

The impact of the “open-door” policy on patient satisfaction: the experience in acute inpatient unit

Georgina Sánchez; Núria Pujol; Maria Teresa Campillo^{*}; Roberto Sánchez; Gema Hurtado; Clara Montserrat; Alfons Rodríguez; Marta Vallvé; Víctor Frías; Zaida Cañadas; Rosa Aceña; Carme Daura; Albert Pratdesava; Isabel Cabellos; Alba López; Purificación Salgado; Víctor Pérez

Dr. Emili Mira Centre (CAEM), Institute of Neuropsychiatry and Addiction of the Barcelona, Barcelona MAR Health Park Consortium (PSMAR), Barcelona, Spain.

^{*}Corresponding autor: M^a Teresa Campillo Sanz (25011@parcdesalutmar.cat)

XII CONGRESO INTERNACIONAL y XVII NACIONAL de PSICOLOGÍA CLÍNICA

BACKGROUND

Traditionally, psychiatric wards had established a “locked-door” policy mainly based on safety concerns. However, secluded conditions may increase patient's discomfort¹, which in turn may affects the perception of health quality of care². Recently, the “open-door” policy is increasingly being adopted in several European countries such as Germany, Switzerland and Spain^{3,4}, but its impact on patient satisfaction remains largely unknown. To the best of our knowledge, the Dr. Emili Mira Centre-MAR Health Park Consortium (CAEM-PSMAR) has been the first psychiatric hospital in Catalonia to implement the “open door” policy in an inpatient acute unit. Therefore, it would be important to determine if the implementation of this policy is associated with patient satisfaction.

OBJECTIVE

This study is aimed to investigate the impact of the “open-door” policy on patient satisfaction during their stay in the psychiatric inpatient unit at the CAEM-PSMAR.

HYPOTHESIS

Patient satisfaction, as measured by Satispsy-22-E⁵, will be better after the implementation of the “open-door” policy in the inpatient unit at the CAEM-PSMAR-in comparison with the satisfaction in the same unit before the implementation of the “open-door” policy.

METHOD

This is an observational study carried out at the inpatient unit at the CAEM-PSMAR. Two samples were compared; prior to the implementation of the open-door policy (*baseline* “locked-door”), 31 patient satisfaction data was collected during the period between October 2018 to April 2019. After the implementation of the open-door policy on June 2019, patient satisfaction from 38 subjects was also assessed between July to October 2019. All patients completed the SATISPSY-22-E at the time of discharge.

Assessment: Patient satisfaction was assessed by using the Satispsy-22-E, a self-administered questionnaire that has been translated and validated by our group (Frías, 2018, et al). The Satispsy-22-E assess patient's experience of hospitalization through 22 items distributed into 6 dimensions: satisfaction with the staff, quality of care, personal experience, information, activity and food and a total index score. The score range is from 0 to 100 (higher score means higher satisfaction) (Zendjidian, 2014, et al)

Statistical analyses: We compared patient satisfaction data as measured by the Satispsy-22-E according to door status (“open-door” vs “locked-door” policy) by applying ANOVA. The threshold for statistical significance for demographic and clinical data was set at $p < 0.05$. All statistical analyses were performed using the IBM-SPSS statistical software program (v. 25).

RESULTS

Descriptive statistics of total score in Satispsy-22-E and its 6 dimensions from baseline “locked-door” vs “open-door (before and after door status change) are provided in **Figure 1**. We found that after the “open-door” implementation, patient satisfaction was increased in the dimensions of “personal experience” and “food”, in comparison with patient satisfaction before (baseline “locked-door”) the implementation of the policy ($p < 0.05$). No significant differences ($p > 0.05$) were found in Staff, quality of care, information, activity dimensions as well as Total score index (see **Table 2**).

Figure 1 Mean and SD of Satispsy-22-E Score of dimensions and Total index

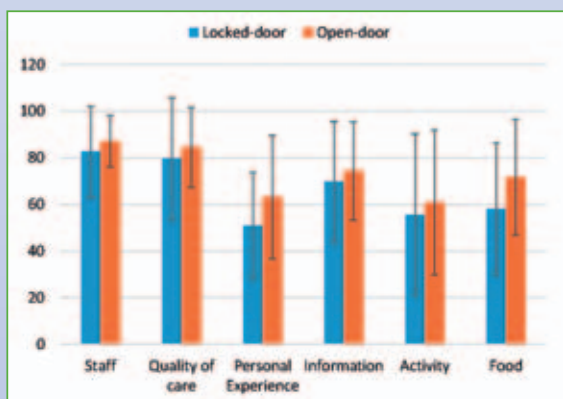


Table 2. Dimensional Statistics

Dimension		F-Test	Statistic Value
Staff	Satisfaction with work-team/staff (ie., helpful, availability, etc.)	1.402	p=0.241
Quality of Care	Satisfaction with treatment (ie., adequate treatment, etc.)	0.841	p=0.362
Personal Experience	Feelings during hospitalization) (ie., anger, loneliness, lack of freedom, etc.	4.071	p=0.048*
Information	Quality of received information (ie., care planning, discharge process, etc.)	0.656	p=0.420
Activity	Satisfaction with activities (ie., wide range of activities)	0.434	p=0.512
Food	Satisfaction with meals (ie., quantity and quality)	4.507	p=0.037*
TOTAL		3.645	p=0.61

* $p < 0.05$

CONCLUSION

Our results provide preliminary evidence indicating that the open door policy could have a positive impact on patient satisfaction, especially in relation to the personal experience on an acute inpatient psychiatric unit. Further research with a larger sample is warranted.

REFERENCES

- ¹Schreiber, L. K. (2019). Open doors by fair means: Study protocol for a 3-year prospective controlled study with a quasi-experimental design towards an open Ward policy in acute care units.
- ²Boyer, Baumstarck-Barrau; Cano et al., (2009) Assessment of psychiatric inpatient satisfaction: A systematic review of self-reported instruments.
- ³Hochstrasser, L., Fröhlich, D. et al (2017). Long-term reduction of seclusion and forced medication on a hospital-wide level: Implementation of an open-door policy over 6 years.
- ⁴Schneeberger, A. R., & Kowalinski, E., et al (2017). Aggression and violence in psychiatric hospitals with and without open door policies: A 15-year naturalistic observational study
- ⁵Frías, V.M., Colom, F., et al (2018) Spanish translation and analysis of the metric properties of inpatient satisfaction scale in psychiatry: The Satispsy-22-E, *Psychiatry Research*, doi: 10.1016/j.psychres.2018.06.054
- ⁶Hochstrasser, L., Voulgaris, A., Möller, J., Zimmermann, T., Steiner, R., Borgwardt, S., Huber, C. G. (2018). Reduced Frequency of Cases with Seclusion Is Associated with “Opening the Doors” of a Psychiatric Intensive Care Unit. *Frontiers in Psychiatry*, 9(57). <https://doi.org/10.3389/fpsy.2018.00057>
- ⁷Zendjidian X, et al. (2014). The SATISPSY-22: Development and validation of a French hospitalized patients' satisfaction questionnaire in psychiatry. *European Psychiatry*, <http://dx.doi.org/10.1016/j.eurpsy.2014.04.002>

Ethics: The study has been approved by the ethics committee of the Hospital del Mar/IMIM (2015/6531/1)

INAD
Institut de
Neuropsiquiatria
i Addiccions

Parc
de Salut
MAR
Barcelona