

# Predictors of patient satisfaction to nursing service in government hospitals in eastern Visayas Philippines

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## Abstract

This study assessed the patients' satisfaction level on the nursing service in government hospitals within Eastern Visayas, Philippines and determined the predictors of patient's satisfaction using Stepwise Multiple Regression Analysis. The researcher primarily employed a descriptive correlational research design. Further, a standardized questionnaire named Risser -Patient Satisfaction Scale was employed to 203 patient respondents. This study revealed that Patients have greater satisfaction level on the competencies or capabilities of nurses in their respective field. However, respondents were less satisfied on nurses' attitude toward patients, and on how they communicate with them. Moreover, this study also revealed that age, ward assignment, and service type was found to be the predictors of patients' satisfaction.

**Keywords:** Patient Satisfaction; Risser Patient Satisfaction Scale; Nursing Service; Determinants; Predictors.

## 1. Introduction

In any healthcare institutions, nursing service is vital in providing quality patient care which aims to satisfy every client in all aspects. According to Wagner & Bear (2009), patient satisfaction has three domains. These include (1) educational relationship or the nurses attitude with patients, (2) technical professional or domain that concerns the technical issues on care, and the last is (3) trusting relationship or the interpersonal relationship situations between nurse and patients, this is the verbal and non-verbal communication that occurs between the nurse and client. Nurses must perform all these domains suitably to satisfy the patients. However, evidences show that people prefer to be admitted in private hospitals than government hospitals because the healthcare delivery is far different (Mohsin,2018; Khattak, Alvi, Yousaf et.al, 2012). This kind of problem is not new and is further aggravated by many barriers to quality patient care in government hospitals (Eygelaar & Stellenberg, 2012). In perspective, improving patient satisfaction to nursing service poses a major challenge in government hospitals especially in the Philippines.

### 1.1. Comparison between private and government hospitals

Globally, there is a common observation that private hospitals are better than public health institutions especially on areas like advanced technology, comfort, cleanliness, and a better healthcare workforce. Countries under the Organization for Economic Cooperation and Development (OECD) like Germany, United Kingdom, Canada, and Japan and even the developing countries are known to have a better service delivery in private hospitals than public health system. In fact, a number of international studies confirmed that those who can afford, preferred to be admitted in private health institutions and that their satisfaction level is significantly higher than in public hospitals in terms of the facilities and quality nursing care. (Sharma & Kamra, 2013; Mohsin, 2018; Raadabadi & Bahadori, 2017). Further, according to Nwazor (2017), private facilities are generally smaller than the public ones and while this entails that they are not equipped to handle too many people at once, it also means that they are more equipped to offer personalized care.

Public hospitals on the other hand, caters too many patients because of its larger size and has recorded a very low rejection rate. This means that almost anyone can be accommodated in the public system. Hence, the perception that public health institutions have problems in overcrowding, poorly managed, and does not conform to the standard nurse-patient ratio arise.

### 1.2. Healthcare condition in the Philippines

For decades, government hospitals consistently face challenges that gives the general impression to the public that private hospitals provide quality healthcare services than public system does. One of its challenges is the massive turnover of nurses every year. The Philippine Overseas Employment Agency (POEA) reported to have 92,277 Filipino nurses left the country to work abroad. Labrague (2018) also reported that reasons for leaving the country includes under compensation, heavy workloads, inappropriate nurse-patient ratio, and understaffing (Brush & Sochalski, 2007).

Now that the Philippine government like other countries continued its effort to address the challenges and improve the healthcare services in the country through offering Universal Health Care (UHC). The government hospitals will never refuse admitting patients even the bed capacity is not enough especially in district hospitals. Parliamentarians and health stakeholders have made concerted efforts to pass a UHC bill for the past two years, but in reality, the Philippines has experienced a 50-year process of health reform, under different names. The UHC Act is the culmination of decades of progress, and two years of dedicated political and technical work (WHO, 2019). Consequently, with the increasing number of admission and fewer number of nurses, Labrague et.al (2017) and Masselink & Lee (2010) suggest that this could contribute to a poor-quality care for patients.

### **1.3. Importance of patient satisfaction survey**

The health care delivery system around the world has continued to develop health reform policies and guidelines that will improve the health services offered in every country. To make it possible, these health institutions are believed to listen and respond to client's feedback to continuously improve client's experience (Baldie, 2017). Then and now, satisfying patients by providing quality services is one of the priority of each health institutions and it is believed to contribute in evaluating the services offered in the hospital. In fact, a wide range of studies suggested that patient satisfaction surveys play a vital role in providing feedback on the quality of care the health institutions are rendering, whether they provide adequate resources, and the "how" of rendering quality services. (Berkowitz, 2016; Peterson, Sword, Charles & Dicenso, 2007; Laschinger, Gilbert, & Smith, 2011). Indeed, patients' satisfaction has emerged as an important component of the quality of care, and has been used as a means to attain, maintain and monitor it (Charalambous & Adamakidou, 2012). Further, Abri & Balushi (2014) emphasized that patient satisfaction surveys have gained increasing attention as meaningful and essential sources of information for identifying gaps and developing an effective action plan for quality improvement in healthcare organizations.

### **1.4. Objective**

This study aimed to determine the satisfaction level and determine the predictors of patient satisfaction to the nursing service in Government hospital in Eastern Visayas Philippines.

## **2. Methods**

### **2.1. Design**

This study employed descriptive correlational design determine the satisfaction level of patients and to determine the predictors of patient's satisfaction.

### **2.2. Participants**

This study was participated by a total of 203 patients from Five (5) Government Hospitals in Eastern Visayas. Inclusion criteria were set in selecting the participants. Respondents (1) must be physically and mentally able to answer the questionnaire, (2) admitted in medical, surgical, OB wards or intensive care units for at least 3 days, and (3) consented to participate in the study.

### **2.3. Research tool**

Two-part survey form was utilized in this study. The first part describes the profile of the respondents in terms of age, sex, marital status, ward assignment, service type, and duration of confinement. Part 2 measures the satisfaction level of patients using standardized tool named Risser-Patient Satisfaction Scale (RPSS) (Charambalous & Adamakidou, 2012). This tool is a 25-item questionnaire with 0.89 coefficient reliability rate. It contains three subscales. These subscales include: technical- professional (TP) domain which contain seven items concerning technical issues on care and measurement of the nurse' behaviour; next is the Educational Relationship (ER) domain which contain seven items concerning nurses' attitude with patients, the exchange of information between the nurse; and lastly is the Trusting Relationship (TR) domain which approaches eleven interpersonal relationship situations between nurses and patients the verbal and non- verbal communication that occurs between the nurse and client.

### **2.4. Data analysis**

Both descriptive and inferential analysis was utilized in this study. The Risser-Patient Satisfaction Scale (RPSS ) is rated on a five-point Likert type scale ranging from 1 for 'strongly agree' to 5 "strongly disagree". Descriptive statistics included the mean, standard deviation, and percentage. Inferential statistics like Stepwise multiple regression analysis was employed to assess if the patient's profile predict patient's satisfaction.

### **2.5. Ethical consideration**

Ethical clearance was obtained from the Institutional Research Ethics Review Committee prior to the conduct of the study. Patient's consent and approval to conduct the study in the five government hospitals were acquired respectively. Patients were approached personally by the researcher and were assured that all data collected will be kept confidential. Moreover, patients were informed that they can withdraw from the study anytime during the process.

## **3. Results and discussion**

### **3.1. Patient's satisfaction level**

Patients' satisfaction includes three subscales. These subscales include Technical-Professional, Interpersonal- Educational, and Interpersonal- Trusting.

**Table 1:** Patients' Satisfaction Level in terms of Technical-Professional

Indicators	Mean	Description	Standard Deviation
The nurse is skillful in assisting the doctor in various procedures	2.06	A	0.868
The nurses really knows what she is talking about	2.20	A	0.852
The nurse is precise in doing her work	2.38	A	0.949
The nurse makes it a point to show me how to follow medical instructions	3.00	N	1.614
The nurse is too slow to do things for me	2.88	N	1.266
The nurse is often too disorganized to look on top of things	2.98	N	1.126
The nurse gives good advice	2.97	N	1.338
OVERALL	2.64	N	0.836

Legend:

4.51 – 5.00	(SD)	Strongly Disagree
3.51 – 4.50	(D)	Disagree
2.51 – 3.50	(N)	Neither Agree nor Disagree
1.51 – 2.50	(A)	Agree
1.00 – 1.50	(SA)	Strongly Agree

In terms of technical professional domain, the overall weighted mean of patients is 2.64. The result denotes that the respondents are only "fairly satisfied" in the domain that concerns the technical issues on care and measurement of nurses' behaviors. Conversely, the study of Alba et al. (2014) refutes the result of the present study, as their study revealed that patients were highly satisfied on the technical-professional subscale of patient's satisfaction. This finding suggests that nurses from these hospitals should try to improve their technical skills of care and professional behavior towards patients. Nevertheless, it is worth noting that patients agreed that the nurse is skillful in assisting the doctor in various procedures, really knows what she is talking about, and is precise in doing her work. This may be a positive response by the patients.

**Table 2:** Means and Standard Deviations on the Patients' Satisfaction Level in Terms of Educational Relationship

Indicators	Mean	Description	Standard Deviation
The nurse gives directions at the right speed	3.05	N	1.498
The nurse asks a lot of questions but once she finds the answers, she doesn't seem to do anything	3.39	N	1.328
I wish the nurse would tell me about the results of my tests more than she does	4.15	D	1.138
The nurse explains things in simple language	2.93	N	1.265
It is always easy to understand what the nurse is talking about	2.93	N	1.233
The nurse thinks you can understand the medical explanation of your illness, so she just doesn't bother to explain	3.24	N	0.982
The nurse always gives complete enough explanations of why tests are ordered	3.07	N	1.502
OVERALL	3.25	N	1.008

In terms of the educational-relationship domain, respondents reported "fair satisfaction" only which posted an overall mean of 3.25. According to the respondents, nurses wouldn't tell them the results of their tests, asks a lot of questions but once she finds the answers, she doesn't seem to do anything, and that the nurse thinks you can understand the medical explanation of patient's illness, so they just don't bother to explain.

**Table 3:** Means and Standard Deviations on the Patients' Satisfaction Level in Terms of Trusting Relationship

Indicators	Mean	Description	Standard Deviation
1. The nurse is understanding in listening to a patient's problems	3.06	N	1.267
2. The nurse is attentive enough	4.43	D	0.872
3. The nurse is just not patience enough	3.01	N	1.303
4. When I need to talk to someone, I can go to the nurse with my problems	3.44	N	1.053
5. The nurse spends time talking with me	3.69	D	0.936
6. The nurse is pleasant to be around	2.77	N	0.819
7. I am fond of the nurse talking down to me	2.45	A	0.839
8. The nurse is a person who can understand how I feel	2.53	N	0.772
9. A person feels free to ask the nurse questions	3.32	N	1.169
10. The nurse is friendly enough	4.43	D	1.014
11. Just talking to the nurse makes me feel better	2.75	N	0.809
OVERALL	3.26	N	0.464

Lastly, the trusting- relationship domain posted the highest mean among the 3 domains (3.26). This implies that this is the domain of patient's satisfaction that they are least satisfied. It is quite alarming that the findings revealed "poor satisfaction level" on the indicators nurses are attentive enough, spends time talking to them, and that nurses are friendly enough. Spending lesser time in listening to patient, talking to patient, and unable to establish rapport to patients could be associated to the inappropriate staffing and scheduling in these hospitals. Proper nurse-patient ratio must be followed to ensure safe and quality patient care, thus increasing patient's satisfaction.

### 3.2. Patients profile that predicts patients' satisfaction level

The next table presents the Stepwise Multiple Regression Analysis of the Patients' Satisfaction Level with Respect to their Profile in terms of age, sex, marital status, ward assignment, service type, and duration of confinement.

**Table 4:** Stepwise Multiple Regression Analysis of the Patients' Satisfaction Level with Respect to their Profile

Profile Variables	Patients' Satisfaction Level
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	Technical-Professional			Interpersonal-Educational			Interpersonal-Trusting			Overall		
	Beta	t	Sig	Beta	t	Sig	Beta	t	Sig	Beta	t	Sig
Constant		13.687	0.000		21.308	0.000		39.289	0.000		19.248	0.000
Age	-0.163*	-2.446	0.015	-	-4.003	0.000	0.218**	-3.173	0.002	-0.231**	-3.434	0.001
Sex	0.012	0.185	0.854	0.070	1.083	0.280	0.020	0.285	0.776	0.038	0.575	0.566
Marital Status	0.069	0.886	0.377	-0.056	-0.707	0.480	0.027	0.320	0.749	0.003	0.043	0.966
Ward Assignment	0.258**	3.959	0.000	0.112	1.705	0.090	0.032	0.465	0.643	0.161*	2.444	0.015
Service Type	-	-3.192	0.002	-	-3.612	0.000	0.003	0.040	0.968	-0.204**	-3.017	0.003
Duration of Confinement	0.002	0.036	0.972	0.029	0.446	0.656	-0.054	-0.761	0.448	0.006	0.085	0.932
R-Square	0.183			0.163			0.048			0.164		
Adjusted R-Square	0.171			0.154			0.043			0.151		
F-Ratio	14.865**			19.436**			10.070**			12.994**		
p-value	0.000			0.000			0.002			0.000		

#### Legend:

ns – Correlation is not significant at 0.05 level (p-value > 0.05) 1.00 P Perfect Relationship

\* – Correlation is significant at 0.05 level (p-value < 0.05) ±0.91 to ±0.99 VH Very High Relationship

\*\* – Correlation is highly significant at 0.05 level (p-value < 0.01) ±0.71 to ±0.90 H High Relationship

±0.41 to ±0.70 M Marked/Moderate Relationship

±0.21 to ±0.40 L Low Relationship

0.00 to ±0.20 N Negligible

It is worth noting that the predictors for the overall patients' satisfaction level includes age, ward assignment, and service type. These results confirm the varying importance of these variables should be considered when evaluating patient satisfaction. This result implies that patient's age, ward assignment and service type could affect their satisfaction level in terms of the technical- professional, educational relationship, and trusting relationship aspects of the nurse through the nursing care rendered to them.

Age is the best predictor among all the profile variables to patient satisfaction. The finding shows that older patients have greater satisfaction level compared to young patients. The data confirmed previous information on the effect of age on patient satisfaction with primary care. This was studied recently in the 2007/8 Access Survey in England by Kontopantelis (2010) who found a positive relationship between increasing age and satisfaction. The authors considered that differences in satisfaction by age group might have been due to differences in actual care received or different response tendencies by age.

The result also revealed that patients in ICU, and OB wards were more satisfied compared to patients admitted to medical wards. One contributing factor could be nurse-patient ratio in each ward. In this study, Intensive Care Unit got 3 patients only. According to the standard nurse-patient ratio in American Nurses Association, special areas like ICU should be 1:2 to 1:3. Therefore, the standard ratio has been met. Hence, patients' satisfaction is greater. Conversely, ward ratio is only 1:5 to 1:6, but government hospitals are accommodating 20 to 40 patients for each ward.

Furthermore, service type is another predictor seen in this study. The findings revealed that patients with Phil health are less satisfied than those in charity ward. Majority of the respondents in this study are under Phil health services. Phil health members can be members in the formal economy, this member category includes those with formal contracts and fixed terms of employment including workers in the government and private sector, whose premium contribution payments are equally shared by the employee and the employer. Moreover, informal economy members also include a wide range of individuals and sectors ranging from the self-earning to migrant workers. These members usually belong to middle class families and therefore have higher expectation and standards compared to indigent patients. Another category is indigent member. This category belongs to persons who have no visible means of income, or whose income is insufficient for family subsistence, as identified by the Department of Social Welfare and Development (DSWD), based on specific criteria. In addition, sponsored members include members whose contributions are being paid for by another individual, government agencies, or private entities. In government hospitals, sponsored members are being paid by local or provincial government. If majority of the patients were admitted under Philhealth-SPM or Indigent category, the ward will be congested therefore the nurse-patient ratio will not be met. Thus, quality nursing care is impossible to be rendered which leads to poor patient satisfaction.

number (Example: As pointed in (1) the...).

## 4. Conclusion and recommendations

Patients in government hospitals in the Eastern Visayas Region revealed to be "fairly satisfied" with the care they received from these hospitals. Communication appears to be a simple concept within health care. A lack of quality communication limits the quality of service that can be provided to the patient. Some of these issues are rooted within the attentiveness of nurses, and time spent talking with patients. Communication limitations often make the patients' visits frustrating and unpleasant. Therefore, increasing the interpersonal relationship of verbal and nonverbal communication between the nurse and patients is significantly recommended through strict implementation of the standard 1:5 ratio in hospital wards and 1:2 for intensive care units. Furthermore, entire nursing staff can greatly improve their clinical nursing skills in an effective manner with the aid of evidence-based resources that focuses on all areas of clinical nursing skills including technical skills and patient care. Therefore, every agency must sponsor nursing trainings and updates to enhance their technical skills. Moreover, it is highly recommended that all nurse providers must be properly oriented on the legal principles governing the treatment of patients defined in the Act on the Status and Rights of Patients (No. 785/1992), that Patients are entitled to be treated respectfully and appropriately by health care personnel. Therefore, age, ward assignment, and service type should not matter for treating the patient less. Finally, it is highly recommended that appropriate allocation of fund should be apportioned in these Government hospitals to ensure that standard nurse-patient ratio will be observed. Hence, appropriate nurse staffing helps achieve clinical and economic improvements in patient care, including the enhancement of patient satisfaction

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