Adult Inpatient Satisfaction and Associated factors towards Nursing Care at Felegehiwot Referral Hospital, Amhara Regional State, northwest Ethiopia

By

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Abstract

Background: patient satisfaction is considered as one of the desired outcomes of health care and it is directly related with utilization of health services. The most important predictor of patients' overall satisfaction with hospital care is particularly related to their satisfaction with nursing care. However, there is dearth of published studies in the area. The aim of this study is to assess the level and factors that determines adult inpatient satisfaction towards nursing care at Felegehiwot Referral Hospital.

Methods: A facility based cross-sectional study was conducted from January 1-30, 2015. A sample size of 244 inpatients was determined using single population proportion formula including 10% non response rate. Simple random sampling method was used to select participants. Interviewer administered questionnaire was employed to collect data using the adapted Newcastle Satisfaction Scale with nursing services. Data was analyzed using SPSS version 16. Both bivariate and multivariate analysis was conducted to determine the effect of independent variables on inpatients' satisfaction with nursing care at 0.05 level of significance.

Result: A total 236 inpatients participated in the study yielding a response rate of 96.9%. Participants who were farmers, rural residents, and female took the greater percentage. The overall level of satisfaction was 44.9%. Sex and occupation, were the only predictors of patient level of satisfaction with nursing care. Among satisfaction items, the amount, nurses know your care (78%), the nurse's helpfulness (55%), and nurses' treatment of patients as an individual (54%) were the three top scores respectively. whereas nurses response to patients request (42.6%), the amount and type of information nurses gave to patients about their condition and treatment (43.2%), and the way nurses explain things to patients (43.4%) had the least scores.

Conclusion: The level of inpatient satisfaction with nursing care was low. Inpatients were less informed about their disease condition, treatment, and prognosis by nurses since it is essential for making decision related with their care. The hospitals should consider mechanisms to improve the nurses' way of communication and interpersonal relationships beyond training on direct patient care.

Key words: Inpatient satisfaction, nursing care, admission ward, Felegehiwot Referral Hospital.

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Abbreviations

FMOH – Federal Ministry of Health

FRH – Felegehiwot Referral Hospital

MOE – Ministry Of Education

NSNS – New castle Satisfaction with Nursing Scale

PSNCS - Patient satisfaction with nursing care scale

QOL - Quality of life

SPSS–Statistical Package for the Social Sciences

Chapter One: Introduction

1.1. Background

Patient satisfaction provides potentially a direct indicator of system performance in a health care provision. Patient's satisfaction is therefore of high value and it is useful to understand the need of patient. By understanding the importance of satisfaction and determining its existing level, health care services can be made relevant to the requirement of people and patients. A review of relevant literature supports that assessment of level of patient satisfaction is the tool to determine the level of health care delivery, analyze the existing situation and workout strategy to improve it (1).

Patients' satisfaction has been used as a significant indicator of quality services provided by health care personnel. Consequently, the most important predictor of patients' overall satisfaction with hospital care is particularly related to their satisfaction with nursing care; because nurses comprise the majority of health care providers and they provide care for patients 24 hours a day (1,2).

It is an established fact that satisfaction influences whether a person seeks medical advice, complies with treatment and maintains a continuing relationship with practitioners (3). In the prior years when hospitals were symbols of humanitarians' for community welfare, today, people are increasingly concerned about hospital's performance & their satisfaction because 1-Hospitals use an increasing proportion of scarce community resources. 2-There are increasing questions about quality and effectiveness (4).

Moreover, addressing those service aspects of healthcare that consumers most readily appreciate, such as access, patient provider relationship, availability of information and opportunity for participation can influence health care satisfaction outcomes (3).

A very important aspect of patient satisfaction depends on 'nursing care,' because nurses involved in almost every aspect of client's care, interact with patients more often than any other health care personnel and translates information imparted by physicians technically and professionally with a humane touch. A hospital may be soundly organized, beautifully situated and well equipped, but if the nursing care is not of high quality, the hospital will fail in its responsibility of providing care (5).

1.2. Statement of the problem

Patient satisfaction is considered an important and major factor in explaining patients' perceptions of service quality. Unless quality improvement becomes apriority, and improve patient satisfaction, It not only preventing patients from quick recovery, and increasing their costs, it also elevates the psychological barriers of using the health care system and the consequence becomes grim. Despite this reality, the health care providers in developing countries seem to be ignoring the importance of patients' perceptions regarding health services (6).

Studies in India, also revealed that nurses comprise the majority of health care providers, they provide care for patients 24 hours a day, and if the patient is denied appropriate care the healing process is obviously compromised but most of them not aware of the importance of patients' satisfaction and its role (7).

Other studies conducted concerning patient satisfaction in Iran and other countries indicated that generally nursing services could not fully satisfy patient needs. For instance, a national study in university hospitals of selected cities in Iran showed that only 39.7% of the patients were fully satisfied with nursing services(8)

Similarly the Federal ministry of health in Ethiopia also striving to provide quality nursing care service in all health institution, and developing different quality management guidelines and evaluation mechanism for nursing care with the ultimate goal of patient satisfaction. Felegehiwot referral hospital were expected to perform quality nursing care service and improve patient satisfaction than others hospital in the region. However, there were no adequate studies conducted that show the level of inpatient satisfaction in the Hospital. Therefore, this study would identify inpatient level of satisfaction and determinant factors towards nursing care from the patients' perspectives (9).

1.3. Significance of the study

Patients are the best source of information about a hospital system's communication, education, and pain-management processes, and they are the only source of information about whether they were treated with dignity and respect. Their experiences often reveal how well a hospital system is operating and can stimulate important insights into the kinds of changes that are needed to close the gap between the cares provided and the care that should be provide.

The current study would reveal level of Adult in patient satisfaction with nursing care and determinant factors which are crucial for regional level decision makers, the study hospital managements and health care providers for designing evidence based intervention for better nursing care service provision. Also the finding of the study would provide information to different nongovernmental organizations and professional associations for future planning and intervention of appropriate strategies to prevent patient dissatisfaction and treatment of nursing care problems.

On the other hand since there is limited number of literatures in the context of study area, this study will give base line information and sensitize researchers about adult in patient satisfaction with nursing care and determinant factors for those who will carry out further research.

Chapter Two: Literature Review

Patient satisfaction as a measure of quality of care

Patient satisfaction is an integral component of service quality. The argument has been offered that the effectiveness of health care is determined, in some degree, by consumers' satisfaction with the services provided. Support for this view has been found in studies that have reported a satisfied patient is more likely to comply with the medical treatment prescribed more likely to provide medically relevant information to the provider, and more likely to continue using medical services (10,2).

Unlike clinical process measures, which are strictly facility centered, patient satisfaction is a "patient centered" process measure. It reflects the patient's personal response to, and evaluation of, care (as opposed to the hospitals view of what is appropriate). Especially in patient-focused health care organizations, patients and their satisfaction are considered the most crucial point in the planning, implementation and evaluation of service delivery. Indeed, the patient is the center of healthcare's quality agenda. meeting the needs of the patient and creating healthcare standards are imperative to achieve high quality. Outcomes as assessed from the patient's perspective have been accepted as valid, important, and standard indicators of quality of care. Patient satisfaction is accepted as a standard measure of quality of care, and is steadily gaining in popularity (11, 12, 13).

It is commonly acknowledged that patients' reports of their health and quality of life, and their satisfaction with the quality of care and services, are as important as many clinical health measures. All major players in the health care are nurse as satisfaction information when making decisions. Despite the enormous number of studies in Western countries over the past decade on patient satisfaction, still consensus on its definition remains a matter of stipulation on patients judgments of quality. challenges to this view, suggesting that it is not important whether the patient is right or wrong, what is important is how the patient felt, even though the care givers' perception of reality may be quite different. However their inputs may help providers understand and establish the acceptable standards of service that must be delivered to ameliorate patient's suffering (14,10, 15,6).

The multidimensionality of patients' satisfaction forms an obscurity in examining this concept. Through the extensive research that has been done in the medical care dimensions, many concepts have been used to examine patient satisfaction. It has been interpreted as the art of care, technical quality of care, accessibility and convenience, efficacy of outcomes of care, cost of care, physical environment, and availability and continuity of care (15).

Nursing Care and patient satisfaction

Nursing care is one of the major components of Health Care Services. Thus, patients have the right to expect quality of nursing care. Nursing staff, which comprise the vast majority of hospital staff, have the greatest contact with patients. Nurses, rather than physicians, are seen as responsible for the day-to-day activities on a unit. Nurses provide them a connection with patients, act as patient advocate with other care providers, give physical advice to patients, and offer emotional support to both patients and families. In their teaching capacity, they also play a key role in post-hospital adjustment (16, 5).

The results of Meta synthesis suggested that patients expect nurses to take care of their physiological, psychological needs and activities of their daily living and report patients expected to be treated as unique individuals, and be known as more than their diagnosis. Further states that, patients also perceive that staff who acknowledged patients as individuals, treated patients as people and show an interest in them. Patients expressed the need for nurses to remain focused during delivery of care, are more personal, and more one-on-one. This was reported to make patients feel that the care the nurses were giving was specifically for them, more over the results also showed that patient's participation and involvement in their care and decision making increased control of self and understanding. These include individualized patient care provided in an empathetic and caring way, nursing that is competent and consistent, and nurses who provide patients with information effectively and appropriately (17, 18).

The conceptualization of patient satisfaction of six dimensions of nursing care proposed by Thomas *et al.* (1996a, b) was used in this study. Patients expected varied aspects of nursing care that affect their satisfaction namely nurses' attentiveness and availability, reassurance and provision of information, openness of informality, and provision of individual treatment (18).

Results of different articles showed that, Patients had positive experience of nursing care when: the speed of nurses response to patients' call (61%), time nurses spent with patients was adequate, patients' amount of information nurses gave to patients was adequate, help nurses provided to Patients Experiences of Nursing Care, families and friends was adequate (83%), nurses awareness of patients' needs (67%). other studies in Addis Ababa Hospitals also revealed that, the overall rating of satisfaction was 67%, the top aspects that patients scored highest for their satisfaction with nursing care were the amount of freedom in the ward (83%); how capable nurses were at their job (70%); nurses treatment of you as an individual (70%0) and the amount of privacy nurses gave you (61%). whereas the amount of information nurses gave to you about your condition and treatment (40%); the way nurses explained things to you (42%); the amount nurse knew about your care (47%). the amount and type of information nurses gave to patients about their condition and treatment were a major cause of dissatisfaction and concluded that the greatest single defect in hospital care was 'the barrier to easy exchange of information. on the other hand, Respect was shown to patients when they had their personhood acknowledged, as well as their need for privacy and time (19, 24, 20).

Another study in Kwame Nkrumah University Hospital Ghana inpatient satisfaction is low compared to other studies. The high score of46% for patients' satisfaction with nursing care was the attitude of nurses towards clients and their family was recorded at the hospital. This may be attributed Patients (41%) were satisfied with the amount of privacy given as each bed had a screen which provided maximum privacy. In addition, they were rated low (27% and 28%) respectively for checking on the well-being and how much they know about the care of the patient. The amount and type of information nurses gave to patients about their condition and treatment were major causes of dissatisfaction. This study found that there was a communication gap between nurses and their patients that led to patient dissatisfaction(27)

Determinants of patient satisfaction:

Generally patient satisfaction has been widely studied and discussed with in several disciplines. Different literatures identified different types of determinant factors contributing to patient satisfactions with nursing care. the major once are socio demographic background of patients, patient conditions and hospital conditions.

Socio demographic background of the patient could influence expectations of patient before the care begins, during and after the care. According to different studies age, gender, education levels, residence, occupation and marital status are socio demographic factors that influence patient satisfaction. Satisfaction increase when patients become older in their age, their sex was female. Among different studies, the socio demographic characteristics such as: resident and occupation of customers had association with satisfaction. also respondents who were farmers and from rural area were more satisfied than urban. more over educational status, less educated patients have higher level of satisfaction. 87% of respondents who were illiterate were fully satisfied compared to 56% who had diploma and above (19,21,22,23& 24).

other studies also revealed that patients' age, gender and marital status were determinants of patient satisfaction with in- patient service. Older age was the strongest predictors of satisfaction and men tended to be more satisfied than women. on their association there was no statistical significant differences in the level of patients' satisfaction and their experiences in relation to the hospital settings (25, 29, 7).

Regarding to Patients condition such as the length of stay as well as previous experiences of hospitalization also influenced patient satisfaction. Experience to health services is an important variable because it made the expectations of patient which in turn are dependent on perceptive image. A common definition of perceived image is to become aware of something through one senses-touch, taste, smell, hearing or sight. It is understood to be the common general knowledge acquired by self experience or other's experience of utilization of nurse services. the patients with more experience of hospitalization have more realistic expectations and are therefore easily satisfied(7, 27,17). The study in black lion also indicated that level of patient satisfaction were 90.1. those patients who stay >22 nights has higher satisfaction than those patients who spent 2-22 night. in addition 74% of them who had not had a history of previous hospital admission were fully satisfied compared to 66% of those who were admitted previously at least once to hospital. Simillar studies conducted in eastern Ethiopia Selected Public Hospitals on Levels of Adult Patients' Satisfaction with Nursing Care, indicated that level of patient satisfaction in nursing care was 52.7%. Satisfaction was associated with type of room of admission, duration of hospitalization, and history of previous admission. Patients with previous history of admission were found to be more dissatisfied than their counter parts. This could be

related with the repeated costs associated with hospitalization, also being admitted for long period was also found to make patient more dissatisfied which indicate the problem of quality of hospital care. The level of patient satisfaction was found to be associated with duration of stay and history of previous admission were found to be significantly associated with the patients' level of satisfaction (28, 5).

Patient satisfaction is also determined by patients' class of admission (ward admission) and their individualized care. this involves individualized care, participation, involvement and continuity of care. Individualized care focuses on the individual and his or her specific problem, tailored to one person; It is reported that individualized care is associated with lower patient dependency, shorter hospital stays and better chances of surviving the hospital stay. Satisfaction was also associated with type of room of admission, that patients admitted in different wards have different level of satisfaction due to different reasons. studies in black lion shows that Gynecology/obstetrics wards had better mean satisfaction 4.02 in almost all items with nursing care compare with participants in given in the ward, In medical 3.78 mean satisfaction and participants indicated that better satisfaction in amount of freedom in the ward and conversely participants has low level of satisfaction in the amount of information nurses given about the condition and treatment. another studies in Ethiopia on the level of patient satisfaction was found to be associated room of admission, patients admitted in private room were more satisfied than others (25, 28 5).

To allow comparisons across studies to be made standard methods have been developed for measuring patient satisfaction. Two basic ways of acquiring data on consumer satisfaction have been used. Respondents are asked to talk about or comment on the services they have received or they are asked a series of direct questions about their satisfaction with aspects of those services. To compare two service units, It is necessary to devise some measure of consumer satisfaction so that the relevant comparisons can be drawn. A scale of satisfaction on which respondents can be located is the most appropriate method (26).

On this line, this study utilized the Newcastle Satisfaction with Nursing Scale 'NSNS' after modifying it according to the Ethiopian situation in order to compare the findings each other.

Conceptual frame work

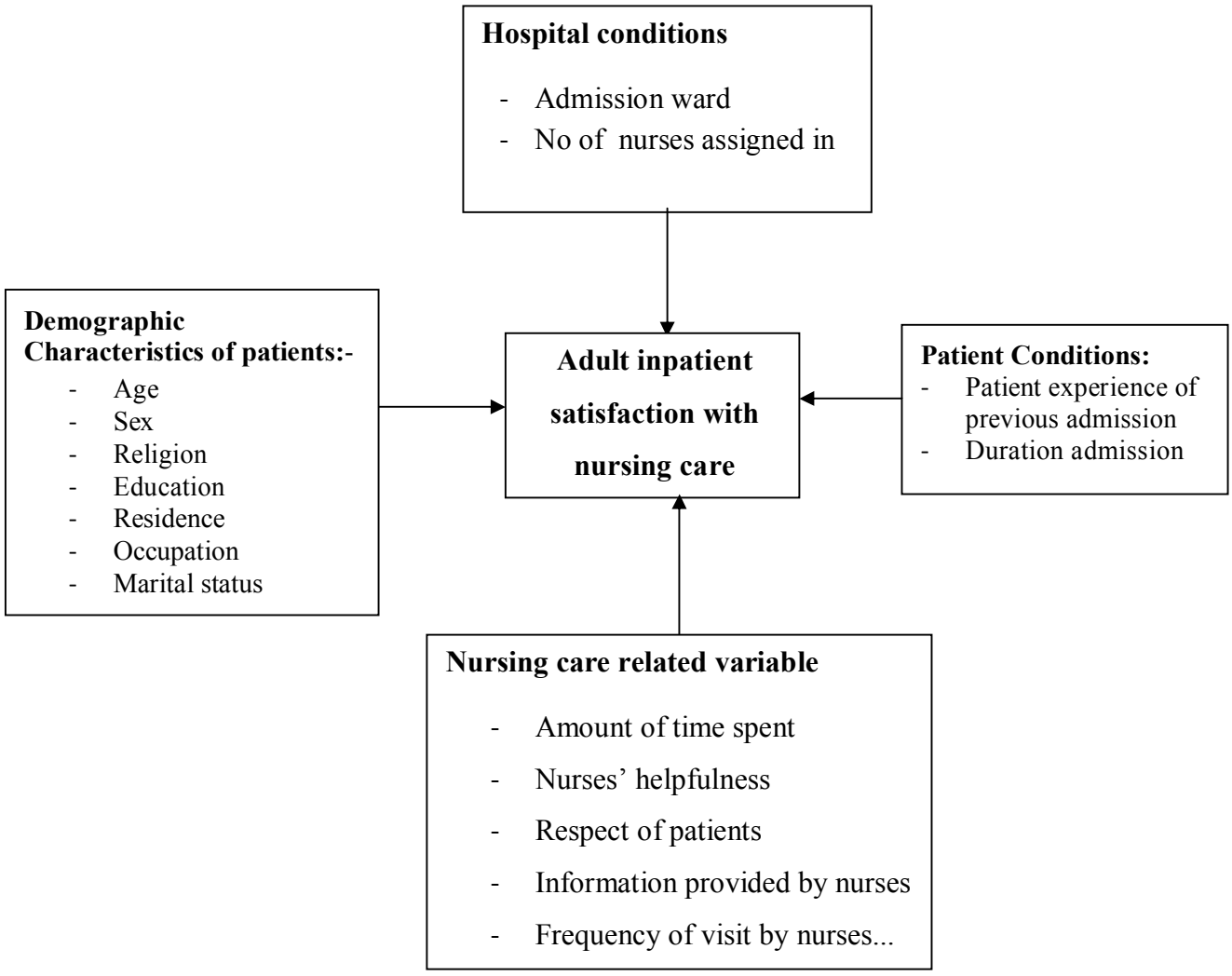

Figure 1: Conceptual framework of adult inpatient satisfaction with nursing care at Felegehiwot Referral Hospital, northwest Ethiopia, January 2015. (Adapted from NSNS) (24)

Chapter Three: Objectives of the Study

3.1. General objective

- To assess the level of adult inpatient satisfaction and determinant factors with nursing care at Felegehiwot Referral Hospital, Amhara Regional State, January 2015.

3.2. Specific objectives

- To assess the level of satisfaction with nursing care at Felegehiwot Referral Hospitals.
- To identify determinant factors of inpatients satisfaction with nursing care at Felegehiwot Referral Hospital

Chapter Four: Methods and Materials

4.1. Study Area and period

This study was conducted at Felegehiwot Referral Hospital from January 01-30/2015. Felegehiwot Referral Hospital is located in Bahir Dar (Capital City of the Region), 565 km away from Addis Ababa (Capital City of Ethiopia) in the northwest direction. It has a catchment population of more than 5.5 million people. There are 343 health professionals and 210 administrative staffs. Out of those health professionals, 207 were nurses, and 80 of them were working at the study wards. There are 5 inpatient wards (gynecological & obstetric, surgical, medical, pediatric and eye units) with 400 hospital beds. According to 2006 EFY annual report the Hospital treated 20,200 admitted patients; Out of these, 12,200 were admitted in the study wards. From these 2800, 6000 and 3400 are admitted at surgical, medical, and gynecological and obstetrics wards respectively.

4.2. Study design

Facility based cross-sectional study design was used.

4.3. Population

4.3.1 Source population

Adult patients who were admitted at medical, surgical, gynecology and obstetrics wards of Felegehiwot Referral Hospital during the study period 2015.

4.3.2 Study population

Sampled patients who were admitted to the study wards during the study period

4.3.3. Inclusion and exclusion criteria

4.3.3.1. Inclusion *criteria*

Eighteen years and older and who were in the ward for more than two nights were included in the study

4.3.3.2 Exclusion criteria

Patients who were severely ill and unable to respond were excluded from the study.

4.4. Sample size and sampling technique

4.4.1 Sample size determination

The sample size was calculated using single population proportion formula considering the following assumptions: A 95% CI, (0.05) margin of error, and proportion of inpatient satisfaction on nursing care at Debre Markos Referral Hospital (p=0.825) (32). These parameters were substituted in single population proportion formula.

$$\mathbf{n} = \frac{(z\alpha/2)^2 \, P \, (1-P)}{d^2}$$

Where,

n = the desired sample size

p = proportion of inpatients satisfaction at Debre markos referral Hospital

Zα/2 = critical value for normal distribution at 95% confidence level which is equal to 1.96 (z value at=0.05)

d = the margin of error taken as 0.05

Therefore, the formula yields 222 sample size and adding 10% (22 in patient) for possible non respondent, the total sample size was 244.

4.4.2. Sampling technique

The Hospital has all basic health services that were: medical, surgical, gynecological and obstetrics services. The study sample (n=244) constituted all patients who have been admitted to the study wards. In order to select representative sample of patients from each wards, the total number of inpatients admitted in the previous year (2014) was considered for one month and proportionally allocated to each wards. Simple random sampling was used to select prospective respondents who met the inclusion criteria in the study wards.

4.4.3. Data collection tools and procedures

The data were collected using structured questionnaire. The Newcastle Satisfaction with Nursing Scales tool which was adapted from previous study in Ethiopia was used (27). The scale consists of 17-items. All items were scored on a five-point Likert scale (1 = strongly disagree, to 5 = strongly agree). The adapted questionnaire was contextualized to the local situation and to the research objectives. The questionnaire was prepared in English then translated in to Amharic and back to English to check for accuracy and consistency of the translation. Participants were asked to rate their satisfaction with various aspects of nursing care by selecting only one that

best described their opinion on each item of the scale. Data were collected through Interviewer administered questionnaire. One supervisor (BSc nurse) and three data collectors who had better experience were recruited. Training was given to them for one day on objective of the study and data collection tools. also consistency of the tools checked with chrombach alpha and pretest was done on 5% of the calculated study sample a week before the main data collection at Debire Markos Referral Hospital.

4.5. Variables

4.5.1. Dependent variables

Inpatient satisfaction towards nursing care

4.5.2. Independent variables

- Age
- Sex
- Religion
- level of education
- Marital status
- Residence
- Admission Ward
- History of admission
- No of nurses assigned/in charged
- Duration of Hospital stay

4.6. Operational definitions

Nursing care – is a care given by Nurses for patient admitted at Surgery, Gynecology/obstetrics and medical wards in study facility.

Nursing staff- refers to professionals at the level masters, bachelors, and diploma, who were currently working inpatient wards of Surgery, Gynecology and obstetrics, and internal medicine in Felegehiwot Referral Hospital.

Inpatient - patients who were admitted for medical care at Felegehiwot hospital

Patient expectation - the patients' strong hope of getting certain level of nursing care

Patient satisfaction towards nursing care is defined as the patients' feeling of pleasure that comes when the expected need or desires for nursing care is received; It measured with the Newcastle satisfaction nursing scale tools, which consists of 17-items. All items were scored on a five-point Likert scale (1 = strongly disagree, to 5 = strongly agree). Each individual response summed of and mean score taken as cut of points to be classified patients as satisfied and dissatisfied.

S**atisfied–**refers to the patient's perception of care received is above one's expectation or greater than mean score of satisfaction.

Mean satisfaction- refers to the mean rate of satisfaction for each satisfaction items out of 100%.it was calculated with summed of each individual response of the seventeen satisfaction item and divided by the total maximum score out of hundred.

Dissatisfied–refers to participants' perception of care received below their expectation or less than mean rate of satisfaction.

Finally satisfied responses across all items were summed and transformed to yield an overall level of satisfaction. Participants who scored greater than mean in all aspects of nursing care denoted as Satisfied and less than or equal to mean score Dissatisfied.

4.7 Data analysis procedures

The collected data were checked for completeness, consistency (using chrombach alpha) and coded by the principal investigator. Data were entered in to SPSS version 16.0 for analysis. Descriptive statistics were computed and presented by tables, graphs, and frequencies. Bivariate and multivariate analyses were carried out to assess the association between the dependent and

independent variables at 0.05 level of confidence. Those variables with P-value of less than or equal to 0.25 in bivariate analysis were selected to fit for multiple logistic regression model and declared significant at ($P<0.05$).

4.8. Data quality assurance

Quality of data was assured through the following measures:

- Careful modification of the data collection tool (NSNS) according to Ethiopian situation
- Data collection questionnaire was translated from English to Amharic and back to English language for its consistency.
- Experienced data collectors and supervisors were used
- Data collectors and supervisors were trained for one day.
- Data collection tool was checked through pretest,
- The reliability test was done and obtained a Cronbach's alpha coefficient of o.853.
- The data collection procedure was closely supervised for its consistency on the same day.
- Coding and data cleaning were done before the final analysis

4.9. Ethical Consideration

Ethical clearance was obtained from Ethical Review Board of Jimma University, College of Health Sciences before starting the actual data collection. Subsequent permission was granted from the authorities of Felegehiwot Referral Hospital. Participation of Patients in this study was entirely voluntary, and confidentiality was protected. The right of participants to continue or withdraw to participate was respected and names were not mentioned.

4.10. Dissemination of findings

The findings of the study will be presented during thesis defense, as a partial fulfillment of Master of Health care and Hospital Administration in the Department of Health Economics, Management, and policy, College of Health Science, Jimma University. After it is approved by the department, it will be disseminated to Felegehiwot Referral Hospital, Bahir Dar town administration health office, and Amhara Regional Health Bureau. Finally attempts will be made to present the finding on scientific conferences, different meetings, workshops, and publish the finding on peer reviewed reputable journal.

Chapter Five: Results

5.1. Socio demographic characteristics

Two hundred thirty six (236) inpatients agreed to participate in the study, making a response rate of 96.7%. The mean age of the respondents were 33.86 (SD ±11.85) years, with range of 18 and 76 years old. Predominantly, 142 (60.2%) were females, 195 (82.6%) of the respondents were orthodox by religion. Concerning the educational status, 44.5% had attended formal education. Nearly half of (52.5%) the inpatients were married; farmers and merchants account for 47.5% and 25% respectively. Nearly three-fifth (58.9%) of the respondents were rural residents (Table 1).

Table 1: Socio-demographic characteristics of inpatients who were admitted at Felegehiwot Referral Hospital, Amhara Regional State , northwest Ethiopia, January 2015 (N=236)

Socio-demographic variables	Category	Number	Percent
Sex	Male	94	39.8
	Female	142	60.2
Age	18-24	44	18.6
	25-34	102	43.2
	35-44	50	21.3
	45^{+}	40	16.9
Marital status	Single	88	37.3
	Married	112	47.5
	Widowed	22	9.3
	Divorced	14	5.9
Educational status	Unable to read & write	82	34.7
	Read & write only	49	20.8
	1-8	59	25
	9-12	20	8.5
	12^{+}	26	11.0
Occupational status	Farmer	124	52.5
	Merchant	65	27.5
	Employee	27	11.4
	Other	20	8.6
Residence	Rural	139	58.9
	Urban	97	41.1
Religion	Orthodox	195	82.6
	Muslim	26	11
	Protestant	15	6.4

Others includes: Daily laborers, Housewife's and Students

5.2. Admission characteristics

Majority of the respondents (48%) were from medical wards, 24% from surgical, and 28% from gynecology & obstetrics. Half (50.8%) of the inpatients stayed in the hospitals for 2-10 days, and the mean length of stays was 10.41 (SD=5.27) days. About 64% of the respondents had previous history of hospital admission for some illnesses, and 98.3% of participants reported that no particular nurse was in charge of providing care (Table 1).

Table 2: Admission characteristics of participants at Felegehiwot referral hospital, January 2015

Variables		Frequency	Percent
Wards	Medical ward	113	41.5
	Surgical ward	56	27.5
	Gynecology and obstetrics ward	67	31.0
previous Experience of admission	Yes	150	63.6
	No	86	34.4
One nurse in charge of providing care	Yes	4	1.7
	No	232	98.3
Duration of stay	2-10	120	50.8
	11-21	104	44
	22+	12	5.2

5.3. Inpatient satisfaction

Nursing care satisfaction scores

Overall mean rate of inpatient satisfaction was 50.15%. participants who scored greater than mean was 44.9%. The following five items that inpatients scored on nursing care service were above the mean, namely, the amount nurses knew your care (3.94(78.8%)), the nurses' helpfulness (2.75(55%)), nurses' treatment of patients as an individual (2.7(54%)), nurses willingness to respond patients request (2.69(53.8%)) and nurses readiness to listen patients worries and concerns (2.6(52%)). Conversely, inpatients gave lowest scores for the following three items, namely, how quickly nurses came when you called them (2.13(42.6%)), the amount and type of information nurses gave to patients about their condition and treatment (2.16(43.2%)), and the way nurses explain things to patients (2.17 (43.4%)) (Table 3).

Table 3: Level of inpatient satisfaction (in %) on different satisfaction item with nursing care service at Felegehiwot Referral Hospital, January 2015.

Satisfaction items	Dissatisfied	Neutral	Satisfied	Mean sat	St. dev
The amount of time nurses spent with you	141(59.8)	441(8.6)	51(21.6)	2.33(46.6)	1,134
How often nurses checked to see if you were okay	135(57.1)	33(14)	68(29.9)	2.42(48.4)	1,380
There always being a nurse around if you need one	123(52)	45(19)	68(29)	2.51(50.2)	1.201
The amount nurse knew about your care.	10(8.4)	5(2.1)	212(89.5)	3.94(78.8)	0.856
How quickly nurses came when you called them	159(67)	35(15.6)	43(17.4)	2.13(43.6)	1.135
The way the nurses made you feel at home	142(60)	54(22.8)	41(17.3)	2.3(46)	1.091
The amount & type of information nurse gave to you about your condition and treatment	163(69.2)	32(13.5)	41(17.3)	2.16(43.2)	1.169
Nurses' helpfulness	102(43.1)	67(28.3)	68(28.6)	2.75(55)	1.171
The way nurses explained things to you	161(68.1)	39(16.5)	36(15.4)	2.17(43.4)	1.098
The amount of nurses helped your relatives' or friends' minds at rest	139(59.4)	53(22.4)	43(18.2)	2.24(44.8)	1.040
Nurses' manner in doing about their work	121(51.2)	60(25.4)	64(27.2)	2.61(52.2)	1.156
Nurses' treatment of you as an individual	114(48.2)	49(20.8)	73(31)	2.7(54.1)	1.181
How nurses listened to your worries and Concerns	120(48.3)	54(22.8	72(30.5)	2.6(52)	1.175
The amount of freedom you were given on the ward	149(63.1)	46(19.20	15.2(17.9)	2.34(46.8)	1.038
How willing nurses were to respond to your requests	109(45.1)	65(27.5)	63(27.4)	2.69(53.8)	1.182
The amount of privacy nurses gave you	140(59.4)	49(20.8)	47(19.8)	2.33(46.6)	1.172
Nurses' awareness of your needs	134(56.7)	54(22.8)	48(20.5)	2.41(48.2)	1.109
Overall mean rate of satisfaction				**2.51(50.15)**	

Satisfied =Strongly agree and disagree, Neutral=undecided and Dissatisfied=Strongly disagree and agree.

Finally, the opinions of study participants on the general nursing care they received during their stay in wards were asked to rate the level of satisfaction on the nursing care service. among participants 75(32%) said Very poor and poor, 60(25.4%) fair and 101(42.6%) (Good, and V good) while overall participants satisfied with the nursing care services they received at the study hospitals were106 (44.9 %) of the participants.(Figure 2)

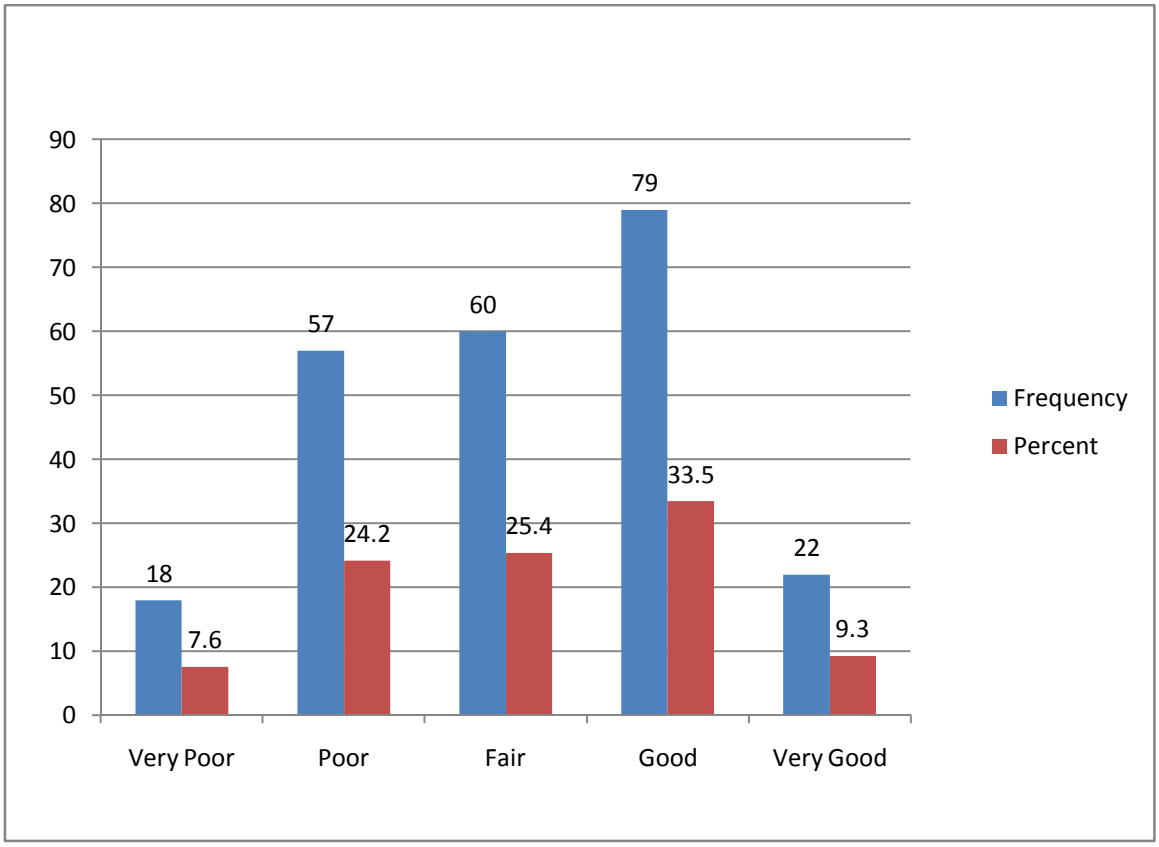

Figure 2: Overall judgment of inpatients on nursing care at Felege Hiwot Referral Hospital, January 2015

5.4. Satisfaction on patients characteristics

Among 236 participants from the study Hospital 106 (44.9%) of them were satisfied. Regarding socio-demographic characteristics, 53.2% of male and 39.4% of female were satisfied. consequently 50% of farmers. also farmers were 50%% satisfied.

With regards to patients condition, duration of admission, 45.8% of those stayed 2-10 day, 42.3% of those stayed 11-21 days, and 58.3% of those who stayed for more than 22 days were satisfied. on the other hand, 48% of those patients who had previous history of admission and 39.5% of those with no history of admission were satisfied with the nursing care they have got. With regards to difference in admission ward, 46.1% of medical, 39.3% of surgical, and 47.7% of gynecological and obstetric wards inpatients were satisfied with nursing care service(Table 4).

Table 4: Patient level of satisfaction and their association towards nurses services at Felegehiwot Referral Hospital, Bahir Dar City, Amhara Regional State, January 2015

Characteristics		Category	Level of satisfaction		COR(95%)
			Satisfied	Not satisfied	
Socio demographic Characteristics	Sex	Male	50(53.2%)	44(46.8%)	1.74(1.03-2.95)
		Female	56(39.4%)	86(60.6%)	1
	Age	18-24	21(48%)	23(52%)	1.35(0.66-2.7)
		25-34	41(40.2%)	61(59.8%)	1
		35-44	21(42%)	29(58%)	1.07(0.54-2.14)
		45+	23(57.5%)	17(42.5%)	2.01(0.95-4.22)
	Occupation	Farmer	62(50%)	62(50%)	1
		Employee	44(67.6%)	21(32.3%)	0.43(0.22-0.84)
		Merchant	16(59.2%)	11(40.8%)	0.58(0.21-1.58)
		Others	8(40%)	12(60%)	1.23(0.59-2.57)
	Educational status	Not read, write	41(50%)	41(50%)	1
		Read write	24(49%)	25(51%)	0.96(0.47-1.9)
		1-8	26(40%)	35(60.%)	0.78(0.40-1.54)
		9-12	7(35%)	13(65%)	0.53(0.19-1.98)
		12+	8 (30.7%)	18(69.3%)	0.4(0.17-0.1.13)
	Residence	Rural	68(48.9%)	71(51.1%)	1
		Urban	38(39.2%)	59(60.8%)	0.67(0.39-1.13)
	Marital status	Single	38(43.2%)	50(56.8%)	0.81(0.46-1.43)
		Married	54(48.2%)	58(51.8%)	1
		Widowed	9(41%)	13(49%)	0.74(0.29-1.87)
		Divorced	5(35.7%)	9(64.3%)	0.59(0.18-1.89)
	Religion	Orthodox	108(55.4%)	87(44.6%)	1
		Islam	13(50%)	13(50%)	1.24(0.54-2.81)
		protestant	6(40%)	9(60%)	0.82(0.28-2.41)
Hospital condition	Admission wards	Medical	52(46%)	61(54%)	1
		Surgical	22(39.3)	34(60.7%)	1.15(0.68-1.96)
		Gynecology obstetric	32(47.7%)	35(52,3%)	1.9(0.56-6.41)
	One nurse in charged	Yes	2(50%)	2(50%)	1.2(0.17-8.88)
		No	104(44.8%)	128(55.2%)	1
Patient condition	Previous Hx admission	Yes	72(48%)	78(52%)	1
		No	34(39,5%)	52(60.5%)	0.70(0.42-1.21)
	Duration of admission	2-10	55(45.8%)	65(54.2%)	1
		11-21	44(42.3%)	60(57.7%)	0.84(0.42-1.4)
		22+	7(58.3%)	5(41.7%)	1.96(0.56-6.41)

5.5. Regression Analysis on Patients' Satisfaction towards Nursing Care and Selected Variables

Among a number of socio-demographic, Hospital condition and patient related factors included in this study, only few were identified as significant predictors of the patients' overall satisfaction with nursing care services in the multivariate analysis. patient level of satisfaction was significantly associated with sex and occupation. Males were 1.9 (95%CI: 1.08-3.19) times more satisfied than female patients. Employees were 0.42 (95%CI: 0.21-0.82)) times less likely to satisfy than farmers. But patients' satisfaction has no significant association with age, marital status, educational status, duration of admission, history of previous admission and admission wards (Table 5).

Table 5: Association between inpatients' characteristics and satisfaction level towards nurses services at Felegehiwot Referral Hospital, Bahir Dar City, Amhara Regional State, January 2015

Characteristics	Category	Level of satisfaction		COR(95%)	(AOR(95%)
		Satisfied	Not satisfied		
Sex	Male	50(53.2%)	44(46.8%)	1.74(1.03-2.95)	1.9(1.08-3.19)**
	Female	56(39.4%)	86(60.6%)	1	1
Age	18-24	21(48%)	23(52%)	1.35(0.66-2.70	0.75(0.38-1.5)
	25-34	41(40.2%)	61(59.8%)	1	1
	35-44	21(42%)	29(58%)	1.07(0.54-2.14)	1.4(0.64-3.03)
	45+	23(57.5%)	17(42.5%)	2.01(0.95-4.22)	2.1(0.17-25)
Occupation	Farmer	62(50%)	62(50%)	1	1
	Employee	44(67.6%)	21(32.3%)	0.43(0.22-0.84)	0.42(0.21-0.82)**
	Merchant	16(59.2%)	11(40.8%)	0.58(0.21-1.58)	0.61(0.22-1.6)
	Others	8(40%)	12(60%)	1.23(0.59-2.57)	1.6(0.67-3.9)
Educational status	Illiterate	41(50%)	41(50%)	1	1
	Read & write	24(49%)	25(51%)	0.96(0.47-1.9)	1.4(0.62-3.1)
	1-8	26(40%)	35(60.%)	0.78(0.40-1.54)	1.31(0.53-3.50)
	9-12	7(35%)	13(65%)	0.53(0.19-1.98)	0.72(0.17-3.0)
	12+	8 (30.7%)	18(69.3%)	0.4(0.17-0.1.13)	0.51(0.19-0.1.3)
Residence	Rural	68(48.9%)	71(51.1%)	1	1
	Urban	38(39.2%)	59(60.8%)	0.67(0.39-1.13)	0.97(0.35-2.7)
Previous Hx admission	Yes	72(48%)	78(52%)	1	1
	No	34(39,5%)	52(60.5%)	0.70(0.42-1.21)	0.70(0.39-1.27)
Duration of admission	2-10	55(45.8%)	65(54.2%)	1	1
	11-21	44(42.3%)	60(57.7%)	0.84(0.42-1.4)	0.95(0.53-1.7)
	22+	7(58.3%)	5(41.7%)	1.96(0.56-6.41)	2.1(0.64-6.6)

Others includes: Daily laborers, Housewife's and Students

Chapter Six: Discussion

The finding of this study revealed that the overall satisfaction level of in patients towards nursing care services rendered at Felege Hiwot Referral Hospital were 44.9 %. This was lower as compared to studies conducted in karad city tertiary care Hospital in India (74.1%) and black lion Hospital Ethiopia (90.1%). The difference might be related to the types of Hospital that, both of them were teaching hospital that most of nurses were professional expertise and have adequate technology for the implementation of better nursing care practices, however Felegehiwot is regional referral hospital (7,28).

When discussed with each rating of satisfaction item, the highest mean rate of satisfaction was 3.94, with the amount nurse knew your care, but studies conducted at black lion hospital with this satisfaction item scored 3.78, and the amount of freedom nurse given to patients ranked the highest 4.52. the study also revealed that patients were " satisfied" with "nurses" helpfulness and willingness to respond patients request, (M = 2.72) and (M=2.7)respectively. It is consistent with the findings of previous studies in Malaysia Sains university Hospital which showed that patients scored highest for their satisfaction with nurses' helpfulness (28,18).

On the other hand, the finding showed that only 44.8% satisfied with the attitude of nurses towards relatives', which is almost simillar result 46% with studies conducted Kwame Nkrumah University Hospital in Ghana. this showed that patients were dissatisfied in areas of greetings and politeness of the nurses towards their relatives(30). in addition only 47% of inpatients were satisfied with the amount of privacy given, which is lower than studies at black lion Hospital 61%. the reason might be related with the number of beds or admitted patients in a rooms. this finding disagrees the general belief that elements of privacy, respect and advocacy enhance patients' satisfaction with nursing care(24, 20).

The study finding also revealed that, Patients were satisfied (M = 2.33), with "the amount of time nurses spent with patients. which is lower compared with studies in black lion Hospital (M=3.86) and Sains Hospital in Malaysia (M =3.26)". The possible explanation might be due to the nurse patient ratio or the work load of the study Hospital. Patients at felegehiwot hospital also least satisfied with the amount of information given to a patient about their condition and treatment(43.2%) and for the way nurses explain issues to patients(43.4%). which was

consistent with studies in Black lion Hospital (40%), (42%), and greater than in studies at karad city Hospital Ghana (14%) and (20%) respectively(24,27).

The reason might be related to Quite a good number of respondents were highly educated and expect more information from nurses. also it might be due to the complexity of the hospital service and way of expression that could not be easily understandable in most of illiterate study participants.

Regarding to patients characteristics, Patients living in rural area were 48.9% more satisfied compared with urban (39.2%). On the other hand Patients who were unable to read and write were 50% satisfied compared with those 12+ whose level of satisfaction was 30.7%. which is consistent with other studies in Addis Ababa Hospitals (26) moreover the difference in admission ward, gynecological and obstetric wards 47.7% satisfied compared with 46.1% of medical, and ,39.3% of surgical wards with nursing care service. it was simillar with studies in Black lion hospital Addis Ababa, and the possible explanation might be the presence of midwifes professionals in the ward(28).

On the analysis of independent variable, The level of patient satisfaction was found to be significantly associated with Sex and occupation. Among Hospitalized patients males were 1.9 times more likely to satisfied than Females. the result is supported by studies in India. The possible reason might be related with females need of extra care or males less nursing care expectation. The other factors which significantly associated with satisfaction were employee. which was 0.58 times less likely to satisfied than farmers or58% of them dissatisfied compared with farmers. Which is consistent with studies in Addis Ababa. The reason might be related to their individual standard needs of nursing care. In addition, employees might also high expectation of the service and compare with other facilities and dissatisfied than others(28,7).

The study also showed that Age, length of stay, class of admission, residence, level of education and history of previous admission were not significantly associated with satisfaction towards nursing care. in contrast age was the strongest predictors of patient satisfaction in studies on Mahatma Gandhi Hospital India. but consistent with studies in Addis Ababa hospital(27,26). On the contrary, studies in eastern Ethiopia found that duration of admission, history of previous admission and room of admission were significantly associated with patient satisfaction. this might be related to repeated cost and quality of nursing care service(5).

Limitation of the study

As to the limitation of this study,

1, The study was limited in addressing other related factors of satisfaction such as income level of patients, availability of recourses, medications, and other hospital utilities.

2, Information biases (social desirability bias)

3, It also limited to conduct certain in-depth interviews or focus group discussions among the patients and nurses for further qualitative exploration of the case to back the quantitative data. However, time and logistic constraining factors prevented the researcher from doing so.

Chapter Seven: Conclusion and Recommendation

7.1. Conclusion

The overall level of satisfaction with nursing care service 44.9%, which is low compared with different literatures. Patients were least satisfied with the given information, the way nurses explain issues and frequency of visit. even though they expected and it is essential for making decision related with their care. Moreover patients also dissatisfied with the amount of freedom and privacy to patients.

However they satisfied with the amount nurses know their care, the nurses' willingness and helpfulness to patients and their relatives were the three aspects with the strongest quality of nursing care services that should be sustained and improved more.

There is statistically significant associations between patients' satisfaction and sex and occupation. Male were more satisfied than females, and patients who were employed were less satisfied than farmers. However, there is no significant association between patients' satisfaction and demographic characteristics such as age, educational status, residence, history of admission, admission wards, marital status and others.

7.2. Recommendations

Based on the findings, of the following were recommended:

- There is a communication gap between nurses and patients, that lead most patients to dissatisfaction , so nurses should improve the way of conveying information to and from patients.
- The hospital management use the findings, communicate the issue with nurses and other stakeholders and arrange in-service training to improve their communication skills with patients.
- The hospital nurse directors and nurses need to take advantage of the time they spend with patients by providing more information to them, being aware of patients' needs and responding to their needs, and providing respect and support to patients' family and friends.
- finally there is a significant difference in satisfaction with sex and occupation, so hospital nurses try to provide quality nursing care service at all level of patients.

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Annexes

ANNEX I- English Version Questionnaire

Jimma University College of Public Health and Medical Sciences Department of Health Service Management

Questionnaire for Data Collection on Adult in-Patients' Satisfaction with Nursing Care at Felegehiwot Referral hospitals, 2014

Identification

Name of Hospital ----------

Ward Name----------

Code No----------

12.1 ***Verbal consent form before conducting interview***

Greeting,

Hello, my name is----------.I am working in the research team of Jimma University. I would like to interview you a few questions about your experience and opinion of nursing care while you are in this Hospital ward. The objective of this study is to assess the satisfaction of in-patients by nursing care in this Hospital, which is important to improve the Nursing care Services so as to facilitate the healing process of the patients. Your cooperation and willingness for the interview is helpful in identifying problems related to the subject matter. Your name will not be written in this form. All information that you give will be kept strictly confidential. Your participation is voluntary and you are not obliged to answer any question you do not wish to answer. If you are not still discomfort with the interview please feel free to drop it any time you want. Do I have your permission to continue?

1. If yes, continue to the next page
2. If no, ask the reason and skip to----------

Hospital Name……

Ward name…….Patient Code----------

Time started----------Time finished----------

Data collector's name ----------Signature ----------

SECTION 1: Socio demographic questions

These questions are about you. To help us understand your answers to the other sets of questions, we need some information about the kind of person you are. If you are not sure about how to reply to any question, please tell me the best answer you can and your comments.

1. Sex ----------1, male, 2, female
2. Age in years:----------
3. Marital status ……1, married, 2, unmarried,
   3, divorced 4, widowed 5, others----------
4. Educational Status:----------
5. Occupation
   1, Farmer 4, Daily laborer 5, others ----------
   2, Merchant
   3, Government employee
6. Residence------- -1. urban, 2, rural 3, semi- urban
7. Religion ----------1, Orthodox, 2, Muslim, 3, protestant 4, others----------
8. History of previous Admission --- 1, Yes 2, No
9. Including last night, how many nights did you spend in this ward on this occasion? ----
10. Was there one particular nurse in charge of your care in this ward?

Yes = 1 No = 2

SECTION 2: YOUR OPINIONS OF NURSING CARE

HOW TO ANSWER THESE QUESTIONS

In this section, we ask your opinions of the nursing care you received during your stay on the ward. For each question, please give an answer which best describes your view.

Thinking about your stay on the ward, how did you feel about?

Ser No	Question	Strongly disagree 1	Disagree 2	Neutral Not decided 3	Agree 4	Strongly agree 5
11	The amount of time nurses spent with you					
12	How often nurses checked to see if you were okay					
13	There always a nurse around if you needed one					
14	The amount , nurses knew about your a care					
15	How quickly nurses came when you called for them					
16	The way the nurses made you feel at home					
17	The amount and type of information nurses gave to you about your condition and treatment					
18	Nurses' helpfulness					
19	The way nurses explained things to you					
20	How nurses helped to put your relatives' or friends' minds at rest					
21	Nurses' manner in going about their work					
22	Nurses' treatment of you as an individual					
23	How nurses listened to your worries and Concerns					
24	The amount of freedom you got on the Ward					
25	How willing nurses were to respond to your requests					
26	The amount of privacy nurses gave you					
27	Nurses' awareness of your needs					

28 .How would you rate the overall **nursing care** you received in this ward?

Very poor	**Poor**	**Fair**	**Good**	**Very Good**
1	2	3	4	5

የአማርኛ መጠይቅ

በጅማ ዩኒቨርሲቲ የማህበረሰብ ጤናና ህክምና ሳይንስ ኮሌጅ

በፈለገ ሂወት ሪፈራል ሆስፒታል ተኝተዉ ለሚታከሙ ህሙማን ከነርስ ባለሙያዎች ስለአገኙት እንክብካቤ የተዘጋጀ መጠይቅ

የሆስፒታሉ ስም----------

የመኝታ ክፍል----------

የታማሚዉ ኮድ----------

8.2.1 ህሙማን በጥናቱ ለመሳተፍ ፈቃደኛ ስለመሆናቸዉ የሚገልፅ ፎርም

እንደምን ሰነበቱ የእኔ ስም ----------ይባላል፡፡ በጅማ ዩኒቨርስቲ በሚደረገው በዚህ ጥናት ውስጥ ተሳታፊ ስሆን እርሰዎ በዚህ ሆስፒታል ምኝታ ክፍል ውስጥ ተገኝተው በሚታከሙበት ወቅት ከነርስ ባለሙያዎች ስላገኙት እንክብካቤ ቃለመጠየቅ አደርግለዎታለሁ፡፡ የዚህ ጥናት አላማ ህሙማንን በቂና የተሞላ አገልግሎት ከነርስ ባለሙያዎች እንዲያገኙ ለማደረግ ነው፡፡ ለዓላማው መሳካት የእርሰዎ ትብብር እንሻለን፡፡ የእርሰዎ ስምና አድራሻ መጠየቁ ውስጥ አይካተትም እንዲሁም የእርሰዎ ማነነትም ሆነ የሰጡት ምላሽ የእርሰዎ ስለመሆኑ በምንም ሁኔታ አይገለጽም፡፡ በዚህ ጥናት ለመሳተፍ እኛ የእርሰዎን ሙሉ ፍቃደኝነት ስንጠይቅ ያለምንም አስገዳጅነት ሲሆን ፍቃደኛ ካልሆኑ ከመጀመሪያውም ሆነ ቃለ መጠየቁን ከጀመርንም በኃላ ከመሃል ማቆረጥ ይችላሉ፡፡

በጥናቱ ለመሳተፍ ፍቃደኛ ነዎት ----------አዎ ----------አይደለሁም

ፍቃደኛ መሆነወን ካረጋገጡ በኃላ ቃለ መጠየቁ ይጀምሩ፡፡

ፍቃደኛ ካልሆኑ ምክኒያቱን ይግለጹ----------

በመቀጠል ወደ ሚቀጥለው ሕመምተኛ ይሂዱ፡፡

ቃለመጠየቅ

ሀ የተደረገበት ቀን----------የተጀመረበት ስዓት----------ያለቀበት ስዓት ----------

ለ ቃለመጠይቅ ያደረገዉ ሰዉ ስም----------ፊርማ----------

በመጠይቁ ዉስጥ ስለአሉት ጥያቄዋች

በዚህ መጠይቅ ዉስጥ ያሉት ጥያቄዋች እርስዋ በዚህ ሆስፒታል ዉስጥ ተኝተዉ በመታከም ላይ እያሉ ከነርስ ባለሙያዋች ስለአገኙት እንክብካቤ ያለዋትን ግንዛቤና አስተያየት የሚጠይቁ ናቸዉ። ይህ መጠይቅ ሁለት ክፍል ሲኖረዉ የመጀመሪያዉ ክፍል ስለራስዎ ምላሽ የሚሰጡበት ሲሆን የመጨረሻዉ ክፍል ደግሞ ተኝተዉ በሚታከሙበት ክፍል ዉሥጥ ከነርሶች ስለአገኙት እንክብካቤ ያሉትን ግንዛቤ እና አስተያየት የተመለከተ ነዉ።

እየአንዳንዱ ጥያቄ በጥንቃቄና በታማኝነት ይመልሱ።መጀመሪያ ላይ የሚሰጡት አስተያየት የተሸለ ስለሚሆን ለእያንዳንዱ ጥያቄ ረጅም ጊዜ አይዉሰዱ።

ከጥያቄዋቹ መካከል ስለ አንዱ ምልሽ ለመስጠት የተቸገሩ ከሆነ ይበልጥ ከእርስዋ አስተያት ጋር ተቀራራቢ የሆነዉን አንዱን ብቻ በመምረጥ ይመልሱ ፡ ተጨማ ሪሃሳ ብካለዋት ይግለፁ።የእርስዋ ስምም ሆነ አድራሻ በመጠይቁ ዉስጥ አይካተትም። የሰጡትም አስተያየት የእርስዋ ስለመሆኑ በምንም ሁኔታ አይገለፅም።

ክፍል አንድ- እርስዋን በተመለከተ መጠይቅ

የሚከተሉት ጥያቄዋች ስለ እርስዋ ማንነት የሚጠይቁ ናቸዉ። የሚሰጡን ምላሽ ለጥናታችን የሚረዳን ስለሆነ በእያንዳንዱ ጥያቄ ተገቢዉን ምላሽ ይስጡን ። ለመመለስ የተቸገሩ ከሆነ ይበልጥ ተቀራራቢ ይሆናል ያሉትን መልስ ይስጡ።

ዖታ ---------- 1, **ወንድ**, 2, **ሴት**

እድሜ:----------

የጋብቻሁኔታ.1, **ያገባ**, 2, **ያላገባ** 3 **አግብቶየፈታ/ች** 4 **ባል/ሚስት የሞተበት** 5 **ሌሎች**

የትምህርት ደረጃ:----------

ስራ ፡---------- 1 **አርሶ አደር** 2 **ነጋዴ** 3 **መንግስት ሰራተኛ** 4 **የቤት እመቤት** 5, **ተማረ** 6 **የቀንሰራተኛ** 7 **ሌሎች**-------

የመኖሪ ያቦታ----------1. **ገጠር**, 2, **ከተማ** 3 **የገጠርከተማ**

ሃይማኖት ----------1, **ኦርቶዶክስ**, 2, **እስልምና**, 3, **ፕሮቴስታንት** 4, **ሌሎች**----------

ከዚህ በፊት ተኝተዉ ታክመ ዉያዉቃሉ --- 1, **አዎ** 2, **አላዉቅም**

የትላንትናን ጨምሮ በዚህ ሁኔታ ሆስፒታል ዉስጥ ስንት ጊዜ አሳለፍክ/ሽ ፡----------

በክፍሉ ዉስጥ አንድ ነርስ አገልግሎቱን እንዲሰጥዎ ተመድቦ ነበር --- **አዎ** 1 **አልተመደደበም** 2

በዚህ መኝታ ክፍል ውሥጥ እየአሉ ከነርሶች ስለአገኙት እንክብካቤ የተሰማዎት ስሜት

ቆይታዎን በማሰብ ይግለፁልኝ ፣

ተ.ቁ	ጥያቄ	ሙሉ በሙሉ አላስደሰተኝም 1	አላስደሰተኝም 2	መወሰን አስቸግሮኛል (አማካኝ) 3	አስደስቶኛል 4	ሙሉ በሙሉ አስደስቶኛል 5
11	ነርሶች ለእርስዋ አገልግሎት በመስጠት ያሳለፉትን ጊዜ እንዴት ነበር					
12	ነርሶች እርስዋ ደህና ስለመሆንዎም ሆነ ስለሁኔታዎ በተደጋጋሚ የመከታተል ሁኔታ					
13	እርዳታ በፈለጉ ጊዜ ነርሶች ዘወትር በቅርብ የመገኘት ሁኔታ እንዴት ነዉ					
14	እርስዋ ምን ያክል እንክብካቤ እንደሚያስፈልግዎ ነርሶች ያላቸዉ እዉቀት					
15	እርስዋ ነርስ በሚፈልጉበት ወቅት የማግኘት ሁኔታ ምንይ መስላል					
16	ነርሶች ቤትዋ እንደሉ እንዲሰማዋት ለማድረግ ያደረጉት ጥረት					
17	ስለጤንነትዋ ሁኔታና ስለህክምናዋ ከነርሶች ያገኙት መረጃ/ማንዛቤ በአይነትና በመጠን ምን ይመስላል					
18	ነርሶች እርስዋን ለመርዳት ያላቸዉ ፍላጎት					
19	ነርሶች ነገሮችን/ሁኔታዋችን የሚያስረዱበት መንገድ/ዘዴ					
20	ነርሶች አስታማሚዋን ለማረጋጋት					

	የአደረጉት ጥረት					
21	ነርሶች ስራቸዉን የሚያከናዉኑበት አሰራር እንዴት ያዩታል					
22	ነርሶች በሰብዓዊ ፍጡርነትዋ ያደረጉለዋት መስተንግዶ					
23	ነርሶች የሚያስጨንቅዋትንም ሆነ የሚአሳስበዋትን ነገር ለማዳመጥ የነበራቸዉ ፈቃደኝነት					
24	በተኙበት ክፍል ዉስጥ የነበርዋ ነፃነት					
25	ጥያቄዋችን ለማዳመጥና ለመመለስ የነርሶች ፈቃደኝነት					
26	በግልዋ ማከናወን ለሚፈልጉአቸዉ ነገሮች የነርሶች ትብብር					
27	ነርሶች የእርስዋን ፍልጎት ለማወቅ የሚያደርጉት ጥረት					

28 **በክፍሉ ዉስጥ የሚሰጠዉን የነርሶች እንክብካቤ በአጠቃላይ እንዴት ትፈርጀዋለህ/ሽ**

በጣም ዝቅተኛ	ዝቅተኛ	መካከለኛ	ጥሩ ነዉ	በጣም ጥሩ ነዉ
1	2	3	4	5

አመሰግናለሁ !!