



Hospitalized Patients' Satisfaction with Nursing Care Quality: A neurological Wards Focused Assessment

Kawthar Ali Dadoosh ¹, Sadeq AL-Fayyadh ²

¹ Al-Rusafa Health Directorate, Baghdad, Iraq.

² Adult Nursing Department, College of Nursing, University of Baghdad, Baghdad, Iraq.

CORRESPONDING AUTHOR	ABSTRACT
<p>Kawthar Ali Dadoosh, Al-Rusafa Health Directorate, Baghdad, Iraq. Email: kawthar.ali1202a@co.nursing.uobaghdad.edu.iq.</p>	<p>Background: Hospitalized patients in neurological wards require specialized nursing care. Patients' satisfaction with the quality of nursing care is an important indicator for measuring the quality of nurses' work. Patients are considered an important source for assessing the overall quality of hospital services, as well as the quality of nursing care in particular.</p> <p>Objectives: measuring the level of hospitalized patients' satisfaction with nursing care quality in the neurological wards .</p> <p>Methodology: A cross-sectional study was conducted in the present study. A purposive sample of 131 hospitalized patients in the neurological wards in Baghdad city hospitals who had met the study's inclusion criteria were targeted. The data collection started from January 21st, 2022, to March 1st, 2022. Face-to-face interviews were used for data collection. A Patient Satisfaction with Nursing Care Quality Questionnaire-Arabic (PSNCQQ-Ar) was used to measure the level of their satisfaction with the quality of nursing care.</p> <p>Results: More than two thirds (88.5%) of the study participants were unsatisfied with the quality of nursing care provided to them in the neurological wards. And (11.5%) were somewhat satisfied with the quality of nursing care provided to them.</p> <p>Conclusion: The majority of patients were dissatisfied with the quality of nursing care. This reflect a serious gap that must be addressed both effectively and urgently.</p> <p>Recommendations: In order to increase overall patient satisfaction, the researcher suggests a number of factors be taken into account, including hospital facility improvements, and training sessions about the quality of nursing care that should be implemented for nurses to increase and improve their abilities for patient care. Also, it is possible to improve patients' satisfaction with the quality of nursing care by conducting more studies in Iraq on the qualities of good nurses such as caring and communication skills that give patients more confidence in the nursing care they get.</p>

Keywords: Patient satisfaction, nursing care quality, Neurological wards.

INTRODUCTION

Many countries have an accumulated need for health care in hospitals and increasing patients' desire to get the best possible care with the rise of job requirements. The need to evaluate and measure the effectiveness of health care is very clear (Merkouriset al., 2013). Patients' satisfaction with the quality of health care is a basic indicator to identify the level and quality of health care in hospitals and health institutions. Recognizing patients' satisfaction is the key to improving the quality of care, which is the main reason why many patients prefer some hospitals, physicians, and nurses (Abdulkarim, 2019; Xesfingi & Vozikis, 2016).

Patient satisfaction is an essential component for measuring the quality of care , which is represented by the role of the nurse in providing a high level of nursing care quality. The quality of nursing care greatly affects the overall satisfaction with hospital care (Turfi & Al-Jubouri, 2022; Wanger et al, 2008). Nurses have become more involved in the management of patients with complex health problems, such as epilepsy, stroke, meningitis, spinal cord injury, neurological deficits, disturbed level of consciousness, brain and spinal cord tumors, brain injuries, and many other related neurological complications such as dysphagia, balance disturbance, sleep apnea, and paralysis (Buelow et al, 2018; Hickey, 2009).

A patient satisfaction rating is a subjective assessment of health-care professionals and the offered services. Satisfaction ratings are intended to be more subjective. Patient satisfaction seeks to reflect a personal assessment of care that cannot be determined by direct inspection. Patient satisfaction contributes new data to the satisfaction equation (Kibret et al, 2022). Ware et al.,(1983) believed that, to a large part, disparities in satisfaction reflect the realities of care; yet, these differences also reflect human preferences and expectations.

Monitoring satisfaction ensures that quality at least from the patient's perspective, is not bargained by pressure to increase income or grip costs within capitated limits. This ensures the belief that health care delivery that does not satisfy clients, regardless of technical quality, does not sufficiently serve society. Also, satisfaction data are used to detect aspects of care that increase either satisfaction or dissatisfaction and may be used to shape changes in health delivery systems. (Jackson & Kroenke ,1997; Jackson et al, 2001; Badri et al , 2009; Manzoor et al,2019).

Patient's judgment about the quality of healthcare services have become an important part of hospital quality assessment. Hospitals around the globe, began investigating the development of outcome-based quality measures in the late 1980s and early 1990s, concentrating on hospitality indicators similar to those used by hotels. "Through the Patient's Eyes" was the idea released in 1993 (Alexandro et al, 2019). Important information could be revealed through the patient's eyes to examine the hospitalization experience in terms of care quality. They are the best source of information about a hospital system's pain management procedures, education, communication, and whether they were treated with respect and dignity (Schembri, 2015) . Patients who are hospitalized in Neuroscience-neurosurgical wards are those who reveal actual or potential changes in neurological health status demanding management from health care professionals (Australasian Neuroscience Nurses' Association (ANNA), 2013). Patients' experiences usually disclose the hospital system's quality of operating and can motivate significant visions into the types of changes that are required to close the gap between the care delivered and the care that should be delivered, such as when the patient's surgery was successful but the care during hospitalization was

described as uncomfortable and insufficient (Clary, 2003; Farzianpour et al, 2015).

AIMS OF THE STUDY

The study was created and conducted to fill the literature gap, aiming basically to measuring patients' satisfaction with nursing care quality in a vital unit such as the neurological ward aiming to highlight their opinion regarding the quality of nursing care..

METHODOLOGY:

- Ethical Consideration:

The researchers pledge to keep the identifying details of the participants private and use the collected data without causing any actual or potential harm to the study subjects. The study tool was designed to preserve the subject's right to anonymity. Subjects were given the right to freely participate in the study. After taking the official approval from the administration of the neurological hospital, a verbal consent was taken from the hospitalized patients to participate in the study after informing them that their participation is voluntary and the information will be treated confidentially and used for scientific research purposes only.

- Design and Sampling:

This study was conducted using a cross sectional study. A purposive sample of 131 hospitalized patients in the neurological wards in Baghdad city hospitals who had met the study's inclusion criteria were targeted. The data collection started from January 21st, 2022, to March 1st, 2022. Face-to-face interviews were used for data collection. A Patient Satisfaction with Nursing Care Quality Questionnaire-Arabic (PSNCQQ-Ar) was used to measure the level of their satisfaction with the quality of nursing care.

- Setting of the Study:

The study targeted hospitalized patients in the neurological wards in Baghdad Teaching Hospital, Ghazi al-Hariri for Surgical Specialties Hospital, and

the Private Nursing Home Hospital. Neurosurgery Teaching Hospital and Dr. Saad Al-Witry Neuroscience Hospital. Additionally, Imamain Kadhmain Teaching Hospital, and Alyarmouk Teaching Hospital.

- Instrument of study:

The study instrument consists of two parts: the first part consists of patients' socio-demographic characteristics; the second part consists of the Patient Satisfaction with Nursing Care Quality Questionnaire-Arabic (PSNCQQ-Ar). The PSNCQQ-Ar is a 5-point Likert scale ranging from poor to excellent. Item scores for each domain can be summed up and averaged to yield a single value for each patient. The report of PSNC quality can be a composite score (i.e., overall PSNC quality) or a domain-based score. The PSNCQQ-Ar consists of 21 items to assess satisfaction with the overall quality of care received during the hospital stay, with a minimum score of 21 and a maximum score of 105; these are the scores distributed evenly. Unsatisfied = 21-49, Slightly Satisfied = 50-78, and Satisfied = 79-105 (Laschinger et al., 2005; AlBashayre).

- Inclusion Criteria:

Certain characteristics are required for hospitalized patients in neurological wards. Patients, for example, must be alert and oriented. Patients are hospitalized in the neurological ward for at least five days. Subjects over the age of 18 years.

- Reliability and Validity of the Instrument:

The reliability of the instrument were measured by measuring the overall Cronbach's alpha coefficient for the PSNCQQ-Ar was excellent and similar across different hospital units (96). The split-half coefficients were (91 and 95) for Parts 1 and 2, respectively, with a Guttman split-half coefficient of (94). The validity of the instrument was measured by the analysis of responses of the six expert raters. The results showed that the item-level content validity index ranged from (83 to 1), and the scale-level content validity index was (94).

RESULTS

Table (1): Distribution of patients according to their Socio-Demographic characteristics

Age	Frequency	Percent
18 - 26 years old	38	29.0
27 – 36 years old	31	23.7
37 – 46 years old	30	22.9
47 – 56 years old	26	19.8
57 – 66 years old	3	2.3
≥ 67 years old	3	2.3
Total	131	100.0
Gender	Frequency	Percent
Male	62	47.3
Female	69	52.7
Total	131	100.0
Marital Status	Frequency	Percent
Single	31	23.7
Married	97	74.0
Divorced	3	2.3
Total	131	100.0
Education	Frequency	Percent
Primary School	66	50.4
High School	34	26.0
Diploma	17	13.0
Bachelor	10	7.6
Postgraduate	4	3.0
Total	131	100.0
Occupation	Frequency	Percent
Freelance	41	31.3
Housewife	49	37.4
Employed	36	27.5
Students	5	3.8
Total	131	100.0
No. of Admissions during the past two years	Frequency	Percent
One time	89	67.9
≥ 2 times	42	32.1
Total	131	100.0
Hospitalization duration	Frequency	Percent
5 days	37	28.2
6 – 10 days	76	58.0
11 – 15 days	6	4.6
16 – 20 days	6	4.6
21 – 25 days	6	4.6
Total	131	100.0
Room Sharing	Frequency	Percent

Hospitalized patient alone in the room	39	29.8
Sharing it with another patient	13	9.9
Sharing it with more than one patient	79	60.3
Total	131	100.0
Having Hospitalized Relative	Frequency	Percent
Yes	129	98.5
No	2	1.5
Total	131	100.0
Reason for Choosing the Current Hospital	Frequency	Percent
Medical Personnel	82	62.6
Hospital Cost	14	10.7
Working at the hospital	5	3.8
Modern technologies availability	9	6.9
Nursing Staff	3	2.3
Hospital success in treating my relatives	18	13.7
Total	131	100.0

The table (1) represent the highest percentages of the selected variables. In which, (29%) of the study samples' age ranged from (18-26) years old. More than half (52.7%) of the study subjects were female patients. Most of the study participants (74%) were married. About (50.4%) of the respondents were primary school graduates. About (37.4%) of the study subjects were housewives at the time of data collection. About (67.9%) were hospitalized at least once during the past two years. More than half (58%) of the study sample were hospitalized for (5-10) days. About (60.3%) of them were lying with more than one patient in the caring room at the time the data was collected. Furthermore, the vast majority (98.5%) of the patients had lying relatives with them. About (62.6%) of the study respondents chose the hospital for medical personnel.

Table (2): Descriptive Distribution of Hospitalized Patients According to Their Categorized Levels of Satisfaction with Nursing Care Quality

Levels of Patients satisfaction	Frequency	Percent
Unsatisfied	116	88.5
Somewhat Satisfied	15	11.5
Total	131	100.0

As shown in tables (2), more than two thirds (88.5%) of the study participants were unsatisfied with the quality of nursing care provided to them in the neurological wards . And (11.5%) were somewhat satisfied with the quality of nursing care provided to them.

DISCUSSION

A patient's satisfaction and opinion regarding nursing care is referred to as the "caring quality." The difference between what the patient anticipated and the actual care they received can be used to determine their expectations. The best way to assess the quality of nursing care in neurological wards and identify nursing staff shortcomings in patient care is to

measure patient satisfaction with the quality of nursing care. Regarding the sociodemographic characteristics as shown in table (1) that (29%) of the study samples' age ranged from (18-26) years . This result agreed with Mohammed et al. (2016). The results found that patients aged (18–27) years old made up the largest share of the study's participants, composing (23.7%) of the study sample because younger people are more careless about their own

safety, such as not wearing a seat belt when riding in a vehicle or wearing a helmet when riding a bike or motor bicycle (Ogundele et al., 2013).

As shown in table (1) that Most of the study participants (74%) were married, These findings agree with Kannan et al. (2020) the results were (73.39%) were married. Another cross-sectional study supported the current findings which conducted by Kasa and Gedamu (2019), the results were (71.4%) of patients were married. The researcher were not surprised due to the fact that marital life stress could lead to physical diseases and disorders (Lee et al.,2020).

As shown in table (1) , more than half (52.7%) of the study subjects were female patients, and about (37.4%) of the study subjects were housewives. A descriptive cross-sectional study in Iraq supports the current findings, which was conducted by Abed-Al-Hussein (2015), finding that (51.3%) of the study subjects were female and (36%) were housewives. The researcher was not surprised due to the fact that females are more likely to suffer from neurological disorders such as stroke (Huded, 2019).

Table (1) showed that more than half (50.4%) of the respondents were primary school graduates. The results support a study conducted in Iraq by Shnishil and Mansour (2018), which found that about 24.7% of the study participants were primary school graduates. These results were contradicted by a cross sectional study conducted by Haile Eyasu et al. (2016), The study's finding was that (48.4%) of the sample had no formal education. The researcher was not surprised due to the fact that a patient's educational level affects their level of satisfaction because of the use of medical language or poor nursing communication. These results were supported by Grace (2018), which reported that patients with a primary level of education were less likely to be satisfied with the information received on admission.

As shown in table (1), more than half (58%) of the study sample were hospitalized for (5-10) days. These results agree with a cross-sectional study that done by Alhowaymel et al (2022), they found that more than half of the sample (54.2%) had stayed at the hospital for more than six days during their last hospitalization.

The findings in table (1) showed that (60.3%) of the patients were sharing the room with more than one patient in the care room at the time the data was collected, and about (67.9%) were hospitalized at least once during the past two year. These results agree with a study done by Alsaqri (2016). The study found that less than a third (30%) of the study population shared the room with two patients or more. Of equal importance, (25.6%) had been admitted into hospital at least once in the previous two years.

The findings in table (1) revealed that the vast majority (98.5%) of the patients had a hospitalized relatives with them. About (62.6%) of the study respondents chose the hospital for good reputation of medical personnel. At the end of this section, it is important to notice that the above study variables are the first that deals with the aforementioned variables, which makes its findings unique in terms of highlighting new gaps that need to be addressed effectively.

As shown in tables (2), more than two thirds (88.5%) of the study participants were unsatisfied with the quality of nursing care provided to them in the neurological wards , and (11.5%) were somewhat satisfied with the quality of nursing care provided to them. These results were supported by a study in Iraq. The study found that the majority of patients were unsatisfied with nursing care in Mosul city hospitals, with dissatisfaction rates of (60 percent, 53 percent, 58 percent, and 51 percent) in the Ibn-Sina, Al-Jamhory, Al-Salam, and Al-Kanssa teaching hospitals, respectively (Mukhlif, 2014). The current

results disagreed with a descriptive correlational study.

The study findings showed that the majority of patients (68.9%) were moderately satisfied with nursing care, and 11.2% were dissatisfied (Parizad et al. ,2021). These results were not surprising to the researcher due to the fact that Iraq's public health care system has been steadily deteriorating for decades as a result of combat cycles, years of economic sanctions, financial problems, corruption, and neglect (Al-Hawdrawi et al.,2017).

Many healthcare facilities were badly damaged or destroyed during the conflict against so called ISIS [the Islamic State of Iraq and Syria], and despite the rehabilitation of some of these facilities, capacity has not yet returned to pre-war levels (Ibrahim et al, 2021).

CONCLUSION

The majority of patients were dissatisfied with the quality of nursing care. This reflect a serious gap that must be addressed both effectively and urgently. According to the findings of the study, the majority of patients chose the hospital where they receive care because of the medical staff, while a minor percentage of patients chose the hospital because of the nursing staff. This demonstrates nurses' failure to provide and reflect the ideal nursing image in enticing patients to give care for them, and it's another indicator that could point to the reason for the patients' dissatisfaction with the quality of nursing care they received.

RECOMMENDATION

In order to increase overall patient satisfaction. The researcher suggests a number of factors be taken into account, including hospital facility improvements, health education programs, and training sessions about the quality of nursing care that should be implemented for nurses to increase and improve their abilities in managing patients. It is

possible to improve patients' satisfaction with the quality of nursing care by conducting more studies in Iraq on the qualities of good nurses such as caring and communication skill of nurses that give patients more confidence in the nursing care they get.

Limitations:

There were some barriers that existed during the course of the study, including, but not limited to, the lack of neuroscience patients who were included in criteria such as being conscious and oriented, which increased the length of the study. Of equal importance, a significant percentage of patients were affected by the third wave of the COVID-19 pandemic during the data collection phase, which also limited the participation rate in the study.

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Conflicts of Interest:

- None.

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