

Inpatient satisfaction at tertiary care public hospitals of a metropolitan city of Pakistan

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Abstract

Objective: To determine the satisfaction of in-patients towards quality of service provision and environment of public-sector hospitals.

Methods: The cross-sectional study was conducted in four major public-sector hospitals of Karachi from December 2010 to February 2012. The questionnaire, besides the demographic details, also had 5-point Likert scale questions regarding satisfaction of patients with doctors, staff, administration and the hospital environment. SPSS 20 was used for statistical analysis and results were expressed as frequencies with percentages.

Results: Of the 710 subjects in the study, 475(67%) agreed that their doctors checked them with concentration and care. Staff was reported as being kind natured and well-mannered by 423(59.6%) and 451(63.5%) patients respectively. However, 414(58.3%) were not pleased with the sanitary condition of the hospital. Only 225(31.7%) got comfortable beds, while 498(70.14%) patients found bugs in beds. In terms of overall satisfaction 452(63.7%) were satisfied with the staff, 463(65.2%) with doctors, and 385(54.2%) with the hospital environment.

Conclusion: Patients were relatively satisfied with the staff, but sanitary conditions and hospital environment were a concern for majority of the patients.

Keywords: Patient satisfaction, Public hospital, Doctor-patient communication, Nurses services, Hospital environment, Healthcare quality. (JPMA 64: 1392; 2014)

Introduction

Satisfaction of patients is not only an objective to be achieved by healthcare professionals, but it is also one of the desirable targets for clinical practice in order to achieve good results in terms of outcomes. It also has notable influence over patients' compliance and consequently on their use of health services.¹ A number of studies have laid emphasis on different dimensions to measure patient satisfaction. Some referred to overall quality of the hospital as the principal key for acquiring patient satisfaction.² Others reported nursing care³ and a few considered that organisational efforts play an integral part in ensuring satisfaction among patients.⁴ Nevertheless, literature has considered patient-physician communication as a successful key for adherence to treatment.^{5,6}

Inequalities in providing health facilities have been observed in many regions of the world.⁷ In Pakistan, the public sector is badly neglected and policymakers show lack of concern regarding healthcare.⁸ A few studies have already been conducted in this region to study the same aspect. However, most of them were either conducted in a single centre and worked on a single

aspect with a small sample size covering a non-representative general population or in the out-patient department (OPD) and family physician clinics.⁹ All of these studies reported a low score of satisfaction with regards to healthcare facilities in various aspects. This study was derived to get a pertinent insight about patient satisfaction towards different domains of quality services and the environment in major public-sector hospitals of Karachi, Pakistan.

Subjects and Methods

The cross-sectional study was conducted in four major public-sector hospitals of Karachi from December 2010 to February 2012. The approval was obtained from the Institutional Review Board of Dow University of Health Sciences (DUHS), Karachi. After conducting intense literature review, a questionnaire was structured and tested through a pilot survey by the principal investigator. Relevant amendments in the questionnaire were done and training to data-collectors was given. The questionnaire mainly covered 5 major sections. The first part dealt with the demographic details of the subjects which included age, gender, income level, admission duration, residence etc. The latter parts comprised 5-point Likert scale questions regarding satisfaction of patients with doctors, staff, administration and the hospital environment as a whole. These questions

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encompassed the satisfaction levels of certain parameters, including doctor-patient communication, hospital care, attitudes of healthcare professionals, outcome of patients' illness, and behaviour of the paramedic staff along with the environmental, sanitary and nutritional status in the hospitals. Any additional aspect not covered by the questionnaire was noted down at the end.

The study design was cross-sectional and convenient sampling technique was employed. The inclusion criteria comprised patients who had been admitted for at least three days who were between 18-60 years of age and those who were fully conscious to respond. Patients who were admitted to emergency department, intensive care unit/coronary care unit (ICU/CCU) and those unable to respond to the answers were excluded. Verbal informed consent was taken from each patient. Interview was conducted in the national language.

A sample size of 664 was calculated using 99% confidence interval (CI), 5% margin of error and taking previously reported proportion of satisfaction (50%)⁹. Non-response rate of 15% was added in the computed sample size and target sample size to achieve was set to be 770.

Data was entered in EpiData v. 3.1 and exported to SPSS 20. Results were expressed as frequencies and percentages. To check consistency in responses of the patients throughout the interview, Cronbach's alpha was computed for each portion and whole part of questionnaire. The measure of acceptable reliability was set if alpha exceeded the value of 0.70.

Results

A total of 770 patients were approached. Of them, 57(7.4%) refused to participate and 3(0.38%) left in the middle of the interview. Thus, 710(92.2%) patients completed the questionnaire. Out of them 325(48.5%) were males, 462(65.1%) were married, 227(32%) were illiterate, 411(57.8%) had an income of less than Rs.10,000 and 225(35.5%) communicated in Urdu language. The overall reliability of the questionnaire was 95.4% implying excellent consistency in the responses of the participants throughout the interview.

Overall, 475(67%) patients agreed that their doctors checked them with concentration and care. However, only 469(66.1%) acknowledged that the doctor examined each and everything on his visit to the patient. Besides, 436(61.4%) were in favour of the fact that their doctor's attitude towards them was still

similar to how it was on the first day of admission. Only 132(18.6%) strongly agreed that the doctor guided them properly with respect to diet and prevention related to their disease, while 445(62.7%) simply agreed to the statement. Of the total, 178(25%) denied that doctors tell everything about their treatment. Besides, 425(60%) were satisfied with the prescribed medication; 473(66%) acknowledged that the doctors understood their illness very well; 453(64%) admitted that the doctors listened to them with interest; 417(58.7%) considered that their doctor had a good understanding of their disease; 152(21.4%) strongly affirmed the doctors' expertise on relevant disease was; 360(50.7%) admitted that their healthcare professional encouraged them to ask questions regarding their illness; and 140(19.7%) reported that doctor ignores their questions related to their ailments. Overall, data was gathered on 29 counts in this section (Table-1). The reliability of this section was 87.5%.

Staff was reported as being kind-natured and well-mannered by 423(59.6%) and 451(63.5%) patients respectively; 375(52.8%) said staff listened to their problems interestedly while 345(50%) said staff tried to solve problems immediately; 469(66.1%) agreed that the staff followed the doctor's advice. Only 415(58.5%) patients were provided the diet prescribed by the doctor in hospitals even though the doctor's prescribed treatment was given to 565(79.7%). The section had 16 questions (Table-2) and its reliability value was 88.6%.

The last segment had 19 questions (Table-3) and its reliability value was 87%. A total of 392(55.2%) patients considered admission procedure smooth and hassle-free; 340(47.9%) declared that department coordination was good; 414(58.3%) were not pleased with the sanitary conditions of the hospital; 225(31.7%) got comfortable beds; 498(70%) found bugs in beds; 395(55.6%) complained of water scarcity at times.

Further, 355(50%) patients found their wards neat and clean; 426(60%) had well-ventilated wards 334(47%) considered the ward surroundings healthy; 400(56.3%) said length of treatment was appropriate; 350(49.3%) believed treatment was not delayed. This section had excellent reliability as the value of Cronbach's alpha was 91.2%.

When asked about the overall satisfaction level with the staff, doctors and environment of the hospitals, 452(63.7%) were satisfied with the staff, 463(65.2%) with doctors and 385(54.2%) were satisfied with the environment of the hospitals. These three questions were

Table-1: In-patients' satisfaction with doctors.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1	Doctor checks me with quite concentration and care	Frequency 161 Percentage 22.70%	475 66.90%	42 5.90%	29 4.10%	3 0.40%
2	Doctor examines each and everything on his visit to me	Frequency 156 Percentage 22.00%	469 66.10%	50 7.10%	32 4.50%	2 0.30%
3	Doctor's attitude is similar as on first day of my admission	Frequency 168 Percentage 23.70%	436 61.50%	52 7.30%	48 6.80%	5 0.70%
4	Doctor guides me properly for the diet and prevention related to my disease	Frequency 132 Percentage 18.60%	445 62.90%	73 10.30%	53 7.50%	5 0.70%
5	Doctor tells me everything about my treatment	Frequency 128 Percentage 18.10%	402 56.80%	95 13.40%	75 10.60%	8 1.10%
6	Doctor prescribed me the absolutely right drugs and no extra drug given to me	Frequency 117 Percentage 16.50%	425 60.00%	123 17.40%	40 5.60%	3 0.40%
7	Doctor understands my illness very well	Frequency 129 Percentage 18.20%	473 66.80%	62 8.80%	41 5.80%	3 0.40%
8	Doctor listens to me with interest	Frequency 157 Percentage 22.10%	453 63.90%	65 9.20%	32 4.50%	2 0.30%
9	Doctor understands my disease properly	Frequency 146 Percentage 20.60%	417 58.80%	82 11.60%	56 7.90%	8 1.10%
10	Doctor seems to be expert while dealing with my conditions related to disease	Frequency 152 Percentage 21.40%	444 62.50%	76 10.70%	36 5.10%	2 0.30%
11	Doctor encourages me to ask questions regarding my illness	Frequency 92 Percentage 13.00%	360 50.70%	150 21.10%	97 13.70%	11 1.50%
12	Doctor ignores my questions related to my illness	Frequency 13 Percentage 1.80%	127 17.90%	96 13.50%	378 53.30%	95 13.40%
13	The duration of visit of doctor to me is short	Frequency 22 Percentage 3.10%	168 23.70%	117 16.50%	372 52.50%	29 4.10%
14	Doctor gives more concentration to wealthier patients	Frequency 11 Percentage 1.90%	76 12.90%	89 15.10%	296 50.20%	118 20.00%
15	Doctor should give more time for the examination to me	Frequency 59 Percentage 8.40%	240 34.00%	179 25.40%	222 31.50%	5 0.70%
16	Whenever I need the doctor, he/she comes and checks me without irritation	Frequency 129 Percentage 18.20%	384 54.20%	114 16.10%	80 11.30%	2 0.30%
17	Doctor's prescription is quite comprehensible for me	Frequency 76 Percentage 10.80%	434 61.50%	90 12.70%	87 12.30%	19 2.70%
18	Doctor should write detail prescription regarding my illness	Frequency 101 Percentage 14.30%	213 30.10%	188 26.60%	194 27.40%	12 1.70%
19	Doctor does not care for the side effects of the treatment	Frequency 16 Percentage 2.30%	101 14.30%	134 18.90%	364 51.40%	93 13.10%
20	Doctor guides staff related to my illness in detail	Frequency 50 Percentage 7.10%	386 54.40%	194 27.40%	77 10.90%	2 0.30%
21	Doctor guides staff about my treatment in detail	Frequency 76 Percentage 10.70%	431 60.70%	151 21.30%	47 6.60%	5 0.70%
22	Doctor guides staff about my diet in detail	Frequency 40 Percentage 5.60%	390 54.90%	183 25.80%	86 12.10%	11 1.50%
23	Doctor respects my privacy	Frequency 144 Percentage 20.30%	472 66.50%	84 11.80%	6 0.80%	4 0.60%
24	Doctor respects my dignity	Frequency 170 Percentage 24.00%	470 66.30%	56 7.90%	11 1.60%	2 0.30%
25	Doctor clearly informs me about the symptoms of my disease	Frequency 84 Percentage 11.80%	442 62.30%	108 15.20%	71 10.00%	4 0.60%
26	Doctor clearly stated the purpose of my treatment	Frequency 86 Percentage 12.10%	435 61.40%	102 14.40%	82 11.60%	4 0.60%
27	Doctor clearly informs me about the warning signs of the disease	Frequency 48 Percentage 6.80%	407 57.50%	122 17.20%	123 17.40%	8 1.10%
28	Doctor clearly describes about medical follow up	Frequency 73 Percentage 10.30%	412 58.40%	118 16.70%	98 13.90%	5 0.70%
29	Bed-side statements of doctors are upsetting	Frequency 129 Percentage 18.20%	359 50.70%	109 15.40%	109 15.40%	2 0.30%

Table-2: In-patients' satisfaction with staff.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1	Staff behaves quite gently	Frequency 72 Percentage 10.20%	451 63.60%	88 12.40%	90 12.70%	8 1.10%
2	Staff is kind in nature	Frequency 80 Percentage 11.30%	423 59.70%	90 12.70%	107 15.10%	8 1.10%
3	Staff listens to my problem with interest	Frequency 71 Percentage 10.00%	375 53.00%	121 17.10%	128 18.10%	13 1.80%
4	Staff solves my problem immediately	Frequency 73 Percentage 10.30%	345 48.70%	123 17.30%	156 22.00%	12 1.70%
5	Staff follows the doctor's advice given for me	Frequency 96 Percentage 13.50%	469 66.10%	92 13.00%	49 6.90%	3 0.40%
6	Staff provides me the same diet as prescribed by the doctor	Frequency 56 Percentage 7.90%	415 58.50%	112 15.80%	74 10.40%	52 7.30%
7	Staff provides me the same treatment as prescribed by the doctor	Frequency 100 Percentage 14.10%	465 65.60%	94 13.30%	46 6.50%	4 0.60%
8	Staff comes to me immediately whenever I call without irritation	Frequency 83 Percentage 11.70%	326 46.00%	115 16.20%	173 24.40%	12 1.70%
9	Staff provides me medicines on time	Frequency 118 Percentage 16.70%	449 63.40%	73 10.30%	60 8.50%	8 1.10%
10	Staff nips in the drip/injection softly	Frequency 88 Percentage 12.50%	416 59.10%	121 17.20%	73 10.40%	6 0.90%
11	Staff nips out the drip on time	Frequency 69 Percentage 9.80%	404 57.40%	125 17.80%	100 14.20%	6 0.90%
12	Staff gives more attention to the wealthier patients	Frequency 7 Percentage 1.20%	80 13.60%	91 15.50%	313 53.20%	97 16.50%
13	Staff scolds me if I cry or vomit in the ward	Frequency 15 Percentage 2.10%	94 13.30%	123 17.30%	379 53.50%	98 13.80%
14	Staff works hard for the patient care	Frequency 64 Percentage 9.00%	403 56.90%	144 20.30%	85 12.00%	12 1.70%
15	Staff cares for me the same as in the presence of doctor	Frequency 60 Percentage 8.50%	450 63.60%	95 13.40%	86 12.10%	17 2.40%
16	Staff helps me in washing hands etc.	Frequency 30 Percentage 4.20%	337 47.60%	142 20.10%	157 22.20%	42 5.90%

Table-3: In-patients' satisfaction with environment and administration.

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
1	Admission Procedures are smooth	Frequency 146 Percentage 20.60%	392 55.40%	92 13.00%	70 9.90%	8 1.10%
2	Department coordination is good	Frequency 96 Percentage 13.60%	340 48.00%	142 20.10%	118 16.70%	12 1.70%
3	The diet given to me is enough	Frequency 88 Percentage 12.40%	390 55.20%	119 16.80%	91 12.90%	19 2.70%
4	The sanitary condition is satisfactory	Frequency 90 Percentage 12.70%	206 29.10%	118 16.70%	170 24.00%	124 17.50%
5	Bed of the hospital is comfortable	Frequency 88 Percentage 12.40%	225 31.80%	132 18.60%	217 30.60%	46 6.50%
6	Beds are free of bugs	Frequency 76 Percentage 10.70%	102 14.40%	34 4.80%	356 50.10%	142 20.00%
7	Drinking Water is available all the time	Frequency 17 Percentage 2.40%	298 42.00%	87 12.30%	142 20.00%	165 23.30%
8	Drinking Water is pure	Frequency 14 Percentage 2.00%	267 37.40%	166 23.40%	122 17.40%	141 20.00%

	Percentage	2.00%	37.60%	23.40%	17.20%	19.90%
9 Diet is nutritious	Frequency	74	366	179	60	31
	Percentage	10.40%	51.50%	25.20%	8.50%	4.40%
10 Diet is same as prescribed by the doctor	Frequency	49	414	107	76	64
	Percentage	6.90%	58.30%	15.10%	10.70%	9.00%
11 Diet is given to me when I demand	Frequency	7	188	114	255	144
	Percentage	1.00%	26.60%	16.10%	36.00%	20.30%
12 Ward is neat and clean	Frequency	98	355	86	156	15
	Percentage	13.80%	50.00%	12.10%	22.00%	2.10%
13 Ward is sufficiently ventilated	Frequency	144	426	57	69	13
	Percentage	20.30%	60.10%	8.00%	9.70%	1.80%
14 The surrounding of ward is healthy	Frequency	98	334	106	152	19
	Percentage	13.80%	47.10%	15.00%	21.40%	2.70%
15 Length of treatment is appropriate	Frequency	74	400	126	102	8
	Percentage	10.40%	56.30%	17.70%	14.40%	1.10%
16 Length of treatment is unusually delayed	Frequency	4	167	126	350	62
	Percentage	0.60%	23.60%	17.80%	49.40%	8.70%
17 Discharging Procedures are smooth	Frequency	12	135	55	48	2
	Percentage	4.80%	53.60%	21.80%	19.00%	0.80%
18 Records of my disease are well maintained	Frequency	88	451	105	47	12
	Percentage	12.50%	64.20%	14.90%	6.70%	1.70%
19 Staff disturbs me in the absence of doctor	Frequency	7	109	66	403	124
	Percentage	1.00%	15.40%	9.30%	56.80%	17.50%

also checked for reliability and acquired alpha value of 71.9%.

Discussion

While covering the aspect of all problems and issues suffered by public-sector hospitals in Karachi, this study is first of its kind to cover multi-centre and large sample population to measure satisfaction of the patients. Besides, the questionnaire was designed in such a way that it would not leave any related aspect which standard patient's scores do not cover. Our study had a brilliant response rate of 92.2%. This was largely due to the tactic of using dedicated assistants who went and spoke directly with the patients. Our excellent response rate is comparable to the response rate (91.2%) of a study done in Saudi Arabia regarding in-patients' satisfaction.¹⁰

Public health hospitals are usually least considered for any improvement. Environmental hazards,⁸ less communication with doctors¹¹ and ignorance of paramedical staff¹² are the factors reported in different studies. These factors with low satisfaction of treatment process are the predictors for the quality of care leading to the satisfaction of patients.¹³

The section which covered communication, expertise and behaviour of doctor with patients in our setup, suggested approximately 40% denial attitude of physicians. The avoidance of doctor to inform and guide patients about their disease is also observed in other parts of world¹⁴ though a study from Saudi Arabia reported excellent

patient-doctor communication.¹⁰ Studies have been conducted to identify parameters for improving this aspect.^{5,6} Update status of bed-side treatment has not been asked in any earlier study. However, by our study, large proportion of patients reported the upset status of the same. This also clearly showed ignorance of patient's material related to their treatment. While analysing this aspect, doctor's work burden cannot be ignored as in public-sector hospitals the flow of patients remains massive. This could lead to ignorance of these aspects by the physicians.

Staff burnout and their unfriendly behaviour have been observed in different parts of the world.^{3,12} Guidelines to produce good organisational effort to improve patient's satisfaction are also provided.⁴ In our setup, this prospect is reported conversely. Our patients were satisfied with paramedic's response and considered them experts in providing technical services. Even the proportions of soft and kind nature of staff in our setup is higher than that of developed countries like Belgium, Finland, Germany, Greece and Spain.³ Nevertheless, the solution of the patient's problems appeared to be less than that of all developed countries addressed in the same study.³

With our intense literature review, we could not find any study asking questions about the bugs in the beds, about diet and water availability in hospitals. We included these investigations based on personal observations and experiences. Expectedly, about 500 patients reported bugs in bed and 414 respondents were not pleased with

the sanitation of the hospital. More than half of the patients reported that water was not accessible at all times and water given to them for drinking was not potable. This clearly suggests that one of the major reasons for low in-patient satisfaction in the public sector is poor hygienic conditions and poor maintenance.

The recommendation of the hospital by our patients was almost 45%. This is lesser than the average recommendation rate seen in US hospitals which ranges from 64%³ to 68%.¹⁰ Greece and Spain had relatively higher recommendation rates, but in the same range as ours. There is another surprising depiction in our findings that even though the proportion of recommendation of the hospital to other people is quite low (45% approx.), but about 71% of our respondents intended to return to the same department for future needs. This may be because most of the participants belonged to low socio-economic class and in public-sector hospitals the treatment is relatively cheaper than other healthcare centres in the region. Therefore, these patients confined themselves to these hospitals despite low satisfaction levels. Comparing with Saudi Arabia, this is also significantly low where 99% of the patients said that they would come back even if they had resources to get treatment outside the country.¹⁰

As described above, patient-physician communication,^{5,6} nursing care,³ organisational efforts⁴ and, above all, overall quality of the hospital care² and treatment¹ are the key factors which enhance patient satisfaction. Monitoring of these key factors should be done periodically.⁸ The monetary and manpower resources should be enhanced by the government to reduce environmental hazards and improve departmental conditions of the hospitals.

Conclusion

In-patients were relatively satisfied with the aspect of communication with hospital personnel. Hospital

environment, sanitary conditions and manpower resources are needed to be improved for health safety of the patients.

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