



<b>Title</b>	<b>The Measurement of Satisfaction with Healthcare: Implications for Practice From a Systematic Review of the Literature</b>
<b>Agency</b>	NCCHTA, National Coordinating Centre for Health Technology Assessment Mailpoint 728, Boldrewood, University of Southampton, Southampton SO16 7PX, United Kingdom; Tel: +44 2380 595586, Fax: +44 2380 595639
<b>Reference</b>	Health Technol Assess 2003;7(32). Feb 2003. <a href="http://www.ncchta.org/execsumm/summ732.htm">www.ncchta.org/execsumm/summ732.htm</a>

## Aims

To address the definition and measurement of satisfaction with healthcare; assess the impact of survey methods on reported satisfaction; identify determinants of satisfaction; explore knowledge gaps; and consider implications for the NHS.

## Conclusions and results

Satisfaction is a multidimensional concept and can be measured indirectly by asking users to rate service quality. Asking NHS consumers about satisfaction is essential to assure quality. The review identified 37 empirical studies on methods. These showed that: interviews generate more responses than mail surveys (but cost more); responses to mail and other impersonal methods show greater variability; and low response rates introduce bias. Nonrespondents are often minorities, less educated, and uninsured. Questionnaire design can affect responses. Qualitative approaches use more resources, but access more information. The review of the determinants of satisfaction was guided by a structural framework that identified personal and health service delivery factors as potential influences. The search identified 139 articles (127 data sets) with evidence on these factors. Analysis revealed that reported satisfaction is linked to prior satisfaction with healthcare, respondents' predispositions, service utilization patterns, and granting patients' requests. Sicker patients and people with psychological distress tend to record lower satisfaction except for some chronic disease groups. Older respondents generally record higher satisfaction, but evidence on the effects of gender, ethnicity, and socioeconomic status is equivocal. The most important health service factor affecting satisfaction is the patient-practitioner relationship, including information giving. Choice is associated with higher satisfaction.

## Recommendations

Accurate feedback requires robust survey methodologies. Researchers need to promote high response rates, include disadvantaged groups, consider the effect of

mode of data collection on users' evaluations, and allow for respondents' expectations when interpreting findings. More use should be made of methods that elicit consumers' relative preferences since this information is important for cost-effective decision making. To promote satisfaction, staff training should address interpersonal issues, and financial/regulatory arrangements should encourage practitioners to foster supportive and interactive relationships with patients.

## Methods

Electronic search of 7 major bases. Nonelectronic search involved outreach to a wide range of organizations and personal contacts with leading academics. Over 3000 abstracts were screened for relevance. Articles were excluded if evidence was not generalizable. Quality assessment was undertaken independently by 2 readers.

## Further research/reviews required

To investigate: (1) how satisfaction affects health behaviors and outcomes; (2) how expectations affect reported satisfaction; (3) the effect of health status and recovery on satisfaction and the importance of survey timing; (4) the impact of systemic incentive structures on provider behavior and satisfaction; (5) cross-cultural variations in preferences; (6) incorporating feedback into decision making.