

SURVEY THE IN-PATIENT'S SATISFACTION WITH QUALITY OF NURSING CARE AT DISTRICT 7 HOSPITAL

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Received: 16/11/2024

Revised: 28/11/2024; Accepted: 06/12/2024

ABSTRACT

Satisfaction is generally considered the emotional state brought about by the customer assessment and attitude in using the services. Quality nursing care characterized as competence and personal caring. To ensure patient satisfaction, nurses need to provide personalized care. Therefore, we investigated this study aims to survey the in-patient's satisfaction with quality of nursing care.

A cross sectional correlation design involving in-patients who live in hospitals at least 2 days and maximum 30 days. The participants (N =350) who answer questionnaire that was used to determine the nursing care quality and the in-patient's satisfaction. Linear Regression and Pearson Correlation were used to find the relationship between patients' satisfaction and Nursing Care Quality. Result given showed the in-patient's satisfaction was improved about 60.4% by Nursing Care Quality and decreased by the facilities in the hospital. To improve Nursing Care Quality, the nurses need to improve the skills such as Nurse's Care, Nurse's empathy, Nurse care patient, Nurse professional training, Nurse interest Patient's question.

Keywords: Patient satisfaction, Quality of nursing care, Nursing care evaluation.

1. INTRODUCTION

According to the World Health Organization (WHO), health service quality affects patient satisfaction and vice versa, and patient satisfaction can be assessed the effectiveness of services provided by hospitals and industry medical provided [1]. Satisfaction is the emotional feedback on the customer's overall perception to the service provider on the basis of comparing the difference between what they receive compared to previous expectations [2]. Assessment of patient satisfaction with caring at the hospital is extremely important. The patient's caring to promptly overcome the shortcomings and shortcomings, several violations of medical ethics, has caused frustration in society, affecting the honor, reputation and reducing the trust of the patient with the physician. Improve the quality of nursing care for patients, to help the hospital improve and develop more and more. Patient satisfaction with nursing care is an important determinant of care quality, especially in healthcare and healthcare facilities [3].

In Vietnam, the satisfaction of patient with nursing care still has many problems, although the training level and scope of practice of Vietnamese nurses today has many changes. However, the general perception of the roles of nurse maintenance has not been updated in

accordance with reality. The current need for patients is to be cared for both physically and mentally [4]. The rate of dissatisfaction with medical examination and treatment services is still quite high[5]. Along with other quality improvement measures, understanding patient satisfaction is an important factor for healthcare facilities to monitor quality of care and attract patients[6]. Therefore, the objective of this study was to investigate about this problem, the research "Survey the In-patient's satisfaction with quality of nursing care at District 7 Hospital" was implement.

2. RESEARCH METHODOLOGY

This study is applied the cross-sectional design. Research conducted at District 7 Hospital in Ho Chi Minh city. The sample size in this study included 350 are staying in District 7 Hospital in Ho Chi Minh city. Inclusive criteria Including in the study, participants with they are streating in District 7 Hospital in Ho Chi Minh city at least 2 days and maximum 30 days. Participants can read and communicate to the health worker. People completed agreed to join the survey. Data collection from January to Six 2021 at District 7 hospital. Participants were invited to participate in

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Email: uyentnp@hiu.vn Phone: (+84) 707298989 [Https://doi.org/10.52163/yhc.v65i13.1881](https://doi.org/10.52163/yhc.v65i13.1881)

the study and they agreed to sign the consent form. They were then invited to complete the questionnaire in time from 20-30 minutes. After the questionnaire is completed and rechecked. The data were entered into SPSS software program version 25.

2.2. Questionnaire

- *The demographic profile:* Age, gender, material status, frequence go to hospital, department in hospital, live in hospital with.

- *The questionnaire for patient satisfaction:* With nursing care quality (Laschinger et al., 2005) was used[7]. Satisfaction of Patients 1= not satisfaction, 2= Dissatisfaction ,3= satisfaction ,4=strongly satisfaction ,5 = completely satisfaction, Nursing Care 1= completely disagreed, 2 = disagreed, 3 = agreed 4 = Strongly agreed, 5= completely agreed. Each item in the Nursing Care Quality and Satisfaction of Patients is evaluated by participants from 1 to 5. The average of these items is the score of Nursing Care Quality and Satisfaction of Patients. Quality Cronbach's alpha coefficients was 0.82, indicating acceptable reliability.

2.3. Data Analysis and Ethics

In this study, descriptive of demography variables was used Frequency and percentage to find the results. With continuous variables, the mean and standard deviation were recorded. Finding the relationship of the Satisfaction of Patients between males and females, independent T-test was be used. The Kruskal Wallis test was applied to find the satisfaction of patients in the nominal variables. Linear Regression and Pearson Correlation were used to find the relationship between patients' satisfaction and Nursing Care Quality. Ethics: The research will present to the Ethical Committees of Meiho University and Director of District 7 Hospital in Ho Chi Minh city. The participants received the explanation about the harmful and benefits whenever they join in the study. All participants' information will be only use for research's purpose. All participants can withdraw the research any time without any affect to their treatments and benefits.

3. RESULTS

3.1. Characteristic of participants

Table 1. The descriptive of demography variable (n=350)

Variables		Frequency	Percentage
Gender	Male	90	25.7
	Female	260	74.3
Married Status	Single	150	42.9
	Married	180	51.4
	Divorced	20	5.7

Variables		Frequency	Percentage
Frequency go to hospital	One for 2 years	30	8.6
	Two for 2 years	140	40
	Three for 2 years	130	37.1
	Four for 2 years	30	8.6
	Over four for 2 years	20	5.7
Department in hospital	Obtertrics	100	28.6
	Internal medicine	100	28.6
	Surgery	150	42.9
Live in hospital with	Live alone	60	17.1
	Live with 1 relative	250	71.4
	Live with more than 1 relative	40	11.4

The results showed that there are 74.3% percentage females participated in the survey. The participants come from 3 departments in the hospital: the obstetrics department (28.6%), internal medicine department (28.6%), and Surgery department (42.9%). Only 8.6% and 5.7% go to hospital four times every two years and over four times every two years. 42.9% of participants are single, and 51.4% of them are married. Therefore, only 17.1% of participants live alone in the hospital, 71.4% live with one relative, and even 11.4% live with two relatives.

Table 2. The continuing variable (n=350)

Variables	Minimum	Maximum	Mean
Age	23	59	41.54 ± 9.19
Satisfaction of patient	2.5	5.0	4.37 ± 0.42
Nursing Care Quality	2.65	4.83	4.29 ± 0.57

The result showed that the range of age is from 23 years to 59 years, the average age is 41.54 ± 9.19. Most of participants is quite feel satisfaction with the Nursing Care Quality in hospital with 4.37 ± 0.42.

Table 3. ANOVA test of The Satisfaction of Patients (n=350)

Variables		N	Mean	Tamhane test**	p-value
Married Status	Single	150	4.167 ±0.68	-0.3472	0.000*
	Married	180	4.51±0.43	-0.11111	0.032*
	Divorced	20	4.63 ± 0.13	0.45833	0.000*
Frequency go to hospital	One for 2 years	30	4.5 ±0.42	0.26786	0.071
	Two for 2 years	140	4.23 ± 0.72	-0.24863	0.006*
	Three for 2 years	130	4.48 ±0.43	-0.10256	0.790
	Four for 2 years	30	4.58 ±0.32	0.45833	0.001*
	Over four for 2 years	20	4.13 ± 0.38	-0.37500	0.021*
Department in hospital	Obstetrics	100	4.5 ±0.39	-0.12500	0.015*
	Internal medicine	100	4.63 ± 0.20	0.50833	0.000*
	Surgery	150	4.12 ± 0.72	-0.38333	0.000*
Live in hospital with	Live along	60	3.83 ±0.74	-0.60667	0.000*
	Live with 1 relative	250	4.44 ± 0.467	-0.31000	0.000*
	Live with more than 1 relative	40	4.75 ±0.31	0.91667	0.000*

*Dependent Variable: Patient's Satisfaction; Using Oneway ANOVA - ; ** Lenene statistic with p < 0.05; * significantly*

The results showed the difference in satisfaction among groups in such factors: Married Status, Frequency going to the hospital, Department in hospital, and people with whom the patient lives in hospital.

However, to test the Homogeneity of Variances by the result of Levene with significant = 0.000 < 0.05. These results mean there are not equal variances. The Tamhane was used for posthoc in ANOVA.

With Married Status, pairwise comparison between group showed that pair "Single-Married" with p = .000 < 0.05, Pair "Married-Divorced" with p = 0.03 < 0.05 and pair "Single-Divorced" with p = .000 < 0.05 have significant difference about satisfaction.

With Frequency go to the hospital, pairwise comparison between group show that patients stay in hospital over "2 times – 3 times" every 2 years; "4 times – 1 time" every 2 years and "4 times – over 4 times" every 2 years have a significant difference in satisfaction with p < 0.05. In contrast, others pairs get no significant difference with p > 0.05.

In the Department in hospital, pairwise comparison between department group "Surgery-Obstetrics"; "Obstetrics-Internal Medicine" and "Surgery-Internal Medicine" have a significant difference in satisfaction. The difference is significant to all pairs in the people with whom patients live in the hospital.

3.2. The relationship between in-patient's satisfaction with the quality of nursing care

Table 4. Pearson correlation of dimension in Nursing Care to Satisfaction of Patients (n=350)

	Satisfaction of Patient	Nurse care	Nurse's empathy	Nurse care patient	Nurse professional training	Nurse interest Patient's question	Gobal assessment care	Contra-dictory order	Nurse explain disease
Satisfaction of Patient	1								
Nurse care	0.526**	1							
Nurse's empathy	0.501**	0.731**	1						
Nurse care patient	0.619**	0.551**	0.674**	1					
Nurse professional training	0.523**	0.489**	0.537**	0.501**	1				
Nurse interest Patient's question	0.510**	0.519**	0.530**	0.755**	0.569**	1			
Gobal assessment care	0.395**	0.323**	0.473**	0.795**	0.292**	0.488**	1		
Contra-dictory order	0.374**	0.400**	0.480**	0.684**	0.574**	0.486**	0.669**	1	
Nurse explain disease	0.242**	0.204**	-0.001	0.019	0.299**	0.342**	-0.042	-0.075	1

** Correlation is significant at the 0.01 level (2-tailed)

The results presented that all activities of nurses have significantly correlated to Patient's Satisfaction with the range of r is 0.242 to 0.619 with p value < 0.01. It means that the satisfaction of patient and all dimension of Nursing Care Quality is positive correlation.

3.3 The predictor the in-patient's satisfaction by the quality of nursing care

The result indicated the formula of the relationship between the Patient's Satisfactory and Nurse Care Quality in the following formula:

$$\text{Patient's Satisfaction} = 0.655 + 0.866 \text{ NursFrequency Care Quality.}$$

Based on this research, the Patient's Satisfaction get possitive relationship to Nurse Care Quality

Table 5. Liner Model of Patient's Satisfactory (n=350)

Variables	Estimate	Std. Error	t- value	p-value
(Intercept)	0.655	0.243	2.697	0.007
Nurse Care Quality	0.773	0.056	15.387	0.000
Variables	R ²	Adjusted R ²	F- value	p-value
Patient's Satisfaction	(Constant)		236.760	0.000
Nurse Care Quality	0.636	0.403		

Dependent Variable: Patient's Satisfaction; Predictors: (Constant), Nurse Care Quality; Using Linear Model analysis

The results showed that approximately 63.6% of Patient's Satisfaction Variable could be accounted by the Nurse Care Quality.

4. DISCUSSION

4.1 Characteristic of participants

The participants of this study get an average of 41.54, and 74.3 % of participants are female compared to 39 and 64.4% [8] and 42.1 and 50.8% [9]. This result is similar to the research of Nguyen (2002), which describes the level of satisfaction of 538 patients and their families from all of the hospitals in Ho Chi Minh City [8]. However, most respondents were married is 51.4% and lower than the study about Service Quality and Its Impact on Patient Satisfaction: An Investigation in Vietnamese Public Hospitals is 85.2% [9].

4.2 The satisfaction of patients with the nursing care quality

Most patients are satisfied with the nursing care, which mean of patient satisfaction is 4.37 ± 0.42 . These findings are in line with the reports in the literature from Vietnam, which have shown that the majority of patients (80% or more) expressed satisfaction with their care, with a few responding negatively to any given items [9].

In addition, this study focused on investigating the relationship between nursing care quality and patient satisfaction. With Married Status, pairwise comparisons between groups showed that pair "Single-Married" and pair "Single-Divorced" have a significant difference in satisfaction. While Pair "Married-Divorced". The results show that the Married and Divorced group have higher score in satisfaction than Single group. The reason may come from the patient's empathy to the nursing care. As a result, patients' satisfaction is affected by people who live with patients in the hospital. It means that the relative who goes with the patient bring more satisfied than the patient who goes alone. Patients' satisfaction is the difference with the patient coming to the hospital over three times every two years. The similar study stated that long-stay patients also perceived higher levels of satisfaction regarding attitudes [10].

4.3 The relationship between in-patient's satisfaction with the quality of nursing care

The findings indicated that eight nursing care quality dimensions, "Nurses' care", "Nurses' empathy", "Nurses' care of patients", "Nurses' professional training", "Nurses' interest in patients' question", "Global assessment of the care", "Contradictory orders", and "Nurses' explanations of the disease" significantly determined the patient satisfaction and the outcome of service delivery. The importance of dimensions such as "Nurses' care" and "Nurses' care of patients". In line with the findings from previous studies, the results of our research confirmed the impact of "competence of professional staff" on Vietnamese patient satisfaction [9].

Besides nursing care for patients, critical dimensions such as "Nurse professional training" and "Nurse interest Patient's question" influence patient

satisfaction. It means that patients need more the nurse listen them and educate them some health care activities. Communication between the nurse, patient, and family members involves more than just providing information. It includes discussing a range of topics, encouraging sharing feelings and fears about the illness, treatment, and prognosis, and helping patients and family members find a sense of control and a search for meaning and life purpose [11]. Nurses with solid communication skills have been shown to influence patients' satisfaction, improve overall well-being positively, and influence patients' experiences [12]. However, many nurses express difficulty in communicating with their patients. Providing specific training in communication skills is one way to enhance the communication between nurses and their patients. Nurses improved in several empathic skills and clarified skills after training [13]. Patient-centered communication drives treatment planning through the transmission of information and provides a therapeutic and supportive environment for the patient. Empathy is of particular importance in effective patient-centered communication. A nurse's ability to recognize patients' empathic opportunities and respond to a patient empathically, communicating a desire to understand, can help patients understand and cope effectively with their illnesses [14].

4.4. The predictor the in-patient's satisfaction by the quality of nursing care

In-patient's satisfaction is affected by quality of nursing care, is 63.6%. This result is quite higher than other such as patient's satisfaction is effected 29% higher in nursing care can instruction [10]. Schoenfelder et al. (2011) stated that kindness of the hospital's nurses increase patient's satisfaction 2.78 times [15]. The major impact of nursing kindness and its greater meaning in comparison to physicians' kindness corresponds with other study results, which found communication with nurses and nursing care to be more important to patients. Possibly, patients experience more contact with nurses than doctors as nurses are the first responders to patients if they feel discomfort or have general questions [16]. Based on the research framework, patient satisfaction is affected by the amount of nursing care and factors from the patient such as gender, marital status, Frequency of going to the hospital. In addition, factors from the hospital are also identified, such as the Department where the patient is living. Besides, relatives living with the patient at the hospital also play an influential role. Research results show that the most critical role in the formation of patient satisfaction is the quality of nursing care. In addition, patient factors such as marital status and accompanying relatives also improve patient satisfaction. However, the number of visits to the hospital and the hospital ward does not seem to bring satisfaction and reduces patient satisfaction. Therefore, the facilities and services in the departments do not seem to bring satisfaction to the patients.

5. CONCLUSION AND RECOMMENDATIONS

The in-patient's satisfaction was increased by Nursing Care and decreased by the facilities in the hospital. Therefore, Nursing Care Quality that need to improve such as nurse care technique, nursing, listen the patient's need, healthy education for patients, and create the private environment

Recommendations: Improve the technical quality of nursing care such as skill and competence of nurses or attention of nurses to patient's condition;

The environment should be improved to cleanliness, helpfulness, and privacy; Enhance the inter-professional and inter-departmental collaborations in caring; Continue to improve the medical and services staff's manner, in which providers interact personally with patients and respond promptly to patient's questions and requests.

ACKNOWLEDGEMENT

I would like to send my gratefulness and respectfulness to Professor Tsan Yang, my advisor, for his outstanding. I am very grateful to all the professors on the Meiho University committee who teaching, thank all the teachers at Nguyen Tat Thanh University and leadership of District 7 Hospital for contributing to my research. Especially Dr. Do Lan Anh. Furthermore, thank you to all the patients who agreed to participate in my project.

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