

**PATIENT SATISFACTION INSTRUMENT TAILORED TO THE CONCERNS OF AFRICAN AMERICANS: SCORING MANUAL**

A Manual for Use and Scoring  
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This manual is based on the following publication:

Fongwa MN, Hays RD, Gutierrez PR, & Stewart AL. (2006). Psychometric characteristics of a patient satisfaction instrument tailored to the concerns of African Americans. *Ethnicity & Disease, 16*, 948-955.

**SCORING RULES:**

Scoring the Patient Satisfaction instrument involves these steps:

1. Negatively worded items need to have their score reversed so that a higher score represents greater satisfaction for all items. Reverse items: 53-56, 61 and 63 and create new item scores (i.e. 53R-56R). To reverse an items score, subtract the original score from 7. For example, if item 53 = 4, then 53R=3.
2. For each subscale, scores for each respondent are calculated as the mean of their responses to the corresponding non-missing items. This results in scale scores with a possible range of 1-6 and allows for individual scale scores to be calculated whenever at least one item per scale has a response. Items that are left blank (missing data) are not taken into account when calculating the subscale scores.
3. Transform each subscale onto a 0 to 100 scale so that the lowest and highest possible scores are set at 0 and 100, respectively. In that way, scores represent the acquired percentage of the total possible score. The following equation can be used to transform the scale score for each individual:

$$\text{Transformed score} = 100 \times \frac{(\text{actual score} - \text{minimum possible score})}{(\text{maximum possible score} - \text{minimum possible score})}$$

Table 1. Scoring Key: Subscales, Item numbers, and Response Categories

Scale Name and Label	Definition	# of Items	Item Numbers	Response Category
1. General access to care: <i>ACCESS</i>	Ability to get needed care, including specialty care	5	1-5	1-6 (Very poor to Excellent)
2. General convenience: <i>CONVNICE</i>	Timeliness of care, convenience of hours, telephone access, waiting in office	7	6-12	1-6 (Very poor to Excellent)
3. Technical quality: <i>TECH</i>	Knowledge, skills, and experience of providers, thoroughness of care	4	13-16	1-6 (Very poor to Excellent)
4. Communication: <i>COMM</i>	Information, responsiveness and explanations/answers	5	17-21	1-6 (Very poor to Excellent)
5. Paperwork: <i>PAPER</i>	Quality and complexity of paperwork and forms	3	22-24	1-6 (Very poor to Excellent)

<b>Scale Name and Label</b>	<b>Definition</b>	<b># of Items</b>	<b>Item Numbers</b>	<b>Response Category</b>
6. Choice: <i>CHOICE</i>	Choice of providers, ease of seeing provider of choice	5	25-29	1-6 (Very poor to Excellent)
7. Interpersonal care: <i>INTERP</i>	Attention/ personal interest, friendliness, courteousness, reassurance, and support	5	30-34	1-6 (Very poor to Excellent)
8. Respectfulness: <i>RESPECT</i>	Respect shown, care about you as a person, address you by preferred name, courtesy, acceptance	3	35-37	1-6 (Very poor to Excellent)
9. Health education: <i>HEALTHED</i>	Availability of information about health, advice about prevention	4	38-41	1-6 (Very poor to Excellent)
10. Services covered: <i>SERVCOV</i>	Coverage for needed care, amount of out-of-pocket expenses, maintain health without undue expenses	6	42-47	1-6 (Very poor to Excellent)
11. Information about plan: <i>INFOPLAN</i>	Availability of information and someone to answer questions about plan	2	48-49	1-6 (Very poor to Excellent)
12. Office staff: <i>STAFF</i>	Friendliness, courteousness, reassurance, support	3	50-52	1-6 (Very poor to Excellent)
13. Discrimination/ stereotyping: <i>DISCRIM</i>	Perceptions of discrimination, negative attitudes, stereotypes, inaccurate beliefs	4	53R – 56R*	1-6 (Strongly disagree to strongly agree)
14. Perceived quality of care: <i>QUALOVER</i>	Rating of care, services, and providers' response to health needs	4	57-60	1-6 (Very poor to Excellent)
15. General satisfaction with care: <i>OVERALL</i>	Satisfaction with medical care	3	61R, 62, 63R*	1-6 (Strongly disagree to Strongly agree)

\* Items denoted with R are reversed from the original item score so that a higher number represents more satisfaction.

Table 2. Central Tendency, Variability, and Reliability\*

Scale Name	Variable Name	Mean(SD)	Internal Consistency Reliability**
ACCESS	General access to care	73.4 (16.8)	.91
CONVNICE	General convenience	62.4 (17.6)	.89
TECH	Technical quality	80.5 (18.3)	.95
COMM	Communication	76.3 (18.8)	.94
PAPER	Paperwork	70.5 (19.1)	.96
CHOICE	Choice	70.3 (22.2)	.95
INTERP	Interpersonal care	79.5 (16.2)	.93
RESPECT	Respectfulness	82.2 (17.6)	.92
HEALTHED	Health education	74.3 (18.9)	.94
SERVCOV	Services covered	73.8 (18.8)	.92
INFOPLAN	Information about plan	61.5 (24.6)	.92
STAFF	Office staff	70.9 (21.6)	.93
DISCRIM	Discrimination/Stereotyping	86.6 (19.4)	.81
QUALOVER	Perceived quality of care	79.4 (16.7)	.94
OVERALL	General satisfaction with care	57.0 (26.3)	.76

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\* Data are from a field test of the instrument with African Americans (n=100) and Whites (114)

\*\* Internal consistency reliability was estimated from a subset of the total sample that had no missing data (n = 159) including 76 African Americans and 83 Whites.