

PAKISTAN JOURNAL OF HEALTH SCIENCES

https://thejas.com.pk/index.php/pjhs ISSN (P): 2790-9352, (E): 2790-9344 Volume 5, Issue 2 (February 2024)



Original Article

Parental Satisfaction with Health Care During Child Hospitalization at Tertiary Care Hospital Karachi

Fawad-Ur-Rehman¹, Aziz Ur Rehman Yousufzai¹, Afsha Bibi², Anum Herbert¹, Yalson Jawed¹, Tehmeena¹, Rehana¹, Uzma Hameed¹ and Shazma Naveed¹

¹Horizon School of Nursing and Allied Health Sciences, Karachi, Pakistan

ARTICLE INFO

Keywords:

Parental Satisfaction, Health Care, Child Hospitalization, Pediatric Care, Patient Experience

How to Cite:

Rehman, F.-U., Yousufzai, A. U. R., Bibi, A., Herbert, A., Jawed, Y., Tehmeena, ., Rehana, ., Hameed, U., & Naveed, S. (2024). Parental Satisfaction with Health Care During Child Hospitalization at Tertiary Care Hospital Karachi: Parental Satisfaction with Health Care During Child Hospitalization. Pakistan Journal of Health Sciences, 5(02). https://doi.org/10.54393/pjhs.v5i02.1320

*Corresponding Author:

Afsha Bibi

Arham Institute of Medical Sciences & Nursing, Matta Swat, Pakistan

fawad52005@gmail.com

Received Date: 8th February, 2024 Acceptance Date: 28th February, 2024 Published Date: 29th February, 2024

ABSTRACT

Pediatric care in hospital settings necessitates a comprehensive approach that considers not only the medical needs of the child but also the satisfaction and involvement of their parents or guardians. Parental satisfaction with healthcare services during their child's hospitalization is crucial for shaping their overall experience and ensuring quality care. Objective: To assess the level of satisfaction among parents of pediatric patients receiving care at a tertiary care hospital in Karachi, Pakistan. Methods: A cross-sectional study was conducted at the National Institute of Child Health Hospital in Karachi from October to December 2023. A total of 50 parents or blood-related guardians actively caring for pediatric patients were included in the study. Data were collected using a structured questionnaire comprising socio-demographic information and a 20-item Likert scale to measure parental satisfaction. Statistical analysis was performed using SPSS version 26.0. Results: The statistical results indicate that 26% had low satisfaction 28% moderate and 46% had high parental satisfaction with health care during child hospitalization at a tertiary care hospital in Karachi. Conclusions: The stats show mixed feelings among parents about the healthcare during their child's hospital stay in a Karachi tertiary care hospital. While 46% were happy with the services, indicating a good experience, 26% weren't satisfied. Another 28% felt okay. This means improvements are needed to address the concerns of the dissatisfied group and enhance overall satisfaction levels.

INTRODUCTION

Pediatric patients require a particular hospital setting, a medical staff that uses a specialized approach, and parental involvement throughout the entire therapy process [1]. Furthermore, modern healthcare services should strongly emphasize patient needs and care quality. To compete in the healthcare industry, healthcare facilities are interested in maintaining and raising patient satisfaction levels [2]. Moreover, parents receive assurance from those who can give the best care for their children, so they can trust themselves because they are the ones who know their children the best and have control over what is happening [3]. Also, the degree to which the

patients and their family's expectations are met and their impression of the care they receive determines how satisfied patients and their families are with medical care, particularly nursing care [2]. Besides, patient satisfaction is a valuable indicator of the general quality of healthcare. Additionally, it is beneficial to deliver excellent patient care, assess staff performance, identify dissatisfied patients and their causes, enhance the patient care experience, and increase patient retention rates [4]. When a person's wants and desires are met, they feel satisfied [5]. Additionally, the primary factor affecting the overall quality of medical services is the assessment of nursing care satisfaction.

²Arham Institute of Medical Sciences & Nursing, Matta, Swat, Pakistan

This is seen as a discrepancy between patients' or their families' expectations of nursing services and the perception of the care given. Finding out patients' needs, expectations, service-related perspectives, and viewpoints on upholding patients' rights in the hospital is crucial to holistic nursing care [1]. Furthermore, children are the most significant demographic group, and pediatric care is one of the most important types of care for them. The concept of family-centered care for pediatric health care has been created, especially concerning hospitalized children, in the context of protecting children so that any hospitalization and treatment of a health problem does not burden their future development [6]. Apart from that, in Western nations, it is expected to gauge customer satisfaction while assessing the quality of public and private healthcare services [7]. Further to this, partnerships between families and the health care team are crucial in pediatrics, where children frequently cannot self-report symptoms or treatment preferences due to their developmental stage or health status. As a result, parents must be involved in their child's care because they are responsible for speaking on the child's behalf [8]. In conjunction with this, parental participation shows that parents actively provide care [9]. Essential aspects of nursing care, such as parent communication, are not offered when nurses neglect their duties. When necessary, nursing care is withheld or postponed due to many obligations or insufficient resources, referred to as missed nursing care [10]. In the same way, effective communication and information sharing between healthcare providers and parents have been consistently identified as a cornerstone of parental satisfaction, enabling parents to comprehend their child's condition, treatment options, and potential risks. Empathy and emotional support offered by healthcare professionals, including compassionate and empathetic care, also significantly contribute to parents' positive perceptions of healthcare quality [3]. Where compassionate care" describes the delivery of medical services with a focus on kindness, understanding, and empathy for patients and their families [11]. By the same token, a study found that parental satisfaction was generally high, with an overall satisfaction rate of 76.8%. Various dimensions of satisfaction were explored, with the highest levels of satisfaction observed in "staff attitudes" (81.9%), "medical treatment" (78.2%), and "overall satisfaction" (76.8%). Conversely, the lowest satisfaction was related to "accessibility" in the hospital (39.5%)[3]. Additionally, in a study by Ur Rashad et al., (2023) of 60 participants in the study, 3% expressed low satisfaction with nursing care, 50% expressed moderate pleasure, and 47% expressed high satisfaction. Furthermore, no evidence supported a

link between satisfaction level and gender [12]. Lastly, in a study by Tlacuilo-Parra et al., (2021), the majority of parents reported being satisfied (78.5%) or very satisfied (19.4%) with the care provided at the hospital. Additionally, a high percentage (96%) would recommend the hospital to others [7].

METHODS

A cross-sectional study was conducted in a professional pediatric unit, National Institute of Child Health, Hospital in Karachi, Pakistan. It is a tertiary care hospital catering to patients with various medical and surgical health conditions. The duration of the was four months after approval of intuitional review board Parents of all children of any gender who were admitted to the pediatric care unit of a tertiary care hospital. The sample size was calculated through open EPI version 3 with the total population and confidence interval of 95% of 55, and the obtained sample size was 50. All male and female admitted patients of the pediatric ward of the selected hospital were part of the study. Patients visiting daycare or emergency were excluded from this study. After the authorized person of the hospital took that permission and then visited the pediatric ward. The consent form was explained to the parents or blood-related guardians, and they signed the consent form. The researcher explained the whole questionnaire to the participants, and then they filled accordingly. During the questionnaire distribution, every participant took 15 minutes to understand and fill accordingly. Moreover, while filling out the questionnaire, participants had queries they asked and ensured they understood. The questionnaire consists of two components. Component I: socio-demographic summary. Component II: 20-item with five points Likert scale identified parents' satisfaction or dissatisfaction. The tool's total score is 100 and categorized into three categories: low, moderate, and high. Those participants who scored below 50% were considered a low level of satisfaction, 50 to 70% moderate satisfaction, and those who scored above 70% were regarded as having high satisfaction. Inclusion criteria were Legal parents or bloodrelated guardians who actively care for the child. Exclusion criteria were Patients visiting daycare or emergency were excluded from this study. This study was conducted after permission from the NICH hospital's higher authority of the hospital. All of the parents' physically informed and verbally informed consent was taken from parents after an explanation of the purpose and procedure of the study, the aim of the research, and their right to Wardwell from the study at any time. Maintain accurate records of participants, ensuring anonymity and confidentiality of responses. SPSS version 26.0 was used for data analysis; frequency and percentage were used for the demographic

variables and the level of satisfaction.

RESULTS

Table 1 presents data on demographic variables. In terms of the age of parents or guardians, the majority fall within the 26-35 age bracket, constituting 48% of the sample, followed by those aged 36-55(26%), 15-25(22%), and 56 and above (4%). Gender-wise, females represent a higher percentage at 68% compared to males at 32%. Regarding educational qualifications, the highest proportion holds primary education (44%), followed by secondary (28%) and uneducated (20%). A small percentage possess higher secondary (6%) or master's qualifications (2%). In terms of relationship to the child, mothers constitute the majority at 60%, followed by fathers at 28%, and quardians at 12%.

Table 1: Demographic Characteristics

Frequency (%)		
Age of Parents or Guardians		
11(22%)		
24(48%)		
13 (26%)		
2(4%)		
Gender		
16 (32%)		
34(68 %)		
Qualification		
10 (20%)		
22 (44%)		
14 (28%)		
3(6%)		
1(2%)		
Relationship		
30 (60%)		
14 (28%)		
6 (12%)		

The statistical results of table 2 indicate that 26% had low satisfaction 28% moderate and 46% had high parental satisfaction with health care during child hospitalization at a tertiary care hospital in Karachi.

Table 2: Level of Satisfaction

S. N	Level Of Satisfaction	Frequency (%)
1	Low Satisfaction	13 (26%)
2	Moderate Satisfaction	14 (28%)
3	High Satisfaction	23 (46%)

DISCUSSION

Surveys of patient and family satisfaction are a crucial and popular tool for evaluating the caliber of medical care. From the perspective of patients and parents, parental experience is a critical indicator of treatment quality and influences their level of satisfaction overall. Additionally, these observations may help assess the standard of care

provided in hospital wards and may provide strategies for enhancing the provision of healthcare [13-15]. Therefore, this study aims to assess parental satisfaction with health care during child hospitalization at a tertiary care hospital in Karachi. Our study findings revealed that 26% had low satisfaction with health care during child hospitalization. Another study shows that 3% expressed low satisfaction with nursing care [12]. While another study revealed that 88% reported satisfaction with the time management of health care [16]. In this regard, another study revealed that overall care satisfaction: OR = 1.019, 95% CI[17]. In addition, another study found that only 4% rated overall care as fair or poor [18]. Parental satisfaction surveys support a patient-centered medical philosophy. It guarantees that the child's and their family's requirements and preferences are taken into account and met, making the hospital stay more encouraging and pleasant [19]. The current study findings show that 46% had a high level of satisfaction. Similarly, another study found that the majority of parents were satisfied with their child's health care [18]. In addition, another study found that 87% reported satisfaction with their child's health care [20]. Additionally, a study found that 76% were highly satisfied with care. Furthermore, another study shows that overall opinions about the satisfaction level of patients for the availability of health services in the hospitals were good [21]. Additionally, mothers with high levels of stress are satisfied with the attendance of the nursing team [22]. Moreover, another study shows that 19.4% were very satisfied with the care provided at the hospital [7]. In the same way, another study found that 47% expressed high satisfaction [12]. In the bargain, present findings show that 28% are moderately satisfied with health care. In the same way, another study found that 50% expressed moderate satisfaction [12]. Another study's findings show that the majority of parents reported being satisfied 78.5% [7].

CONCLUSIONS

The statistical results reveal a mixed picture of parental satisfaction with health care during child hospitalization at a tertiary care hospital in Karachi. While 46% of parents reported high satisfaction, indicating a positive experience with the healthcare services provided, a significant portion, comprising 26%, expressed low satisfaction. Additionally, 28% reported moderate satisfaction levels.

Authors Contribution

Conceptualization: FUR Methodology: FUR Formal analysis: AURY, AH

 $Writing\text{-review} \ and \ editing\text{: AURY, AB, AH, YJ, T, R, UH, SN}$

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

The authors declare no conflict of interest.

Source of Funding

The authors received no financial support for the research, authorship and/or publication of this article.

REFERENCES

- [1] Kruszecka-Krówka A, Cepuch G, Gniadek A, Smoleń E, Piskorz-Ogórek K, Micek A. Selected predictors of parental satisfaction with child nursing care in paediatric wards in Poland—Cross-sectional study. PLoS One. 2021 Nov; 16(11): e0260504. doi: 10.1371/journal.pone.0260504.
- [2] Kruszecka-Krówka A, Smoleń E, Cepuch G, Piskorz-Ogórek K, Perek M, Gniadek A. Determinants of parental satisfaction with nursing care in paediatric wards—A preliminary report. International Journal of Environmental Research and Public Health. 2019 May; 16(10): 1774. doi: 10.3390/ijerph16101774.
- [3] Tsironi S and Koulierakis G. Factors affecting parents' satisfaction with pediatric wards. Japan Journal of Nursing Science. 2019 Apr; 16(2): 212-20. doi: 10.1111/jj ns.12239.
- [4] Nirubaa U. Assessment of parents' or guardians' satisfaction of in-patient health care provided to their children in a single unit at a tertiary care hospital. Jaffna Medical Association; 2022. doi: 10. 4038/jmj.v34i2.166.
- [5] Habib I, Bibi A, Ahmad A, Jabeen U, Arshad Z, Shahid I. Nursing Students' Satisfaction with Supervision from Clinical Teachers During Clinical Practice and Their Association with Academic Year: Nursing Students' Satisfaction with Supervision. Pakistan Journal of Health Sciences. 2023 Apr: 105-9. doi: 10.54393/pjhs .v4i04.703.
- [6] Xenodoxidou E, Theodorou P, Karagianni R, Intas G, Platis C. Factors that determine parents' satisfaction with the care given to their children in two Greek public hospitals. Health & Research Journal. 2022 Apr; 8(2): 97-110. doi: 10.12681/healthresj.26774.
- [7] Tlacuilo-Parra A, Vizcarra-Gutiérrez MR, Morgan-Domínguez Z, Hernández-Cervantes AR, Ortega-Cortés R, Guevara-Gutiérrez E. Parental satisfaction with health care during child hospitalization at a social security facility in Mexico. Boletín médico del Hospital Infantil de México. 2021 Dec; 78(6): 549-56. doi: 10.24875/BMHIM.21000051.
- [8] Hill C, Knafl KA, Santacroce SJ. Family-centered care from the perspective of parents of children cared for in a pediatric intensive care unit: an integrative review. Journal Of Pediatric Nursing. 2018 Jul; 41: 22-33. doi: 10.1016/j.pedn.2017.11.007.

- [9] Çamur Z and Sarıkaya Karabudak S. The effect of parental participation in the care of hospitalized children on parent satisfaction and parent and child anxiety: Randomized controlled trial. International Journal of Nursing Practice. 2021 Oct; 27(5): e12910. doi:10.1111/ijn.12910.
- [10] Lake ET, Smith JG, Staiger DO, Hatfield LA, Cramer E, Kalisch BJ et al. Parent satisfaction with care and treatment relates to missed nursing care in neonatal intensive care units. Frontiers in pediatrics. 2020 Mar; 8: 74. doi: 10.3389/fped.2020.00074.
- [11] Al Shukaili K, Iqbal J, Sultan A, Bibi A, Ahmad A, Al Tamimi MA et al. Compassionate care challenges and barriers in undergraduate nursing students. ResearchGate. doi: 10.5281/zenodo.10389518
- [12] ur Rashad S, Bibi A, Ahmad A, Ahmed T, Arshad Z, Ali Y et al. Exploring Patient Satisfaction with Nursing Care and its Association with Gender at Tertiary Care Hospital Karachi: Patient Satisfaction with Nursing Care. Pakistan Journal of Health Sciences. 2023 Jun: 150-4. doi: 10.54393/pjhs.v4i06.859.
- [13] Donabedian A. The quality of care: how can it be assessed?. Jama. 1988 Sep; 260(12): 1743-8. doi: 10.10 01/jama.260.12.1743.
- [14] Garratt AM, Bjertnæs ØA, Barlinn J. Parent experiences of paediatric care (PEPC) questionnaire: reliability and validity following a national survey. Acta Paediatrica. 2007 Feb; 96(2): 246-52. doi: 10.1111/j.1651-2227.2007.00049.x.
- [15] Hagen IH, Iversen VC, Nesset E, Orner R, Svindseth MF. Parental satisfaction with neonatal intensive care units: a quantitative cross-sectional study. BMC Health Services Research. 2019 Dec; 19:1-2. doi: 10. 1186/s12913-018-3854-7.
- [16] Halfon N, Inkelas M, Mistry R, Olson LM. Satisfaction with health care for young children. Pediatrics. 2004 Jun; 113(5): 1965-72. doi: 10.1542/peds.113.S5.1965.
- [17] Shafer JS, Jenkins BN, Fortier MA, Stevenson RS, Hikita N, Zuk J et al. Parental satisfaction of child's perioperative care. Pediatric Anesthesia. 2018 Nov;28(11):955-62.doi:10.1111/pan.13496.
- [18] Schempf AH, Minkovitz CS, Strobino DM, Guyer B. Parental satisfaction with early pediatric care and immunization of young children: the mediating role of age-appropriate well-child care utilization. Archives of pediatrics & adolescent medicine. 2007 Jan; 161(1): 50-6. doi: 10.1001/archpedi.161.1.50.
- [19] Bressler M. A mixed methods analysis of empowerment and satisfaction in parents of children with disabilities receiving outpatient rehabilitation [Dissertation]. 2022.

- [20] Ellzey A, Valentine KJ, Hagedorn C, Murphy NA. Parent perceptions of quality of life and healthcare satisfaction for children with medical complexity. Journal of Pediatric Rehabilitation Medicine. 2015 Jan; 8(2): 97-104. doi: 10.3233/PRM-150323.
- [21] Manzoor F, Wei L, Hussain A, Asif M, Shah SI. Patient satisfaction with health care services; an application of physician's behavior as a moderator. International journal of environmental research and public health. 2019 Sep; 16(18): 3318. doi: 10.3390/ijerph16183318.
- [22] Rocha G, Candeias L, Ramos M, Maia T, Guimarães H, Viana V. Stress and satisfaction of mothers in neonatal intensive care. Acta Médica Portuguesa. 2011 Dec; 24: 157-66.