Satisfaction with nursing care from the inpatients’ perspective in Prince Salman Armed Forced Hospital Tabuk, Saudi Arabia

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Abstract

Background: Patient satisfaction with nursing care is important for any health care agency because nurses comprise the majority of health care providers and they provide care for patients 24 hours a day.

Objectives: To assess nursing care from patients’ perspective as well as to study the difference in the level of patients’ satisfaction and their perspectives in relation to demographic background of patients and hospital characteristics.

Subjects and Methods: This cross-sectional study included a representative sample of inpatients in Prince Salman Armed Forces hospital, Tabuk, KSA from all main departments (medical, surgical, nephrology, orthopedic and obstetrics & gynecology departments). Arabic version of Newcastle Satisfaction with Nursing scale (NSNS) was used for data collection.

Results: Out of 420 patients invited to participate in the study, 414 filled in the questionnaires giving a response rate of 98.6%. The study included 414 admitted patients. Their age ranged between 18 and 74 with a mean of 38.5 (SD=14.2) years. Males represent 59.4% of them. 44.9% of patients reported below good, while 55.1% of them reported good experience of nursing care score. None of the participants reported above good (>80%) experience of nursing care score. The participants were mostly experienced with team work between Doctors and nurses and collaboration between nurses of different shifts. 73.9% of patients reported low (<60%) while 26.1% reported moderate satisfaction with nursing care score. None of the participants reported high (>80%) satisfaction with nursing care score. Male, higher educated patients, those admitted to obstetrics and gynecology and stayed for 2-3 weeks in hospitals were more likely to express higher experience of nursing care and satisfaction with nursing care scores.

Conclusions: Patient satisfaction with nursing care is generally low in the recent study. The findings provide nurses with information about aspects that enhance or hinder patient satisfaction.

Key words: Patient Satisfaction, Nursing Care, Quality of Health Care, Questionnaires, Saudi Arabia
Patient satisfaction is the patient's perception of care received compared with the care expected. (1) During hospitalization, patient satisfaction represents a balance between the patient’s perception and expectation of their nursing care. (2)

Quality of care is a system approach to health services, which emphasizes both technical competence as well as interpersonal dimension of “health care giving process”. Client’s/patient’s satisfaction is one of the two main components of quality of care which includes respect for the client/patient and understanding the needs of the client and providing services accordingly. (3)

Patient satisfaction has been used as an indicator of quality of services provided by health care personnel. The most important predictor of patient’s overall satisfaction with hospital care is particularly related to their satisfaction with nursing care. (4-5)

It is becoming increasingly recognized that patient’s views should be taken into account as a part of comprehensive assessment of quality of care. (6) Patients’ experiences in hospitals offer insights into areas that need improvement, and high nurse-staffing levels may be associated with better experiences for patients. (7)

Data about patient satisfaction equips nurses with useful information about the structure, process and outcome of nursing care such as adequacy of staffing, therapeutic needs and patient behaviors. (8-9) The number of patient satisfaction questionnaires has proliferated over the last decades as tools to measure health care from the patients’ perspective. (10-12)

One common target group has been patients admitted to a hospital, because admission can be a stressful and dissatisfying experience for many people and because of the high health care costs, than an admission to a health care system entails. (13) Patient satisfaction with nursing care is important for any health care agency because nurses comprise the majority of health care providers and they provide care for patients 24 hours a day. (14-15)

Methods

A cross-sectional study was conducted at Prince Salman Armed Forces hospital in Tabuk, KSA. The bed capacity in Prince Salman armed forced hospital is 402 beds providing primary, secondary and tertiary care. All inpatients in Prince Salman Armed Forces hospital, Tabuk, KSA were in all main departments (medical, surgical, nephrology, orthopedic and obstetrics & gynecology departments).

Sample size and sampling technique

Approximately 25,000 patients were admitted to the studied hospital per year. Assuming that the patient dissatisfaction represents 20% and by accepting an error of 4% the calculated sample size at 95% level of confidence was 377 using Epi info software. In order to compensate for drop out (non-respondent), a total of 420 patients was sufficient for the study by recruiting of all patients admitted at Tabuk armed force hospital during the period of 25th August till 25th September, 2013, provided that they are fulfilling the criteria of inclusion in the study, the required sample was achieved.

Study tool and procedure:

The Arabic version of Newcastle Satisfaction with Nursing scale (NSNS)(14) was used for data collection. The NSNS was selected for data collection for the current study because (i) it was found to be valid and reliable in previous studies conducted in both Western (13) and Arabic countries (Jordan) (15), (ii) it can detect differences in the level of satisfaction between wards in the same hospital and different hospitals, (16) and it addresses nursing care rather than other dimensions of the hospital experience. (17)

The questionnaire consists of three components:

1- Experience of nursing care: Patient’s experience of nursing care is defined as the cognitive judgment of several aspects of nursing. (18) Respondents rated their experience of nursing care on 26 items, using a five-point Likert scale (1= strongly disagree, 5= strongly agree).

2- Opinions of nursing care (satisfaction with nursing care): Patient satisfaction with nursing care is defined as the emotional reaction of the patient to several aspects of nursing care. (18) Respondents rated their satisfaction with various aspects of nursing care, using a five-point Likert scale (1= not at all satisfied, 5= completely satisfied). This section consisted of 19 items. The maximum scores for patients’ experiences and satisfaction were calculated out of 100. The scores were categorized into three levels: (i) a score less than 60% indicated “below good” level of experience or “low” level of satisfaction with nursing care; (ii) a score between 60-80% indicated “good” level of experience or "moderate" level of satisfaction with nursing care; and (iii) a score of more than 80% indicated an “above good” level of experience or “high” level of satisfaction with nursing care. (15)

3- Demographic information: This section includes gender, age, marital status, level of education, ward and length of stay in the hospital.

Results

Out of 420 patients invited to participate in the study, 414 filled in the questionnaires giving a response rate of 98.6%. The study included 414 admitted patients. Table 1 presents their demographic information. Their age ranged between 18 and 74 with a mean of 38.5 (SD=14.2) years. Most of them (79.8%) were aged 50 years or less. Males represent 59.4% of them. Almost half of them (48.6%) were married. More than a third of them (37.8%) were university graduated.
Table 1: Demographic information of admitted patients, Prince Salman Armed Forces hospital, Tabuk, KSA.

<table>
<thead>
<tr>
<th>Demographic information</th>
<th>Frequency N=414</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age (years)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>≤30</td>
<td>144</td>
<td>34.9</td>
</tr>
<tr>
<td>31-50</td>
<td>186</td>
<td>44.9</td>
</tr>
<tr>
<td>51-60</td>
<td>42</td>
<td>10.1</td>
</tr>
<tr>
<td>&gt;60</td>
<td>42</td>
<td>10.1</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>246</td>
<td>59.4</td>
</tr>
<tr>
<td>Female</td>
<td>168</td>
<td>40.6</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>123</td>
<td>29.7</td>
</tr>
<tr>
<td>Married</td>
<td>201</td>
<td>48.6</td>
</tr>
<tr>
<td>Divorced</td>
<td>60</td>
<td>14.5</td>
</tr>
<tr>
<td>Widowed</td>
<td>30</td>
<td>7.2</td>
</tr>
<tr>
<td><strong>Educational level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Illiterate</td>
<td>15</td>
<td>3.6</td>
</tr>
<tr>
<td>Primary</td>
<td>6</td>
<td>1.4</td>
</tr>
<tr>
<td>Intermediate</td>
<td>87</td>
<td>21.0</td>
</tr>
<tr>
<td>Secondary</td>
<td>150</td>
<td>36.2</td>
</tr>
<tr>
<td>University</td>
<td>156</td>
<td>37.8</td>
</tr>
</tbody>
</table>

Discussion

Insight into patients’ perceptions of nursing care will help nurses to understand better how to address these patients’ needs and expectations more appropriately. The study included 414 students with a response rate of 98.%. According to Rosnow and Rosenthal (1999), these techniques (e.g. personal contact, using reminders and explaining the scientific importance and value of the study, ensuring the participants confidentiality) are linked to increased participation in surveys.

Patients’ experiences of nursing care in the current study were generally good particularly in regards to aspects of continuity of nursing care. These findings are consistent with the findings of Ahman and Alasad (2004) and McColl et al (1996). Such results indicate the importance of collaboration and continuity of nursing care.

Participants of the present study had below good experiences with aspects of no time for nurses to sit and talk to them and nurses completely relying on doctors. Such finding are also consistent with the findings of Ahmas and Alasad (2004), McColl et al (1996) and Walsh and Walsh (1999). On the other hand, participants’ satisfaction with nursing care was generally low. The participants were mostly satisfied with aspects of nurses’ capability of their jobs, nurses’ helpfulness, nurses’ manner in going about their work and the amount nurses knew about patient care. These factors reflect the nurses’ competencies and skills, which mean that satisfaction of participants is mostly affected by the skills and competencies of nurses in performing their work. Such results are congruent with the findings of Alasad and Ahmad (2003).

The participants were also least satisfied with items such as “how nurses listened to patients’ worries and concerns” and “the amount of time nurses spent with patients”. These aspects indicate that the time that nurses spend with patients was not adequate, which might be attributed to heavy workload, inadequate staffing, performing non-nursing activities and the most important aspects are nursing shortage and language barriers. Such results inform nurses, nurse administrators and managers that despite cultural differences, the issue of spending inadequate time with patients and poor nursing autonomy seem to be common dissatisfactions among patients with different cultures. These finding are consistent with what has been reported in a Jordanian study conducted in 2009.
Male patients were more satisfied and had better experience of nursing care than female patients. Such a result is consistent with the findings of Ahmad and Alasad (2004). On the other hand, such a result is inconsistent with the findings of Alasad and Ahmad (2003), Easter et al (2003), Alhusban and Abualrub (2009) and Venn and Fone (2005).

The findings of the current study also indicated that patients with lower levels of education had lower levels of satisfaction and experience of nursing care. Such findings were inconsistent with findings of Alasad and Ahmad (2003), Barbara et al (1999) and Bodil (1999). These studies found that patients with higher levels of education had lower levels of satisfaction with nursing care. This could be attributed to language barriers that our patients are facing as the majority of nurses were Filipinos and illiterate patients are not able to contact with them properly. Other researchers indicated that patients’ educational level had no effect on their experience or satisfaction with nursing care. (15, 26-27)

The findings of this study revealed no significant influence of the variables of age, marital status, and length of stay on patient experience and satisfaction with nursing care, which is inconsistent with the findings of others. (25, 28, 29) On the other hand, it was consistent with findings of other researchers in Saudi Arabia (30) and Jordan. (15) Such inconsistent results in regard to the association between demographic variables of patients and the level of satisfaction call for further research that controls for other variables such as the demographic variables of nurses who provide care for those patients and other organizational variables such as nurses’ satisfaction.

When comparing departments of admission, the results showed that participants in obstetrics and gynecological department had higher level of experience and satisfaction with nursing care than participants in surgical department; such a result is consistent with the findings of many researchers. (20, 26, 30, 31) A possible explanation for this result might be because of the fact that the health status of gynecological patients is better than those in surgical departments. Usually, patients who are admitted to surgical departments are more sensitive to the quality of care they receive because of their reduced health status.

In the present study, experience of nursing care and satisfaction with nursing care were significantly associated despite them having different operational definition. Experience of nursing care was measured by 26 items (cognitive judgment); whereas, satisfaction with nursing care was measured by 19 different items (emotional judgment).

A limitation of the research is the sampling of this study as it included patients from one hospital that affects the ability to generalize the findings. In addition, the cross-sectional design of the survey makes it difficult to sort out the causal relationships among variables studied.

**Conclusion**

Identifying the level of patients’ satisfaction with nursing care is a good indicator for the quality of nursing care services. The findings of the present study provide nurses with information about aspects that enhance or hinder patient satisfaction.

Patient satisfaction with nursing care is generally low. Female, lower educated and those admitted to the surgical department experienced lower level of satisfaction with nursing care.

The findings of this study provide a framework for both nurse managers and unit nurse managers to seriously think when planning for steps to take towards implementing patient centered health care.

**References**