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Further development and use of the Diabetes Treatment Satisfaction Questionnaire for Inpatients (DTSQ-IP) in 58 UK hospitals: British inpatients completing the standard English language version

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Aim: To evaluate and use the DTSQ-IP with inpatients following updates to broaden its scope.

Methods: Diabetes Inpatient Specialist Nurses (DISNs) recruited insulin-treated adult inpatients at 58 hospitals. Participants completed the DTSQ-IP and general information questionnaire before discharge. The revised DTSQ-IP presents 22 items, most of which are combined to give an overall treatment satisfaction score: items are rated 6-0 where higher scores indicate more satisfaction. Items 2 and 3 concern perceived frequency of hyper- and hypoglycaemia are scored 6-0; higher score=greater frequency.

Results: Principal Components Analysis on N=977 inpatients confirmed an overall treatment satisfaction scale (17 DTSQ-IP items; Cronbach's α =0.94), and identified a hospital food satisfaction subscale (5 items; α =0.85). Inpatients were less satisfied with hospital food (Median=4.4, Inter-Quartile Range (IQR)=2.4) than with other aspects of care (Median=5.3; IQR= 1.5; Wilcoxon signed-ranks p<0.001). Women were less satisfied than men overall (Median women=4.8; men=5.1, Mann-Whitney U p<0.001) and with hospital food (Median women=4.2; men=4.6; p<0.001). Patients administering insulin for \geq 6 months (compared to those using insulin for \leq 6 months) were

less satisfied overall (Median=4.9 versus 5.3; p<0.001) and with hospital food (Median=4.2 versus 4.8; p<0.001). Eighty-nine percent of inpatients were satisfied (including 61% optimally satisfied) with the time the DISN spent with them, and 35% indicated high perceived frequency of hyperglycaemia during their inpatient stay, and 13% high perceived frequency of hypoglycaemia (scoring 6-4 on the 6-0 scales).

Conclusion: The 22-item DTSQ-IP is a psychometrically validated tool allowing quantification of inpatients' experiences of diabetes treatment satisfaction. Hospital food, hyperglycaemia and hypoglycaemia were particular concerns.