

# Satysfakcja pacjentów z opieki pielęgniarskiej – badania w grupie pielęgniarek i pacjentów

Patient satisfaction with nursing care – survey among nurses and patients

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## STRESZCZENIE

### Satysfakcja pacjentów z opieki pielęgniarskiej – badania w grupie pielęgniarek i pacjentów

**Wstęp.** Ocena satysfakcji klientów stanowi istotny element poprawy jakości funkcjonowania zakładów ochrony zdrowia, wymóg w pomiarze jakości opieki pielęgniarskiej i miarę postaw pacjentów w stosunku do pielęgniarek, systemu opieki zdrowotnej oraz otrzymanej opieki pielęgniarskiej. Zasoby ludzkie to najważniejsze zasoby w każdej organizacji. Poprzez pracę ludzie dążą do osiągnięcia: stabilności ekonomicznej, tożsamości i rozwoju osobistego, prestiżu, niezależności, kreatywności oraz społecznych interakcji. Pielęgniarki poprzez pracę także chcą się rozwijać i realizować jako osoby, wykorzystywać i kształtować swoje talenty i umiejętności, aby osiągać wyniki operacyjne i rezultaty, które zostaną zauważone. We wszystkich krajach, jakość środowiska pracy pielęgniarek (wsparcie ze strony przełożonych, dobre relacje w zespole terapeutycznym, udział pielęgniarek w podejmowaniu decyzji, jakość opieki) była statystycznie związana z satysfakcją pacjentów, bezpieczeństwem opieki jak i z wynikami opieki pielęgniarskiej.

**Cel.** Celem badań było określenie poziomu satysfakcji pacjentów w odniesieniu do organizacji opieki pielęgniarskiej w szpitalu oraz relacji pielęgniarka-pacjent.

**Materiał i metoda.** Badania przekrojowe w grupie pielęgniarek i pacjentów hospitalizowanych w oddziałach chirurgicznych i chorób wewnętrznych. Próba liczyła 126 pielęgniarek i 148 pacjentów. Dane zebrano za pomocą autorskiego kwestionariusza ankiety. Monitorowane elementy pielęgniarskie to: personel szpitala, środowisko pracy, zamiar rezygnacji z zawodu, jakość opieki, komunikacja w zespole i z przełożonymi. Monitorowane elementy ze strony pacjentów to: satysfakcja z opieki pielęgniarskiej, leczenie szpitalne, gotowość do zarekomendowania szpitala innym.

**Wyniki.** Pielęgniarki rozmawiały z pacjentami na temat opieki potrzebnej po wypisie ze szpitala w 51% przypadków, 72% pacjentów otrzymało wskazówki na temat właściwego postępowania i zachowania po wypisie. Połowa badanych pacjentów oceniła szpital na 10 i 8 (odpowiednio 28% i 24%). Pacjenci zarekomendowaliby szpital znajomym w 54% przypadków. Wysokie standardy w realizacji opieki są zawsze oczekiwane w opinii 48,8% pielęgniarek. Według 42,1% pielęgniarek, większość czasu pielęgniarki poświęcają na podejmowanie decyzji związanych z zaspokojeniem potrzeb pacjentów i ich rodzin. Zawsze zachęca do rozmowy z pacjentami 38% badanych, a 71,1% ma możliwość „traktowania pacjentów po ludzku”. Badania wskazują na obecność wypalenia zawodowego pielęgniarek (44,6% zakreśliło odpowiedź „czasami”).

**Wnioski.** Mimo istniejących różnic w organizacji i zasobach szpitali, wyniki naszych badań są zbliżone do wyników badań z innych krajów w tym zakresie. Duże oczekiwania w miejscu pracy, duże oczekiwania ze strony osób zarządzających placówką, mała autonomia w procesie podejmowania decyzji, braki kadrowe, korelacja między zaangażowaniem personelu w pracę i potrzebami pacjentów, to wszystko skutkuje niezadowoleniem z pracy wśród pielęgniarek i niską satysfakcją pacjentów z opieki pielęgniarskiej.

**Słowa kluczowe:** satysfakcja pacjentów, opieka pielęgniarska, pielęgniarka, satysfakcja z pracy

## ABSTRACT

### Patient satisfaction with nursing care – survey among nurses and patients

**Introduction.** Assessment of customer satisfaction is an essential element of improving quality of health institutions, the requirement of quality nursing care and measure of the patient's attitude toward nurses, the health care system and received nursing care. Human resources are the most important resource of any organization. By working people seek to achieve: economic stability, identity and personality development, status and prestige, independence, creativity, social interaction. The nurses, through working want to develop and pursue their goals, to use and develop their talents and skills, to achieve operating results and achievements that will be recognized. In all countries, nurses and quality of hospital work environment (support of superiors, good relationships among doctors and nurses, nurses' participation in decision-making, quality of care) were significantly associated with patient satisfaction, safety and quality of care, as well as the results of nurses' work. Specifically, hospitals with a good working environment and profe-

sional staff have better outcomes for patients and nurses.

**Aim.** To determine the level of patient satisfaction in relation to the organization of nursing care in the hospital and nurse-patient relationship.

**Material and method.** A cross sectional study in population of nurses and patients hospitalized in surgical and internal medicine departments was done. The sample consisted of 126 nurses and 148 patients. The data was obtained using a specially designed anonymous questionnaire for patients and nurses who adapted for our conditions. Two kinds of outcomes were considered nursing outcomes: hospital staff, working environment, the intention of leaving the profession, quality of care, communication with colleagues and superiors, and patients outcomes: satisfaction with nursing care, hospital treatment, willingness to recommend hospital to others.

**Results.** The nurses conducted interviews with 51% of patients about the assistance they would need after discharge, while 72% of patients received instructions about the proceedings after discharge. Half of patients rated hospital with 10 and 8 points (respectively 28% and 24%); they would recommend hospital to friends in 54%. High standards in providing care are always expected according to 48.8% of nurses. Nurses make decisions based on patients' and their families' needs in 42.1%; they always encourage conversation with patients (38%) and 71.1% of nurses always have the opportunity treat patients in a decent way. The results indicate presence of the burnout syndrome (sometimes 44.6%).

**Conclusions:** Although there are differences in the organization and resources, the results of our study are similar to studies from other countries. High demands of the job, high expectations of the management, little autonomy in decision-making process, understaffing, their devotion to the work and needs of patients, result in dissatisfaction among nurses and lower patients' satisfaction with nursing care.

**Key words:** patient satisfaction, nursing care, nurse, job satisfaction

## INTRODUCTION

According to WHO Declaration people have the right and duty to participate individually or in groups in planning and implementing their own health care. Good and quality nursing care is the right of all patients and responsibility of all nurses who deliver it. Commonly measured indicator of quality of care is the patients' satisfaction with nursing care [1]. Westaway et al.[2] defined patients' satisfaction as judgment about the quality of patient care in all aspects, especially in interpersonal relationships. This refers to the technical and interpersonal behaviour, building partnerships, direct and positive nonverbal behaviour, kindness, attention, clear communication and information, compliance, frequency of contact, consultation length and waiting time [3]. We can say that satisfaction is achieved when the patients' perception of quality of care and perceived health care is positive, satisfying, and fulfilling their expectations [1]. For nurses it is important to allow patients to express their views and concerns, so they can incorporate them into the process of nursing care.

Factors contributing to patient satisfaction care are complex, and literature usually describes socio-demographic characteristics of patients, expectations regarding the care, organizational and physical environment, communication, participation, interpersonal relationships, and more [4]. Patient evaluation of health services involves two processes: cognitive-psychological evaluation and affective response to the structure, process and outcome of services. Instead of referring to the technical competence, attention to pleasure is focused on communication, accountability, efficiency, reliability, and the fulfilment of expectations [5].

Including patients in decision-making, and the level of that participation was found to be strongly associated with overall satisfaction. Overall patient satisfaction was influenced by clear answers/information that the patient receives from medical staff. Health status was also strongly associated with patient satisfaction [5]. Studies confirm that the characteristics of the hospital environment (rela-

tions nurses-patients, a doctor-nurse relationship) are associated with better outcomes for patients and greater satisfaction of hospital care [6].

Job satisfaction is defined as positive emotional reactions and attitudes of individuals towards their jobs. Terms such as control, cooperation, influence, autonomy and respect are often mentioned in discussions of job satisfaction. Nurses are at greater risk for occupational dissatisfaction, primarily because of job stress, burnout at work and work shifts. Numerous studies point to the factors that influence job satisfaction, such as gender, age, education level, years of experience, working conditions, material compensation, working hours, expectations regarding the progress of the work and the like [7]. Patient satisfaction is considered one of the desired outcomes of care, elements of the health status and an important indicator of quality of nursing care [2]. Serbian Ministry of Health and Public Health Institute of Serbia since 2004. have provided patients with satisfaction survey, and since 2006 with satisfaction of health care workers in Serbia.

The aim of this study was to determine the level of patient satisfaction in relation to the organization of nursing care in hospitals, and the relationship between nurse-patient and nursing job satisfaction.

## METHODS

The research was conducted as a cross sectional study. The study enrolled nurses (126) and hospitalized patients (148). The sample consisted of nurses with medical school and college/vocational school. They work as head nurses and nurses providing care to patients. The criteria for selecting patients included more than 18 years of age, hospitalization in the surgical/internal medicine department, consent for participation in research. The test was performed on the patients' discharge from hospital.

The data were obtained by a specially designed, structured, anonymous questionnaire for patients and nurses. Attributes measured as outcomes for patients was satisfaction with nursing communication, information provided

by the nurses, the total hospital rating, and willingness to recommend the hospital. As nursing outcomes, we monitored satisfaction with work environment, job satisfaction, quality of provided care, self-assessment of burnout and intention of leaving the workplace.

Statistical analysis was performed using the methods of descriptive and exploratory analysis, cross-table methods, using the Pearson  $\chi^2$  test. Data analysis was performed in the statistical software package SPSS 14.0 for Windows.

The research was approved by the ethics committees of institutions working in the accordance with the principles of Good Clinical Practice (GCP).

## RESULTS

From total number (148) of patients, 45.9% was from surgery, and 54.1% from internal medicine departments. Their health was assessed as good by 28.4%, moderate – 37.2% and poor – 7.4% patients. Half of patients (53.4%) had completed high school education.

More than two thirds of nurses have the opportunity to treat patients always as people, not as just bodies or disease units (65.9%), and 23.0% of nurses have often opportunity for such treatment of patients. Decision “always” for care plan according to the needs of patients and family members is confirmed by 30.2% of nurses, “often” by 42.1%. Health care provided by nurses is as excellent (21.4%), very good (41.3%) and satisfactory (11.9%). Nurses considering care as very good and excellent, in a significantly higher percentage encourage discussions with patients ( $p=0.005$ ), and make decisions based on the needs of patients ( $p=0.004$ ).

One-third of nurses were very much satisfied with their job (31.7%), two thirds were partially satisfied (57.1%), and 4.8% of nurses were dissatisfied very much. There was no statistical significance between job satisfaction in relation to the role, work experience, length of work in the current department.

A small percentage (8.7%) of nurses did not feel the symptoms of burnout, but most of them (46.8%) feel that

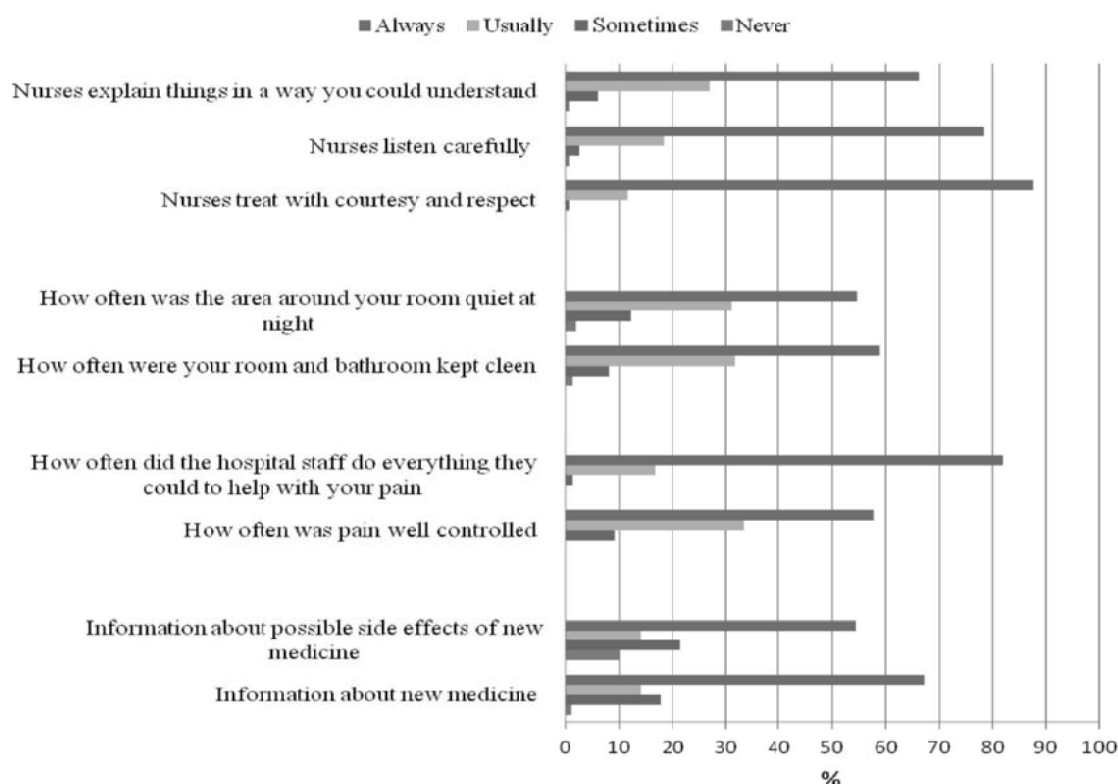


Fig. 1. Patients' satisfaction with nursing communication, hospital environment, pain control and information.

In the framework of patient satisfaction in relation to the organization of nursing care in hospitals and between nurse-patient relationships, we obtained the following results:

A quarter of patients rated hospital very high with grade 10 (25.0%). Grade 8 was given by 22.3% patients. High statistical significance was found between hospital grades and satisfaction with nursing communication ( $p<0.001$ ), cleanliness of hospital environment ( $p=0.008$ ), given instructions about side effects of new drugs ( $p=0.016$ ) and the instructions given at discharge ( $p=0.044$ ). The hospital will be “certainly” recommended to their friends by 51.4%, and “probably” by 43.9% of patients.

sometimes. Comparison of nurses who constantly feel burnout at work, there was a significant difference compared to the length of working at current ward, much larger in the group with more than 5 years at the current ward ( $\chi^2=17.249$ ,  $df=9$ ,  $p=0.045$ ) and in group working more than 36 hours per week ( $\chi^2=19.290$ ,  $df=9$ ,  $p=0.023$ ).

There is a significant difference between nurses in different departments in relation to the intention to change job. Nurses who are not in nurse management (head nurses) were more likely to leave the hospital ( $p=0.029$ ), as the nurses with lower education ( $p=0.036$ ).

■ Tab. 1. The characteristics of the study population – nurses

	N (126)	(100) %
<b>Gender</b>		
male	9	7.1
female	117	92.9
<b>Working role</b>		
head nurse	26	20.6
nurse	100	79.4
<b>Years of service</b>		
to 5 years	32	25.4
6 – 10 years	27	21.4
11 - 15 years	24	19.0
16 - 20 years	21	16.7
more than 20 years	22	17.5
<b>Working hours per week</b>		
12 h and less	5	4.0
12 h – 24 h	2	1.6
24 h – 36 h	42	33.3
more than 36 h	77	61.1
<b>Level of education (diploma)</b>		
high school	102	81.0
vocational	21	16.7
university	2	1.6
nurse specialist	1	0.8

## DISCUSSION

Our results are similar with the results of national survey of the Institute of Public Health. Satisfaction with nurse-patient relation is showed by 60.1% patients, satisfaction with nursing care by 64.7% patients [8]. A large number of patients were satisfied with nursing communication, cleanliness of hospital, and instructions given from nurses. Care from nurses is a predictor of satisfaction more than the quality of food and cleanliness. The nurse-patient relationship is important for patient satisfaction. This concept involves a social relationship, developed intimacy, respect of patients as individuals, mutual understanding, respect, trust and cooperation. Attree [3] points out that open communication is one of the most important characteristics of quality health care and the development of good nurse-patient relationships. Providing information reduces uncertainty and ignorance causes stress. Patients assessed nurses as pleasant, cheerful, providing information, explaining procedures, giving suggestions and informing about the changes. Shattell et al. confirm that respect of the individual as a person not as a patient, or the number of diagnoses is also important to increase the patient satisfaction [3]. These relationships provide crucial emotional element that is important for the patient to respond positively to the planned medical treatment and was eventually satisfied.

Two-thirds of nurses evaluated their provision of care very highly. One-third of nurses are satisfied very much with their work and 4.8% are dissatisfied. Almost a half of nurses feel the burnout frequently. In a survey of the National Institute of Public Health in 2011, it was found that 9.1% of healthcare workers were very much satisfied and 7.0% unsatisfied. Employees were mostly satisfied with

personal relationships with colleagues, superiors' support, time available to perform jobs [9].

Factors that influence job satisfaction are burnout, stress, lack of autonomy, poor cohesion in the team, and these factors are associated with inadequate organization and insufficient supervisor's support [4]. Vahey showed that burnout of nurses affects patients' satisfaction with the provided care [10]. In all countries, nurses and the quality of work in hospital environment (such as management support, good physician-nurse relationships, participation in decision making, organization and quality of care) were significantly associated with patient satisfaction, quality and safe care, good results of nurses and lower degree of burnout among nurses [6,11]. The research specifically focused on the impact of teamwork on job satisfaction confirmed that nurses with higher scores in interdisciplinary teamwork were significantly more satisfied with their jobs, they intended to stay with the same job.

Numerous studies focused on job satisfaction in nursing showed that job satisfaction reduces occupational stress, improves the doctor-nurse collaboration, increases autonomy in their work [11]. In addition, the nurses working in a negative environment show significant job dissatisfaction, burnout and injury [12].

## CONCLUSIONS

Patients are the best source of information about communicating with hospital systems, the responsibilities of staff and they are the only source of information about whether they were treated with dignity and respect. Understanding the differences between the needs of patients and their satisfaction is crucial to success of organizations in quality management.

High job demands, high expectations of management, lack of autonomy in decision-making, insufficient number of nurses and their devotion to the needs of patients, result in dissatisfaction among nurses and lower patients' satisfaction with health care. Hospitals with a good work environment and professional nursing staff have more satisfied patients and nurses, as well as evidence of improved quality and safety. Improvement of hospital work environment can be adjusted to organizational strategy to improve outcomes for patients and retention of qualified nurses who provide direct care.

## REFERENCES

1. Irish Society for Quality & Safety in Healthcare. Measurement of Patient Satisfaction. Guidelines. Health Strategy Implementation Project 2003.
2. Westaway MS, Rheeder P, Van Zyl DG et al. Interpersonal and organizational Dimensions of Patient satisfaction: The moderating effects of health Status. *Intl J Qual Health Care* 2003;15(4):337-344.
3. Chawani FS. Patient satisfaction with nursing care: A Meta Synthesis. Master thesis in Nursing. Faculty of Health Sciences, University of the Witwatersrand, 2009.
4. Moret L, Anthoine E, Paille C et al. Relationship between inpatient satisfaction and nurse absenteeism: an exploratory study using WHO-PATH performance indicators in France. *BMC Research Notes* 2012;5:83.
5. Rahmqvist M, Bara A. Patient characteristics and quality dimensions related to patient satisfaction. *Int J Qual Health Care* 2010;22(2):86-92.
6. Aiken LH, Sermeus W, Van den Heede K et al. Patient safety, satisfaction, and quality of hospital care: cross sectional surveys of nurses and patients in 12 countries in Europe and the United States. *BMJ* 2012;344:e1717 doi: 10.1136/bmj.e1717 (Published 20 March 2012).

7. Nikic D, Arandjelovic M, Nikolic M et al. Job satisfaction in health care workers. *Acta Medica Medianae* 2008;47(4):9-12.
8. Institute of Public Health of Serbia. Results review of patient satisfaction in public health-care institutions of Serbia in 2011. Available from: <http://www.batut.org.rs/download/izvestaji/Zadovoljstvo%20korisnika%202011.pdf> (Accessed 25.05.2012.).
9. Institute of Public Health of Serbia. Results review of employee satisfaction in public health-care institutions of Serbia in 2011. Available from: <http://www.batut.org.rs/download/izvestaji/Zadovoljstvo%20zaposlenih%202011.pdf> (Accessed 25.05.2012.).
10. Vahey DC, Aiken LH, Sloane DM, et al. Nurse burnout and patient satisfaction. *Med Care* 2004;42(2):57-66.
11. Kalisch BJ, Lee H, Rochman M. Nursing staff teamwork and job satisfaction. *J Nurs Manag* 2010;18:938-947.
12. Schubert M, Glass TR, Clarke SP et al. Rationing of Nursing Care and its Relationship to Patient Outcomes: The Swiss Extension of the International Hospital Outcomes Study. *Int J Qual Health Care*. 2008;20(4):227-237.

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