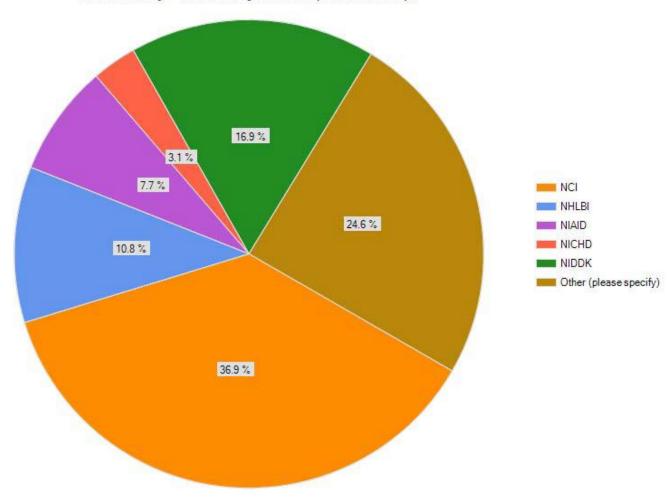
The 2013 survey polled all professional and support level staff utilizing LP clinical, research, and academic services. Respondents included branch chiefs, staff clinicians, clinical and research fellows, physician assistants, nurse practitioners, nursing staff, and clinical and research support customers. The overall response rate remained the same when compared with the previous 2011 customer satisfaction survey; however, the distribution of respondents' by Institute changed slightly in 2013.

Satisfaction with the Laboratory of Pathology improved for all categories when compared with 2011 survey results. Overall satisfaction with all of LP's services was the most significant improvement. In 2013, 53% of responses cited outstanding for overall satisfaction, compared with 34% in 2011. Other significant improvements were noted with the quality of professional interactions with the clinical fellows and residents; communication regarding submitted cases; diagnostic accuracy; and attending pathologists' responsiveness to problems.

In response to the 2011 Customer Satisfaction Survey, LP's Quality Management Committee and Clinical Operations Group were tasked with identifying areas for improvement and implementing efforts to address select indicators that had decreased from 2009 to 2011. Quality indicators that are monitored and acted upon by the QM Committee each month, which could be reflected in improvements with elements of the customer satisfaction survey, include turnaround times for Cytology and Surgical Cases (Biopsies and Resections); Intraoperative Consult (Frozen Sections) turnaround time; Autopsy turnaround time; and communication with submitting physicians regarding cases.

Although the 2013 survey shows an improvement in how LP's customers view services and interactions with LP, the QM Committee and Clinical Operations Group will continue to address areas for improvement in services and turnaround times.

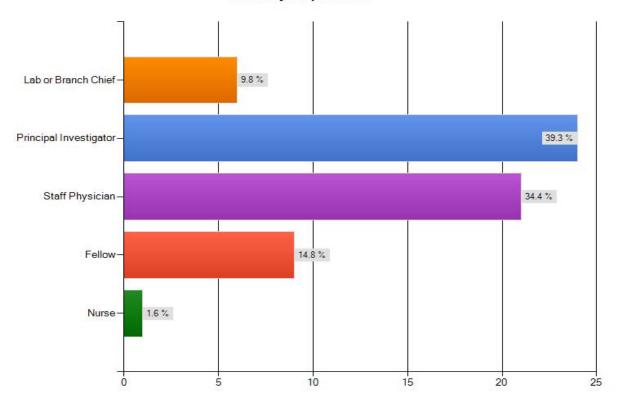
2013 Survey - Where do you work (NIH Institute)?



### **RESPONDENTS Distribution:**

| Institute  | 2011<br>Responses | 2013<br>Responses |
|--|-------------------|-------------------|
| National Cancer Institute (NCI)  | 45.6%             | 36.9%             |
| National Heart, Lung, and Blood Institute (NHLBI)                        | 7.4%              | 10.8%             |
| National Institute of Allergy and Infectious Diseases (NIAID)            | 11.8%             | 7.7%              |
| National Institute of Child Health and Human Development (NICHD)         | 8.8%              | 3.1%              |
| National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) | 4.4%              | 16.9%             |
| Other (Clinical Center, NIDCR, NHGRI, NIDCR, NINDS)                      | 22.1%             | 24.6%             |





# Which of the following best describes how frequently you have used the Laboratory of Pathology (LP), NCI, CCR, over the last year?

