ASSESSMENT OF PATIENTS’ SATISFACTION WITH THE QUALITY OF CARE OF NURSING AT ALLIED HOSPITAL PUNJAB MEDICAL COLLEGE, FAISALABAD

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Abstract: In the existing health care setting patient satisfaction is one of the main indicators of health care services. Assessment of patient satisfaction is a useful feature to foresee the quality and accessibility of health care services. Satisfaction of the patients’ is the degree of detection between a patient’s expectations of ideal nursing care and perception of the actual nursing care receives. The purpose of this study is to assess the patients’ satisfaction with the quality of care of nursing at Allied Hospital Punjab Medical College, Faisalabad.

Methods: A cross-sectional study was conducted among patients (aged 18-58 years). A purposive and convenient sampling technique was used to select the participants. A total of 290 patients were taken for the study purpose. A structured questionnaire was used to record patient’s feedback on quality of care of nursing.

Results: A total of 290 patients were included in this study. The mean age of the participants was 41 years. About half participants were satisfied 165(57%) with the overall quality of nursing care; whereas 32(11%) were neutral about quality of nursing care and 93(32%) were not satisfied. The participants who were admitted in Medical ward were less satisfied (76%) than the participants who were admitted in surgical ward (84%).

Conclusion: Patient satisfaction is a vital quality indicator which enables to identify areas of enhancement in nursing care so as to provide better care & services to patients.

Keywords: Patient satisfaction; Nursing care; Quality of care, Quality indicator; Faisalabad.

1. INTRODUCTION

Provision of services according to wishes and needs of patients is essential in health care system. In the case of the health care system, patients have been found to be aware of health issues to the extent that they have been described as “proficient witnesses” to the health care process (Regis and Porto 2011).

In the current health care setting patient satisfaction is one of the main indicators of health care services. Assessment of patient satisfaction is a useful feature to foresee the quality and accessibility of health care services (Illana, 2013).

Satisfaction of the patients is determined by nurses’ role in the hospital because nurses are frontline People and more aware bedside nursing care than any other employees of health in the hospital. Patients’ satisfaction has been advocated as an effective measure of quality of nursing care(Rajeswari 2011).
Patient outcomes and patient satisfaction are vital to see quality care of nursing. Patient satisfaction with the nursing care is strongly linked with patients in general satisfaction with hospital experiences. The measurement of patient satisfaction with nursing care is important to determine and meet patients’ need in terms of care and to evaluate quality of care provided (Rajeswari 2011).

According to American Nurse Association (ANA) patient satisfaction on nursing care is patient outlook of care received from nursing staff (Freitas, 2014). Patient outcomes and patient satisfaction are vital to see quality care of nursing. Patient satisfaction with nursing care is strongly linked with patients overall satisfaction with hospital. It is accepted that patient satisfaction is determined by a quantity of different factors (Sitzia & Wood, 1997). The age, socioeconomic status, sex and educational level are essential factors that affect satisfaction (Sitzia & Wood, 1997; Söyük et al., 2001; Crow et al., 2002; Laschinger et al., 2005). In adding to these personal characteristics, the hospital ward in which the patient is being treated and the periods of hospitalizations are other important factors (Söyük et al., 2001; Johansson et al., 2002).

In existing years, many studies have been developed to find out how hospitalized patients perceive the care they received during hospital stay. In that sense, the aim of this study to assess the quality of the care the nursing team provides according to the patients’ perspective; assess the patients’ satisfaction with the nursing care they obtain and make sure the relation between nursing care quality and patient satisfaction.

Although patient satisfaction with nursing care is commonly searched in the developed countries, lack of studies made it difficult to get research investigative satisfaction with the quality of nursing care in the developing countries like Pakistan. Thus, in this study, patient’s satisfaction with the quality of care of nursing and associated factors will be assessed in Allied Hospital Punjab Medical College; Faisalabad.

2. METHOD AND MATERIAL

**Study area:** The study is conducted in Allied Hospital PMC, Faisalabad. Allied Hospital PMC, Faisalabad is the last referral hospital in Faisalabad Division.

**Study design:** Institution based Cross-Sectional study design was used.

**Source Population:** Patients who are all admitted to the wards in Allied Hospital PMC, Faisalabad was our source population.

**Study Population:** Patients’ were taken who were admitted to selected wards Medical and Surgical for this study in Allied Hospital PMC, Faisalabad at the time of data collection.

**Sample size:** A sample size of 290 was calculated to detect level of satisfaction among the study participants.

**Sampling technique and procedure**

The total sample size (n=290) was allocated proportionally in each ward according to the total number of beds in medical and surgical wards through purposive sampling technique, as well as by using a convenient non-random sampling technique.

**Data collection methods**

The data was collected by using self structured interviewer administered questionnaire.

The instrument had four parts. Part I- socio demographic characteristics of patient, part II-patient and admission related characteristics of patients, part III-patient satisfaction scale and part IV patient general evaluation of the nursing care they received during their stay at the study wards.

**Data Collection Procedure**

The data was collected from the selected two wards medical and surgical in two weeks by five nurses. The items on the instrument were administered to the participants after they were translated into Urdu and Punjabi, and back to English to keep its consistency.
3. RESULTS

Section I: Socio-Demographic Characteristics of the patients’;

A total of 290 participants who were admitted in medical and surgical wards of hospital were included in this study. The mean age of the participants was 41 years. Out of total, 38% of the study population comprised of males and more than half 62% females were less than half 39% were belonging to urban areas and 61% were belonging to rural areas. Majority of the participants (72%) were married and 28% were single.

Section II: Patient-related (admission-related) Characteristics of the Participants;

Table 1: Patient-related (admission-related) Characteristics of the Participants; (n=290)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Category</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admission ward</td>
<td>Medical</td>
<td>150</td>
<td>52%</td>
</tr>
<tr>
<td></td>
<td>Surgical</td>
<td>140</td>
<td>48%</td>
</tr>
<tr>
<td>Number of days stayed in hospital</td>
<td>3-12</td>
<td>144</td>
<td>50%</td>
</tr>
<tr>
<td></td>
<td>13-22</td>
<td>104</td>
<td>36%</td>
</tr>
<tr>
<td></td>
<td>23-32</td>
<td>30</td>
<td>10%</td>
</tr>
<tr>
<td></td>
<td>32-&lt;</td>
<td>12</td>
<td>4%</td>
</tr>
<tr>
<td>Previous history of admission</td>
<td>Yes</td>
<td>43</td>
<td>15%</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>247</td>
<td>85%</td>
</tr>
<tr>
<td>Medical Conditions</td>
<td>Acute illness/conditions</td>
<td>190</td>
<td>65.5%</td>
</tr>
<tr>
<td></td>
<td>Chronic illness/condition</td>
<td>100</td>
<td>34.5%</td>
</tr>
</tbody>
</table>

This Table shows the patient and admission related characteristics, 150(52%) participant were admitted in medical ward and 140(48%) were from surgical ward. Regarding the participants’ history of admission 247(85%) of them were not previously admitted, while only 43(15%) participants of them had history of previous admission. 214 (58.6%) were under acute illness conditions. Moreover 190(65.5%) of participants did not have other diseases apart from current health problem.

Table 2: Satisfaction of patients’ on admission ward and Socio-Demographic characteristics of study participants (n=290)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Category</th>
<th>Satisfied</th>
<th>Not Satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admission ward</td>
<td>Medical ward</td>
<td>220 (76%)</td>
<td>70 (24%)</td>
</tr>
<tr>
<td></td>
<td>Surgical ward</td>
<td>245 (84%)</td>
<td>45 (16%)</td>
</tr>
<tr>
<td>Previous history of admission</td>
<td>Yes</td>
<td>190 (65%)</td>
<td>100 (35%)</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>170 (59)</td>
<td>120 (41%)</td>
</tr>
<tr>
<td>Gender</td>
<td>Male</td>
<td>250 (86%)</td>
<td>40 (14%)</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>210 (72%)</td>
<td>80 (28%)</td>
</tr>
<tr>
<td>Marital status</td>
<td>Married</td>
<td>230 (79%)</td>
<td>60 (21%)</td>
</tr>
<tr>
<td></td>
<td>Single</td>
<td>225 (77%)</td>
<td>65 (23%)</td>
</tr>
<tr>
<td>Place of residence</td>
<td>Urban</td>
<td>235 (81%)</td>
<td>55 (19%)</td>
</tr>
<tr>
<td></td>
<td>Rural</td>
<td>265 (91%)</td>
<td>25 (09%)</td>
</tr>
</tbody>
</table>
Table-2: shows that the participants who were admitted in Medical ward were less satisfied (76%) with the quality of care of Nursing than the participants who were admitted in surgical ward (84%); the participants who had previous history of admission were more satisfied (65%) than the participants (59%) who had no history of previous admission. This table also shows that the Male participants were more satisfied (86%) than Female participants (72%); whereas there is no difference in percentage of satisfaction with married and single participants.

Section III: Patient’s satisfaction with quality of nursing care;

Figure-1 shows that nearly half participants were satisfied 165(57%) with the overall quality of nursing care; whereas 32(11%) were neutral about quality of nursing care and 93(32%) were not satisfied with the quality of nursing care.

![Patient’s satisfaction with quality of nursing care](chart)

**Figure: 1** Pie chart for the satisfaction with quality of nursing care; (n=290)

**Figure-2:** shows that only 70(24%) participants were satisfied with the privacy that nurses gave them and 25(9%) participants were neutral, whereas most of the participants 195(67%) were not satisfied.

![The privacy that nurses gave to participants](chart)

**Figure-2:** Bar chart for the privacy that nurses gave to participants

Section IV: Patients’ general Opinions of the nursing care services rendered at the study wards

Table-3: shows that the opinions of study participants on the nursing care they received during their stay at the wards met their expectations were 257 (89%), while 262 (90 %) of the participants were overall satisfied with the nursing care services they received at the study hospitals. 260(90%) of the participants will recommend their family and friends to visit the hospitals they stayed and 265 (91.4%) participants want to come back if they get sick again and need hospitalization (Table3)
Patient satisfaction surveys act as a means to measure the efficacy of a department worldwide. This study is the initial of its sort in Pakistan to assess the patients’ satisfaction with the quality of nursing care in Allied hospital Punjab Medical College, Faisalabad. A total of 290 participants who were admitted in the medical and surgical wards of hospital were included in this study.

The findings of this study showed that there was no relationship between most of socio demographic variables including age, marital status, occupation and overall satisfaction of patients with nursing care. It is due to the reality that most of socio demographic variables did not affect overall satisfaction of the patients’.

The overall percentage of patients who were satisfied with nursing care in this study was 57%. This percentage is lower as compare to other studies, such as in India patient’s satisfaction revealed about 58% and Jordan (77%), study done northwest Ethiopia the overall satisfaction was found to be 67.1% (AMARE, W. 2015). However it is greater than a study done in Ghana (33%) and a study in Pakistan revealed 45 % patients were satisfied with care provided. The difference could be due to subjective nature of satisfaction, and/or study period difference.

The participants who were admitted in Medical ward were less satisfied (76%) with the quality of care of Nursing than the participants who were admitted in surgical ward (84%); the participants who had previous history of admission were more satisfied (65%) than the participants (59%) who had no history of previous admission. This study also shows that the Male participants were also more satisfied (86%) than Female participants (72%); whereas there is no difference in percentage of satisfaction with married and single participants.

This finding indicates that patients’ who had history of previous admission were more expected (65%) to be satisfied than those who didn’t have. This is clearly consistent with the findings in Addis Ababa (CHAKA 2005), and study conducted in Iran showed that Patients with a history of admission to hospital were more satisfied with the nursing care than individuals who did not (Rafii, 2008 #10). This might be due to hospitalizations increase patients’ opportunities for receiving care and also helpful for comparing and observing their caring behaviors’.

In general evaluation of satisfaction in this study was 57% which was low compared to other studies.

The amount of privacy was given by nurses to you only (24%). This study shows the feeling of privacy was given the lowest satisfaction ratings.

However, there is similarity, except provision of privacy, between this and the above studies, even though, the percentages were quite low in this study. Aspects of care given the lowest satisfaction in this study were (percent very / completely satisfied; the type of information nurses gave to you about your condition and treatment (51%); the amount

<table>
<thead>
<tr>
<th>Category</th>
<th>Agree</th>
<th>Uncertainty</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall nursing care I received, met my expectations</td>
<td>257(89%)</td>
<td>6(2%)</td>
<td>27(9%)</td>
</tr>
<tr>
<td>Overall, I am satisfied with the nursing care services; I received at this hospital</td>
<td>262(90%)</td>
<td>5(2%)</td>
<td>23(8)</td>
</tr>
<tr>
<td>I will recommend this hospital to my family and friends.</td>
<td>260(90%)</td>
<td>12(4%)</td>
<td>18(6%)</td>
</tr>
<tr>
<td>If I get sick once more and need hospitalization, I want to come back to this hospital</td>
<td>265(91.4%)</td>
<td>7(2.7%)</td>
<td>18(6.2%)</td>
</tr>
</tbody>
</table>

Table -3: Patients’ general Opinions of the nursing care services;
nurse knew about your care (47%); the way nurses explained things to you (71%); how willing nurses were to respond to your requests (53%); nurses’ awareness of your needs (56%). The amount and type of information nurses gave to the patients regarding their condition and treatment were a most important cause of dissatisfaction in this study as well as other studies, for instance one study was concluded that the greatest single defect in hospital care was ‘the barrier to easy exchange of information’ AMARE 2015). Nurses should give attention to the exchange of information in order to elevate patient satisfaction since it is a major cause for dissatisfaction (AMARE 2015).

Participants who had other diseases different from the cause of admission, 75% were fully satisfied compared to 71% of patients who had not other diseases. This is in contrast to the study in which those with no other diseases tended to have higher satisfaction (El-Nagger, Ahmed et al. 2013).

5. CONCLUSION

To evaluate the quality of health care, patients’ perception has become an important means. The nurses need to know what factors influence patient satisfaction, Nowadays most patients in our country complain about hospital services. To identify specifically which services cause dissatisfaction requires investigation. This study revealed that there was a communication gap between nurses and their patients that led to patient dissatisfaction.

This is a common problem for hospitals under study which requires urgent attention to enhance patients’ satisfaction at equal time to insure quality of nursing care, and examining the items with low patients’ satisfaction will facilitate nurses to recognize the defects in nursing care and to institute appropriate change. Items with high patients’ satisfaction need to be maintained and enhanced by nurses.

A little over the half of the study participants was satisfied with the overall nursing care services; however, considerable scope was not satisfied.

There was very low satisfaction with the privacy given to the patients in the wards and responding quickly was also an important area of nursing care services with the lowest satisfaction score. Therefore, quality of nursing care must be recognized as a significant element in patients’ perception of quality of care provided.

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All thanks and praise to Allah Almighty who enabled us to complete this task. We are indebted to my supervisor, Dr. Shahabaz Ahmad and Mrs. Shafquat Inyat their contribution and helping attitude and assistance. We also thank to all my teachers of community medicine and BScN Nursing for their invaluable suggestions and encouragement providing an drive to work on research project. We also like to pay tribute to our parents whose prayers have always paved a path for our success and without which the present destination would have been our dream. I also thanks to the patients who gave their feedback.

REFERENCES


