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EVALUATION AND COMPARISON OF PATIENT CONTENTMENT WITH NURSING CARE IN GOVERNMENT HOSPITALS VS. PRIVATE HOSPITALS

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ABSTRACT

Patient contentment has become a vital sign to evaluate the quality of care rendered to the patients while in hospital. Patient contentment surveys can aid in identifying ways of improved nursing and health care services. The present study was planned to evaluate & compare the patient contentment with nursing care in selected Government versus private hospitals. This descriptive study was conducted on 1000 inpatients admitted in various wards of selected private and Government hospitals at Ludhiana, Punjab. Patients with age of 18 years or older, conscious and oriented were in person interview using structured interview program for which validity and consistency was ensured. A written consent was obtained to conduct study from competent authority of institute and an informed consent was taken from all the participants, further confidentiality of information and secrecy of subjects was maintained. It was found that mean patient contentment with nursing care score was appreciably higher in private hospitals (80.94±12.23) as compared to Government hospitals (56.68±20.53) (P<0.001). However, communication and providing emotional support dimensions of nursing care had lowest score in both private and Government hospitals. Therefore, it is suggested to plan and realize the training programs needed for nurses to develop their knowledge and skills of communication and use of emotional support measures for the patients.

Keywords: Patient contentment, Nursing care, Contentment with nursing care.

INTRODUCTION

In today's rapid, multifaceted and extremely regulated health care environment, it is essential to achieve patients' recovery as earlier as possible and so that eventually with full contentment patients leave the hospital. Studies have shown that contentment with nursing care is the best indicator of patients' contentment with healthcare facilities. Nursing care is one of the major components in the patient care administration [1]. It consists of helping the patients in personal hygiene

monitoring, helping in nutrition, environmental sanitation, assessment, maintaining body temperature, providing safety and comfort, assisting in respiration, rest, sleep as well as exercise, assisting in adaptability, providing health education. Nursing has always been aimed at keeping people healthy and providing comfort, care and assurance to the patients. The nursing care therefore may involve every number of activities ranging from carrying out complicated technical procedures to somewhat as simple



as holding a hand of the patient. The central focus of nursing care is the person receiving care. Nursing care hence refers to care of others [2].

Assessing to what extent patients are satisfied with nursing care, is clinically pertinent, as contented patients are more likely to comply with treatment, take an active role in their personal care [3], continue using health care services and stay within a health provider [4]. Nursing professionals may benefit from contentment surveys that identify potential areas for service enhancement and expenditure on health may be optimized through patient guided planning and evaluation [5]. Nursing profession has often used patients' outcome as a measures to approximate the health care services provided to patients. In other words, patients' contentment support in the evaluation of the nursing care efficiency. Moreover, it also supported in bringing perfections in the established nursing practices. Above all patients' contentment has become an outcome indicator of quality and efficiency of a combined health care system. Patients' contentment measurement can also be seen as a therapeutic intervention, an important measure for making and evaluating various decisions, and a tool for patient client marketing or also as an ethical commitment which has the potential to improve care. Patients' contentment with nursing services gained considerable importance, due to the nature of nursing. The nurses work more closely with the patients than other healthcare professional. The patient, therefore, can judge the overall quality of hospital services on the basis of his insight to nursing care received. Patients' contentment is an important measure of service quality in health care systems. Patients' perception to health care system seem to have been mostly unnoticed by health care administrators in developing countries [6]. Furthermore, in our setting there is a need of empirical evidences on this subject of investigation. Therefore, this study was designed to evaluate the patient contentment with nursing care.

Objectives

To assess the overall patient contentment with nursing care.

MATERIALS AND METHODS

Study design

The present research study was conducted using comparative descriptive study design. This study was conducted in Ludhiana. The current study was conducted in two Government hospitals and two Private hospitals; which are the main healthcare facilities of the selected area.

Sample and sampling

The present study was conducted on 1000 indoor patients admitted four types of general wards (medical,

surgical, orthopedics and maternity) of each selected hospital. Study sample of 1000 patients was selected using convenient sampling technique, where 250 patients were selected from four different wards i.e. medical, surgical, orthopedics and maternity.

Inclusion Criteria

In current study only patients recruited who were of more than 18 years of age, conscious, had a stay of more than a week in hospital and were ready to participate in study.

Exclusion Criteria

Patients with sensory impairment, disoriented patients, patients with psychiatric illness and who were not ready to participate in study were excluded from study sample.

Tool and methods of data collection

On basis of Watson (1979), a structured interview schedule was developed eight categories of nursing care i.e. attentiveness, availability, emotional support, clinical and technical competences, interpersonal relationship, information and communication knowledge and professionalism of nurses. There were total 32 items to collect data regarding patients' contentment with nursing care, consisting of 4 items under each category of nursing care. Each statement was judged to rate on four points Likerts' scale i.e. Highly satisfied, Moderately satisfied, Uncertain, dissatisfied and to each rating 3, 2, 1, 0 score was given respectively making a total maximum score of 96 and minimum zero. Patient' overall score between 65-96 was considered as highly satisfied with nursing care, score between 33-64 considered as moderately satisfied and score between 0-32 was considered as undecided/dissatisfied

Content validity of the tool was established by looking for the inputs from five experts from the field of nursing, healthcare administration, nursing administration and patient contentment research.

Reliability of the data collection tool of patient contentment with nursing care interview schedule was computed on the data of 50 patients using split half method; it was found reliable ($r=0.91$). After minimum of one week stay in hospital, patients were interviewed head to head for data collection to know their contentment with nursing care using the developed interview schedule of patient contentment with medical care. Each patient was confidentially interviewed at their bedside as per their ease and it took about 10- 15 minutes to interview each patient. Furthermore, patients were interviewed in the absence of any of the healthcare provider of the institute but patients were given liberty to provide information in the present of their family members as per their preference.



Ethical consideration:

This was a non-experimental study; permission was obtained from Institutional Ethical Committee, competent authorities of the hospitals and departments. Furthermore, an informed consent was from each study subject and confidentiality of information and secrecy of subjects was ensured. The respondents were given freedom to participate or quit out the study without any harm or bias; furthermore, patients' comfort was maintained during interview.

Methods of data analysis:

The data was analyzed and presented using descriptive and inferential statistics. Statistics graphs, frequency tables, mean, standard deviation were used in descriptive; while in inferential statistics 't' test and chi-square tests were used as the test of significance.

RESULTS

Socio-demographic profile of patients: Socio-demographic profile of the patients under study is presented in Table 1. Total 1000 patients were selected from both government and private hospitals. Nearly half of the patients were in age group of 18 to 30 years, followed by about one fourth of the patients in the age group of 31 to 45 years. Nearly 20 percent of the subjects were in the age group of 46 to 60 years, which included 25 percent from private hospitals and 13.4 percent from government hospitals. Close to 10 percent patients are at the age group of sixty plus, which included 11 percent from private hospitals and 7 percent from government hospitals. As per gender of patients, nearly equal number of male (54.7 percent) and female (45.3 percent) patients were included in the study. Majority of the patients i.e. 84 percent were married followed by 12 percent unmarried, 2.9 percent widow/widower and one percent divorced/separated. Similar pattern was observed in both government and private hospitals.

In present study two-third of urban patients visited both government (64%) and private(66.4%) hospitals, while rural patients constituted only 34.6% in government hospitals and33.6% in private hospitals. However, few patients (1.4%) from slums only visited government hospitals. Majority of patients in government hospitals, i.e. 83 percent were metric or below educated, whereas in private hospitals only 74.6 percent patients were in this category. In government hospitals there were only 6.4 percent patients who were graduates or above, while in private hospitals this category included 7 percent patients.

Higher number of patients (34.4 percent) were illiterate, who were seeking care in government hospitals as compared to private hospitals (29.4 percent). Nearly equal percentages of non working people are seeking

Table 1.Socio-demographic profile of patients (n = 1000)

health care from government and private hospitals. Higher numbers of non-skilled people were seeking health care from government hospitals (40.8 percent) as compared to private hospitals (20.4 percent). More number of professionals/businessmen was seeking health care from private hospitals (22.6 percent) as compared to government hospitals (2.6 percent). Distribution of patients as per selected socio-demographic variables such as age, educational status and occupation was not homogenous in selected Government and private hospitals.

Mean patient contentment with nursing care

Mean patients' contentment score with nursing care in selected hospitals may be perused from Table-2. It was found that in government hospitals mean percentage of patients' contentment score was 85.6 percent of the total score; while in private hospitals mean percentage of patients' contentment score was 98 percent of the total score. This shows that patients in private hospitals were more contented with nursing care as compared to government hospitals; t-test was applied to see the statistical difference in these contentment scores, this difference of patients' contentment in government and private hospitals was found statistically significant ($p < 0.001$). Level of patients' contentment with nursing care in selected government and private hospitals is illustrated in Table-3. It was found that 85.6 percent of the patients were contented with nursing care in government hospitals (45 percent highly satisfied, and 40.6 percent moderately satisfied), while in private hospitals 98 percent patients were satisfied with nursing care (67.6 percent highly satisfied, and 30.4 percent moderately satisfied). However, there were more number of patients dissatisfied with nursing care in government hospitals (14.4 percent) as compared to private hospitals (2 percent). This difference was found statistically significant ($p < 0.001$).

DISCUSSION

Patient contentment has become an important indicator to measure the quality of care rendered to the patients while in hospital. Healthcare institutes have frequently used patients' outcome as measures to evaluate the health care services provided to patients. Patient contentment surveys can help identify ways of improving nursing and health care services.

However, in our situation still there is need of empirical evidences on this subject of inquiry. Therefore, this study was designed to assess the patient contentment with nursing care. It was found that in government hospitals mean percentage of patients' contentment score was 75.8 percent of the total score; while in private hospitals mean percentage of patients' contentment score was 83.8 percent of the total score.



Socio-demographic Variables	Hospitals		Total	x ²
	Governmentn=500	Privaten=500		
	f (%)	f (%)	f (%)	
Age (in Years)*				
18-30	247 (49.4)	205 (41.0)	452 (45.2)	42.655
31-45	151 (30.2)	114 (22.8)	265 (26.5)	d.f.=3
46-60	67 (13.4)	126 (25.2)	193 (19.3)	p<0.01
>60	35 (07.0)	55 (11.0)	90 (9.0)	
Gender				0.472
Male	279 (55.8)	268 (53.6)	547 (54.7)	d.f.=1
Female	221 (44.2)	232 (46.4)	453 (45.3)	p=0.473
Marital Status				6.702
Unmarried	62 (12.4)	58 (11.6)	120 (12)	d.f.=3
Married	418 (83.6)	422 (84.4)	840 (84)	p=0.081
Divorced/Separated	8 (1.6)	3 (0.6)	11 (1.1)	
Widow/Widower	12 (2.4)	17 (3.4)	29 (2.9)	
Habitat				6.102
Rural	173 (34.6)	168 (33.6)	341 (34.1)	d.f.=2
Urban	320 (64.0)	332 (66.4)	652 (65.2)	p=0.046
Slum	7 (1.4)	0 (0)	7 (0.7)	
Educational Status				114.5
Illiterate	172 (34.4)	147 (29.4)	319 (31.9)	d.f.=6
Primary	62 (12.4)	48 (9.6)	110 (11.0)	p<0.01
Middle	98 (19.6)	55 (11)	153 (15.3)	
Metric	83 (16.6)	114 (22.8)	197 (19.7)	
10+2	53 (10.6)	92 (18.4)	145 (14.5)	
Graduate	26 (5.2)	34 (6.8)	60 (6)	
Postgraduate	6 (1.2)	10 (2)	16 (0.16)	
Occupation				95.321
Non working	231 (46.2)	244 (48.8)	475 (47.5)	d.f.=3
Non skilled	204 (40.8)	102 (20.4)	306 (30.6)	p<0.01
Skilled	52(10.4)	41 (8.2)	93 (9.3)	
Professional /Business	13 (2.6)	113 (22.6)	126 (12.6)	

* Mean age of government hospital patients= 35.24 ± 13.40

* Mean age of private hospital patients = 40.76 ± 16.35

* Mean age of overall total patients = 38.20 ± 15.27

Table 2. Mean patients' contentment score with nursing care in selected hospitals (n = 1000)

Satisfaction score	Hospitals		Total	t-value, dt,p
	Governmentn=500	Privaten=500		
Mean^s ± SD	64.88 ± 21.36	80.83 ± 15.88	72.81 ± 20.52	14.724, 1198
Mean Percentage Score	68.1	83.8	75.8	p<0,001

Max Score: 96, Minimum score: 0, Highly contented: 65- 96, Moderately contented: 33-64, Uncertain: 8-3, discontented: 0-7
 \$: Mean contentment score with nursing care

Table 3. Level of patients' contentment with nursing care (n = 1000)

Level of contentment	Hospitals		Totaln (%)	x ² , dt, p
	Governmentn=500	Privaten=500		
Highly contented	225 (45.0)	338 (67.6)	563 (56.3)	75.042
Moderately contented	203 (40.6)	152 (30.4)	355 (35.5)	
Uncertain/discontented	72 (14.4)	10 (2.0)	82 (8.2)	

This shows that patients in private hospitals were more contented with nursing care as compared to



government hospitals; t-test was applied to see the statistical difference in these contentment scores, this difference of patients' contentment in government and private hospitals was found statistically significant ($p < 0.001$). The patients recruited from selected private and Government hospitals were significantly different as per their age, educational status and occupation. These variables are considered as potent contributing factors in contentment; however this was not explored in current study. In government (85.6 percent) as well as private hospitals (98 percent) patients reported high level of contentment with nursing care. This difference was found statistically significant ($p < 0.001$). In general, studies of patients' contentment with nursing care have demonstrated high contentment as it was found in current study. In Indian literature, patients' contentment with nursing care was reported as high as greater than ninety percent by Poonam Joshi (2002), [7] Bhattacharya (2003), [8] Kapzawni (2004), [9] Shalini Kaushal (2005), [10] Sushma Kumari (2005) [11] and Achala (2007). [12] Iyer A *et al.*, (1996) [13] also found high level of contentment with care provided by doctors (88.6 percent) and nurses (91.9 percent).

Explanation of high level of contentment among patients in government hospitals was provided by mentioning that only the poor, migrated population, less

educated, and occupation of more in non-skilled category visited the government hospitals, besides, their own daily living conditions are several times poorer than the general conditions existing in the Government hospitals. As such they feel grateful to whatever care comes in their way. Current study compared patients' contentment with nursing care in government and private hospitals, where patients in private hospitals were more satisfied with nursing care as compared to government hospitals. Similar findings reported by one Indian study (Sreenivas and Prasad (2003) [14], where it was found that patients were more satisfied in corporate managed hospitals, followed by private hospitals, while there was least contentment among patients in government hospitals. Findings were further supported by Taner and Antony (2006) [15] and Andaleeb (2000) [16].

The overall patient contentment with nursing care was high in selected Government as well as private hospitals. However, it was found communication and emotional support dimension of nursing care needs improvement to further enhance patients' contentment with nursing care in selected Government and private hospitals. Therefore, it is recommended to plan and implement the training programs needed for nurses to improve their knowledge and skills of communication and use of emotional support measures for the patients.

REFERENCES

1. Han CH, Connolly PM, Canham D. (2003). Measuring patient satisfaction as an outcome of nursing care at a teaching hospital of southern Taiwan. *J Nurs Care Qual*, 18(2), 143-50.
2. Taylor C, Lillis C, Lemone P. (1977). *Fundamentals of nursing*. 3rd ed. Lippincott, 110-112.
3. Ware JE, Davies-Avery A, Stewart AL. (1978). The measurement and meaning of patient satisfaction. *Health Med Care Serv Rev*, 1(1), 3-15.
4. Marquis MS, Davies AR, Ware JE. (1983). Patient satisfaction and change in medical care provider: a longitudinal study. *Med Care*, 21, 821-829.
5. Aharony L, Strasser S. (1993). Patient satisfaction: what we know about and what we still need to explore. *Med Care Rev*, 50, 49-79.
6. Tzeng MH, Ketzians S, Redman WR. (2002). Relationship of Nurses assessment of organizational culture, job satisfaction and patient satisfaction with nursing care. *Intl J of Nursing studies*, 39, 79-84.
7. Joshi P. (2002). A study to find out the level of parents' satisfaction with paediatric nursing care, whose children are admitted in Paediatric units of a selected hospital in Delhi. An unpublished thesis of the University of Delhi.
8. Bhattacharya A, Menon P, Koushal V, Rao KLN. (2003). Study of Patient Satisfaction in a Tertiary Referral Hospital. *Journal of the Academy of Hospital Administration*, 15(1), 1-6.
9. Kapzawni. (2004). A study to identify the level of satisfaction of mothers with postnatal care received and its relationship with selected factors in a selected hospital of New Delhi. An unpublished thesis of the University of Delhi.
10. Kaushal S. (2005). A Descriptive Study on Level of Patient Satisfaction with Nursing Care in Nehru Hospital, PGIMER, Chandigarh. An unpublished thesis of the Punjab University.
11. Kumari S. (2006). A comparative study of nursing services in selected hospitals of Punjab, Haryana and Chandigarh in Punjab. Unpublished thesis of Department of Public Administration, Panjab University.
12. Achala. (2007). A study to assess the level of parent's satisfaction with paediatric nursing care and nurses' department for hospitalized children and seek its relationship with selected factors in pediatric units of a selected government hospital in Delhi. An unpublished thesis of the University of Delhi.
13. Iyer A, Jesani A, Karmarkar S. (2000). Patient satisfaction in the context of socio-economic background and basic hospital facilities: A Pilot study of indoor patients of the Lokmanya Tilak Municipal general hospital, Mumbai. *Hospital Administration*, 14(2), 17-21.



14. Sreenivas T, Prasad G. (2003). Patient Satisfaction - A Comparative Study. *Journal of the Academy of Hospital Administration*, 15(2), 7-12.
15. Taner T, Antony J. (2006). Comparing public and private hospital care service quality in Turkey. *Int J Health Care QualAssurIncLeadersh Health Serv*, 19(2-3), i-x.
16. Andaleeb SS. (2001). Service quality perceptions and patient satisfaction: a study of hospitals in a developing country. *SocSci Med*, 52(9), 1359-1370.

