



Position Statement

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Patient Experience/Satisfaction in the Emergency Care Setting

Description

The evolution of healthcare delivery has resulted in a shift of priorities, bringing about a significant focus on the patient experience, satisfaction, and customer service.¹ Patients continue to expect competent, safe, and quality care, and in addition, also desire a higher level of “service.” Safe, quality care has been quantified using three types of indicators: clinical outcomes, cost-effectiveness, and service delivery.²⁻⁴ Patients cite such factors as effective pain management, timely care, empathy, and pertinent, clear information, to include discharge instructions, as patient satisfiers.² Used to denote an indication of value, the results of patient satisfaction surveys have influenced private and public reimbursement for care.⁴ While patient satisfaction may not necessarily be a reliable indicator of quality care,^{5,6} the patient’s perception can be a valuable source of information regarding which patient care measures are successful and which ones are not.³ A recent study of emergency nurses, however, reports a disparity between patient satisfaction and emergency nurses’ perception of quality patient care.⁶

Providing patient satisfaction in the emergency department (ED) environment can be challenging. Although most agree that the ED is the entry point for a great majority of patients admitted to the hospital, interactions in the ED are of a unique nature.^{2,3,5,7,8} There is typically no previous existing familiarity between patient and/or family and the ED staff. In a chaotic environment where communication may be brief, trust must be established rapidly. It has been reported that satisfied patients tend to have improved adherence with their treatment regimen and have better outcomes²; thus emergency nurses are uniquely positioned to improve patient outcomes using patient satisfaction strategies.

ENA Position

It is the position of the Emergency Nurses Association that:

1. The primary customers of the emergency department are patients, families, and significant others.
2. Respect for the diversity of patients, families, and significant others is inherent in emergency nursing practice.
3. Emergency care environments present a unique challenge related to customer service and patient satisfaction measures.
4. Emergency nurses proactively develop awareness of and consistently demonstrate patient care strategies to increase patient satisfaction.
5. Emergency nurses receive continuing education and feedback related to the strategies for providing the elements of service, patient satisfaction, and quality care.
6. Emergency nurses actively participate in data collection, measurement and analysis of customer service elements, quality of care parameters, and patient satisfaction factors critical for evaluating improved outcomes related to patient satisfaction and quality care in the emergency department.
7. Research related to patient and nurse satisfaction; nurse perception of quality care; the relationship between satisfaction, patient care, and optimal outcomes; and quality indicators is essential to develop valid, reliable, and relevant nurse-sensitive quality indicators for emergency nursing.



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Background

Data and reports related to hospital quality of care date back to 2001.^{9,10} Consumers, hospitals, physicians, employers, accrediting agencies, and the federal government have teamed up to provide a variety of performance measures to assist consumers in making informed healthcare choices.⁹ In 2001 the Institute of Medicine (IOM) suggested a “patient-centered approach” stressing the need for communication and accessible information, shared knowledge, collaboration among team and family/friends, and attention to patients’ cultural and spiritual preference and needs.¹⁰ More recent studies reveal that providing patients and their families with accurate information related to their care was a significant determinant of increased satisfaction.^{1,7-8} Additionally, altering the patient’s perception of their wait experience can improve satisfaction.⁸ Research has also demonstrated a correlation between patient satisfaction with staff empathy/attitude, wait times (perceived versus actual), technical competence, pain management, and the communication of information.²

While there are numerous indicators and operational definitions to measure inpatient quality care, indicators and descriptors for care specific to the ED, and in particular, emergency nursing, have not been validated.⁶ Two specific performance measures currently being evaluated in emergency departments are door-to-provider time and left without being seen (LWBS).^{1,7-8} Improvements in the ED environment, patient flow, and staff interpersonal skills may provide patients with a more positive ED experience.^{1,2,5,8} There may also be a connection between patient satisfaction and staff satisfaction. Additional research is warranted in these areas.

Additional Resources

ENA Position Statement – Care of Patients with Chronic/Persistent Pain in the Emergency Setting.
<http://www.ena.org/SiteCollectionDocuments/Position%20Statements/ChronicPain.pdf>

ENA Position Statement - Violence in the Emergency Care Setting - <http://www.ena.org/about/position/position/Pages/Default.aspx>

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