

Level of Satisfaction in Post-Operative Patients in Surgical Wards of Bahawal Victoria Hospital (BVH), Bahawalpur

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ABSTRACT

Objective: To determine the factors that affect patient satisfaction and to explore the aspects of care provided by the doctors in surgical wards of Bahawal Victoria Hospital in order to improve the overall satisfaction level of the patients.

Study Design: Descriptive / cross sectional study

Place and Duration of Study: This study was conducted at Bahawal Victoria Hospital, Bahawalpur was from March 2016 to June 2016.

Materials and Methods: A sample of 100 patients by convenient sampling technique was taken from surgical wards (S1, S2, S3, and S4) of Bahawal Victoria Hospital, Bahawalpur. Of 100 participants, 57 were males and 43 were females. Data was analyzed by using software SPSS 15.0 Demographic table frequencies and percentages were constructed.

Results: A total of 100 subjects were interviewed. Among them, 24% were highly satisfied, 75% of the subjects were moderately satisfied, and only 1% was not satisfied. A total of 93% of the patients gave positive response about ease of admission into the ward. In domain of Physical Examination, overall 86% people were fully satisfied and 14% were not satisfied.

Conclusion: Most of the patients were satisfied regarding ease of admission in the ward, behavior of doctors & nursing staff and their availability during any distress. Domains of sanitary conditions and food availability as well as its quality & hygiene need further attention.

Key Words: Patients; Satisfaction; Post-Operative; Surgical Wards

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INTRODUCTION

Patients have a legitimate and important role as evaluators of healthcare. Obtaining feedback from patients about the quality of healthcare is a powerful way to develop more patient-centered approaches to healthcare delivery by the doctors.¹

Measurement of patient's satisfaction is expected to play an increasingly important role in the growing push towards accountability among health care providers.² Patient's satisfaction as a quality improvement tool for the health care provider has been very well established; our health problems are numerous given the fact that health expenditure by the state is amongst the lowest in the world.³

Patient satisfaction is a critical health care outcome indicator and should be given focus by the hospital administrators. From a management perspective, patient satisfaction with health care is important for several

reasons: First, satisfied patients are more likely to maintain a consistent relationship with the healthcare provider. Second, by identifying sources of patient's dissatisfaction, an organization can address system weaknesses, thus improving its risk management. Third, satisfied patients are more likely to follow specific medical regimens and treatment plans. Lastly, patient satisfaction adds important information on system performance, thus contributing to the organization's total quality management.⁴

Patient's satisfaction is a degree to which the individual regards the health care services, products or the manners in which it is delivered by the provider as useful, effective or beneficial.

The definition of patients satisfaction suggested by the Wagner et al, continues to evolve. The dimensions of patient satisfaction include: Art of care, Technical quality of care, Accessibility, Convenience, Finances, Physical environment, Availabilities, Continuity of care, Efficacy and Outcome of care.

However, a working definition is the degree to which the patients' desires, expectations, goals and /or preferences are met by the health care provider and/or services.⁵

Pakistan is a low income country with rapidly growing population of 180.71 million during the year 2011-2012. Literacy remains much higher in urban areas than

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in rural areas and much higher for men than for women. Study in Pakistani population in England shows that the most dissatisfaction was with the care received from the nurses in hospital, and with information given about the treatment and conditions.

Perceptions of service quality ultimately affect customer satisfaction. People tend to be satisfied when their perception of service that they received matches their expectations. When the service falls short of expectations, they intend to be dissatisfied. Patient's reports of their hospital experiences can serve a pivotal role in the development of action plans for the improvement of services.⁶

MATERIALS AND METHODS

An observational descriptive cross-sectional type of study was carried out at BVH BWP. The duration of study was from March 2016 to June 2016. A sample of 100 patients by convenient sampling technique was taken from surgical wards (S1, S2, S3, and S4) of Bahawal Victoria Hospital, Bahawalpur. Of 100 participants, 57 were males and 43 were females.

A pre-coded questionnaire was administered in a face to face interview approach by researchers. Questionnaires were divided among researchers. Questionnaire had questions about patient's ease in getting admission in hospital, satisfaction level of patient regarding behavior of doctors and staff with patient, informational care, post-operative management, medications and general services. Patient's consent was taken beforehand.

Only postoperative patients were interviewed. There were no age or sex criteria. Those who were unwilling to participate were not interviewed. Data was analyzed by using software SPSS 15.0 Demographic table and bar charts were constructed.

RESULTS

A total of 100 subjects were interviewed. Among them, 24% were highly satisfied: 13% were males and 11% were females. 75% of the subjects were moderately satisfied: 43% were males and 32% were females. Only 1% was not satisfied.

A total of 93% of the patients gave positive response about ease of admission into the ward. In the domain of staff's behavior, 96% patients considered doctors polite with them. 77% patients confirmed that nurses were kind in their behavior while 18% patients said they were 'somewhat polite'. Only 5% of the respondents did not find them polite. Upon call, availability of the staff satisfied 88% of the patients and somewhat satisfied only 8% of the patients.

In domain of Physical Examination, overall 86% people were fully satisfied and 14% were not satisfied. Regarding maintenance of privacy 82% people were well satisfied while 9% were somewhat satisfied and 9% were not satisfied. Regarding maintenance of comfort, 90% of the patients were satisfied completely,

5% were somewhat satisfied and another 5% were unsatisfied.

Regarding participation in decisions related to treatment, 71% of the patients were satisfied whereas 22% patients said that doctor did not bother their participation in this regard and only 7% were somewhat satisfied.

In domain of Informational care, overall 45% of patients were completely satisfied. 50% were moderately satisfied and only 5% were not satisfied at all. Amongst them all, 88% of patients were completely informed about their illness before surgery whereas 10% patients were not satisfied in this case. Regarding explanation of investigations, 82% were highly satisfied, 4% were somewhat satisfied and 14% were not satisfied at all.

Regarding counseling of surgical procedure, 69% of the patients were satisfied, 10% patients were somewhat satisfied and only 21% were left unsatisfied. Regarding duration of surgery, 40% patients said that they were told beforehand whereas 50% patients stated that they were not told about it and only 10% were somewhat told. Regarding counseling for anesthesia, 63% patients were satisfied, 7% patients were somewhat satisfied and 30% were not informed. 29% patients were informed about surgical complications, 13% were somewhat informed and 58% were not informed. Regarding explanation of surgical consequences, 31% were satisfied, 16% were moderately satisfied and 53% were not satisfied at all. A handsome majority of 67% of the patients were not informed of their expected duration of stay in the ward whereas 23% were informed and 10% were somewhat informed. Explanation of post-operative precautions satisfied 60% of the patients while it did not satisfy 25% of the patients. Another 15% mentioned that somewhat precautions were told. Regarding informed consent, all of the patients were satisfied.

In the field of post-operative management; overall 83% people were fully satisfied and 17% were not satisfied. Amongst them 82% were fully satisfied, 15% were somewhat satisfied and a minority of 3% patients were not satisfied from their dressing. As regards the pain management; 77% of the patients were fully satisfied, 17% were somewhat satisfied and 6% were not satisfied at all.

In the discipline of medication, overall 14% people were fully satisfied and 38% were not satisfied. Amongst them 80% of the patients were not told about side effects of their medication, 12% were informed well enough while only 8% were not clearly aware of it. 53% of the patients said that their doctor hadn't told them of their medicines' purpose while 39% patients confirmed that their doctor had explained them the same. Rest of the 8% were somewhat told. Treatment seemed affordable to 69% and unaffordable to 15% of

the patients, it was somewhat affordable for the rest of the 21%.

In the domain of general services, overall 62% people were fully satisfied and 38% were not satisfied. Amongst them 90% of patients were satisfied with the cleanliness of their ward, 8% were somewhat satisfied and 2% were not satisfied at all. Cleanliness of washrooms satisfied 60% of the patients, 21% were somewhat satisfied and 19% were not satisfied at all. 68% patients confirmed that their bed sheet was properly changed while 32% patients did not agree to it. Regarding the comfort ability of bed, 92% of the patients were satisfied, 5% were somewhat satisfied and another 3% were not satisfied at all. 70% respondents were satisfied with the temperature of the ward, 16% were somewhat satisfied and 14% were not satisfied. Food facility was availed by mere 15% of the patients. Rest of the 85% of patients were not availing this offer.

Table No.1:

		N	Percentage
Gender	Male	57	57 %
	Female	43	43 %
Age	<20	14	14 %
	21-40	41	41 %
	41-60	36	36 %
	61-80	7	7 %
	81-100	2	2 %
Marital Status	Single	23	23 %
	Married	75	75 %
	Divorced	0	0 %
	Widows	2	2 %
Educational of the respondent	Illiterate	56	56 %
	Under-Matric	27	27 %
	Under-Graduate	13	13 %
	Graduate	3	3 %
	Post-Graduate	1	1 %
Estimated Income	<10000	60	60 %
	10000 to < 20000	29	29 %
	20000 to < 30000	5	5 %
	30000 to < 40000	6	6 %
	>40000		
History of Previous Admission	Yes	34	34 %
	No	66	66 %
Mode of Referral	Emergency	62	62 %
	Outdoor	24	24 %
	Private	14	14 %

DISCUSSION

The results of our research reveal that most of the patients being treated in BVH are highly satisfied with most of the domains at service delivering to them. Most of the patients included in our study offered good level of satisfaction with the behavior of the hospital staff.

93% of our patients were satisfied with procedure of admission into the ward and 96% responded that doctors were polite to them. These findings are in consistence with the survey conducted Castle Craig Hospital of United Kingdom, which stated that above 90% patients were satisfied with the attitude of hospital staff, including with doctors and nurses.⁷ Similarly, attitude of staff' and 'availability of staff' also are consistent with the result of a study conducted in India, 88% of our patients are satisfied with the availability of staff and 98.4% patients in India were satisfied with the promptness of service.⁸ Both results show high level at patient satisfaction.

It is therefore just to say that our hospital is at par with the United Kingdom. Indian Hospitals in patient satisfaction levels in domain of behavior of the staff. Prevalence of religious and good moral values in the society might be responsible for increasing sense of responsibility among our doctors and nurses. Religion regards the service of mankind, a highly favorable activity and this might be the single most reason behind the empathy doctors of BVH have towards their patients. These result also reflects that training of our doctors is in accordance with the principles of Behavioral Sciences.

Patients when enquired about their consent and privacy during their physical examination, most of them were satisfied both with the comfort and with privacy during examination but when compared with a study conducted in Karachi⁹ in which almost 100% of patients were satisfied with the ease of physical examination, we have 9% of patients dissatisfied with privacy and another 5% dissatisfied with comfort during physical examination. BVH is a government hospital with limited resources and very large number of patients receiving service on a daily basis. Furthermore, doctor to population ratio in our country generally and Bahawalpur specifically is less. Infrastructure and construction of our hospitals is also not perfect. These factors discomfort and breach of privacy during physical examination. Another important perspective is being a teaching hospital, many patients have to be examined, even operated on in front of trainee students. This also contributes towards patient dissatisfaction. So, this score is at least understandable. These are the factors due to which our scores in this domain are in slight contradiction with an Indian Hospital as well in which almost 100% patients were found to be satisfied with ease of location during doctor consultation.

In BVH, the domain of Informational Care is however, somewhat ignored by the staff and the results are in stark contrast when compared with those of Castle Craig Hospital in United Kingdom, the categories of participation in decision making, explanation of investigation, information about duration of surgery, explanation of surgical procedure, counseling for

anesthesia and expected duration of stay in ward all afforded handsome numbers of dissatisfied patients. The domain of International Care to the patients in accordance with the principles of Behavioral Sciences needs to be attended to in BVH. The results are suggestive of lack of training of staff to be, at least in past, responsible for patient's dissatisfaction. Low doctor to population ratio is another important player in this regard. In BVH OPD, one doctor usually has to attend to hundreds of patients daily and the time constraints with the patient. So, this problem requires attention from the doctors as well as healthcare policy makers and higher authorities.

When we compare the response of our patients about their satisfaction in the domains of medication and post-operative management with a study conducted in Ayub Medical College Pakistan, the results are quite similar, although the specifics vary.¹⁰ 80% patients in BVH were not told about side effects of medicines prescribed to them and 69% patients in Ayub Medical College complained the same. Again time constraints come into play here. Literacy rate in Pakistan is not very high compared to the western countries patients. Awareness is also only now building to some extent. The doctors thus feel little or no need to waste their time explaining medicines to the patients which is a difficult task particularly given our circumstances.

Both in BVH and Ayub Medical College, a good number of patients maintained they were not told about the purpose of their medication and their disease satisfactorily. This is also due to the very similar reasons described above. This however clearly contradicts with above 90% patients satisfied with explanations of doctors in Castle Craig Hospital UK.¹¹ High literacy rates (approaching 100%), media awareness, better understanding of illnesses and diseases, high doctor to population ratio are some of factors that come into play in this regard.

Pain managements and staff availability during post-operative pain however is commendable in BVH with 94% satisfied. This is also consistent with that in Ayub Medical College where 88.8% patients were satisfied.¹²

Patients receiving healthcare services in BVH were mostly satisfied with the general services provided by the hospital. Patients responded satisfactorily about the cleanliness of wards, temperature, living conditions and overall service. However, 19% patients were not satisfied with the cleanliness of washroom and as can be expected a good 85% patients did not avail food facility in the hospital. These findings however are consistent with study conducted in Ayub Medical College Pakistan revealing very similar results.

When, however, compared with Castle Craig Hospital, UK these scores are significantly low with 77% patients satisfied with the food and above 80% with the cleanness factors accounting for this have roots in the crowdedness of our hospitals and very limited

resources.¹³ The available resources are directed towards the very basic services and extras like cleanliness and food certainly take a back seat with the further development of the country's healthcare infrastructures, we can however hope for these condition to become better.

CONCLUSION

Most of the patients were satisfied regarding ease of admission in the ward, behavior of doctors & nursing staff and their availability during any distress, maintenance of their privacy and comfort during physical examination, participation in decision making, informed consent, post-operative care, informational care & general services provided to them. Domains of sanitary conditions and food availability as well as its quality & hygiene need further attention.

Recommendations: Health care staff should be trained for patients' care according to the principles of Behavioral sciences. Sanitary conditions should be improved. Workshops & seminars should be conducted for health care professionals to make them learn basic principles of health care. Bedding conditions of the patients should be improved. Food facility with good quality and hygiene should be made available to all patients.

Conflict of Interest: The study has no conflict of interest to declare by any author.

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