**Patient Satisfaction with the Radiology Department [QSI Ref: XR-109]**

**Descriptor:**

Assessing patients’ satisfaction with their visit to the Department of Clinical Radiology.

**Background:**

All patients attending hospital should feel safe and respected throughout their visit. The needs and concerns of all patients should be met when attending hospital for any type of imaging examination.

The aim of this audit is to assess how patients view the radiology service with the intent of highlighting any areas for improvement.

## The Cycle

**The standard:**

Patients should receive information about what to expect and be informed about each stage of the process. The service the radiology department provides should be easily accessible, timely and the environment welcoming. Staff should introduce themselves to patients and endeavour to protect patient’s dignity as far as possible.

**Target:**

90% of patients should respond with answers 3 or 4 on each four point Likert-type scale and answers 4, 5 or 6 on each six point Likert-type scale.

## Assess local practice

**Indicators:**

Percentage of patients whose answers to the questions pose indicate satisfaction with the various aspects of their visit.

**Data items to be collected:**

• Responses to questionnaire - satisfaction with information provided, finding department, waiting times, waiting area, staff attitude

• Collect completed questionnaires anonymously in a box with clear signage. Alternatively this information can be collected electronically using equipment such as an opinionometer, a touch screen device on a stand that is easily accessible to patients

**Suggested number:**

30 or more consecutive attenders in the different waiting areas within the department of radiology.

**Suggestions for change if target not met:**

• Present the results of the audit to the departmental staff with a breakdown by section

• Targeted surveys for individual consultant’s lists may be used to support revalidation

• The Clinical Director and Service Manager should address problems of patient flow, communication etc as revealed by the audit

**Resources:**

- Questionnaire

- Assistance from the Audit Department with the provision of 'opinionometer' etc.

[**patient\_satisfaction\_questionnaire.doc**](https://www.rcr.ac.uk/sites/default/files/audit_template/patient_satisfaction_questionnaire_0.doc)WORD - 21.5 KB

**References:**

1. Likert Scale. Saul McLeod Simply Psychology  2008 <http://www.simplypsychology.org/likert-scale.html>
2. General Medical Council. Good Medical Practice 2013. <http://www.gmc-uk.org/guidance/good_medical_practice.asp>
3. Imaging Services Accreditation Scheme. <http://www.isas-uk.org/standards.shtml>
4. The hello my name is campaign <http://hellomynameis.org.uk/>

**Editor's comments:**

If you wish to obtain individual staff feedback data, then the questionnaire will need to be coded by the staff distributing them to indicate which member of staff conducted the examination. If this is to be done, the GMC /RCR guidance should be followed with consideration of compilation of data by an external party – for example in the Audit Department and then feedback through the appraisal route.

**Submitted by:**

Adapted from previous templates from Clinical Audit in Radiology 100+ recipes RCR 1996 by Denis Remedios 2014 and again by K Duncan 2017

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