What patients expect from their osteopath

Findings of the GOsC Osteopathic Patient Expectations (OPEN) study

Patient choice has always been a feature of osteopathy, but until now little has been understood about how and to what extent decisions about the purchase and provision of osteopathy may be determined by patients’ expectations.

Understanding and responding to patient expectations can only improve the quality of osteopathic care, so osteopaths will want to know all they can in relation to two pertinent questions:

1. What are the expectations patients have of osteopathic care?
2. To what extent are their expectations met or unmet?

A need to better understand patients’ experience of osteopathy prompted the GOsC to commission an extensive investigation of patient expectations of osteopathic treatment.

What have we learned?

This month we publish the findings of the GOsC Osteopathic Patient Expectations (OPEN) study in which the opinion of over 1,700 osteopathic patients across the UK provide a wealth of objective feedback that will enable osteopaths to meet and manage the expectations of their patients even more effectively.

Full and summary reports of the Osteopathic Patient Expectations study – known in short as the OPEN study – are now available on the GOsC public website (www.osteopathy.org.uk/resources/research) and on the osteozone. Osteopaths will find much of interest: not only in the rich mine of both quantitative and qualitative data produced by the study and in the patient priorities this signifies, but to see also how these fit with the changing expectations of patients in the wider healthcare environment.

Osteopaths will be encouraged by the very positive feedback from respondents across the country. Patients’ perception of their care serves here also to highlight some aspects of service delivery where small adjustments could significantly improve patient satisfaction.

About the OPEN Study

Who conducted it?

A University of Brighton research team tendered competitively and won the commission to conduct the research. Patient views were collected during 2009–10.

The study aims?

To gain an understanding of the expectations of patients receiving osteopathic care, and to quantify the extent to which their expectations are being met, the research posed two principle questions:

1. What are the specific aspects of osteopathic practice about which patients have expectations?
2. To what extent do patients perceive that their expectations are met or unmet?

How was the study constructed?

For a detailed understanding of the expectations of osteopathic patients, the study drew on a wide range of sources, generating quantitative and qualitative data through several complementary phases:

1. Phase 1 – A literature review of patient expectations in healthcare revealed little similar published work relating to osteopathy. Evidence from a range of disciplines, including general practice, surgery, physiotherapy and chiropractic, indicated a complex range and interaction of factors that influence expectation, and highlights some dissonance in the views of patients and practitioners.

2. Phase 2 – Patient focus groups and interviews were conducted across the UK with osteopathic patients diverse in age, social status, education, and ethnicity, to gain an in-depth understanding of the nature and range of expectations. This qualitative work contributed to the development of the questionnaire used in Phase 3 of the study to survey patients.

Importantly, focus group discussions and the questionnaire intentionally explored with patients aspects of care highlighted in the GOsC’s Code of Practice and Standard of Proficiency, further testing also patient views arising from the BOA Common Language Project, as well as issues generating patient complaints to the GOsC and claims to professional indemnity insurers.

3. Phase 3 – An osteopathy-specific survey questionnaire was developed and used to quantify the importance of expectations identified in patient focus groups and interviews, and to measure the extent of unmet expectation.

To evaluate patient expectations, survey respondents were asked in Part One of the survey to indicate the degree to which they agreed or disagreed with 51 statements (expectations) relating to different aspects of care (for example, ‘I expect to be involved in making decisions about my treatment’). To then evaluate the extent to which patients’ expectations were actually met, Part Two of the questionnaire asked respondents to indicate whether this had actually happened when they were seen by the osteopath.
Who took part?

- Over 1,700 osteopathic patients across the UK (including focus group and survey participants).
- 800 practices were randomly-selected from the UK Register of Osteopaths and invited to participate.
- 270 practices agreed to participate and recruited patients.

Patient profile of respondents

- Predominantly aged between 40 and 70 years.
- 70% female and 30% male.
- 95% white ethnic origin.
- Equal proportion of rural and urban residents.
- High level of education.
- 58% employed, 32% retired and 3% unemployed.
- 90% self-funding their treatment and 7% have health insurance.

Patient health profile

- 82% with prior experience of osteopathic care and 18% new to osteopathy.
- 63% with prior experience of physiotherapy.
- 30% with prior experience of chiropractic.
- 15% rated their general health fair or poor.
- 11% have a disability.
- 59% rated their symptoms of moderate severity and 15% consider their symptoms severe.

The findings – what do patients tell us?

Over 96% of respondents reported being satisfied or very satisfied with their osteopathic care, their expectations largely met.

This headline figure is powerful evidence of patient satisfaction and a clear affirmation of the quality of the practitioner-patient relationship that typifies osteopathic care. For the public and other healthcare professionals this is an important independent endorsement of the expertise and professionalism of osteopaths.

However, osteopaths will appreciate the complexities of private sector health provision and recognise that the dissatisfaction of patients who vote with their feet can be difficult to ascertain and quantify; practice has to continually be reappraised and adjusted to keep in step with changing patient expectations.

Opposite we have selected aspects of the patient perspective arising from the OPEN study that highlight particular strengths and weaknesses in osteopathic practice, as perceived by patients. We hope this will encourage osteopaths to examine more fully for themselves the rich data generated by the study, and discuss and debate the implications and potential of this for further enhancing practice.
Patient expectations – a snapshot

What do patients want?

Invited to name in their own words their “most important expectations” of care, surveyed patients articulated familiar themes in patient attitudes to dealing with their health problems, some that can pose challenges for all health professionals. Patients wish for:

> A perceptible improvement in symptoms.
> A return to normal activities/improved quality of life.
> Advice on how to manage the problem, prevent recurrence and worsening of symptoms.
> A clear explanation of the problem and an honest assessment of what can be achieved.
> The problem to eventually resolve completely as result of treatment.
> Appropriate, effective treatment, including, where necessary, a suitable referral.
> The practitioner to be caring, to listen, and to be sympathetic.

The desire of patients to take control of their condition and seek some improvement is predictable, but osteopaths will recognise here the challenge of managing patient expectations, i.e. off-setting the risk of disappointment and patient dissatisfaction with clarity and honesty about what is achievable for this particular patient.

The OPEn study report notes: “When there is a gap between patients’ expectations of a service and the service they perceive they have been given, the unmet expectations in this gap have a direct influence on outcomes such as satisfaction and effectiveness of treatment, and are therefore very relevant to practice.”

What do patients expect?

Patients strongly agreed that they expect:

> to be treated with respect.
> the osteopath to listen to them.

Many patients also expected practices to offer waiting areas that are comfortable and relaxing, and some expected to be able to telephone the osteopath for advice.

Patients’ ‘best met’ expectations

Patient expectations that the OPEn study found to be well met by osteopaths:

✓ To be treated with respect.
✓ To be able to ask questions and to have questions answered to their satisfaction.
✓ The osteopath to listen.
✓ The osteopath to be sympathetic and caring.
✓ The osteopath to make them feel at ease.
✓ The environment to be hygienic and professional-looking. (Many patients expected the practice to display evidence of the osteopaths’ qualifications.)
✓ The osteopath to examine the specific problem area with his/her hands.
✓ The osteopath to record a detailed account of their clinical history.
✓ The consultation to last at least 30 minutes.
✓ To be given a clear explanation of the cause of the problem, that they can understand.
✓ The treatment to represent value for money

Patients expected also:

> To be told what the treatment will involve, before it is given.
> The osteopath to monitor reactions to treatment.
> To be involved in making decisions about treatment.
> To be given advice about how to manage the symptoms.
> To be given activities to do at home.
> To see the same osteopath at each visit.

Patient feedback confirmed that osteopaths are delivering a good service, with 80% of the 51 specific aspects of practice explored in the survey confirming expectations were well met.

Worst met expectations

Aspects of practice that are very high priority for patients but are poorly met by osteopaths:

✗ To be made aware of the practice complaints procedure.
✗ For there to be communication between their osteopath and GP about their problem.
✗ For the osteopath to be able to refer the patient elsewhere when symptoms do not improve. (Patients expected osteopaths to have links with other local health services/professionals and good knowledge of other treatment modalities.)
✗ To be informed of risks and side effects of treatment.
✗ To be asked about the effects of previous treatment.
✗ Reassurance from the osteopath that information provided will be kept confidential.
✗ To be given the opportunity to receive advice from the osteopath over the telephone.
✗ Before the first appointment, to be given adequate information about what would happen during treatment.
✗ For there to be access for people with disabilities.

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Managing patient expectations and concerns – priorities identified by the study

The immense value of the OPEn study is that it highlights where simple changes in practice could diminish the gap between expectations and delivery, recognising that this ‘gap’ can have a negative effect on the outcome of care. Some areas where osteopaths can take positive action include:

> Providing patients with adequate information before their appointment: for example, forewarning about the need to undress, the hands-on nature of the treatment, that some techniques can use a small amount of force, your potential use of other modalities (e.g. acupuncture), etc. Patient participants described feeling ill-prepared for their first consultation, causing uncertainty and sometimes alarm. Some were surprised, even confused by the use of other therapies.

> Professional and respectful behaviour: at all times observing clear boundaries, especially in respect of patients being afforded privacy when undressing and intimacy of touch in clinical examination – ensuring nothing in your conduct undermines trust.

Nearly one in two patients (48% of new patients and 41% of returning patients) expected to be offered a towel or gown, suggesting to osteopaths a noteworthy ‘client preference’ that could reliably improve the patient experience.

> Setting clear goals for treatment outcomes: patients need to fully understand what can and, as importantly, what cannot be achieved; managing expectations by ensuring a proper understanding of the likely treatment outcomes; asking patients explicitly about their treatment goals.

> Providing an honest assessment of your certainty/uncertainty of the patient’s diagnosis/prognosis.

> Explicit information about potential side effects: many patients had not anticipated the pain levels experienced during and after treatment, giving rise to unnecessary anxiety.

> Understanding the course of treatment: in general, patients expect that consultations will allow sufficient time for thorough examination, diagnosis and manual treatment; treatments will be spaced at appropriate intervals to improve symptoms, and an estimate of the likely course of treatment and outcomes will be provided (e.g. the number of treatments that might be required before relief of symptoms). Good communication will help osteopaths meet and manage these expectations.

> Communication with the patient’s GP: as this may not always be straightforward, through discussion, osteopaths may need to manage patients’ expectations.

> Confidentiality: the appropriate handling of personal information highlighted significant concerns among respondents, particularly lapses associated with support staff (receptionists discussing other patients or leaving notes unattended). In terms of both professional behaviour (observing boundaries) and confidentiality, patients rated GP practice more highly.

Project outputs

The OPEn study provides invaluable insight into the patient perspective. It offers:

> A wealth of data and evidence for the profession, training providers, GOsC and patients.

> Priorities for improving care and/or better managing patient expectations, which osteopaths may choose to explore further with their own patients.

> Insight to better target information for patients and guidance for osteopaths.

> A rich resource for osteopaths’ continuing professional development.

> Overall, a very positive endorsement of the quality of osteopathic care.

Next steps

We have presented here only a selected snapshot of the experiences provided by osteopathic patients and we encourage osteopaths to explore the study reports more fully, in particular in relation to the context of your own practice and patients.

The patient perspective provided by the study report – and further discussion of this with osteopaths – will helpfully inform new public information currently being drafted by the GOsC, which has the aim of increasing public confidence in osteopathic care.

Issues raised by the OPEn study have usefully informed the new Osteopathic Practice Standards, published in July, and will help to shape further supporting guidance for osteopaths, to be developed in coming months, as well as advice to Osteopathic Educational Institutions.

This work, though extensive, suggests various areas of potential further research to test and validate the findings, and it is hoped that many more osteopaths will be encouraged by these results to continue to invite their own patients to provide valuable feedback on their practice.

* This article draws on reports and presentations produced by the University of Brighton OPEn Study Research Team: J Leach, V Cross, C Fawkes, A Mandy, M Hankins, A Fiske, L Bottomley, A Moore. Full and summary reports are available on the GOsC websites.