
Abstract

Measuring Client Satisfaction With Digital Services: Validity and Reliability of a Short-Form Digital Tool

Henrik Pedersen¹; Audun Havnen², PhD; Mariela Loreto Lara-Cabrera¹, PhD

¹Department of Mental Health, Norges teknisk-naturvitenskapelige universitet - NTNU, Trondheim, Norway

²Department of Psychology, Norges teknisk-naturvitenskapelige universitet - NTNU, Trondheim, Norway

Corresponding Author:

Henrik Pedersen

Department of Mental Health

Norges teknisk-naturvitenskapelige universitet - NTNU

Olav Kyrres gate 9

Trondheim

Norway

Phone: 47 91697343

Email: henrik.pedersen@ntnu.no

Abstract

Background: Because of the COVID-19 pandemic's preventive measures, mental health care services were forced to reorganize and develop remote telehealth services. This led to newer modes of receiving treatment, both internet-based and video-based therapies, to meet patients' need for help, while at the same time keeping the COVID-19 pandemic under control. This shift calls for an evaluation of the patient experience during times of increased use of novel approaches of receiving treatment. Brief evaluation forms are ideal for this purpose.

Objective: As there are no validated brief measurement tools to evaluate patient-reported experiences in Norwegian mental health settings, we aimed to explore the internal consistency and factor validity of the 4-item self-administrated Client Satisfaction Questionnaire (CSQ-4).

Methods: We examined the internal consistency and factor structure of a brief digitally administrated patient satisfaction measure in a sample of 145 outpatients in Norwegian mental health settings during the COVID-19 pandemic.

Results: The internal consistency of a digital Norwegian CSQ-4 was high, with a Cronbach α of .92. A clear unidimensional structure (eigenvalue=3.22), which explained 80.4% of the variance, emerged from our data. A Mann-Whitney U test found a nonsignificant difference in satisfaction between genders ($U=2546.5$; $P=.17$). A Spearman rank correlation between satisfaction and age in our data was not statistically significant ($r_{144}=.110$, $P=.19$).

Conclusions: A measurement tool such as the CSQ-4 would be a valuable resource to improve the development and application of digital mental health services. Our results may support the use of the Norwegian CSQ-4 as a valid and reliable measure of satisfaction with mental health care services. In addition, as the CSQ-4 is a short-form and generic tool, it can be implemented in a wide range of routine evaluations of patient-reported satisfaction with telehealth services.

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KEYWORDS

digital mental health services; patient satisfaction; telehealth; reliability; validity; patient-reported experience; digital health care; scale development

Conflicts of Interest

None declared.

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