



ORIGINAL ARTICLE

Patient experience in emergency departments: What do children and adolescents think? ☆, ☆☆

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KEYWORDS

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Abstract

Introduction: Improving patient experience must become a priority in paediatric emergency departments. This experience is often studied by surveying parents, and not children directly. The aim of this study was to assess the patient experience of children attended in a Paediatric Emergency Department (PED).

Patients and methods: A prospective descriptive study was conducted using a survey based on the Picker questionnaire on the patient experience. From January to May 2014, children 8–17 years seen in the Paediatric Emergency Department and admitted to the hospital were asked to complete the questionnaires anonymously, within 24 h of admission.

Results: A total of 217 patients completed the survey. The responses showed that 19.4% had to wait longer than expected, with 46.2% saying that there was not enough for children of their age group to do while waiting to be seen. As regards care and treatment, 4.6% of participants said staff did not fully explain what they were doing, and 23% said that they were not given enough privacy when being examined. Overall, 99.1% of patients said that they were well treated.

Conclusions: Overall patient experience in the PED was positive. Some aspects have to be improved (activities in the waiting room, and privacy during the examination).

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PALABRAS CLAVE

Urgencias;
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Experiencia del paciente en Urgencias: ¿qué opinan los niños y los adolescentes?**Resumen**

Introducción: Mejorar la experiencia del paciente debe convertirse en una prioridad en los Servicios de Urgencias. En Pediatría, a menudo, se estudia la opinión de padres/cuidadores y no la de los niños directamente. El objetivo de este estudio es conocer la experiencia como paciente del pediátrico ingresado desde el Servicio de Urgencias pediátricas.

Pacientes y métodos: Estudio descriptivo prospectivo. Se diseña una encuesta basada en el cuestionario Picker sobre la experiencia del paciente que estudia la proporción de insatisfacción. Las encuestas son contestadas directamente por niños de 8-17 años que son visitados e ingresados desde Urgencias de un hospital terciario pediátrico. Se entregan las encuestas durante las primeras 24 h de ingreso de enero a mayo del 2014.

Resultados: Se obtienen 217 encuestas. La mediana edad es de 12 años. Los niños piensan que la espera fue más larga de lo esperado (19,4%) y que las actividades de entretenimiento fueron inadecuadas (46,2%). Sobre la visita médica, el 4,6% piensa que el personal no explicó correctamente los procedimientos y para el 23% no tuvieron la suficiente privacidad. Sobre el conjunto de la visita, el 99,1% de los pacientes se sintió bastante o muy bien tratado. No se han encontrado diferencias en el grado de satisfacción en función del sexo, la edad o el tiempo de espera.

Conclusiones: Globalmente, la experiencia del paciente pediátrico en nuestro Servicio de Urgencias fue positiva. Algunos aspectos son susceptibles de mejora, como las actividades durante la espera y la privacidad durante la visita.

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Introduction

Patients' experience with respect to their health and the medical attention they receive must be regarded as the crux of any medical act.¹⁻³ This experience can be defined as the sum of all the interactions produced by the culture of an organisation that influence the patient's perceptions throughout the health care process. Any such process should therefore be seen as a continuum from the patient's arrival at the healthcare centre to their departure. This experience will be determined by various factors, including scientific quality, safety and patient satisfaction.⁴

Satisfaction in relation to healthcare acts is a situation in which patients' expectations regarding their treatment and care have been met (or even exceeded).⁵ It is an indicator of perceived quality of care, not always associated with scientific quality. In the field of emergency care, satisfied patients will probably revisit the healthcare centre and recommend it to their family and friends, and will also adhere more faithfully to doctors' orders.⁵⁻⁸ For healthcare staff, patient satisfaction makes professionals feel better about offering their services.⁷⁻⁹

The last 20 years have seen growing interest in the subject among the medical community, reflecting the change towards medicine centred on patients and their families.¹ There has been a proliferation of studies based on satisfaction surveys, most of them carried out on adult patients. In the paediatric area the majority of studies address children's satisfaction through that of their parents/caregivers; there are very few that question the children directly.^{8,10} This is mainly due to two reasons: on the one hand, it

tends to be more difficult to obtain informed consent in the paediatric field, and on the other, children's cognitive abilities vary according to age, and this determines how they are interviewed and how information on their opinions is obtained.^{2,5,7-10}

The purpose of this study is to examine the experience of paediatric patients in a Paediatric Emergency Department (PED) using satisfaction surveys addressed directly to children.

Patients and methods

This is a prospective descriptive study using surveys, carried out between January and May 2014 in a high-complexity tertiary referral children's hospital. The PED handles some 100 000 visits per year, in the specialities of Paediatrics, Surgery, Orthopaedic Surgery and Traumatology, and Psychiatry. The study was approved by the hospital's ethics committee.

The PED treats patients aged between 0 and 18 years. The pathway of patients in the PED is as follows: on their arrival, the administrative staff record their demographic data. The children are then assessed by a nurse, who performs the triage; the patients are thereby stratified according to a level of priority between I (immediate attention) and V (lower-priority attention) and they go to the waiting room. In the waiting room there are information screens showing the waiting time and screens broadcasting children's programmes; there are machines dispensing food, drinks, diapers and other childcare products, and finally there are

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