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BACKGROUND AND IMPORTANCE

Nowadays, it is widely recognized that quality of care depends mostly on patient satisfaction. Thereby, patients often have other expectations, wishes and priorities that care providers must take into account for an effective organization of health care. As part of performance measurement and continuous improvement of the quality of services, measuring the degree of "customer" satisfaction is an essential element for drawing up an inventory and targeting shortcomings and frequent causes of dissatisfaction, in order to be able to take the appropriate corrective and/or preventive measures.

AIM AND OBJECTIVES

Our study aims to probe our patients' satisfaction toward pharmaceutical care at our hospital. This was conducted through an investigation in order to define new directions that will permit to improve our customer satisfaction and loyalty by improving our brand image and educating staff about our customer expectations.

MATERIAL AND METHODS

The satisfaction survey was conducted over a period of two weeks using questionnaires administered to a sample of 112 patients (hospitalized or admitted at day hospital) after they completed their discharge formalities.

A satisfaction survey can never be either global or exhaustive. So, to ensure a satisfactory return rate allowing us to objectively conclude on the level of satisfaction of our patients, we opted for an indirect administration of the questionnaires. In this case, it is the interviewer who notes the answers provided by the subject.

Study design

The study took place in five phases composed of different stages :

- Carrying out actions prior to the development of the questionnaire (definition of the subject of the survey and choice of the target population) ;
- Development of the questionnaire (bibliographic study, adaptation to the context of the study, test and validation of the questionnaire) ;
- Administration of the questionnaire ;
- Processing of completed questionnaires (coding and entry of questionnaires, processing data using Microsoft Excel® version 2010)
- Drafting of the investigation report

RESULTS

Data collection

- Number of patients approached : 112
- Number of questionnaires administered : 78
- Number of questionnaires not fully completed (less than 30% completed) : 05
- Total number of questionnaires used : 73
- Questionnaire completion rate : 65,18%

Characteristics of the study population

The exploitation of these questionnaires has objectified the following data :

- The study population is predominantly male (Sex ratio M/F = 50/23)
- Average age : 45.86 ± 15.4
- Most of patients are insured (89%)
- the distribution of the study population by care units is shown in figure 1.

Patients' satisfaction toward pharmaceutical care

- 64% of patients say they have always or often received explanations about their treatment without having to ask for during hospitalization (figure 2) and 93% believe that the information was always adapted to their understanding.

Figure 1 : Distribution of the study population by care unit (n=73)

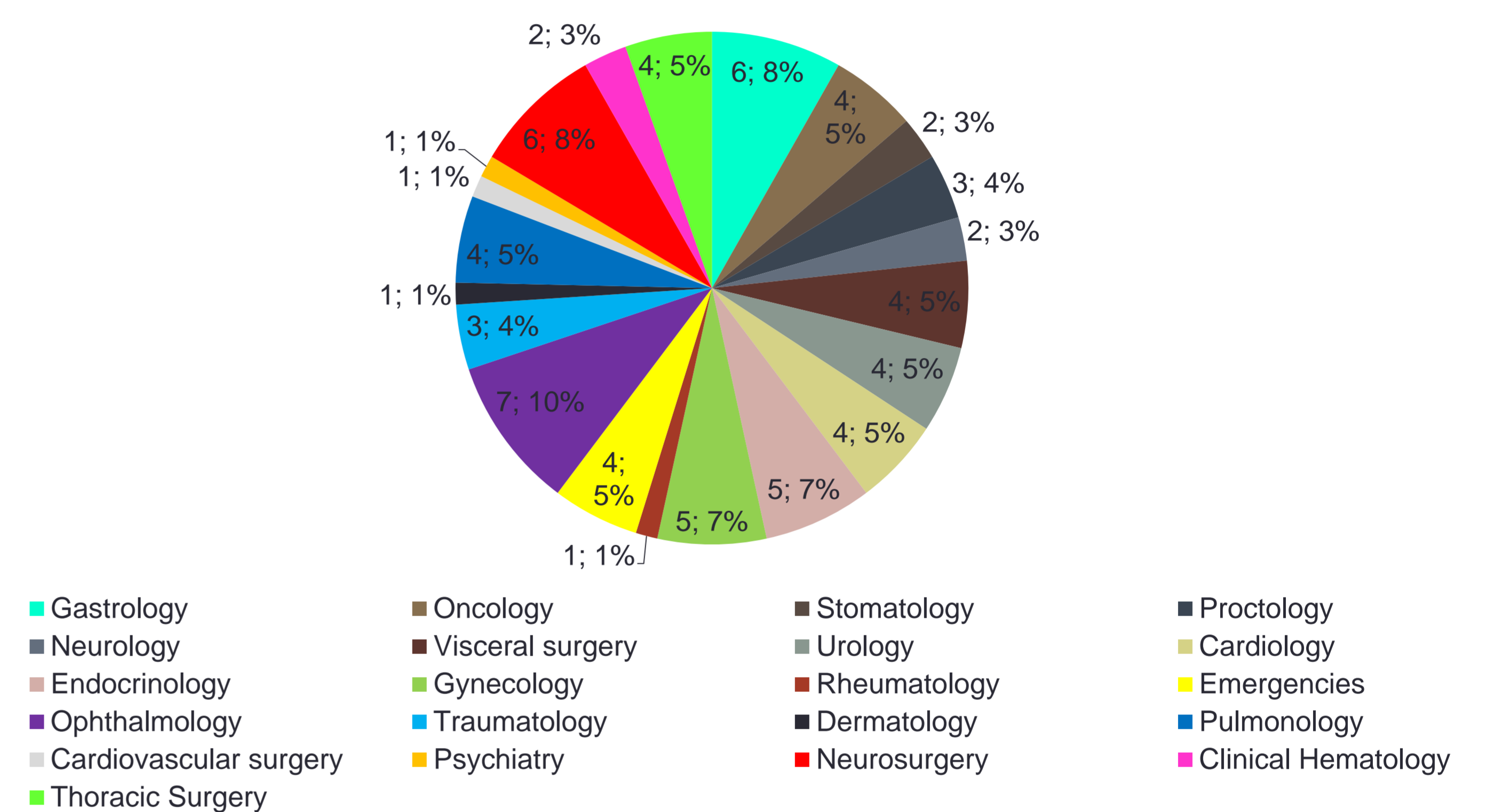


Figure 2: Explanations relating to therapy received without having to ask for them (n=73)

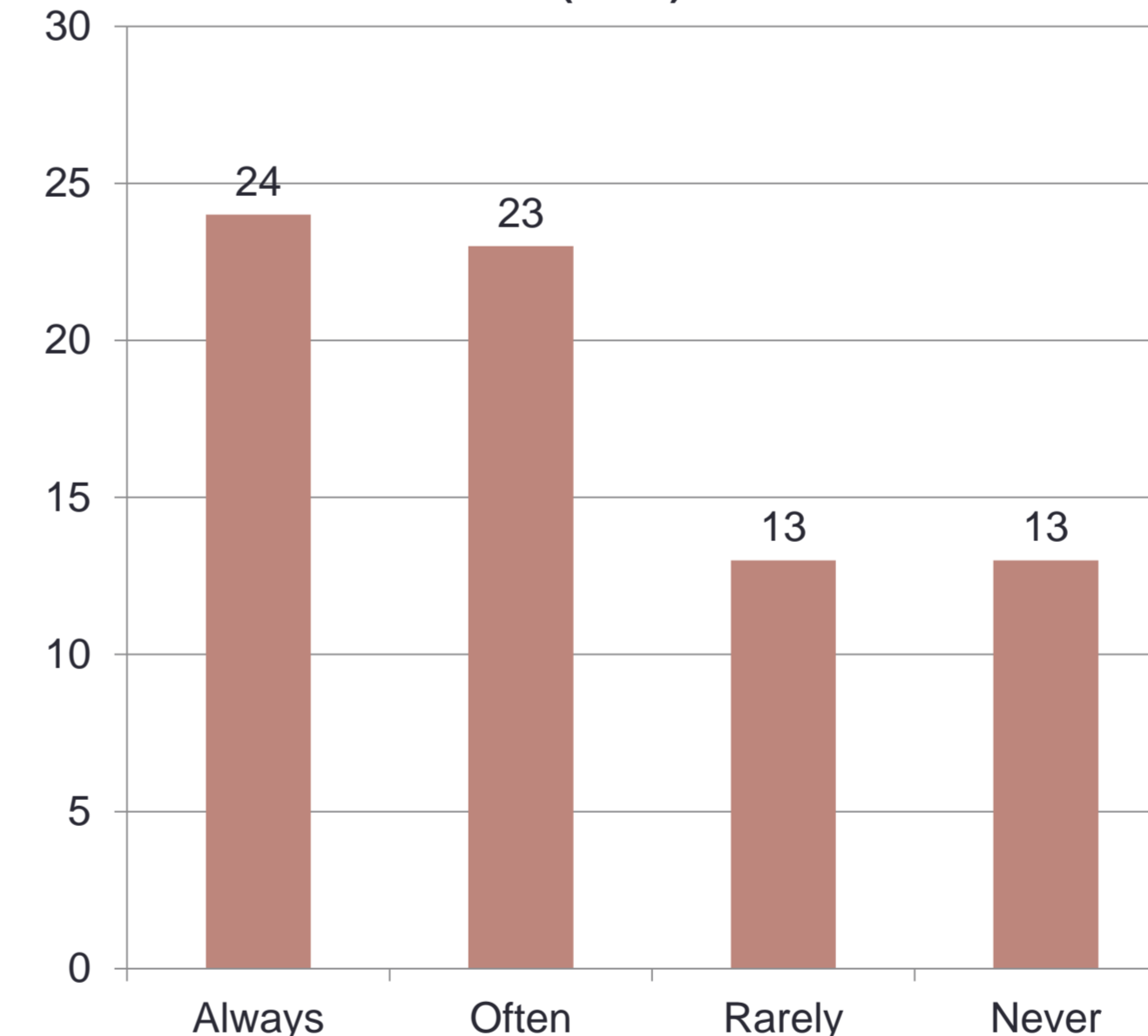
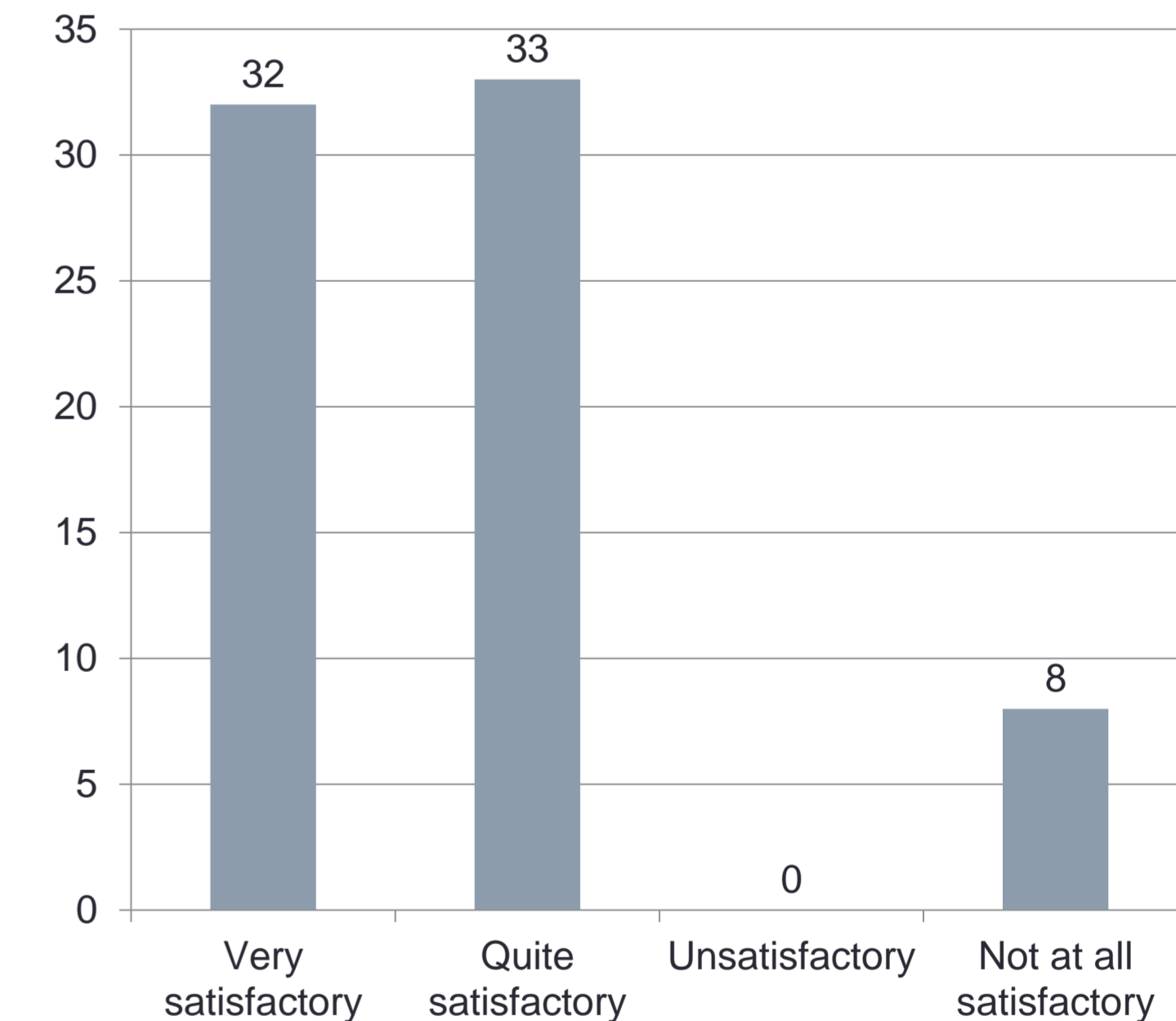


Figure 3 : Overall quality of therapeutic education at discharge (n=73)



- During hospitalization, a side effect occurred in 11% of cases. These latter were correctly informed about the incident in 75% of cases.
- For health problems requiring their participation in certain care actions before and after discharge (E.g. insulin injection), patients estimate at 78% that they were sufficiently trained to take charge of these actions. Family of these patients was associated to the training in 17% of cases.
- At discharge, overall quality of therapeutic education is shown in figure 3.
- 90% of patients believe that pain has been satisfactorily managed.
- The hospital stay was globally rated as satisfactory by 88% of surveyed patients and 97% would recommend this hospital to friends or family members.

CONCLUSION AND RELEVANCE

The factors that were at the origin of the dissatisfaction of our patients enabled us to redefine our quality policy by setting new objectives allowing us on the one hand to capitalize on the strengths, and on the other hand to focus on critical points to better meet patient expectations.

Indeed, the survey results showed that most deficiencies are caused by communication problems. Communication in the health professions is characterized by its complexity due to the technical nature of the profession and the weakened psychological state of the patient, which makes him a particular client. Therefore, training the pharmaceutical team on communication techniques and their awareness of the importance of therapeutic patient education would make it possible to remedy a good part of the anomalies observed and to improve even more the brand image of our hospital.