



Research Paper

# What Do Patient Hospitalized Think About Their Care? A Study of Satisfaction Survey During Pandemic to Endemic Transition

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**ABSTRACT:** During the COVID-19 pandemic, the number of patients visiting hospitals declined because patients considered hospitals to be a means of transmitting COVID-19. The main factors contributing to patient dissatisfaction are the seriousness of COVID-19, the types of care available, the hospital environment, infection control mechanisms, the quality of service and the poor behavior of hospital staff. The purpose of this study was to determine the level of patient satisfaction during the pandemic-endemic transition. A descriptive and cross-sectional study was performed at the Banda Aceh Hospital. A proportionately stratified random sampling technique enrolled 110 patients and gathered data using the Patient Satisfaction Scale (PSS) and descriptive analyses. The result shows that that up to 64 patients (58.2%) were satisfied. However, as many as 46 patients (41.8%) reported being dissatisfied during COVID-19. In addition, nurses are able to meet all the needs and expectations of patients and ensure that the quality of services in hospitals is improved.

**KEYWORDS:** Satisfaction, Patient, Covid-19

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## I. INTRODUCTION

Patient satisfaction is the level of patient feeling expressed when comparing the performance of health services received to what the patient expects [1]. The World Health Organization (WHO) reported that in early 2020, the world was shocked by a new virus called severe acute respiratory syndrome 2 (SARS-Cov-2) coronavirus. Known as Coronavirus Disease 2019 (COVID-19) from Wuhan, China[2]. In Indonesia, there were COVID-19 cases in early March 2020 and to date, 6,056,017 have been infected with COVID-19 and 156,604 have died [3].

Indonesia's Minister for Coordination of Human Development and Culture said that Indonesia has started to move from a pandemic to an endemic phase. This is due to the fact that the COVID-19 mortality rate was not the highest among other illnesses [4]. The number of COVID-19 cases in Indonesia is currently plummeting and the number of cases and deaths is also going down every day. Since April, the national daily case has never reached the 1,000 marks, even after the holiday surge in May, the pandemic also tends to be under control. According to an internal survey, the 18 Hospital in Jakarta in February 2022, the COVID-19 mortality rate in Indonesia has dropped to 14th place[5]. Previously, Indonesia had the third-highest death rate (5%) in the Asia region[6].

According to data from Banda Aceh's Meuraxa Hospital, the number of inpatient visits in 2019 prior to COVID-19 was 16,050. Over that period, in 2020, the number of hospitalized patients was 8,658. This data indicates that patient visits have decreased during the COVID-19 outbreak. That is because patients are concerned that the hospital is a facility for people living with COVID-19. In addition, patients are also anxious to go to the hospital because the standard procedure for visiting the hospital is different. They first need to take an antigen sample to determine whether the patient is positive or negative for COVID-19. This results in patients being afraid and delaying their treatment at the hospital[7].

Nursing services are professional services consistent with the interventions received and may even exceed the expectations of patients given by nurses [8]. However, at present, there are still patients and family members who report not receiving services that meet the standards set by nurses to meet their needs [9]. The

Indonesian Ministry of Health has established the standard for patient satisfaction at the national level of health services, which is a minimum for satisfaction higher than 95%. It is a means, satisfied if the service received in the hospital is equal to or superior to the patient's expectations. however, the patient is dissatisfied or disappointed if the service received is not in line with the patient's expectations [10].

Previous research has explained that some patients complain because nurses are still underperforming. It often happens that nurses do not control vital signs when the patient's condition is not stable. Moreover, the nurses were late at the station even though the patient was suffering. The nurse failed to explain the patient's progression to the family and did not explain the drug problem [11]. In another study in Banda Aceh, the patient satisfaction rate was 53.3%, which were classified as dissatisfied with nursing services in terms of openness when providing general information. Nurses were not professionals about the patient's condition, one being postoperative patients who do not all receive discharge planning [12]. Therefore, the authors would like to further examine the level of patient satisfaction during the Covid-19 transition in the inpatient ward of the Meuraxa Hospital, Banda Aceh.

## II. METHOD

A descriptive study was conducted to examine the level of patient satisfaction during the pandemic-endemic transition. The subjects of this study were patient inpatient ward at Meuraxa Hospital in Banda Aceh, Aceh Indonesia. A stratified proportional random sampling technique enrolled 110 patients for at least 24 hours after admitted. The instruments used in the data collection were Patient satisfaction using the Patient Satisfaction Scale (PSS) instrument adopted by Kusnanto [13] which was completed by a backtranslation by experts from the Faculty of Nursing, Universitas Syiah Kuala. It has been tested by the Content Validity Index by nursing management experts. The experts are from the Faculty of Nursing at Universitas Syiah Kuala, Aceh-Indonesia with a value of 4, which is highly relevant.

## III. FINDINGS

Table 1 presents patient demographics as follows: 110 patients were involved. The majority of patients were reported to be male 64 patients (58.2%), adult (26-64 years) 68 patients (61.8%), who received 2 days of treatment 56 patients (50.9%), and the majority were previously hospitalized are 87 patients (79.1%).

**Table. 1 Patients' Demographic Data**

Demographic Data	f	%
<b>Gender</b>		
Man	64	58.2
Woman	46	41.8
<b>Age</b>		
Young (18-24)	20	18.2
Adults (26-64)	68	61.8
Elderly ( $\geq 65$ )	22	20.0
<b>Length of Hospitalization</b>		
2 days	56	50.9
3 days	24	21.8
4 days	30	27.2
<b>Have Been Hospitalized Before</b>		
Once	87	79.1
Not	23	20.9

Based on the results in table 2, it shows that the highest proportion of patient satisfaction in inpatient ward at Meuraxa Hospital Banda Aceh is satisfied, 64 patients (58.2%).

**Table. 2 Patient Satisfaction Scores in Inpatient Ward**

Category	f	%
Satisfied	64	58.2
Not satisfied	46	41.8

## IV. DISCUSSION.

Patient satisfaction is an important benchmark for measuring the level of the healthcare system during the COVID-19 pandemic in hospitals. Patient perceptions during the Covid-19 pandemic are specific issues when assessing patient satisfaction. In fact, the patient's perception of the disease causes them to feel anxious, frightened, anxious and mentally ill as a result of a COVID-19 situation [14]. Patients have varying levels of satisfaction based on their expectations or the self-reported value system. The higher the score, the higher the

satisfaction level is. Therefore, satisfaction within the health service is the result of a patient's evaluation describes feelings, such as happy or unhappy and satisfied or dissatisfied with the services received [15].

Satisfaction is subjective, even though the services offered are the same, the results obtained will be different. It is dependent upon the patient's perception that is influenced by background and characteristics [16]. If the patient or family is dissatisfied with the services provided, there will be a direct impact on the quality of hospital services. This is due to nurse capacity and performance that may have an impact on patient satisfaction. From previous research, the satisfaction of patients admitted to the Mina Room Aisyiyah Pariaman Hospital fell into the category of satisfied patients (63.9%). The hospital is committed to maintaining patient satisfaction in all hospital wards of the Aisyiyah Pariaman Hospital [17]. Another study of outpatient perceptions of the quality of services in hospitals found that overall, approximately 80% of outpatients were satisfied with the services provided by hospital services. On the other hand, the highest perception of dissatisfaction lies in realism. For example, facility availability, empathy for the patient's ability to consult with staff about their condition [18].

During COVID-19, patients feel satisfied because nurses and physicians behave politely and respectfully and provide understandable answers to all patients' questions. In total, 76.8 patients also believed that nurses could take the time to explain the medications administered to patients. In terms of hospital assessment at admission, 85% of patients reported that during hospitalization, the patient felt very good. This has implications for the 94% of patients who recommended the hospital to friends and family for medical treatment. Overall, this suggests that most patients feel satisfied and satisfied with the behaviour and communication of hospital staff and services [19].

Patients covered by Indonesian national health insurance have a lower level of satisfaction than hospitalised patients in general. This can be explained by inefficiency and efficiency in hospital services. In fact, the impact of hospital service on dissatisfied patients is slow, the hospital intake process is long. Furthermore, physicians are difficult to find, drugs and equipment are limited, such as toilets and garbage cans [20]. Another problem is that complaints by patients with Indonesian national health insurance against poor hospital assessments may have an impact on the quality of hospital service. Patients are dissatisfied with the convoluted system, unclear cost limits, limited medicines and long service [21]. In previous studies, 71.10% of patients were dissatisfied with facilities and infrastructure where the in-patient ward was heat when occupied [20].

Additionally, when hospital staff are on-site with patients for 24 hours, access to specialists is easy, and patients feel that the care provided is appropriate and patient-centred [23]. Patient satisfaction may change from time to time, therefore, there is a need to continue to monitor aspects that have been identified when assessing patient satisfaction that are not relevant [24]. Patient satisfaction can be influenced by several factors, such as demographic data, such as age, gender, social status, education, age and education, which have had a very strong influence on patient satisfaction [25].

Study findings indicated that up to 64 patients (58.2%) were satisfied. Most respondents were satisfied with the reason nurses received respondents quickly and offered services quickly. Patients are also satisfied with nurses' ability to respond to patient complaints, their competencies and their ability to take appropriate and correct action. In addition, the patient was dissatisfied with the reason that the nurse was rude and impatient during the patient's treatment. Patient satisfaction can be affected by a variety of factors, so it is very important that hospitals analyze patient satisfaction levels. Patient satisfaction analysis is very useful for hospitals so that it can be used as a quality of service assessment tool. In addition, the analysis of patient satisfaction will make an evaluation of counseling interventions the relationship between health and illness behavior, making administrative decisions, evaluating the effects of changes in service organizations, staff management, marketing functions, formation of professional ethics [26]. Patients will be satisfied if services provided meet patients' expectations. Patient needs such as service, safety, accuracy, and timeliness of health services are met so that they can reflect the level of patient satisfaction with hospital services [27].

## V. CONCLUSION

The finding demonstrates that the patient satisfaction during pandemic to endemic transition was satisfied with nursing services. In addition, patients indicated satisfaction with their services. It is hoped that Meuraxa Hospital will be able to provide support or motivation to nurses to enhance their performance. Moreover, nurses are able to meet all the needs and expectations of patients and ensure that the quality of services in hospitals increases.

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