Nursing care satisfaction from a multi-national perspective: Quantitative Literature

Review

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Review

The quality of nursing care determines patient satisfaction. Since patients are the focus of medical practice, this review will explore feedback on nursing care from different ethnic groups/ nationalities. Patients from select groups answered questions about the respect they received from nurses and the communication and participation. Without patient satisfaction, nurses could not feel a job well done at the end of their challenging workdays. This review examines three articles discussing patient satisfaction through surveys and a "Revised Humane Caring Scale" questionnaire (Goh et al., 2016). These questionnaire tools allow nurses to examine improvements in their care to those they serve daily. The purpose of this quantitative literature review is to gain insight from those we serve. "This study aimed to determine hospitalized patients' satisfaction with nursing care in general inpatient wards using the Revised Humane Caring Scale (RHCS) and identify clinical practice areas that require improvement" (Goh et al., 2016, p. 4). This literature review is of quantitative data. Quantitative research gives visual data to interpret meaningful results than a qualitative study that provides more abstract information than concrete data. Quantitative data provides concrete evidence for a research study.

A descriptive quantitative study on multi-ethnic patient satisfaction with nursing care measured by the Revised Humane Caring Scale

This article is a quantitative study that examines patient satisfaction through the "Humane Caring Scale (Goh et al., 2016)." The "Humane Caring Scale" comprises several questions about the client's care. Two questions to 270 adults from 22 inpatient general wards in the acute tertiary hospital in Singapore included "What are patients' levels of satisfaction with nursing care quality

while in the hospital in general inpatient wards? What differences emerge in patients' satisfaction as measured by the RHCS between/among socio-demographic subgroups?" (Goh et al., 2016, p. 4). Many ethnic groups participated in the study, including 270 adults (Goh et al., 2016). Approximately 82% of the 270 adults were satisfied with the respect they received from the nurses on their case (Goh et al., 2016). Approximately 62% of the 270 adults were satisfied with the communication and preparation received by the nurse on their case (Goh et al., 2016). In this study, researchers discovered that the Chinese population was the least satisfied ethnic group regarding their nurses' respect, communication, and preparation (Goh et al., 2016). Nurses need to provide patients with as much information about their care and health as accurately as possible. This article concluded that patients valued having nurses provide them with more information about their care (Goh et al., 2016).

Key Points

According to the article, "patient satisfaction is one of the sensitive indicators for the quality of nursing care" (Goh et al., 2016, p. 2). Effective care delivery, staff members' and patients' perceptions of knowledgeable healthcare, and including the patient in making decisions in their care contribute to the highest degree of patient satisfaction (Goh et al., 2016). However, the article addresses the need for interpersonal relationships between the nurse and the client because technology has taken its place and may contribute to the nurse-client disconnect, thus, contributing to patient dissatisfaction (Goh et al., 2016). The research method used was design, sample, instrumentation, content validity index and reliability of the RHCS, procedure, ethical considerations, data analysis, and results (Goh et al., 2016). The variables included in the study were gender, ethnicity, age, length of hospital stay, social status (alone or married with or without children), and education (Goh et al., 2016). Other variables included in the study were

employment status, hospital admission (whether elective or emergency), and the patients' reason for their admission (Goh et al., 2016). There were significant distinguishes in patients' satisfaction among socio-demographic groups (Goh et al., 2016). "The patient satisfaction level with nursing care was associated with the timing of patients' response to the survey" (Goh et al., 2016, p. 13). Most patients were satisfied with their respect (Goh et al., 2016). "To analyze the positive directional relationship between patient satisfaction and nursing care, the original RHCS scores (including total score and five subscale scores) were re-categorized (strongly agree = 2, agree = one, and the remaining responses = 0). The p-value <0.05 was considered statistically significant" (Goh et al., 2016, p. 6).

Assumptions

To complete a research study, researchers must recruit applicants to participate. The article addresses that there were approximately 294 adult clients recruited. However, only 270 participated in the study (Goh et al., 2016). Researchers assumed that the remaining recruited participants that did not participate in the study were dissatisfied with their care and did not want to respond to the questions (Goh et al., 2016). The researchers also assumed that these same non-participating participants were tired and did not want to participate for that reason. Finally, researchers assumed that patient satisfaction was not a priority to some nurses at some points because the nurses prioritized being tired (Goh et al., 2016).

Deficit/Conclusion

Patient satisfaction is the most imperative aspect of nursing care. Patient quality care outcomes are unachievable without patient satisfaction. Therefore, the researcher's line of reasoning is accepted. Researchers believe that nurses must increase nurse-patient interpersonal relationships to contribute to patient satisfaction, improve communication, prepare in advance,

and improve timing (Goh et al., 2016). Quality patient care will suffer if nurses fail to adhere to or accept this reasoning. The implications would be that nurses do not care more about their patient's satisfaction. However, this implication is untrue. Since the research and data show that more than 82% of participants were satisfied with their nurse's care (Goh et al., 2016).

Language barriers between nurses and patients: A scoping review

Language barriers among nurses and their international patients may considerably impact the satisfaction of the patients' care. This article is a quantitative literature review of multiple research studies on the nursing workforce and the effects of language barrios on patient care and satisfaction. Researchers identified 2,784 records through a systematic search, and 579 duplicated articles diminished; 2, 205 articles that did not duplicate, screened (Gerchow et al., 2021). In addition, 2,104 articles were excluded from the examination due to the title and abstract, while 101 full-test articles were screened (Gerchow et al., 2021). Of the 101 articles, 53 articles exclude because reasons including no language barrier mentioned, no distinct nursing findings, it may have the patient's perspective only, it was in a foreign language, non-research, mid-wife study only, or an expatriate nursing study (Gerchow et al., 2021). There were only 48 articles screened in the final article selection process. Researchers found that when nurses utilized interpreters, it improved the quality of the patients' care and the patient's satisfaction in the hospital setting (Gerchow et al., 2021).

Key Points

A critical point of the article is that nurses consistently express difficulty accessing interpreters. Additionally, many bilingual nurses do not consult to assist in developing interpretation policies, and nursing self-confidence, as well as years of work experience and patient expectations and workforce policies all, affect patient care and satisfaction (Gerchow et

al., 2021). The methods used to gather data include convenience sampling, demographics, surveys, factorial survey analyses, and statistical analysis (Gerchow et al., 2021). Through the data collected, researchers found that nurses were able to identify that the hindrance to the provision of care was language concordant care, communicating with interpreters, and multi-ethnicities (Gerchow et al., 2021). For example, nurses felt that patients who spoke another language misunderstood the call light significance (Gerchow et al., 2021). It is a way for nurses and nurse's assistants to adhere to patient care needs promptly. The language barrier amongst nurses and patients, researchers found the complicated end-of-life care as well (Gerchow et al., 2021). "Language barriers also impact the nurse-patient relationship in ways participants perceive as negative, and it magnifies in certain settings, including psychiatric ones, NICU, prehospital and ambulances, prisons, and maternal-child community health" (Gerchow et al., 2021, p.16). In this article, there were no present p-values. The data was significant because the 48 articles reviewed showed significant decreases in patient satisfaction due to language barriers and difficulties forming the nurse-client relationship (Gerchow et al., 2021).

Researchers first concluded that research should confirm the times during vital situations when an interpreter is necessary, and the times they are not should be identified (Gerchow et al., 2021). Next, an appropriate form of essential communication must establish when interpreters are unavailable (Gerchow et al., 2021). Last, language barriers between nurses and patients outside of the hospital setting need attention to rectify patient dissatisfaction and improve quality care (Gerchow et al., 2021).

Assumptions

The Author's main assumptions are that language barriers complicate patient care (Gerchow et al., 2021). Also, language barriers made the workload heavier and stressful to complete (Gerchow et al., 2021). The Author also assumed gaps in the research conducted about the depths of strain on nurses who work with patients with language barriers (Gerchow et al., 2021). The Author challenges other researchers to dig deeper and research beyond the hospital setting to gather even more factual data from nurses (Gerchow et al., 2021).

Deficit/Conclusion

Language barriers draw wedges between nurses' care satisfaction and patients' satisfaction. Improving the communication tools and increasing the readily available interpreters may change patients' nurse-client relationship dynamics. The authors' reasoning is accepted because nurses are stressed, overwhelmed, and tired already completing their shifts through the data and real life. Incorporating language barriers without proper communication support will further complicate their workday and reduce patient quality care. This article implies that there is not enough information provided on the matter. The article suggests that more researchers need to find information about language barriers in nursing homes, long-term care facilities, rehabilitation centers, adult daycares, and home health facilities. To better understand the impact language barriers have on the nurse-client relationship and understand how language barriers impact patient satisfaction across different settings (Gerchow et al., 2021). If nursing fails to accept the line of reasoning, this will imply that language barriers are not a concern to the nursing practice and the nurse-client relationship, and it is.

Patient Satisfaction with the Quality of Counseling Provided by Advanced Practice Nurses

Specialized in Multiple Sclerosis: A Quantitative Analysis

This article addresses a quantitative review conducted by researchers who sought to discover advanced practice nurses' patient satisfaction to patients with multiple sclerosis. During the analysis, 240 participants met the criteria for the study (Weilenmann, 2021). Researchers discovered that patients enjoyed the ability they had to ask as many questions as they wanted without feeling burdened. Advanced Practice Nurses are highly skilled professionals in leadership positions and can make tough decisions that can help either favor the patient or the opposite. However, patients must rely on their judgment for critical points in their care. Patients who experience multiple sclerosis have very challenging roads ahead, including multiple specialist visits and establishment to a multiple sclerosis car unit, where APNs will provide care that they are skilled in, which requires patient trust and satisfaction.

Key Points

The critical points are that many patients were delighted with the care and treatment from advanced practice nurses. The quality of counseling improves patient health outcomes in those patients with multiple sclerosis. The questionnaire and datasheet provided indicated that although some of the participants did not answer all the questions, the majority who did were delighted. Patients scored higher on "I had the opportunity to ask questions if I did not understand something" (Weilenmann, 2021, p. 5). However, they scored lower on the question asking, " Nurses asked me to make my suggestions" (Weilenmann, 2021, p.5). The p-value is less than .001, indicating that the patient satisfaction was congruent with a high additive index in the APN-BQ (Weilenmann, 2021). "The APN-BQ measures different dimensions of patient-centered

quality of counseling as provided by APNs" (Weilenmann, 2021, p. 2). The authors concluded that counseling for MS contributed heavily to patient satisfaction.

Assumptions

The assumptions were that the expertise of the MSNs is not only recognized by patients but also highly valued. On the contrary, patients do not feel significantly involved during the consultation process (Weilenmann, 2021). Another assumption is that even though patient satisfaction with the APN was high, patients are still not on the road to full recovery due to noncompliance with nutrition and physical activity (Weilenmann, 2021).

Deficit/Conclusion

Patients with multiple sclerosis greatly benefit from counseling services and APNs willing to help them make difficult decisions and drive the wheel on their care. The authors proposed that having a facility strictly designed for service and care for MS patients increases patient satisfaction and improves health outcomes (Weilenmann, 2021). The authors' line of reasoning is accepted because the length of counseling and honesty from the patients about the care they receive improves their care (Weilenmann, 2021). The article implies that the efforts are not just on the APNs or the patients but also increasing outcomes. If nursing fails to accept this line of reasoning, the implications would be that patients are not concerned with who leads their care and who they are.

Conclusion

This quantitative review examines three different articles discussing patient satisfaction, whether through multiple sclerosis counseling, the revised caring scale, and identifying language barriers. The information can improve patient outcomes by keeping nurses and others on the

nursing care team informed about the number one goal in the workforce, which is to provide quality patient care. Patients' satisfaction drives the healthcare team's performance. The information can improve the nursing practice because it will help nurses be more in touch with their own biases and reduce patient dissatisfaction. It will encourage nurses to reach out when they are experiencing patient challenges such as language barriers; their instincts will know to find an interpreter instead of looking at their patient with disappointment believing they will be stressed. The researcher's evidence-based practice/quality improvement efforts were of field research. Researchers went directly to the clients with surveys and questions. In addition, they review other scholarly/peer-reviewed articles and incorporate their findings into the journal. Healthcare can benefit from a more prosperous, more productive nurse-client relationship. Patients will feel more satisfied, and nurses will feel a job well done.

References

Gerchow, L., Burka, L., Miner, S., Squires, M. (2021, March). Language barriers between nurses

and patients: A scoping review. *Elsevier, 104*(3), 534-553.

https://doi.org/10.1016/j.pec.2020.09.017

Goh, M., Ang, E., Chan, Y., He, H., Vehviläinen-Julkunen, K. (2016, February 16). A descriptive

quantitative study on multi-ethnic patient satisfaction with nursing care measured by the

revised humane caring scale. *Elsevier, 31*, 126-131.

https://doi.org/10.1016/j.apnr.2016.02.002

Weilenmann, M., Händler-Schuster, D., Petry, H., Zanolari, D., Schmid-Mohler, G., Beckmann,

S. (2021, April). Patient Satisfaction with the quality of counseling provided by advanced

practice nurses specialized in multiple sclerosis: A quantitative analysis. *Journal of*

Neuroscience Nursing, 53(2), 99-103. 10.1097/JNN.0000000000000578