

Patient Satisfaction Survey Report
Johns Hopkins University Student Health & Wellness Center
Academic Year 2013-2014

Submitted by Alain Joffe, MD, MPH
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The identified problem or concern in the care of patients

Assessment of student satisfaction with the John Hopkins University Student Health & Wellness Center (JHU SHWC) is an essential component of making certain that services offered to students are accessible, of high quality, and consistent with student needs. It is also a key component of our quality improvement program as student evaluations/feedback alert the SHWC to potential or existing problems.

Evaluation of the frequency, severity, and source of suspected problems or concerns

The 2013-2014 JHU SHWC Patient Satisfaction Survey was conducted from 9/3/13-5/31/14. Surveys this year were administered through StudentVoice.com (previously called Campus Labs). Comments from the online surveys were downloaded into an SPSS data file that maintained free text. "Wishbox" comments were typed into a Microsoft Word document.

Of 2730 students invited via email to complete the satisfaction survey, a total of 346 (12.7%) completed at least some portion of the survey. About 63% of respondents were undergraduates and 31% graduate students. In terms of number of prior visits made to the health center at the time they completed a survey, 17% reported that this was their first visit, 32% reported they had made 2-3 visits and 51% had made 4 or more visits.

The attached Excel spread sheet summarizes the survey results for academic years 2002-2014. In 2007-2008 we participated in the pilot American College Health Association Patient Satisfaction Survey so the questions were somewhat different and the results are not shown.

Overall, the results are comparable to the 2012-2013 results. On three items (friendliness/courtesy/professionalism of front desk staff, friendliness/courtesy/professionalism of CMAs/LPN/RN, and "Recommend to other students") we scored "higher" than last year. On all other items we scored the same or slightly "worse." However, both "higher" and "worse" reflects a difference of at most 0.11 on a 0-3 scale.

Review of the free text comments about why a student was not "very satisfied" tend to reveal several themes:

- Had to wait too long to be seen or visit took too long
- They didn't know what was wrong with me/didn't make me feel better
- Staff weren't friendly
- Instructions about what to do weren't clear

Re-Evaluation & Alternative Measures

We will repeat the survey next year.

Reporting

The executive committee, whose members are also part of our accreditation committee, reviewed the findings of this report. This report was distributed to all JHU SHWC staff.

Corrective measures and Director's Comments

Given the low response rate, it's hard to read too much into these results. Overall we did about the same as last year or perhaps slightly worse. The themes seem to be the same as in the past. While we should always strive to do better, some concerns expressed reflect a lack of understanding that for many common viral illnesses, we can offer support but otherwise can do little to change the course of the illness. This is clearly where the art of medicine comes in. We must always remember that when students don't feel well, supportive comments can go a long way – appearing unsympathetic adds to the stress they feel when they are ill. Even a minor comment can be magnified when a student is feeling ill.

As for time, we need continuously to strive to be more efficient. We should always examine our practices to see where we can become more efficient. But we have some built in constraints – dispensing medication on site to a student takes provider time but saves the students a trip to the pharmacy – they may not see that.

This year we did not make any progress towards my goal of having fewer than 5% of students be dissatisfied or very dissatisfied with their visit (this year = 8.60%, last year 6.9%) and having fewer than 5% of students indicating they “may not” or “definitely not” recommend us to other students (this year and last 6.80%). We need to continue to work on that.

Alain Joffe, MD, MPH

Director

Patient Satisfaction Survey comments attached