

Patients' Perceptions As Indicators of Quality of Nursing Service Provided At Al Noor Specialist Hospital at Makkah Al Moukarramah, KSA

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Abstract: Background: Patients' perception and their expectations of care are valid indicators of quality nursing care and to improve health services in hospitals require to measure their own performance in order to improve upon current system of service delivery. Well-designed health care delivery system can reduce hospitalization, improve quality of life and provide patient satisfaction. **Aim:** to assess the patients perceptions toward quality of nursing service provided at Al Noor Specialist Hospital. **Subject and methods:** A descriptive correlation design was used in the present study. Ninety patients admitted to medical, surgical, burn and obstetric wards, they were selected from Al Noor Specialist Hospital. **Tool:** Consumer Perception of Service Quality Sheet (SERVQUAL) was used to measure both patient expectation and perception of service quality. It consisted of five dimensions as follows tangibility; (assess the appearance of physical facilities and appearance of nurses), reliability; (assess nurses ability to perform the promised service dependably and accurately), responsiveness; (assess nurses willingness to help patients and provide a prompt service), Assurance; (assess nurses knowledge and courtesy of the service providers) and Empathy; (assess caring, individualized attention of nurses). **Results** the finding of the study showed that the overall patient expectation was (3.75± 0.71) and the overall patients' perception means was (3.56±0.60). **Conclusion** patients' perception have become an important health care element in the evaluation of health care. The findings of the study provide nurses with information about aspects that enhance or hinder patient satisfaction. The present study concluded that patients' perception were satisfied with the nursing services rendered to them. **Recommendations:** Educational programs about raising nurses' awareness towards the importance of patient satisfaction specific to nursing services and educational program about how to improve quality of nursing services

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Introduction

Consumer's satisfaction is central to the marketing concept. Adapting consumer's satisfaction in a health care environment is imperative to better understand the needs of its customers (patients). Patient's satisfaction therefore has become important outcome measure of quality **Puay, Nelson (2004)**.

Consumer satisfaction is defined as a person's feelings of pleasure or disappointment resulting from comparing a product's perceived performance in relation to the person's expectation. Thus satisfaction is a function of perceived performance and expectation. If the performance falls short of expectation, that the customer is dissatisfied. If the performance matches the expectation, the customer is satisfied (**Staniszewska, Ahmed, 1998**). Hospitals provide the same types of service, but they do not provide the same quality of care (**Young et al. 2002**).

Quality of care is a system approach to health services, which emphasizes both technical

competence as well as interpersonal dimension of "health care giving process". Patient's satisfaction is one of the two main components of quality of care which includes respect for the patient and understanding the needs of the client and providing services accordingly (**Staniszewska, Ahmed, 1998**). Patient satisfaction is a major indicator of quality care (**Nazim, et al. 2002**). Thus quality of work can be assessed by mapping out patient satisfaction with nursing services (**Schmidt, 2003**). Nursing services is one of the most important components of hospital services which has two major objectives; nursing care of sick patient and prevention of disease and promotion of health (**Mufti et al., 2008**).

Quality of services refers to an overall judgment of a particular service. It is based on the difference between expected quality and perceived quality. When quality is higher than expected, it can be termed superior service. When the expected quality of a service equals a perceived service level, it is referred to as general service quality. When the

perceived service level is higher than the expected, it is referred to as better service quality. When perceived service level is lower than expected, it is referred to as worse service quality (**Zeithalm, & Bitner, 2000**).

Improving service in health care require hospitals to measure their own performance in order to improve upon current system of service delivery. Well-designed health care delivery system can reduce re hospitalization, improve quality of life and provide patient satisfaction (**Aiello, 2003**).

Patient satisfaction is the patient's perception of care received compared with the care expected (**Johansson et al. 2002 & Han,2003**). During hospitalization, patient satisfaction represents a balance between the patient's perception and expectation of their nursing care (**Mrayyan, 2006**). Patients' satisfaction with nursing care has been reported as the most important predictor of the overall satisfaction with hospital care and an important goal of any health care organization (**Yunus et al. 2004**). Therefore, dissatisfaction with the nursing care services may further lead to lower utilization of the nursing care services by the patients (**Schmidt,2003, Zeithalm, & Bitner, 2000**).

The expectation and perception of patient towards service provider especially to the nurses as the front liner in the patient service would help nurse to become more caring in their interaction and interpersonal care with patients (**Yunus, et al. 2004**).

The present study applied SERVQUAL to measure patients' satisfaction in these five dimensions. A hospital's tangible attributes must be efficient and well-equipped to handle international patients who generally demand high quality professional services (**Parasuraman et al.,1991**). This includes medical equipment being updated and renewed frequently to maintain high technological standards, comfortable rooms and facilities plus neat appearance of nurses. Reliability refers to the service provided by nurses on the ward within the promised timeframe. This reflects the ability to perform a service dependably and accurately. It is one of the most important service components for customers (**Kassim, 2001**).

Responsiveness represents the willingness of nurses to provide services promptly and in a timely manner. Assurance reflects the knowledge and courtesy of nurses and their ability to inspire trust and confidence during communication. It includes an ability to provide clear explanations before care is given plus explanations of medicine to patients before discharge. Empathy involves caring, individualized attention of nurses (**Parasuraman et al.,1991**).

Nurses form a very important group, which is largest single technical group of personal en in

hospital care next to doctors and consume almost one third of hospital cost. 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 (**Mufti et al., 2008**).

To be able to improve care, nurses need objective knowledge about patient perceptions of the care and must be aware of the patient attitudes, thus the aim of the current study was to assess the patients perceptions toward quality of nursing services provided at Al Noor Specialist Hospital.

Significance of the study

In Saudia Arabia, nurses came from diverse socio-cultural backgrounds; nevertheless, there is no uniformity in application the standard nursing care among the Suadi's hospitals. The complex diversity of nurses in health settings may emerges some difficulties and barriers in communication and involvement relationship between nurses and their patients. Arising from this assumption, is the need to examine the perception held by patient about quality of nursing services rendered to them.

Also, it was hoped that this study finding generates information on expectation and perception of patient towards service provided and it would have a significant implication to hospital management as the provider in developing strategies and action plan towards excellent service quality.

Aim Of The Study

The aim of the present study is to assess the patients perceptions toward quality of nursing Services provided at Al Noor Specialist Hospital.

Research Questions

What is the level of patients' expectation toward nursing services?

What is the level of patients' perception toward nursing services?

What is the level of patients' satisfaction from perspective services gap?

2. Subjects & Methods

Research design

Current study used descriptive correlational research design.

Setting

The study was conducted in medical, surgical, burns and obstetric wards at Al-Noor Specialist Hospital.

Sample

The subjects for the study included 90 patients admitted to medical, surgical, burns and obstetric wards.

Criteria for subjects' inclusion

The participants were selected for inclusion in the study based on these criteria: they were admitted to the hospital for at least three night, they were in

stable condition and able to respond to the questionnaire and their condition was not critical and there was no risk of infection.

Tools

The tools of data collection used in this study were included:

1-Assessment sheet designed by the researchers to collect the demographic data (such as, gender, unit, length of stay).

2- Consumer Perception of Service Quality Sheet (SERVQUAL) designed by (Parasuraman et al., 1991) was used to measure both patient expectation and perception of service quality (SERVQUAL).

Accordingly, the (SERVQUAL) consists of the perception form which measure patient perception of service quality, and the expectation form which can be assessed patient expectation of service quality. It consisted of 27 items classified as follows five dimensions as follows Tangibility (6 items), Reliability (7 items), Responsiveness (3 items), Assurance (4 items) and Empathy (7 items).

The five dimensions of the (SERVQUAL) consists of tangibles which assess the appearance of physical facilities and medical equipment's, reliability items which assess the ability to perform the promised service dependably and accurately, responsiveness items which assess the willingness to help patients and provide a prompt service, assurance items that assess the knowledge and courtesy of the service providers and the ability to convey trust and confidence for patients that received treatment and finally empathy that assess the caring, individualized attention the service provider provides its patients.

The scoring system of the patient perception of (SERVQUAL) was 5 points Likert Scale type as follows, not satisfied (1 point), least satisfied (2 points), quite satisfied (3 points), satisfied (4 points) and most satisfied (5 points). While the scoring system of patient expectation of (SERVQUAL) was 5 points Likert Scale type as follows, not important (1 point), least important level (2 points), quite important (3 points), important (4 points) and most important (5 points).

The scores of patients perception and expectation level toward quality of nursing services expressed as a maximum of 135 scores as follows; not satisfied and not important (27-53 scores), least satisfied and least important (54-80 scores), quite satisfied and quite important (81-107 scores) and most satisfied and most important (108- 135 scores).

To assess the Service gap is the result of expectation score minus the perception score. If the result of the formula is a positive score its indicates a dissatisfaction level of service quality, while a negative score indicates satisfaction in the service quality.

(Service Quality Score) = Expectation Score – perception Score,

-ve Score = Satisfaction and +ve Score = Dissatisfaction.

Pilot study

To assess the reliability and clarity of the tools used in the study for data collection, a pilot study was conducted with a representative sample of 10 patients admitted to medical and surgical wards. The pilot study gave the investigators experience how to estimate the needed time to fill in sheets and how the content are clear for the nurses. Based on the results of the pilot study needed refinement and modifications of the tools were applied.

Procedure

An official permission was obtained to conduct this study. The investigators was hold a meeting with the patients in the units to introduced themselves and briefly explained the nature of the study to the approached ones who met the criteria for inclusion in the sample and each meeting took for 5-10 minutes with each patient to be completed with a daily interview of about 8-10 patient. A code number was used for every patient to maintain confidentiality The field work lasted over two weeks.

The statistical analysis

Data entry and analysis were done using Statistical Package for the Social Sciences "SPSS" program, version 15. Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables and means and standard deviations for quantitative variables. T.test analysis was used for assessment of the relationships among quantitative variables. Chi-Square analysis was used for assessment of the relationships among qualitative variables. Statistical significance was considered at $p\text{-value} \leq 0.05$.

Ethical considerations

Before any attempt to collect data, a formal letter was issued from the Faculty of Nursing Umm Al Qura University, to obtain an official approval from the administrators of the hospitals where the data were collected to conduct the study. The letter identified the investigators, the title and aim of the study. Code number for each patient was be maintained and participation was voluntary.

3. Results

The results of this study are presented under the following heading: demographic descriptions of the patients under study, level of patients' expectation and perception related to quality of nursing services and gap of patients' expectation and perception related to SERVQUAL dimensions.

Figure 1: showed that, (69%) of the subjects were female, while (31%) of them were male.

Figure 2: illustrated that, (41%) of the study subjects stayed from 3-5 days, 37% of them stayed from 6-10days. While 22% of respondents stayed over 10 days.

Figure 3: clarified that (48.9%) were from medical ward, 21.1% & 23.3% of them were from surgical and obstetric units respectively. While the rest of them(6.7%) were from burn unit.

Figure (4) showed that (32.7%) of study subjects were satisfied, 22.5% of them were most satisfied and 27.5% were quite satisfied by quality services provided by nursing. While, 13.4% of them were least satisfied and the rest of participates (4%) were not satisfied by quality of nursing services.

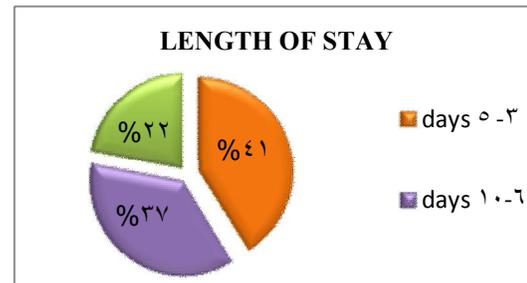


Figure (2): Distribution of the patients as regards their length of stay (N=90).

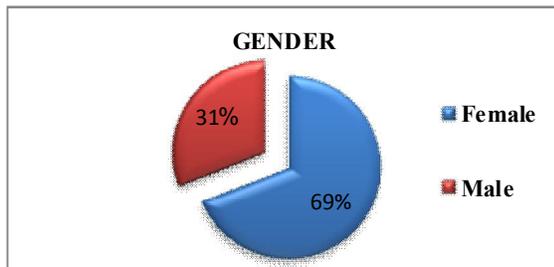


Figure (1): Distribution of the patients by their demographic characteristics (n=90).

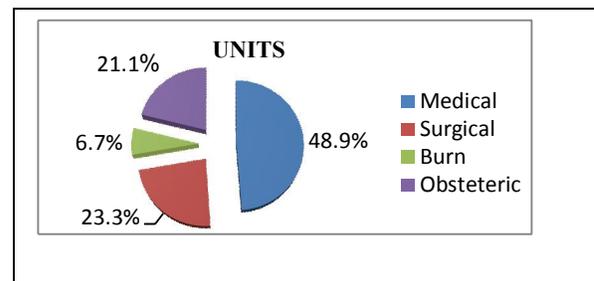


Figure (3): Distribution of the patients as regards units (N=90).



Figure (4): Distribution of the patients as regards perception levels of quality of nursing service (N=90).

Table (1) showed that there was highly statistical significant difference of patients' expectation and perception as regards all dimensions of quality nursing services. ($t = 9.01, 9.68, 6.74, 9.10 \& 7.32$ $p \leq 0.00$). While the highest mean scores (3.97) was for patients' expectation for tangibility dimension of SERVQUAL and the highest mean scores (3.82, 3.78, 3.70 & 3.68) were for patients' perception in relation to reliability, assurance, empathy and responsiveness dimensions of quality nursing. Moreover there was highly statistical significant difference of patients' expectation and perception as regards total mean score SERVQUAL while the highest mean score (3.75) for patients' expectation.

Table (2) clarified that patients were satisfied (0.27, 0.25, -0.21 & -0.16) with responsiveness, assurance, reliability & empathy dimension of SERVQUAL, while they were dissatisfied (+0.21) with tangibility dimensions of SERVQUAL respectively. While, patients were not satisfied (+0.19) with total SERVQUAL.

Table (3) indicated that the difference in SERVQUAL dimensions among male and female patients' perception. there were statically significant differences ($t=6.56, 3.33, 4.6$ $P=0.12, .05 \& .03$) in relation to tangibility, reliability & empathy dimensions of SERVQUAL. While the highest mean score (3.8) for all pervious dimensions for male.

Table (4) showed that ANOVA test of patients' perception of SERVQUAL dimensions as regards length of stay. There was statistically significant differences ($f= 3.16$ $P= .04$) in tangible dimension, while the highest mean score ($X= 3.9$) for over ten days.

Table (5) showed that ANOVA test of patients' perception of SERVQUAL dimensions as regards unit there was statistically significant differences ($f= 4.4$ $P=.03$) for responsiveness dimension while the highest mean score ($X= 3.7$) for surgical unit.

Table (1): Total mean scores of service quality dimensions among patients' expectation and perception (n=90)

SERVQUAL	Expectation		Perception		T. test	P. value
	X	+S.D	X	+S.D		
Tangibility	3.97	0.73	3.76	0.80	9.01	*0.0
Reliability	3.61	0.79	3.82	0.80	9.68	*0.0
Responsiveness	3.41	0.83	3.68	0.95	6.74	*0.0
Assurance	3.53	0.80	3.78	0.81	9.10	*0.0
Empathy	3.54	0.78	3.70	0.90	7.32	*0.0
Total mean score	3.75	0.71	3.56	0.60	8.92	*0.0

*Sig. $P \leq 0.05$

Table (2): Gap between patients' expectation and perception in relation to service quality dimensions

SERVQUAL	Expectations mean	Perceptions means	GAP
Tangibility	3.97	3.76	+0.21
Reliability	3.61	3.82	-0.21
Responsiveness	3.41	3.68	-0.27
Assurance	3.53	3.78	-0.25
Empathy	3.54	3.70	-0.16
SERVQUAL	3.75	3.56	+0.19

Table (3): Differences of male and female patients' perception in relation to service quality dimensions

SERVQUAL	Gender				T	P
	Male (N=28)		Female (N=62)			
	X	SD	X	SD		
Tangibility	3.8	.96	3.7	.72	6.56	*.012
Reliability	3.8	.93	3.7	.73	3.33	*.05
Responsiveness	3.8	.96	3.6	.94	.16	.68
Assurance	3.7	.81	3.7	.78	.23	.62
Empathy	3.8	1	3.6	.80	4.6	*.03

*Sig. $P \leq 0.05$

Table (4): Difference of patients' perception in relation to service quality dimensions as regards length of stay (n=90)

SERVQUAL	Length of Stay						F	P
	(3- 5) days (N=37)		(6-10) days (N=33)		Over 10 days (N=20)			
	X	SD	X	SD	X	SD		
Tangibility	3.5	.96	3.8	.74	3.9	.83	3.16	*.04
Reliability	3.6	.72	3.7	.87	4.1	.75	1.73	.18
Responsiveness	3.5	.96	3.7	.83	3.7	1.1	.46	.66
Assurance	3.6	.84	3.8	.77	3.8	.81	.54	.58
Empathy	3.6	.80	3.6	.86	3.8	.96	.44	.64

*Sig. $P \leq 0.05$

Table (5): Differences of patients' perception in relation to service quality dimensions as regards units (n=90)

SERVQUAL	Units								F	P
	Medical N= 44		Surgical N=21		Obstetric N= 19		Burn N= 6			
	X	SD	X	SD	X	SD	X	SD		
Tangibility	3.7	.78	3.8	.95	3.6	.75	3.5	.69	3.6	.06
Reliability	3.8	.79	3.9	.84	3.4	.88	3.9	.41	.12	.73
Responsiveness	3.6	1.1	3.7	.73	3.47	1.1	4.2	.52	4.4	*.03
Assurance	3.8	.84	3.7	.73	3.5	.88	4.2	.53	.35	.55
Empathy	3.7	.88	3.7	.87	3.5	.90	3.7	.84	.07	.79

*Sig. P ≤0.05

4. Discussion

Health care has become specialized and compartmentalized because of its complexity. With regards to this satisfaction of patient is an increasing focus. Patient satisfaction has become a critical element in assessing health care delivery systems (Ozge,2001). Recognizing the needs to monitor how patient feel about the care provided can also be used as a catalyst for service improvement.

The finding of the current study showed that patients were satisfied all over SERVQUAL of nursing. this finding was consistent with the findings of Chunlaka, (2010) who found that high levels of satisfaction in all five dimensions.

A similar study conducted by Lin et al., (2004) who studied patient perceptions of service quality in group clinics versus solo practice clinics. They measured the same five dimensions of service quality plus potential patient loyalty (PPL) on a five point scale. After accounting for random effects of the clinical and geographical location, patients visiting a group practice clinic reported significantly higher service quality in all dimensions.

The finding of the current study revealed that there was highly statistical significant of patients' expectation and perception as regards all dimensions of quality nursing services. The finding of Yildiz, & Erdog˘(2004) was congruent with the finding of the current study. The researchers of Mawajdeh et al., (2001) used SERVQUAL to evaluate quality of nursing service in Taiwan. The findings indicated that responsiveness was highly significant in predicting overall satisfaction with hospital services. Reliability was significant in predicting overall satisfaction with nursing care and the intent to return. Empathy was a highly significant predictor of a patient's intent to recommend the hospital to others.

Furthermore, in the survey study conducted by Zavare, (2010) on 420 inpatients to determine the extent of their satisfaction with the overall care provided at the hospital showed that, the extent of overall patient satisfaction with the quality of care provided at the hospital to be quite high Individually,

nursing care received the maximum patient satisfaction ratings.

The current finding of the present study indicated that the highest level of satisfaction was for reliability, followed by, assurance, tangibility empathy, responsiveness, and , respectively, comparing with the findings of Wang, (2007) who found the highest level of satisfaction concerned tangibles, followed by responsiveness, reliability and assurance, respectively. In addition to , finding of Bacon, & Mark, (2009) who found that that international patients' satisfaction in the five dimensions were at high level. The highest level of international patients' satisfaction was the "tangibles", followed by "responsiveness", "reliability" and "assurance". The lowest patients' satisfaction level was the "empathy" dimension

The finding of the present study revealed that patients were satisfied regards reliability, responsiveness, assurance, and empathy dimension as negative score, while patients were dissatisfied related to tangibility dimension as a positive score. The finding of study was inconsistent with Sadjadian et al., (2004) who studied patient satisfaction with nursing care at a university hospital in Turkey using the SERVQUAL scale.

The scores for five dimensions did not meet the expectations. Negative scores for tangibles, reliability, responsiveness, assurance and empathy indicated areas needing improvement. The results showed that patients' were satisfied with nursing care. While this finding was inconsistent with the finding of Rafii et al., (2007) who found that not one of dimensions of the tangibles, reliability, responsiveness, assurance and empathy patients were satisfied with the services provided.

The present finding was consistent with Chou et al., (2005) who used SERVQUAL to evaluate the quality of nursing service in Taiwan. Their study showed that reliability was significant in predicting overall satisfaction with nursing care and the intent to return. According to (Brain et al., 2002) also advised

that reliability was one of the most important service components for customers.

Finding of the present study illustrated overall satisfaction concerning responsiveness was lowest mean score while patients perception were satisfied. This finding was consistent with the research result obtained by **Mrayyan, (2006)** who showed that responsiveness was highly significant in predicting overall satisfaction with hospital services

This results might be heavy workloads and severe staff shortages are common characteristics of governmental Saudi hospitals. Moreover there were fewer nurses allotted to direct care. This contributed to changes in patients' perceptions of nursing care, hence led to reduced patients' satisfaction.

Male patients were more satisfied with nursing care than females. The finding agrees with **Rafii, (2008)** of patient satisfaction with quality of care. It has been suggested that men have fewer expectations than women and that male patients spontaneously receive more information from nursing staff than female patients (**Johansson et al., 2002**). Although the finding of **Alhusban, & Abualrub (2008)** found no differences in nurse caring and patient satisfaction for male versus female cardiac patients.

The finding of the current study found that patients were satisfied with their stayed in hospital tangible dimension of SERVQUAL when they stay more than. This finding was consistent with finding of **Johansson et al., (2002)** who found a higher percentage of patients with length of stay (LOS) more than ten days had a better perception of caring attitude, responsiveness and ward organization capabilities of the nurse.

Conclusion

Patients' perception has become an important health care element in the evaluation of health care. The findings of the study provide nurses with information about aspects that enhance or hinder patient satisfaction.

The present study concluded that patients' perception was satisfied with the nursing services rendered to them. The highest level of patients' perception was the reliability, followed by assurance, tangibility, empathy, and the lowest patients' perception was the responsiveness dimension. There was highly statistical significant difference of patients' expectation and perception as regards all dimensions of quality nursing services. Also, male patients were more satisfied with nursing services than female

Recommendations for nurses

- Educational programs about raising nurses' awareness towards the importance of patient satisfaction specific to nursing services.

- Educational program about how to improve quality of nursing services.

Recommendations for future study

- Future researches about quality of nursing services in different setting in hospital such as (outpatients clinics, pediatric ward).
- Further research should be conducted on both patient and their family, indicates over view about actual service rendered.
- Replication of the study on larger samples of patients in different health care settings to obtain more generalizable results.

Recommendations for administration of hospital

- Hospital which was under study should use the findings of this study to improve nursing services.

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