

Evaluation of Inpatients' Satisfaction with Ahvaz Jundishapur University of Medical Sciences

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Abstract

Aims: Good physician communication with the patient and patient satisfaction increase the patient's adherence to the prescribed treatments and improves his health. This study aimed to evaluate patients' satisfaction with their physicians in the teaching hospitals of Ahvaz Jundishapur University of Medical Sciences in 2019.

Instrument & Methods: The present study is a descriptive cross-sectional study. The study population was all patients admitted to the inpatient wards of Ahvaz Jundishapur University of Medical Sciences. The researcher-made questionnaire consisted of two parts: demographic questions and questions related to the satisfaction with the physician. Descriptive statistics were used, including mean and standard deviation (for quantitative variables) and frequency and frequency percentage (for qualitative variables).

Findings: Out of 315 participating patients, 265 knew their physician. A significant relationship was observed between gender and satisfaction in this study, and 52.3% of females were highly satisfied with their physicians. This percentage was 34.4% in males and was low in surgical wards, while in non-surgical wards, the patients were highly satisfied with their physician. There was no significant relationship between age, level of education, length of hospital stay, and patient satisfaction with the physician.

Conclusion: Given the important role of communication skills in patient satisfaction, it is necessary to include training of these skills in a serious and specialized manner and take the evaluation of their communication skills, such as their scientific evaluation, seriously.

Keywords

Patient Satisfaction [<https://www.ncbi.nlm.nih.gov/mesh/?term=Patient+Satisfaction>];
Physician [<https://www.ncbi.nlm.nih.gov/mesh/68010820>];
Inpatients [<https://www.ncbi.nlm.nih.gov/mesh/?term=Inpatients>];

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Introduction

The quality improvement approach is the ultimate approach in the evolutionary process of control. Satisfaction surveys are also an important factor in providing the information needed for intervention to improve the level of production or elimination processes with the aim of adapting the product or service to the needs and expectations of customers. The concept of customer satisfaction in the health sector, like in other areas and industries, was first considered as a mediating achievement to achieve other goals. However, it gradually emerged as a final consequence of monitoring and improving the quality of health services. Higher patient satisfaction with health care depends on several factors, such as the proper performance of services, behavior, and proper performance of staff, especially doctors and other medical staff with patients. The aim of this study was to evaluate the satisfaction of patients admitted to the educational wards of Ahvaz Jundishapur University of Medical Sciences in 2018 [1, 2].

Instrument and Methods

This study is a descriptive cross-sectional study. The study population includes all patients admitted to the teaching hospitals of Ahvaz Jundishapur University of Medical Sciences. The non-probabilistic sampling was done, and the study was done in 2018. The researcher-made questionnaire consisted of two sections: demographic questions and the section related to patient satisfaction, which included seven questions with answer options of the low, medium, and high. The minimum patient satisfaction score is 7, and the maximum is 21. To assess the validity of the questionnaire using the content validity method, the questionnaire was provided to seven experts in medical ethics, and their opinions were applied. The test-retest method was used to assess the reliability of the questionnaire. The questionnaire was given to several patients at two different times at intervals of 10 days, and the reliability of the questions was assessed. The researcher came to the patient's bedside in the inpatient wards of Jundishapur University of Medical Sciences in Ahvaz and completed a questionnaire by interviewing patients. In this study, descriptive statistics, including mean and standard deviation (for quantitative variables) and frequency and frequency percentage (for qualitative variables), were used. The regression model was used to evaluate the significance level of the relationship between variables and patient satisfaction. All statistical analyses were performed using SPSS 22 software.

Findings

Of the 315 participating patients, 265 knew their physician (Table 1).

Table 1) Demographic information of the subjects

Variable	N (%)
Age	
25>	38 (12.1)
44-25	128 (40.6)
64-45	91 (28.9)
≥65	58 (18.4)
Education	
Illiterate	66 (21)
Primary	82 (26)
Secondary	76 (24.1)
High school	70 (22.2)
Academic	21 (6.7)
Gender	
Male	187 (59.4)
Female	128 (40.6)
Duration of hospitalization	
Up to three days	114 (43.01)
3-190 days	133 (50.1)
More than ten days	18 (6.79)
Ward	
Surgical	160 (50.8)
Mon-surgical	155 (49.2)

In this study, a significant relationship was observed between gender and satisfaction and 52.3% of females were highly satisfied with their physician, while this percentage was 34.4% in males. Also, in surgical wards, 4% of people were very satisfied, while in non-surgical wards, 70.9% of people were very satisfied with their physician. There was no significant relationship between age, level of education and length of hospital stay, and the level of patient's satisfaction with the physician. In this study, the majority of patients (43.2%) were slightly satisfied with the way the physician communicated with them. Also, the majority of 49.2% of patients stated that the physician provided them with the necessary training to a small extent. Also, 41% of patients were slightly satisfied with respecting their privacy by their physician. Most of the patients (39.5%) were slightly satisfied with the timely presence of the doctor at their bedside. Also, most of the patients (44.7%) were slightly satisfied with the doctor's explanations about the disease. In addition, 37% of patients stated that their doctor should himself to them. Regarding the physician's sympathy, 40% of patients said that the physician sympathized with them. Finally, 38.1% of patients had high satisfaction, 20% had moderate satisfaction and 41.9% had low satisfaction with the physician's relationship with them (Table 2).

In the present study, there was no significant relationship between the age of patients and satisfaction with the physician ($p=0.84$), while there was a significant relationship between the sex of patients and satisfaction with the physician and women were very satisfied with their doctor and men were not very satisfied with their doctor ($p=0.04$). In

the present study, there was a significant relationship between the type of hospitalization of patients and satisfaction with their physician ($p=0.001$). Patients' satisfaction with the doctor in surgical wards was low and in non-surgical wards, people were very satisfied. There was no significant relationship between the duration of hospitalization of patients and satisfaction with the physician ($p=0.09$). Also, no significant relationship was observed between the education of the subjects and their satisfaction with the physician ($p=0.1$). Due to the high volume of data, details were not mentioned in the table.

Table 2) Level of patient satisfaction

Satisfaction	Number	Percentage
How satisfied are you with the way your physician communicates with you?		
High	80	30.5
Moderate	70	26.3
Low	115	43.2
Does your physician provide the necessary training?		
High	80	30.1
Moderate	54	20.7
Low	131	49.2
Is your privacy protected by your physician?		
High	96	36.1
Moderate	61	22.9
Low	108	41.0
Are you satisfied with the timely presence of your physician at your bedside?		
High	92	35.0
Moderate	68	25.6
Low	105	39.4
Does your physician answer your questions about your illness?		
High	98	36.8
Moderate	49	18.4
Low	119	44.7
Does the physician introduce herself to you?		
High	100	37.6
Moderate	66	25.2
Low	99	37.2
Does your physician sympathize with you?		
High	106	40.0
Moderate	94	35.5
Low	65	24.5
"Total Satisfaction"		
High	101	38.1
Moderate	53	20.0
Low	111	41.9

Discussion

Among all branches of professional ethics, medical ethics is of great importance. Patients' satisfaction with the health care system is an important method of assessing the quality of health care and services. Good communication between physician and patient promotes patient satisfaction, builds trust, and

results in better adherence to medical instructions and treatment methods and better patient compliance with the disease, and ultimately better health outcomes [3, 4]. The present study was conducted to evaluate the satisfaction of patients admitted to the educational centers of Ahvaz Jundishapur University of Medical Sciences with their physicians in 2018. In this study, out of 315 patients, 265 patients entered the study because they knew their physician and most of the participants were male. Less than half of the participants were in the age group of 25-44 years and the mean age of the subjects was 45.95 years. The level of education of about a quarter of the participants in the study was primary level. Regarding the level of education, what was obtained in the present study is almost in accordance with the target population, i.e. the residents of Ahvaz, and this means that the frequency of the sample population and its distribution in terms of education level is similar to our target community (www.amar.org.ir). Inconsistent with the results of the present study, Rahmani et al. assessed patients referring to Ahvaz clinics in 1396, and 86.5% of the subjects were female and 13.5% were male. The mean age of the patients was 35.53 years and 21.2% of the subjects were illiterate, which was consistent with the present results in terms of illiteracy. Similar to the present results, there was no significant relationship between the age of the patients and their satisfaction with the physician. It seems that regarding the number of outpatients referring to health centers or hospitals, the number of women was more than men. Therefore, the results of this study regarding the number of men and women hospitalized in the wards are not consistent with the results of outpatient studies. Rahmani et al. similar to the present results did not report a significant relationship between patient education and satisfaction [5]. Unlike the proportion of men that we more than women in the present study, Mahmoudian et al. performed a study on patients referring to psychiatric clinics affiliated with Shiraz University of Medical Sciences and reported that 39.1% of the subjects were male and 60.9% of them were female. Also, 17.6% of the subjects were illiterate and similar to the present results, they did not report a significant relationship between the age of the patients and their satisfaction with the physician [6]. Bastani et al. reported that the age of the patients was in the range of 1-71 years and the mean age was 36.84 years, which was consistent with the results of the present study. Also, in terms of education level, 63.6% had a diploma and below diploma degree, 27% had an associate and bachelor's degree, and 4.6% had a master's degree and above [1]. Heidari et al. reported that patients with higher education had lower satisfaction with their physicians than those with less education [7]. Khamseh et al. reported that the average of general satisfaction, quality of services, communication, and ease of access to services in

patients with below diploma education was higher than other groups [8]. Based on the findings of Hajian *et al.*, there was no significant relationship between patients' satisfaction with their gender. This shows that the quality of service determines the level of satisfaction and the patient's gender has no effect in this regard [9]. Azami *et al.* reported that there was no significant relationship between patients' gender and their satisfaction [10]. However, in the studies by Massoud *et al.* [11] and Al-Doghitr *et al.* [12], women were more satisfied than men, which is consistent with the present study. As mentioned, more than half of the participants in the present study were hospitalized in surgical wards. Less than ten percent of the participants were hospitalized for more than ten days. Most participants knew their doctor. In the present study, the mean total satisfaction of the patients with the treating physician was 14.36 from the achievable range of 7-21, which was the average of the patients' overall satisfaction with their physician.

Different countries, depending on the level of development and according to the rights of citizens, have considered public satisfaction with the health system. Patient satisfaction is an important indicator in measuring the quality of health services. In developed countries, hospitals and medical centers are identified every year that have made great efforts to improve the performance of the medical system. Satisfaction assessment has been increasingly considered as an important health consequence and can be used for four purposes. To compare different health care programs and systems, to evaluate the quality of health care, to determine which types of services should be modified or changed to make patients more satisfied, to assist the health care system and institution, and to determine what patients like [6, 14, 15]. In Iran, studies on satisfaction have been conducted in various areas of the health care system, such as inpatients, outpatients, emergencies, etc., but studies on patients' satisfaction with the physician are limited. Farsi Nejad *et al.* in 2012 in Tehran assessed a public teaching hospital and three private hospitals and observed that the younger the patient and the higher his education and income, the higher his level of expectation from medical services. In this study, patients' satisfaction with respect for their privacy and the principle of confidentiality in private hospitals was 76% and in public hospitals was 56%, and also the satisfaction of receiving sufficient and desirable information was 66% and 61%, respectively [15]. In 2010, a cross-sectional study was conducted by Sahebi *et al.*, in which 400 patients were selected from seven hospitals in Tabriz. They answered the designed questionnaire regarding respecting privacy and mental health and the average score was 10.6 out of an ideal score of 17 [16].

In 2009, a descriptive-analytical and cross-sectional study was conducted by Sahebzadeh on 100 elderly

patients in the inpatient wards of Isfahan University of Medical Sciences. In order to collect information, the elderly patient satisfaction questionnaire was designed based on the patient satisfaction questionnaire and then some questions were added or subtracted from it. The average score of general satisfaction with public hospitals in Isfahan was 56.4% [17]. In 2005, Hajian conducted a cross-sectional study on 615 patients admitted to Shahid Beheshti and Yahya Nejad hospitals in Babol, and the overall patient satisfaction rate was estimated at 93.6%. In terms of satisfaction with physician services, this percentage was 94% [9]. In a cross-sectional study conducted by Amerian *et al.*, a sample size of 165 people was selected using the available sampling method for outpatient and inpatient wards of a military hospital. In the emergency department, the highest satisfaction was related to the waiting time for medication. The lowest satisfaction in the radiology department was related to the explanations of the radiology preparation department. The lowest satisfaction in the clinic department was related to the timely presence of the physician and the lowest satisfaction with the physicians' services was related to the physician's explanations about the disease and repeating tests and photography [18]. Ansari *et al.* interviewed a total of 1260 patients in clinics, emergency departments, and hospital wards affiliated with the Iran University of Medical Sciences. The overall level of patient satisfaction with clinic services was 67.3%, with emergency services was 80.7%, with hospital services was 72.2%, and with emergency services was 86.5%. Also, patients' satisfaction with physical and mental care was 87.1% and 69.7%, respectively, and patient's dissatisfaction with the payment, especially those referring to the emergency department was very significant [19]. In general, health satisfaction rates are higher in many developing countries than in developed ones. Perhaps the reasons for high satisfaction in these countries are due to differences in patients' knowledge, experiences, and expectations [20].

Conclusion

Given the important role of communication skills in patient satisfaction, it is necessary to include training of these skills in a serious and specialized manner and take the evaluation of their communication skills, such as their scientific evaluation, seriously.

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Ethical Permissions: The ethics committee of Ahvaz Jundishapur University of Medical Sciences approved this study by the Ethical code: IR.AJUMS.REC.1396.196

Conflicts of Interests: This research is extracted from the thesis of Sara Moogahi.

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Writer (50%); Sasan Moogahi (Second author), Assistant Researcher/Methodologist/Discussion Writer (25%); Sara Moogahi (Third author), Introduction Writer/Statistical Analyst (25%).

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