



# The Patient Participation Culture Tool for healthcare workers (PaCT-HCW) on general hospital wards: A development and psychometric validation study



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## ABSTRACT

**Background:** Patient participation is an important subject for modern healthcare. In order to improve patient participation on a ward, the ward's culture regarding patient participation should first be measured. In this study a measurement tool for patient participation culture from the healthcare worker's perspective, the Patient Participation Culture Tool for healthcare workers (PaCT-HCW), was developed and psychometrically evaluated.

**Objectives:** The aim of this study was to develop and validate a tool that measures the healthcare worker-related factors of patient participation and information sharing and dialogue in patient participation from the healthcare worker's perspective in order to represent the patient participation culture on general and university hospital wards.

**Design:** A four-phased validation study was conducted: (1) defining the construct of the PaCT-HCW, (2) development of the PaCT-HCW, (3) content validation, and (4) psychometric evaluation.

**Settings:** The Belgian Federal Government invited all Flemish general and university hospitals by e-mail to distribute the PaCT-HCW in their organization. Fifteen general hospitals took part in the study.

**Participants:** Units for surgery, general medicine, medical rehabilitation, geriatric and maternal care were included. Intensive care-units, emergency room-units, psychiatric units and units with no admitted patients (e.g. radiology) were excluded. The respondents had to be caregivers, with hands-on patient contact, who worked on the same ward for more than six months. Nursing students and other healthcare workers with short-time internship on the ward were excluded. The tool was completed by 1329 respondents on 163 wards.

**Methods:** The PaCT-HCW was psychometrically evaluated by use of an exploratory factor analysis and calculation of the internal consistency.

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**Results:** A model containing eight components was developed through a literature review, individual interviews, and focus interviews. The developed model showed high sampling adequacy and the Bartlett's test of sphericity was significant. An exploratory factor analysis identified eight components, explaining 49.88% of the variances. The eight original included components were retained. The PaCT-HCW also showed high internal consistency.

**Conclusion:** The PaCT-HCW offers an in-depth and differentiated perspective of the healthcare worker-related factors of patient participation and information sharing and dialogue in patient participation. The PaCT-HCW has been developed thoroughly, resulting in a strong, psychometric evaluated tool and is a valuable measure for both scientists and clinicians to measure these two aspects in general and university hospitals. By using the PaCT-HCW, the opportunity is created to develop specific actions to improve patient participation.

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### What is already known about the topic?

- Many advantages of the participation of the patient in the healthcare process are reported.
- Several determinants influence the healthcare worker's behavior in patient participation.
- Patient participation is a complex process and so far there are no tools to measure the culture of patient participation from the healthcare worker's perspective.

### What this paper adds

- A tool was developed and validated in order to measure the patient participation culture on a ward.
- The psychometric evaluation of the tool indicated high psychometric values.
- The developed tool offers a possibility to assess and develop tailored interventions to improve patient participation.

## 1. Introduction

In 2013 the Belgian Federal Government emphasized the importance of patient participation in quality of care and patient safety by announcing a multi-annual program to improve patient participation. A first step in this program was the development of the Patient Participation Culture Tool for healthcare workers (PaCT-HCW) to measure and represent the patient participation culture on general and university hospital wards, based on the perceptions of healthcare workers. Special attention for patient participation related to patient safety issues was included in the tool.

## 2. Background

The positive effects and advantages of patient participation are well known. Besides being an essential element of Evidence-Based Medicine (Sackett et al., 1996) and the ethical imperative that is embedded in the concept (British Medical Journal, 2014), patient participation is an effective method to improve quality of care (Nilsme et al., 2006; World Health Organisation, 2013). Patient participation has a positive effect on self-management in chronic

illnesses (Longtin et al., 2010), improves patient safety by reducing medication errors (World Health Organisation, 2013), stimulates hand hygiene (Longtin et al., 2010), and is associated with positive health outcomes (Griffin et al., 2004). Moreover, there is emerging evidence that patient participation is an essential concept in guarding the cost-effectiveness and therefore the sustainability of healthcare (British Medical Journal, 2014).

Although patient participation is a widespread concept and is commonly used in healthcare, it remains a complex and not fully understood phenomenon (Tambuyzer et al., 2011). Currently, incongruities exist regarding the definition, the process, and the determinants or factors of participation (Cahill, 1998; Gallant et al., 2002; Sahlsten et al., 2008). Few theoretical models have been developed to outline the determinants and factors of patient participation. The model of Longtin et al. (2010) identifies three factors that influence patient participation: patient-related determinants, effective communication (including feedback) and healthcare worker-related determinants. The healthcare worker-related determinants for patient participation include several demographic variables (e.g. age and profession), contextual variables (e.g. support), but also variables related to role behaviour (e.g. acceptance of a new role).

Knowledge on these healthcare worker-related factors of patient participation is limited. No study has identified the combined influence of these factors on the culture of patient participation (Phillips et al., 2015). Research has mostly focused on the influence of each separate factor. These factors are essential for the process of patient participation as they stimulate healthcare workers to abandon their traditional, paternalistic role for a patient centred, collaborative role where power and responsibilities are shared between both. As proven for nurses (Cahill, 1998; Henderson, 2003) and physicians (Frosch et al., 2012), taking up this new, collaborative role poses a challenge, but is a necessity to facilitate patient participation (Larsson et al., 2011). Healthcare workers have to be able or willing to share their responsibilities and power with their patients before participation can actually take place (Millar et al., 2015). Patient participation is a reciprocal process where healthcare workers and patients act upon each other's behaviour (Longtin et al., 2010), and

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