



Original Article

Patients Satisfaction Towards Quality of Nursing Care at a Public Sector Tertiary Care Hospital Karachi

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ABSTRACT

Care is seen as a significant element of health amenities. The most anticipated health outcomes are achieved by providing treatments that are effective, efficient, and cost-effective. **Objective:** To assess the level of patient's satisfaction towards the quality of nursing care at a public sector tertiary care hospital in Karachi. **Methods:** This cross-sectional study was accompanied by 312 patients admitted to public sector hospital. Non-probability purposive sampling technique was used for data collection. Those patients who have been admitted for more than three days in various departments. Data were collected after approval Institutional Review Committee (IRC) of the Dow Institute of Nursing and Midwifery (DIONAM) and the Ethical Review Committee (ERC) of the National Institute of Cardiovascular Disease (NICVD). Data were analyzed on SPSS-version 25.0. Frequency and percentage were measured from categorical data. An Independent t-test was run to find out the relationship of patient's satisfaction and with demographic characteristics of the study participants. Written informed consent was obtained from all participants. **Results:** The findings highlighted that the majority (55%) of the study participants were male and 79% were married. Furthermore, the highest satisfaction level (90.7) was found in the domain of nurse's communication, and the lowest level of satisfaction score 81.8% found in the discharge domain. Moreover, the overall patient's satisfaction score of all domains was 93.3%. **Conclusions:** The findings of this study concluded that the majority of the admitted patients strongly agreed with the quality of nursing care. Furthermore, the nurse's communication domain showed a higher level of satisfaction among all domains.

INTRODUCTION

Quality is defined as a complex construction of values, beliefs, and attitudes among people who engage with the healthcare sector. Care is also seen as a significant element of health services [1]. In other words, service quality is the capacity of the service to meet the declared demands and the amount to which the service beneficiary's expectations are realized [2]. The most desirable health outcomes are achieved by providing treatments that are efficient, effective, and cost-effective [3]. The utmost primary responsibility of health care organizations such as hospitals is to deliver excellent amenities that fulfill the expectations of patients. To do this, the quality mindset

should first be institutionalized inside hospital environments, notably in nursing services [4]. This can shorten hospital stays and increase patient satisfaction [5]. Furthermore, higher service quality correlates to a decline in healthcare expenses [6]. As a result, given that a considerable section of a population would often be appropriate to take hospital care at certain milestones of life, nurses must provide excellent services [7]. Nurses are the chief group of health-care professional workers, and they constitute the cornerstone of the process of improving the delivery of quality care to people in need. As a result, their effectiveness is critical in achieving

organizational goals [8]. As this occupational group's professional competence is crucial in completing the goal of the health system, the degree of their professional proficiency and care is amongst the major primary issues for healthcare sectors and healthcare workers in many nations [9]. Because patients have the most often regular interaction with nurses, more or less experts accredit the acceptance of the given facilities only to nurses, and the important involvement of other dealing groups is usually disregarded [10]. Every patient has the right to have first-class care, and all compassionate nurses are responsible for achieving this aim. Nursing care and quality have an impact on hospital accreditation and rating in most countries [11]. Furthermore, nurses must be held ethically and legally held responsible for the quality of care provided in healthcare organizations [12]. The quality of nursing care is defined as the response of the nurses to patients' emotional, physical, psychological, social, and spiritual requirements, allowing them to recover to their healthy and regular routine lives while also satisfying nurses and patients [13]. A study finding evident that good nursing care allows access to psychological, physical, and social care from the patients' perspective [14]. It is commonly acknowledged that nursing care can help patients heal faster and return home [10]. Low-quality care, on the other hand, results in worse symptoms, nosocomial infections, and dysfunction of psychological functions such as depression and anxiety [15].

The goal of this study is not only to identify the degree of patient satisfaction with quality nursing service but also to determine the relationship of demographic variables in public sector tertiary care hospitals.

METHODS

This cross-sectional study design was accompanied from NICVD. Data were collected from 25 March 2021 to 24 May 2021 from various departments of the hospital. Those patients who were admitted for more than three days and are more than 18 years of age. Patients who were not willing to participate and the language barrier of Urdu were excluded from the study. The sampling technique for this study was a non-probability purposive sampling technique. The sample size was calculated through Open-Epi software with a confidence interval of 95% and a margin of error of 5%. The sample size was 312 using the frequency of 28.2% of patient's satisfaction from the previous study [16]. Data were collected through a questionnaire form consisting of two parts. The first part was about the demographic characteristics of the study participants and the second part related to a well-structured closed-ended validated Likert scale consisting of five points ranging from 0= strongly disagree, 1=disagree, 2= neutral, 3= agree and 4= strongly agree. The questionnaire was adapted from

previous published study, where author used 32 items scale with six domains [17]. In this present study, principal investigator used 28 items with five domains including nurse's communication, nurse's professionalism, role administration, nursing teaching, and discharge process with 6, 6, 8, 3, and 5 items respectively. The questionnaire was converted from English to Urdu and back to English with the help of language experts. Minimum score for each item "0" and maximum score of "4". Data were analyzed on SPSS version 25.0. Frequencies and percentages were measured for categorical data. An Independent t-test was run to find out the association of demographic characteristics with patients in all five domains. IRC approval was obtained from DIONAM and also from ERC of NICVD (Dated; March 24, 2021 and ref#: ERC-42/2021). Permission was taken from the head of the department and informed written consent was taken from all participants.

RESULTS

The findings of table 1 highlighted that the majority (55%) of the study participants were male and 79% were married. Furthermore, 72% of the study participants were more than 30 years of age, and 72.6% of participants had earnings of up to 30000 PKRs per month. On comparison of the association of demographic variables with patient satisfaction, it was found that variables including gender and marital status were significantly associated with patient's satisfaction with p-value 0.014 and 0.001 respectively. While monthly income and age were not significantly associated with p-value of 0.993 and 0.215.

Table 1: Association of demographic variables with patient satisfaction

Characteristics	Categories	Frequency (%)	Mean ± SD	P-Value
Gender	Male	172 (55)	103.82 ± 8.76	0.014*
	Female	140 (45)	101.88 ± 11.73	
Age	18- 30 years	86 (28)	103.04 ± 8.98	0.993
	Above 30 Years	226 (72)	102.85 ± 10.76	
Marital Status	Married	246 (79)	103.30 ± 8.70	0.001*
	Unmarried	66 (21)	101.56 ± 14.70	
Monthly Income (PKRs)	Up to 30000	243 (77.6)	103.51 ± 10.01	0.215
	>30000	70 (22.4)	100.97 ± 10.80	

The findings of this study highlighted in the table-2 that the highest satisfaction level (90.7) was found in the domain of nurses' communication and the lowest level of satisfaction score 81.8% found in the discharge domain. Moreover, the overall patient's satisfaction score of all domains was 93.3% (Table 2).

Table 2: Domains wise patients satisfaction level

Domains	Strongly Disagree (%)	Disagree (%)	Neutral (%)	Agree (%)	Strongly Agree (%)
Nurse's professionalism	0	0.3	0.9	9.9	88.8
Nurses Communication	0	0	0.9	8.3	90.7
Nursing Teaching	0	0.3	0.6	8.9	90.1
Role in Admission	0	0.3	4.5	12.4	82.7
Discharge Process	0	0	1.6	16.3	81.8
Overall	0	0.3	0.6	5.8	93.3

This study evident in table 3 that highest frequency of mean score (10.97) in comparison to maximum score in each domain was found in the domain of Role in admission. While, the lowest score of the mean (29.11) was observed in the Nursing teaching domain.

Table 3: Domains wise Mean and SD score of patient's satisfaction

Domains	Mean + SD	Minimum	Maximum
Nurse's professionalism	22.61 + 2.86	0	24
Nurses Communication	22.83 + 2.26	9	24
Nursing Teaching	29.11 + 3.06	6	32
Role in Admission	10.97 + 1.81	0	12
Discharge Process	17.41 + 2.18	6	20
Overall	102.95 + 10.23	21	112

DISCUSSION

Nurses are providing care to patients on continues basis. The value and demand of nursing care and awareness is increasing with time. It is very crucial to find the satisfaction level of patients with the care received from nurses. The purpose of this study was to find the satisfaction level of patients with quality nursing care and its association with the demographic features of the study participants. The findings of the current study highlighted that most study participants were male. A similar category of participants was observed in the study conducted in Ghana in 2021, where approximately 2/3 most of the participants were male [18]. Another study conducted in Turkey (2018) showed a higher frequency of male patients [19]. In contrast, a study conducted in Malawi showed a higher frequency of the participants were female [20]. In addition, a study conducted in Ethiopia (2018) showed approximately a similar number of participants in both categories [21]. This study's results show that the highest age group of admitted patients was more than 30 years. These findings were supported by the study conducted in Sri Lanka (2023), where most of the participants were above the age of 60 years [22]. In addition, a study conducted in Iran showed that 86% of the participants were above the age of 30 years [23]. This evidence showed that the admission rate is higher after the age of 30 years, which could be lowering the defense mechanism of the body with time. This study revealed that more than ¾ of the study participants strongly agreed with the nursing care

quality that was provided to them. In contrast, studies conducted in Ghana (2021) [18], Nigeria (2021) [24], Sri Lanka (2023) [22], and Ethiopia (2019) [25] evident low levels of patient's satisfaction with nursing care.

Another important observation highlighted by this study is that most of the study participants (79%) were married. These findings were in support by the study conducted in Ethiopia (2023) observed majority of their admitted patients were married [26]. Study conducted in Saudia Arabia (2022)[27] also highlighted that highest number of the participants were married. One another study conducted in Turkey observed that 88% of their participants were married [19]. Current study also evident that there was a significant association of gender with patient's satisfaction. The parallel result was identified by the study conducted in Ethiopia (2023) and Malawi (2022) highlighted that gender categories have a significant impact on patient's satisfaction [20,26]. Contradictory findings were observed in the study conducted in Ethiopia (2018) [20] and Turkey (2019) [28]. Furthermore, marital status also showed a significant association with patients' satisfaction. A similar result was found in the study conducted in Iran (2019)[23] and Turkey (2019)[28], where marital status has a significant impact on patient satisfaction. Opposite findings were evident in the studies conducted in Iran (2019) [29] and Ethiopia (2023) evident that marital status has no association with patient's satisfaction [26]. The findings of this study revealed that age and monthly income were not showing a significance association with patients' satisfaction. Similar results were shown in the study conducted in Ethiopia (2018) [28]. Contradictory findings were noticed in the study held in Saudi Arabia (2022)[27] and Turkey (2019)[28] showed that age variable is significantly associated with patient satisfaction level. The findings of this study observed that most of the participants were earning up to 30000 PKRs per month. In contrast, a study conducted in Iran (2019)[30] showed that participants had higher income per month. Another study is also conducted in Iran having similar findings that higher income per month [19].

CONCLUSIONS

Findings of this study concluded that most of the admitted patients were strongly agree with the quality of nursing care. Furthermore, the nurse's communication domain showed a higher level of satisfaction among all domains.

Authors Contribution

Conceptualization: TA

Methodology: TA

Formal analysis: AA¹

Writing-review and editing: TA, AA², SN

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

The authors declare no conflict of interest.

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REFERENCES

- [1] Androniceanu A, Sabie OM, Pegulescu A. An integrated approach of the human resources motivation and the quality of health services. *Theoretical and Empirical Researches in Urban Management*. 2020 Feb; 15(1): 42-53.
- [2] Barati O, Najibi M, Yusefi AR, Dehghan H, Delavari S. Outsourcing in Shiraz University of Medical Sciences; a before and after study. *Journal of the Egyptian Public Health Association*. 2019 Dec; 94: 1-8. doi: 10.1186/s42506-019-0010-0.
- [3] Ryu JI and Kim K. The influence of nursing care integration services on nurses' work satisfaction and quality of nursing care. *Journal of Nursing Management*. 2018 Nov; 26(8): 1024-32. doi: 10.1111/jonm.12629.
- [4] Nadi A, Shojaee J, Abedi G, Siamian H, Abedini E, Rostami F. Patients' expectations and perceptions of service quality in the selected hospitals. *Medical Archives*. 2016 Apr; 70(2): 135. doi: 10.5455/medarh.2016.70.135-139.
- [5] Bowers J and Cheyne H. Reducing the length of postnatal hospital stay: implications for cost and quality of care. *BMC Health Services Research*. 2015 Dec; 16(1): 1-2. doi: 10.1186/s12913-015-1214-4.
- [6] Vanholder R, Annemans L, Brown E, Gansevoort R, Gout-Zwart JJ, Lameire N et al. Reducing the costs of chronic kidney disease while delivering quality health care: a call to action. *Nature Reviews Nephrology*. 2017 Jul; 13(7): 393-409. doi: 10.1038/nrneph.2017.63.
- [7] Nugraheni R and Kirana GR. The analysis quality of service and patient satisfaction participants of health BPJS in interior services in hospital X of Kediri City. *Journal of Global Research in Public Health*. 2018 Mar; 3(1): 9-17.
- [8] Armstrong G. Quality and safety education for nurses teamwork and collaboration competency: Empowering nurses. *The Journal of Continuing Education in Nursing*. 2019 Jun; 50(6): 252-5. doi: 10.3928/00220124-20190516-04.
- [9] Lee MJ, Yoon SH, Cho YC. Relationship between psychosocial factors, job stress contents, fatigue symptoms and quality of nursing services among general hospital nurses. *Journal of the Korea Academia-Industrial cooperation Society*. 2016; 17(8): 569-81. doi: 10.5762/KAIS.2016.17.8.569.
- [10] Nikmanesh P, Mohammadzadeh B, Nobakht S, Yusefi AR. Nurses communication skills training and its effect on patients' satisfaction in teaching hospitals of Shiraz University of Medical Sciences. *Iranian Journal of Health Sciences*. 2018 Dec; 6(4): 22-9. doi: 10.18502/jhs.v6i4.201.
- [11] Nomura AT, Pruinelli L, Da Silva MB, de Fátima Lucena A, de Abreu Almeida M. Quality of electronic nursing records: the impact of educational interventions during a hospital accreditation process. *CIN: Computers, Informatics, Nursing*. 2018 Mar; 36(3): 127-32. doi: 10.1097/CIN.0000000000000390.
- [12] Bayraktar AK and Sivrikaya SK. Nursing Ethics in the Emergency Department/Acil Servis Hemsirelik Hizmetlerinde Etik. *Journal of Education and Research in Nursing*. 2018 Jan; 15(1): 57-63.
- [13] Karaca A, Durna Z. Patient satisfaction with the quality of nursing care. *Nursing open*. 2019 Apr; 6(2): 535-45. doi: 10.1002/nop2.237.
- [14] Nantsupawat A, Nantsupawat R, Kunaviktikul W, Turale S, Poghosyan L. Nurse burnout, nurse-reported quality of care, and patient outcomes in Thai hospitals. *Journal of Nursing Scholarship*. 2016 Jan; 48(1): 83-90. doi: 10.1111/jnu.12187.
- [15] Bakhteari Z, Hanifi N, Amini K, Jafari Varjoshani N. Quality of Nursing Services in Dialysis Center of Valiasr Hospital in Zanjan from Nurses and Patients' Viewpoint Using the SERVQUAL Model. *Iran Journal of Nursing*. 2018 Aug; 31(113): 18-29. doi: 10.29252/ijn.31.113.18.
- [16] Buchanan J, Dawkins P, Lindo JL. Satisfaction with nursing care in the emergency department of an urban hospital in the developing world: A pilot study. *International Emergency Nursing*. 2015 Jul; 23(3): 218-24. doi: 10.1016/j.ienj.2015.01.001.
- [17] Atallah MA, Hamdan-Mansour AM, Al-Sayed MM, Aboshaiqah AE. Patients' satisfaction with the quality of nursing care provided: The Saudi experience. *International Journal of Nursing Practice*. 2013 Dec; 19(6): 584-90. doi: 10.1111/ijn.12102.
- [18] Fuseini AG, Bayi R, Alhassan A, Atomlana JA. Satisfaction with the quality of nursing care among older adults during acute hospitalization in Ghana. *Nursing Open*. 2022 Mar; 9(2): 1286-93. doi: 10.1002/nop2.1169.
- [19] Kol E, Arıkan F, İlaslan E, Akıncı MA, Kocak MC. A quality indicator for the evaluation of nursing care: determination of patient satisfaction and related factors at a university hospital in the Mediterranean

- Region in Turkey. *Collegian*. 2018 Feb; 25(1): 51-6. doi: 10.1016/j.colegn.2017.03.006.
- [20] Sinyiza FW, Kaseka PU, Chisale MR, Chibatata CS, Mbakaya BC, Kamudumuli PS *et al*. Patient satisfaction with health care at a tertiary hospital in Northern Malawi: results from a triangulated cross-sectional study. *BMC Health Services Research*. 2022 Dec; 22(1): 1-9. doi: 10.1186/s12913-022-08087-y.
- [21] Sharew NT, Bizuneh HT, Assefa HK, Habtewold TD. Investigating admitted patients' satisfaction with nursing care at Debre Berhan Referral Hospital in Ethiopia: a cross-sectional study. *BMJ Open*. 2018;8(5). doi: 10.1136/bmjopen-2017-021107.
- [22] Thanabalasingam SJ, Ranawaka SS, Gunarathna SS, Yathev B, Booth CM, Seneviratne S *et al*. Patient Satisfaction With Breast Cancer Care Delivery at the National Cancer Institute of Sri Lanka: Does Language Play a Role?. *JCO Global Oncology*. 2023 Feb; 9: e2200366. doi: 10.1200/GO.22.00366.
- [23] Rajabpour S, Rayyani M, Mangolian shahrbabaki P. The relationship between Iranian patients' perception of holistic care and satisfaction with nursing care. *BMC nursing*. 2019 Dec; 18: 1-7. doi: 10.1186/s12912-019-0374-7.
- [24] Adumaza FB and Popoola RO. Assessment of The Determinants of Patients' Satisfaction with Nursing Care Received in Selected General Hospitals in Ondo State, Nigeria. *International Journal*. 2021 Apr; 2(2): 25-39. doi: 10.5281/zenodo.4744649.
- [25] Kasa AS, Gedamu H. Predictors of adult patient satisfaction with nursing care in public hospitals of Amhara region, Northwest Ethiopia. *BMC health services research*. 2019 Dec; 19: 1-9. doi: 10.1186/s12913-019-3898-3.
- [26] Sabo KG, Mare KU, Berhe H, Berhe H. Factors affecting satisfaction with inpatient services among adult patients admitted to Arba Minch General Hospital, Southern Ethiopia: a mixed method study. *Health Services Insights*. 2023 Apr; 16: 11786329231166513. doi: 10.1177/11786329231166513.
- [27] Alhowaymel F, Abaoud A, Alhuwaimel A, Alenezi A, Alsayed N. COVID-19 patients' satisfaction levels with nursing care: a cross-sectional study. *SAGE open nursing*. 2022 Feb; 8: 23779608221078163. doi: 10.1177/23779608221078163.
- [28] Alasad J, Tabar NA, AbuRuz ME. Patient satisfaction with nursing care. *The Journal of Nursing Administration*. 2015 Nov; 45(11): 563-8. doi: 10.1097/NNA.0000000000000264.
- [29] Lotfi M, Zamanzadeh V, Valizadeh L, Khajehgoodari M. Assessment of nurse-patient communication and patient satisfaction from nursing care. *Nursing open*. 2019 Jul; 6(3): 1189-96. doi: 10.1002/nop2.316.
- [30] Mousavi M, Adib-Hajibagheri M, Azizi-Fini I, Izadi-Avanji FS. The satisfaction of ischemic heart disease patients with nursing care in emergency department. *Journal of Client-Centered Nursing Care*. 2019 Aug; 5(3): 203-10. doi: 10.32598/JCCNC.5.3.203.