Call Bell Requests, Call Bell Response Time and Patient Satisfaction

Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Abstract Categories:
- Interest Group: Researchers in Clinical Settings
- Thematic Areas: Health System

Introduction:
Studying call bell metrics can shed light on performance improvement concerns and can support organizational decision-making issues pertaining to patient satisfaction. Research is lacking that correlates patient satisfaction (PtSat) with the number of calls and call bell response time (CBRT) of nurses. This study examines the relationship between the number of call bell requests, CBRT, and PtSat.

Method(s):
Conducted on a 32-bed surgical unit with a staff of 50 registered nurses and 11 nursing assistants, this pilot study used a correlational design to examine the frequency of call bell requests and CBRT in relation to PtSat. n=46 which is a limitation to generalizability of findings. Results from a PtSat survey (Patient Assessment of Quality Service- Acute Care Version: PAQS-ACV, Lynn, McMillian, and Sidani, 2007) administered upon discharge were compared to number of call bells and CBRT from that patient's room, then were analyzed for significance.

Results:
The findings show no significant correlation between PtSat, CBRT and number of call bells. Pearson Correlation of five factors from the PAQS-ACV- correlated
with CBRT: #CB: Individualization=.515 and .794 Nurse Characteristics= .474 and .366 Caring= .417 and .366 Environment=.941 and .094 Responsiveness=.487 and .827 (Table included in poster)

Discussion:
Although very long response times are of concern to patients, Cardoso and Martin (2003) found there was no significant difference in response times over three minutes and high patient ratings. Often the longest waiting time provided the highest ratings for call bell promptness. This study confirmed those findings. Additionally, this study exposes problems with call bell software and electronics; nurse call response time needs to be developed as a separate, distinct programmable feature. Using PtSat surveys that include CBRT may be a misplaced effort; spending time and resources on improving CBRT may not improve PtSat.

Research Completed: Yes
Abstract History: -This material has been published or accepted for publication.
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
No
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: sserr@bellsouth.net