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ORIGINAL ARTICLE

Spanish and Catalan translation, cultural adaptation and validation of the Picker Patient Experience Questionnaire-15

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KEYWORDS

Surveys and questionnaires;
Patient satisfaction;
Validation studies;
Translating;
Cross-cultural comparison;
Patient-centered care

Abstract

Objective: To develop and test a culturally adapted core set of questions to measure patients' experience after in-patient care.

Material and methods: Following the methodology recommended by international guides, a basic set of patient experience questions, selected from Picker Institute Europe questionnaires (originally in English), was translated to Spanish and Catalan. Acceptability, construct validity and reliability of the adapted questionnaire were assessed via a cross-sectional validation study. The inclusion criteria were patients aged >18 years, discharged within one week to one month prior to questionnaire sending and whose email was available. Day cases, emergency department patients and deaths were excluded. Invitations were sent by email ($N=876$) and questionnaire was fulfilled through an online platform. An automatic reminder was sent 5 days later to non-respondents.

Results: A questionnaire, in Spanish and Catalan, with adequate conceptual and linguistic equivalence was obtained. Response rate was 44.4% (389 responses). The correlation matrix was factorable. Four factors were extracted with Parallel Analysis, which explained 43% of the total variance. First factor: information and communication received during discharge. Second factor: low sensitivity attitudes of professionals. Third factor: assessment of communication of medical and nursing staff. Fourth factor: global items. The value of the Cronbach alpha was 0.84, showing a high internal consistency.

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PALABRAS CLAVE

Encuestas y cuestionarios; Satisfacción del paciente; Estudios de validación; Traducción; Comparación intercultural; Atención centrada en el paciente

Conclusions: The obtained experience patient questionnaire, in Spanish and Catalan, shows good results in the psychometric properties evaluated and could be a useful tool to identify opportunities for health care improvement in our context. Email could become a feasible tool for greater patient participation in everything that concerns his health.

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Traducción al español y al catalán, adaptación transcultural y validación del Picker Patient Experience Questionnaire-15

Resumen

Objetivo: Diseñar y validar un conjunto básico de preguntas culturalmente adaptadas para medir la experiencia de los pacientes después de un ingreso hospitalario.

Material y métodos: Siguiendo la metodología recomendada por guías internacionales, se realizó la traducción y adaptación al español y al catalán de un conjunto básico de preguntas sobre experiencia del paciente, seleccionadas de cuestionarios en inglés del Picker Institute Europe. Se realizó un estudio transversal de validación para evaluar la aceptación, la validez de constructo y la fiabilidad del cuestionario adaptado. Los criterios de inclusión seleccionaron adultos dados de alta del hospital entre una semana y un mes antes, y de los que se disponía de su correo electrónico. Se excluyeron los ingresos de menos de 24h, las altas del servicio de urgencias y las altas por defunción. Se les invitó a participar por correo electrónico (N=876) y el cuestionario fue completado a través de una plataforma *online*. Un recordatorio automático fue enviado a los no respondedores 5 días después del primer correo electrónico.

Resultados: Se obtuvo un cuestionario, en español y en catalán, con una equivalencia conceptual y lingüística adecuada. La tasa de respuesta fue del 44,4% (389 respuestas). La matriz de correlación fue factorizable. Cuatro factores fueron extraídos en un análisis paralelo, que explicaron el 43% de la varianza total. Primer factor: información y comunicación recibida durante el alta; Segundo factor: actitudes poco sensibles de los profesionales; Tercer factor: evaluación de la comunicación con médicos y enfermeras; Cuarto factor: ítems globales. El valor del coeficiente alfa de Cronbach fue de 0,84, indicando una alta consistencia interna.

Conclusiones: El cuestionario de experiencia del paciente obtenido, en español y en catalán, muestra buenos resultados en las propiedades psicométricas evaluadas y puede constituir un instrumento útil para identificar oportunidades de mejora de la asistencia sanitaria en nuestro entorno. El correo electrónico podría convertirse en una herramienta viable para una mayor participación del paciente en todo lo que concierne a su salud.

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Introduction

Patient-centered care concerns the relationship between health providers and patients (and their relatives and caregivers) along the healthcare process.¹ It implies patient involvement in decision-making about their healthcare and treatment, as well as patient and public participation in healthcare planning.² Both of them require the establishment of mechanisms to identify preferences, problems or unmet needs of patients. Satisfaction analysis has shown limitations in understanding these problems, as satisfaction is a subjective construct related to expectations rather than with problem solving.^{3,4}

The Beryl Institute defines patient experience⁵ as “the sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care”. The assessment and measurement of patients’ experience facilitates both strategic and shared decision-making

affecting every patient.⁶ The increasing interest from policy makers to obtain this information and build a “health service designed around the patient”⁷ shows a trend toward studying patients’ experience.^{8,9}

However, there are numerous ways to measure and understand patient experience, and no one ‘best’ method for all circumstances. A combination of methods, both qualitative and quantitative, must be often used for its assessment.¹⁰ Patient-reported experience measures capture a person’s perception of their experience with health care or service, providing insight into what truly matters most to patients and information about the patient-centeredness of the health care they receive.¹¹

One example of patient’s experience assessment is the Hospital Consumer Assessment of Healthcare Providers and Systems,¹² which results influence decisions about health services financing in MEDICARE. Another example are the surveys conducted by the Picker Institute Europe in the

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