

KEY POINT SUMMARY

OBJECTIVES

This study examined patient satisfaction with WCs and TCs run by the U.S. Veterans Administration.

DESIGN IMPLICATIONS

Develop WCs; patients are more satisfied with the care they receive there than in TCs.

Patient Satisfaction in Women's Clinics Versus Traditional Primary Care Clinics in the Veterans Administration

Bean-Mayberry, B., Chang, C-C., McNeil, M., Whittle, J., Hayes, P., Hudson Scholle, S. 2003 | Journal of General Internal Medicine Volume 18, Issue 3, Pages 175-181

Key Concepts/Context

Female patients are more satisfied with the care they receive at women's clinics (WCs) than traditional primary care clinics (TCs). This study is important because the data collected indicate that female patients are more satisfied in WCs than in TCs, regardless of age and race.

Methods

Information was collected via surveys mailed to female veterans who had visited a WC run by the VA from March 1, 1999, to March 1, 2000, and from surveys mailed to female veterans who had not visited a WC but had visited a TC run by the VA during the same period. A total of 2,235 surveys were mailed. Of that total, 74 were not deliverable, 222 were excluded because the women were treated at VA clinics that did not have a comparison WC, and 128 were eliminated because the responding women did not specify the location of the VA clinic at which they were treated. In total, survey responses from 971 people were analyzed.

Overall satisfaction was determined using an item from the VA National Survey of Ambulatory Care: Overall, how would you rate the quality of care you received at the VA in the past 12 months? Participants were also asked 34 questions in a draft version of the Primary Care Satisfaction Survey for Women (PCSSW), which was developed by the Federal Centers of Excellence in Women's Health. The major topics covered in the PCSSW were getting care, privacy and comfort, communication, complete care, and follow-up care. Demographic information (age, race, marital status, level of education, household income, and location of clinic visited) was also collected.





The Center for Health Design: Moving Healthcare Forward

The Center for Health Design advances best practices and empowers healthcare leaders with quality research providing the value of design in improving patient and performance outcomes in healthcare facility planning, design, and construction, optimizing the healthcare experience and contributing to superior patient, staff, and performance outcomes.

Learn more at www.healthdesign.org

Findings

The statistically significant findings were:

- Patients in WCs were significantly more likely to report excellent overall satisfaction than those treated in the TCs (p < .005).
- People treated in the WCs were also significantly more likely to provide excellent ratings in the area of complete care (p < .017).
- Women treated in the WCs were significantly more likely to provide ratings of excellent in the area of communications (p < .008).
- When age, race, level of education, marital status, income, health status, recent visit with a primary care provider, use of other VA providers, use of a regular non-VA physician and treatment sites were removed statistically as possible explanations for the evaluations provided, patients visiting the WCs were more likely to rate their satisfaction as excellent than those treated in TCs (p = .05).
- Patients treated in the WCs were more likely than patients treated in the TCs to report a perfect satisfaction score on all aspects of the PCSSW: getting care (p = .08), privacy and comfort (p = .013), communication (p = .006), complete care (p = .005), and follow-up care (p = .006).

Other findings include:

The authors report that, like other researchers, they found that people who
were older, in better health, and had recently visited their primary care
provider were more satisfied with the care received. Also, as in other studies,
the situation was reversed for patients with more education; they were less
satisfied.

Limitations

- Provider and system characteristics that might have influenced satisfaction were not studied.
- Information on the regular service providers, such as their specialty, was not considered.
- At some facilities, the same care providers work in both the WCs and TCs.
- Data on healthcare behaviors, veteran insurance status, and use of non-VA facilities were not thoroughly addressed.
- Information was only collected from female veterans and not male veterans or civilian women.