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*Factors affecting mother satisfaction with care
provided by midwives in a maternity-neonatal ward. II*

At the time of present reforms health care units, despite their specificity, are subject to the principles of market economy. Hence, they must be managed in ways that provide success for the institution. It has become necessary to win over the clients/patients by offering high quality services and giving satisfaction with the services received (1, 5).

Patients' expectations and their perception of services contribute to the perception of the quality of care. These expectations are affected by many factors, including other experiences associated with the previous use of an individual service, opinions of other patients, individual needs resulting from the state of health, age or education level (5, 8, 10). Therefore, the following research problem was posed: What factors determine the level of mother satisfaction with care provided by midwives in a maternity-neonatal ward? The hypothesis adopted assumed: The level of mother satisfaction with care is determined by place of residence of women in childbirth, education level, parity, type of the last delivery.

MATERIAL AND METHODS

A standardized questionnaire form of the EURO-PEP group – an agency of Equip (European Working Group for the Matters of Quality in Family Medicine) was used for the evaluation of mother satisfaction with care provided by midwives in a maternity-neonatal ward (4, 7, 9). Selected criteria of care were adjusted to the specific character of midwife's tasks in a maternity-neonatal ward by the authors of the presented study.

The study was conducted in 2004, in maternity-neonatal wards at five hospitals in the Lublin Region of various referral levels. The study covered a total number of 221 mothers on the day of discharge from hospital. Participation in the study was voluntary and anonymous, and the respondents were selected at random. The results obtained were subject to descriptive and statistical analyses. The significance of differences between the respondents was examined by χ^2 test.

The age of females in the study remained within the range 17–45, mean age 28; 50.7% of respondents were urban inhabitants and the remaining 49.3% lived in rural areas. The majority of women in the study (73.8%) had secondary school or university education, whereas the remaining respondents (26.2%) – vocational or elementary education level.

Nearly half of the women (48.0%) were in childbirth for the first time, while for the remaining respondents (52.0%) the labour was a subsequent one. In the greatest number of women in the study (62.9%) their last delivery was spontaneous, whereas the remaining 37.1% underwent a Caesarean section.

RESULTS

The majority of mothers (75.1%) were satisfied with care provided by midwives employed in the maternity-neonatal ward, while the remaining women (24.9%) were dissatisfied. Table 1 presents the level of mother satisfaction with care according to place of residence and education level.

Table 1. Level of mother satisfaction with care and place of residence of women in the study and their education level

| Level of satisfaction with care | Place of residence | | | | Education level | | | |
|---------------------------------|--------------------|------|-------------------|------|--|------|---|------|
| | urban no = 112 | | rural no = 109 | | elementary or vocational no = 58 | | secondary school or university no = 163 | |
| | No | % | No | % | No | % | No | % |
| High No = 166 (75.1%) | 82 | 73.2 | 84 | 77.1 | 44 | 75.9 | 122 | 74.8 |
| Low No = 55 (24.9%) | 30 | 26.8 | 25 | 22.9 | 14 | 24.1 | 41 | 25.2 |
| Significance | p > 0.05 | | | | p > 0.05 | | | |

Based on statistical analysis of the data no significant relationship was observed between the level of mother satisfaction obtained and the place of residence of women in the study and their education level (in both cases $p > 0.05$).

In the subsequent section of the study an attempt was made to discover a relationship between the level of mother satisfaction with care and respondents' parity and type of delivery. The data concerning this issue are presented in Table 2. Statistical analysis showed no significant relationship between the level of mother satisfaction with care and the parity of females examined and type of the last delivery ($p > 0.05$).

Table 2. Level of mother satisfaction with care and parity of women in the study and type of last delivery

| Level of satisfaction with care | Parity | | | | Type of delivery | | | |
|---------------------------------|-----------------------|------|-----------------------|------|-------------------------|------|-------------------------------|------|
| | primipara no = 106 | | multipara no = 115 | | spontaneous no = 139 | | ccaesarean section no = 82 | |
| | No | % | No | % | No | % | No | % |
| High No = 166 (75.1%) | 77 | 72.6 | 89 | 77.4 | 108 | 77.7 | 58 | 70.7 |
| Low No = 55 (24.9%) | 29 | 27.4 | 26 | 22.6 | 31 | 22.3 | 24 | 29.3 |
| Significance | p > 0.05 | | | | p > 0.05 | | | |

DISCUSSION

The results of studies conducted by other authors in Poland and abroad show that the perception by patients of the services quality depends on their age and education level (cf. 5, 7). This was not confirmed by own studies carried out among women in childbirth. Therefore, the results obtained allow us to presume that the quality of care provided by nurses/midwives may affect mother satisfaction. This is justified by studies carried out by other researchers (2, cf. 6). Efficiency and

technical skills of a nurse/midwife, communication with patients, interest in their problems, being at patient's disposal, kindness, atmosphere among the staff, positively affect the receivers of services.

According to the situation, a patient may need an intensified education, empathy, or assistance in acquiring self-care skills (6). Although the analysis of the study material indicated lack of relationship between the type of the last delivery and level of mother satisfaction, this question, however, requires further and more comprehensive studies. Midwives tasks cover the planning and realization of obstetric care with the consideration of the clinical state of patients (3). On the other hand, the provision of physical and mental comfort while providing services is the effect of the quality of relations between medical staff and a patient.

CONCLUSIONS

1. Among the factors which determine mother satisfaction with care, place of residence and education level of women in the study had no significant effect on their satisfaction ($p>0.05$).

2. No significant relationship was observed between the level of mother satisfaction with care and their parity and type of the last delivery ($p>0.05$).

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SUMMARY

Health care reform forces the optimization of management. One of the determinants of effective management is winning over clients/patients by offering high quality services and the provision of satisfaction with the services received. This is possible provided a comprehensive recogni-

tion and analysis of the factors which may affect the satisfaction level. A research problem was posed: What factors determine the level of mother satisfaction with care provided by midwives in a maternity-neonatal ward? In order to evaluate the level of mother satisfaction with care provided by midwives in a maternity-neonatal ward a standardized questionnaire form was used by the EURO-PEP group (4, 7, 9). Selected criteria of care were adjusted by the authors of the presented study to the specific character of midwife's tasks in a maternity-neonatal ward. The study was conducted in 2004 in maternity-neonatal wards at five hospitals in the Lublin Region of various referral levels, and covered a total number of 221 mothers on the day of discharge from hospital. Participation in the study was voluntary and anonymous, and respondents were selected at random. The majority of mothers (75.1%) were satisfied with care provided by midwives working in a rooming-in system. The remaining respondents (24.9%) were dissatisfied. No significant relationship was observed between the level of mother satisfaction with care and their place of residence, education level, parity and type of the last delivery ($p>0.05$).

Czynniki wpływające na satysfakcję położnic z opieki świadczonej przez położne pracujące na oddziale położniczo-norodkowym. II

Przekształcanie opieki zdrowotnej wymusza optymalizację zarządzania. Jednym z determinantów efektywnego zarządzania jest pozyskiwanie klientów/pacjentów poprzez oferowanie wysokiej jakości świadczeń i zapewnienie satysfakcji z nabywanych usług. Jest to możliwe przy wnikliwym rozpoznawaniu i analizowaniu czynników, które mogą mieć wpływ na poziom satysfakcji. Sformułowano pytanie problemowe: Jakie czynniki determinują poziom satysfakcji położnic z opieki świadczonej przez położne oddziału położniczo-norodkowego? Do oceny poziomu satysfakcji położnic z opieki świadczonej przez położne oddziału położniczo-norodkowego zastosowano standaryzowany kwestionariusz grupy EUROPEP (4,7,9). Niektóre kryteria opieki zostały dostosowane przez autorów pracy do specyfiki zadań położnej na oddziale położniczo-norodkowym. Badania przeprowadzono w roku 2004 na oddziałach położniczo-norodkowych w pięciu szpitalach województwa lubelskiego, o różnym poziomie referencyjnym. Ogółem objęto nimi 221 położnic w dobie wypisu do domu. Udział w badaniach był dobrowolny i anonimowy, a dobór osób losowy. Większość (75,1%) położnic była usatysfakcjonowana z opieki świadczonej przez położne pracujące w systemie *rooming-in*. Pozostałe (24,9%) kobiety były niezadowolone. Poziom satysfakcji położnic z opieki okazał się istotnie niezależny ($p>0,05$) od ich miejsca zamieszkania, wykształcenia, jak też rodności kobiet i rodzaju ostatniego przebytego porodu.