Patient Satisfaction and Characteristic of Maternity Room from April to June 2022 at Unggul Karsa Medika Hospital

Theresia Monica Rahardjo¹*, Yoctaf Octora Kadam², Jeffrey Christian Mahardhika²

Abstract

Background
Maternal Mortality Rate (MMR) is an indicator that reflects various aspects including the quality of healthcare from clinical standpoint, the quality of healthcare system, the quality of health insurance, the quality of referral systems and non-health aspects that related to healthcare such as economic, social, cultural, and education aspects. In order to reduce MMR, healthcare quality of maternity services should be increased. Patient satisfaction is one of indicators for healthcare quality. In this study, we aim to describe patient satisfaction in maternity room of Unggul Karsa Medika Hospital, Bandung, West Java, Indonesia.

Methods
This is a quantitative descriptive study conducted in Maternity Room, Unggul Karsa Medika Hospital, Bandung, West Java, Indonesia. The design of the study was cross-sectional. The research was conducted from April to June 2022. Minimal total sample of 97. Total sample that obtained in this study was 150 subjects. Sampling method used in this study was consecutive sampling.

Result
Percentage of total patient satisfaction of maternity room were slightly increasing from April to June 2022, with highest value was in June 2022 of 94.2%. Four out of six elements of patient satisfaction were increasing, which were speed of services, friendliness and responsiveness, clarity of information and instructions, and completeness of infrastructure and facilities.

Conclusion
Unggul Karsa Medika Hospital through its excellence service of maternity room has played a significant role to reduce maternal mortality rate in Indonesia, since good and increasing results in patient satisfaction of maternity room service from April to June 2022.

Keywords: hospital, maternity, maternal mortality rate, patient, pregnant women, satisfaction

Background
Pregnant women is considered as one of the high-risk groups of healthcare which need special attention.¹ This is supported by data shown in 2017 that about 810 women die every day as a result of pregnancy or childbirth-related complications worldwide.² The high number of maternal deaths in some regions of the world indicates unfair access to health care and the gap existed between rich and poor communities.² About 94% of maternal deaths occurred in low-income and lower-middle-income countries while 65% of which occurred in the African region. Sustainable Development Goals (SDG) aims to reduce the ratio of maternal mortality globally, less than 70 per 100,000 live births by 2023.³,⁴

Maternal Mortality Rate (MMR) is an indicator that can show the health quality of a country. Data from Indonesian Government Health Survey conducted in 2010 showed that more than 8,000 maternal deaths were reported in one year. Socio-economic status, access to healthcare, and healthcare infrastructure were factors that associated with

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maternal mortality in Indonesia. Healthcare quality for maternity services should be upgraded in order to reduce maternal mortality. Several aspects of healthcare quality that associated with patient satisfaction in Indonesia were effectiveness, accessibility, patient-centeredness, and equity. If the healthcare quality, especially maternity services increases, then maternal mortality rate will decrease. Therefore, continuous research on patient satisfaction that precedes continuous improvements on healthcare quality is needed in healthcare facilities.

Unggul Karsa Medika Hospital as secondary hospital in Bandung Regency has decided that Maternity Health Services, especially for pregnancy and labor, as one of several excellence services. In order to achieve excellency in the maternity health services, continuous research on patient satisfaction in Maternity Room of Unggul Karsa Medika Hospital is conducted monthly. In this article, we would like to describe the result of our research on patient satisfaction in Maternity Room of Unggul Karsa Medika Hospital.

Methods

This is a quantitative descriptive study conducted in Maternity Room, Unggul Karsa Medika Hospital, Bandung, West Java, Indonesia. The design of the study was cross-sectional. The research was conducted from April to June 2022. Study population was all patients and their families who came to Maternity Room. We used consecutive sampling to get our subjects. Minimal total sample was counted using this formula:

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n = \frac{Z_{\alpha/2}^2 P(1-P)}{d^2}
\]

Where n is the sample size, Z is the statistic corresponding to level of confidence (95% in this study), P is expected prevalence, and d is precision (10% in this study). Due to no pilot study conducted, we assume P is 50% or 0.5. From the formula, we got minimal total sample of 97. Total sample that obtained in this study was 150 subjects.

Elements of service quality that surveyed were described in Table 1. Each element was presented in one question with likert scale, ranging from very dissatisfied, dissatisfied, slightly dissatisfied, satisfied, and very satisfied. Each likert scale was given points ranging from 1 (very dissatisfied) to 5 (very satisfied).

Total patient satisfaction was counted with formula of each likert scale points times frequency of total subjects that answered the questionnaire item with the respective points, then divided by total points available. Total patient satisfaction then presented in percentage. In example, if 30 subjects answered the elements number 1 (speed of service) by satisfied, the total points will be 30 x 4 = 120. Then divided by total points available (30 x 5 = 150), the result was 80%. We use Microsoft Excel 2016 to calculate the data. All data were presented in frequency tables, bar charts, and line charts.

<table>
<thead>
<tr>
<th>No.</th>
<th>Elements of Service</th>
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<tr>
<td>1.</td>
<td>Speed of Service</td>
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<td>2.</td>
<td>Friendliness and Responsiveness</td>
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<td>3.</td>
<td>Clarity of Information and Instructions</td>
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<td>4.</td>
<td>Completeness of Infrastructure and Service Facilities</td>
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<td>5.</td>
<td>Cleanliness and tidiness of Officers</td>
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<td>6.</td>
<td>Cleanliness and Convenience of Rooms</td>
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<th>Table 2. Characteristics of Subjects</th>
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<tr>
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<td>Female</td>
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<td>Occupation</td>
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<td>35-40 years old</td>
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<td>41-45 years old</td>
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Percentage of total patient satisfaction of maternity room were slightly increasing from April to June 2022. Every month, the percentage of total patient is over-achieving the standard of 80%. The result could be seen in Figure 1.

If we breakdown the elements of service, we could see that speed of services, friendliness and responsiveness, clarity of information and instructions, and completeness of infrastructure and facilities were all increasing from April to June. However, two elements of cleanliness and tidiness of officers and cleanliness and convenience of rooms decreased from April to May, and began to increase again in June (Figure 2). Mean values of all elements were above standard of 80%.

Discussion
Based on the results, we can conclude that total patient satisfaction of maternity room in Unggul Karsa Medika Hospital, from April to June 2022 was very good and was increasing in each month. Speed of services, friendliness and responsiveness, clarity of information and instructions, and completeness of infrastructure and facilities were elements that contributing the increased total satisfaction of patients.

Speed of services was also related to the patients’ satisfaction in study conducted by Jannah et al. Sari et al. also supported the relationship between speed of services and patient acceptance using in-depth interview. Our hospital rule of maximal waiting time in emergency room is responsible for good results in speed of services. All patients in emergency room should arrive in their inpatient wards less than 2 hours. Since the majority of maternity cases that came to our hospital is emergency; thus, this element was increasing.

Friendliness and responsiveness related to the patients’ satisfaction in this study. This result is consistent with Uhas et al. study that showed that patient satisfaction ratings were strongly correlated with patient satisfaction with their physician. Responsiveness had more influence on patient satisfaction than communication skills, but friendship behavior had no significant effect on satisfaction.

Clarity of information and instructions was related to patient satisfaction as showed in this study. This result was in line with other study conducted in Saudi Arabia that stated clarity in communication with patients, compassion and providing clear explanation of what the medical staffs were doing were two aspects of satisfaction with doctors and nurses.

Completeness of infrastructure and facilities was in line with patient satisfaction in this study. This result supported by Javed, et al. study that showed patients’ satisfaction was associated with healthcare facilities. Complete facilities will increase the satisfaction because she does not need to be referred in order to get full healthcare.

There were two decreases in our study, which were cleanliness and tidiness of officers and cleanliness and convenience of rooms. Both elements are needed to be increased because of their associations with patient satisfaction. Clean hospital environment was found to be associated the strongest with patient satisfaction in Nigeria.
Conclusions
Unggul Karsa Medika Hospital through its excellent service of maternity room has played a significant role to reduce maternal mortality rate in Indonesia, since good and increasing results in patient satisfaction of maternity room service from April to June 2022. Speed of services, friendliness and responsiveness, clarity of information and instructions, completeness of infrastructure and facilities were all had increasing trend. With good patient satisfaction, we can conclude that the quality of healthcare especially in maternity room of Unggul Karsa Medika has been improving toward excellence.

List of abbreviations
MMR - Maternal Mortality Rate
SDG - Sustainable Development Goals

Declarations
Ethics approval and consent to participate
All procedures performed in this study involving human participants were in accordance with the ethical standards of Unggul Karsa Medika Hospital ethical board and with the 1964 Helsinki Declaration and its later amendments or comparable ethical standards.

Consent for publication
Consent for publication regarding patient data has been obtained before the study. All the patient identity has been kept secret.

Availability of data and materials
Not Applicable

Competing interests
The authors declare that they have no competing interests.

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References

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