

The association between psychosocial working conditions and the quality of delivered patient care: a prospective study among medical assistants

Background: Working conditions in the health care sector have been characterized as emotionally demanding. Such poor psychosocial working conditions represent not only a risk factor for the health and workability of health care staff, but are also associated with the delivery of poorer patient care (e.g., increased rates of errors). This relationship has repeatedly been documented among nurses and physicians. Medical assistants (MAs) have however received very little attention to date despite the fact that they i) represent the largest professional population in outpatient care, ii) experience emotionally taxing working conditions, and iii) perform a large range of tasks that are relevant to patient care.

Objective: The overarching objective is to examine the potential associations between psychosocial working conditions and the quality of delivered patient care among MAs. The envisioned project will specifically make novel contributions by i) considering various types of quality indicators of patient care, ii) the utilization of prospective data and iii) theory-based examination of explanatory mechanisms.

Methods: In late 2016, a total of 944 MAs were surveyed („baseline“) by the applicant. This population will be followed-up in late 2020. Psychosocial working conditions (i.e., the exposures) will be measured by an established instrument (i.e. the effort-reward imbalance questionnaire) and a questionnaire specifically designed for MAs, which measures, amongst others, job demands, cooperation, practice organization and characteristics of MAs' supervisors. Quality of care will be assessed by questions on major medical errors that have been made, on documentation errors and on the quality of the social interaction with patients (i.e., the outcomes). Potential mediators, which were identified based on a theoretical model, include for instance a poor job satisfaction and impaired mental health. Prospective relationships will be examined by multivariable binomial regressions models (for dichotomous outcomes) and linear regression (i.e. change score for continuous outcomes). Potential mediation will be assessed by the “difference method“.

Implications: Based on prospective data and a theoretical model the envisioned study will provide evidence on potential associations and explanatory mechanisms. These insights may inform the development of workplace interventions to improve MAs' working conditions and thereby the quality of care they provide.

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