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COLLEGE OF MEDICINE AND HEALTH SCIENCE
DEPARTEMENT OF NURSING

**ADULT INPATIENTS SATISFACTION WITH NURSING CARE IN
AMBO REFERRAL HOSPITAL, WEST SHOA ZONE, OROMIA
REGION, ETHIOPIA, MAY, 14/ 2023**



BY: - GROUP ONE

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Proposal Summary

Background: Patients have the proper to expect quality of care. Patients satisfaction with the nursing care is viewed an essential aspect in explaining patient's perception of service quality. Care assessed to be high quality according to clinical, monitoring or other provider define criteria is far from best, If as an end result of that care the patient is unhappy or dissatisfied. There is then a sound cause for making the business enterprise and delivery of health care responsive for consumer of opinion.

Objectives:-The objective of this study is to assess adult in patient satisfaction with nursing care and its determinants factors in Ambo University Referral Hospital, Oromia region 2023.

Methods: - A cross-Sectional study design will be used to conduct the assesment of adult inpatient satisfaction with nursing care and its determinants factor in Ambo University Referral Hospital, Oromia region, Shoa Zone , from June 1/10/2015 to July 2/11/2015.

Budget: The total cost to the research will be 3120 Ethiopian birr.

Key word: patient satisfaction, in-patients, nursing care, quality

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Acronym and Abbreviations

AURH: Ambo University Referral hospital

WHO: World Health Organization

DEV/ODG: Development and overseas Development Group

IPSQ: interviewing patient satisfaction questioner

ICU: Intensive care unit

NICU: Neonatal intensive care unit

ETAT: Emergency triage assessment and treatment

SC: Stabilization center

EPI: Expanded program on immunization

ART: Antiretroviral therapy

ANC: antenatal care

HIT: health information technology

MPH: master of public health

IESO: Integrated emergency surgical officers

CHAPTER ONE: INTRODUCTION

1.1. Background

The on-going improvement in the quality of care has come to be a daily objective for Health care Expert and health care structures as a whole. Patient satisfaction that constitutes an essential dimension of high-quality care and patients' outcomes, complementing Measures of institutional performance and scientific outcome have confirmed to be a valuable, relatively low priced and conventional way to check the provision of excellent care to patients. Patient satisfaction has been used in number situations such as assessing the superiority of one treatment, sample of care and one healthcare device over some other (1).

Satisfied patients are Greater probable than the unsatisfied ones to proceed using the health care services, maintaining their Relationships with unique fitness care vendors and complying with the care regimens (2).

The most Essential predictor of patient's basic satisfaction with health center care is particularly related to their pleasure with nursing care. Patient pride is defined as the extent of the resemblance between the expected satisfactory of care and the actual received care. Patient pleasure with nursing care is Important for any health care agency because nurses include the majority of health care providers and they provide care for patients 24 hours a day (3).

A critical assignment for health service providers in creating countries is to discover methods to make them extra client-oriented. Improving health services requires hospitals to measure their personal overall performance in order to improve upon cutting-edge device of provider delivery. Well-designed health care delivery can decrease re-hospitalization, enhance exceptional of Life and provide (4).

The health care providers in growing international locations appear to be ignoring the importance of patients' perceptions concerning health services

Statements of the problem

Assessing affected person delight with nursing care is vital in evaluating whether patients' needs are fulfilled and because of this facilitating in the planning as nicely as implementing appropriate nursing Interventions for patients. Determining factors contribute most to patient pleasure can further assist Nurses in improving the excellent of nursing care (6).

Expectations about first-class of care are linked to Perceptions of care and when patient's perceptions are positive their medical journey and effects are extra in all likelihood to be positive (7).

It is regarded that qualities of care sufferers are provided which determines whether or not they are going to proceed to receive the care or appear for better option. The public health sector is weighed down by means of appreciation of bad pleasant and the way Companies treat their sufferers made patients to look for other option than using public health sectors (8).

The federal Minster of health and Oromia bureau are making different efforts that are still on manner to fulfill the hospitals with the right manpower, scientific equipment and other facilities to meet the Needs of the patient. However even though these efforts are undergoing to improve the service Delivery, the needs of the people have no longer but been adequately showed that met (9).

The study Conducted in Ambo University specialized teaching hospital shortage of experienced nurses, heavy Workload, and the low salary reduced the nurse's motivation. The commutative effect of the aforementioned reasons may affect the nursing care provision to the patient. Hence, the satisfaction of the clients towards the service delivery.

Chapter Two: Literature review

Quality is taking the first location in present day times and becoming a necessary difficulty of health care. Patients have emerged as extra aware of quality issues and favor health care to emerge as safe and are in search of higher quality. In many countries, lookup of patient satisfaction and experiences with fitness care are carried out properly, and the

effects are made uncovered to the public with distinct indications of fitness care quality. (12)

The way patients apprehend nursing care greater relies upon on their age, social status, academic level, cultural historic previous and previous hospital experiences. Support and admire from nurses, constant availability of nurses and appropriate given responses are the foremost signs and symptoms of satisfaction.(4)

Patient satisfaction as measure of quality of care

Donabedian (1988) suggests that 'patient satisfaction may be considered to be one of the desired outcomes of care. Information about patient satisfaction should be as indispensable to assessments of quality as to the design and management of health care systems' (13).

There is general agreement that patient satisfaction is an integrated constituent of service quality and expanded definitions of health service quality typically make explicit mention of patient satisfaction. The argument has been offered that the effectiveness of health care is determined, in some degree, by consumers' satisfaction with the services provided. Support for this view has been found in studies that have reported a satisfied patient is more likely to comply with the medical treatment prescribed more likely to provide medically relevant information to the provider, and more likely to continue using medical services. The logic has been widened its scope to developing countries; patient satisfaction and perceived quality will affect utilization of services as well as compliance with practitioner recommendations.(8)

Determinants of patient satisfaction

Factors contributing to patient satisfaction are sophisticated and there is no consensus on the important factors contributing to patient satisfaction. Several determinants of patient satisfaction with nursing care include: Sociodemographic background of the patient, expectations of nursing care, organizational and physical environment, communication and information, participation and involvement, interpersonal relationships, medical and technical skills of providers (4).

Socio demographic background of the patient

Socio demographic background of the client could influence expectations of the client before the care begins, during the care and after the care. The socio demographics factors like age, sex/gender, racial/ethnicity, language, culture and education levels influence patient satisfaction. Age and gender were found to influence perception of care with older patients more satisfied than the young and middle aged patients (14).

A qualitative study conducted in China health center on affected person pleasure with nursing care and elements influencing satisfaction reported that sufferers with high ranges of education showed larger satisfaction with nursing care than those who had less education (15). Patients with excessive formal schooling were much less cozy with nursing care than with low or no formal schooling (4). Another study achieved to determine inpatient pleasure with nursing care at the college hospital, Kumasi Ghana revealed that 38% of male participants have been very satisfied with nursing care in contrast to 30% of female participants. Age was once an necessary predictor of patient pride of nursing care as 37% of sufferers beneath forty years were much less cozy compared to 46% of those above forty..

In contrast, a cross sectional descriptive study conducted in Philippines on patient satisfaction with nursing care the result revealed that ,there were no significant variations in the mean levels of patient satisfaction in different age groups, education levels and religions.(16)

Patients' condition

A study carried out in Egypt show that, 74% of sufferers who had no longer had a history of previous hospitalization have been totally cozy compared to 66% of those who were admitted before at least once to hospital. On this line we can conclude that previous clinic admission has got some impact on patients' satisfaction (3). Previous experiences for the duration of hospitalizations also influenced affected person satisfaction. The sufferers with more journey of hospitalization have greater trusted expectations and are therefore cozy easily (14).

A DEV/ODG document which used to be carried out in Sub-Saharan Africa on HIV patients in 2008 show that human beings who are in poor health are much less satisfied with their scientific care than those who are well due to the fact they have a higher need for offerings and have greater interactions with the fitness care structures and therefore extra probability to be upset.

Hospital conditions'

A cross sectional descriptive study done in Iran, the study showed that Patients those remain less than five days in the hospital were more dissatisfied relative to patient hospital remain of 11-15 days and patient with a hospital remain over 16 days were dissatisfied with hospitalization in each sexes. They observed that patients with longer health facility stay were very tired of hospital environment whereas those with short stay were quite satisfied with the services provided. In a study carried out in South Africa, described that in respect to a country setting (developed or

not developed), the highest levels of dissatisfaction was with waiting time.(19).

A descriptive study performed in Malaysia on patient satisfaction with nursing care found that patients who had hospitalized for a longer period (more than 22 days) are more satisfied than patients who had shorter stay in hospital(i.e., 10 days or less) (6). Patients also express dissatisfaction with rigid administrations that depart them not knowing who to contact (20).

Nursing care and patient satisfaction

A quantitative study completed in Iran referral clinic on evaluation of nursing care on perspective of affected person ,the findings revealed that a great majority of these respondents (82.8%) had been comfortable/satisfied with the nursing care provided to them, whilst the others (17.2%) were no longer comfortable (22). A study performed in Kenya on the degree of patients' satisfaction and understanding on quality of nursing offerings in the Renal unit, the consequences of the study revealed that 67.8% patients in the Renal unit was once comfortable/satisfied (23). A qualitative study conducted in Sweden on Patient' journey of psychiatric care, Patients' ability to participate and be actively concerned in their care and choice making, has an have an effect on on their perception of satisfaction (21).

Needs and expectation of care

The mission of fitness/health systems extended to meet the population's health desires and expectations related to how patient must be treated providers. Strategies focused on responsiveness have been developed because 2000s (24). In this context patient's feedbacks come to be an essential supply to evaluate the capability of health systems in order to respond to patients' needs. Since 1990s health systems have adopted multidimensional systems to evaluate the results achieved including with additionally indicators related to client experience and satisfaction (25). Patient satisfaction with nursing care was conceptualized as the level of congruence between a patient's expectations of ideal nursing care and his understanding of the real nursing care he receives (16).

A comparative research about on patients' Satisfaction associated to nursing care conducted in Egypt, showed that nearly all patients have been satisfied in Al-Ahly sanatorium/hospital via meeting their wants and also patients response ratio was high in Al-Noor hospital(3)

A qualitative research performed on psychiatric patients in Norway , according to the research interpersonal relationship consists of honest, trust, respect, understanding, empathy, understanding people as a person, touch, friendliness and feeling identified as determinant of patient satisfaction (26). Other research performed in American on mental/intellectual health Patients ' experiences of being understood affirm that understanding a man or woman as a person, not a client also improves client satisfaction (27). Most patients have special expectations for their health care visit. Failures to take into account of the patient's issues and expectations, unmet patient expectations have been found to limit satisfaction (28).

Communication and information

The type and amount of data given to a client about their circumstance and treatment are very necessary in health care. Nurses at the Ghana university health facility had been scored very low (14%) for the kind and amount of data given about patient's condition and treatment. They had been also ranked low (20%) for the way they defined problems to patients.

Also nurses were ranked low (22%) for how they listened to patients' worries and concerns. Furthermore, nurses were rated low (24%) for how they related to relatives and friends of patients. In addition, they were rated low (27% and 28%) respectively for checking on the well-being and how much they should be aware of the care of the patient. The amount and type of information nurses gave to patients about their condition and treatment were major causes of dissatisfaction (4). Another study done in South Africa on Interpersonal and organizational dimensions of patient satisfaction revealed that, sometimes patients were misunderstood or not taken seriously because of one way communication and that the communication they received was delivered in a technical language that was hard to understand (19).

Technical skills and competence of the provider

A study done in Iran on Evaluating Nursing Care for Patients Hospitalized with Cancer, the result revealed that patients expect nurses to have a command of specific knowledge about each patient and his treatment. Patients feel that their body is in safe hands if nurses are competent and skillfulness; and competence gives them a sense that the staff knows what they are doing (18).

Significance of study

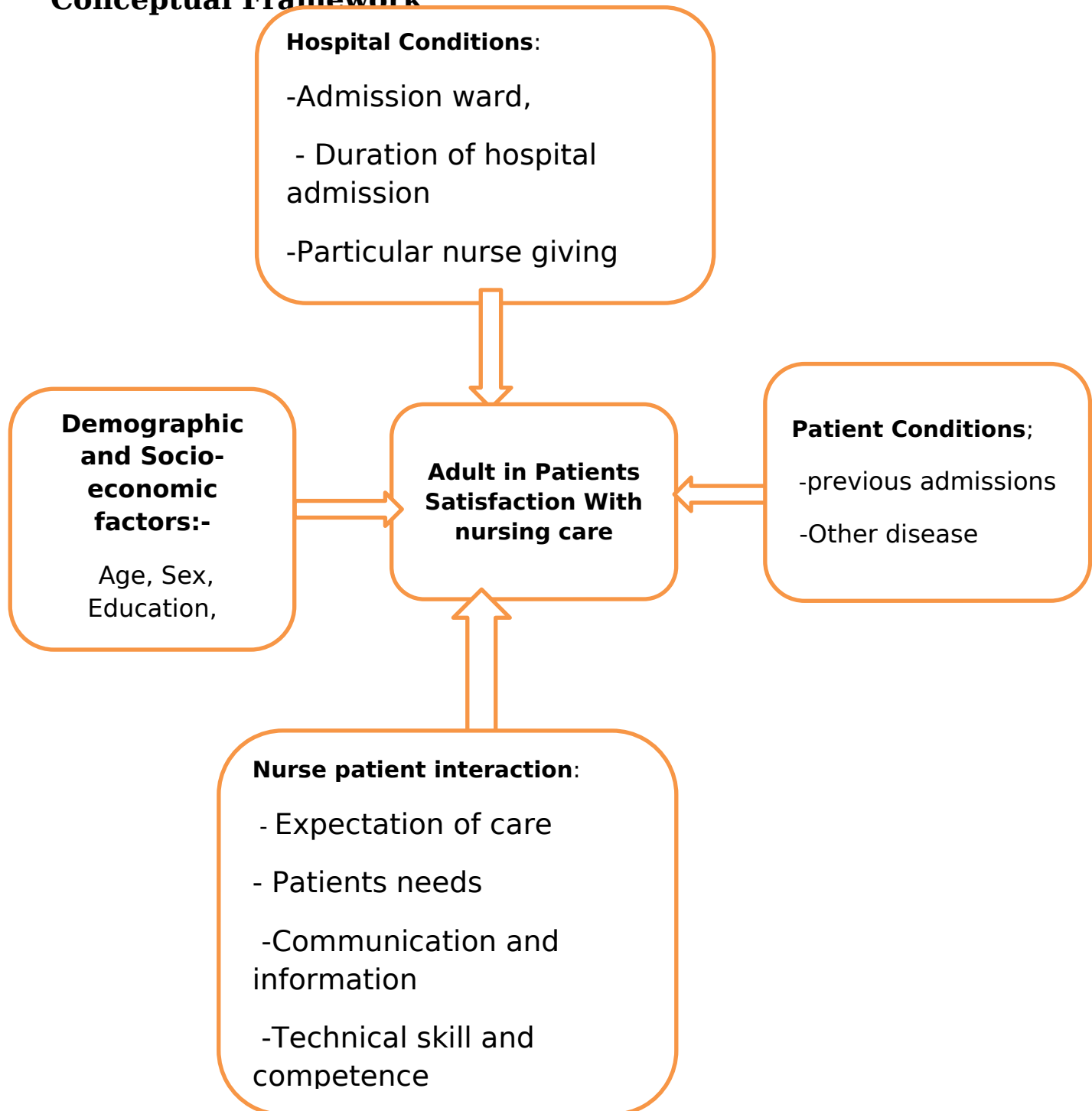
Nursing care is one of the primary health care services. It contributes a lot to the affected person healing process. Even although there are capable medical practitioner current in a given fitness institution, it would no longer be ample without excellent nursing care. Nurses have 24 hour contact with patients as properly as being close to them. Thus, as they are the frontline, the patients anticipate greater from them and nurses should additionally fulfill patients' desires with competence and a compassionate approach. If the patient is denied appropriate care the recovery procedure is obviously compromised. On this line, assessing the pleasure of sufferers with nursing care is crucial in order to perceive the place of dissatisfaction and at the identical time enhance the nursing services.

The rising health care literature suggests that patient pleasure is a dominant concern that is intertwined with strategic selections in the fitness services. Donabedian (30), thus, Suggests that patient satisfaction should be as quintessential to assessments of fantastic as to the

Design and administration of health care systems. Unless quality improvement becomes a Priority, the consequences are grim. In addition to preventing sufferers from rapid recovery, Thereby growing their costs, negative first-class additionally elevates the psychological boundaries of using the system. (2)

Nursing offerings are no longer organized well in Ethiopia. As affected person delight with nursing care was now not assessed adequately or not at all acquire attention in our country This study would be the baseline on this path and also helpful for enhancing the nursing services in Ethiopia.

Conceptual Framework



Chapter three: Objectives

3.1 General objective

The general objectives of this study will be

- ✓ To assess the level of adult inpatient satisfaction with nursing care and its determinant factor in AURH, Shoa Zone, Oromia, 2015 E.C.

3.2 Specific objectives

- ✓ To determine the level of adult inpatient satisfaction with nursing care.
- ✓ To identify factor towards nursing care from the admitted adult patient view point.
- ✓ To assess the quality of nursing care in AURH as indicated by patient satisfaction.

CHAPTER FOUR

4. METHODS AND MATERIALS

4.1. Study Area

A, in the Ambo town which is the capital city of Ambo zone. It is located in 115km West of Addis Ababa. This hospital started to give service in 2010 and it is providing all basic services; outpatient services, emergency and inpatient services. Estimated total population residing in the town is 63,500 people. The hospital provides services for more than 150,000 peoples in the catchment area. It has one emergency, four outpatient departments, ART care, NICU, SC, ETAT, EPI, ANC, family planning, labor and delivery, ophthalmology and dentistry department, and four wards; gynecology and obstetrics, medical and surgical ward, pediatrics ward, This Hospital services the community as well as colleges and Universities for the purpose of giving education for students of Health Science. The Hospital has 87 male and 75 female Nurses, 23 male and 20 female midwives, 9 male and 8 female Health officers, 22 male and 19 female laboratorists, 18 male and 12 female pharmacists, 9 male and 4 female anesthesiologists, 7 male and 3 female radiologists, 6 male and 5 female Environmental health, 5 male psychiatrist, 6 male and 3 female biomedical, 4 male and 3 female optometry, 3 male physiotherapy, 4 male and 3 female HIT, 4 male MPH, 11 male all type of specialists, 21 male and 3 female doctors/GP/, 1 male and 1 female IESO. The total number of health professionals male 234, female 188 and 422 professionals totally. The total number bed in medical ward 44, gynecological ward 23, surgical ward 36 beds.

4.2. Study period

The study will be conducted from June 1/10/2015 to July 2/11/2015 E.C.

4.3. Study design

- Cross sectional study will be conducted in Ambo University Referral Hospital.

4.4. Population

4.4.1. Source population

All adult patients who will be admitted to Ambo University Referral Hospital.

4.4.2. Study population

Sample from all adult patients admitted to medical, surgical and gynecological ward.

4.5. Inclusion and exclusion criteria

4.5.1. Inclusion criteria

- Any adult patients who will be admitted to the study ward at the time of data collection.
- Any adult patients greater than or equal to 18 years old.
- Those who will be able to communicate.
- Those who will be stay in the ward two or more nights.
- Those who will be volunteer to participate in the study.

4.5.2. Exclusion criteria

- The adult patients who will not fulfill the inclusion criteria.
- Critically ill patients or unconscious patients.

4.6. Sample Size and Sampling Technique

4.6.1. Sample Size

Sample will be collected from the total number of 300 adult patients Or adult patient admit to ward per month/with a proportion of (medical ward=140, gynecological ward=75, and surgical ward=85.)

The following formula is considered to get the appropriate sample size

$$n_i = \frac{(Z_{\alpha/2})^2 p(1-p)}{d^2}$$

$$= \frac{(1.96)^2 0.5(1-0.5)}{0.05^2}$$

$$= 384$$

Since number of total population is less than 10,000 corrected sample size formula will be used;

$$n_f = \frac{n}{1 + \frac{n}{N}}$$

$$N = 300$$

$$= 384 / (1 + 384/300)$$

$$= 168$$

Where, n = initial sample size

n_f = corrected sample size

N = total number of adult inpatient

P = expected number of proportion = 0.05

Z_α = standard normal value at confidence interval of 95%

10% non-response rate = 17

Therefore 185 adult patients will be selected to fill the questionnaire with 10% non-response rate.

4.7.2 Sampling technique

The research will utilize a probability sampling technique, where, purposive sampling technique will be utilized to involve AURH adult in patients satisfaction; stratified sampling to select sample from each strata or category of medical, surgical, and gynecological ward. Finally, simple random sampling technique will be employed to select study subjects from each stratum. The medical record numbers of each

inpatient will be retrieved from ward staff leader. Finally, a random table will be prepared and study subjects will be selected using simple random sampling technique.

The number of each patient will be selected from each stratum by the following proportional sampling technique.

Gynecological ward= 75

Medical ward= 140

Surgical ward= 85

To take sample of 185 patients,

$n_j = (n/N) \times N_j$ where j = number of strata

Gynecological ward= $(185/300) \times 75 = 46$

Medical ward= $(185/300) \times 140 = 86$

Surgical ward= $(185/300) \times 85 = 53$

4.7. Data collecting Tools and technique

4.7.1. Data collection tools

Structured self-administered questionnaires both in Amharic and English will be used to assess adult inpatients satisfaction with nursing care.

4.7.2. Data collection technique.

Structured questionnaire is developed first in English. The questions and statements are arranged according to particular objectives that they can address. Then the first draft of questioner is submitted to the advisors . The valuable suggestions will have considered to improve the instrument. Accordingly, redundancy, vagueness and logical flow of the questions will be corrected. After extensive revision, the final version of the English questionnaire will translated to Amharic version, then back to English to ensure understandability and message consistency and then will pre tested on some adult inpatients who aren't included in the study.

4.8 Study Variables

4.8.1. Independent variables

Socio economic factors: Age, sex, Religion, Occupation, Marital status, ethnicity education, Income

Hospital conditions: Admission Ward, duration of admission, particular nurse giving care

Patient's condition: other disease, History of previous admission

Nurse patient interaction; patient need and expectation of care, communication, technical skill and competence

4.8.2 Dependent variables

Adult in Patient Satisfaction with nursing care

4.9. Ethical consideration

Ethical approval will be obtained from ethical clearance committee of college of medicine and health sciences, department of Nursing. Permission will be obtained from AURH. Oral consent will be obtaining from each study participant during data collection. No personal identification or name will be used to keep confidentiality of subjects' information. Participants will be assured of their full right to participate or refuse participation in this study.

4.10. Operational definitions and measurement

Nursing care; The range of responsibilities which fall to individual nurses related to their personal experience and skill which includes (nurse diagnosis, provision of medications, ,patient follow up, dressing of patients, giving bed bath, bed making, Assessment of vital Signs, positioning, moving and transferring Clients , Nasogastric tube (Insertion and Feeding) , Feeding (Gastrostomy and Jejunostomy) , Ostomy Care (Urinary and Bowel Diversions) ,Urinary Catheter Care) 17

Adult in patient satisfaction with nursing care: patient's perceived opinion about the care received from nursing staff measured by one score. It has 19 items with 5 point Likert score (1-not fully satisfied to 5-compeletly satisfied).Reliability check showed that the scale has internal consistency (Cronbach's $\alpha = 0.820$). The items of the scale were subjected

to factor analysis to look into the underlying components. Accordingly, one component was identified with Eigen value greater than one and it accounted for 72.797% of the overall variance. Factor scores were created and used in the subsequent analysis.

Adult in Patient satisfaction level was measured by the percentage of maximum scale score. The percentage of maximum scale score was computed using the following formula.

Percentage Mean score

$$= \frac{\text{actual score} - \text{potential minimum score}}{\text{Potential maximum score} - \text{potential minimum score}} \times 100\%$$

Potential maximum score - potential minimum score

- This formula gave individual percentage mean score and to know the overall level of satisfaction of the study population, the average of this score was taken.

Nurse patient interaction; Patients will be asked about their need, expectation of nursing care communication and skill of nurses. Every item will be scored on a five point scale ranging from strongly disagree (1) to strongly agree (5). Reliability check showed that the scale has internal consistency (Cronbach's alpha = 0.80). To examine the underlying factors (components) of the Nursing care scale, factor analysis was conducted and produced two factors with Eigen value greater than one. These factors were Perceived need score and expectation score.

Perceived need score: will be measured as the magnitude of score a respondent gives to seven items, the maximum score is 35 and the minimum is 7. It accounted for 41.1% of the overall variance and its score was used in subsequent analysis.

Expectation score: was measured as the magnitude of score a respondent gives to three items, the maximum score is 15 and the minimum is 3. It accounted for 28.4% of the overall variance and its score was used in subsequent analysis.

4.11. Dissemination of study results

The final report of the study will be presented and discussed in Ambo university College of medicine and health science. The result of the study will be disseminated to Ambo University and other relevant organization working around adult in-patient satisfaction and nursing care.

CHAPTER FIVE: WORK PLAN

Table 1

The following table shows schedule in which over all studies program will be conducted among adult patients satisfaction with nursing care in Ambo University Referral Hospital in 2015.

Activity	Date	Responsible body	Time(date) that required
Development of the research proposal	10/07/2015	1.Abuzumeran A.M	30 days
1 st draft submission of the proposal	16/07/2015	1. Abuzumeran A.M	22 days
2 nd draft proposal		1.Abuzumeran A.M	
Final proposal		1.Abuzumeran A.M	
Data collection	10/8/2015_20/09/2015	Data collector	40 days
Data analysis	22/09/2015_12/10/2015	1. Abuzumeran A.M	20 days

Submission of 1 st draft research	12/11/2015	1	.Abuzumeran A.M	
2 nd draft research submission	18/12/2015	1	Abuzumeran A.M	36 days
Final research submission	10/02/2016	1	Abuzumeran A.M	62 days.
Research defense	15/12/2015	1	Abuzumeran A.M	5 days
Monitoring	Always	Advisor's	Always	

CHAPTER SIX; BUDGET BREAK DOWN

Table 2: Budget Break down

I Stationeries

S.no	Items	Unit	Quantity	Unit price	Total
1	Typing paper	Pack	01	400.00	400.00

2	Pen	Pieces	6	20.00	120.00
3	Flash disk	Pieces	01	300.00	300.00
4	Duplication				
Total					820.00

II personal cost

S.no	Personnel	No	Days	Cost	Total
1	Data collector	03	10	60.00	1800.00
2	Typist	01	05	40.00	200.00
3	Transportation	03	10	10	300.00
Total					2300.00

Total= I + II=3120 ET Birr

References

1. Charalambous A, Efstathiou G, Adamakidou T, Tsangari H. Adult cancer patients satisfaction of nursing care : a cross-national evaluation of two Southeastern European countries. 2013;
2. Aldebasi YH, Ahmed MI. Patients' Satisfaction with Medical Services in the Qassim Area. 2011; 5(4):813-7.
3. Nahed S. El-Nagger, Sahar M. A. Ahmed, Lamiaa A. Elsayed1, Hamdia M. A. Khamis. Patients' Satisfaction Regarding Nursing Care Provided in Different Hospitals in Makkah AL Mukramah Nahed. 2013;10:421-9.
4. Dzomeku, V. M, Atinga Ba-Etilayoo TP and REM. In-Patient Satisfaction with Nursing Care: A Case Study at Kwame Nkrumah University of Science and Technology. Int. J. Res. Med. Heal. Sci. 2013;2(1):1-6.
5. Ahmad MM. Nursing care and quality of life among Jordanian patients with cancer. 2010; 23(3):1-11.
6. Tang WM, Soong C, Lim WC. Patient Satisfaction with Nursing Care : A Descriptive Study Using Interaction Model of Client Health Behavior. 2013;3(2):51-6.
7. Eng HS, Kaur G, Wafa SR, Zulkifli S, Zakaria S, Omar R. Post-Cardiac Surgery Patient Satisfaction with Quality Nursing Care at Institute Jantung Negara (IJN). 2011;1(March 2005):14-9.
8. Facilities P, Services D, Services D. A study on patient satisfacion in hospitals. 2012; vol.1.
9. Federal Democratic Republic of Ethiopia Ministry of Health Health HSDP IV. 2014.
10. Tesfaye HT. Statistical Analysis of Patients' Satisfaction with Hospital Services: A Case Study of Shashemene and Hawassa University Referral Hospitals, Ethiopia. 2009;
11. Yatasa YN. Perception of nurses and physicians towards barrieres to nurse- physician communication and its impact on patient out come in Hawassa referral byYavello Nataye Yatasa (BSN). 2011.
12. Iii JLT, Adams SR. Incorporating patients' assessments of satisfaction and quality : an integrative model of patients ' evaluations of their care. 2001; 11(4):272-86. 33
13. Donabedian A, Journals PN. Special article : The quality of care : How can it be assessed ? 1997;

14. Chawani Fs, A. Patient satisfaction with nursing care: a Meta synthesis. 2009.
15. Pedersen R. Patient Education and Counseling Empirical research on empathy in medicine — A critical review. 2009;76(0318):307-22.
16. Villarruz-sulit MVC, Dans AL, Javelosa MAU. Measuring Satisfaction with Nursing Care of Patients Admitted in the Medical Wards of the Philippine General Hospital. 2009; 43.
17. Kher A. Reports and Policy Papers risk and vulnerability to HIV / AIDS among fishing communities. 2008.
18. Hajifathali A, Ainy E, Jafari H, Moghadam NM. In-Patient Satisfaction and Its Related Factors in Taleghani University Hospital, Tehran, Iran. Pak J Med Sci. 2008; 24(2):6-9.
19. Westaway MS, Rheeder P, Zyl DGVAN, Seager JR. Interpersonal and organizational dimensions of patient satisfaction : the moderating effects of health status. 2003.
20. Eriksson U, Svedlund M. Struggling for confirmation – patients' experiences of dissatisfaction with hospital care. 2007;
21. Lilja L, Hellzén O. Former patients' experience of psychiatric care : A qualitative investigation. 2008; 279-86.
22. Akhtari-zavare M. Patient Satisfaction : Evaluating Nursing Care for Patients Hospitalized with Cancer in Tehran Teaching Hospitals, Iran. 2010; 2(1):117-26.
23. Ndambuki J. The level of patients' satisfaction and perception on quality of nursing services in the renal unit, Kenyatta National Hospital Nairobi, Kenya. 2013;3:186-94.
24. World Health Organization. The World Health Report, Health Systems improving performance. 2000 p. 215.
25. Nuti S, Vainieri M, Bonini A. Disinvestment for re-allocation : A process to identify priorities in healthcare. Health Policy (New. York). [Internet]. Elsevier Ireland Ltd; 2010;95(2-3):137-43. Available from: <http://dx.doi.org/10.1016/j.healthpol.2009.11.011>
26. Psychiatric P. Psychotherapy for the Advanced practice psychiatric nurse. 2008. p. 1-73.

27. Gaillard LM, Shattell MM, Thomas SP. Journal of the American Psychiatric Nurses Association Mental Health Patients ' Experiences of Being Misunderstood. 2009;
28. Facilities HC. A Study of Patient Satisfaction in Outdoor Services of Private Health Care Facilities. 1999; 24(4).
29. Westat, Rockville M, Joann Sorra, Ph.D. Veronica Nieva PDP. Study of satisfaction of patients admitted in a tertiary care hospital. :37-9.
30. W31. Westat, Rockville M, Joann Sorra, Ph.D. Veronica Nieva P. Hospital Survey on Patient Safety Culture. 2004;(04

Annex 1: Questionnaire

English Version Questionnaire

Ambo University College of medicine and health Sciences

Department of nursing

Questionnaire for data collection on the assessment of adult in patient's satisfaction with nursing care services in AURH.

IDENTIFICATION

Name of the institution-----

Address of the institution-----

Verbal Consent Form before conducting the interview

Greetings:

Hello, how are you? My name is -----I am working as data collector for the study conducted by Ambo university pre graduate students on Adult in patient satisfaction with nursing care in AURH. I would like to interview you few questions about the nursing care service of this hospital. The objective of the study is to assess the level of patient' satisfaction with the nursing care services of the hospital and to identify the factors affecting adult in patient satisfaction with nursing care in AURH , which will be important to improve the health service delivery of the hospitals. Your cooperation and willingness for the interview is very helpful in identifying the problems related to the issue. Your name will not be written in the form and I assure you that all

information that you give will be kept strictly confidential. Your participation is voluntary and you are not obliged to answer any question you do not wish to answer. If you are not still comfortable with the interview, please feel free to stop it any time you like. Do I have your permission to continue?

1 - If yes, continue to the next page

2 - If no, skip to the other participant

I interviewer's name and code-----,
signature----- Date if interview-----, Time started
_____, Time finished --- ward.....
Supervisor's name -----, Signature -----

-I thank you for your cooperation

GENERAL INSTRUCTI ON

All questions have pre-coded response. It is therefore very important to follow the following Instructions while you are interviewing respondents and recoding their answers.

- Ask each question exactly as it is written on the questionnaire.
- Do not read the pre code response to respondents. Listen only to the response of respondents.
- Circle the response in the response column that best matches the answer of the respondent

PART ONE: SOCIO - DEMOGRAPHIC CHARACTERISTICS AND PERSONAL CONDCTIONS.

S.N ^o	QUESTIONS	RESPONSE	CODE
1	Sex	1. Male 2. Female	
2	Age (in years)		
3	Address	1.urban 2.sem urban 3.rural	

4	Religion	Orthodox----1 Muslim-----2 Protestant---3 Catholic-----4 Others.....classify	
5	ethnic group	1. Amhara 2. Oromo 3. Wolayta 4. Sidama 5. Gurageh 6. Halaba 7. Other.....class ify	
6	Marital Status	1- Single 2-Married 3-Divorced 4-Widowed	
7	Educational Status	1- Illiterate 2- Reads and writes 3- Primary &Intermediate(1-8) 4- Secondary(9-12) 5-college 6- degree and above	

8	Occupation	1- Governmental employee 2- Merchant 3- Farmer 4- student 5-House wife 6-other	
9	Monthly income	----- Birr	
10	Frequency of admission	1 - New admit ion 2 - Repeat admit ion	
11	Including last night, how many nights did you spend in This ward?	1->7 night 2-seven night	
12	Have you other disease/s in addition to current health problem	1- yes 2- no	
13	Was there one particular nurse in charge of your care in this ward?	1. Yes 2. No 3. Not sure	

SECTION 2: YOUR OPINIONS OF NURSING CARE HOW TO ANSWER

THESE QUESTIONS

In this section, we ask your opinions of the nursing care you received during your stay on the ward. For each question, please circle one number which best describes your view.

Thinking about your stay on the ward, how did you feel about nursing care?

SN	Items	Not at all satisfied	Barely satisfied	Quite satisfied	Very satisfied	Completely satisfied
1	The amount of time nurses spent with you	1	2	3	4	5
2	The capability of nurses at their job	1	2	3	4	5
3	There always being a nurse around if you needed one	1	2	3	4	5
4	The amount nurses knew about your Care	1	2	3	4	5
5	How quickly nurses came when you called for them	1	2	3	4	5
6	The way the nurses made you feel at Home	1	2	3	4	5
7	The amount of information nurses gave to you about your condition and Treatment	1	2	3	4	5
8	How often nurses checked to see if you were Okay	1	2	3	4	5
9	Nurses' helpfulness	1	2	3	4	5
10	The way nurses explained things to you	1	2	3	4	5
11	How nurses helped put your relatives' or friends' minds at rest	1	2	3	4	5
12	Nurses' manner in going about their Work	1	2	3	4	5
13	The type of information nurses gave to you about your condition and treatment	1	2	3	4	5
14	Nurses' Of You as A treatment individual	1	2	3	4	5
15	How nurses listened to your	1	2	3	4	5

	worries and Concerns					
16	The amount of freedom you were given on the ward	1	2	3	4	5
17	How willing nurses were to respond to your requests	1	2	3	4	5
18	The amount of privacy nurses gave you	1	2	3	4	5
19	Nurses' awareness of your needs	1	2	3	4	5

SECTION 3: QUESTIONS ABOUT GENERAL NURSING CARE IN
YOUR STAY IN THE WARD

No		Strong ly disagr ee	Disagre e	Neutral	Agree	Strong ly agree
1	The nurse checks your ID, prior to administering medications.	1	2	3	4	5
2	The nurse maintains your rights & needs.	1	2	3	4	5
3	The nurse monitors your safety & security.	1	2	3	4	5
4	The nurse provides you with clean & quite environment.	1	2	3	4	5
5	The nurse provide you health education					
6	The nurse takes defective equipment from your environment & reporting the defect.	1	2	3	4	5
7	The doctors and nurse work together	1	2	3	4	5
8	The nurses doing their job without relying doctors	1	2	3	4	5
9	The nurses help all patients equally	1	2	3	4	5
10	The nurses are carless on their duty	1	2	3	4	5

THANK YOU!!

