

PATIENT SATISFACTION WITH THE QUALITY CARE PROVIDED BY NURSES AT THE BEDSIDE IN TERTIARY HEALTH INSTITUTE

JAVID B*, PERVEEN T, NAZAR K

College of Nursing, Nishtar Medical University and Hospital (NMU & H) Multan, Pakistan

*Correspondence author email address: drkash226@gmail.com

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Abstract: *The satisfaction level of patients is highly influenced by quality nursing care. The main objective of this study was to compare the level of patient satisfaction based on their socio-demographic characteristics in tertiary care institutes. This study was conducted at Nishtar Hospital after getting ethical approval from ERC. It was conducted from January 05, 2023, to May 05, 2023, between patients 20-50 years of age who had been admitted to the hospital for at least five days, and both genders were included. Disoriented patients or those who refused to participate were excluded from this study. Data was collected using PSNCQQ, a 19-item questionnaire with 5 responses of each item from poor to fair, good, very good, and excellent. Then comparison was made between the socio-demographic and PSNCQQ total score. SPSS version.21 was employed for this purpose. Descriptive statistics were depicted in frequencies (%ages), mean & SD. The level of significance was <0.05. This study revealed no significant difference between patient's age, gender & marital status, and level of satisfaction with quality care provided by nurses ($p>0.05$). But the nature of the patient's ward revealed a significant difference with $p<0.05$ and their satisfaction level with nursing care. It was concluded that the nature of the ward only affects the level of patient satisfaction by the nursing care they receive. And age, gender, and marital status do not affect their satisfaction level.*

Keywords: PSNCQQ, Healthcare, Nursing Care, Satisfaction Level

Introduction

Healthcare systems are also being affected by dramatic changes in competition in every field today (Waddill-Goad, 2023). The quality of services provided to patients is the biggest advantage of such competition in healthcare (Abu-Rumman et al., 2022). Healthcare quality and service needs have been improved due to an upsurge in technology, health-related information on the internet, and alteration in patients' & their family opinion, choices, and involvement in the decision-making process. All above-mentioned variables are identified as a indicator of patient satisfaction with service providing institution, competition among various facilities, and cost of healthcare services. The quality of any healthcare facility can be measured by satisfaction level of patients as well as their caregivers, such as family or relatives (Anderson et al., 2019). Patients' satisfaction level is the major indicator of the adequacy of services, quality care, and healthcare system outcome. In this way, crucial information about the performance of a system and its further enhancement in quality management can be evaluated (Kim-Soon et al., 2022). Nursing care quality-related patient satisfaction is one of the key elements in any healthcare quality management- system in today's

client-centered healthcare industry. Patients need the proper care for their medical conditions and solutions for their diseases. Suppose they recover in due time their level of satisfaction increases in that medical facility. They recommend that healthcare system to other community members and their opinions matters in this-regards (Lehto, 2021). The quality of healthcare system can be improved by getting feedback from their clients because they can help in identification of those area of services where modification and improvement is inevitable for the sustenance of that facility. Patient's satisfaction level is key element for the many policy matters of a healthcare facility along with evaluation, development, and restructuring (Gilson et al., 2020). A concrete criterion for measuring nursing quality care is patient satisfaction. Nurses occupy a central role in any healthcare facility. They are considered a key element in the growth of any healthcare system because they are involved in patients' diagnoses to their care from a very basic level, such as changing their bed sheets and providing medicine along with emotional & psychological support (Briatte et al., 2019).

Patients' satisfaction with nursing care is one of the major areas ignored in Pakistan's tertiary care

hospitals. The main objective of this research was to identify those areas of nursing care where patient satisfaction levels are low. Identifying those gaps would help with policy matters which improve those areas and, in turn, will help enhance patient satisfaction with nursing care.

Methodology

After taking ethical approval from the ERC (Ethical Review Committee) of Nishtar College of Nursing, this study was conducted in Nishtar Hospital Multan from January 05, 2023, to May 05, 2023. Epitool was employed to calculate the sample size, which came to 95. Data was collected by the use of PSNCQQ (patient-satisfaction with nursing care-quality questionnaire). This questionnaire consisted of 19 items used to measure the nurses care from their attention, attitude, courtesy, competence, skills, fulfilment of client needs, kindness, and respect. Each question carries 5 options, from poor to excellent. The score varies from

19 to 95 Low score is given to people experiencing poverty, and the highest is given to the excellent item. Informed consent of all patients was first taken in writing, and the purpose of this study was explained to them in detail. Patients from medical, general & neurosurgical, Orthopedics, obs & gynae wards who were between 20-50 years of age were included in this study. Both genders with a hospital stay of more than 5 days were included. Those patients who were disoriented or refused to participate were excluded from this study along with those who were disoriented & referred to any other hospital. Data were analyzed by the use of Microsoft Excel along with SPSS ver.21. The demographic data was depicted in the form of frequencies, %ages, mean & SD (Standard Deviation). The comparison was made between PSNCQQ & age, gender, marital status, and various wards using ANOVA & t’ test of inferential statistics. The level of significance kept was <0.05 & CI=95% (Confidence Interval).

Table 01 Demographic Data

Variable		Frequency	%ages
Age	20-30	32	33.7
	31-40	37	38.9
	41-50	26	27.4
Gender	Male	47	49.5
	Female	48	50.5
Marital Status	Single	38	40
	Married	57	60
Ward	Medical Unit	15	15.8
	General Surgery	41	43.2
	Obs & Gynae	17	17.9
	Neurology	07	7.4
	Orthopedics	15	15.8

The frequency of participants between the age of 20-30 years were 32(33.7%), whereas between 31-40 & 41-50 frequencies were 37(38.9%) and 26(27.4%). There were 47(49.5%) males in this study, and the frequency of females was 48(50.5%). Based on patients' marital status, the frequency of single patients was 38(40%) whereas of married patients was 57(60%). When data were evaluated based on the specific ward, then the frequency of patients who participated in this study from the medical unit was 15(15.8%), from general surgery ward 41(43.2%), from obstetrics & were 17(17.9%) whereas from neurology and orthopedics were 07(7.4%) & 15(15.8%) respectively.

Based on PSNCQQ sub-items, the frequency of responses patients gave on a categorical-variables ranged from poor to excellent. The frequency of the first item of PSNCQQ response by a patient who gave poor feedback about instruction given to patients by nurses was 14(14.7%), whereas 32(33.7%) gave fair, and those who gave good and very good were 33(34.7%), 16(16.8%) and 0(0%) gave excellent response regarding such instruction which were given to them by the nurses. The mean \pm SD of the first instruction item of PSNCQQ was 2.54 \pm 0.94. The frequencies of another item from how well nurses gave instructions to patients regarding tests preparation and operations were 13(13.7%), 37(38.9%), 28(29.5%), 17(17.9%) & 0(0%) based on poor, fair, good, very good & excellent respectively with 2.52 \pm 0.94 as mean \pm SD of this item of

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PSNCQQ. The frequency of responses for other PSNCQQ variables from poor to excellent are

depicted in Table 2, along with their mean and standard deviation.

Table 2 Descriptive Statistics of PSNCQQ

Variables	Poor	Fair	Good	Very Good	Excellent	Mean±SD
INFORMATION YOU WERE GIVEN: How clear and complete the nurses' explanations were about tests, treatments, and what to expect	14(14.7)	32(33.7)	33(34.7)	16(16.8)	0(0)	2.54±0.94
INSTRUCTIONS: How well nurses explained how to prepare for tests and operations.	13(13.7)	37(38.9)	28(29.5)	17(17.9)	0(0)	2.52±0.94
EASE OF GETTING INFORMATION: Willingness of nurses to answer your questions.	20(21.1)	26(27.4)	15(15.8)	27(28.4)	07(7.4)	2.74±1.28
INFORMATION GIVEN BY NURSES: How well nurses communicated with patients, families, and doctors.	16(16.8)	26(27.4)	28(29.5)	15(15.8)	10(10.5)	2.76±1.21
INFORMING FAMILY OR FRIENDS: How well the nurses informed them about your condition and needs.	09(9.5)	19(20)	38(40)	22(23.2)	07(7.4)	2.99±1.06
INVOLVING FAMILY OR FRIENDS IN YOUR CARE: How much they were allowed to help in your care.	18(18.9)	23(24.2)	32(33.7)	19(20)	03(3.2)	2.64±1.10
CONCERN AND CARING BY NURSES: Courtesy and respect you were given; friendliness and kindness.	09(9.5)	38(40)	27(28.4)	18(18.9)	03(3.2)	2.66±0.99
ATTENTION OF NURSES TO YOUR CONDITION: How often nurses checked on you and how well they tracked your progress.	20(21.1)	46(48.4)	19(20)	07(7.4)	03(3.2)	2.23±0.97
RECOGNITION OF YOUR OPINIONS: How much do nurses ask you what you think is important and give you choices?	31(32.6)	39(41.1)	17(17.9)	08(8.4)	0(0)	2.02±0.92
	13(13.7)	25(26.3)	31(32.6)	17(17.9)	09(9.5)	2.83±1.16

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CONSIDERATION OF YOUR NEEDS: The willingness of the nurses to be flexible in meeting your needs.						
THE DAILY ROUTINE OF THE NURSES: How well they adjusted their schedules to your needs.	29(30.5)	28(29.5)	25(26.3)	10(10.5)	03(3.2)	2.26±1.10
HELPFULNESS: Ability of the nurses to make you comfortable and reassure you.	03(3.2)	36(37.9)	31(32.6)	21(22.1)	04(4.2)	2.86±0.94
NURSING STAFF RESPONSE TO YOUR CALLS: How quick they were to help.	03(3.2)	23(24.2)	36(37.9)	27(28.4)	06(6.3)	3.11±0.95
SKILL AND COMPETENCE OF NURSES: How well things were done, like giving medicine and handling IVs	03(3.2)	23(24.4)	41(43.2)	22(23.2)	06(6.3)	3.05±0.92
COORDINATION OF CARE: The teamwork between nurses and other hospital staff who took care of you.	24(25.3)	31(32.6)	40(42.1)	0(0)	0(0)	2.17±0.80
RESTFUL ATMOSPHERE PROVIDED BY NURSES: Amount of peace.	23(24.4)	43(45.3)	20(21.1)	09(9.5)	0(0)	2.16±0.90
PRIVACY: Provisions for your privacy by nurses.	13(13.7)	39(41.1)	23(24.2)	16(16.8)	04(4.2)	2.57±1.06
DISCHARGE INSTRUCTIONS: how clearly and completely the nurses told you what to do and expect when you left the hospital.	13(13.7)	53(55.8)	26(27.4)	03(3.2)	0(0)	2.20±0.85
COORDINATION OF CARE AFTER DISCHARGE: Nurses' efforts to provide for your needs after you leave the hospital.	32(33.7)	38(40)	21(22.1)	04(4.2)	0(0)	2.38±0.85
The overall quality of care and services you received during your hospital stay	16(16.8)	34(35.8)	38(40)	07(7.4)	0(0)	2.16±0.78
The overall quality of nursing care you received during your hospital stay.	19(20)	45(47.4)	28(29.5)	03(3.2)	0(0)	2.60±0.75

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In general, would you say your health is:	06(6.3)	36(37.9)	43(45.3)	10(10.5)	0(0)	2.21±0.70
Based on the nursing care I received, I would recommend this hospital to my family and friends	11(11.6)	55(57.9)	22(23.2)	04(4.2)	03(3.2)	1.94±0.78

When a comparison was made based on socio-demographic characteristics of patients to their level of satisfaction with nursing care, they get during their stay in hospitals by using PSNCQQ (Satisfaction of Patients with nursing care quality questionnaire) then. It was found that the mean & standard deviation of the total score of PSNCQQ between the age group of 20-30 was 57.65±4.16, whereas, of 31-40, it was 58.21±3.76 & between 41-50, it was 56.46±44.60 with F=1.37 and p>0.05 which revealed no significant difference among age groups and level of patients satisfaction with nursing care. Comparison based on gender revealed that the mean score of males was

57.89±3.70 and of females was 57.20±4.57 with p>0.05, which depicted no difference between the mean scores of both genders (p>0.05). Comparison using marital status also revealed no significant difference in the mean score of single or married patients as p=0.48, greater than 0.05. When the same comparison was made based on wards from where data was collected from patients, then it was revealed that there was a significant difference in the mean score of obs & gynae wards patients, which had higher scores of PSNCQQ (61.58±2.64 & p<0.00*) and also orthopedics (59.47±4.47 & p<0.00*) with p<0.05 as compared to other wards patients score (Table 3).

Table 3 Comparison of Satisfaction of patients with the nursing care quality questionnaire (PSNCQQ) based on Demographic & Social Characteristics

Socio-demographic Variables		PSNCQQ (Mean±SD)	F/t'	p-value
Age	20-30	57.65±4.16	1.37	0.25
	31-40	58.21±3.76		
	41-50	56.46±44.60		
Gender	Male	57.89±3.70	4.49	0.37
	Female	57.20±4.57		
Marital Status	Single	56.78±3.82	0.50	0.48
	Married	58.05±4.32		
Ward	Medical Unit	55.80±3.42	10.42	0.00*
	General Surgery	56.39±3.70		
	Obs & Gynae	61.58±2.64		
	Neurology	54.14±1.06		
	Orthopedics	59.47±4.47		

Discussion

This study was carried out to evaluate the satisfaction level of patients with quality care provided by nurses to them based on their age, gender, marital status, and the specific ward in which they were admitted. The results of this study demonstrated that age doesn't affect the level of patient satisfaction with the care which nurses provide them during their stay in hospitals, whereas a study conducted by Milutinović, Simin et al. 2012 revealed that older patients are more satisfied by the nursing care they get in hospital as compared to the younger adults (Milutinović et al., 2012). The reason behind this could be the low expectations of older individuals and the enhanced level of maturity they get with their age. The cultural difference could also be a reason which might play a role in the satisfaction level; the care patients receive from nurses in hospitals, or the socialization of older

adults compared to younger ones. This study is in contradiction with ours.

Another study conducted to observe the level of satisfaction based on gender showed that no difference is found between men & women and their satisfaction level of nursing care quality (Foss, 2002). This study is in coherence with ours; no significant difference was found between genders and their satisfaction with the quality of nursing care. On the contrary, some studies revealed that females are more satisfied by the quality care of nurses in hospitals than men (Al Qahtani et al., 2015). The lower level of expectations by the female gender, their self-dependence, and cultural values could be the reason behind their satisfaction with the care they get from nurses. Other studies have demonstrated that men are more commonly satisfied with quality nursing care than females (Shinde and Kapurkar, 2014). The above

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studies contradict our results which showed no difference between genders based on their satisfaction level with nursing care.

Wudu 2021 revealed that the patients admitted to gynecological and surgical wards are more satisfied with the nursing care than other wards such as medicine (Wudu, 2021). This study also reinforces the results of our study, which depicted that gynae and general surgery ward patients are more satisfied compared to other ward patients with the quality care they get from nurses. The same results are also shown by other research in literature (Joolae et al., 2011; Madani et al., 2010), which are in coherence with our study. The difference in the satisfaction level of patients with nursing care might also be affected by the medical condition for which they are admitted, along with their psychological and emotional status at that time.

The limitations of this study are unequal gender participation and the smaller number of participants. Each patient's psychological and emotional state is a major factor that differs greatly among various wards' patients. A larger scale survey with equal distribution of patients in each ward along with their same mental status and age should be carried out for more authentic results.

Conclusion

It is concluded from this study that socio-demographic characteristics do not affect the patient's level of satisfaction with the nursing care they receive in hospitals, but the nature of the ward greatly affects their level of satisfaction with nursing care quality.

Conflict of interest

The authors declared absence of conflict of interest.

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