

Introduction

Benefits of continuity of care

- decreases the utilization of healthcare services including the number of emergency department visits, hospital admissions for ambulatory conditions, and adverse events from medical errors, improve quality of life and patient satisfaction (Forstner et al., 2021).

Benefits of patient satisfaction

- increases a patient's adherence to their treatment processes, increases their adherence to their recommended health prevention plans and overall improve their health outcomes (Chandra et al., 2019).

Background and Significance

Having consistent healthcare providers offers patients a sense of predictability and coherence, which can help foster a trusting relationship between patient and provider (Jackson et al., 2016).

- When patients have a higher trust in their relationship with their provider they are more satisfied with their treatment, have a higher quality of life and display more positive health behaviors (Birkhauer et al., 2017).

Contact Information

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Methodology

Study Design: Cross-sectional study

Study Setting: Conducted in a primary care/urgent care clinic in Northern New Jersey.

Study Sample : 18 participants were recruited randomly

Study Intervention: Eligible participants were given a satisfaction questionnaire. The participants were scheduled for their follow-up with the same nurse practitioner and asked to complete the same questionnaire after their follow-up.

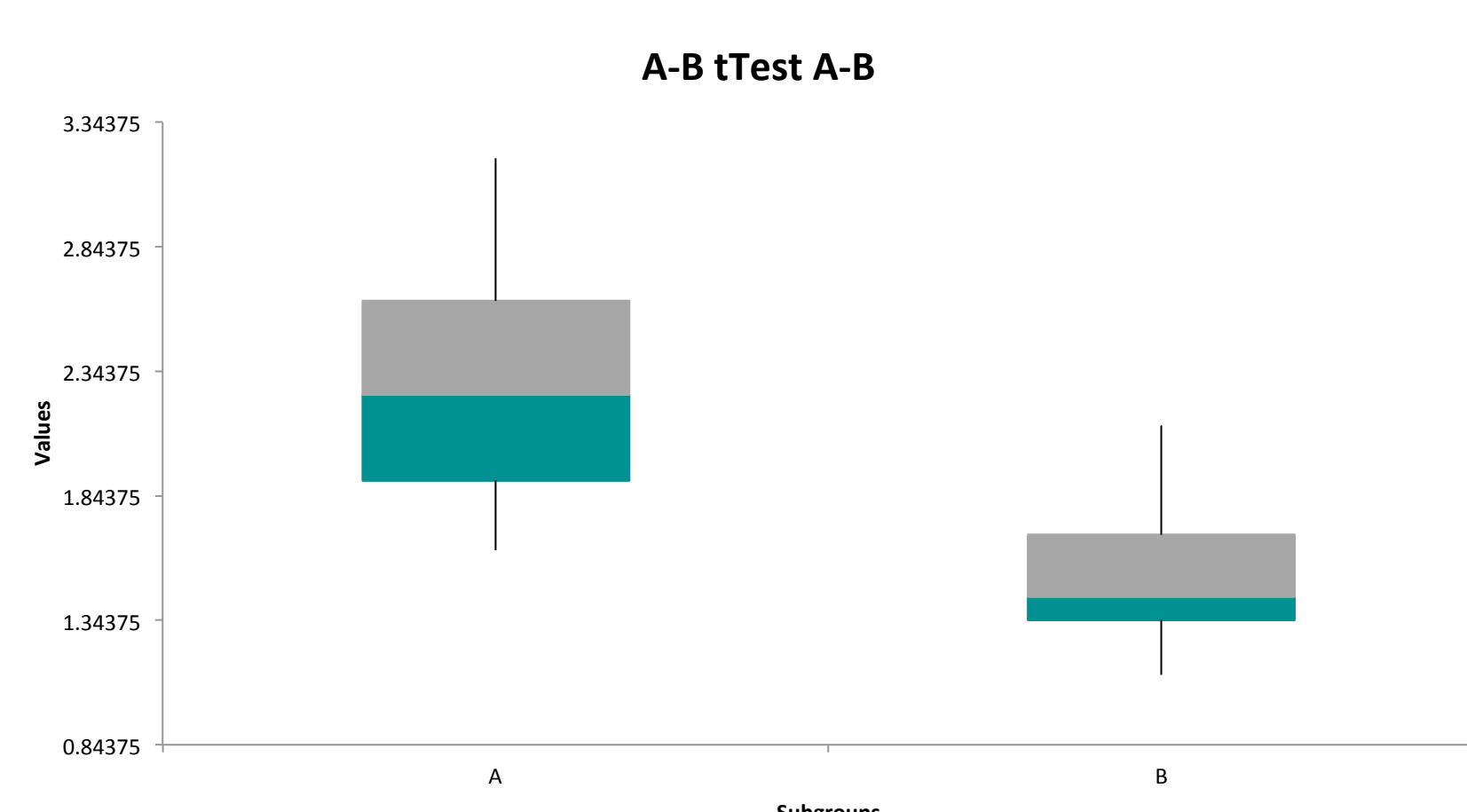
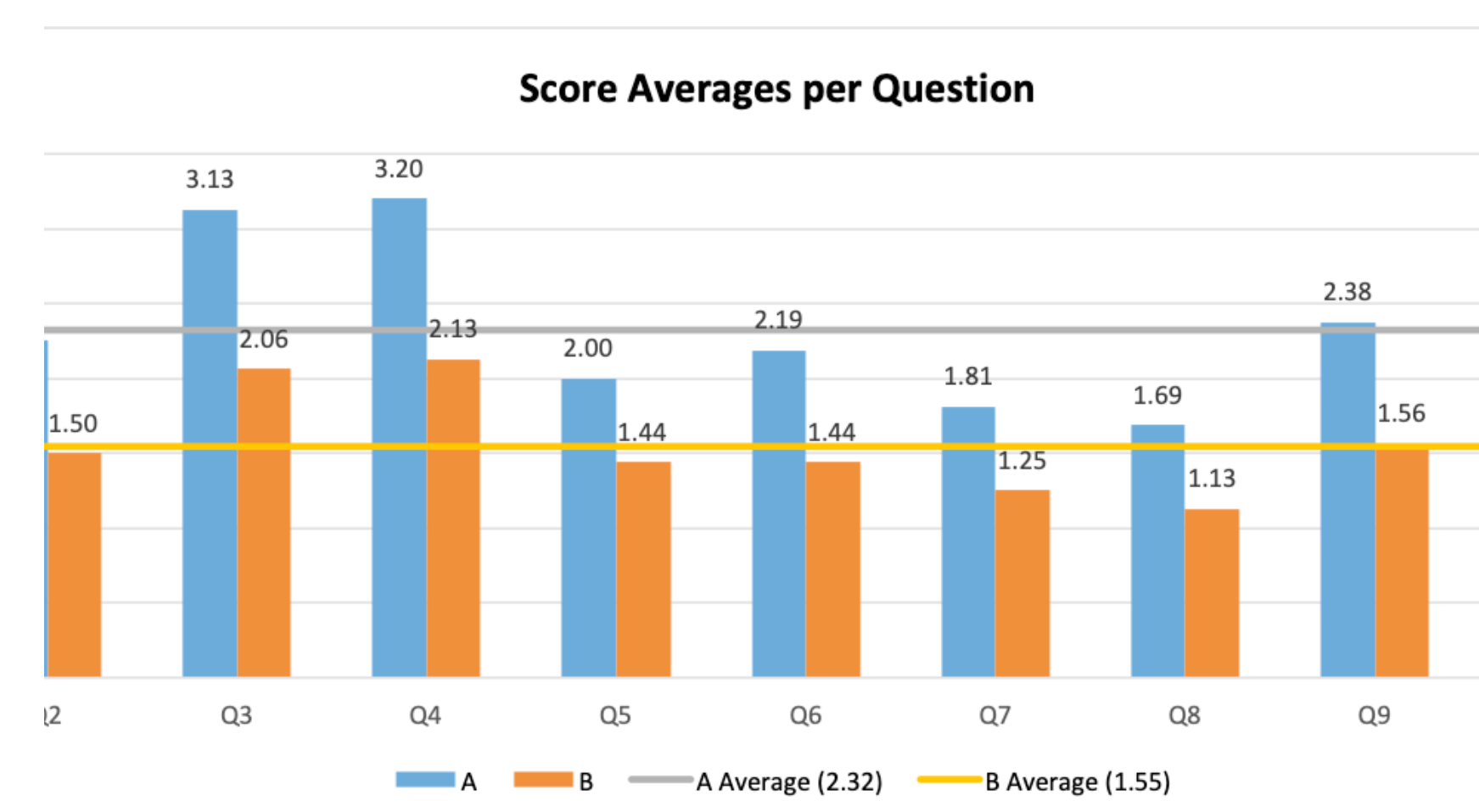
Outcomes Measures: The data from the Likert scale questionnaire was used to determine if the participant's satisfaction increased after utilizing continuity of care by scheduling the participants with the same nurse practitioner during their follow-up appointment.

Data Analysis

The instrument scores patient satisfaction as "strongly disagree", "disagree", "undecided", "agree" and "strongly agree".

The quantitative data that was collected from the questionnaire was analyzed using frequencies and percentages for categorical values and means and standard deviations for continuous variables.

A T-test was performed to compare the results from the two questionnaires.



Study Results

The average of the second questionnaire was 1.54, which showed an improvement in the variance over the first participant response survey.

A T-Test was then applied to all of the responses.

- absolute value of the T-Stat (10.659) is greater than the critical two-tail value (2.228), the null hypothesis is rejected.

The P-value is less than the alpha of 0.05, indicating significance.

The findings do show that there was an improvement in satisfaction scores between the first and the second survey, and the sample did provide sufficient evidence to conclude that the effect exists.

Discussion

The implementation of continuity of care has the potential to increase patient satisfaction and improve many aspects of patient outcomes.

Limitations

- Small sample size (n=18) affecting generalizability
- Time frame of the study was only 6 weeks
- Scheduling of patients with the same nurse practitioner proved challenging

Future implications

There is a need for more studies on the impact of continuity of care on patient satisfaction in the United States.

There is a need for studies over longer periods of time to evaluate the impact of continuity of care over time.

Study Implications

Impact on Healthcare Quality and Safety

Continuity of care leads to

- Lower risks of hospitalizations, lower risk of premature death, lower risks of emergency department visits and lower healthcare costs (Swedish Agency for Health Technology Assessment and Assessment of Social Services, 2021).

Patient satisfaction

- Impacts patient outcomes increasing patient adherence to their treatment processes, increasing adherence to their recommended health and prevention plans and improved quality of life (Agency for Healthcare Research and Quality, 2020).

Economic. Cost Benefit

Continuity of care improves health care costs by decreasing hospital admissions and reducing ambulatory- care related hospitalizations.

The increase in patient satisfaction can potentially improve the providers' CAHPS survey scores.

- There is a negative payment adjustment of forfeiting 1% of Medicare payments when the provider does not provide satisfactory scores or has poor outcomes (Cohen et al., 2017).

References (Please scan)

