SATISFACTION OF PATIENTS WITH SAFETY IN NURSING CARE
SATISFAÇÃO DOS USUÁRIOS COM A SEGURANÇA NA ASSISTÊNCIA DE ENFERMAGEM
SATISFACCIÓN DE LOS USUARIOS CON LA SEGURIDAD EN LA ASISTENCIA DE ENFERMERÍA

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ABSTRACT
Objective: to analyze the satisfaction of patients on the quality of nursing care and patient safety. Method: this is a cross-sectional study performed at the Surgical Clinic of a teaching hospital in the Central-West Region, with 80 preoperative and/or postoperative hospitalized patients. A descriptive analysis was performed, calculating the positivity index and the mean satisfaction. Results: the female predominated (61.3%), the hygiene and comfort domain had the highest positive response rate (97.8%), most patients judged the care positively. Conclusion: the findings show the need for managers to invest in the empowerment of people and in the structure of the organization to reach patients’ satisfaction through the quality and safety of healthcare. Descriptors: Surgical Nursing; Patient Satisfaction; Patient Safety.

RESUMO
Objetivo: analisar a satisfação dos usuários na perspectiva da qualidade da assistência de enfermagem e da segurança do paciente. Método: estudo transversal, realizado na Clínica Cirúrgica de um hospital de ensino da Região Centro-Oeste, com 80 pacientes internados em pré e/ou pós-operatório. Realizada análise descritiva, calculado o índice de positividade e a média de satisfação. Resultados: predominou o sexo feminino (61,3%), o domínio higiene e conforto apresentou o maior índice de positividade das respostas (97,8%), a maior parte dos pacientes julgou a assistência de forma positiva. Conclusão: os achados tornam evidente a necessidade de os gestores investirem na capacitação das pessoas e na estrutura da organização para o alcance da satisfação dos usuários por meio da qualidade e segurança da assistência em saúde. Descriptores: Enfermagem Cirúrgica; Satisfação dos Usuários; Segurança do Paciente.

RESUMEN
Objetivo: analizar la satisfacción de los usuarios en la perspectiva de la calidad de la asistencia de enfermería y de la seguridad del paciente. M étodo: estudio transversal, realizado en la Clínica Quirúrgica de un hospital de enseñanza de la Región Centro-Oeste, con 80 pacientes internados en pre y/o post-operatorio. Fue realizado análisis descriptivo, calculado el índice de positividad y la media de satisfacción. Resultados: predominó el sexo femenino (61,3%), el dominio higiene y confort presentaron el mayor índice de positividad de las respuestas (97,8%), la mayor parte de los pacientes juzgó la asistencia de forma positiva. Conclusión: los resultados tornan evidentes la necesidad de los gestores invertir en la capacitación de las personas y en la estructura de la organización para el alcance de satisfacción de los usuarios por medio de la calidad y seguridad de la asistencia en salud. Descriptores: Enfermería Quirúrgica; Satisfacción del Usuario; La Seguridad del Paciente.
INTRODUCTION

The search for safety in health care has been gaining more and more repercussion among the population, since patients are more informed and participatory, demanding a higher quality of care from the health services. In this sense, the management of patient-centered safe care has been prioritized as a strategy on health care, considering that public opinion about the quality of services offers clues about its benefits or difficulties to reach its expectations and needs.

The adequacy of quality and safety in caring is directly related to patient participation. Awareness of their rights and responsibilities promotes their empowerment, understanding the meaning of their role in this context of care, allowing them to participate in the decision-making process and the management of the actions for the demands and maintenance of their health.

Quality health care is a patient’s right, and health services must provide effective, efficient, safe and promising care. Quality is the performance of staff, the work process, organizational culture, and patient satisfaction, which is the highest standard of performance. Patient satisfaction is an outcome indicator used by health institutions as a tool to investigate, manage and plan services, collaborating for safety and quality of the care and better adaptation to the patients’ demands.

Based on the above, recognizing patient satisfaction as a tool for evaluating results in health services, which is associated with the effectiveness of care, this study aims to analyze the satisfaction of patients in the perspective of the quality of nursing care and patient safety.

METHOD

This is a cross-sectional study carried out in the surgical clinic of a teaching hospital in the Brazilian Midwest region with a population of 80 patients hospitalized in preoperative and/or postoperative periods. Those with hospitalization time equal or greater than 24 hours, with 18 years or more, mentally oriented and participative were included.

The data were collected from February to April 2014, in the morning and afternoon shifts, through individual interviews, according to availability. All the patients were informed about the objectives and purposes of the study and the confidentiality of the answers, and after accepting, they signed the Informed Consent Term/TCLE.

The instrument used is structured, validated, composed of two parts. The first one contains questions about the sociodemographic characteristics of the patients and the second with questions regarding patient satisfaction with quality and safety in the care received, containing the following categories: team; hygiene and physical comfort; physical activities; sleep and rest and physical security. The responses of the patients were on a Likert scale with variations from 1 to 5, being 1 fully agree, 2 agree, 3 have no opinion, 4 disagree and 5 strongly disagree. The answers were regrouped in three alternatives that are, agree, disagree and have no opinion.

The data from the research were structured in the software Statistical Package for The Social Science 2.0 and analyzed, descriptively, presenting averages and standard deviation for continuous variables and relative and absolute frequencies for categorical variables.

The Cronbach’s Alpha was calculated to evaluate the reliability of the scale used, considering the values: greater or equal to 0.9 as excellent; from 0.8 to less than 0.9 as good; from 0.7 to less than 0.8 as acceptable; between 0.6 and less than 0.7 as questionable; between 0.5 and less than 0.6 as poor; and values less than 0.5 as unacceptable.

The average satisfaction of the patients with the care was calculated, considering the ordinal scale of 1 to 5, according to the instrument used, where 1 represents lower satisfaction and 5 higher satisfaction. The higher the index, the greater the agreement/satisfaction with the item evaluated.

The outcome was defined as the positive response and/or agreement with the item. The arithmetic mean of all the responses obtained from the scale of each patient was performed to define the cutoff point for the outcome (satisfaction with quality). Positive agreement with the quality of care was considered as a score higher than 2.5.

A correlation test was performed to verify the behavior of the variables age, income, education and length of hospitalization with the average of satisfaction in relation to care.

The study is linked to the project: “Analysis of occurrences of adverse events in a Sentinel Network hospital in the Central West Region”, approved by the Research Ethics Committee.
of the Hospital das Clínicas of the Federal University of Goiás (Protocol No. 064/2008).

The ethical aspects of this research respected the provisions of Resolutions of the National Health Council N° 466/2012, presenting the guidelines and norms regulating research involving human beings and animals.

The study included 80 patients who were hospitalized at the Hospital Clínica.

The female was predominant, with 49 (61.3%) patients. The mean age was 49 years old, and 20 (20.5%) were between 40 and 49 years old; 44 (55.0%) were married; 51 (63.8%) had incomplete primary education, 40 (50.0%) were from Goiânia; 38 (38.4%) had monthly income of one to three minimum wages.

Table 1 shows the index of satisfied patients regarding the quality of care, according to their sociodemographic characteristics.

The proportion of satisfied patients is higher in males, where 90.3% of them are satisfied with the quality and safety of care, while only 75.5% of women say they are satisfied. A difference of almost 15.0% is also observed 84.2%, 93.8% and 86.7% of patients with lower educational level, patients who did not have previous hospitalizations and among those admitted to the urgency/emergency modality, respectively. Regarding the condition of being or not elderly and the higher or lower income, the proportion of patients who claim to be satisfied is similar between the groups, indicating that the age or financial condition, in this case, did not influence the perception of quality and security.

The overall rate of satisfaction with care was 2.8, indicating that most patients judged care positively, with an index higher than the average value of the evaluation. It is also verified that the evaluation of the health team obtained an average satisfaction of 2.8, very close to the evaluation of the quality and safety of care with 2.7. The alpha values of Cronbach indicate that the means of satisfaction found have few differences. However, they have an acceptable degree of reliability.

Table 3 shows the positivity index of the inpatients’ responses.
The hygiene and comfort domain had the highest positivity index of responses with 364 (97.8%). The physical safety domains had 563 (80.6%) and physical activities had 76 (80.0%), respectively, presented lower responses of positivity indexes when compared to the others.

Table 4 shows the concordance index of the general evaluation of the health team, in the perception of hospitalized patients.

The highest concordance rate of the patients was 78 (97.5%) regarding the trust in the doctor. It was evidenced that 74 (92.5%) patients observed resolution in the treatment and affirmed satisfactory receptivity of the professionals. The concordance index obtained the same results when the patients were questioned, to have confidence in the nursing team and the nursing care was of quality with 69 (86.3%) of the answers. The lowest concordance rate of the patients was 38 (47.5%) related to their opinions about the treatment.

Regarding the general evaluation of health care, 78 (97.5%) of the patients reported taking a bath daily, which is the highest concordance index; 77 (96.3%) indicated that there is respect for their privacy and 58 (72.5%) who perform oral hygiene daily and dressings are performed daily.

In the domain of physical activities, 48 (60.0%) reported receiving ambulatory help when they needed it and 28 (35.0%) were asked to walk on the first postoperative day. In the sleep and rest domain, 79 (98.8%) of the patients reported that the bed is adequate for their rest, 67 (83.8%) who are silent at night in the infirmary and that the lighting is adequate for their sleep.

In the physical safety domain, 76 (95.0%) of the patients stated that the medications were administered by nursing and asked their name before; 66 (82.5%) who were followed up when leaving the unit and 11 (13.8%) reported that there were patients falling in the ward.

Table 5 shows the correlation between satisfaction level and personal characteristics and hospitalization.

It is observed that the age, income, and length of hospitalization are directly proportional to the satisfaction index, indicating that the lower the level of satisfaction, the lower the age, income and length of hospitalization. However, the
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The participants in this study were predominantly female, 61.3% with a young adult age group 20.5%, presenting similarity to the profile of the subjects of a retrospective study performed in a surgical clinic of the same hospital. However, the male demonstrated greater satisfaction with care than the female.

Subjects who reported a history of previous hospitalizations and those admitted in an elective way had a lower satisfaction index. The longer hospitalization time provides greater opportunities to experience the dynamics of the unit, especially in the procedures and routines.

Patients judged the care in a positive way, presenting a general satisfaction index with the assistance of 2.8. A study by Freitas et al. (2013) presented a high level of satisfaction of patients with nursing care evaluated with values between 4 and 5 for all domains.

The highest quality index in the perception of the patients was of the hygiene and comfort domain and the smaller of the physical activities domain. Hygiene and comfort are practices inherent to the nurse’s profession, of high relevance in restoring patient health and promoting quality support, comfort and care.

In a study carried out in Clinical, Orthopedic and Plastic Surgery and Tropical Clinic units of the same institution, patients pointed to the category of hygiene and physical comfort as safe and of quality and the domain of physical activities as poor in quality.

The physical security domain, which should have been among the first in the quality index, did not obtain a satisfactory result, which is worrying since the insecure care can generate incidents and until the death of the patient. Safety is the reduction of the risk of unnecessary harm associated with healthcare to an acceptable minimum.

Trust in the doctor is still greater than trust in the nursing staff. The doctor is considered as having the greatest knowledge and information by the patients with consequent mastery over their body and the therapeutic behavior given. However, the question of the credibility of treatment still seems to be anchored in the trust placed on health professionals.

Nursing care was referred by the patients as quality. Quality is directly related to the highest level of professional excellence, efficient use of resources, minimum risks to the patient and high level of satisfaction. In this way, nursing plays an important role in the quality of services, since it is the professionals who are in direct contact with the patient.

The patients reported that the receptivity of the health professionals was satisfactory, which corroborates with a study where 59.40% of the patients in a primary care unit said they had a good receptivity of the unit professionals.

The patient’s opinion about the treatment had the lowest concordance rate. Patient involvement in care has become a challenge for health institutions and should be encouraged as it helps to minimize the occurrence of incidents.

In the hygiene and comfort domain, most patients stated that bathing and oral hygiene are performed daily in the unit and that professionals respect their privacy. Some patients have reported that dressings are not performed every day.

Hygiene is a set of practices that promote health and comfort, and the nursing team is responsible for maintaining the patients’ body hygiene.

In the sleep and rest domain, the bed was referred to as adequate by the patients. However, the silence after meals and moments of rest had a lower concordance rate of the patients. A previous study identified that interfere with the nocturnal sleep of the patients, the noise caused by the nursing team and by the other patients, and the discomfort caused by the bed was mentioned by few patients, among other factors.

In the physical security domain, most patients reported that the nursing is the one administering the medications, but not all professionals ask the patient’s name before administering the medication. A study showed that 70.57% of nursing professionals make the mistake of not checking the patient’s name before administering the medication. The administration of drugs is a procedure that requires complex knowledge, and this function is the responsibility of nursing. Identification of the patient before drug administration is a primary factor in avoiding errors and ensuring their safety.
The reports of fall of patients in the wards were 13.8%. Falling patients can cause damage, increasing the length of hospitalization and in some cases, they can even lead to death. Health institutions should adopt fall prevention measures for all patients regardless of risk, providing a safe environment and patient and family education measures.19

The overall satisfaction index of patients with quality of care was 2.8, considered low. The nursing care deficit in some of the evaluated domains, except hygiene and physical comfort considered adequate, was perceptible. The relationship between the level of satisfaction and personal characteristics showed a significant relationship between education and satisfaction, corroborating with the study that also showed that the higher the level of education, the lower the level of patient satisfaction.20

CONCLUSION

This study showed that none of the nursing care reached the desirable level of nursing care and that only the domain of hygiene and physical comfort were considered safe. The overall satisfaction index of patients with quality of care was considered low. Thus, it is evident the need for healthcare institutions to invest in the quality of care, ensuring patient satisfaction and safety. The nurse, who is responsible for managing a large part of the care process, should encourage guidance and training, ensuring quality care, ensuring patient safety, and promoting patient satisfaction.

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