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66 – Assessing Patient Satisfaction in Primary Health Care – Reliable Information and Benchmarking

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Background

Health policy declarations emphasize the importance of patients' views and opinions in providing and developing health services (1-3). Patients' opinions should be assessed regularly and used systematically as an indicator of the quality of health care (4, 5). We studied the feasibility and reliability of a questionnaire for data collection and as a benchmarking instrument in evaluating the opinions of Finnish primary health care patients. The aim was also to explore trends in patient satisfaction within primary health care.

Methods

A 15-year follow-up questionnaire survey was conducted among patients attending health care centres in the Tampere University Hospital catchment area during 1998-2013. The questions were based on international study findings (6) and adapted to the special characteristics of Finnish primary health care. There were originally 65 health care centres in this area, the total population being 1.2 million. Basic demographic data such as gender and age of participants were collected.

Data were always collected during the same calendar week in September. The reception staff distributed the questionnaire to patients visiting physicians and nurses due to illness from Monday to Friday between 8 a.m. and 4 p.m. Patients returned the anonymously filled questionnaires to a box in the waiting room after their consultation. The health care centres collected the questionnaires and sent them to the Department of General Practice at the University of Tampere where the data were recorded and analysed.

Patient satisfaction was assessed with the statement: "The service in the health care centre was so good that I can recommend it to my family and friends". The response alternatives were: "I totally agree", "I agree", "I disagree" and "I totally disagree". Since the objective in health service is complete satisfaction, we sought particularly to ascertain the proportion of respondents who gave the answer "I totally agree", this being considered to represent unreserved satisfaction with care.

In statistical analysis we used frequencies, percentages and cross-tabulation. The analyses were carried out with SPSS predictive analytics software.

Results

A total of 157 549 patients responded out of a sample of 363 464. The response rate varied yearly from 39% to 53%. Forty out of 65 primary health care centres

participated in the study at least six times and 61 at least four times. Each health care centre was informed of its own results and also the combined results from the other centres.

The general patient satisfaction varied considerably among the centres (Figure 1).

There was a notable decreasing trend in patient satisfaction with care in Finnish health care centres from 1998 to 2013 (Figure 2).

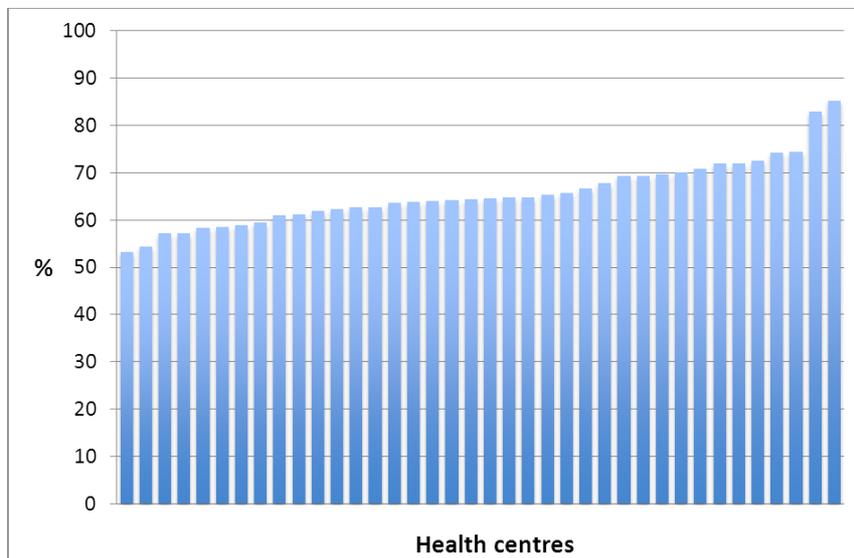


Figure 1. The variation of unreserved patient satisfaction (%) according to health care centre.

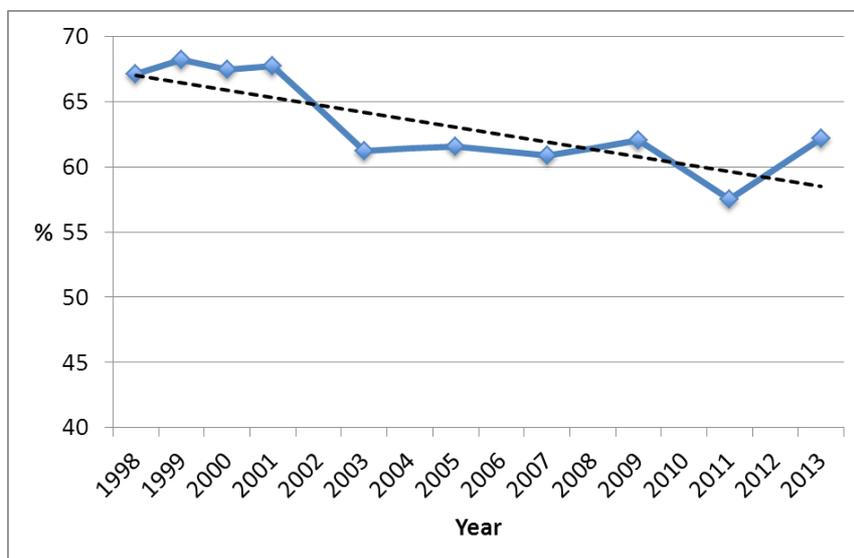


Figure 2. Linear trend line of unreserved patient satisfaction (%) by year.

There were no differences between genders in patient satisfaction. Sixty-year-olds or older were more satisfied (75% vs. 58%) than those under 60 years of age. On the other hand, satisfaction decreased most in the age group 60 years or older. Those patients who had a family doctor specifically appointed to them were more satisfied (63% vs. 57%) than those who had no specific doctor appointed by the health care centre for consultation.

Conclusions

The findings underline the importance of the patient in assessing primary care services in giving new and useful information on patient-related satisfaction within Finnish primary care.

We developed a feasible, reliable and comprehensive process for assessing patients' opinions in Finland. This process also provides a benchmarking instrument for primary health care centres.

Despite efforts by the authorities, in the past 15 years patient-reported satisfaction with primary health care has declined in Finland (7). In addition to a decreasing satisfaction, fewer patients have reported good access to and continuity of care. This fall-off in satisfaction is a matter for concern.

Finnish health care centres have undergone a number of changes during the study years. This may partly explain the falling trend in patient satisfaction with the services. Some of the changes in question were influenced by societal change, financial austerity and a lack of experienced primary care professionals (7).

The implemented and planned national health care programmes and legislation in Finland between 2000 and 2010 were designed to improve the health services. However the general strategic reforms with weak implementation methods might not have been able to resist the strong pressures within the service provision system (7).

The findings indicate that new means of coordinating and developing care in Finland are still necessary in order to improve satisfaction with primary health care. The authors also suggest that, at least those patients who need care most should be able to consult with a specific family doctor to enhance their satisfaction with and continuity of their care (8).

Take Home Messages

- Patients' opinions can be assessed regularly and used systematically as a quality and benchmarking instrument in primary health care.
- Despite efforts by the authorities, in the past 15 years patient-reported satisfaction with primary health care has declined in Finland.
- Patients who need care most should be able to consult with a specific family doctor appointed to them to enhance their satisfaction with and the continuity of their care.

Original Abstract

<http://www.woncaeurope.org/content/op-183-assessing-patient-satisfaction-primary-health-care-reliable-information-and>

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