RELATIONSHIP OF NURSING CARING BEHAVIOR WITH PATIENT SATISFACTION IN HOSPITAL

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ABSTRACT

Patient satisfaction is a feeling of delight or displeasure that arises after comparing between perceptions of caring behaviors. Nurse's caring is care, support or information provided by nurses. The purpose of this research was to identify the relationship between caring behavior and patient satisfaction in treating Medical Surgical room at Hospital. The research used an analytical correlation design with the cross sectional approach. The sampling used total sampling technique with the number of 50 patients in Medical Surgical room at Hospital. The data collection was done through questionnaires. The results of the univariate analysis of the patient satisfaction showed that most of the patients were less satisfied. As many as 28 people (52%) and most of the nurses showed less caring behavior as many as 30 people (60%). Bivariate analysis used chi square-correlation test. The test results showed that there was no meaningful correlation between nurse caring behaviors and patient satisfaction ($P=0.450$). It is necessary to improve nurse caring through training in accordance with the field of work of nurses, giving a feedback from the result of the patient satisfaction assessment to each nurse, and rewarding by or continuing education in order to improve nurse caring.

Keywords: Caring Behavior, Patient Satisfaction, Hospital

INTRODUCTION

Hospitals have a very strategic role in efforts to accelerate the improvement of the degree of public health, the new paradigm of health services requires hospitals to provide quality services according to the needs and desires of patients by still referring to the professional code of ethics, in the rapid development of technology and increasingly fierce competition. Hospitals are required to continue to improve the quality of their services.

Acts of caring are said to be essential for human survival and development (Skott & Lundgren 2006). Caring has been widely discussed in the health care professions, especially in nursing which is one of the caring professions (Boykin & Schoenhofer 2001). Watson (1985) describes caring as a moral ideal of nursing. According to Watson, caring preserves human dignity in cure dominated health care systems and becomes a standard by which cure is measured (Watson 1988).

Watson (1979) defined caring as a process involving knowledge, action and consequences and described ten 'carative' factors which can be used to incorporate caring into practice in any clinical setting. Nurse caring has been related to patient satisfaction in western literature (Wolf Miller & Devine, 2003; Wolf et al., 1998; Forbes & Brown 1995; Boyle Moddeman & Mann, 1989). However, researchers in Iran have not linked patients' reports of nurse caring to the outcome of patient satisfaction with nursing care. Nurse caring has been related to patient satisfaction in western literature (Wolf, Miller & Devine, 2003; Wolf et al., 1998; Forbes & Brown, 1995; Boyle, Moddeman & Mann, 1989). Heavy workloads and severe staff shortages are common characteristics educational hospitals and the time that nurses allot for direct care has been reduced. This contribute to changes in patients' perceptions of nurse caring and satisfaction with nursing care possibly reducing the effects of nursing care services.

Caring is an important part of nursing practice and a way that has meaning and motivates action (Watson, 1979). In addition, Watson in Theory of Human Care emphasized that ways as a type of relationship and transaction are needed between the giver and recipient of care to improve and protect patients as humans, thereby
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affecting the patient's ability to recover.

Caring in nursing as an essential interpersonal process that requires nurses to perform specific role activities in a way to convey the expression of certain emotions to these activities includes helping, and serving people who have special needs. Nursing is interpreted as a process of helping, serving and caring. Nursing and caring are inseparable which at the same integral to the being of the nurse (Brown, 1991). Numerous practical activities are carried out in the caring process in nursing (Morrison & Burnard 2009). The communication between nurses and family will be difficult to provide comfort and emotional care for the family. This is in line with the research of Loghmani, Borhani & Abbaszadeh (2011) showing that therapeutic communication by nurses will increase patient and family confidence. But there are some respondents (15%) who are still in the category of less caring. Based on the answers to the questionnaire, several items of statement related to communication are still in the low value category or in another sense not all nurses are accustomed to conducting intensive communication with patients related to expressing of feelings such as expressing care, empathy (Watson, 1979). Thus, caring could be associated with patient outcomes, including recovery of functional status, symptom relief, enablement and satisfaction. Patient satisfaction, as one of the ultimate validators of effectiveness and quality of care (Donabedian, 1992).

The purpose of this study is to find out the relationship between nurses caring behavior with patient satisfaction in Medical Surgical room at Hospital.

METHODOLOGY

The purpose of this study was to examine the relationship between hospitalized patients' reports of nurse caring and patient satisfaction using a cross-sectional design. The revised Caring Behaviors Inventory (CBI) (Wolf et al., 1994) and the Patient Satisfaction Instrument (PSI) (Hinshaw & Atwood, 1981; Risser 1975). Risser's premise held that it is necessary to evaluate nursing care to get a clear and vivid idea with complete view of nurse-client interaction. The study hypothesized that patients' perceptions of nurse caring is associated with their satisfaction. Sampling in research using the total sampling method, is to take all the existing member in the population (Macnee & McCabe 2007). In this research sample all the nurse nurses on duty in the room medical-surgical hospital was included. The number was as many as 50 people.

RESULTS AND DISCUSSION

Table 1: Frequency distribution of patient satisfaction in Medical Surgical room at Hospital

| Patient Satisfaction | Frequency (n) | Percentage (%) |
|----------------------|---------------|----------------|
| Not satisfied        | 28            | 52.0           |
| Satisfied            | 22            | 48.0           |
| Total                | 50            | 100            |

Shows that of the total 50 respondents that have been studied, it was seen that the frequency respondents that were less satisfied was 28 (52.0%). While those who were satisfied the results of 50 respondents found 22 (48.0%) who were satisfied.

Table 2: Frequency Distribution of Nurse Caring Behavior in the Medical Surgical room at Hospital

| Caring Behavior | Frequency (n) | Percentage (%) |
|-----------------|---------------|----------------|
| Less caring     | 30            | 60.0           |
| Caring          | 20            | 40.0           |
| Total           | 50            | 100            |

Shows that from a total of 50 respondents who have been studied, it is known that most respondents do not receive proper caring behavior. The results showed that out of 50 respondents, 30 (60.0%) did not receive proper care from nurses and caring behavior among 20 (40.0%) patients nurses showed proper caring behavior. Providing services to patients.

The analysis shows that patient satisfaction affects the caring behavior of nurses, it can be concluded that there are differences in the average caring behavior among nurses who have low caring attitudes and very good patient satisfaction with nurses or with other meanings. There is no meaningful relationship between nurses caring behavior with the satisfaction of patient.
From the results of the analysis of the frequency distribution of patient satisfaction it was evident that out of the total 50 patient satisfaction in Medical Surgical room at Hospital respondents 50 of them were satisfied (15%), while other respondents were also dissatisfied (15%). Thus, the patient satisfaction is still good or (balanced). This shows that target of achieving patient satisfaction is 85%. When compared with the indicator of minimum service standards, the patient satisfaction at Medical Surgical Hospital attack is still classified as good (good), because in Service Minimal Standard, the Government targets inpatient service satisfaction is >90%. The results are in line Wolf, Miller & Devine (2003) and Johansson, Oleni & Fridlund, (2002). In the context of quality, caring is associated with patient satisfaction. However, researchers in Iran have not linked patients' reports of nurse caring to the outcome of patient satisfaction with nursing care (Forbes & Brown 1995; Larson & Ferketich, 1993; Boyle et al., 1989).

Table 3: Bivariate Caring Correlation Analysis of nurses with patient satisfaction in Medical Surgical room at Hospital

| Satisfaction | Nursing Care | Total | Or | P value |
|--------------|--------------|-------|----|---------|
| Patient      | Less Caring  | Caring| 28 | 0.538   |
| Satisfied    | 15 0.52%     | 13 46.4%| 28 100% | 0.450   |
| Satisfied    | 15 68.2%     | 7 31.8%| 22 100% |         |
| Total        | 30 60.0%     | 20 40.0%| 50 100% |         |

Regarding caring nurses, out of 50 respondents, 28 respondents said they were not satisfied, 15 respondents were less caring, and 13 respondents were caring. While the other 22 respondents said they were satisfied, each of them lacking caring for 15 people and caring for 7 people. From the statistical test of the bivariate relationship between caring nurses and patient satisfaction, a correlation value of 0.538 indicates a moderate relationship. While the test results showed a p value of 0.450 <0.05 so it was not significant. This is in line with Forbes and Brown 1995; Boyle Moddeman & Mann, 1989). However, researchers in Iran have not linked patients' reports of nurse caring to the outcome of patient satisfaction with nursing care. Nurses' caring behavior can influence quality services in hospitals that will give satisfaction to patients. Appropriate nursing care can cause financial benefits to the hospital with more patient admission.

CONCLUSION

1. Most nurses in the Medical Surgical room at Hospital are still considered to be caring less well.
2. Most nurses in the Medical Surgical room at Hospital have patient satisfaction Very good in treating patients.
3. There is no significant relationship between nurses caring behavior with patient satisfaction in Medical Surgical room at the Hospital.

Implication

1. Nurse still provide nursing care to patients with sense of caring
2. Hospital management must consider assessment factor that impact patient satisfaction from other aspect besides caring of nurses.

REFERENCES

Boykin, A. & Schoenhofer, S. (2001). Nursing as caring: a model of transforming practice. Jones and Bartlett: Boston Massachusetts, USA.

Boyle, K., Moddeman, G. & Mann, B. (1989). The importance of selected nursing activities to patients and their nurses. Applied Nursing Research, 2(4), pp 173-177.

Brown, C. (1991). Aesthetics of nursing administration: the art of nursing in organizations. Nursing Administration Quarterly, 16(1), pp 61-70.

Donabedian, A. (1992). The role of outcomes in quality assessment and assurance. Quality Review Bulletin, 18(11), pp 356-60.

Forbes, M. & Brown, H. (1995). Developing an instrument for measuring patient satisfaction. AORN Journal, 61(4), pp 737-743.

Hinshaw, A. & Atwood, J. (1981). A patient satisfaction instrument: precision by replication. Nursing Research, 31(3), pp 170-191.

Hinshaw, A.S., Scofield, R. & Atwood, J.R. (1981). Staff, patient, and cost outcomes of all registered nurse staffing.
Johansson, P., Oleni, M. & Fridlund, B. (2002). Patient satisfaction with care in the context of health care: a literature study. Scandinavian Journal of Caring Sciences, 16(4), pp 337-344.

Larson, P. & Ferketich, S. (1993). Patients’ satisfaction with nurses’ caring during hospitalization. Western Journal of Nursing Research, 15(6), pp 690-707.

Loghmani, L., Borhani, F., & Abbaszadeh, A. (2014). Factors affecting the nurse-patients' family communication in intensive care unit of kerman: a qualitative study. Journal of caring sciences, 3(1), pp 67–82.

Macnee, C. & McCabe, S. (2007). Understanding nursing research, reading and using research in evidence-based practice (2 Wolters Kluwer, Lippincott, Williams and Wilkins: Philadelphia, Pennsylvania, USA.

Morrison & Burnard, (2008). Caring & Communicating interpersonal relationships in nursing, 2nd Edition, EGC, Jakarta.

Risser, N. (1975). Development of an instrument to measure patient satisfaction with nurses and nursing care in primary care setting. Nursing Research, 24(1), pp 45-52

Skott, C. & Lundgern, S. (2006). The value of caring – episodes of desired change. International Journal of Human Caring, 10(1), pp 32-39.

Watson, J. (1979). Nursing: the philosophy and science of caring. Little, Brown and Company: Boston, Massachusetts, USA.

Watson, J. (1985). Nursing: human science and human care, 3rd edition. National League for Nursing: New York, USA.

Watson, J. (1988). New dimensions of human caring theory. Nursing Science Quarterly, 1(4), pp 175-181.

Wolf, Z., Colahan, M., Costello, A., Warwick, F., Ambrose, M. & Giardino, E. (1998). Relationship between nurse caring and patient satisfaction. Medical Surgical Nursing, 7(2), pp 99-110.

Wolf, Z., Giardino, E., Osborne, P. & Ambrose M. (1994). Dimensions of nurse caring. Journal of Nursing Scholarship, 26(2), pp 107-111.

Wolf, Z., Miller, P. & Devine, M. (2003). Relationship between nurse caring and patient satisfaction in patients undergoing invasive cardiac procedures. Medical Surgical Nursing, 12(6), pp 391-396.