Original Citation – Rubin HR, Ware JE Jr, Nelson EC, Meterko M. The Patient Judgments of Hospital Quality (PJHQ) Questionnaire. Med Care. 1990 Sep;28(9 Suppl):S1-56. View in PubMed

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Price & Availability – Published in original citation. In public domain.

Brief Description of Instrument – Measure of patient satisfaction with hospital care.

Scale Format – Multiple choice, yes/no, rating scale, open-ended questions.

Administration Technique – Self-administered or interview administered over the telephone.

Scoring and Interpretation – Scores on each item in each scale are summed and transformed to a 0-100 scale. A score of 100 indicates excellence in each subscale.

Scale mean (SD) reported in update citation (Nelson, 1989).

**Test-retest Reliability** — The absolute values of the difference between average scale score (for each of the 11 quality scales) for hospital obtained in two different quarters ranged from 1.3 to 3.4 on a 100-point scale. No test-retest correlations reported (Nelson, 1989).

**Internal Consistency** — Patient-level Cronbach’s alpha ranged from 0.86 to 0.97 for the 11 quality scales. Hospital-level consistencies (the ratio of between-hospital variation to within-hospital variation) in the range of 0.70 to 0.89 (Nelson, 1989).

**Construct Validity** — The average within scale correlation for determining convergent validity was 0.79. The correlations across scales for discriminant validity were ranged from 0.34 to 0.64. Analysis of variance was also conducted to access variability across hospitals on each of the quality scales, and significant differences were found at $p<0.05$ (Nelson, 1989).

**Criterion-Related Validity** — Pearson correlations between patient ratings of hospital quality and employee ratings for 5 quality scales were found between 0.52 to 0.82 provides some evidence of criterion-related validity (Nelson et al., 1989).

**Responsive to Change Over Time** — Hospital-level consistencies appear to indicate that the scale can distinguish among institutions cross-sectionally (Nelson et al., 1989).

**Content & Face Validity** — Item develop from review of literature, review existing instruments, interviews with hospital administrators and review of patient comments. Instrument refined through pilot testing.
Strengths – Well-described scale for assessing patient satisfaction with and perceptions of inpatient care. Useful to identify areas of excellence and high-priority opportunities for improvement.

Limitations – Requires further validation testing.

Notes for Consideration – Testing excluded patients discharged against medical advice and those with a mental disorder or a substance abuse disorder.
