

Assessment of Patient Satisfaction with Nursing Care at a Large Public Referral Hospital in Kenya

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Abstract

Patient satisfaction with nursing care is known to predict patient outcomes. Nursing care offered by the largest single technical group in any hospital, is known to often determine the overall quality of care offered. This study hence examined the extent to which patients at a Referral hospital in Western Kenya are satisfied with the nursing care they receive. A cross sectional exit survey of discharged patients using a self-administered patient questionnaire was used. 274 patients participated, of which 65.6% were female. 94.1% had formal education with 59.1% reporting that this was their maiden visit to the hospital.

Overall, 87% of patients felt satisfied with nursing care received. Most (81.8%) of the patients interviewed felt they had been promptly attended to, with a further 71.6% rating the nurses as competent and knowledgeable in their clinical care.

The ward in which the patient had been admitted and the number of days a patient had spent in hospital were found to be significantly associated with reporting of overall satisfaction with nursing care ($p=0.037$ & 0.03 respectively). Since nursing care is determinant of patient outcomes during hospitalization, clinical care administrators should often emphasize on the Nurses' technical competence and interpersonal relationships throughout patient care. Prompt quality nursing care should be prioritized to match with patient expectations in each hospital units and ensure patient satisfaction through reduction of length of stay in hospital.

Key words: Assessment, patient satisfaction, nursing care

1. Introduction

Patient satisfaction is defined as the patients' subjective evaluation of their cognitive and emotional reaction as a result of the interaction between their expectations regarding ideal nursing care and their perceptions of the actual nursing care (Johansson et al., 2002). Nursing care is regarded as the most important factor in patient satisfaction with hospitalization (Abramowitz et al. 1987).

Patient satisfaction is used in many health care facilities as an important indicator of care quality and is frequently included in healthcare planning and evaluation (Özsoy et al., 2007). Patient satisfaction surveys demonstrate to your patients and the community at large that you care about high quality and that you are proactively searching for ways you can provide them with better service. These surveys empower patients while presenting your organization with honest, insightful feedback you can interpret and act on. High patient satisfaction is further associated with greater trust in caregivers, improved compliance with treatment recommendations and a better quality of life (Cheung et al., 2009).

Most studies of the relationship of patient characteristics to hospital satisfaction scores have found that several key variables are significantly related to reports of satisfaction, most consistently patient age and self-reported health status (Qualidigm, 2002). Virtually every study reviewed found these two characteristics to be strongly related to hospital satisfaction (Qualidigm, 2002). Studies in Britain revealed eight main domains that have an influence on patient satisfaction with nursing care being: the socio-demographic background of the patients; patients expectations regarding nursing care; the physical environment, communication and information, participation and involvement; interpersonal relations between nurse and patient; nurses' medical-technical competence, and the influence of the health care organization on both patients and nurses (Johansson et al., 2002). In this study, we sought to establish a baseline measure of patient satisfaction with nursing care within a large public referral hospital. The survey results were shared with the hospital management to design and track quality improvement over time.

2. Methods

This was a cross sectional study. Convenience sampling of consenting discharged in-patients within a two-week study period was used. A total of 274 patients participated. Data was collected by a self-administered structured questionnaire containing patient demographics and nursing care ratings. Patients who had been admitted for at least 48 hours and beyond were eligible for the study. Those who had been retained for non-payment of hospital

bills, very ill patients discharged for palliative care and patients treated for mental illness were excluded from the study.

The statistical package for social scientists, SPSS Version 18.0 was used for the quantitative data analysis. Descriptive and bivariate analyses were performed. The research protocol was subjected to the institutional research & ethical committee approval and consent sought from participants, with participation being voluntary for the eligible patients.

3. Results

3.1 Socio-Demographic Characteristics of respondents

Participants in the study ranged from the ages of under 18 to those aged 74 years. Of this group 65.6% (n=270) were female while 34.4% were male. 94.1% of the respondents had at least a type of formal education with their in-patient length of stay ranging from 2 days to over 20 days as summarized in table 1.

3.2 Nursing care ratings

Patients were asked a number of questions related to the quality of nursing care they received. Majority of the patients (84.4%, n=270) were greeted upon arrival. Further, most of the patients (81.8%) felt they had been promptly attended to. Over half of the participants (68.4%, n=268) said they had been provided explanation of ward facilities.

Patients were further asked questions regarding nursing care on a 4 point Likert scale of never to always. When asked whether medications were dispensed at the right time; 74.7% (n=267) felt it was always while 1.5% felt it was never dispensed at the right time. We further asked them whether their calls were promptly attended to, 66.4% said the nurses had always responded to their calls promptly.

3.2.1 Service and Autonomy in care

When asked whether they were treated with dignity, 74.4% (n=268) felt this was done always. Almost three quarters of the patients (70.2%, n=268) said that the nurses were very supportive. About 67.9% (n=263) of the patients felt the nurses were polite and kind to them. Sixty nine percent of the patient felt the nurses made them feel confident in them. Another 67.8% felt that the nurses answered their questions about their care in a way they could understand. Almost 69.8% (n=269) felt the nurses were competent and quite knowledgeable.

They were further asked if they felt that their privacy was maintained with 72.9% (n=271) affirming that this had been done always when being attended to by nurses. A further 60% (n=270) of the respondents felt that their family members were included in their plan of care, 71.6% (n=271) reported that the nurses were friendly and helpful always, 66.1% said the nurses made them feel able to ask questions about their treatment. We also noted that 71.6% (n=272) of the patients felt that the nurses were comprehensive in treating and examining them, 68.1% felt the nurses did their best to keep them from worrying, 84.4% gave the patient clear instructions for after care, 89.5% gave the patient clear information regarding medication and finally 82.2% were attended to by a qualified nurse.

3.2.2 Information and communication from nurses

When asked whether they had been informed about their rights and responsibilities, over half 61.8% (n=267) of the patients said they had been informed about their rights and responsibilities. About three quarter of the patients 75.1% (n=261) said they had been given directions on the ward after admission.

Almost all (93.8 %, n=268) respondents said they had been informed about their plan of care always. However, 6.7% felt they were never informed about their plan of care.

Slightly more than half of the participants (61.7%, n=263) felt the nurses were always approachable and only 1.9% (n=263) said they were never approachable. More than half of the patients (66.2%, n=263) stated that the nurses listened carefully to them always while 0.8% (n=263) said they were never listened to carefully.

3.2.3 Satisfaction with nursing care

We then asked the patients to rate their estimated overall satisfaction with nursing care in the hospital with the choices range of poor to excellent. Most, 61% (n=269) felt it was excellent or very good. These results are summarized in figure 1.

We further asked patients on their subsequent admissions to the hospital if they felt there was improvement in general care in comparison to previous admissions' care and whether they could recommend the hospital to other patients. Up to 80.2% (n=106) reported that we had improved while 86.7% (n=256) said they would recommend us to others.

To find out whether there were any factors from the demographic factors of patients that were associated with the overall satisfaction with nursing care. We did a univariate analysis with our main outcome variable being overall satisfaction with nursing care. All the demographic factors were entered against the outcome variable, see table 2.

Two factors were found to be associated with the overall satisfaction with nursing care. The ward in which the respondent had been admitted was found to be associated with overall nursing care (p value 0.037). The number of days a patient had spent in hospital was also found to have a significant association with the patients' response on overall satisfaction with nursing care (p value 0.03).

4. Discussion

The results from this study show that nursing care at this Referral Hospital is generally rated very high. The most highly rated aspects of care were; greetings on arrival with prompt attention, informed about their plan of care, clear information regarding medication, and attended to everyday by a qualified and competent nurse. We note that these high ratings are in key areas. It is very encouraging to note that the patients felt that they were attended to by a qualified nurse almost always. This question was very important because this being a teaching hospital, the students ought to attend to patients in the company of a qualified staff. To further validate this, the patients always felt that the nurse attending to them was very competent. This finding compare to a study conducted in South Africa on Patient satisfaction with antiretroviral services at primary health-care facilities in the Free State that found high ratings to services offered by nurses (Wouters et al., 2008).

A similar study done on a resource strained teaching hospital like the current setting of this study, assessing the satisfaction of medical and surgical patients in Egypt, noted that in spite of the nursing shortage in the university hospital, the results indicated that patient satisfaction was high (Zahr et al., 1991).

The main areas posing concern where nurses need to improve are; in giving information on patients' rights and responsibilities and being more approachable. This is very important as it influences the patients' satisfaction and therefore may influence their medical outcome as noted by previous studies that poor relationships with health workers, particularly with nursing staff reduces satisfaction with care in Africa (Manongi et al., 2009). Similarly, Aiken et al. (2002, 2009) established that positive care environments including staffing, education, and relationships, were associated with decreased mortality.

The ward and the number of days a patient had stayed in the hospital were the two factors associated with overall satisfaction with nursing care in the hospital. In the univariate analysis, we further noted that the greatest satisfaction was among patients from the mother and baby hospital unit handling perinatal care.

The number of days a patient spends in hospital affects their perceptions and consequently their satisfaction with care. This is in agreement with a study conducted in Morocco by Soufi et al (2010) on patient satisfaction in an acute medicine department that found that the number of days spent in hospital affected the overall satisfaction of the patient with both medical and nursing care provided at the hospital. When the patients stay too long in hospital, this affects the way they perceive the care they are given and they begin feeling they are not well taken care of. It is therefore important to ensure that the patient stays for a short period within the hospital through provision of quality care with timely nursing and medical interventions. Our study however differs from a systematic literature review that found age and self-reported health status were associated with overall satisfaction with the nursing care provided at the hospital.

5. Conclusion

The general rating of nursing care satisfaction among patients was quite high. The ward and the total number of days a patient spends in hospital were significantly associated with patients' satisfaction with care given. In essence therefore offering prioritized, prompt and quality nursing care which matches patient expectations in each unit is vital in reducing the length of stay in hospital and thereby the eventual patient satisfaction with care offered. Nurses also need to herald information on patients' rights and responsibilities and be more approachable.

Based on the findings, hospital-units' specific patient satisfaction surveys are recommended to map out detailed patient satisfaction levels with nursing care aspects that have an influence on patient satisfaction levels in the resource limited public referral hospitals of the developing countries. We further recommend regularized patient satisfaction surveys to reveal important indicators of the overall quality of care and to serve in quality control and assurance on care provided in hospitals.

Acknowledgements

The authors acknowledge the contributions made by the hospital management. We thank the public relations officers, clinicians, nurses and patients for their cooperation during the data collection process.

Competing interests

The authors declare that they have no competing interests.

Authors' contributions

This topic was conceived and designed by TKT, JNM and KNS. KNS and MMG, contributed in the study design and data collection process. JCN and MCO, translated the questionnaire from English to Kiswahili and back

translation. The whole team was involved in the analysis and drafting of the paper. Finally Prof Angela A. was the senior resource person and was involved at all stages.

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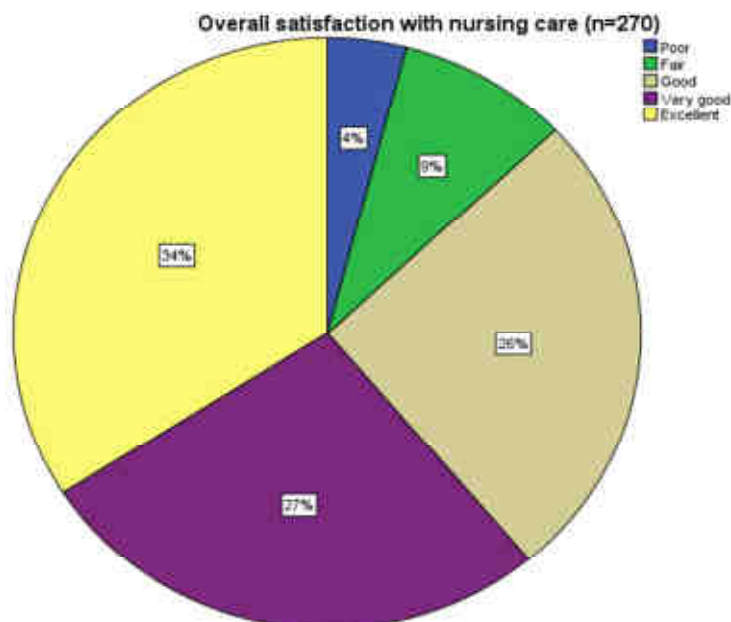


Fig 1: Overall satisfaction with nursing care

Table 1: Socio demographic characteristics of the respondents

| Characteristic | Frequency | Percentage % |
|--|------------|--------------|
| 1. Person filling Questionnaire | | |
| Self (Patient) | 165 | 64 |
| Guardian/Parent | 93 | 36 |
| Total | 258 | 100 |
| 2. Age in years | | |
| Under 18 | 37 | 13.7 |
| 19-34 | 182 | 67.4 |
| 35-54 | 42 | 15.6 |
| 55-74 | 9 | 3.3 |
| Total | 270 | 100 |
| 3. Gender | | |
| Male | 93 | 34.4 |
| Female | 177 | 65.6 |
| Total | 270 | 100 |
| 4. Education level | | |
| No formal education(illiterate) | 16 | 5.9 |
| Primary | 89 | 33 |
| Secondary | 97 | 35.9 |
| College/university | 68 | 25.2 |
| Total | 270 | 100 |
| 5. Number of days spent in Hospital | | |
| 2-4 | 111 | 56.9 |
| 5-9 | 39 | 20 |
| 10-14 | 23 | 11.8 |
| 15 -19 | 10 | 5.1 |
| Longer than 20 | 12 | 6.2 |
| Total | 195 | 100 |
| 6. Number of days Child has spent in hospital | | |
| 2-4 | 32 | 50.8 |
| 5-9 | 19 | 30.2 |
| 10-14 | 8 | 12.7 |
| 15-19 | 1 | 4.8 |
| Total | 63 | 100 |
| 7. 1st visit to hospital | | |
| Yes | 153 | 59.1 |
| No | 106 | 40.9 |
| TOTAL | 259 | 100 |

NB: In the above table, missing values were not recorded in the table

Table 2: Factors Associated with Overall satisfaction with nursing care

| Factors | Chi-Square | P- value |
|----------------------------------|------------|----------|
| Person filling the questionnaire | 2.51 | 0.642 |
| Ward | 62.17 | 0.037* |
| Gender | 1.42 | 0.841 |
| Age | 10.237 | 0.841 |
| Level of education | 13.49 | 0.334 |
| Number of days spent in hospital | 35.540 | 0.03* |
| First Visit | 5.7 | 0.22 |

*P value is significant

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