

## Patients' Satisfaction with Nursing Care Quality in Medical Wards at Selected Hospital in Chennai, South India

### Abstract

**Background:** Patient satisfaction is currently accepted as an outcome criteria and standard instrument to gauge the quality of nursing care. The aim was to assess the level of patients' satisfaction with nursing care quality in medical wards. **Materials and Methods:** A cross-sectional descriptive study was conducted with 124 samples in medical wards of a tertiary care teaching hospital in South India in 2016. Convenience sampling technique was adopted. Self-administered "Patient Satisfaction with Nursing Care Quality Questionnaire" (PSNCQQ) was used to collect data on the day of discharge. The analysis was done by frequency, percentage, mean, standard deviation, independent t-test, and ANOVA. **Results:** Out of 124 participants, the level of satisfaction was excellent for 28.23%, very good for 58.06% and good for 13.71% with regards to overall quality of nursing care in medical wards. The mean (SD) value for overall patients' satisfaction with nursing care quality was 78.88 (4.84) out of 95 with the mean percentage of 83.03% which shows excellent patient satisfaction. The patients' perception component mean (SD) 18.35 (5.09) gained highest satisfaction than nurses' communication and nursing care components. The satisfaction of nursing care mean (SD) 46.46 (3.38) was higher than satisfaction of nurses' communication mean (SD) at 32.42 (2.57). **Conclusions:** The patients admitted and treated in medical wards were most satisfied with nursing care quality they received. The results showed that the communication component can be improved. There was no statistically significant association between patient satisfaction of nursing care quality and background variables.

**Keywords:** India, nursing, nursing care, patient satisfaction

### Introduction

Patient satisfaction is a criteria to gauge the quality of care. Even though patient satisfaction is dynamic and difficult to define, it is the sole indicator to measure the success of care delivery.<sup>[1]</sup> Hospitalized patients are the main health care consumers who spread the good image about the hospital and organization to society. The patient satisfaction further facilitates efficient hospital management.<sup>[2]</sup> There are many number of patients admitted to the medical wards. Environmental and vector factors contribute to the flow of patients in these settings.<sup>[3]</sup> It was identified that in medical wards the overall patient satisfaction was less compared to surgical wards due to increased interaction and technical nursing activities in the surgical wards, which was comparatively less in the medical wards.<sup>[4]</sup> The basic needs of patients were well met in out-patient departments

than in the in-patient departments because, the duration of hospital stay is lengthier in hospitalized patients. Hence, gaining patient satisfaction in hospitalized patients is considered as an important indicator of quality care.<sup>[5]</sup>

The patients' satisfaction with nursing care quality evaluates the met and unmet needs of patients, enables to identify the gap in nursing interventions and helps to uplift the care quality within the organization. Nurses are the health care providers who monitor and take care of the patients round the clock in a hospital, and they are the key members of health care team who facilitate the hospitalized patients to adapt.<sup>[6]</sup> It is therefore imperative that nurses should know the patient expectations to improve their satisfaction.<sup>[7]</sup> Patient satisfaction can be achieved by good bed side manners, full engagement with patients, care giver communication, providing instructions

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: [reprints@medknow.com](mailto:reprints@medknow.com)

**How to cite this article:** Kannan S, Avudaiappan S, Annamalai M. Patients' Satisfaction with Nursing Care Quality in Medical Wards at Selected Hospital in Chennai, South India. *Iran J Nurs Midwifery Res* 2020;25:471-5.

**Submitted:** 06-Aug-2019. **Revised:** 08-Oct-2019.

**Accepted:** 18-Jul-2020. **Published:** 07-Nov-2020.

**Shanmugapriya Kannan<sup>1</sup>,  
Seethalakshmi Avudaiappan<sup>2</sup>,  
Manjula Annamalai<sup>2</sup>**

<sup>1</sup>Department of Medical Surgical Nursing, College of Nursing, Jawaharlal Institute of Postgraduate Medical Education and Research, Gorimedu, Dhanvantri Nagar, Puducherry, India, <sup>2</sup>Department of Nursing Foundation, Faculty of Nursing, Sri Ramachandra Medical College and Research Institute, Porur, Chennai, Tamil Nadu, India

### Address for correspondence:

Shanmugapriya Kannan, Nursing Tutor, Department of Medical Surgical Nursing, College of Nursing, Jawaharlal Institute of Postgraduate Medical Education and Research, Gorimedu, Dhanvantri Nagar, Puducherry - 605 006, India.

E-mail: [shan\\_priya1707@yahoo.com](mailto:shan_priya1707@yahoo.com)

### Access this article online

Website: [www.ijnmrjournal.net](http://www.ijnmrjournal.net)

DOI: 10.4103/ijnmr.IJNMR\_142\_19

### Quick Response Code:



effective use of language and efficient leadership which are the primary requisites for quality patient care.<sup>[8]</sup> Patient's expectations range from routine nursing care to informational, emotional, spiritual, and personal support from nursing personnel during their hospital stay.<sup>[9]</sup>

The overall patient satisfaction was positively influenced by continuous information provided by the nurses regarding the delayed care in emergency department.<sup>[10]</sup> Nurse's communication skills, performance and their emotional support improved patient satisfaction in medical, surgical, orthopedic, and maternity wards in India.<sup>[8,11]</sup> Clear communication, explanation before nursing procedures, and information on patient's condition also had a positive influence on satisfaction.<sup>[12]</sup>

Patients from North Ethiopia were satisfied with freedom in wards, nurse's manners, nursing care which was provided based on individual needs and the nurse's ability to carry out the given task. Dissatisfaction was found on amount of information shared by nurses to patients and on discharge instructions.<sup>[13]</sup> A study conducted in public hospitals of Chennai showed that patient experience on education and information obtained in hospital is appreciable compared to care coordination, emotional support, continuity and transmission and physical comfort. The same study recommended determination of patient satisfaction in the private sector. Therefore, the current study aimed to find patient satisfaction in private sector medical wards in Chennai.<sup>[14]</sup>

## Materials and Methods

This cross-sectional descriptive study was conducted from July 11 to August 10, 2016. The study was conducted in male and female medical wards of a tertiary care teaching hospital in South India. The target population were patients admitted to the male and female medical wards. The accessible population were patients who met inclusion criteria. Totally, 124 Samples were selected by hypothesis testing for single proportion with power 80%, alpha error 5%. Convenience sampling technique was adopted. Data was collected from these patients on the day of discharge. Patients with severe pain (pain score 7-10), chronically ill/very sick/disoriented altered conscious level were excluded. The tool used was 'Patient Satisfaction with Nursing Care Quality Questionnaire' PSNCQQ which is a 5-point rating scale with 23 items under 3 components. Nurses' communication consisted of 8 items, nursing care 11 items and patients' perception 4 items. Patients' perception component was excluded as it consisted of general questions was subjective and not directly related to nursing. Overall patient satisfaction was calculated from nurses' communication and nursing care components of 19 items with 5 point rating (Excellent –score 5, Very good-score 4, Good-score 3 Fair-score 2, Poor-score 1) reverse scoring for each questions with the total score of 95. The score interpretation was <19 poor, 20–38 fair, 39–57 good, 58–76

very good, 77–95 excellent). The instrument was translated and back translated into Tamil language and validated by 2 internal and 3 external experts. Written permission was obtained from the author Prof. Heather K. Spence Laschinger. Reliability was established by Cronbach's alpha test which was 0.97. The investigator collected responses from the samples after obtaining oral and written informed consent. The participants were informed about the voluntary nature of participation, confidentiality and that they could withdraw from the study at any time. Approval for the conduct of the study was obtained from the institutional ethics committee. Data were grouped and analyzed by SPSS software (IBM) (version 17, SPSS Inc, Chicago, IL, USA) and at *p* value 0.05 for the level of significance.

## Ethical considerations

Institutional ethics committee (ref no: CSP/16/JAN'/45/72), Sri Ramachandra University and Research Institute, Chennai, India. The authors certify that they have obtained all appropriate patient consent.

## Results

The demographic characteristics [Table 1] showed that about 50.81% of the study participants were female and 73.39% were married. 73.39% were educated and 71.77% were employed. 43.55% were from urban and 64.52% were belonged to nuclear family. The results of present study revealed that nearly half 58.06% were new patients and 49.19% had direct admission. Among them 29.8% were partially dependent and 22.58% were totally dependent on others. 70.97% of the patients received care within nominal charges. 95.16% had planned discharge and only 4.83% discharged on request due to family commitment, job, and childcare.

Table 2 explained overall patients' satisfaction with nursing care quality (nurse's communication and nursing care components) 28.23% of them expressed excellent satisfaction, 58.06% expressed very good satisfaction and 13.71% had good satisfaction. None of them rated poor. Table 3 explained the mean scores of overall Patients' Satisfaction with Nursing Care Quality. It revealed that the mean (SD) score of overall patients' satisfaction with nursing care quality was 78.88 (4.84) with mean percentage 83.03%. The mean (SD) 18.35 (5.09) score with mean percentage 91.75% was high in the component of patient perception, followed by mean (SD) 46.46 (3.38) of nursing care with mean percentage 84.47% and mean (SD) 32.42 (2.57) value of communication by the nurses with mean percentage 81.05%. Table 4 depicted the distribution of level of patient satisfaction with nursing care quality by item under 5-point rating scale. No one rated poor component and very few rated fair under nurse's communication. Fair satisfaction found for not giving

**Table 1: Distribution of Patients According to Background Variables (n=124)**

Demographic Variables	n (%)
Age	
21-30	21 (16.94)
31-40	18 (14.52)
41-50	32 (25.81)
51-60	27 (21.78)
≥61	26 (20.97)
Gender	
Male	61 (49.22)
Female	63 (50.81)
Education	
No formal education	35 (28.23)
Primary	34 (27.42)
Secondary	33 (26.61)
Graduation/Post Graduation	22 (17.74)
Occupation	
Semi officials & Managers	4 (3.23)
Professionals	9 (7.26)
Technician and professionals	7 (5.64)
Clerks	9 (7.26)
Service/shop/market workers	11 (8.87)
Agriculture and Fishery	9 (7.26)
Plant and Machine Operators	12 (9.68)
Unskilled workers	28 (22.58)
Unemployed	35 (28.23)
Type of Family	
Joint family	33 (26.61)
Nuclear family	80 (64.52)
Single parent family	11 (8.87)
Place of residence	
Rural	37 (29.84)
Urban	54 (43.55)
Semi-urban	33 (26.61)
Monthly family income (\$)	
≤152	64 (51.61)
153-303	34 (27.42)
≥304	26 (20.97)
No. of previous admission	
0 times	72 (58.06)
1-2 times	28 (22.58)
3-4 times	12 (9.68)
≥5 times	12 (9.68)
Length of stay in hospital	
≤3 days	27 (21.78)
4-6 days	55 (44.35)
>7 days	42 (33.87)

**Table 1: Contd...**

Demographic Variables	n (%)
Type of admission	
Direct admission	61 (49.19)
Through emergency department	29 (23.39)
Transfer in	34 (27.42)
Method of payment	
Private Insurance coverage	26 (20.97)
Chief minister insurance scheme	10 (08.06)
Free patient category	88 (70.97)
Patient's dependency level	
Independent	59 (47.58)
Partially dependent	37 (29.84)
Totally dependent	28 (22.58)
Type of discharge	
Planned	118 (95.16)
Against medical advice	6 (04.83)

adequate instruction before nursing procedures, during discharge, follow up after discharge.

### Discussion

Nursing care quality is considered as one of the desired outcomes of Overall health care quality. Good care attracts and keeps the client satisfied, recommends more patients for treatment and to improve the impression of the organization as a service provider. Quality is expected in any hospital to attract the patients. Studies conducted on patient satisfaction revealed that number of background variables had association with patient satisfaction like age, sex, educational status, marital status, income, etc. It is interesting that there was no statistically significant association between patients' satisfaction with nursing care quality and the background variables in the present study. This study was supported by a similar study findings conducted by Alsaqri at Hail, Saudi Arabia in three tertiary care settings, among 87 patients and 90 head nurses by convenient sampling revealed that the nurse's caring behavior and patients' satisfaction had no correlation and they were not associated with demographic variables.<sup>[15]</sup> Comparable to the study conducted in North India among 140 patients found that the patient satisfaction did not have any association with patient's demographic variables like age, gender, means of admission, length of stay, prior admission, and patient's health status before admission except age.<sup>[16]</sup> Similarly, the study conducted in Thiruvananthapuram, at Kerala state suggested that background variables like sex, marital status, education, income, length of stay in the hospital and previous admission did not affect patients' satisfaction.<sup>[17]</sup> The other study also concluded that patients' satisfaction did not correlate with nurse's performance.<sup>[3]</sup> As few of them rated fair satisfaction on

Contd...

**Table 2: Overall Patients' Satisfaction with Nursing Care Quality (n=124)**

The PSNCQ and Its Components	Excellent n (%)	Very Good n (%)	Good n (%)	Fair n (%)	Poor n (%)
Components:					
Nurse's Communication	27 (21.80)	77 (62.40)	19 (15.20)	01 (0.60)	-
Nursing care	41 (33.40)	67 (54.40)	16 (12.20)	-	-
Patients' Perception	67 (54.40)	48 (38.50)	09 (07.06)	-	-
Overall patients' satisfaction with nursing Care quality*	34 (28.23)	72 (58.06)	17 (13.71)	-	-

\*The overall patients' satisfaction with nursing care quality included nurses' communication and nursing care components except patients' perception component

**Table 3: Mean (SD) Scores of overall Patients' Satisfaction with Nursing Care Quality (n=124)**

Tool Components (23 questions)	Min-Max Score Obtained	Mean (SD)	Mean %
Nurses' communication (8 questions)	24 to 40	32.42 (2.57)	81.05
Nursing care (11 questions)	34 to 55	46.46 (3.38)	84.47
Patients' perception (4 questions)	15 to 20	18.35 (5.09)	91.75
Overall patients' satisfaction with nursing care quality (8 + 11=19 questions)*	58 to 95	78.88 (4.84)	83.03

\*Overall patients' satisfaction with nursing care quality included nurses' communication and nursing care components except patients' perception component. Min - Minimum, Max - Maximum, SD - Standard deviation

**Table 4: Distribution of Level of Patient Satisfaction with Nursing Care Quality by Items. n=124**

Nursing Care by Items	Excellent n (%)	Very Good n (%)	Good n (%)	Fair n (%)	Poor n (%)
<b>A. Nurses' Communication</b>					
Information given to patients by nurses	41 (33.06)	78 (62.90)	5 (4.03)	-	-
Instruction given by nurses to patients before procedure	41 (33.06)	75 (60.48)	7 (5.64)	1 (0.80)	-
Ease of getting information from nurses by the patient	27 (21.77)	94 (75.80)	3 (2.42)	-	-
Information given by nurse to patients, families and doctors	32 (25.81)	71 (57.25)	21 (16.94)	-	-
Nurse informing family about patient's condition	13 (10.48)	96 (77.42)	15 (12.10)	-	-
Recognition given to patients need by nurse	36 (29.03)	65 (52.42)	23 (18.55)	-	-
Discharge instructions given by nurses to the patient	14 (11.29)	72 (58.06)	36 (29.03)	2 (1.61)	-
Coordination of nursing care after discharge	12 (9.68)	68 (54.84)	41 (33.06)	3 (2.42)	-
<b>B. Nursing Care</b>					
Involvement of family in patient care	18 (14.52)	65 (52.42)	41 (33.06)	-	-
Care and concern shown by nurse	50 (40.32)	58 (46.77)	16 (12.90)	-	-
Attention by nurse towards patients' condition	42 (33.87)	69 (55.65)	13 (10.48)	-	-
Consideration of patient's need by nurse	48 (38.71)	67 (54.03)	9 (7.26)	-	-
Adjustment of nurses daily routine to patient's need	28 (22.58)	83 (66.94)	13 (10.48)	-	-
Helpful attitude of nurse towards patient	61 (49.19)	55 (44.35)	8 (6.45)	-	-
Nursing staff's response to patient's call	61 (49.19)	57 (46.97)	6 (4.80)	-	-
Skill and competence of nursing staff	32 (25.80)	68 (54.84)	24 (19.35)	-	-
Co-ordination of care with other hospital staff	51 (41.13)	64 (51.61)	9 (7.26)	-	-
Provision of restful environment by nurse	46 (37.10)	68 (54.84)	10 (8.06)	-	-
Provision of privacy by nurses	19 (15.32)	88 (70.97)	17 (13.71)	-	-
<b>C. Patients' Perception</b>					
Overall quality of care, services received during hospital stay	67 (54.0)	55 (44.35)	2 (01.61)	-	-
Overall quality of nursing care received during hospital stay	85 (68.55)	37 (29.84)	2 (01.61)	-	-
In general, would you say your health is:	31 (25.0)	62 (50.0)	31 (25.0)	-	-
	<b>Strongly agree n (%)</b>	<b>Somewhat agree n (%)</b>	<b>Agree n (%)</b>	<b>somewhat disagree n (%)</b>	<b>strongly disagree n (%)</b>
Based on nursing care I received, I would recommend this hospital to my family and friends.	86 (69.35)	38 (30.65)	-	-	-

Note: - Not rated by the patients

nurse's communication, it can be improved by providing simple soothing talk with patients in their local language, explaining the procedures, providing adequate instructions and clearing their doubts. In India, the condition of patient

is explained by physician to the relatives and the nurse's part in this is very limited.

The limitations were that the responses were subjective, care provider related factors like nurse's education, experience, job satisfaction, salary, nurse-patient ratio, environmental factors, and hospital supportive services were not included in this study. The recommendations are to replicate the study with larger samples, interventional studies can be carried out in multiple settings, and patient satisfaction can be compared with different settings in the same hospital.

## Conclusions

The patients admitted and treated in medical wards were most satisfied with nursing care quality. Nurses need to improve communication skills in providing adequate information, before performing procedures, during discharge, and coordinating care after discharge from hospital.

## Acknowledgments

The authors would like to express the gratitude to the patients who participated in this study (approved project no: CSP/16/JAN/45/72).

## Financial support and sponsorship

Nil.

## Conflicts of interest

Nothing to declare.

## References

1. Al-Abri R, Al-Balushi A. Patient satisfaction survey as a tool towards quality improvement. *Oman Med J* 2014;29:3-7.
2. Ghose S, Adhish V. Patient satisfaction with medical services: A hospital-based study. *Health Popul Perspect Issues* 2011;34:232-42.
3. Gerensea H, Solomon K, Birhane M, Medhin BG, Mariam TH, Guesh K, *et al.* Quality of nursing care in-patient of medical-surgical ward in Axum St. Hospital, Tigray, Ethiopia. *Enz Eng* 2015;4:1-5. doi: 10.4172/2329-6674.1000132.
4. Soliman HM, Kassam AH, Ibrahim AA. Correlation between patients' satisfaction and nurses' caring behaviors. *J Biol Agric Health Care* 2015;5. Retrieved from: <https://www.iiste.org/Journals/index.php/JBAH/article/view/19532/19894>.
5. Kvist T, Volutilainen A, Mantynen R, Julkunen KV. The relationship between patients' perceptions of care quality and three factors: Nursing staff job satisfaction, organizational characteristics and patient age. *BMC Health Serv Res* 2014;14:466.
6. McHugh DM, Stimpfel AW. Nurse reported quality of care: A measure of hospital quality. *Res Nurs Health* 2012;35:566-75.
7. Kalyani MN, Kashkooli RI, Molazem Z, Jamshidi N. Qualitative inquiry into the patients' expectations regarding nurses and nursing care. *J Adv Nurs* 2014;2017:1-6. doi: 10.1155/2014/647653.
8. Freitas JSD, Silva AEBC, Minamisava R, Benzerra ALQ, Sousa MRG. Quality of nursing care and satisfaction of patients attended at a teaching hospital. *Rev Lat Am Enfermagem* 2014;22:454-60.
9. Zakerimoghadam M, Sadeghi S, Ghiyasvandian S, Kazemnejad A. The effect of trauma intervention on the satisfaction of patients admitted to the emergency department: A clinical trial study. *Iran Red Crescent Med J* 2016;18:e26452. doi: 10.5812/ircmj.2645.
10. Messina G, Vencia F, Medheroni S, Dionisi S, Baragatti L, Nante N. Factors affecting patient satisfaction with emergency department care: An Italian rural hospital. *Glob J Health Sci* 2015;7:30-9.
11. Sharma SK, Kamra PK. Patient satisfaction with nursing care in public and private hospitals. *Nurs Midwifery Res J* 2013;9:130-41.
12. Ahmed T, Assefa N, Demisie, Kenay A. Level of adult patients' satisfaction with nursing care in selected public hospitals in Ethiopia. *Int J Health Sci* 2014;8:371-9.
13. Eyasu KH, Adane AA, Amdie FZ, Getahun TB, Biwota MA. Adult patients' satisfaction with inpatient nursing care and associated factors in an Ethiopian Referral Hospital, Northeast Ethiopia. *J Adv Nurs* 2016;2016:1-7. doi: 10.1155/2016/630861714.
14. Ross DS, Venkatesh R. Patient experience: A key instrument in analyzing patient satisfaction in public hospitals in Chennai. *Indian J Sci Technol* 2016;9:1-7. doi: 10.17485/ijst/2016/v9i47/104135.
15. Alsaqri S. Patient satisfaction with quality of nursing care at government hospitals, Hail City, Saudi Arabia. *J Biol Agric Healthc* 2016;6:128-42.
16. Twayana S, Adhikari RH. Patient's perception regarding nursing care at inpatient department of hospitals in Bhaktapur district. *Int J Sci Res Publ* 2015;5:1-3.
17. Rajeswari T. A study to assess patient's satisfaction with quality of nursing care. 2011. Retrieved from: <http://dSPACE.sctimst.ac.in/jspui/bitstream/123456789/1607/1/481.pdf>.