Scoring the medical outcomes among HIV / AIDS patients attending antiretroviral therapy center at Zonal Hospital, Hamirpur, using Patient Satisfaction Questionnaire (PSQ-18)

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Abstract

**Aim:** To study level of satisfaction among patients attending ART centre using Patient Satisfaction Questionnaire (PSQ - 18).

**Materials and Methods:** A cross-sectional interview based technique was used to study the level of satisfaction.

**Results:** A total of 59 patients attending ART centre were included in the study. The mean score for general satisfaction was 3.22 (SD 0.86), for technical quality 3.03 (SD 0.92), for the interpersonal manner 3.25 (SD 0.93), for communication (SD 0.90), for financial aspects was 2.38 (SD 1.00) and for time spent during the visit, the mean score was 2.97 (SD 0.98)

**Interpretation:** Patient satisfaction is the key in planning and formulating guidelines for treatment and care.

**Key words:** Antiretroviral therapy, HIV, patient satisfaction questionnaire

INTRODUCTION

In the state of Himachal Pradesh, two ART centers are functioning at IGMC, Shimla, and Zonal Hospital, Hamirpur, respectively. The third ART center was started in the month of October 2010 in Dr. R.P. Government Medical College Kangra at Tanda. A total of 793 AIDS patients, including 85 children are registered for ART in these centers. In ART center, Hamirpur, 119 AIDS patients were registered till July 31, 2009. These HIV patients were included in a study with the aim of measuring level of patient satisfaction using Patient Satisfaction Questionnaire (PSQ-18).

Patient satisfaction has been reported to influence one's health status, and is used to evaluate the process of care. Greater satisfaction may be associated with superior compliance, improved attendance at return visits and better outcomes. Knowing patients’ satisfaction would enable programmers to understand the gaps in healthcare delivery and clinicians to understand the specific needs of individual patients so that strategies of improving healthcare delivery and quality of care are instituted. There is limited information in patient care management for developing countries on patient satisfaction evaluation despite its potential role in healthcare delivery, and in addition, tools to assess patient satisfaction are still lacking. The present study fills this gap with results that evaluated patient satisfaction.

The PSQ-18 yields separate scores for each of seven different subscales: General Satisfaction (Items 3 and 17); Technical Quality (Items 2, 4, 6, 22); Communication (Item 8); Time (Item 10); Financial aspects (Item 11); Interpersonal manner (Item 16); and General satisfaction (Items 17).
and 14); Interpersonal Manner (Items 10 and 11); Communication (Items 1 and 13); Financial Aspects (Items 5 and 7); Time Spent with Doctor (Items 12 and 15); and Accessibility and Convenience (Items 8, 9, 16, and 18). Some PSQ-18 items are worded so that agreement reflects satisfaction with medical care, whereas other items are worded so that agreement reflects dissatisfaction with medical care. All items are scored so that high scores reflect satisfaction with medical care. After item scoring, items within the same subscale are averaged together to create the 7 subscale scores.

MATERIALS AND METHODS

Background

The study was conducted in the ART center at Zonal Hospital, Hamirpur district. Hamirpur District is situated between 76°18′ to 76°44′ East longitude and 31°25′ to 31°52′ North latitude. The ART center at Zonal Hospital, Hamirpur, was started in June 2009 and caters to population of districts Hamirpur, Kangra, Mandi, Una, Chamba Bilaspur, Luihal and Spiti, and part of district Kullu.

Study design

A cross-sectional study was conducted to determine the HIV/AIDS patient’s satisfaction level attending the ART center at Hamirpur. The survey was carried out during the period between January 1, 2010 and January 31, 2010. As an initial setup 119 patients formed the sampling frame for our study. The participation level expected for surveys that are completed at a later date, is between 8% and 60%. The aim therefore for this study was to recruit at least 50% of patients in the study. So 50% patients were selected for inclusion in the study using simple random technique. The interview was undertaken by the authors at the ART center by administering pretested questionnaire (PSQ-18). The questions were asked in native local language. In case of patients less than 18 years of age, information was obtained from adult respondents accompanying the patient. PSQ-18 subscales are substantially correlated with full-scale counterparts and possess generally adequate internal consistency reliability. It is a good instrument in our situation where the need for brevity precluded administration of full length PSQ III.

RESULTS

A total of 59 patients attending ART center were included in the study. Thirty-three (55.9%) patients were male and 26 (44.1%) were female. More than 80% of the patients were in the age group of 26–45 years with 37.22 ± 8.37 years as the mean age of the patients included in the study. The mean score for general satisfaction was 3.22 (SD 0.86), for technical quality 3.03 (SD 0.92), for the interpersonal manner 3.25 (SD 0.93), for communication (SD 0.90), for financial aspects was 2.38 (SD 1.00) and for time spent during the visit, the mean score was 2.97 (SD 0.98). The mean score for accessibility and convenience was found to be 2.59 (SD 0.97).

DISCUSSION

Studies on patient satisfaction are rare in this part of India. This is the first study on patient satisfaction using Patient Satisfaction Questionnaire (PSQ-18) from Himachal Pradesh state of India.

Results indicated that satisfaction levels were highest for interpersonal relations (mean score = 3.25) followed by general satisfaction (mean score = 3.22) and lowest for financial aspects (mean score = 2.38) and accessibility and convenience.

### Table 1: Age and gender wise distribution of HIV patients

| Age group (years) | Male | Female | Total |
|-------------------|------|--------|-------|
| <15               | 2 (3.4) | - | 2 (3.4) |
| 16-25             | 1 (1.7) | - | 1 (1.7) |
| 26-35             | 8 (13.6) | 13 (22.0) | 21 (35.6) |
| 36-45             | 17 (28.8) | 11 (18.6) | 28 (47.5) |
| 46-55             | 5 (8.5) | 2 (3.4) | 7 (11.9) |
| Total             | 33 (55.9) | 26 (44.1) | 59 (100) |

| Male | Female | Total |
|------|--------|-------|
| Mean age ± std deviation | Mean age ± std deviation |
| 37.12 ± 10.03 | 37.37 ± 5.81 | 37.22 ± 8.37 |

### Table 2: Distribution of patients according to age group and gender

| Age group (years) | No. of patients (%) | Total |
|-------------------|---------------------|-------|
|                   | Male | Female | Total |
| <15               | 2 (3.4) | - | 2 (3.4) |
| 16-25             | 1 (1.7) | - | 1 (1.7) |
| 26-35             | 8 (13.6) | 13 (22.0) | 21 (35.6) |
| 36-45             | 17 (28.8) | 11 (18.6) | 28 (47.5) |
| 46-55             | 5 (8.5) | 2 (3.4) | 7 (11.9) |
| Total             | 33 (55.9) | 26 (44.1) | 59 (100) |

| Mean age ± std. deviation | Mean age ± std. deviation |
|---------------------------|---------------------------|
| 9.50 ± 2.12 | 16.00 ± 0.00 |
| 32.38 ± 2.00 | 48.40 ± 1.52 |
| 40.53 ± 3.45 | 51.50 ± 4.95 |
| 49.29 ± 2.81 | 37.12 ± 10.03 |
| 40.07 ± 2.81 | 37.22 ± 8.37 |
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A study from Ethiopia to know the reasons for HIV/AIDS patients' satisfaction with pharmacy revealed that 82.5% of HIV/AIDS patients indicated long waiting time was a major reason for their dissatisfaction; 93.3% of the respondents prefer to get their pharmacy service within a shorter span, 18.02% wanted comfort waiting hall, 14.32% expecting staffs politeness, 5.18% insisted sufficient number of ART units, 8.88% adequate supply of ART drugs, and 21.48% cleanliness.

In a study conducted in New York on 29 (30%) clients of Gay Men's Health Crisis (GMHC), satisfaction was “mentioned in connection with one or more major sources: Convenience, positive relationship with physician, and limited out of pocket expenses.” In contrast, dissatisfaction was found to be associated with both global and specific situations. There was general dissatisfaction with the “limited and inefficient HIV/AIDS services,” the lack of knowledge about HIV/AIDS and the lack of compassion for and prejudice against people with HIV/AIDS.

A study was conducted among 85 clients attending a specialized NHS care clinic in London, England, to assess the health and social needs and views and opinions on services of HIV/AIDS care consumers and to compare these to responses among providers of HIV/AIDS care. The authors conclude that when compared with the lack of attention and services to their social needs, HIV/AIDS patients were generally satisfied with the services dedicated to their health needs.

In another study women reported wanting emotional support (46%), wanting to be told the truth about their condition (46%), reduced barriers to care (40%), material social support (help with housing, finances, transportation; 36%), disease and treatment education (30%), and finally women reported wanting to receive care from a place where they can find hope and positive messages (24%).

This paper attempted to address the issue of what patient satisfaction actually means and represents from the perspective of the patient. Generally, satisfaction is assumed to result from the fulfillment of expectations; however, according to the authors, there is little actual empirical evidence of this in our setup.

A possible limitation of this satisfaction study is the sample size, which may not be very representative.
and may pose problems in terms of generalizing the results. Nonetheless, the participation level was as expected for surveys that are completed at a later date, which is between 8%–60%.[7] It also helps identify those aspects requiring improvement and establishing what improvements are needed. It is also important to identify the reasons for dissatisfaction to complement this information.

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| Standard sites                                                                 | www.unaids.org          |
|-------------------------------------------------------------------------------|-------------------------|
| • UNAIDS                                                                       |                         |
| • World Health Organization                                                   | www.who.int             |
| • Centers for Disease Control and Prevention                                  | www.cdc.gov             |
| • National AIDS Control Organization                                          | www.nacoonline.org      |
| • National Institutes of Health                                               | www.nih.gov             |
| • The International Union against Sexually Transmitted Infections             | www.iusti.org           |
| • International Journal of STD & AIDS                                         | ijsa.rsmjournals.com/   |
| • Journal of Acquired Immune Deficiency Syndromes                             | journals.lww.com/ajds/pages/default.aspx |