

## BRIEF COMMUNICATION

# Evaluating patient satisfaction on an acute leukemia/bone marrow transplant day/night treatment unit: A pilot project

by Diana E. McMillan, Darlene Grantham, Nadia Zenchyshyn and Kendra L. Rieger

## ABSTRACT

*The transition from hospital to home following hematopoietic stem cell transplantation increases the vulnerability for treatment challenges in patients, often resulting in unscheduled and costly hospital re-admissions. Two Acute Leukemia/Bone Marrow Transplant Day/Night (ALBMT) inpatient beds were established in 2011 at one tertiary care hospital to support successful transition from inpatient cancer treatment to home. This pilot study aimed to investigate patient satisfaction feedback on information provision, treatment, and emotional support on this care innovation. Fourteen former unit patients participated. Survey responses indicated positive satisfaction for treatment and emotional support, and opportunities for information provision enhancement. Findings of this preliminary study exploring satisfaction of this novel inpatient initiative provide important insights into the patient experience, informing future research and practice.*

## INTRODUCTION

The journey following hematopoietic stem cell transplantation includes complex physical and psychosocial treatment challenges (Crooks, Seropian, Bai, & McCorkle, 2014; Rueda-Lara & Lopez-Patton, 2014). The transition from hospital to home can be a particularly vulnerable and stressful time (Crooks et al., 2014), with infection, gastrointestinal complications, and graft versus host disease as primary reasons for unscheduled hospital re-admissions (Grant, Cooke, Bhatia, & Forman, 2005). Innovative care approaches are needed to provide effective patient support while decreasing unscheduled and costly re-admissions (Grant et al., 2005; Grundy & Ghazi, 2009).

## PURPOSE

One acute oncology unit at a mid-western tertiary care hospital converted two inpatient beds into the Acute Leukemia/Bone Marrow Transplant Day/Night (ALBMT) Unit. This clinical innovation

was aimed to facilitate successful patient transition from inpatient cancer treatment to home, improving patient care and flow. Although in existence since 2011, the unit's effectiveness from the patient perspective was unknown. A cross-sectional survey was developed to determine patient satisfaction in three areas: (a) treatment support, (b) emotional support, and (c) information provision.

## METHODS

Following ethical/institutional approval, a mail survey was sent to all patients on the ALBMT Unit between January 1, 2012, and December 31, 2013. An adapted version of the Princess Margaret Hospital Patient Experience Survey (Nyhof-Young, n.d.) was used to collect information on patient demographics, health history, and patient satisfaction. Tool adaptations included modification of some demographic and health history questions, broadening of one treatment category, contextualizing team titles, and adding an item on readiness to transition to the unit. This 67-item survey includes open and closed, check box or Likert format questions. Descriptive statistics were calculated to provide an aggregate description of the sample and response sets. Open-ended responses were compiled using content analysis approaches.

## RESULTS

Fourteen participants responded for a participation rate of 10.3%. Most participants were male (79%), above 40 years of age (86%), and diagnosed with cancer for two or more years (86%). All had received chemotherapy and or bi-therapy; some additional treatments included radiation and surgery.

Overall, responses were positive about care on the ALBMT Unit. The average satisfaction score was 9.2/10

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(SD 0.9) for treatment support, 9.5/10 (SD 0.7) for emotional support, and 6.2/10 (SD 2.6) for information provision. Four participants indicated they needed more support from one or more of the following professionals: surgeons, occupational therapists, nutritionists, physiotherapists, and clinical assistants. Lower satisfaction was reported in some aspects of care, such as perception of readiness to transition to the unit (mean = 8.5/10, SD = 2.6) and information about the emotional impact of having cancer (mean = 7.4/10, SD = 2.8).

### Qualitative comments echoed the range in patients' satisfaction scores:

I am surrounded by a team who are equally concerned for my physical and emotional well-being.

I need emotional support from my team. They keep me upbeat.

I really felt I wasn't ready to leave hospital (seemed like they rushed it to make room for additional patients).

I have received excellent medical support, but I have not required emotional support.

This preliminary study of a novel inpatient unit has provided important insights into patients' satisfaction of care. Plans for a larger mixed methods study are underway with the aim to better explore information needs and care delivery strategies.

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