

A GROUP OF PATIENTS' PERCEPTIONS OF SATISFACTION ON NURSING CARE

BİR GRUP HASTANIN HEMŞİRELİK BAKIMI ALGISI

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ÖZET

Amaç: Bu çalışma hastanede yatan hastaların hemşirelik bakımı algısını, dolayısıyla memnuniyetlerini saptamak amacıyla yapılmıştır.

Yöntem: Evrenin tümü araştırmanın kapsamına alınmıştır (N=167). Çalışmada kullanılan veri formu iki bölümden oluşmaktadır. Formun birinci bölümü literatür kaynaklı olarak araştırmacılar tarafından oluşturulan ve tanımlayıcı özelliklere yönelik olan 11 soruyu içermektedir. Formun ikinci bölümünün verileri "Hastanın Hemşirelik Bakımını Algılayışı Ölçeği" ile toplanmıştır. Veriler bilgisayarda istatistik paket programı kullanılarak frekans, t testi, Mann Whitney U testi ve Kruskal Wallis testleri ile değerlendirilmiştir.

Bulgular: Hastaların HHBAÖ'den ortalama 64.46 puan aldıkları ve puanlarının yüksek olduğu saptanmıştır. Bu algının hastaların yaşı, cinsiyeti ve daha önce hastaneye yatma deneyimi gibi değişkenler açısından istatistiksel olarak farklı olduğu ancak, medeni durum, öğrenim durumu, meslek, hastanede kalış süresi, refakatçi bulundurma durumu gibi değişkenler açısından ise farklılık oluşturmadığı görülmüştür.

Sonuç: Hastaların memnuniyet düzeyini yükseltmek için, ilgili konuların hemşirelerle tartışılmasının ve hemşirelerin bilgi ve becerilerinin geliştirilmesine yönelik hizmet içi eğitim programlarının planlanmasının yararlı olacağı düşünülmüştür.

Anahtar kelimeler: Hasta, hemşirelik, hemşirelik bakımı algısı

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ABSTRACT

Objective: This study has been done to find out patients' perceptions of nursing care and thereby their satisfaction.

Method: The scope of this study is included 167 people. Data form used in this research composes of two parts. First part includes 11 questions that are composed by researchers as being literature welded and that aimed at patients' specifications. The data from the second part of the research is collected through "Patients' Perception of Nursing Scale" (PPNS). Data has been evaluated through using statical packet programme, frequency, t test, Mann Whitney U test and Kruskal Wallis tests.

Results: The patients get approximately 64.46 and their scores received from PPNS are high. The perception is statistically different in terms of some variables such as patients' age, gender, and their hospitalization experience but is not different in terms of some variables as patients' marital status, their background, occupation, duration of hospital stay, and state of having a hospital attendant.

Conclusions: In order to increase patients' satisfaction, it is thought that discussing related subject with nurses and planning an in-service-training to improve nurse's skills will be beneficial.

Keywords: Patient, nursing, perception of nursing care.

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INTRODUCTION

In health services, patient's shift from passive role into an active role began in late 1960's. Technological developments in those years led to crucial changes in health systems. With the increase of education level in some societies, more sophisticated customers who can criticize the service given have begun to emerge. But today, patients would like to attend their self health care and decision-making process and would like to understand their diagnosis. Thus, the quality of health care service is only seen as an extended that health team define and detect (1). It is stated that the patient's perception about service quality affects not only in their own decisions but also in the decisions of others around them; furthermore, their friends' and relatives' suggestions are getting more efficient in choosing which hospital to go (2). The patient decides as a result of comparison between the quality he/she gets and the quality he/she expects (3).

According to the definition of International Organization for Standardization (ISO), quality is the collection of features depending on a product or a service's requirements (4). On the other hand, quality in health services can be defined not only as diagnosis, treatment and care services that are appropriate for international standards but also as meeting the patient's needs and expectations in the process of services (3,5,6).

Today, two main approaches are being followed for evaluating the quality of health services. First one is evaluation and control method by determining health standards and measuring these standards in terms of health care. This method can work mechanically well, yet it is not efficient for evaluating treatment's influence on patient. For warranty of quality, the other method is the method of watching patient's satisfaction (1,3,4). Patient's satisfaction is based on the services level of meeting the requirements or is based on the patient's

perception about the service given. This perception is important in the sense of being a significative choice of healthcare organization, being a provider of organization, being the main condition of patient's compliance, being the basic outcome of health services and also being the indicator of quality (7,8). Satisfaction degree is a concrete indicator when evaluating services's influence on patient. In the literature, it is stated that the patient who is pleased will attend willingly, will be open to cooperation, and will be positive during recovery period (1,9,10).

In health services, patient's satisfaction was first evaluated in nursing field in America in 1956 (11). Nursing service which emerged from the needs of societies and which were given to individuals, to families and thereby to societies is an essential part in healthcare services all over the world because of its functions (12). Nurses who constitute of the biggest group of health care personnels are a occupational group that decides patient's requirements, plans and applies the care, evaluates the deficiencies and also stays with patient during 24 hours (6,7,11,13,14).

Undoubtedly, the most important responsibility of a nurse is to take care of the patients through their personel, scientific and technical needs. In the same vein, nursing profession is significant in presenting care in accordance with quality assurance (15-17). During the period that patients stay in hospital, patient's satisfaction with nursing service is a factor that also affects patient's satisfaction with all other health services (6). Studies show that there is a positive relationship between satisfaction of a patient about nursing service and the satisfaction of all other services in hospital (6,18).

Knowing patient's ideas about nursing service is important in order to help to those patients who are treated in hospital and to increase the quality of healthcare. Observing the quality perceived by patients and the results obtained will be

influential in increasing the quality of nursing services by enabling to arrange necessary adjustments. The aim of this study is to determine patient's perception from nursing service and so from their satisfaction.

MATERIAL AND METHODS

Research Type

The study type is descriptive/cross sectional.

Population and Sampling of Research

This study is carried out in all field Of Gümüşhane Public Hospital except emergency, pediatry, intensive care unit and policlinics. The Hospital where this study is carried out has a capacity of 208 beds and 135 serving nurses. It also treats almost 1000 patients each year. The scope of this research constitutes of all patients (167) who stayed in hospital from 1th to 8th May. Research was carried out between these dates that those who voluntary agree to participate in research. All these patients are included. This research includes the patients who are over 18, who are literate and who voluntarily attend the study (Response rate is 85.2%).

Data Collection

The data was collected with the questionnaire form. This form consists of two parts. First part includes 11 questions that are composed by researchers as being literature welded and that aimed at patients' specifications (Patient's age, gender, marital status, educational background, occupation, income state, previous hospitalisation state, previous duration of hospital stay, whether having a chronic disease or not, having a hospital attendant or not, and the duration of hospital attendant's stay).

The data of the second part of the study is gathered through Patient's Perception of Nursing Scale (PPNS) which was

developed in America in 2001 by Ann M. Dozier and her friends and, whose validity and reliability were studied by İpek-Çoban and Kaşıkçı in 2006 in Turkey (19). The scale has been developed in order to measure patients' perception on nursing care and so their satisfactory level. The scale has been organised as having the criterions that reflect the prospective needs, that measure patient's satisfaction, that measure safely after a short maintenance, and also that are affected by socio-demographic, personal and other factors at the minimum level. Cronbach's Alpha reliability coefficient of the scale is 0.92. Item and total item correlation coefficients are between 0.36 and 0.74. Test-retest correlation is 0.90. There are no sub-scales in PPNS.

There are 15 statements; people are asked to mark these following responses: I totally agree=5, I agree=4, I'm neutral=3, I don't agree=2, I totally don't agree=1 and no response=0. Each response has its own score. Thus, one can get 15 scores at least and 75 scores at the highest. Scores of the PPNS scale and the patient satisfaction have a positive correlation (19). Independent variables are patient's diagnostic features. Data has been evaluated through using statistical package program, frequency, t test, Mann Whitney U test and Kruskal Wallis tests.

The Ethical Dimension of Research

To carry out the research, permission is obtained from Local Health Authority. Data was collected by filling in the questionnaire form after the aim and scope of research were explained to those who were going to be discharged from hospital.

RESULTS

The scope of research includes 56.3% women, 43.7% men. Of all, there are 69.5% married and 28.7% literate. Only the 3.7% is stated to have higher income than their expenses 52.1% of the patients previously stayed in the hospital (Table 1).

Of those who stayed in hospital, only 26.8% stayed less than 7 days and others stayed more than 7 days. 32.9% of the participants have chronic disease and 65.9% of these have a hospital attendant with them. 62.4% of hospital attendants con-

stantly stay with their patients. Diagnostic features of patients are shown on Table 1.

The lowest score is 29 and the highest score is 75 that patients got from PPNS and the average is 64.46 ± 10.28 (Table 2).

Table 1. Range of patients according to their specifications

Characteristics	Number	%
Gender (n=167)		
Female	94	56.3
Male	73	43.7
Age (n=167)		
20-39	40	24.0
40-59	65	38.9
60 and over	62	37.1
Marital status (n=167)		
Married	116	69.5
Single	15	9.0
Widow	36	21.5
Educational background (n=164)		
Literate	47	28.7
Primary School Graduate	56	34.1
Secondary School Graduate	20	12.2
High School Graduate	30	18.3
University Graduate	11	6.7
Occupation (n=167)		
Housewife	74	44.3
Worker	17	10.2
Civil - servant	16	9.6
Farmer	28	16.8
Self-employed	16	9.6
Unemployed	3	1.8
Other	13	7.7
Income status (n=162)		
Less than expenses	73	45.1
Equal to expenses	83	51.2
Higher than expenses	6	3.7
State of hospitalization (n=167)		
Hospitalized	86	52.1
Not hospitalized	79	47.9
Duration of hospitalization(n=71)		
Less than 1 week	19	26.8
From 8 to 30 days	25	35.2
From 1 to 3 months	22	31.0
More than 6 months	5	7.0
State of having a chronic disease or not (n=167)		
Yes	50	32.9
No	102	67.1
State of having a hospital attendant (n=167)		
Yes	110	65.9
No	57	34.1
Duration of hospital attendant's stay (n=109)		
Stay constantly	68	62.4
Stay at some specific hours	41	37.6

Table 2. The patients' PPNS score.

Scale	Mean±SD	Min	Max
PPNS	64.46±10.28	29	75

Comparisons are also made between PPNS and some specifications of patients. Accordingly, a significant difference between PPNS scores and patient's gender, age, and previous hospitalisation state is statistically found. On the other hand, there is not a difference between PPNS scores and such features as patient's marital status, educational background, occupation, income status, duration of hospital stay and so on Table 3. In the comparison between age and patient's satisfaction with nursing care services, it is shown

that the older the patient is the more satisfied he/she is (Table 3). On the other hand, regarding patient's marital status, no statistical difference was found among the groups as a result of analysis done according to satisfaction level average. But satisfaction average of married patients is higher than those single or widow patients (Table 3). Besides, it is ascertained that there is not a significant difference between patient's education level and their satisfaction scores (Table 3).

Table 3. Comparison of patients' scores received from PPNS according to their specifications.

Characteristics	n	PPNS Mean±SD	Statistical Analysis
Gender (n=167)			
Female	94	65.63±1.04	z=2772.50 P<0.05
Male	73	62.94±1.20	
Age (n=167)			
20-39	40	63.32±1.35	KW=5.94 sd=2 p<0.05
40-59	65	63.40±1.38	
60 ve üzeri	62	66.30±1.30	
Marital status (n=167)			
Married	116	65.46± 0.86	KW=3.25 sd=2 p>0.05
Single	15	64.06± 2.74	
Widow	36	61.38± 2.10	
Educational background (n=164)			
Literate	47	65.04± 1.81	KW=11.35 sd=4 p>0.05
Primary School Graduate	56	66.46± 1.23	
Secondary School Graduate	20	62.55± 1.98	
High School Graduate	30	61.90± 1.70	
University Graduate	11	60.63± 2.83	
Occupation (n=167)			
Housewife	74	67.50± 1.01	KW=18.46 sd=6 p>0.05
Worker	17	63.52± 2.59	
Civil - servant	16	56.68± 3.24	
Farmer	28	64.82± 1.73	
Self-employed	16	62.93± 2.80	
Unemployed	3	62.66± 4.66	
Other	13	59.46± 2.88	
Income status (n=162)			

Less than expenses	73	64.20± 1.25	KW=0.15 sd=2 p>0.05
Equal to expenses	83	64.40± 1.04	
Higher than expenses	6	61.16± 6.82	
State of hospitalization (n=165)			
Hospitalized	86	66.58± 1.06	z =2311.00 P<0.000
Not hospitalized	79	61.91± 1.15	
Duration of hospitalization (n=71)			
Less than 1 week	19	66.63± 1.86	KW=2.99 sd=3 p>0.05
From 8 to 30 days	25	67.92± 1.92	
From 1 to 3 months	22	63.36± 2.52	
More than 6 months	5	69.60± 3.17	
State of having a chronic disease or not (n=152)			
Yes	50	65.70± 1.05	z =2307.00 p>0.05
No	102	62.76± 1.13	
State of having a hospital attendant (n=167)			
Yes	110	65.10± 0.92	z =2913.50 p>0.05
No	57	63.21± 1.49	
Duration of hospital attendant's stay (n=109)			
Stay constantly	68	65.73± 1.12	z=1319.50 p>0.05
Stay at some spesific hours	41	64.36± 1.62	

Eventually, the state of having a hospital attendant and satisfaction with nursing care services are analysed and it is found that patient's satisfaction level doesn't differ whether they have a hospital attendant or not. Because the hospital attendants meet most of the requirements of patients, these patients expectancy from nursing care services decreases, and as a result, it is thought that it has no effect on the perception of nursing care.

DISCUSSION

This study show that the lowest score is 29 and the highest score is 75 that patients got from PPNS and the average is 64.46±10.28 (Table 2). From those studies carried out in our country, it is indicated that patients are satisfied with nursing services (6,19,20). Within the studies on patient's satisfaction, it is seen that various results have been found due to the difference in working places and in participants who joined the group and in methods being used. It is stated that patient satisfaction has correlation with the physical conditions of the place, the attending behaviour of the hospital personel, and the patients' socio-demographic and economic characteristics. Thus, patient's previous experi-

ences, expectancy, age, gender, education level, social status, health status, diagnosis, patient's self perception all have an effect on patient satisfaction (7).

In this study, it is stated that the difference between patients gender and their satisfaction with nursing care is statistically meaningful and women's satisfaction level is higher than men's (Table 3). In some other studies, as our findings show women are more satisfied with nursing services than men (6,14). But in some other studies, a statistical difference couldn't be found as a result of comparison between patient's gender and their satisfaction with nursing care (3,7,10,15,18-26).

This study shows that the older the patient is the more satisfied he/she is (Table 3). Also, in the literature such results are shown about patients satisfaction and furthermore, it is expressed that not only old patient's sympathy and tolerance, their value on communication and their contentment with dialogues with nurses; but also the respect of doctors' and nurses' to old patients have a role in this situation (7,14,23,25,26). On the other side, it is claimed that with these results, young people have a role as having consumer awareness and old people have a role as having traditional action.

In this study, regarding patient's marital status, no statistical difference was found among the groups as a result of analysis done according to satisfaction level average. But satisfaction average of married patients is higher than those single or widow patients (Table 3). Similarly, although there is not a statistical difference between marital status and satisfaction with nursing care according to İçyeroğlu (6), İpek-Çoban (19), there is a significant difference in these according to Özer and friends (10). In this case, it is expressed that social support that a married patient get from his/her spouse or children reduce patient's care requirements and thereby their expectation level.

It is ascertained that there is not a significant difference between patient's education level and their satisfaction scores (Table 3). However, there are such studies reporting that the higher a level of education is, the lower the satisfaction score is (3,10,14,15,19,26) there are also such studies that show no significant difference between the level of education and the level of satisfaction (6,7,21,24,25). In literature, the cause of this difference can be explained by studying through different methods on patient who have different cultures and who live in different regions.

This study shown that housewives' average scores are higher than other occupation groups (Table 3). In the studies of

İçyeroğlu (6), it is shown that there is no relationship between occupation and satisfaction levels. Hence this satisfaction level is influenced by age, education level, gender, occupation, experience and also psycho-social factors and treatment methods, cultural factors, primer nursing care and patient's perception about nursing care service (25). Besides, satisfaction is a concept that is related to experience, lifestyle, personal and social values and service expectancy all of which are relative (26). The researches carried out for determining patients satisfaction level indicate that there are different results about the influence of income status on patient satisfaction (3,6,19). It is also shown that the satisfaction average of patients who previously stayed in hospital is higher than the satisfaction average average of those who didn't stay in hospital and this difference is statistically significant. In Hacıhasanoğlu's study (14), it is seen that the satisfaction level is high for the patient who has a hospital experience. In Demir and his friends' study (7), there is no significant relation between patient's satisfaction and hospital experience. Meeting patients' requirements is a critical determiner for supporting patients' satisfaction. Generally, it is believed that patient's satisfaction is related to expectations. Studies show that patients who have inexpectation and who have a little education are more pleased; on the other hand, patients who have enough information about health and who have higher expectancy are less pleased (24). Patients who stayed in hospital before have a limited expectancy from health service personnel because of having little communication with them (26). Patients expectancy is changeable in accordance with their experience with health care services. Because patients who stayed in hospital before communicate with health personnel. As a result of such communication, their information that they received determines their expectancy and so it affects the satisfaction rate during their stay in hospital (26).

This study, it is stated that the difference between patient's duration of stay in hospital and their satisfaction scores is statistically not significant. Yet, it is observed that patients who stayed in hospital more than 6 months have higher satisfaction rate (Table 3). Although there isn't such relationship in Demir (7) and Çelikalp's (8) studies, show that there is a relationship between patients duration of stay and satisfaction with nursing care services.

In the study is determined that there is no relationship between perception of nursing care scores and having chronic disease or not (Table 3). Besides, there is not such a relationship in İpek-Çoban (19) and İçyeroğlu's (6) research. Eventually, the state of having a hospital attendant and satisfaction with nursing care services are analysed and it is found that patient's satisfaction level doesn't differ whether they have a hospital attendant or not. Because the hospital attendants meet most of the requirements of patients, these patients expectancy from nursing care services decreases, and as a result, it is thought that it has no effect on the perception of nursing care.

CONCLUSION

The data obtained from this study only belongs to the group which the study is carried out, and the quality of nursing care services from nurses is found high. This perception is statistically different in terms of some features such as patient's age, gender, and experience of staying in hospital before; but it poses no difference in terms of such features as marital status, educational background, occupation, duration of hospital stay and having a hospital attendant. Regular evaluation for patient's satisfaction through reliable and valid scales will contribute to make necessary regulations for patient's expectancy in nursing practice by following the quality level and results. In order to increase patients satisfaction level, it is thought that

discussing the related subject with nurses and planning in-service-training for improving nurse's skills and information will be both beneficial.

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