Patients’ Satisfaction with Nursing Care Quality in Medical Wards at Selected Hospital in Chennai, South India

Abstract

Background: Patient satisfaction is currently accepted as an outcome criteria and standard instrument to gauge the quality of nursing care. The aim was to assess the level of patients’ satisfaction with nursing care quality in medical wards. Materials and Methods: A cross-sectional descriptive study was conducted with 124 samples in medical wards of a tertiary care teaching hospital in South India in 2016. Convenience sampling technique was adopted. Self-administered “Patient Satisfaction with Nursing Care Quality Questionnaire” (PSNCQQ) was used to collect data on the day of discharge. The analysis was done by frequency, percentage, mean, standard deviation, independent t-test, and ANOVA. Results: Out of 124 participants, the level of satisfaction was excellent for 28.23%, very good for 58.06% and good for 13.71% with regards to overall quality of nursing care in medical wards. The mean (SD) value for overall patients’ satisfaction with nursing care quality was 78.88 (4.84) out of 95 with the mean percentage of 83.03% which shows excellent patient satisfaction. The patients’ perception component mean (SD) 18.35 (5.09) gained highest satisfaction than nurses’ communication and nursing care components. The satisfaction of nursing care mean (SD) 46.46 (3.38) was higher than satisfaction of nurses’ communication mean (SD) at 32.42 (2.57). Conclusions: The patients admitted and treated in medical wards were most satisfied with nursing care quality they received. The results showed that the communication component can be improved. There was no statistically significant association between patient satisfaction of nursing care quality and background variables.

Keywords: India, nursing, nursing care, patient satisfaction

Introduction

Patient satisfaction is a criteria to gauge the quality of care. Even though patient satisfaction is dynamic and difficult to define, it is the sole indicator to measure the success of care delivery.[1] Hospitalized patients are the main health care consumers who spread the good image about the hospital and organization to society. The patient satisfaction further facilitates efficient hospital management.[2] There are many number of patients admitted to the medical wards. Environmental and vector factors contribute to the flow of patients in these settings.[3] It was identified that in medical wards the overall patient satisfaction was less compared to surgical wards due to increased interaction and technical nursing activities in the surgical wards, which was comparatively less in the medical wards.[4] The basic needs of patients were well met in out-patient departments than in the in-patient departments because, the duration of hospital stay is lengthier in hospitalized patients. Hence, gaining patient satisfaction in hospitalized patients is considered as an important indicator of quality care.[5]

The patients’ satisfaction with nursing care quality evaluates the met and unmet needs of patients, enables to identify the gap in nursing interventions and helps to uplift the care quality within the organization. Nurses are the health care providers who monitor and take care of the patients round the clock in a hospital, and they are the key members of health care team who facilitate the hospitalized patients to adapt.[6] It is therefore imperative that nurses should know the patient expectations to improve their satisfaction.[7] Patient satisfaction can be achieved by good bed side manners, full engagement with patients, care giver communication, providing instructions...

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Address for correspondence:
Shanmugapriya Kannan, Nursing Tutor, Department of Medical Surgical Nursing, College of Nursing, Jawaharlal Institute of Postgraduate Medical Education and Research, Gorimedu, Dhavantri Nagar, Puducherry, India, Department of Nursing Foundation, Faculty of Nursing, Sri Ramachandra Medical College and Research Institute, Porur, Chennai, Tamil Nadu, India.

E-mail: shan_priya1707@yahoo.com

For reprints contact: reprints@medknow.com
effective use of language and efficient leadership which are the primary requisites for quality patient care. Patient’s expectations range from routine nursing care to informational, emotional, spiritual, and personal support from nursing personnel during their hospital stay.

The overall patient satisfaction was positively influenced by continuous information provided by the nurses regarding the delayed care in emergency department. Nurse’s communication skills, performance and their emotional support improved patient satisfaction in medical, surgical, orthopedic, and maternity wards in India. Clear communication, explanation before nursing procedures, and information on patient’s condition also had a positive influence on satisfaction.

Patients from North Ethiopia were satisfied with freedom in wards, nurse’s manners, nursing care which was provided based on individual needs and the nurse’s ability to carry out the given task. Dissatisfaction was found on amount of information shared by nurses to patients and on discharge instructions. A study conducted in public hospitals of Chennai showed that patient experience on education and information obtained in hospital is appreciable compared to care coordination, emotional support, continuity and transmission and physical comfort. The same study recommended determination of patient satisfaction in the private sector. Therefore, the current study aimed to find patient satisfaction in private sector medical wards in Chennai.

Materials and Methods

This cross-sectional descriptive study was conducted from July 11 to August 10, 2016. The study was conducted in male and female medical wards of a tertiary care teaching hospital in South India. The target population were patients admitted to the male and female medical wards. The accessible population were patients who met inclusion criteria. Totally, 124 Samples were selected by hypothesis testing for single proportion with power 80%, alpha error 5%. Convenience sampling technique was adopted. Data was collected from these patients on the day of discharge. Patients with severe pain (pain score 7-10), chronically ill/very sick/disoriented altered conscious level were excluded. The tool used was ‘Patient Satisfaction with Nursing Care Quality Questionnaire’ PSNCQQ which is a 5-point rating scale with 23 items under 3 components. Nurses’ communication consisted of 8 items, nursing care 11 items and patients’ perception 4 items. Patients’ perception component was excluded as it consisted of general questions which was subjective and not directly related to nursing. Overall patient satisfaction was calculated from nurses’ communication and nursing care components of 19 items with 5 point rating (Excellent –score 5, Very good-score 4, Good-score 3 Fair-score 2, Poor-score 1) reverse scoring for each questions with the total score of 95. The score interpretation was <19 poor, 20–38 fair, 39–57 good, 58–76 very good, 77–95 excellent). The instrument was translated and back translated into Tamil language and validated by 2 internal and 3 external experts. Written permission was obtained from the author Prof. Heather K. Spence Laschinger. Reliability was established by Cronbach’s alpha test which was 0.97. The investigator collected responses from the samples after obtaining oral and written informed consent. The participants were informed about the voluntary nature of participation, confidentiality and that they could withdraw from the study at any time. Approval for the conduct of the study was obtained from the institutional ethics committee. Data were grouped and analyzed by SPSS software (IBM) (version 17, SPSS Inc, Chicago, IL, USA) and at p value 0.05 for the level of significance.

Ethical considerations

Institutional ethics committee (ref no: CSP/16/JAN’/45/72), Sri Ramachandra University and Research Institute, Chennai, India. The authors certify that they have obtained all appropriate patient consent.

Results

The demographic characteristics [Table 1] showed that about 50.81% of the study participants were female and 73.39% were married. 73.39% were educated and 71.77% were employed. 43.55% were from urban and 64.52% were belonged to nuclear family. The results of present study revealed that nearly half 58.06% were new patients and 49.19% had direct admission. Among them 29.8% were partially dependent and 22.58% were totally dependent on others. 70.97% of the patients received care within nominal charges. 95.16% had planned discharge and only 4.83% discharged on request due to family commitment, job, and childcare.

Table 2 explained overall patients’ satisfaction with nursing care quality (nurse’s communication and nursing care components) 28.23% of them expressed excellent satisfaction, 58.06% expressed very good satisfaction and 13.71% had good satisfaction. None of them rated poor. Table 3 explained the mean scores of overall Patients’ Satisfaction with Nursing Care Quality. It revealed that the mean (SD) score of overall patients’ satisfaction with nursing care quality was 78.88 (4.84) with mean percentage 83.03%. The mean (SD) 18.35 (5.09) score with mean percentage 91.75% was high in the component of patient perception, followed by mean (SD) 46.46 (3.38) of nursing care with mean percentage 84.47% and mean (SD) 32.42 (2.57) value of communication by the nurses with mean percentage 81.05%. Table 4 depicted the distribution of level of patient satisfaction with nursing care quality by item under 5-point rating scale. No one rated poor component and very few rated fair under nurse’s communication. Fair satisfaction found for not giving
adequate instruction before nursing procedures, during discharge, follow up after discharge.

**Discussion**

Nursing care quality is considered as one of the desired outcomes of Overall health care quality. Good care attracts and keeps the client satisfied, recommends more patients for treatment and to improve the impression of the organization as a service provider. Quality is expected in any hospital to attract the patients. Studies conducted on patient satisfaction revealed that number of background variables had association with patient satisfaction like age, sex, educational status, marital status, income, etc. It is interesting that there was no statistically significant association between patients’ satisfaction with nursing care quality and the background variables in the present study. This study was supported by a similar study findings conducted by Alsaqri at Hail, Saudi Arabia in three tertiary care settings, among 87 patients and 90 head nurses by convenient sampling revealed that the nurse’s caring behavior and patients’ satisfaction had no correlation and they were not associated with demographic variables. Comparable to the study conducted in North India among 140 patients found that the patient satisfaction did not have any association with patient’s demographic variables like age, gender, means of admission, length of stay, prior admission, and patient’s health status before admission except age. Similarly, the study conducted in Thiruvananthapuram, at Kerala state suggested that background variables like sex, marital status, education, income, length of stay in the hospital and previous admission did not affect patients’ satisfaction. The other study also concluded that patients’ satisfaction did not correlate with nurse’s performance. As few of them rated fair satisfaction on
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Table 2: Overall Patients’ Satisfaction with Nursing Care Quality (n=124)

| The PSNCQ and Its Components | Excellent n (%) | Very Good n (%) | Good n (%) | Fair n (%) | Poor n (%) |
|------------------------------|-----------------|-----------------|------------|------------|------------|
| Components:                 |                 |                 |            |            |            |
| Nurse’s Communication       | 27 (21.80)      | 77 (62.40)      | 19 (15.20) | 01 (0.60)  | -          |
| Nursing care                | 41 (33.40)      | 67 (54.40)      | 16 (12.20) | -          | -          |
| Patients’ Perception        | 67 (54.40)      | 48 (38.50)      | 09 (07.06) | -          | -          |
| Overall patients’ satisfaction with nursing Care quality* | 34 (28.23) | 72 (58.06) | 17 (13.71) | - | - |

*The overall patients’ satisfaction with nursing care quality included nurses’ communication and nursing care components except patients’ perception component.

Table 3: Mean (SD) Scores of overall Patients’ Satisfaction with Nursing Care Quality (n=124)

| Tool Components (23 questions) | Min-Max Score Obtained | Mean (SD) | Mean % |
|-------------------------------|------------------------|-----------|--------|
| Nurses’ communication (8 questions) | 24 to 40 | 32.42 (2.57) | 81.05 |
| Nursing care (11 questions) | 34 to 55 | 46.46 (3.38) | 84.47 |
| Patients’ perception (4 questions) | 15 to 20 | 18.35 (5.09) | 91.75 |
| Overall patients’ satisfaction with nursing care quality (8 + 11=19 questions)* | 58 to 95 | 78.88 (4.84) | 83.03 |

*Overall patients’ satisfaction with nursing care quality included nurses’ communication and nursing care components except patients’ perception component. Min - Minimum, Max - Maximum, SD - Standard deviation

Table 4: Distribution of Level of Patient Satisfaction with Nursing Care Quality by Items. n=124

| Nursing Care by Items                        | Excellent n (%) | Very Good n (%) | Good n (%) | Fair n (%) | Poor n (%) |
|----------------------------------------------|-----------------|-----------------|------------|------------|------------|
| A. Nurses’ Communication                     |                 |                 |            |            |            |
| Information given to patients by nurses      | 41 (33.06)      | 78 (62.90)      | 5 (4.03)   | -          | -          |
| Instruction given by nurses to patients before procedure | 41 (33.06) | 75 (60.48) | 7 (5.64) | 1 (0.80) | - |
| Ease of getting information from nurses by the patient | 27 (21.77) | 94 (75.80) | 3 (2.42) | - | - |
| Information given by nurse to patients, families and doctors | 32 (25.81) | 71 (57.25) | 21 (16.94) | - | - |
| Nurse informing family about patient’s condition | 13 (10.48) | 96 (77.42) | 15 (12.10) | - | - |
| Recognition given to patients need by nurse | 36 (29.03) | 65 (52.42) | 23 (18.55) | - | - |
| Discharge instructions given by nurses to the patient | 14 (11.29) | 72 (58.06) | 36 (29.03) | 2 (1.61) | - |
| Coordination of nursing care after discharge | 12 (9.68) | 68 (54.84) | 41 (33.06) | 3 (2.42) | - |
| B. Nursing Care                              |                 |                 |            |            |            |
| Involvement of family in patient care        | 18 (14.52)      | 65 (52.42)      | 41 (33.06) | -          | -          |
| Care and concern shown by nurse              | 50 (40.32)      | 58 (46.77)      | 16 (12.90) | -          | -          |
| Attention by nurse towards patients’ condition | 42 (33.87) | 69 (55.65) | 13 (10.48) | - | - |
| Consideration of patient’s need by nurse     | 48 (38.71)      | 67 (54.03)      | 9 (7.26)   | -          | -          |
| Adjustment of nurses daily routine to patient’s need | 28 (22.58) | 83 (66.94) | 13 (10.48) | - | - |
| Helpful attitude of nurse towards patient    | 61 (49.19)      | 55 (44.35)      | 8 (6.45)   | -          | -          |
| Nursing staff’s response to patient’s call   | 61 (49.19)      | 57 (46.97)      | 6 (4.80)   | -          | -          |
| Skill and competence of nursing staff        | 32 (25.80)      | 68 (54.84)      | 24 (19.35) | -          | -          |
| Co-ordination of care with other hospital staff | 51 (41.13) | 64 (51.61) | 9 (7.26) | - | - |
| Provision of restful environment by nurse    | 46 (37.10)      | 68 (54.84)      | 10 (8.06)  | -          | -          |
| Provision of privacy by nurses               | 19 (15.32)      | 88 (70.97)      | 17 (13.71) | -          | -          |
| C. Patients’ Perception                      |                 |                 |            |            |            |
| Overall quality of care, services received during hospital stay | 67 (54.0) | 55 (44.35) | 2 (01.61) | - | - |
| Overall quality of nursing care received during hospital stay | 85 (68.55) | 37 (29.84) | 2 (01.61) | - | - |
| In general, would you say your health is:    |                 |                 |            |            |            |
| Strongly agree n (%)                        |                 |                 |            |            |            |
| Somewhat agree n (%)                        |                 |                 |            |            |            |
| Agree n (%)                                 |                 |                 |            |            |            |
| somewhat disagree n (%)                     |                 |                 |            |            |            |
| strongly disagree n (%)                     |                 |                 |            |            |            |
| Based on nursing care I received, I would recommend this hospital to my family and friends. | 86 (69.35) | 38 (30.65) | - | - | - |

Note: - Not rated by the patients

In general, would you say your health is:

Based on nursing care I received, I would recommend this hospital to my family and friends.

nurse’s communication, it can be improved by providing simple soothing talk with patients in their local language, explaining the procedures, providing adequate instructions and clearing their doubts. In India, the condition of patient
is explained by physician to the relatives and the nurse’s part in this is very limited.

The limitations were that the responses were subjective, care provider related factors like nurse’s education, experience, job satisfaction, salary, nurse-patient ratio, environmental factors, and hospital supportive services were not included in this study. The recommendations are to replicate the study with larger samples, interventional studies can be carried out in multiple settings, and patient satisfaction can be compared with different settings in the same hospital.

**Conclusions**

The patients admitted and treated in medical wards were most satisfied with nursing care quality. Nurses need to improve communication skills in providing adequate information, before performing procedures, during discharge, and coordinating care after discharge from hospital.

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Nil.

**Conflicts of interest**

Nothing to declare.

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