IN-PATIENT SATISFACTION AND ITS RELATED FACTORS IN TALEGHANI UNIVERSITY HOSPITAL, TEHRAN, IRAN

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ABSTRACT

Objective: Patient satisfaction survey is an instrumental component in hospital's quality of care monitoring in relation to cost and services. This study was conducted to evaluate patient satisfaction and its related factors.

Methodology: A cross sectional study was performed between April 2006 and August 2006. Sample size was determined as 476 from 5021 by randomized sampling in several phases according to the proportion of hospitalized patient. Participants were interviewed privately face to face in the hospital at discharge time. Interviews were conducted by trained interviewers using pre tested questionnaires. Correlation between variables was estimated by using Pearson's Correlation.

Results: The majority, 83% of patient was quite satisfied with their care and 1% was dissatisfied. About 91% of patients were most satisfied with physician communication and treatment. Only 27% of patients were satisfied with nutrition status. There was no relationship between age, education and total satisfaction. Percentage of patient faithfulness and recommendation for this hospital to their friends was 66% and 65% respectively. Both male and female patients whose hospital stay was between 11-15 days were more satisfied with the service provided.

Conclusions: In general, patients were quite satisfied with their hospital care. More studies such as this survey are required to improve the quality of care and overall health cares outcome.

KEY WORDS: Satisfaction, Patient, Hospital, Care, Safety, Nurse, Physician.

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INTRODUCTION

Measurement of patient satisfaction is expected to play an increasingly important role in the growing push toward accountability among health care providers overshadowed by measures of clinical processes and outcomes in the quality of care equation.¹ Patient satisfaction finding regarding inpatient and ambulatory care play a significant role in hospitals strategies and tactics in delivering patient services.2 Patient satisfaction survey is an instrumental component in hospital's quality of care monitoring, in relation to cost and services. Many studies have been done throughout the world to determine the patient satisfaction and its related factors.3-5 In a study conducted in Turkey, satisfaction with physicians, nurses, equipment and food services were the main determinants of overall satisfaction in

hospitalized patients.^{6,7} Gender, sex and education play a major role in patient satisfaction.⁷ In Iranian surveys, satisfaction level of patients who were treated by male doctors was greater than females and an inverse relationship between patient satisfaction and education was observed.^{3,8} There is a lack of studies about patient satisfaction among patients admitted in hospitals in Tehran. Therefore the aim of this study was to find out patient satisfaction with care in one teaching hospital in Tehran and explore the associated factors. It is the third such study done in Iran. Finding from this study will be presented to national authorities to be used as a framework to improve health services.

METHODOLOGY

This cross sectional study was based on inpatients who were admitted in the Taleghni hospital between April 2006 and August 2006. Sample size was determined as 476 from 5021 by randomized sampling in several phase. Sample sizes in each ward were according to the proportion of hospitalized patient. Participants were interviewed privately face to face in the hospital at discharge time. Interviews were conducted by trained interviewers using pre tested questionnaires. The study protocol was approved by the independent Ethics Committee and was conducted in accordance with the deceleration of Helsinki guidelines.

All patients provided written informed consent before screening. The Verona service satisfaction scale VSSS-329 was modified for this survey in Iranian patient. The modified questionnaire was in parts: demographic characteristics, personal manners of nurses and social workers, physician's treatment and communication, nutrition status, comfort and cleanliness of the facility, patient faithfulness and recommendation of this hospital to their friends. The statistical package for the social science (SPSS, Chicago, IL, USA) was used for data analysis. Distribution of patient assessments in twenty main satisfaction components was analyzed by descriptive statistics.

Summing up the values of each question in all samples was followed by comparison to total scores (2380). Overall satisfaction were constructed by summing the value of each item according to Likert scale very poor =1, poor =2, neither good nor poor=3, good=4, very good=5). According to Likert score the range of 1904-2380 is considered as very good^{4,5} and 1428-1904 as good,^{3,4} 952-1428 as a bad score^{2,3} and 952-476 as a very bad score.^{1,2} Question numbers of 1-3, 5-8, 10-14, 16-17 and 19-20 were in the satisfied zone and 9, 15 and 18 were in the dissatisfied zone.^{2,3} This finding was presented by percentage. Correlation between total satisfaction and Patient's age, education was estimated by using Pearson's Correlation.

RESULTS

Over 30% of the participants (n = 141) were in age group 21-30 years and 54% were female. Mean age was $(40.4 \pm 17.2 \text{ years})$ and range = 74 years). The majority 83% of patient were quite satisfied with their care and 1% was dissatisfied. Both male and female patients whose hospital stay was between 11-15 days were more satisfied. Distribution of patient assessment in twenty main satisfaction components is presented in (Table-I).

Almost 91% of patients were most satisfied with physician communication and treatment. Only 27% of patients were satisfied with nutrition status. There was no significant relation between age, education and total satisfaction. Percentage of patient faithfulness and recommendation of this hospital to their friends was 66% and 65% respectively. Total score for each question was 2380. Patient whose hospital stay was less than five days were more dissatisfied than patient hospital stay of 11-15 days and patient with a hospital stay over 16 days were dissatisfied with hospitalization in both sexes. We found that patients with longer hospital stay were very tired of hospital atmosphere whereas those with short stay were quite satisfied with the services provided.

Table-I: Distribution of patient assessment in twenty main satisfaction components in Ayatollah Taleghani Medical, Educational and Treatment Centre in 2006

	Components Number of Cases = 476	Very good(%)	Good(%)	Neither good nor bad(%)	Poor & very poor (%)	Mean ±SD
1.	Satisfied with Duration of address finding	82	5	8	5	3.59±1.01
2.	Satisfied with Duration of reception	75	10	10	5	3.52 ± 1.01
3.	Satisfied with reception staffs overall	84	8	2	6	3.64 ± 1.05
4.	Satisfied with physician's explanation	91	6	2	1	4.07 ± 0.65
5.	Satisfied with nurses communication	90	7	2	1	3.98 ± 0.65
6.	Satisfied with night nurses care	81	11	2	6	3.69 ± 1.11
7.	Satisfied with safety during night	80	11	3	6	3.61±1.06
8.	Satisfied with ward's staff	87	11	2	0	3.86 ± 0.53
9.	Satisfied with comfort and equipment	33	26	38	3	2.83±1.3
10.	Satisfied with ward's silence	64	18	17	1	3.44 ± 0.86
11.	Satisfied with hospital's cloths	54	17	19	10	3.05 ± 1.28
12.	Satisfied with drug and instrument	62	13	13	12	3.13 ± 1.34
13.	Satisfied with quality of beds	62	18	18	2	3.35 ± 0.57
14.	Satisfied with cleanliness and facility	49	21	27	3	3.10±1.09
15.	Satisfied with nutrition status	27	18	45	10	2.43 ± 1.26
16.	Satisfied with ward healthy	81	13	6	0	3.76 ± 0.59
17.	Satisfied with treatment process	85	9	4	2	3.76 ± 0.71
18.	Boring from hospitalization	37	11	34	18	2.46 ± 1.45
19.	Telling their local health clinic about	75	5	4	16	3.2±1.49
	their future care needs					
20.	Satisfied with over all of care	72	23	5	0	3.68 ± 0.64

DISCUSSION

This study revealed that in general, patients were quite satisfied with their hospital care. This is in line with previous studies.^{3,10} Patients were most satisfied with physician communication and treatment. Findings from an earlier Iranian survey showed that satisfaction level of patients who were treated by male doctors was greater than female doctors.3 It is felt that on the whole female patients have more faith in male doctors as compared to female physicians who have many responsibilities at home as well. Only about one third of patients were satisfied with quality of food. This is in line with Annemieke et al study.7 Nursing care and safety during night, quality of hospital cloths, drugs and instrument was also assessed. In our study there was no significant relationship between age and total satisfaction. In contrast to

our finding many studies have pointed out the importance of certain variables including age which consistently shows that elderly patients are more satisfied.¹¹ Age, gender, income and formal education have shown no clear connection with the patient satisfaction. 12-14 The effect of the age variable on satisfaction was not significant in Japipaul study, but it showed interesting results. The greatest level of satisfaction was in the group 15-24 years old, then it decreased gradually and increased again in the group who were over 60 years old. 15 Finding from our study showed that there was no significant relationship between education and total satisfaction. Levels of education were inversely correlated with satisfaction in Ayatollahi study.8 In our study patients who stayed in hospital for 11-15 days were more satisfied than patient with a hospital stay of less than five days or over 16 days. Patients

may have become familiar with the hospital care as this finding is in line with the study of Bahrampour et al.³ Study by Kuosmanen et al, showed that female patients with short duration of hospitalization were less satisfied with staff's care than men.10 Gender may play a major role in patient's satisfaction as female healthcare professional's responsibilities at home may be affecting their performance thus resulting in less patient satisfaction. Hence as a strategy hospital should employ experienced nurses in the night shifts in particular who can deliver best care to patients. Since there is enough time for caring of patients in the night shift, it will significantly improve satisfaction, safety and faithfulness among patients.

Limitations of the study: There are certain limitations in this study which should be considered when the results of this study are examined. Firstly we used cross sectional data to identify relationships. Secondly only in-patients were included in this survey. Future studies using longitudinal data may provide stronger evidence of this relationship.

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