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ORIGINAL ARTICLE

Effect of Communication Skills of Physical therapist on Patient Satisfaction Level

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Author`s Contribution

[1-2]Conception and design, Collection and assembly of data, [2-3]Analysis and interpretation of the data, [3-4]Critical revision of the article for important intellectual content, Statistical expertise [2-5]Final approval and guarantor of the article.

Article Info.

Received: April 27, 2022
Acceptance: August 24, 2022

Conflict of Interest: None
Funding Sources: None

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Cite this article as: Ali ST, Zaheer G, Shad I. Effect of Communication Skills of Physical therapist on Patient Satisfaction Level. JRCRS. 2022; 10(2):114-117
https://dx.doi.org/10.53389/JRCRS.2022100212

A B S T R A C T

Objectives: This analytical study is to investigate the effects of physiotherapists' communication skills on the patient satisfaction level

Methodology: Data was collected from private and government setups in different cities between November 2020 to January 2021 after informed consent from patients (N=243) receiving physiotherapeutic management by using a patient satisfaction questionnaire and Kalamazoo essential element checklist. Patients aged between 25-35 years receive physical therapy for more than a week in private and government physical therapy centers. Patients with hearing, neurological and cognitive impairments were excluded. The study reveals the highest average scores for communication and time spent with a physical therapist on a patient satisfaction questionnaire while on Kalamazoo essential element checklist, the highest scores go to open discussion between patient and physical therapist.

Results: A total of 243 patients were recruited out of which 123 lie in the age group 25-30 while 120 lie in the age group 30-35. 54.7% were male and 45.3% were female. The results showed that the correlation between communication skills and level of patient satisfaction is weak, but it was significant statistically ($r=0.258$, p-value<0.05).

Conclusion: The communication skills of physiotherapists have a positive impact on satisfaction levels of a patient. This may also be affected by time spent and how the physiotherapist builds relationships with his patient.

Keywords: Communication skills, health care profession, Physiotherapist-patient relationship

Introduction

Language is used as a tool to communicate effectively. Communication, in the form of language, not only conveys messages; it also devices and gives shape to ideas.[1] Communication is the backbone of patient care and guides treatment in its right direction.[2] A strong theoretical framework indicates the division of communication skills into discrete elements. These elements encompass behavioral actions and goals e.g., maintaining eye contact and understanding of patient's perspective, respectively.[3] In the healthcare profession, the practitioner should communicate clinical reasoning. It serves multiple purposes such as the comfortable environment for both practitioner and patient, efficient functioning of a multidisciplinary team, meeting legal requirements, clarifying patient's narratives, easy negotiation for shared goals, meanings, and decisions, and justifying the decision to stakeholders.[4] Clinical reasoning should be communicated effectively involving in-depth knowledge and clear understanding and many other factors that influence the decision-making process. It should be based on professional, personal, and formal knowledge.[4] Multiple studies showed that communication and medical outcomes are interlinked as communication skills polish with training and hence medical outcomes,

patient satisfaction, adherence, and safety can be improved.[5, 6]

Communication skills are a part of professional behavior.[7] Career readiness in professionalism, communication skills with patients and interpersonal communications is a need of hour for physical therapist. Little attention is paid towards this perspective. Up to our knowledge, there is a lack of information about effective communication between a physical therapist and a patient and whether it effects patient satisfaction ratio or not. The primary objective of this study was to find the relationship between patient satisfaction and communication skills of physiotherapist. Limited number of studies have been conducted previously in Pakistan. There is a lot of room to research for this area. This study would be a valuable addition in field in creating awareness about developing communication skills and as a consequence, patient satisfaction and adherence would improve.

Methodology

It was analytical associational study. The sample size of 243 patients was calculated from Rao software while the margin of error was 5%, fraction of response 80%, confidence level that is 95%. The study was approved by an institutional ethical review committee of The Superior group of colleges, Lahore. The Ref # is SU/ANCRD/IERC/08. Data was collected after informed consent from patients in different government or private setups including Punjab medical center Lahore, Rashid Latef hospital Lahore, Kot Addu Tehsil hospital, DG Khan district hospital and Rab medical center Multan between November 2020 to January 2021. Participants were selected using a convenient sampling technique. Inclusion criteria consisted of patients with any musculoskeletal condition between 25 and 35 years of age, receiving physiotherapeutic treatment for more than a week. Exclusion criteria consisted of patients with hearing problems, neurological and cognitive impairments. Patient satisfaction questionnaire (PSQ) (Cronbach's alpha = 0.74-0.95)[8] and Kalamazoo essential elements communication checklist (KEECC) (Cronbach α values .89)[9] were used. These questionnaire are used for measuring patient satisfaction and the different communication elements used during patient and physical therapist communication, Patients were asked to fill the questionnaire at the end of session with physiotherapist.

SPSS 21.0 was used for data analysis. The discrete variables were presented in mean and SD while the frequency tables were made for representation of categorical variables. Frequency, mean, and standard deviations were calculated for KEECC and PSQ. Pearson correlation and Linear regression were used for the assessment of relationship between level of patient satisfaction and communication skills of physical therapist.

Results

Descriptive data of age and gender reveals frequencies of gender and age group contributions. Total patient recruited was 243 out of which 133 (53%) were male and 110 (43.8%) were female. Age was divided in two age groups i-e 25-30 and 30-35. In age group 25-30 there were 123 (49%) patients and in age group 30-35 there were 120 (47.8%) patients.

Communication has the highest average score (2.9±0.58), financial aspect (2.9±1.01), and time spent with the doctor (2.9±0.63) while the lowest score goes for accessibility and convenience (2.4±0.54). (Table I)

On the scale of KEECC, out of 243 patients, 76 patients reported very good for building relationship, 86 patients reported very good for opening the discussion, 66 patients reported excellent for gathering information, 78 patients reported excellent for understanding of patient's perspective, 79 patients reported very good for sharing information, 67 patients reported very good for reaching agreement, and 81 patients reported excellent for providing closure. (Table II)

Table I: Average scores for all components of Patient satisfaction questionnaire

Components of PSQ	Mean±SD
General satisfaction level	2.8 ± 0.42
Technical quality	2.6±0.52
Interpersonal manner	2.8±0.33
Communication	2.9±0.58
Financial aspect	2.9±1.01
Time spent with the doctor	2.9±0.63
Accessibility and convenience	2.4±0.54
*PSQ=Patient satisfaction questionnaire	

Table II: Frequencies for all components of Kalamazoo essential element communication checklist (KEECC)					
Variables	Excellent	Very Good	Good	Fair	Poor
Building relationship	52(29.2%)	76(42.7%)	35(19.7%)	12(6.75%)	3(1.75%)
Opening discussion	45(25.3%)	86(48.3%)	30(16.9%)	13(7.3%)	4(2.2%)
Gathering information	66(37.1%)	52(29.2%)	39(21.9%)	17(9.6%)	14(2.2%)
Understanding for patient's perspective	78(43.8%)	43(24.2%)	33(18.5%)	21(11.8%)	3(1.7%)
Sharing information	45(25.3%)	79(44.3%)	38(21.3%)	14(17.9%)	2(1.1%)
Reaching agreement	48(27.0%)	67(37.6%)	35(19.7%)	19(10.7%)	9(5.1%)
Providing closure	81(45.5%)	37(70.8%)	31(17.4%)	15(8.4%)	14(7.9%)

The relationship between communication skills of physical therapist and level of patient's satisfaction showed weak correlation but it was significant statistically ($r=0.258$, p-value<0.05)

Discussion

This study demonstrated that communication skills of physiotherapists are directly linked with patient satisfaction level. The patient satisfaction questionnaire represents highest average marks for communication (2.9±0.58).

Available data also reported a direct link of physiotherapist and communication skills with patient satisfaction and adherence. Chris Lonsdale et al.[10] worked on short-term effects of communication skills of physiotherapist on patient adherence and satisfaction levels. In their study, they performed an assessment of each consultation at baseline, after one week, then at 4th weeks, then 12th weeks, and lastly at 24th weeks. They used 7-point rating scale for their adherence to physiotherapist. They also reported their exercise sessions and leisure-time physical activity. Alternatively, physiotherapist used 5-point scale for patients' adherence to the clinic. The results showed a general decrease in patient's adherence over time. However, training that was designed to improve communication skills slowed this decline. Their results are close to our study. They also stated that communication training may improve clinical outcomes in women compared to men.

A study conducted in Dublin; Ireland by Murray et al.[11] presented the effects for communication skills training program which was based on theory for self determination of physical therapist in clinical practices. As a result, the physiotherapist who successfully completed their training gave improved support to patient. They audio recorded the initial consultation of patient and physiotherapist and at the end of training. They found a significant difference in need support scores. Their results are also like our study in context to effects of physiotherapist's communication skills.

Another study conducted in Poland by Anna Włoszczak Szubzda et al.[12] assess the communication competences and factors leading to that level. They found that all scopes of interpersonal communication competences, including motivation, skills and knowledge contributed to physiotherapist's professionalism. The interesting finding of this study was the mean values of interpersonal communication competences were higher in students compared to occupationally active physiotherapists. These findings show regression of communication skills in course of profession and indicates the lack of professional development in this specific area.

A study by Thilini Tennakoon et al.[13] on patient satisfaction levels with physiotherapist in Asian countries. They conducted a cross-sectional study. The 19th item in the MedRisk instrument was used to assess the satisfaction levels. . They found that communication skills of physiotherapist, answering patients' questions, increased contact time, considering the concerns, ability to give clear instructions for home based exercise programe, the inclination to give advice to patients, professional attitude, and conducive treatment environment showed significant association with satisfaction.

Compared with the literature of our study data, the patient satisfaction level is directly linked with physiotherapist's communication skills. Literature also shows that interpersonal communication competences were low in occupationally active physiotherapist.

There were some limitations as well. The impact on patient satisfaction level should also be assessed in a larger population. Further research should perform to determine the factors that also effect patient satisfaction

levels and their adherence to treatment. RCT's should be conducted by engaging communication training.

Conclusion

This study demonstrated the effects of communication skills of physiotherapist on patient satisfaction level and represented an enhanced satisfaction levels and adherence with more expertise in clinical communication skills.

References

1. Langridge, N., The skills, knowledge and attributes needed as a first-contact physiotherapist in musculoskeletal healthcare. Musculoskeletal Care, 2019. 17(2): 253-260.
2. Abaraogu UO, Aguji KR, Duru DO, Okafor UC, Ezeukwu AO, Igwe SE. Physiotherapist–patient communication in entry-level physiotherapy education: A national survey in Nigeria. Hong Kong Physiotherapy Journal, 2019. 39(01): 77-87.
3. Murray A, Hall A, Williams GC, McDonough SM, Ntoumanis N, Taylor I, Jackson B, Copsey B, et al., Assessing physiotherapists' communication skills for promoting patient autonomy for self-management: reliability and validity of the communication evaluation in rehabilitation tool. Disability and rehabilitation, 2019. 41(14): 1699-1705.
4. Çınar MA, E Dinler and Y Yakut. The Effect of creative drama on empathic tendencies, communication skills and critical thinking of physiotherapy students. in CBU International Conference Proceedings. 2019.
5. Soundy A, Hemmings L, Gardiner L, Rosewilliam S, Heneghan NR, Cronin K, Reid K. E-learning communication skills training for physiotherapy students: A two phased sequential mixed methods study. Patient education and counseling, 2021. 104(8): 2045-2053.
6. Baxi, H.D. and M.S. Sheth, Patient's Adherence to Physiotherapist Prescribed Self-management Strategies: A Physical Therapist's Perspective. National Journal of Integrated Research in Medicine, 2021. 12(1): 75-80.
7. Hoffmann T, Gibson E, Barnett C, Maher C. Shared decision making in Australian physiotherapy practice: A survey of knowledge, attitudes, and self-reported use. PloS one, 2021. 16(5): e0251347.
8. Burtea D, Dimitriu A, Maloș A, Cherciu I, Săftoiu A Assessment of the quality of outpatient endoscopic procedures by using a patient satisfaction questionnaire. Current Health Sciences Journal. 2019. 45(1): 52.
9. Tanveer F, S. Shahid, and M.M. Hafeez, Impact of doctor's interpersonal communication skill on patient's satisfaction level. Isra Med J, 2018. 10(5): 306-309.
10. Lonsdale C, Hall AM, Murray A, Williams GC, McDonough SM, Ntoumanis N, Owen K,et al. Communication skills training for practitioners to increase patient adherence to home-based rehabilitation for chronic low back pain: results of a cluster randomized controlled trial. Archives of physical medicine and rehabilitation, 2017. 98(9): 1732-1743. e7.
11. Murray A, Hall AM, Williams GC, McDonough SM, Ntoumanis N, Taylor IM, Jackson B,, et al., Effect of a self-determination theory–based communication skills training program on physiotherapists' psychological support for their patients with chronic low back pain: A randomized controlled trial. Archives of physical medicine and rehabilitation, 2015. 96(5): 809-816.
12. Włoszczak-Szubzda, A. and M.J. Jarosz, *Professional communication competences of physiotherapists–practice and educational perspectives.* Annals of Agricultural and Environmental Medicine, 2013. 20(1): 189-194.
13. Tennakoon T and P de Zoysa, *Patient satisfaction with physiotherapy services in an Asian country: A report from Sri Lanka.* Hong Kong Physiotherapy Journal, 2014. 32(2): 79-85.