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ORIGINAL RESEARCH

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PATIENT SATISFACTION AND ITS RELATIONSHIP WITH THE QUALITY OF COMPREHENSIVE EMERGENCY OBSTETRIC AND NEONATAL CARE (CEmONC) IN THE GENERAL HOSPITAL OF PANEMBAHAN SENOPATI BANTUL

Fitri Dian Kurniati^{1*}, Lely Lusmilasari¹, Sri Mulatsih²

¹Master of Nursing, Faculty of Medicine, Universitas Gadjah Mada, Indonesia

²Department of Child Health, Faculty of Medicine, Universitas Gadjah Mada/Sardjito Hospital, Indonesia

*Corresponding author:

Fitri Dian Kurniati

Master of Nursing, Faculty of Medicine, Universitas Gadjah Mada, Jl. Farmako, Senolowo, Sekip Utara, Kec. Depok, Kabupaten Sleman, Daerah Istimewa Yogyakarta 55281, Indonesia.

E-mail : fitridian_kurniati@yahoo.co.id

ABSTRACT

Background: Patient satisfaction has emerged as an increasingly important health outcome and is currently used to evaluate the quality of care.

Objective: To describe the level of satisfaction of mothers after caesarean section and examine its relationship with the quality of Comprehensive Emergency Obstetric and Neonatal Care (CEmONC).

Methods: This was an analytic descriptive study using cross-sectional design. The study was conducted in Alamanda ward in the General Hospital (RSUD) of Panembahan Senopati Bantul Indonesia during September until November 2016. There were 55 respondents selected using purposive sampling. The instruments included The Scale for Measuring Maternal Satisfaction (SMMS) – caesarean birth and the Quality of CEmONC questionnaires. Spearman's rho and logistic regression were performed for data analysis.

Result: Results showed that 47.3% respondents rated the quality of CEmONC in high category and 56.4% were satisfied. The correlation value between quality of CEmONC and patient satisfaction was 0.285 ($p = 0.035$; OR = 1.96).

Conclusion: Level of satisfaction of mothers after caesarean section was associated with the quality of CEmONC in the General Hospital of Panembahan Senopati Bantul Indonesia.

Keywords : services quality, CEmONC, patient satisfaction

INTRODUCTION

Patient satisfaction is defined as a subjective measurement from patient after health treatment by comparing patient's expectation and perceived services.¹ Patient will be satisfied when services

equal or more than patient's expectation. Patient satisfaction is one of important outcomes to indicate good achievement of health services.

Low level of patients satisfaction towards health care quality have been identified,^{2,3} especially in patients after caesarean delivery (17.8%). The low achievement of patient satisfaction is due to poor communication between patient and health workers, as well as less responsive of health workers towards conditions and the needs of patient.⁴ However, high level of patient satisfaction towards health services will encourage patient to obey health advices, medication planning, and further medication.⁵ In addition, satisfaction level of mother after caesarean section is dependent on the accuracy on medical examination, characteristics of health workers, patient privacy, and cleanliness of the room.⁴

According to literature, factors affecting postpartum maternal satisfaction include physical environment, hygiene, complete facilities,⁶ interpersonal behavior of officers, health status of mother and baby,⁷ ease of access to health facilities location, cost, experience and maternal demographics,⁸ and hospital accreditation.¹

Comprehensive emergency obstetric and neonatal care (CEmONC) implementation in hospitals is one of the target groups assessments in hospital accreditation standards 2012 version.⁹ One of the things that affect patients in deciding to use the CEmONC facilities is the quality of services provided, especially in post-partum mothers.¹⁰

The General Hospital of Panembahan Senopati Bantul is one of hospitals that is able to implement CEmONC in 24 hours in the area of Yogyakarta. The results of CEmONC evaluation at this hospital revealed a number of indications that the quality of service does not meet standards, as well as in the case of fulfillment of human resources and interpersonal treatment are not optimal. Therefore, this study aimed to analyze patient's satisfaction toward

quality of CEmONC in the General Hospital of Panembahan Senopati Bantul.

METHODS

This was an analytic descriptive study with cross-sectional design. The study was conducted in Alamanda ward in RSUD Panembahan Senopati Bantul during September until November 2016. There were 55 respondents selected using purposive sampling. The Scale for Measuring Maternal Satisfaction (SMMS) – caesarean birth was used in this study, modified from Gungor and Beji¹¹. Patient satisfaction refers to an expression of the feeling of mothers post-caesarean delivery towards quality of service in terms of ten dimensions, namely : 1) perceptions of health care workers, 2) preparation for c-section, 3) comfort, 4) the provision of information and involvement in decision making, 5) stickiness with baby, 6) treatment of postpartum, 7) ward condition, 8) hospitals facilities, 9) privacy, and 10) meeting expectations of patients.

Another instrument used was questionnaire of the Quality of CEmONC based on the standard of Ministry of Health about for implementation of CEmONC. Quality of CEmONC in this study is defined as an assessment of post-caesarean mothers towards the implementation of CEmONC, in terms of aspects of the structure and processes in accordance with defined service standards. Aspects of the structure include the completeness of human resource routine checks, equipment, and medicines; while aspects of process include the interaction between health care workers with patient, namely on the ability of officers to serve patients and adequate interpersonal skills. The validity and reliability of the instruments were performed in 30 post-caesarean section mothers, and the results showed valid and reliable instruments.

Univariate data analysis was conducted to determine the frequency distribution of each variable. While bivariate analysis was used to determine the relationship between patient satisfaction with quality of CEmONC. Logistic regression was also implied for this study. Quality of CEmONC was categorized into low quality, medium, and high. Low quality if $x < \mu - 1,0 \text{ SD}$, whereas if $\mu - 1,0 \text{ SD} \leq x \leq + 1,0 \text{ SD}$, and high if $x > \mu + 1,0 \text{ SD}$.¹² While patient satisfaction was categorized into satisfied and dissatisfied based on the cutoff point. The statistical test used in this study was the correlation of Spearman's rho.

Approval of this study was obtained from the Ethics Committee of

Faculty of Medicine, Universitas Gadjah Mada in September 2016. Informed consent has been done before data collection.

RESULTS

The characteristics of the respondents as shown in the Table 1 indicated that majority of respondents (85.5%) aged 20-35 years. Of those all respondents, 61.8% had senior high school background, and 74.5% were not working or being housewives. The respondent's incomes were more than regional minimum wage, and the majority of them were multipara (65.5%), and 72.7% had never been hospitalized.

Table 1 Characteristics of the respondents (n=55)

Characteristics	Frequency	Percentage (%)
Age (year)		
20-35	47	85.5
35-49	8	14.5
Education Level		
Basic	16	29.1
Medium	34	61.8
High	5	9.1
Working status		
Not working	41	74.5
Working	14	25.5
Income level		
Under minimum wage	14	25.5
Above minimum wage	41	74.5
Parity		
Primipara	19	34.5
Multipara	36	65.5
Experience of being hospitalized		
No	40	72.7
Yes	15	27.3

Of eleven items of structural aspects as shown in the Table 2, there were two points that have not been optimized, namely the availability of like air conditioner (fan or air conditioning) (54.5%) and towels / tissues in hand washing facilities (70.9%). While in the

process aspect, the majority of the respondents got services in accordance with the standards, except 1.8% of them did not get an examination for the stomach and bleeding, and suggestion for mobilization after surgery.

Table 2 Frequency distribution of the Quality of CEmONC (n=55)

Question	Never n (%)	Sometimes n (%)	Always n (%)
Structure:			
There are obstetricians routinely conduct examination	0 (0)	12 (21.8)	43 (78.2)
There is pediatrician routinely conduct examination	2 (3.6)	12 (21.8)	41 (74.6)
Receiving assistance from nursing care	0 (0)	4 (7.3)	51 (92.7)
There is an anesthetist who is briefing prior to surgery	3 (5.5)	12 (21.8)	40 (72.7)
Completeness of medicine	0 (0)	8 (14.5)	47 (85.5)
Completeness of kind of examinations	3 (5.5)	12 (21.8)	40 (72.7)
Getting services immediately without having to pay first	0 (0)	5 (9.1)	50 (90.9)
Cleanliness of room conditions	0 (0)	10 (18.2)	45 (81.8)
Available of air conditioner (fan, AC)	30 (54.5)	14 (25.5)	11 (20)
Available of soap / disinfectants for washing hands	1 (1.8)	14 (25.5)	40 (72.7)
Available of towels / tissues in hand washing facilities	39 (70.9)	12 (21.8)	4 (7.3)
Process:			
Officers are polite and friendly	0 (0)	13 (23.6)	42 (76.4)
Officers take action with full skill and deftly	0 (0)	8 (14.5)	47 (85.5)
Officers provide a time for consultation	0 (0)	17 (30.9)	38 (69.1)
Officers provide information that is easily understood	0 (0)	7 (12.7)	48 (87.3)
Having and explanation of any actions to be performed	0 (0)	7 (12.7)	48 (87.3)
Having an examination of blood pressure and pulse	0 (0)	9 (16.4)	46 (83.6)
Having an examination of abdominal and bleeding	1 (1.8)	23 (41.8)	31 (56.4)
Being suggested for mobilization after surgery	1 (1.8)	7 (12.7)	47 (85.5)
Having a monitoring of nutritional intake	0 (0)	8 (14.5)	47 (85.5)

Table 3 Quality of CEmONC (n=55)

Category	Frequency	Percentage (%)
Basic	10	18.2
Medium	19	34.5
High	26	47.3
Total	55	100

Table 4 Satisfaction levels of mothers post caesarean section (n = 55)

Satisfaction levels	Frequency	Percentage (%)
Unsatisfied	24	43.6
Satisfied	31	56.4
Total	55	100

Table 3 shows that nearly half of all respondents (47.3%) rated the quality of CEmONC in high category, which indicated that the quality of CEmONC in RSUD Panembahan Senopati must be

improved. While Table 4 shows that 56.4% of the respondents were satisfied and unsatisfied (43.6%) with the quality of CEmONC.

Table 5 Bivariate analysis of the relationship between patient satisfaction levels post SC emergency with quality of CEmONC using Spearman's rho test (n=55)

Variable	Patient satisfaction	
Quality of CEmONC	r	0.285
	P	0.035*

* significant $p < 0.05$

Bivariate analysis using Spearman's rho test showed correlation value 0.285 ($p = 0.035$), indicating that there was a significant positive correlation between patient satisfaction post C-section emergency and the quality of CEmONC. It means that the higher quality of CEmONC, the higher patient satisfaction. The values of coefficient correlation (r) was 0.285, indicating the low correlation. The result of logistic regression analysis shows that the quality of CEmONC becomes the main factor affecting patient satisfaction.

DISCUSSION

A quality is multidimension based on the criteria and measurement. Quality of CEmONC was measured in terms of structure and process of services according to standard of services. Generally, result showed that patients have got standardized comprehensive emergency obstetric and neonatal care, both structural and process aspects. However, human resources were key component on comprehensive emergency obstetric and neonatal care in hospital.¹³ Most respondents stated that equipment and medicines are fully available in the hospital. To reduce maternal and neonatal mortality in developing countries, equipment and medicines should be in sufficient quantities.¹⁴ The availability of facilities at the hospital is one of the dimensions for assessing the quality of service.¹⁵ Building infrastructure, medical and non-medical equipment, medicines, and money are material resources that should be owned by a CEmONC hospital.¹⁶

Generally, most of the respondents in this study were satisfied with the service. This indicates that the services in the General Hospital of Panembahan Senopati is good. However, the services in

each aspect can still be optimized to increase patient satisfaction, especially in the timeliness of the operating schedule. The longer the patient waiting time to get service, then the level of patient satisfaction will be even lower.¹⁷ Allowing the patient to wait without a clear reason can lead to negative perceptions of service quality so that it can affect the level of satisfaction.

Another thing that should be raised is about communication. Communication is an important pillar in providing services to patients.¹⁸ Inadequate communication can lead to gaps and less satisfaction.⁷

The bivariate analysis in this study shows there was a significant relationship between patient satisfaction with the quality of CEmONC. High and low level of patient satisfaction is influenced by the level of service quality,¹⁸ and the better quality of CEmONC increases patient satisfaction.¹⁹ However, some efforts should be made to improve the quality of CEmONC, namely by training of health workers, improving interpersonal communication and counseling, ensuring the availability of medicines and supplies, and improving the service management system.

Quality of service can be used as one factor for patients to select a hospital. Patients as consumers should be given a satisfactory service. Dissatisfaction will make them find other health facilities.^{5,20} However, the success of health services can be seen from the level of patient satisfaction.

CONCLUSION

The level of patient satisfaction after caesarean section was associated with the quality of CEmONC in the General Hospital of Panembahan Senopati Bantul. Health workers are expected to improve quality of care to improve patient

satisfaction. CEmONC must be monitored by hospital manager or director according to the standard. Further research is needed to identify other variables affecting patient satisfaction and the quality of CEmONC.

Declaration of Conflicting Interest

None declared

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Author Contribution

All authors contributed equally in this study.

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