Evaluation Of Patient Satisfaction From Doctors And Nurses In A University Hospital

Bir Üniversite Hastanesinde Hastalarin Doktor Ve Hemşirelerden Memnuniyet Durumlarinin Değerlendirilmesi

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ABSTRACT

In recent years, developments in health technology have brought about a change in the quality of health services. Nowadays, health services have started to be presented with professional management approach. Within the scope of professional management, increasing the satisfaction of the patients and improving the service quality are among the main targets. The concept of quality in health services has been introduced to the agenda of our country a few years ago and it is aimed to provide services in accordance with the standards determined in public hospitals as well as the private sector. With the changing social structure, the expectations of the service sector have changed and the service provider started to make attempts to meet these expectations. These developments have led to an increase in the quality and quantity of the studies to determine the satisfaction of the patients. In this study, it was aimed to determine the thoughts of the patients and their relatives who were treated as outpatients and / or inpatients from Eskişehir Osmangazi University Hospital about doctors and nurses.

Key Words: Quality, Satisfaction, Patient

ÖZET

Son yıllarda sağlık teknolojisinde gelişmeler sağlık alanındaki hizmet kalitesinin de değişmesini beraberinde getirmiştir. Günümüzde sağlık hizmetleri profesyonel işletmecilik anlayışı ile sunulmaya başlamıştır. Profesyonel işletmecilik anlayışı içerisinde hastaların memnuniyetlerini ve hizmet kalitesini arttırma temel hedefler arasında yer almaktadır. Sağlık hizmetlerinde kalite kavramı ülkemizin gündemine bir kaç yıl önce girmiş ve özel sektörün yanısıra kamu hastanelerinde de belirlenen standartlara uygun hizmet verilmesi amaçlanmaktadır. Değişen toplum yapısıyla birlikte hizmet alan kesimde beklentileri değişmiş ve hizmet sunan kesim bu beklentileri karşılamaya yönelik girişimlerde bulunmaya başlamıştır. Bu gelişmeler hastaların memnuniyetlerinin belirlenmesine yönelik çalışmlaarın nitelik ve nicelik olarak artmasına neden olmuştur. Bu çalışmada Eskişehir Osmangazi Üniversitesi Hastanesi'nden ayaktan ve/veya yatarak tedavi gören hasta ve hasta yakınlarının doktorlar ve hemşireler hakkındaki düşüncelerini belirlemek amacıyla gerçekleştirilmiştir.

Anahtar Kelimeler: Kalite, Memnuniyet, Hasta

1. INTRODUCTION

Within the quality health system, a balance should be established between the expectations of suppliers, patients and doctors and an accountable order should be established. When quality is considered in terms of health, it is understood that satisfaction of patient expectations and satisfaction of the service provided (Asunakutlu, 2004; 7). Hospitals, which are among the most important units of health institutions, play an important role in establishing a healthy society. In hospitals, determining the patient satisfaction, determining the strengths and weaknesses and shaping the service according to the satisfaction situations emerged.

The quality of health services is shaped according to the attitudes and behaviors of the people who provide services (Gülmez, 2005; 147). For this reason, there may be differences between institutions, even within the same institution. Service quality in hospitals is discussed in two dimensions as technical and accommodation size (Devebakan and Aksarayli, 2003; 40). Technical dimension doctor, nurse et al. While the health includes the service of the employees, the size of the accommodation includes factors such as food, room temperature and cleanliness that includes administrative services. (Devebakan and Aksarayli, 2003; 40; Carman, 2000; 347).

In patient satisfaction surveys, it is aimed to determine the satisfaction levels of the patients, to determine the negative conditions, to determine the expectations and to develop the appropriate

service model for them (Yılmaz, 2001; 5). Patient satisfaction is used to evaluate the quality of service in health institutions and varies according to the socio-demographic characteristics of the patients (Özer and Çakıl, 2007; 3). In recent years, patient satisfaction has become an important issue in quality applications.

Satisfaction is considered to be the degree of fulfillment of the needs of the customer as a result of shopping (Oliver, 1999; 34). Patient satisfaction is shaped according to factors such as education, cultural values, status, habits, lifestyle (Engiz, 2007). Yilmaz (2011) describes patient satisfaction as a psychological satisfaction level between the patient's expectations from the hospital and what they find. Satisfaction status may vary from person to person depending on the number of days in the hospital, number of people in the room, social security, age and educational factors (Turaman, 1997; 27). Patient satisfaction changes over time due to the diversification of expectations and service quality.

Patient satisfaction was first discussed in the United States in the field of nursing (Merkouris, Ifantopoulos, Lanara, Lemomdou, 1999; 20). Patient satisfaction studies, learning how patients find the quality of the services they receive and determining the factors affecting their satisfaction is aimed. Patient satisfaction is shaped depending on lifestyle, experiences and values and can be defined differently by the same people at different times (Hill, 1992, 115-119). Patient satisfaction can affect experiences, cultural values, age, health status, education level, social status (Yılmaz, 2001; 69). Patient satisfaction should be ensured in order to provide quality health service.

2. RESEARCH METHODOLOGY

The population of the descriptive study consists of the patients and their relatives who were treated in Eskişehir Osmangazi University Hospital in 2016.The research sample is; In 2016, 6280 people participated in the survey in Eskişehir Osmangazi University Hospital. In the questionnaire; His thoughts on doctors and his thoughts about his thoughts about nursing services are included. Survey method was used as a data collection tool in the study. The questionnaires were provided to answer the policlinic and clinical secretaries by reaching out to the patients and their relatives during the official procedures. The data obtained from the survey questions were evaluated by SPSS 20.0 program.

3. FINDINGS AND DISCUSSION

It was ensured that the policlinic and clinical secretaries of the questionnaires consisting of 28 questions were answered by the patients and their relatives during the official procedures. The number of questionnaires distributed is 1000 and the rates of return of the surveys are as follows.

- In January 747 (%74,8)
- In February 743 (% 74,3)
- In March 739 (% 73,9)
- In April757 (% 75,7)
- In May 717 (% 71,7)
- In June 600 (% 60)
- In July 650 (% 65)
- In August-September-October 680 (% 68)
- In November-December 627 (% 62,7)

Tablo1: Socio-Demographic Information of Participants

	Number	Percent
Gender		
Female	4145	% 66
Male	2135	% 34
Age		
0-18	312	% 4.9
19-35	2061	% 32.8
36-65	2758	% 43.9
65 ve üzeri	1149	% 18.3
Marital status		
Married	4576	% 72.8
Single	1704	% 27.2
Education Status		
Primary	1134	% 18
Secondary School	1292	% 20.5
High School	2781	% 44.3
University	1073	% 17.1

66% of the participants were women and 34% were men. The 36-65 age group was the largest group with 43.9% and the 0-18 age group was the smallest group with 4.9%. 72.8% of the participants were married. In education, 44.3% had the largest group of high school graduates, while 18% had primary school graduates with the smallest group.

In a five-part questionnaire, the patients and their relatives;

1. His thoughts about our doctors
2. Thoughts on Nursing Services

3.1. Opinions About Doctors

Table 2. Accessibility when needed

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	67	9,1	54	7,4	43	5,9	36	4,8	35	5,0	27	4,6	25	3,9	37	5,6	30	4,9	5,7
Enough	152	20,7	157	21,5	148	20,3	134	18,0	93	13,3	83	14,2	110	17,3	90	13,5	67	10,8	16,6
Good	272	37,1	258	35,4	284	38,9	274	36,8	243	34,7	228	38,9	242	38,0	244	36,6	226	36,6	37,0
Very good	149	20,2	148	20,3	177	24,2	174	23,4	184	26,3	152	25,9	157	24,6	168	25,1	184	29,8	26,4
Excellent	94	12,8	112	15,4	78	10,7	127	17,0	145	20,7	96	16,4	103	16,2	127	19,1	111	18,0	16,3
Total	733	100	729	100	730	100	745	100	700	100	586	100	637	100	666	100	618	100	100

Participants were able to identify physicians as good when they needed it with 37%. In January, the highest results were recorded in June, with 9.1% and excellent 20.7% in June. It is observed that the situation of satisfaction is increasing in the spring and summer months and the negative responses are decreasing.

Table 3. Listening to your doctor's complaints and giving you enough time

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	72	9,8	56	7,6	40	5,5	46	6,1	44	6,2	22	3,7	31	4,9	40	6,0	17	2,8	5,8
Enough	154	21,0	145	19,8	157	21,6	129	17,2	96	13,6	84	14,2	112	17,7	96	14,3	85	13,8	17,0
Good	263	35,9	255	34,8	254	35,0	256	34,2	236	33,5	215	36,3	218	34,4	236	35,3	219	35,4	35,0
Very Good	155	21,1	163	22,2	177	24,4	180	24,1	189	26,8	161	27,2	171	27,0	170	25,4	197	31,9	25,6
Excellent	89	12,1	114	15,6	98	13,5	137	18,3	140	19,9	110	18,6	101	16,0	127	19,0	100	16,2	16,6
Total	733	100	733	100	726	100	748	100	705	100	592	100	633	100	669	100	618	100	100

When you look at the average of the answers to the question "listening to your doctor's complaints and taking enough time", 5.8% were bad, 17.0% were good, 35.0% were good, 25.6% were excellent, 16.6% were excellent. It is observed that participants qualify poorly in the highest January and lowest in November and December. The highest qualification was given in May, while the lowest was given in January.

Table 4. Information about your disease and treatment

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	67	9,3	64	8,8	47	6,5	46	6,2	33	4,7	20	3,4	30	4,7	42	6,3	26	4,2	6,0
Enough	153	21,1	134	18,4	120	16,6	127	17,1	97	13,8	77	13,1	97	15,3	93	13,9	80	13,0	15,8
Good	238	32,9	235	32,2	279	38,6	242	32,6	211	30,0	202	34,4	214	33,8	200	29,8	196	31,9	32,9
Very Good	162	22,4	161	22,1	176	24,4	178	24,0	199	28,3	165	28,1	196	31,0	189	28,2	192	31,2	26,6
Excellent	104	14,4	136	18,6	100	13,9	150	20,2	163	23,2	123	21,0	96	15,2	147	21,9	121	19,7	18,7
Total	724	100	730	100	722	100	743	100	703	100	587	100	633	100	671	100	615	100	100

The highest rate was 32.9% good, 6% bad, 15.8% adequate, 26.6% good, 18.7% excellent responses were obtained from the participants in the study. It is observed that the bad response of the participants was given at least in June and at most in January. It is observed that the excellent response of the participants was given at least in March and at most in May.

Table 5. Smiling, gentle and concerned behavior

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.
Bad	57	7,8	47	6,4	34	4,7	24	3,2	25	3,5	17	2,9	23	3,6	32	4,8	15	2,4	4,4
Enough	138	18,8	124	16,9	108	14,9	105	14,1	91	12,9	63	10,7	52	12,9	67	10,0	66	10,6	13,5
Good	213	29,0	222	30,2	251	34,6	213	28,6	169	23,9	172	29,2	204	32,2	187	27,8	174	28,1	29,3
Very Good	174	23,7	164	22,3	197	27,2	203	27,2	192	27,2	167	28,3	174	27,4	197	29,3	190	30,6	27,0
Excellent	153	20,8	177	24,1	135	18,6	201	26,9	230	32,5	171	29,0	151	23,8	190	28,2	175	28,2	25,8
Total	735	100	734	100	725	100	746	100	707	100	590	100	634	100	673	100	620	100	100

The participants described their doctors ' smiling, gentle and related behaviour as 29.3% good, 27% very good, 25.8% excellent, 13.5% adequate and 4.4% bad. It is observed that the bad response of the participants was given at least in November/December and at most in January. It is observed that the excellent response of the participants was given at least in March and at most in May.

Table 6. Your confidence in the knowledge and expertise of your doctor

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	39	5,3	29	4,0	17	2,4	11	1,5	12	1,7	7	1,2	13	2,1	16	2,4	8	1,3	2,4
Enough	125	17,1	113	15,5	89	12,3	92	12,4	70	10,0	51	8,7	79	12,5	61	9,1	52	8,4	11,8
Good	204	27,9	198	27,2	240	33,2	178	23,9	152	21,6	147	25,0	177	28,0	141	21,1	139	22,6	25,6
Very Good	176	24,1	175	24,1	213	29,5	216	29,0	209	29,7	185	31,4	189	29,9	190	28,5	213	34,6	29,0
Excellent	186	25,5	212	29,2	164	22,7	247	33,2	260	37,0	199	33,8	174	27,5	259	38,8	204	33,1	31,2
Total	730	100	727	100	723	100	744	100	703	100	589	100	632	100	667	100	616	100	100

The average of the answers to the question "your doctor's confidence in knowledge and expertise" is determined as follows. 2,4 %bad, 11,8% good, 25,6% good, 29,0% very good, 31,2% excellent. It is observed that the bad response of the participants was given at least in June and at most in January.

It is observed that the excellent response of the participants was given at least in March and at most in August/September/October.

3.2. Opinions about Nurse

Table 7. Relevant and friendly in service provision

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	66	9,2	49	6,9	35	5,0	15	2,1	30	4,3	15	2,6	24	3,9	27	4,1	11	1,8	4,4
Enough	131	18,3	126	17,8	119	16,8	107	14,8	82	11,9	73	12,8	90	14,6	81	12,3	63	10,4	14,4
Good	239	33,4	225	31,7	264	37,3	242	33,5	193	27,9	180	31,5	214	34,8	180	27,4	165	27,4	31,7
Very Good	176	24,6	167	23,6	187	26,4	188	26,0	216	31,3	176	30,8	173	28,1	198	30,1	190	31,5	28,0
Excellent	104	14,5	142	20,0	102	14,4	170	23,5	170	24,6	128	22,4	114	18,5	171	26,0	174	28,9	21,4
Total	716	100	709	100	707	100	722	100	691	100	572	100	615	100	657	100	603	100	100

The average of the answers given to the "Nursing Service presentation is about and smiling" is 4.4% bad, 14.4% adequate, 31.7% good, 28.0% good, 21.4% excellent. It is observed that the bad response of the participants was given at least in November/December and at most in January. It is observed that the excellent response of the participants was given at least in March and at most in August/September/October.

Table 8. Responding to your questions

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	83	11,7	52	7,4	41	5,8	29	4,1	39	5,7	16	2,8	24	3,9	23	3,5	15	2,5	5,3
Enough	136	19,2	136	19,2	128	18,3	121	16,9	97	14,1	80	14,1	104	17,0	88	13,5	67	11,2	15,9
Good	226	31,8	219	31,0	255	36,4	227	31,7	197	28,6	181	31,8	207	33,9	204	31,4	181	30,3	31,9
Very Good	169	23,8	157	22,2	181	25,8	177	24,7	194	28,2	176	30,9	174	28,5	180	27,7	182	30,4	26,9
Excellent	96	13,5	143	20,2	96	13,7	162	22,6	162	23,5	116	20,4	102	16,7	155	23,8	153	25,6	20,0
Total	710	100	707	100	701	100	716	100	689	100	569	100	611	100	650	100	598	100	100

In Table 7, the average of the responses of the respondents to the question of "responding to your questions" was 5.3% bad, 15.9% adequate, 31.9% good, 26.9% very good, 20.0% excellent. It is observed that the bad response of the participants was given at least in November/December and at most in January. It is observed that the excellent response of the participants was given at least in January and at most in August/September/October.

Table 9. Information on what to do and what to do

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	74	10,8	59	8,4	50	7,3	28	3,9	41	6,2	23	4,1	35	5,7	40	6,1	19	3,2	6,2
Enough	167	24,4	157	22,4	131	19,2	144	20,3	123	18,5	91	16,3	110	18,0	86	13,1	91	15,3	18,6
Good	223	32,6	223	31,9	250	36,6	235	33,1	180	27,1	188	33,6	194	31,8	210	32,1	175	29,4	32,0
Very Good	143	20,9	143	20,4	169	24,7	169	23,8	195	29,4	162	29,0	175	28,6	183	28,0	192	32,2	26,3
Excellent	78	11,4	118	16,9	83	12,2	133	18,8	125	18,8	95	17,0	97	15,9	135	20,6	119	20,0	16,8
Total	685	100	700	100	683	100	709	100	664	100	559	100	611	100	654	100	596	100	100

According to the average of the answers of the respondents, 6.2% of the respondents were bad interpreted, 18.6% were adequate, 32.0% were good, 26.3% were very good and 16.8% were excellent. It is observed that the bad response of the participants was given at least in

November/December and at most in January. It is observed that the excellent response of the participants was given at least in January and at most in August/September/October.

Table 10. Availability when needed

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	67	9,3	50	7,1	48	7,0	26	3,7	47	7,1	22	3,9	22	3,6	39	6,0	20	3,4	5,7
Enough	167	24,3	143	20,4	150	22,0	126	17,7	96	14,5	96	17,1	126	20,8	92	14,1	82	13,8	18,3
Good	235	34,2	240	34,3	250	36,6	238	33,5	187	28,3	179	31,9	200	32,9	190	29,1	175	29,4	32,2
Very Good	147	21,4	153	21,9	168	24,6	186	26,2	193	29,2	167	29,8	163	26,9	186	28,5	190	31,9	26,7
Excellent	74	10,8	114	16,3	67	9,8	135	19,0	137	20,8	97	17,3	96	15,8	145	22,2	128	21,5	17,1
Total	687	100	700	100	683	100	711	100	660	100	561	100	607	100	652	100	595	100	100

When we look at the question "the availability of Nursing Services when needed", 5.7% of the annual average is bad, 18.3% is adequate, 32.2% is good, 26.7% is very good, 17.1% is excellent. It is observed that the bad response of the participants was given at least in November/December and at most in January. It is observed that the excellent response of the participants was given at least in March and at most in August/September/October.

Table 11. Competence in care and follow-up

	January		February		March		April		May		June		July		A-S-O		N-D		Average
	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	Per.	%	%
Bad	54	7,8	34	4,9	42	6,2	20	2,8	23	3,5	10	1,8	18	3,0	30	4,6	12	2,0	4,1
Enough	158	23,0	143	20,6	133	19,6	118	16,7	94	14,2	83	14,9	104	17,3	95	14,5	75	12,7	17,1
Good	230	33,4	217	31,3	237	35,0	204	28,9	187	28,3	165	29,6	200	33,3	162	24,8	156	26,4	30,1
Very Good	152	22,1	166	23,9	167	24,6	199	28,2	190	28,7	179	32,1	162	27,0	190	29,1	190	32,1	27,5
Excellent	94	13,7	134	19,3	99	14,6	164	23,3	167	25,3	121	21,7	117	19,5	176	27,0	159	26,9	21,3
Total	688	100	694	100	678	100	705	100	661	100	558	100	601	100	653	100	592	100	100

The average of care and follow-up qualification in Nursing Service presentation was considered as poor 4.1%, sufficiency 17.1%, good 30.1%, good 27.5%, excellent 21.3%. It is observed that the bad response of the participants was given at least in June and at most in January. It is observed that the excellent response of the participants was given at least in March and at most in August/September/October.

4. CONCLUSION

Within the scope of the study, it is seen that the patients and their relatives, doctors and nurses who received service from Eskişehir Osmangazi University Hospital in 2016 were satisfied with their behavior. The highest rate of 6% is considered as bad in doctors and 6% in treatment, the highest rate is considered to be excellent is the rate of answers to your trust in your knowledge and expertise questions is 31.2%. In nurses, the highest rate which is considered as bad is% 6.2 and information about what to do, the highest rate is considered as excellent and the rate of responses to the question of adequacy in care and follow-up is 21.3%.

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