

# Exploring patient care satisfaction in adult psychiatric units

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## Introduction

Rankings for Via Christi Hospital is based on patient satisfaction scores. Professional Research Consultants (PRC) survey 15 patients monthly to measure four key drivers (KD):

- treatment with dignity and respect,
- quality of care provided by social workers,
- reaching treatment (Tx) goals, and
- recommending this hospital to others.

Sparse data and variability make these results difficult to interpret. Our objective was to better understand the association between patient attitudes regarding hospitalization and KDs.

## Methods

**Design:** face-to-face survey

**Questionnaire:**

- adapted from Menninger Institute and PRC KDs
- 20 items with 4-point Likert scale
- 2 items rated on 1-10 scale
- self-reported characteristics

**Sample:** 60 psychiatric patients

**Inclusion:**

- English speaking adults
- hospitalized in psychiatric units

**Data:** de-identified and stored in REDCap

**Statistical plan:** correlation analysis

## Results

58% females, 45% depressed, 35% some college; **Table 1**

Nurses tended to be rated highest; **Figure 1**

Strong associations with KDs ( $\rho > 0.50$ ); **Table 2**

**Dignity and Respect**

- care team listened
- cared about me
- made me feel safe

**Reached Treatment Goals**

- talking openly
- completing a care plan

**Recommend this Facility**

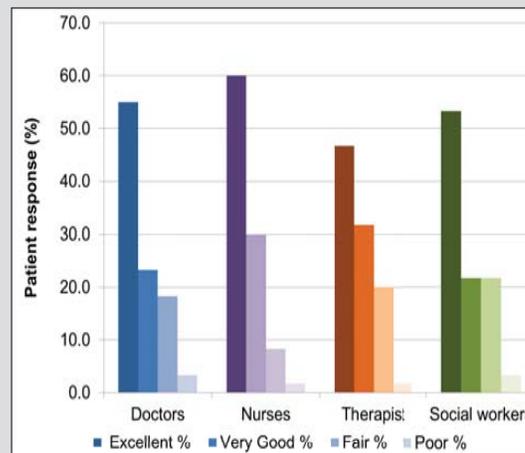
- understanding reasons for hospitalization, diagnosis, Tx
- care team helped patient deal

**Table 1. Self-report Characteristics**

Characteristic	Response; n = 60	%
Identification	Female	<b>58.3</b>
Age (years)	18 to 30	<b>36.7</b>
	31 to 40	31.7
	41 to 50	13.3
	51 to 64	18.3
Education	Less than high school	13.3
	High school/GED	<b>38.3</b>
	Some college	<b>35.0</b>
	College graduate	13.3
Substance use disorder	Yes	<b>30.0</b>
Diagnostic category	Bipolar	21.7
	Depression	<b>45.0</b>
	Psychosis	28.3
	Other or unknown	5.0



**Figure 1. QOC ratings by provider**



**Table 2. Associations with Key Drivers (KD)**

Item	Dignity and Respect	Reached Tx goals	Recommend this facility
CT cared about me	<b>0.64</b>	0.35	0.48
CT helped me deal	0.49	0.46	<b>0.69</b>
CT listened to me	<b>0.60</b>	0.49	<b>0.55</b>
I felt safe	<b>0.54</b>	0.25	0.30
I have care plan	0.27	<b>0.54</b>	0.45
I talked openly to CT	0.50	<b>0.52</b>	0.50
Medications	0.34	0.31	<b>0.51</b>
Understand diagnosis	0.40	0.36	<b>0.58</b>
Why hospitalized	0.21	0.40	<b>0.56</b>
Overall quality of care	0.30	<b>0.54</b>	<b>0.71</b>
MQOC Total Score	0.43	<b>0.56</b>	<b>0.77</b>

CT = care team MQOC = Menninger quality of care

## Discussion

Results show that KD scores are complex constructs. Therefore, we recommend a multi-disciplinary approach to:

- Give patients sufficient time to share concerns
- Provide a safe, confidential environment
- Ensure patient understanding of
  - hospitalization, diagnosis, and treatment
- Complete care plan (symptom recognition, triggers, support system, crisis and follow-up plans) prior to discharge.

Limitations: face-to-face surveys may introduce social desirability bias; results may not be generalizable.

Future research may want to incorporate open-ended questions and/or conduct focus groups along with content analyses to explore more in depth attitudes associated with KDs.

**Conclusion:** Development of interventions to address complex constructs associated with KDs may improve scores on PRC surveys and increase our hospital ranking in Behavioral Health.



Via Christi Behavioral Health Acknowledgements: Special thanks to Christopher West, Service Line Administrator and Melissa Dorsett, Social Work Coordinator