Patient satisfaction and patient experience are not interchangeable concepts

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Letter to the Editor,

I write after reading with great interest the recent review by Anufriyeva and colleagues[1] regarding the validity and reliability of self-reported satisfaction measures. This is a well-written and comprehensive review, and the authors should be commended on their efforts to synthesise this body of literature. I would like to raise a point of contention regarding the authors' confusing conceptualisation of 'patient satisfaction'. That is – 'patient satisfaction' and 'patient experience' are not interchangeable concepts.

Many organisations internationally continue to identify and promote patient satisfaction as a measure of healthcare quality. However, it remains uncertain whether patient satisfaction is the appropriate measure to emphasis in our endeavour to optimise the patient-centeredness of healthcare services. As the authors rightly highlight, "*[patient satisfaction] may reflect personal expectations rather than the quality [of healthcare] itself*".[1] It is this lack of objectivity that has seen us shift our attention from measures of patient-reported satisfaction to measures of patient-reported experience in recent decades.[2]

A patient's experience can be defined as 'what' happened during an episode of care, and 'how' it happened from the patient's perspective.[3] Patient-reported experience measures (PREMs) consequently objectify targeted aspects of a patient's care encounter by posing objective and unbiased questions. This is achieved through report-type questioning, whereas patient-reported satisfaction measures ask evaluation-type questions i.e. where a PREM might ask "*how long did you wait to speak to a care provider?*", a patient-reported satisfaction measure might ask "*how would you rate the length of time you waited to speak to a care provider?*".[4] Thus, by minimising the potential for 'courtesy bias' and the 'Hawthorn effect', PREMs provide data that is more actionable for quality improvement initiatives.

It is important to highlight the difference between ‘patient satisfaction’ and ‘patient experience’ as they are two separate (though complexly related) concepts. It could also be argued that patient-reported satisfaction measures are out-dated and that PREMs are a better means of gaining insight into the aspects of healthcare that patients truly value.

Notably, the authors of this review use the concepts synonymously within their database search strategy without justifying their decision to do so, or acknowledging that there are differences between these two concepts. As the first recommendation arising from this research is to “*develop a unified standard toward satisfaction measurement to reduce subjectivity*”, [1] greater care needs to be taken when defining the concepts underpinning research. This will not only aid the conceptual clarity between ‘patient satisfaction’ and ‘patient experience’, but it may also help to suppress the narrative that patient-reported measures (of any kind) are just another survey to be completed.

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References

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