



Original Article

Factors Influencing Patient Experience in Pediatric Neurology



Suprit C. Singh BS^a, Raj D. Sheth MD^b, James F. Burrows MBA^c,
Paul Rosen MD, MPH, MMM^{c,*}

^a University of Central Florida, College of Medicine, Orlando, Florida

^b Nemours Clinic Specialty Care, Jacksonville, Florida

^c Nemours/Alfred I. duPont Hospital for Children, Wilmington, Delaware

ABSTRACT

INTRODUCTION: Hospitals have begun to shift toward patient-centered care because of the pay-for-performance system that was established by the Patient Protection and Affordable Care Act. In pediatrics, the needs of both the caregiver and the pediatric patient have to be taken into account. Pediatric practices have been shifting toward a family-centered approach, although the primary drivers have not been well defined. Identifying the key patient experiences that lead to higher patient satisfaction would enable a more meaningful clinical encounter. To better understand patient experience, we examined waiting time and the elements of the physician–patient interaction in pediatric neurology. We predict that the determining factor in patient satisfaction is the physician–patient interaction. **METHODS AND MATERIAL:** Patient satisfaction surveys were sent to families via mail or e-mail after their ambulatory pediatric neurology visit. The visits took place between January 1, 2012, and December 31, 2014, at one of multiple locations in a children’s health system spanning four states. A Likert scale was used for these surveys, and a top-box method (measuring percent of survey questions were rated 5 out of 5) was used to filter data from this database. Statistical analysis using a Pearson correlation was used for data analysis, with likelihood to recommend practice as the dependent variable. **RESULTS:** The five survey questions that correlated most with overall likelihood to recommend the practice were cheerfulness of practice ($r = 0.79$); staff working together ($r = 0.76$); cleanliness of practice ($r = 0.70$); wait time at clinic, from entering to leaving ($r = 0.66$); and likelihood of recommending care provider ($r = 0.65$). **CONCLUSION:** Pediatric neurologists striving to enhance overall patient satisfaction in their practices should work toward providing an atmosphere that supports office staff cheerfulness, teamwork, and visit efficiency provided in a clean and friendly environment.

Keywords: patient experience, patient satisfaction, patient–physician interaction, family-centered care

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Introduction

Owing to the passage of the 2010 Patient Protection and Affordable Care Act in the United States, hospitals are starting to be reimbursed based on a value-based system and patient-centered care.¹ The reimbursement hospitals receive through Medicare, according to the Patient Protection and Affordable Care Act, which is up to 1% in 2013

and increasing to 2% by 2017, and the higher the performance of the hospitals, the more reimbursement they receive.² To measure patient satisfaction, which is empathic care, that promotes partnership, communication, and respect, the Hospital Consumer Assessment of Healthcare Providers and Systems was developed.³ With the value-based system, there is an increasing shift toward more “patient-centered” care, whereby physicians focus both on the patient’s illness while not neglecting their feelings and attitudes about their illness.⁴ More specifically, in pediatrics, there is a need to deliver both patient-centered and family-centered care, as both have been shown to increase satisfaction for the caregiver, ultimately increasing patient satisfaction.⁵

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* Communications should be addressed to: Dr. Rosen; Nemours AI du Pont Hospital for Children; 1600 Rockland Road; Wilmington, DE 19803.

E-mail address: PRosen@nemours.org

Although there is a need to change hospital policies to improve patient satisfaction, hospitals find it challenging to recognize and implement patient experience changes, which would increase patient satisfaction scores.⁶ At a national level, identifying key factors to improve patient experience has been a slow process.⁷ Staff members are not perceived as being dependable due to the delayed responses and the vulnerability felt by patients, resulting in dissatisfaction with staff members.⁸ Evidence has been shown that increasing interpersonal skills with staff members, conveying information that can be explained and understood by the patient, and decreasing wait times for appointments and visits could increase patient satisfaction.⁹ Patient satisfaction could be due to physician empathy skills, implying that the physician–patient interaction will strongly influence patient satisfaction at hospitals.¹⁰

Many studies have demonstrated that increased patient satisfaction results in improved patient adherence to treatment regimens and being more trustful of physicians. Whether there is a correlation between increased patient satisfaction and improvement of health outcomes is debated.¹¹ Patient interactions with physicians, and the ability of physicians to fulfill patient expectations, can influence their health care experience, and some studies have concluded that those interactions have influenced patient satisfaction.¹² The benefit of increasing overall patient satisfaction can lead to increases in quality of care the physicians provide to their patients.¹³

In pediatrics, patient satisfaction is more difficult to measure, because the parents and other caregivers are responsible for returning these patient satisfaction surveys. As a result, there has been an increasing demand for family-centered care, which addresses the need of both the patient and the caregiver. Patient experiences that may influence this domain include communication with staff and health care provider, being kept informed throughout procedures, and measures to ensure patient safety are factors that need to be considered that influence patient satisfaction.¹⁴ Caregivers would like to be seen and treated as an extension of the patient. Caregivers expect highly attentive and personalized care for their child. Caregivers feel more satisfied when staff and physicians are engaging and genuine with both the child and the caregiver.¹⁵ Because of the vulnerable nature of children, caregivers also like to see emotional support offered during times of distress.¹⁶

Although several studies have examined the effects of patient satisfaction, few studies have focused on which specific patient experiences affect patient satisfaction in the field of pediatric neurology. Owing to the age group involved and the complexities and vulnerability of the patients, it is important to determine which patient experience factors lead to higher patient satisfaction. Families who bring their child to a pediatric neurologist may present with a variety of conditions. These may include cerebral palsy, concussions, congenital and vascular anomalies of the brain, brain tumors, neonatal brain neurodevelopmental concerns, seizure, neuropsychiatric concerns, muscular concerns, and many other conditions.

The objective of this study was to determine the key drivers of overall patient experience in the ambulatory pediatric neurology setting. Our hypothesis is that the most

important patient experience driver will be the interaction with the physician or provider.

Materials and Methods

Patient satisfaction surveys were sent via mail or e-mail to caregivers of pediatric patients after their ambulatory neurology appointments at an academic Children's Health System from January 1, 2012, to December 31, 2014. Press Ganey Associated Inc, an independent consulting health care company which focuses on improving patient experiences, developed and administered the surveys. The survey itself contained 34 questions with the option of additional comments describing any relevant experiences. There were eight categories: "Background Questions," "Access," "Moving Through Your Visit," "Nurse/Assistant," "Care Provider," "Radiology (x-ray) Tests," "Personal Issues," and "Overall Assessment." Each category also had a list of questions, and each question had its own Likert scale, with a "1" being identified as "very poor," "2" as "poor," "3" as "fair," "4" as "good," and "5" being identified as "very good."

When the surveys were returned, all data were deidentified. From the database that Press Ganey collected, information was filtered to obtain monthly values for the completed survey. A top-box method was used to further filter information for each month.

Statistical analysis

Statistical analysis was performed using Pearson correlations. This revealed which survey questions were most highly correlated with the overall likelihood to recommend the practice (LTR). LTR was used as the dependent variable and is considered to be the summary measure to denote overall patient satisfaction. The top five patient experiences were then analyzed. A correlation coefficient of >0.69 was determined to be a strongly correlated variable to LTR, whereas values <0.69 were determined to be moderately correlated, and anything <0.4 was determined to be weakly correlated.

Results

Over the three-year time frame, 2890 surveys were collected from pediatric neurology ambulatory visits. The top five survey questions that correlated with LTR were cheerfulness of practice ($r = 0.79$); staff working together ($r = 0.76$); cleanliness of practice ($r = 0.70$); wait time at clinic, from entering to leaving ($r = 0.66$); and likelihood of recommending care provider ($r = 0.65$; [Table](#)).

Discussion

The most important factors in patient satisfaction in pediatric neurology ([Table](#)) were cheerfulness of practice

TABLE.
Correlation Coefficients Are Listed From Each Question That Was Asked on the Survey

Survey Question	Correlation Coefficient (r)
Strong correlation ($r > 0.69$)	
Cheerfulness of practice	0.79
Staff working together	0.76
Cleanliness of practice	0.70
Moderate correlation ($r = 0.69-0.40$)	
Wait time at clinic	0.66
Likelihood of recommending care provider	0.65

This is organized with the highest correlation coefficient to lowest correlation coefficient. Strongly correlated variables were $r \geq 0.69$, and moderately correlated variables were $r = 0.69$ to 0.40 .

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