



ASSESSMENT OF PATIENTS' SATISFACTION REGARDING QUALITY OF
NURSING CARE PROVIDED AT RWANDA MILITARY HOSPITAL

By
Chantal WAKAGANDA

A dissertation submitted in partial fulfillment of the requirements for the degree of
MASTER OF NURSING IN EDUCATION, LEADERSHIP, AND
MANAGEMENT

UNIVERSITY OF RWANDA
College of Medicine and Health Sciences

2017



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Supervisor: Mr. Gilbert BANAMWANA

JUNE 2017

DECLARATION

I, **Chantal WAKAGANDA**, hereby declare that this Dissertation is my own original work. To the best of my knowledge, it contains no materials previously published or written by another person, nor material which to a substantial extent has been accepted for the award of any other degree or diploma at the College of Medicine and Health Sciences or any other institution, except where due acknowledgment is made in the Dissertation. Any contribution made to the research by others, with whom I have worked at College of Medicine and Health Sciences or elsewhere is explicitly acknowledged in the Dissertation.

I also declare that the intellectual content of this Dissertation is the product of my own work, except to the extent that assistance from others in the Dissertation's design and conceptions or in style, presentation, and linguistic expression is acknowledged.

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ABSTRACT

Introduction: Patient satisfaction assessment is essential in obtaining a comprehensive understanding of the patient's need and their opinion of the service received. It is a fundamental tool in evaluating the quality of healthcare delivery service in hospital.

The aim of the study: This study aimed to assess patients' satisfaction with nursing care provided at Rwanda Military Hospital

Methodology: A descriptive survey was conducted in Gyneco-Obstetrics, Internal Medicine, and Surgical wards of Rwanda Military Hospital. The participants in this study were drawn from the patients who had been hospitalized in the above-mentioned wards. Cluster sampling technique was used. Data from participants was collected using a structured questionnaire to identify patient's emotions, feelings, and opinions involving personal and direct contact between interviewers and interviewees. Before data analysis, data was entered into SPSS and analyzed using both descriptive statistics and Pearson's product moment.

Results of the study: Of 104 Participants, 95, (91.3%) were interviewed. Overall, 47% of patients at Rwanda Military Hospital are satisfied with the quality of care received at Rwanda Military Hospital while 53% of patients presented the lower level of satisfaction. More than 71.5% of patients were satisfied with nurses' services in internal Medicine and in Obstetrics/Gynecology. Moreover, a particular attention is needed in surgical where patients are not satisfied with nurses' services in 9 out of 14 satisfaction factors studies in this research. Only patients were satisfied with how nurses welcomed patients (61.6%), how nurses answer to their questions (65%), how nurses treats patients in a very friendly And courteous manner (56.6%), how patients are satisfied with the nursing care their receive (56.6%) and how it is easy for patient to get nursing Care in an emergency (51.7%).There is a weak negative correlation between demographic characters and patients satisfaction factors.

Conclusion: Less than half of the participants at Rwanda Military Hospital are not satisfied with the quality of healthcare received while the remains of patients presented the lower level of satisfaction. There is need to address this problem by board managers, decision makers, planners, and other related agents to improve patients' satisfaction at Rwanda Military Hospital and improve the status of health care delivery services.

Key terms: Nursing care, Patient' satisfaction.

DEDICATION

First and foremost, I dedicate this work to the Almighty God by whose will, mercy and love I continue to be alive.

I am also dedicating this work to my beloved husband for his immeasurable love, care, advice and financial support. He did all he could to get me where I am today.

I further dedicate this work to my beloved children for their love, encouragement, and support. They are always praying for my successful.

I also dedicate this work to my beloved grandmother and aunt for their love, care, and support. Lastly, I dedicate this work to brothers, sisters, and friends for their care.

ACKNOWLEDGEMENT

This work is a result of joint efforts from different people. I wish at this point to thank Mr. Gilbert BANAMWANA who has been a wonderful supervisor and Dr. Olivia BAHEMUKA co-Supervisor through their continuous encouragement and toughness I have been able to accomplish what I set out to achieve in the first place. For this, I am grateful for his patience and time which have seen me through up to this step.

I would also want to take this opportunity to thank all the lecturers of College of Medicine and Health Sciences who saw me through this course empowering me with knowledge and skills. Many thanks also go to all staff of College of Medicine and Health Sciences and Rwanda Military Hospital for their kindness and notable services they have offered during my studies. Further, still, special thanks go to all my colleagues and others who supported me in different ways.

May God bless all of you

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LIST OF SYMBOLS AND ACRONYMS

CAHPS: Customer Assessment Health Plans

COHSASA: Council for Health Service Accreditation of Southern Africa

OB-Gyn: Obstetrics/Gynecology

RMH: Rwanda Military Hospital

SPSS: Statistical Package for the Social Science

PSQ: Patient Satisfaction Questionnaire

USA: United state of America

UR/CMHS: University of Rwanda/ College of Medicine, Health and Science

CHAPTER ONE: INTRODUCTION

1.1 Introduction

In this study, the chapter one will focus on the introduction of the study with reference to the disruption of the background of patient satisfaction with nursing care provided at Health care settings all over the world. Problem statement will be illustrated to provide the reader with sufficient information to understand the problem in detail. Then, the objectives and the research questions will be state and will conclude with the significant of the study.

1.2 Background to the study

Patient's satisfaction refers to patients' general appreciation and understanding of the quality of provided health care service Ziapoor et al (2016). In the same views, (Mohan and Sai Kumar,2011) regarded patient satisfaction as patients' perceptions of healthcare services they received. Concurrently,Shinde and Kapurkar (2014) defined patient's satisfaction as a patient's feeling of pleasure or disappointment resulting from the service outcome compared with their expectation.

Patients' satisfaction within the hospital is merely related to the evaluation of nursing care received from admission to discharge. In this evaluation, a patient makes his/her own assessment of health care services such as a hospital environment, access services, the admissions procedure, personnel services, room, and the discharge process Powell (2001). According to (Shinde and Kapurkar ,2014), patient's satisfaction is essential to understand the need of the patient.

In the worldwide countries, several types of research on patient' satisfaction have been conducted in different areas of the world and highlighted different determinants of patient satisfaction and the contribution of patient satisfaction in improving the quality of health care services. In the USA, Kutney-lee et al (2010) in his study revealed that the nurse working environment affects patient satisfaction. In his study, statistics shown that patient satisfaction depends on the nursing working environment. In hospitals with better nurse working environments, 69.9 % of patients were satisfied with nursing care service than those cared for in hospitals with poor environments 59.6%. From this research, the level of patient satisfaction depends on the nursing working environment which is better or poor.

The study done by Shinde and Kapurkar (2014) in India found the moderate level of patient satisfaction with nursing care service in obstetrics/gynecology and medicine 65% and in surgery 64%. This level of satisfaction was influenced by their age group. Thus means that satisfaction is mainly influenced by socio-demographic factors including age, gender, a level of education, etc.

In the study carried out in Chinese hospital on exploring patients' perceptions of quality nursing care, the researcher pointed out that managers could develop strategies for improving nursing care in psychological support and in nurse's sense of humor where patients had lower quality nursing care 2.51%. This means that nurses perform their nursing duties in a careful and meticulous manner but do not include jokes in their interactions with patients (Zhao & Akkadechanunt, 2011).

In the study carried out by Legesse, Salgado, and Walle, (2016) in Ethiopia, it is shown that the overall satisfaction level of the patients with nursing care was 47%. This percentage showed the lower level of patient satisfaction with the inpatient nursing care they received. Therefore, the researcher recommends that the hospital's managers should frequently assess its patients' satisfaction status and provide training to its nurses in order to improve their skills for enhancing patients' satisfaction.

On the other hand the research conducted by Ahmed et al (2014) in the same country shown that 52.75% of patients were satisfied with the nursing care service considering associated factors such as nursing characteristics, the caring activities, the amount of information given and the entire caring environment, previous history of admission, patients' income level, and type of admission rooms. From this, the researcher concluded by recommending the authorities to take into consideration the working environment for making patients more satisfied and consequently improving the quality of hospital care.

The literature highlights other determinants of patient satisfaction with health care system (Naseer, Zahidie and Shaikh, 2012) identified three categories of patient expectations which could influence patient satisfaction: background, interaction, and expectations. This study showed the higher level of satisfaction for a patient with fewer expectations. Naseer et al (2012) also have shown the importance of responsiveness of the health care setting in patient satisfaction. According to (Meek, 2010), health care worker attitudes, manners, and services encountered during patients' experiences have an impact on patient satisfaction.

From these studies carried out, assessment of patient satisfaction is seen as a key indicator of the success of the health care settings and remains the most important issue in hospitals since patients

expect higher standards of care and services (Muraleeswaran& Thenuka,2016), (Grøndahl,2012 and Powell,2001).

Although several authors demonstrated positive results of the assessment of patient satisfaction as a tool toward the quality of care, it is still a big issue in Rwandan hospitals to have a general understanding of the quality of provided health care service from the patient's opinions(Anatole et al.,2013). Initial results demonstrate improvements in health care performance in Rwandan health care settings. The focus has been put on the reliable staff, disease prevention, and health promotion, etc Anatole et al (2013). There is still a gap in the area of research about the patient satisfaction with health care service.

RwandaMinistry of healthis committed to improving the quality of services by appreciating any comment from a client; either complimentary or critical. It wishes that the services of Health facilities might be customer focused and should strive to meet customer needs and exceed customer expectation in a provision of care (Ministry of Health,2010). Through this Government commitment to improve the quality of services in Rwanda health facilities, it is an advantage to the Rwanda Military Hospital to have the patients' satisfaction indicators with nursing care services. Thus conducting this study at Rwanda Military Hospital is potential to Rwandan healthcare system

1.3 Problem statement

Patient satisfaction is a key criterion by which the quality of health care services is evaluated. According to Shinde & Kapurkar(2014)patient satisfactionin health care system is important for several reasons because satisfied patients are more likely to maintain a consistent relationship with a specific provider whereas unsatisfied patient are likely to interrupt any contact with the hospital. Consequently, low patient satisfaction leads to poor compliance with treatment and end up with poor health outcome (Shinde& Kapurkar,2014).

The study conducted by Qadri et al (2012) showed that 80.9%, 79.3%, 70.9% and 56.8% of the patients were satisfied with information and support, organization of care, availability of general basic facilities and doctor-patient relationship respectively. Additionally Woldeyohanes et al (2015) in his study revealed that the overall satisfaction of patients admitted in the hospital was67.2%.

In Rwanda A study done at University Teaching Hospital of Kigali in 2015, revealed that almost the patients 96.87% were not included in the treatment plan decision making (Ntirenganya et al., 2015).

Hence, this is a key element of patient dissatisfaction. Informally, during my clinical experience at Rwanda military hospital the patients used to complain regarding the nursing care delivery. Despite the above statistics regarding the patient dissatisfaction at some hospitals, still there are the limited data at other healthcare settings in Rwanda. Yet, the patient satisfaction at Rwanda Military Hospital was not well explored to get published data. Therefore, this study aimed at assessing the level of patients' satisfaction and different factors that may contribute to the level of satisfaction of patient with nursing care services at Rwanda Military Hospital.

1.4 The aim of the study

The aim of this research is to assess the patients' satisfaction with nursing care provided at Rwanda Military Hospital.

1.5 Research Objectives

1.5.1 Specific Objectives

1. To assess the level of patients 'satisfaction with nursing care services
2. To determine the association between demographic characters' and patient satisfaction

1.6 Research questions

The research will answer two questions:

1. What is the level of patients satisfaction with nursing services provided at Rwanda Military Hospital?
2. What is the association between demographic characters' and patient satisfaction factors at Rwanda Military Hospital?

1.7 Significance of the Study

Patient's satisfaction and good nursing care are the indicators of health care services at health care system. Therefore, it is in that aspect that the researcher is interested in assessing the patient's satisfaction with nursing care with the purpose of identifying the area of dissatisfaction and the gaps in nursing care delivery within Rwanda Military Hospital.

The findings of this research will contribute to improve the status of health care delivery services at Rwanda Military Hospital and should assist other hospitals to move forward in better nursing care practice. Moreover, the study should serve as a good reference to improve nursing research and contribute to the existing nursing literature, mainly in the areas of nursing care. This study will add greatly to the existing nursing education by revisiting the curriculum to identify its dynamics mainly in teaching and learning methods which might be patient centered. The strengths and weaknesses of a curriculum can be analyzed making this study a framework of reference. The nursing administration should also establish mechanisms to empower nursing staff to provide a better service with reference to patient feedback.

1.8 Conclusion of the Chapter

In this chapter, the background of study has been described in order to have an overview on patient satisfaction in nursing services. The problem statement have been evocated to indicating how patient satisfaction is an issue all over the world and what is the situation of patient satisfaction in Rwanda. Then the research questions related to those objectives have been discussed. At the end, the significant of the study have been discussed to show relevant of this study.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This chapter will focus on the review of literature related to patient satisfaction with nursing services with the interest on the concept of nursing care, nursing care, and patient satisfaction. Determinants of nursing care will be reviewed and the factors influencing patient satisfaction will be identified and some instruments to measure patient satisfaction will be explored in order to be able to choose the one which will be used in this study. Available researches relating to the patient satisfaction with nursing services will be consulted as references to guide this study.

2.2 Theoretical literature

2.2.1 The concept of patient satisfaction

According to (Iftikhar et al.2011) and (Schoenfelder, Klewer, and Kugler ,2011), patient satisfaction combines different aspects. Different authors defined patient satisfaction in different ways(Iftikhar et al.2011) defined patient satisfaction putting Emphasis on attitudes and perceptions of patients towards health services. In other words, it is the level to which patient perceives the effectiveness of health care service. WhileMohan&Sai Kumar (2011) evoke the concept of patients' emotions and feelings of healthcare services delivered.

Shinde and Kapurkar (2014) define patient's satisfaction as a patient's disappointment resulting from the health care service's outcome in relation to his or her expectations. For Schoenfelder et al. (2011), patient satisfaction is described as a patient's reaction to different aspects of his/her health care service experience. On the other hand, in defining patient satisfaction, Al-Abri & Al-Balushi (2014), and Iftikhar et al (2011) brought the idea of the degree of congruence between patient expectations of ideal care and their perceptions of real care received during a treatment process.

Considering these different aspects, patient satisfaction is helpful to understand the need of the patient. It is considered as a crucial instrument to evaluate the effectiveness of health care services delivery. Then, collecting the information on patient's satisfaction with health care services could contribute to the identification of the gaps in health care services and to the development of successful mechanisms to improve health care services Al-Abri& Al-Balushi (2014)

2.2.2 Nursing Care and patient satisfaction

From the study conducted by Jilisa (2014) nursing care services is essential in a health care setting as the nursing staff comprises the majority of hospital staff. They play a critical role in patient satisfaction and they spend more time in day-to-day activities of the unit rather than physicians. Then, according to this author, patients have the right to expect from them the best services.

2.2.3 Determinants of patient satisfaction

Some patients should not be satisfied with some aspect of health care service they receive. They should account some challenges such as their experience within a hospital environment, access services, the admissions procedure, nurses and other personnel services, the services they receive in their rooms and other services before they leave the hospital Powell(2001). From this study, it is found that the level of patient's satisfaction with nursing services ranged from 1.95 to 2.64 n a 5 point scale and overall satisfaction with physician services was 2.41 on a 5 point scale.

Naseer, Zahidie and Shaikh (2012) summarized these aspects in three indicators to measure patient satisfaction. These indicators are structure, process, and outcome. Structure indicators are composed by medical and nonmedical determinants. Medical determinants are based on health care system (doctors and paramedic staff, training and equipment). Nonmedical Determinants are composed by physical infrastructure. Process indicators according to Naseer et al (2012) refer to the activities of health care staff in their treatment, and outcome indicators refer to the consequences that might happen.

Naseer et al (2012) and Rodrigues et al (2012) evocated other main determinants of patient satisfaction which are interrelated and interconnected with each other. These determinants are patient expectations when admitted to the hospital, perceptions of the care they receive at the hospital, and patient experiences with health care system. These domains are and can simultaneously affect patient satisfaction.

According to Naseer et al (2012), with patient's expectations determinants, the patient compares his/her own experience of health care with his/her expectations to measure his/her satisfaction. The authors differentiate three categories of patient expectations: background expectations which result from the treatment processes. Interaction expectations which refer to patient expectation on intercommunication between patient and health care staff. Lastly, action expectation which is about the doctor's activities such prescribing, referral or advice from a doctor.

From the survey conducted by Karachi and Vadhana (2012), patients with lesser expectations usually have higher satisfaction rates. From the literature, these expectations are influenced by patient characteristics (age groups, gender, standards of living and marital status and psychosocial determinants Naseer et al (2012), Vadhana (2012). According to Afzal et al (2014), Naseer et al. (2012), Zahidie&Shaikh,(2012), a higher level of education is associated with lower level of patient satisfaction. Female tend to be lesser satisfied compared to males. Educated patients are more satisfied than the no educated patient. The low social class was found to be more satisfied with the treatment provided as compared to people from higher social class.

According to Naseer et al (2012) and Iftikhar et al (2011), patient perceptions are influenced by the socio-cultural background of patients (beliefs, attitudes, and level of understanding). To perform his activities in health care setting, the doctor has to understand expectations and social context of the illness of his client.

The nurse- patient relationship has been also highlighted by Catherine (2004) as a fundamental component of nursing care services. In her study, patients reported that nurses did not communicate in a patient-centered way which is an essential component of nursing care and contribute to the development of the positive nurse-patient relationship. This view is supported by (Casey and Wallis 2011). From this, it is shown that nursing staff should make effort to maintain effective communication with patients. It may be concluded that responsiveness of the health care system is a crucial aspect of achieving nursing care satisfaction.

2.2.4 Measurement of patient satisfaction

According to Al-Abri & Al-Balushi (2014). Assessing patient satisfaction with health care is a tool establishes the mechanisms to improve the health care services. The authors differentiate two approaches for evaluating patient satisfaction: qualitative and quantitative. Linda (2002) stated that consistent questionnaires (either self-reported or interviewer-administrated or by telephone) are the most common assessment tool for conducting patient satisfaction studies. According to (Al- Abri and Al- Bulushi 2014), there are two standardized, reliable and valid instruments for measuring patient satisfaction such as patient satisfaction questionnaires (PSQ-18) and customer assessment health plans (CAHPS).

2.3 Empirical literature

Numerous studies on assessing patient 'satisfaction on health care delivery were reviewed to understand the concept of patient satisfaction.

The study carried out in the USA on patient satisfaction with nursing care their receive in deferent working environment, Kutney-lee et al (2010) found that in better working environment, 69.9% of patients are satisfied with nursing care services their receive while in poor environment only 59.6% of patients were satisfied with nursing care they receive. It has been concluded that the environment can impact on patient satisfaction according to how it is better or poor.

In India, Shinde and Kapurkar (2014) in their study (65%of patients in obstetrics/gynecology and medicine were satisfied, while in surgery, 64% of patient was satisfied). The same results have been shown in the study conducted by Zhao &Akkadechanunt 2011) in Chinese where patients presented the lower level of satisfaction with nursing care (2.51%) when patient do not receivean honest and humorous nurses 'response.

The study done in Germany has revealed that the kindness of nurses, quality of food and accommodation, discharge procedures contribute enormously to patient satisfaction in Germany Schoenfelder et al (2011). The findings suggest that measuring patients 'satisfaction is more important to improve nursing services.In the study carried out by Legesse, Salgado, and Walle (2016) in Ethiopia, it is shown that the overall satisfaction level of the patients with nursing care was 47%. The research carried out in Chinese hospital on exploring patients' perceptions of quality nursing care, patients demonstrated lower level of satisfaction (2.51%).This means that nurses perform their nursing duties in a careful and meticulous manner but do not include jokes in their interactions with patients (Zhao &Akkadechanunt 2011).

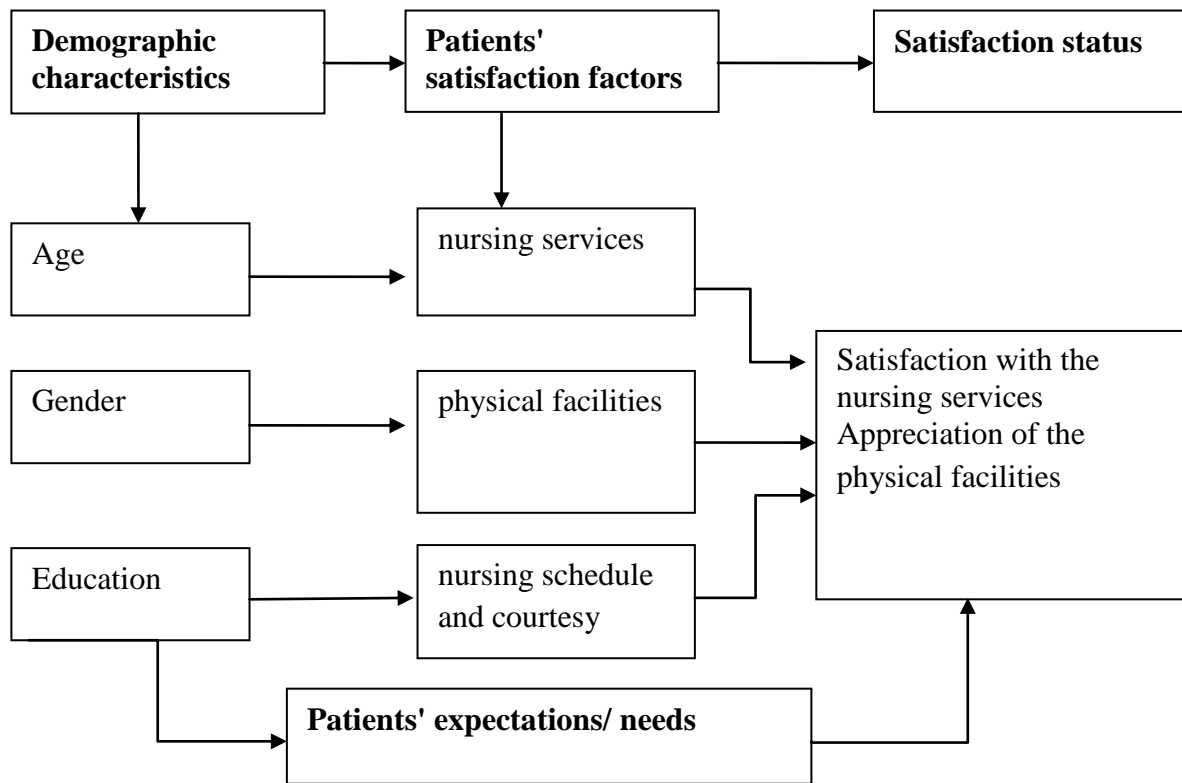
On the other hand, Tarus et al (2014) shown that the time a patient spends in the hospital was significantly associated with patients 'satisfaction with care given. The findings from the research done by Schoenfelder et al (2011) indicate that some aspects of the hospital do not contribute to the patient satisfaction. It is suggested that patients' perceptions of care are more important determinants of the totality of patient satisfaction with the health care services. Assessment of patients' satisfaction with nursing care within referral and teaching hospital is a legitimate indicator of improving the services and strategic goals for all healthcare organizations.

2.4 Critical review and research gap identification

From the literature, it is shown by different studies done all over the world that patient feedbacks on the services they receive contribute to the quality of services. These studies carried out are seen as a key indicator of the success of the health care settings and remains the most important issue in hospitals since patients expect higher standards of care and services (Muraleeswaran & Thenuka 2016, Grøndahl, 2012 and Powell, 2001). In general, all those findings helped to evaluate the services from the patient's point of view and facilitate the identification of problem areas and help to generate ideas towards resolving these problems.

Although several authors demonstrated positive results of the assessment of patient satisfaction as a tool toward the quality of care, it is still a big issue in Rwandan hospitals to have a general understanding on the quality of provided health care service from the patient's opinions (Anatole et al., 2013). Rwanda Ministry of health tried to improve the quality of services by appreciating any comment from a client; either complimentary or critical (Ministry of Health 2010). The focus has been put on the reliable staff, disease prevention, and health promotion, etc (Anatole et al., 2013). There is still a gap in the area of research about the patient satisfaction with Rwanda health care service. Through this, it is potential to Rwandan healthcare system to have the patients' feedback on their satisfaction with nursing care services in order to improve the quality of services.

2.5 Conceptual framework



The conceptual Framework above is generated from the literature review, and attempts to explain the relationship that may exist between the demographic characteristics and patients' satisfaction factors that all put together, create an impact on patients' satisfaction. Considering all the variables mentioned, it is the patients' satisfaction assessment that was of the primary interest for this study. Therefore, the study would establish whether patients attending RMH are satisfied with nursing services, and if there is an association between demographic characteristics and patients' satisfaction.

Conclusion of the Chapter

In this chapter, the literature related to patient satisfaction with nursing services has been reviewed. Determinants of patients satisfaction such as hospital environment, access services, the admissions procedure, nurses and other personnel services, have been identified and several elements that affect and influence patient satisfaction such as age, gender, and income and education level have been discussed. To incorporate this element into daily nursing practice at the hospital, nurse's staff has to consider the whole component of health care environment in order to improve the quality of services they provide.

CHAPTER THREE: METHODOLOGY

3.1 Introduction

This chapter describes the methodology which has been used in this research. The purpose of this study was to assess the patients' satisfaction with nursing care provided at Rwanda Military Hospital. First, the research described the type of research design, the population and sample, the instrument, and the procedures which have been used for the study. Second, the data analysis section has been defined and described and the statistical analysis process has been followed. Finally, reliability and validity of the instruments have been discussed and the ethical considerations and the research limitations of the project have been considered.

3.2 Research design

The study employed a descriptive quantitative study design to describe the level of patient's satisfaction with nursing care and also to describe any association between demographic characters and patient satisfaction. The patients' perspectives on the nursing care they received focusing on patient- nurse's interaction have been the focus. Hence, findings were analyzed using statistical procedures and discussed in relation to existing knowledge with the aim of the study.

3.3 Research Approach

The quantitative approach has been followed for the purposes of this research. According to this approach, the researcher began with gathering quantitative data which have been used to produce conclusions drawn from those data. Structured questions like a questionnaire have been used to provide numerical data that have been explored statistically.

3.4 Research setting

Rwanda Military Hospital (RMH) has been chosen as research site in this study. This hospital is chosen because is one of referral and teaching hospitals in Rwanda with the mission of providing quality tertiary healthcare to the general population and military personnel. Data have been conducted from 3 wards at Rwanda Military Hospital: Gyneco-Obstetrics, Internal Medicine, and

Surgical wards. This design is aimed to find out the level of patient' satisfaction and its significant relationships with patient demographic characters'.

3.5 Population

The subjects in this research have been drawn from the patients who have been hospitalized in the above-mentioned wards at Rwanda Military Hospital and had the equal opportunity to participate in this study. The Gyneco-Obstetrics, Internal Medicine, and Surgical wards had been chosen to be part of the study.

3.5.1 Inclusion criteria

- The patients from Gyneco-Obstetrics, Internal Medicine, Surgical and wards
Whose age group was between 18 years and 65 years old.
- The patients who consented to participate in the research.
- The patients who have been hospitalized at least in 48 hours
- The patients without mental disorders

3.5.2 Exclusion criteria

- Patients who had mental problem
- Patients who were under 18 years
- Patients who needed emergency care.

3.6 Sampling

A subset of the population has been gathered in order to make an inference that can be generalized to the population.

3.6.1 Sampling strategy

In this study, cluster sampling technique has been used and clusters are locations within which patients are hospitalized. Rwanda Military Hospital offers a varied range of specialized services divided into different groups, according to their location. Gyneco-Obstetrics, Internal Medicine, and Surgical wards have been selected and subsamples have been randomly selected from each ward.

3.6.2 Sample size

Targeted samples have been drawn from the patients who were hospitalized in Gyneco-obstetrics, internal medicine, and surgical wards. At the time of the study, Gyneco-obstetrics ward counts 25 beds, internal medicine counts 31 beds, surgical counts 85 beds

Therefore, as cited by Mawoli and Babandako (2011), Guilford and Flruchter(1973)'s formula have been used to determine the sample size(n) in each ward.

$$n = \frac{N}{1 + (\alpha^2 N)}$$

In this formula: N = size of population; and α = alpha (0.05).

$$n = \frac{141}{1 + (0.05^2)(141)}$$

$$n = \frac{141}{1 + (0.0025)(141)}$$

$$n = \frac{141}{1 + 0352}$$

$$n = \frac{141}{1.35}$$

$$n = 104.4$$

$$n \approx 104$$

The formula yielded 104 samples, which represented 73.7% of the population. Specifically, 73.7% of the population has been proportionately selected from each ward. Therefore, below is the sampling plan as dictated by the formula.

Table 1: Targeted population and sample size

Category of respondents	Total number of patients	Sample size (as per the formula)
Patients in Gyneco-Obstetrics ward	25	18
Patients in Internal Medicine ward	31	23
Patients in Surgical Ward	85	63
Total	141	104

3.7 Data Collection

3.7.1. Data Collection Instruments

For the purposes of this research, structured questionnaire has been used to identify patient's emotions, feelings, and opinions involving personal and direct contact between interviewers and interviewees. The interview guide has been composed by a structured questionnaire, prepared with the inspiration of the Patient satisfaction questionnaire (Hays, 1994)

The questionnaire has been developed from other validated questionnaires used in other studies depending on this study objective. In order to remove the barrier of the language issue, the questionnaire was translated in Kinyarwanda and English.

3.7.2. Data collection procedure

The first step in data collection process was to identify the opportunities for collecting data.

The researcher first met the patients to help them to understand the purpose of the study and to commit their participation in the research. The discussions took place in the planned office and lasted approximately 20 to 25 minutes.

Data have been collected during working hours through structured interview using a questionnaire which was planned in advance. The respondents described their personal opinions about nursing care services they receive. Respondents were free to express their views and the record has been made.

3.7.3 Validity and reliability of research instrument

Validity of Instrument

The validity of the instruments has been established using the both construct and content validity tests. Construct validity has been established through the help of experienced lecturers who scrutinized the research tools where indeed some worthy amendments have been done, especially in the relevancy of the tools to my study objectives. Content validity has been established through carrying out pre-testing measures, where a few selected students (5) with experience in the questionnaire contributed.

Reliability of the instrument

The instrument has been pre-tested by using the pilot method where interview guide has been carried out on 8 patients from each ward included in this study. Then data have been analyzed using the Cronbach's Alpha to determine the internal consistency or average correlation of items. Item statistics have been computed and satisfactory reliability established as presented below.

Table 2: **Reliability Statistics**

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.955	.948	30

Since the computed value was 0.955, yet the level of satisfactory reliability is often above 0.80, as suggested by Ary et al. (2010), the instruments were found reliable for data collection.

3.8 Data analysis

Statistical analysis has been used to summarize and describe quantitative data to answer the research questions. For this study, data from the structured questionnaire have been entered into SPSS version 21.0 and analyzed using both descriptive statistics and The Pearson Product Moment. The descriptive statistics to use frequencies and percentage. Correlation Coefficient has been the inferential statistical instrument.

3.9 Data management

Concerning this study, the researcher wrote up detailed notes of the interviewees as soon as possible after the interview has been conducted. All data have been stored in a closed cupboard and protected from all damage.

3.10 Data Dissemination

In this study, the report will be submitted to UR-CMHS library and to Rwanda Military Hospital. The author also is planning to publish this work in journals.

3.11 Limitations and challenges

- The study has been conducted in one referral hospital located in the city whereas there is no other similar studies took place in other provincial referral hospitals for references and comparison.
- The constraint of time and financial barriers were a major source of limitation to RMH. The results have not been inferred to members from other provincial referral hospitals due that this study has been done in RMH only.

3.12 Ethical considerations

Ethical clearance has been sought from UR/CMHS (in the appendix). This ethical clearance has been presented to the Commander of Rwanda Military Hospital, for requesting the permission to collect data within a hospital(in the appendix).

Patients signed a consent form (in the appendix) to commit their participation in the research. Next, to this, patients have been informed about the objectives of the study and have been guaranteed the confidentiality and privacy of their answers and have been protected during the conduction of the research

Conclusion of the Chapter

The third chapter of this research concerned the research methodology. Research design and research setting have been discussed. Then the population which will be studied in this research have been described and sampling strategies and sample size have been determined. After that, Data collection and data analysis instruments and tools have been identified; Validity and reliability of this instrument have been explained. At the end, the limitation of this study has been discussed.

CHAPTER FOUR: RESEARCH FINDINGS AND DISCUSSIONS

4.0 Introduction

This study assessed patients satisfaction with nursing care provided at Rwanda Military Hospital in Gynecology-obstetrics, internal medicine, and surgical wards focusing on nurses' services, physical facilities, working schedule as well as nurse's courtesy. That relationship between demographic characters and patient satisfaction factor will be assessed. That data collected will be analyzed and discussed based on the literature and guided by the research objectives. Lastly, conclusion and recommendations will be addressed to relevant authorities.

However, due to inconsistency in getting back the questionnaires, the realized number of respondents was 95. The total number of respondents was 104, this implied 91.3% of the total sample (104). Since the percentage of returns was higher than a more reasonable expectation between 40 to 75 percent returns Ary et al(2010), the researcher went ahead to use the respondent's number for analysis. A detailed summary of respondents' demographic profile is presented in the table.

Table 3: Distribution of patients according to frequency and percentage of demographic variable

		Surgical		Gynecology		Internal Medicine	
	18-29 year old	Frequency	19	4	6		
		%	31.7%	28.6%	28.6%		
	30-41 year old	Frequency	27	7	10		
		%	45.0%	50.0%	47.6%		
	42-53 year old	Frequency	14	3	5		
		%	23.3%	21.4%	23.8%		
	54-65 year old	Frequency	0	0	0		
		%	0%	0%	0%		
Total		Frequency	60	14	21		
		%	100.0%	100.0%	100.0%		
Gender	Male	Frequency	20	4	0		
		%	33.3%	28.6%	.0%		
	Female	Frequency	40	10	21		
		%	66.7%	71.4%	100.0%		
Total		Frequency	60	14	21		
		%	100.0%	100.0%	100.0%		
Education	Illiterate	Frequency	5	2	6		
		%	8.3%	14.3%	28.6%		
	Primary	Frequency	20	5	11		
		%	33.3%	35.7%	52.4%		
	Secondary	Frequency	29	4	3		
		%	48.3%	28.6%	14.3%		
	University	Frequency	6	3	1		
		%	10.0%	21.4%	4.8%		
Total		Frequency	60	14	21		
		%	100.0%	100.0%	100.0%		

The data presented in the table below shows that the majority of patients in Surgical, Gyneco and internal medicine were in the age group of 18-29 years with 31.7%, 28.6% and 28.6% respectively. In general, the age represents the mean=2.27. Male represent 33.3%, 28.6%, and 0% in surgical, Internal Medicine, Gynecology, and respectively while Female represents 66.7%, 71.4%, and 100% in Surgical, Internal Medicine and Gynecology respectively. Gender represent the mean=1/69. According to the level of education, most of the participants in this study 91.6%, 71.5% were educated up to university level in surgical and Internal Medicine unity respectively. In Gynecology 64.3% were educated up to secondary level, 21.4% were educated up to university level. Education level represent the mean=2.58

4.2 Presentation of findings

The study sought to answer the following research questions:

1. What is the level of patients satisfied with nursing services provided at Rwanda Military Hospital?
2. What is the association between demographic characters and patient satisfaction factors at Rwanda Military Hospital?

These findings are presented through the description and interpretation of themes and sub-themes related to the objectives of the study. The first objective of the study was to assess the level of patients 'satisfaction with nursing care provided at Rwanda Military Hospital focusing on nurse's services and sensitivity, physical facilities, hospital environment and working schedule. Descriptive statistics like percentages and frequency distributions were carried out to explore socio-demographic characteristics.

4.2.1 Patients' satisfaction with nurses 'services

This theme has been discussed under fourteen indicators which have been selected to measure at which level Rwanda Military Hospital patients are satisfied with nurses' services provided to them. With reference to each indicator, responses are given on a 5-point scales ranging from strongly agree to strongly disagree. The lower the number the better (completely satisfied = 1 and completely dissatisfied = 5). A descriptive statistics computation was done to obtain the frequency of the patients' responses to the questions in patient satisfaction section as displayed in number and percentage. The following is a summary of the findings for each indicator of patient satisfaction at RMH at the time of doing this study.

SATISFACTION WITH NURSES' SERVICES IN OBSTETRIC-GYNECOLOGY

Table 4: **Frequency and percentage distribution according to how patients are satisfied with nurses' services (n=14)**

Patient satisfaction factors	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nurses welcomed you with respect	3	14.3	14	66.7	1	4.8	0	0.0	3	14.3
Nurses answer to your questions gently	1	4.8	15	71.4	4	19.0	1	4.8	0	0.0
Nurses answer prepare you for the consultation	6	28.6	11	52.4	2	9.5	1	4.8	1	4.8
Nurses were punctual and reachable	1	4.8	8	38.1	8	38.1	2	9.5	2	9.5
Regular presence of nurses	1	4.8	15	71.4	3	14.3	0	0.0	2	9.5
Ease of coming back to visit on the same day	1	4.8	14	66.7	4	19.0	2	9.5	0	0.0
When I get nursing care, people have to wait a long time for emergency treatment	13	61.9	1	4.8	3	14.3	3	14.3	1	4.8
Nurses sometimes ignore what I tell them	7	33.3	5	23.8	8	38.1	1	4.8	0	0.0
The nurse treats me in a very friendly And courteous manner	1	4.8	16	76.2	3	14.3	1	4.8	0	0.0
The nurse usually spends plenty of time with me	4	19.0	13	61.9	1	4.8	3	14.3	0	0.0
I am very satisfied with the nursing care I receive	2	9.5	13	61.9	4	19.0	2	9.5	0	0.0
It is easy for me to get Nursing Care in an emergency	3	14.3	14	66.7	1	4.8	2	9.5	1	4.8
I am usually kept waiting for a long time When I am at the nursing's office	2	9.5	12	57.1	4	19.0	3	14.3	0	0.0
The nurses who treat me should give More respect	1	4.8	10	47.6	5	23.8	3	14.3	2	9.5

With how patients are satisfied with nurses' services they received in Obstetrics/Gynecology, 90% of the patient is satisfied with how nurses welcomed them. 76.2% of patients agree with how nurses

answer to their questions, 81% of patients are satisfied with how nurses' answers prepare them for the consultation. Only 42.9% patients are satisfied with the punctuality and availability of nurses. 76.2% of patients are satisfied with the regularity and presence of nurses. 71.5% agreed that it is easy for nurses to come back to visit the patient on the same day. Concerning to the waiting time for emergency treatment 66.7% of the waiting time for emergency treatment. 57.1% agree how nurses consider what they tell them. 90% of patients agree with how nurse treats patients in a very friendly and courteous manner. 80.9% agree with the time nurses spend with them. 71.4% agree with the nursing care they receive. 90% of patients are satisfied with how it is easy to get nursing care in an emergency. 66.6% of patients agreed with how it is easy to get nursing care in an emergency. And 66.6% agree with how patients were satisfied with the waiting time in the nursing's office. 52.3% agreed that nurses treat patients with more respect.

SATISFACTION WITH PHYSICAL FACILITIES

Table 5: **Frequency and percentage distribution according to how patients are satisfied with physical facilities at RMH**

Satisfaction factors	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nursing room's location is easy to find	3	14.3	10	47.6	2	9.5	4	19.0	2	9.5
Nursing room is clean and tidy	2	9.5	1	4.8	11	52.4	7	33.3	0	0.0
There are enough waiting for chairs in the waiting room	6	28.6	5	23.8	3	14.3	4	19.0	3	14.3
There is a clean restroom in the waiting area	0	0.0	12	57.1	1	4.8	5	23.8	3	14.3
The room is spacious, bright, and airy	0	0.0	12	57.1	2	9.5	4	19.0	3	14.3

Source: Researcher, 2017

According to how patients are satisfied with physical facilities in Gynecology/Obstetric, 61.9% agreed with how nursing room's location is easy to find, while only 14.3% agreed with how the nursing room is clean and tidy. Concerning how patients are satisfied with the number of chairs in the waiting room, 52.3% of patients agreed and 57.1% of patients agree with how the restroom in the

waiting area is cleaned. While 57.1% of patients are satisfied with how the room is spacious, bright, and airy.

SATISFACTION WITH WORKING SCHEDULE AND COURTESY

Table 6: Frequency and percentage distribution according to how patients are satisfied with nurses' working schedule and courtesy at RMH

Satisfaction factors	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nurses 'working shift was easy for you	0	0.0	10	47.6	4	19.0	4	19.0	3	14.3
Nurses were available when required	7	33.3	6	28.6	1	4.8	6	28.6	1	4.8
The attitude and respect of nurses	0	0.0	9	42.9	5	23.8	5	23.8	2	9.5
Language used by nurses	6	28.6	6	28.6	3	14.3	5	23.8	1	4.8
Friendly manners and attentiveness of nurses	1	4.8	7	33.3	6	28.6	6	28.6	1	4.8
Nurses' communication skills	0	0.0	10	47.6	6	28.6	3	14.3	2	9.5
Confidentiality of the patient records	2	9.5	11	52.4	1	4.8	6	28.6	1	4.8

With reference to how patients are satisfied with working schedule and courtesy in Gynecology/Obstetric, less than a half of patients (47.6%) agreed while 23% are uncertain and 33.3% disagree with how working shift was easy for the patient. 62.2% agreed that nurses were available for them, and only 28.6% agreed with the attitude and respect of nurses. 57.2% of patients were satisfied with nurses' language and 39.2% Of patients agreed with friendly manners and attentiveness of nurses, 47.6% agreed with nurses communication and, 61.9% are satisfied with the confidentiality of patients' record.

1.INTERNAL MEDICINE

Table 7:Frequency and percentage distribution according to how patients are satisfied with nurses' services(n=21)

	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nurses welcomed you with respect	3	21.4	7	50.0	0	0.0	0	0.0	4	28.6
Nurses answer to your questions gently	1	7.1	7	50.0	3	21.4	0	0.0	3	21.4
Nurses answer prepare you for the consultation	1	7.1	9	64.3	1	7.1	1	7.1	2	14.3
Nurses were punctual and reachable	0	0.0	4	28.6	5	35.7	3	21.4	2	14.3
Regular presence of nurses	0	0.0	9	64.3	1	7.1	2	14.3	2	14.3
Ease of coming back to visit on the same day	0	0.0	6	42.9	4	28.6	3	21.4	1	7.1
When I get nursing care, people have to wait a long time for emergency treatment	5	35.7	1	7.1	3	21.4	3	21.4	2	14.3
Nurses sometimes ignore what I tell them	1	7.1	6	42.9	3	21.4	2	14.3	2	14.3
The nurse treats me in a very friendly And courteous manner	1	7.1	9	64.3	1	7.1	1	7.1	2	14.3
The nurse usually spends plenty of time with me	6	42.9	3	21.4	1	7.1	2	14.3	2	14.3
I am very satisfied with the nursing care I receive	2	14.3	6	42.9	3	21.4	2	14.3	1	7.1
It is easy for me to get Nursing Care in an emergency	3	21.4	6	42.9	0	0.0	4	28.6	1	7.1
I am usually kept waiting for a long time When I am at the nursing's office	3	21.4	6	42.9	3	21.4	2	14.3	0	0.0
The nurses who treat me should give More respect	0	0.0	4	28.6	7	50.0	1	7.1	2	14.3

In internal medicine it seems that nurse's services deserve attention in the following factors: Only less than half (28.6%) of the respondents agreed with the punctuality of nurses, only 42, 9% agree

with how it is easy to come back to visit on the same day and 42.8% of patients agree with how long time patients wait for emergency treatment and 28.6% Of patients agreed with who nurses treat them with more respect. Concerning other factors more than half of the patients are satisfied with nurses' services in remaining aspect studied in this research.

Table 8: Frequency and percentage distribution according to how patients are satisfied with physical facilities at RMH

	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nursing room's location is easy to find	5	35.7	4	28.6	0	0.0	3	21.4	2	14.3
Nursing room is clean and tidy	1	7.1	4	28.6	6	42.9	2	14.3	1	7.1
There are enough waiting for chairs in the waiting room	2	14.3	5	35.7	3	21.4	4	28.6	0	0.0
There is a clean restroom in the waiting area	0	0.0	8	57.1	1	7.1	4	28.6	1	7.1
The room is spacious, bright, and airy	0	0.0	5	35.7	5	35.7	4	28.6	0	0.0

With reference to how the nurse is satisfied with physical facilities in internal medicine, only 35.7% of patients agreed with how the nursing room is clean and tidy. This deserves attention in this ward. For nursing room location, a number of chairs in the waiting room, and how the room is cleaned and spacious, bright and airy, more than half of patients are satisfied.

Table 9: **Frequency and percentage distribution according to how patients are satisfied with nurses' working schedule and courtesy at RMH**

Satisfaction factors	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nurses 'working shift was easy for you	0	0.0	8	57.1	2	14.3	4	28.6	0	0.0
Nurses were available when required	3	21.4	6	42.9	0	0.0	3	21.4	2	14.3
The attitude and respect of nurses	0	0.0	3	21.4	7	50.0	4	28.6	0	0.0
Language used by nurses	2	14.3	8	57.1	1	7.1	2	14.3	1	7.1
Friendly manners and attentiveness of nurses	1	7.1	8	57.1	2	14.3	3	21.4	0	0.0
Nurses' communication skills	0	0.0	8	57.1	3	21.4	1	7.1	2	14.3
Confidentiality of the patient records	2	14.3	8	57.1	1	7.1	3	21.4	0	0.0

Regarding patient satisfaction with the nurse's schedule and courtesy in internal medicine, only 21.4% of patients agree with the attitude and respect. Concerning nurse' work schedule, working shift, nurses availability, nurses' language, friendly manners and attentiveness, nurses communication skills and the confidentiality of patient in internal medicine, more than half of patients are satisfied.

1. PATIENTS SATISFACTION IN SURGICAL

Table 10: Frequency and percentage distribution according to how patients are satisfied with nurses' services (n=60)

	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nurses welcomed you with respect	14	23.3	23	38.3	5	8.3	9	15.0	9	15.0
Nurses answer to your questions gently	4	6.7	35	58.3	8	13.3	9	15.0	4	6.7
Nurses answer prepare you for the consultation	0	0.0	27	45.0	19	31.7	11	18.3	3	5.0
Nurses were punctual and reachable	7	11.7	22	36.7	10	16.7	13	21.7	8	13.3
Regular presence of nurses	7	11.7	18	30.0	14	23.3	9	15.0	12	20.0
Ease of coming back to visit on the same day	7	11.7	22	36.7	11	18.3	13	21.7	7	11.7
When I get nursing care, people have to wait a long time for emergency treatment	9	15.0	14	23.3	10	16.7	19	31.7	8	13.3
Nurses sometimes ignore what I tell them	6	10.0	19	31.7	20	33.3	10	16.7	5	8.3
The nurse treats me in a very friendly And courteous manner	11	18.3	23	38.3	10	16.7	11	18.3	5	8.3
The nurse usually spends plenty of time with me	26	43.3	8	13.3	7	11.7	16	26.7	3	5.0
I am very satisfied with the nursing care I receive	3	5.0	25	41.7	16	26.7	10	16.7	6	10.0
It is easy for me to get Nursing Care in an emergency	7	11.7	24	40.0	8	13.3	14	23.3	7	11.7
I am usually kept waiting for a long time When I am at the nursing's office	7	11.7	14	23.3	13	21.7	19	31.7	7	11.7
The nurses who treat me should give More respect	2	3.3	19	31.7	16	26.7	14	23.3	9	15.0

In surgical ward, patients are not satisfied with nurses' services in more than satisfaction factors studies in this research. Only patients are satisfied in only 5 factors out fourteen such as how nurses welcomed patients (61.6%), how nurses answer to their questions (65%), how nurses treats patients

in a very friendly And courteous manner (56.6%), how patients are satisfied with the nursing care their receive (56.6%) and how it is easy for patient to get Nursing Care in an emergency (51.7%).

Table 11:Frequency and percentage distribution according to how patients are satisfied with physical facilities at RMH

Surgical	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nursing room’s location is easy to find	10	16.7	13	21.7	4	6.7	14	23.3	19	31.7
Nursing room is clean and tidy	7	11.7	11	18.3	11	18.3	24	40.0	7	11.7
There are enough waiting for chairs in the waiting room	2	3.3	26	43.3	8	13.3	14	23.3	10	16.7
There is a clean restroom in the waiting area	1	1.7	26	43.3	3	5.0	25	41.7	5	8.3
The room is spacious, bright, and airy	1	1.7	23	38.3	6	10.0	21	35.0	9	15.0

In surgical, the opinions from patients showed that they are not satisfied with physical facilities because in five satisfaction factors studied, patients reported that they are not satisfied with physical facilities in all of them.

Table 12: Frequency and percentage distribution according to how patients are satisfied with nurses' working schedule and courtesy at RMH

	Strongly agree on		Agree		Uncertain		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Nurses 'working shift was easy for you	5	8.3	20	33.3	3	5.0	19	31.7	13	21.7
Nurses were available when required	2	3.3	25	41.7	0	0.0	28	46.7	5	8.3
The attitude and respect of nurses	0	0.0	18	30.0	15	25.0	14	23.3	13	21.7
Language used by nurses	2	3.3	19	31.7	12	20.0	15	25.0	12	20.0
Friendly manners and attentiveness of nurses	2	3.3	23	38.3	5	8.3	21	35.0	9	15.0
Nurses' communication skills	0	0.0	25	41.7	7	11.7	19	31.7	8	13.3
Confidentiality of the patient records	2	3.3	21	35.0	7	11.7	15	25.0	14	23.3

Concerning how patients are satisfied with nurses working schedule and courtesy in surgical, the opinions from patients showed that they are not satisfied because in seven satisfaction factors studied, patients disagreed with all of them.

Table 13: The level of patients satisfaction

Patient satisfaction score/130	% patient satisfaction	Level of patient satisfaction	Frequency	% of frequency
48.00	36.9	Low	6	6.3
51.00	39.2	Low	20	21.1
53.00	40.8	Low	10	10.5
57.00	43.8	Low	5	5.3
59.00	45.4	Low	1	1.1
60.00	46.2	Low	4	4.2
61.00	46.9	Low	3	3.2
77.00	59.2	Low	2	2.1
80.00	61.5	Satisfied	2	2.1
82.00	63.1	Satisfied	3	3.2
84.00	64.6	Satisfied	2	2.1
85.00	65.4	Satisfied	3	3.2
87.00	66.9	Satisfied	1	1.1
89.00	68.5	Satisfied	6	6.3
90.00	69.2	Satisfied	1	1.1
92.00	70.8	Satisfied	1	1.1
93.00	71.5	Satisfied	3	3.2
100.00	76.9	Satisfied	1	1.1
101.00	77.7	Satisfied	1	1.1
102.00	78.5	Satisfied	1	1.1
103.00	79.2	Satisfied	3	3.2
104.00	80.0	Satisfied	1	1.1
105.00	80.8	Satisfied	2	2.1
106.00	81.5	Satisfied	3	3.2
107.00	82.3	Satisfied	1	1.1
108.00	83.1	Satisfied	1	1.1
110.00	84.6	Satisfied	1	1.1
111.00	85.4	Satisfied	1	1.1
112.00	86.2	Satisfied	3	3.2
119.00	91.5	Satisfied	2	2.1
130.00	100.0	Satisfied	1	1.1
Total			95	100.0

From the table above, it shown that 47% of patients at Rwanda Military Hospital are satisfied while 53% of patients presented the lower level of satisfaction.

Association between demographic characters and patient satisfaction factors at Rwanda Military Hospital

The Pearson correlation was used to identify the degree of association between demographic characters and patients' satisfaction factors at RMH. The Pearson product-moment coefficient of correlation was calculated between the totals of each of the three demographic characters and each of 26 items in relation to patients' satisfaction with nursing services, physical facilities, work schedule, and courtesy. The demographic characters were the following: age, gender, and education. The significant value employed was 0.05. The test was run on SPSS and both significant and insignificant results were displayed in the table below.

Table 14: Relationship between Demographic Characteristics & Patient Satisfaction (Significant level = 0.05)

	NW Y	NA Y	NP Y	NP R	RPN	CB V	WL T	NSI	NT F	NSP	VS N	EG N	KW L	NG R	NR F	NR C	EC W	CR W	RS B	NW S	NA R	AR N	LU N	FA N	NC S	CPR
Age	.114	.067	.076	-	-	-	-	.048	.033	-	.066	-	.008	.031	-	.000	.166	.094	.126	.114	.073	.077	.078	.105	-	.037
	.270	.521	.465	.944	.141	.177	.508	.642	.752	.473	.526	.619	.936	.765	.948	.996	.108	.366	.223	.273	.483	.456	.454	.312	.924	.727
Gender	-.246*	-.272**	-.288**	-.516**	-.561**	-.610**	-.480**	-.455**	-.411**	-.689**	-.568**	-.379**	-.490**	-.479**	-.584**	-.232*	-.252*	-.410**	-.436**	-.471**	-.401**	4.83**	.361**	.339**	.487**	.457**
	.016	.008	.005	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.024	.014	.000	.000	.000	.000	.000	.000	.001	.000	.000
Education level	-.077	-.129	-.028	-.056	-.032	-.035	.135	.122	-.141	-.230*	-.087	-.025	-.041	-.104	-.026	-.001	.006	-.053	-.055	-.108	.074	.007	-.026	-.009	-.122	.041
	.459	.213	.790	.588	.760	.739	.192	.237	.174	.025	.402	.807	.695	.317	.800	.990	.953	.612	.599	.296	.477	.948	.804	.933	.243	.698

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

NWY: Nurses welcomed you with respect **NAY:** Nurses answer to your questions gently **NPY:** Nurses answer prepare you for the consultation **NPR:** Nurses were punctual and reachable, **RPN:** Regular presence of nurses

CBV: Ease of coming back to visit on the same day **WLT:** When I get nursing care, people have to wait a long time for Emergency treatment, **NSI:** Nurses sometimes ignore what I tell them, **NTF:** The nurse treats me in a very friendly and courteous manner, **NSP:** The nurse usually spends plenty of time with me, **VSN:** I am very satisfied with the nursing care I receive, **EGN:** It is easy for me to get Nursing Care in an emergency, **KWL:** I am usually kept waiting for a long time When I am at the nursing's office, **NGR:** The nurses who treat me should give More respect, **NRF:** Nursing room's location is easy to find, **NRC:** Nursing room is clean and tidy, **ECW:** There are enough waiting for chairs in the waiting room, **CRW:** There is a clean restroom in the waiting area, **RSB:** The room is spacious, bright, and airy, **NWS:** Nurses 'working shift was easy for you, **NAR:** Nurses were available when required, **ARN:** The attitude and respect of nurses, **LUN:** Friendly manners and attentiveness of nurses, **FAN:** Nurses' communication Skills, **NCS:** Nurses' communication Skills, **CPR:** Confidentiality of the patient records

Table 13 reports the data from the Pearson correlations of the totals of scores of the three demographic characters; age, gender and education, and the totals of scores from the items measuring the patients' satisfaction in surgical, internal medicine and Obstetrics/Gynecology wards. This creates a total of 78 correlations, with 4 significant correlations ranging from 0.230 to 0.252 at the 0.05 level (including positive and negative correlations), suggesting a significant relationship between patients' demographic characters and patients' satisfaction factors. Only the negative correlations were found between demographic character "*Gender*" and "*Education*" and patients' satisfaction factors, while the demographic character "*age*" had no statistically significant relationship with any statement of patients' satisfaction factors. Hence the second research question was positively answered that there is a significant relationship between demographic characters and patients' satisfaction factors.

4.3 Discussion of findings

4.3.1 The level of patients' satisfaction with nursing services

From research findings, patients' satisfaction with nursing services provided at Rwanda Military Hospital, it is indicated that patients are more satisfied in some wards and not satisfied in others.

Concerning how patients are satisfied with nurses' services in Obstetrics/Gynecology more than a half (between 90 and 76.2%) of patients is satisfied with 13 out of 14 factors of nurse's services as defined in this research. This finding is higher than the study conducted by (Ahmed et al.,2014) in Ethiopia and less than that of study conducted in Saudi Arabia which was between 96.6% and 76.8%. This difference could be related to the characteristic of patients and of the hospitals.

In surgical ward, patients are not satisfied with nurses' services in more than satisfaction factors studies in this research. Only patients are satisfied in 5 factors out fourteen such as how nurses welcomed patients, how nurses answer to their questions, how nurses treats patients in a very friendly and courteous manner, how patients are satisfied with the nursing to care their receive and how it is easy for patient to get nursing care in an emergency. According to the study contacted by Ahmed et al (2014,) this might be related with the number of nurses to patient ratio in this hospital.

According to how patients are satisfied with physical facilities in Gynecology/Obstetric, patients are satisfied with physical facilities in each of satisfaction factors studied. This finding is in the line with that for Ahmed et al (2014) where he confirm that the type of admission rooms have been found to significantly affect overall satisfaction of patients. Patients are concerned about the cleanness of the room and amount of privacy and freedom in hospitals.

Concerning how patients are satisfied with nurses working schedule and courtesy in surgical, Patients are not satisfied in all seven satisfaction factors studied. According to (Powell ,2001) the reasons for dissatisfaction can be associated with the availability of nurses to them and with the nurse communication. The hospitals should consider mechanisms to improve the nurses' communication skills and interpersonal relationships through training.

4.3.2 Association between demographic characters and patient satisfaction factors.

Concerning the association between patients' socio-demographic characteristics and patient satisfaction, the results of this study showed a negative weak correlation on only two characters: gender and education. Concerning age, the results showed that there was no significant relationship between age and patient satisfaction factors

The study results are supported by the view of Michael(2011) when he confirmed that when patient arrive at hospital his expectations might be taken into account. The nurses who will undertake first contact care must be skilled in order to be able to take into consideration the patient's expectations. According to the research conducted by (Redsell, Jackson, Stokes et al 2007) exploring patient expectation of their consultations with nurses showed that nurses and patients talk more during nurse consultations, particularly about how to apply and carry out treatments, which might explain the differences in satisfaction rates.

CHAPTER FIVE: SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

5.0 Introduction

This study assessed patient satisfaction with nursing care at Rwanda Military Hospital based on patients' emotions, feeling, and opinions. The quantitative survey was used in this study to assess the level of patients' satisfaction with nurses' services, Hospital facilities and nurses' schedule and courtesy in three different wards: Surgical, internal medicine and Gynecology/Obstetric.

The sample for the study included patients admitted to these three wards at the time of doing research. Patients were asked to respond to the interview guided by the questionnaire in relation to the nurses' services, hospital facilities, working schedule and nurses' courtesy. The potential pool of participants was 104 respondents and 95, (91.3%) has been interviewed.

Therefore, this chapter presents a summary of the main findings by referring to the study's objectives, conclusions, and subsequent recommendations.

5.1 Summary of findings

The purpose of this study was to assess patients' satisfaction with nursing care provided at Rwanda Military Hospital. Therefore, the study aimed to answer two research questions: what are patients satisfied with the nursing care provided at Rwanda Military Hospital? What is the association between demographic characters' and patient satisfaction with nursing care at Rwanda Military Hospital? A descriptive survey has been conducted at the following clinical departments of Rwanda Military Hospital: Gyneco-Obstetrics, Internal Medicine, Surgical wards.

Targeted samples have been drawn from the patients from the above-mentioned wards at Rwanda Military Hospital at the time of doing research, and had the equal opportunity to participate in this study. Data from the interview guide have been entered into SPSS and analyzed using both descriptive statistics and Pearson's product moment. The descriptive statistics like percentage and frequency distributions have been used to explore the level of satisfaction. The Pearson Product Moment Correlation Coefficient has been the inferential

statistical instrument. Findings have been organized and presented in form of tables and texts for ease of interpretation and understanding.

The majority of the respondents were satisfied with how nurses welcomed them, with how nurses answer to their questions gently, how they are prepared for consultation process, how nurses are punctual and reachable in Internal Medicine and in Obstetrics/Gynecology ,Internal Medicine and surgical respectively. Moreover, the study indicated the areas for improvement from the respondents' points of perspective themajority of the respondents in surgical and are not satisfied with how they are welcomed and how nurses are regular and present is the serious issue in the surgical ward. The study also showed that two out of three wards need a particular attention: Surgical and internal medicine ward because patients disagreed about the most of the satisfaction factors

Concerning physical facilities in general, the majority of respondents was satisfied with their room and its equipment. Patients also agree with the number of chairs in the waiting room and onhowrestroom in the waiting area is cleaned. Apart from Obstetric Gynecology and internal medicine room and their equipment, deserved attention. The study also showed that Nurses going off duty share important information at the patient bedside with health care partner, and with the nurse who is coming on duty. Nurses' communication is a critical issue in two out of three wards. And more than a half of patients in internal medicine and Obstetrics/ Gynecology are satisfied with the confidentiality of their records. Satisfaction level was said to have a week negative correlation with two out of three patient satisfaction factors. The study suggested that waiting time for service should be improved.

The study findings showed that patient satisfaction surveys are essential in obtaining a comprehensive understanding of the patient's need and their opinion of the service received. This will serve as an indicator for nursing services improvement to the board managers, decision makers, planners, business partners and other related staff at Rwanda Military Hospital. It will also become an initiating document for other researchers to further research and improve the status of health care delivery services at Rwanda Military Hospital.

5.2 Conclusions

After conducting this study, the researcher can conclude that at Rwanda Military Hospital, most of patients are satisfied with the services provided in Genecology/ obstetric and Internal medicine wards.

The results of this study showed a negative weak correlation between gender, education and patient satisfaction, and there is no significant relationship between age and patient satisfaction factors.

5.3 Recommendations

From this study, the following recommendations would be addressed to Hospital Administration:

- Customer feedback should be recognized as a legitimate method of assessing health Services,
- Nurses must continually capture, measure and evaluate patient satisfaction through a range of agreed mechanisms.
- The results of these evaluations should be analyzed and inform the hospital Administration
- Patient-centered communication must be incorporated into nurses' daily services.
- Periodical study focusing on patients' satisfaction in the hospital should be implemented to keep up with the change of the phenomena
- Further satisfaction study should be extended in order to gain better views of the field and produce more meaningful results

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APPENDICES

CONSENT FORM FOR RESEARCH PARTICIPATION

Dear Patients;

I am a student at the University of Rwanda, College of Medicine and Health Sciences, in the School of Nursing and Midwifery, Masters of Nursing in education, leadership, and management. I am conducting a research study, which I invite you to take part in. The objective of this research is to assess the patient satisfaction with the nursing care service. The data collected in this study would contribute to the improvement of nursing care service. You will be asked to describe your personal opinions about nursing care services you receive. Your participation in this study will not cause you any physical or emotional risk to you other than for your everyday life. Your information will only be used for scientific purposes.

Please contact the researcher on 0788434180 for any concern

I certify that I _____ agree to the terms of this agreement.

Signature _____ Date _____

Thank you

Student Researcher: Chantal WAKAGANDA

Signature _____ Date _____

INYANDIKO ISINYWA N’UWEMEYE KUGIRA URUHARE MU BUSHAKASHATSI

Kuri mwe murwariye muri ibi bitaro ;

Ndi umunyeshuri muri Kaminuza y’u Rwanda, muri Koleji y’ubuzima n’ubuvuzi, mu cyiciro cya kabiri cya kaminuza mu byerekeye uburenzi ni miyoborere mu buforomo. Nkaba ndimo gukora ubushakashatsi ngirango mbasabe ko mwakwitabira kugiramo uruhare. Ubu bushakashatsi bugamije gusuzuma uko abarwayi bagana ibi bitaro banyurwa na service bahabwa. Ibizava muri ubu bushakashatsi bizafasha mu kuzamura ireme rya serivise itangwa n’abaforomo muri ibi bitaro.

Murasabwa gutanga ibitekerezo byanyu kubijyanye na service muhabwa n’abaforomo. Uruhare rwanyu muri ubu bushakashatsi nta ngaruka bwabagiraho birenze ibyo mu buzima bwa buri muni. Ibizava muri ubu bushakashatsi kandi bizashyirwa ahagaragara.

Mukeneye kugira icyo mubaza, mwahamagara umushakashatsi kuri telefoni 0788434180.

Mu gusinyaiyinyandiko, Jyewe _____ nemeyeibiyikubiyemo.

Umukono _____ Itariki _____

Umushakashatsi:Chantal WAKAGANDA

Umukono _____ Itariki _____

Tubashimiyeuruharerwanyumuriububushakashatsi !

INTERVIEW GUIDE

Part A. Socio-Demographic Characteristic

Please write (u□) in the appropriate column provided:

1. Gender

Male Female

2. How old are you?

8-18

19-35

36-65

4. What is your educational degree?

Illiterate Primary Secondary High school

5. What is your ward:

Surgical Internal Medicine Obs-Gyn

Part B. **How strongly do you AGREE or DISAGREE with each of the following statements?**

(Circle one number on each line)

	Strongly Agree on	Agree	Uncertain	Disagree	Strong Disagree
Nurses' Services					
1. Nurses welcomed you with respect....1		2	3	4	5
2. Nurses answer to you questions gently.....1		2	3	4	5
3. Nurses answer prepare you for the consultation1		2	3	4	5
4. Nurses were punctual and reachable1		2	3	4	5
5. Regular presence of nurses1		2	3	4	5

6.Ease of coming back to visit on the same day	1	2	3	4	5
7.When I get nursing care, people have to wait a long time for emergency treatment	1	2	3	4	5
8.Nurses sometimes ignore what I tell them	1	2	3	4	5
9.The nurse treats me in a very friendly And courteous manner.....	1	2	3	4	5
10.The nurse usually spends plenty of time with me.....	1	2	3	4	5
11.I am very satisfied with the nursing care I receive.....	1	2	3	4	5
12.It is easy for me to get nursing Care in an emergency.....	1	2	3	4	5
13.I am usually kept waiting for a long time 13. When I am at the nursing's office.....	1	2	3	4	5
14.The nurses who treat me should give More respect.....	1	2	3	4	5
Physical Facilities					
15.Nursing room's location is easy to find ...	1	2	3	4	5

16.Nursing room is clean and tidy.....	1	2	3	4	5
17.There are enough waiting for chairs in the waiting room.....	1	2	3	4	5
18.There is a clean restroom in the waiting area	1	2	3	4	5
19.The room is spacious, bright, and airy.....	1	2	3	4	5

Working schedule

20.Nurses ‘working shift was easy for you	1	2	3	4	5
21.Nurses were available when required	1	2	3	4	5

Courtesy

22.The attitude and respect of nurses.....	1	2	3	4	5
23.Language used by nurses.....	1	2	3	4	5
24.Friendly manners and attentiveness of nurses.....	1	2	3	4	5
25.Nurses’ communication skills	1	2	3	4	5
26.Confidentiality of the patient records	1	2	3	4	5

Do you have anything more to add?

.....
.....
.....

CMHS INSTITUTIONAL REVIEW BOARD (IRB)

Kigali, 09/01/2017
Ref: CMHS/IRB/018/2017

WAKAGANDA Chantal
School of Nursing and Midwifery, CMHS, UR

Dear WAKAGANDA Chantal

RE: ETHICAL CLEARANCE

Reference is made to your application for ethical clearance for the study entitled "*Assessment Of The Patients' Satisfaction On Quality Of Nursing Care Provided At Rwanda Military Hospital*".

Having reviewed your protocol and found it satisfying the ethical requirements, your study is hereby granted ethical clearance. The ethical clearance is valid for one year starting from the date it is issued and shall be renewed on request. You will be required to submit the progress report and any major changes made in the proposal during the implementation stage. In addition, at the end, the IRB shall need to be given the final report of your study.

We wish you success in this important study.

for Professor Kato J. NJUNWA
Chairperson Institutional Review Board,
College of Medicine and Health Sciences, UR


Vice-Chair

Cc:
- Principal College of Medicine and Health Sciences, UR
- University Director of Research and Postgraduate studies, UR

REVIEW APPROVAL NOTICE



February 3rd, 2017

Ref.: EC/ RMH/ 108/ 2017

REVIEW APPROVAL NOTICE

Dear **WAKAGANDA Chantal**
UNIVERSITY OF RWANDA

Your research project: **“Assessment of the Patients’ Satisfaction on Quality of Nursing Care Provided at Rwanda Military Hospital”**.

With respect to your application for ethical approval to conduct the above stated study at Rwanda Military Hospital, I am pleased to confirm that RMH Ethics Committee has approved your study. This approval lasts for a period of **12 months** from the date of this notice, and after which, you will be required to seek another approval if the study is not yet completed.

You are welcome to seek other support or report any other study related matter to the Research office at Rwanda Military Hospital during the period of approval.

You will be required to submit the progress report and any major changes made in the proposal during the implementation stage. In addition, you are required to present the results of your study to RMH Ethics Committee before publication.

Sincerely,

Dr. Pacifique Mugenzi
Lieutenant Colonel
Co Chair: Rwanda Military Hospital Research Ethics Committee

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