

ADDIS ABABA UNIVERSITY
COLLEGE OF HEALTH SCIENCES
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DEPARTMENT OF NURSING AND MIDWIFERY

ASSESSMENT OF PATIENT SATISFACTION ON NURSING CARE PROVIDED BY
NURSING STUDENT IN BLACK LION SPECIALIZED HOSPITAL, ADDIS ABABA,
ETHIOPIA, 2015.

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Acronyms

AAU-Addis Ababa University

AOR -Adjusted Odds Ratios

ANA-American Nurse Association

BLH-Black Lion hospital

CI -Confidence Interval

COR- crude odds ratio

ETB - Ethiopian Birr

FMOH -Federal Ministry of Health

Gyni/Obs- gynecology and obstetrics

OR -Odds Ratio

SPSS-Statistical Package for Social Science

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ABSTRACT

Background: *Patient satisfaction is the degree of congruence between a patient's expectations of ideal nursing care and perception of the real nursing care receives. Satisfied patients are more likely to comply with treatment, take an active role in their own care, continue using health care services and stay within a health provider. On the other hand unsatisfied patient will not come back to the hospital, and it will lead to loss of income from the patient, as well as wastage of government resources and most importantly healing process is obviously compromised. In Ethiopia, studies conducted so far are very limited on subject of inquiry. As a result, this study was assessed the patient satisfaction with nursing Care provided by nursing student.*

Objective: *The study assessed patient satisfaction on student nursing care service in Black lion hospital, Addis Ababa, Ethiopia, 2015.*

Methods: *Institutional based cross sectional study design was used from April5-May5/2015 in Black lion hospital. A total of 365 patients were involved in the study. Interviewer administered structured questionnaires were employed to collect data. Data were analyzed using SPSS version 20.0. Bivariate and multiple logistic regression analysis were applied. Independent variables with $p < 0.05$ in multiple logistic regression were considered as predictors of students' nursing care satisfaction.*

Result: *In general, 197(54%) patients were satisfied with student nursing care service. patients who stayed for 2-10 night were less likely to be satisfied(AOR =0.437& 95% CI=0.210-.910) compared to those stayed for >22 nights. Patients who had previous admission were 2.0 times more likely to be satisfied than those who didn't had previous admission (AOR =2.01& 95% CI=1.100-3.703) and Patients who had other diseases in addition to current health problem were less likely to be satisfied (AOR =0.273& 95% CI= 0.139-.536) than those who didn't had. Patients who were under acute condition were 2.7 times more likely to be satisfied than those under chronic condition (AOR=2.7&95%CI=1.320-5.461).*

Conclusion: *In this finding, a little over half or 54% of the study participants were satisfied with the overall students' nursing care services. This study also revealed predictors of satisfaction including educational status, number of night spent in the ward, history of previous admission, having other diseases in addition to current health problem and medical condition. Teaching*

institution in particular instructor should give emphasis for regular in-service education programme for student to refresh, up-to-date knowledge and skill on different aspects of patients care.

Key words: *Patients', nursing student, nursing care, patient satisfaction, Black lion hospital*

1. Introduction

1.1 Background

In complex and highly regulated health care environment it is essential to achieve patients' recovery as rapidly as possible so that patients' leave the hospital with full satisfaction. hence quality of work can be assessed by mapping out patient satisfaction with nursing care, it is a major indicator of quality care(1)

Patient satisfaction with nursing care was conceptualized as the degree of congruence between a patient's expectations of ideal nursing care and his /her perception of the real nursing care he/ she receives(2) .On the other hand according to American Nurse Association(ANA) patient satisfaction on nursing care is patient opinion of care received from nursing staff(3)

In the marketing perspectives, patient satisfaction was considered as the intermediary between patients' perspectives of service quality and future intention of re-using or commending the healthcare service(4). Interestingly, the organization perspective viewed patient satisfaction as the goal of health care delivery(4). Hence patient satisfaction is an indispensable aspect of quality nursing care in any health setup today(5).

Patients' satisfaction will be determined by nurses' role in the hospital because they are frontline people and more acquainted bedside nursing care than any other health personnel in the hospital. Patients' satisfaction has been advocated as an outcome measure of quality nursing care(6)

The nursing staff and student comprise the major part of the health staff(7). They occupies a prominent position to influence on the patient satisfaction with the nursing care provided, as they are responsible to provide direct care to patients, to organize the care and to coordinate their function with other hospital services(8).

Nursing care is one of the major components of Health Care delivery. It includes helping the patients in monitoring personal hygiene, helping in nutrition, environmental sanitation, examination, maintaining body temperature, providing safety and comfort, helping in adaptability and providing health education(9).

Nursing care has a major role in patient satisfaction, as patient satisfaction is an important indicator of quality of care and healthcare facilities are interested in maintaining high levels of satisfaction in order to stay competitive in healthcare market(10)

Quality of nursing care is vital to patient outcomes and patient satisfaction. Patient satisfaction with nursing care is strongly associated with patients overall satisfaction with hospital experience. To ensure service improvement initiatives at appropriate levels in hospital is a prerequisite to understand factors which influence patient satisfaction with nursing care. The measurement of patient satisfaction with nursing care is important to determine and meet patients' need in terms of care and to evaluate quality of care provided(6).

Furthermore, it also contribute to improve the way nursing schools teaches their students.

Patients' satisfaction has become an outcome indicator of quality and efficiency of a composite health care system. Besides, it can also be seen as a therapeutic intervention, an important criterion for making and evaluating organizational and administrative decisions, and a tool for patient client marketing or also as an ethical obligation which has the potential to humanize care(9).

Patients' satisfaction with the care given by nursing students will have a clear indication in the development of practical nursing student education and in improving the quality of clinical training(11).

1.2 Statement of the problem

Excellence in care is what those in need of healthcare services wish for, and it is also the main goal for those providing the care. Maintaining a balance between care quality and cost is a challenge in today's healthcare institutions, where resources are limited and needs increasing(12)

Although the significance of measuring patient satisfaction with nursing care cannot be emphasized enough, currently the concern of patients' satisfaction with nursing care has attracted the attention of researchers across the globe. Because knowledge gained from patient satisfaction surveys can set a direction for quality improvement(13). Investigators have claimed dissatisfied patient is not considered psychologically or socially well and thus the goal of nursing has not been attained .On this regard patient satisfaction is not only a direct indicator of the quality of care patients receive but also an indicator of the efficiency and effectiveness of the organizations that manage the care(14).

When health care providers thoroughly understand the factors influencing patient satisfaction, they will be better able to make changes that will increase satisfaction with the care they deliver (15). Since Patients' satisfaction can provides inputs which can help in the overall improvement of quality health care provision through the rectification of the system weaknesses by the concerned authorities(16)

A hospital may be soundly organized, beautifully situated and well equipped, but if the nursing care is not of high quality, the hospital will fail in its responsibility of providing care. On this line, assessing the satisfaction of patients with nursing care is crucial in order to identify the area of dissatisfaction and at the same time improve the nursing services(17).

Nursing profession has often used patients' outcome as a measures to evaluate the health care services provided. It assists in the evaluation of the nursing care efficiency, moreover, it also assists in bringing improvements in the established nursing practices(9)

Patient satisfaction with health care is important for several reasons(17). Satisfied patients are more likely to comply with treatment, take an active role in their own care, continue using health care services and stay within a health provider(9).

Proper care would lead to quick recovery, early discharge from the hospital, and satisfaction and comfort of the patient as well as achievement of the clinical aims(18)

It is important not only to increase the quality of nursing services, but also, as indicated in the literature, for the patient to participate more in his/her care and make positive contributions to the recovering process(19).

Likewise, patients' satisfaction of quality of care affect also their health behavior after discharge, and positive ratings of service quality seem to be correlated with no hesitation about re-visiting the same hospital ward (20). So addressing dissatisfaction before patients' turn away from seeking healthcare services is important

In addition, not only patient but also nursing professionals and nursing student may benefit from satisfaction surveys that help to identify potential areas for service improvement and health expenditure may be optimized through patient guided planning and evaluation(9, 21)

The patients' high level of satisfaction with the care nursing students gave is important to ensure that nurses, who will have primary responsibility for patient care in the future, receive a good clinical and theoretical education(11).

Research that has been done on patient satisfaction revealed that nursing care was the major determinant of patient satisfaction. Care assessed to be of high quality according to clinical, economic or other provider-defined criteria is not ideal if the patient feels dissatisfied(5)

A study conducted in Iran showed that dissatisfaction with the nursing care services lead to developing negative attitudes towards the health care system, lower utilization of the nursing care services by the patients. For this reason, many researchers have acknowledged that patients' satisfaction is not simply a measure of quality, but the goal of health care delivery(22).

On the other hand unsatisfied patient will not come back to the hospital, and it will lead to loss of income from the patient, as well as wastage of government resources and most importantly healing process is obviously compromised (17).

Dissatisfied patients' also tend to launch complaints to the establishment or seek redress from health care services and dissuade others from seeking health care services from the system if the systems do not favor them(7).

The public health implication related to patient dissatisfaction of care may lead to patients patronizing private health care providers and incur high cost as compared to government health care services. Thus, investigating the items with low patients' satisfaction will enable to identify the defects in nursing care and institute appropriate change(5)

The Federal Ministry of Health(FMOH) in Ethiopia striving to provide quality service in every health institution (23).Due to the fact the needs of the patients are dynamic and are constantly influenced by the cultural, economical, demographic, social and technological environment patient satisfaction is not sufficient enough.

So that health systems need to go through continuous change in accordance with priority needs of the consumers and this can only be achieved by constantly determining these needs through patient's satisfaction surveys to ensure quality nursing care services(24).

It is a essential for student nurses to identify consciously the needs of the patients and provides them the care that meets these requirements, particularly for student who are just beginning to recognize the profession of nursing, feedbacks received from the patients is more important for understanding the implication of the nursing care quality in turn for patient satisfaction(25).

Despite the fact that student nurses in clinical setting assigned to acquire the knowledge, skills, and values essential to professional practice, the patient expects a lot from the care rendered. Furthermore this is somewhat a neglected area and there is lack of empirical evidences on this subject of inquiry. Therefore, the purpose of this study was planned to assess the patient satisfaction with nursing Care provided by nursing student.

1.3 Significance of the study

Student nurses are the frontline, the patients expect more from them and they should also fulfill patients' needs with competence and a compassionate approach. If the patient does not get appropriate care the healing process is obviously compromised on this regard, assessing the satisfaction of patients with student's nursing care is crucial in order to identify the area of dissatisfaction and at the same time improve the nursing services.

It is important in cultivating professional skills in the students and also for teaching institution in clinical education to investigate the status quo, recognition of strong point and removal of weak point of student in turn remedial in improving the quality of clinical training.

Since no sufficient study tried to explicate patient satisfaction on nursing care by nursing student the finding of this study can provide relevant information for future planning and interventions of appropriate strategies and also help as a baseline data for those who are interested in carrying out further research with this regard.

2. Review of the literature

2.1. Satisfaction of patients with nursing care

The survey done among 237 patient measuring satisfaction with nursing care of patients admitted in the medical wards of the Philippine general hospital, a little over half or 57.8% were highly satisfied in the overall evaluation of care. A little over half had previous hospitalization but no specifics were obtained (2).

A study conducted in India on patient's satisfaction revealed about 58% of them were well satisfied with the nursing care(17). On this regard good satisfaction with nursing care was 23% in Obstetrics/Gynecology, 19% in medicine and 24% in surgery and 12% in Obstetrics/Gynecology, 16% in Medicine, 12% in Surgery was poor satisfaction(17).

Another study in India, the overall perceptions of the patients revealed that 31.6% had a 'poor perception' regarding explanation and information aspect of nursing care. For caring attitude 11.5% of patients had a poor perception. Responsiveness and availability of the nurse revealed a very high percentage of patients having good perceptions 95.9% and 96.5% respectively(26).

A cross-sectional study conducted at Pakistan revealed 45 % patients were satisfied with care provided, while 55 % were partially dissatisfied. On the aspects of care, patients reported a positive level of satisfaction on providing privacy when needed and felt nurses were excellent as they were very regular in routine vital signs check-up(1).

Mostly, patients had low levels of satisfaction with the speed of nurses' response to their calls, the amount of freedom in the ward, nurses' willingness to respond to requests, and in treating patients as individuals(14).

Study undergone in Ghana, towards in-patient satisfaction with nursing care revealed that about 33% of respondents were fully satisfied with their nursing care. From this satisfaction ,46% were satisfied with the attitude of nurses towards clients and their family, 41% were satisfied with the amount of privacy given as each bed had a screen which provided maximum privacy and about 36% of respondents were satisfied with nurses' capability in their work and the amount of time nurses spent with them(5)

Finding on Patients' satisfaction and associated factors with nursing care services in selected hospitals, Northwest Ethiopia showed that the overall satisfaction was found to be 67.1%. Freedom, privacy given to patients and the capabilities of the nurses at their jobs were the top areas of patients have got satisfied on nursing care services delivered(27)

According to a study report in Addis Ababa the overall rating of satisfaction was 67% which was 77% in Jordan(14, 28).In line with regarding aspects of care given the highest satisfaction were found in the amount of freedom in the ward (83%); how capable nurses were at their job (70%); nurses treatment of you as an individual (70%); nurses' manner in going about their work (67%) and the amount of privacy nurses gave you (61%)(28).

Different literature revealed the amount and type of information nurses gave to patients about their condition and treatment were a major cause of dissatisfaction (5, 29, 30).

On this regard lowest satisfaction score were the amount of information nurses gave to the patient about his/her condition and treatment (40%), the type of information nurses gave to the patient about his/her condition and treatment (42%), the way nurses explained things to the patient (52%), how willing nurses were to respond to patients' requests (53%)and nurses' awareness of your needs (56%)(28).

2.2. Factors affecting patient satisfaction

Among the factors influencing on the patient satisfaction with student's care, the relationship between student nurses and patients, information on health, the decision making control by patients(24), longer period of admission and the health professionals' technical competence.

2.2.1. Socio demographic characteristics on patient satisfaction

Various studies have presented controversy in the results concerning possible relationships between patient socio demographic characteristics and their satisfaction with nursing care they receive.

Patients' socio demographic characteristics such as age, gender and educational level (4, 8, 31), have been indicated as variables influencing on the hospitalized patient satisfaction. A study conducted in India on patient's satisfaction with nursing care revealed that men were more

satisfied then women, older respondents were more satisfied and higher level of education was less satisfied with nursing care (17)

In another study on evaluation of satisfaction with nursing care of patients hospitalized in surgical clinics of different hospitals showed that married patients' satisfaction levels are higher than those of widows and divorced patients' (19). The study done in Addis Ababa revealed single had better satisfaction than those who were married(29)

Regarding sex of the patient's inconsistency was found in the literature. Study undergone in Ghana stated that 38% of male participants were very satisfied with nursing care compared to 30% of female participants (5).

In similar manner finding in Addis Ababa showed that female(AOR= 3.78, 95% CI: 1.35-10.56) were more satisfied than male patient(29). In contradiction to this, finding from Kenya in which women were more satisfied nevertheless, though the difference was not significant(18).

Study which examined patients satisfaction from clinical education of nursing student in Iran showed that patients are satisfied with nursing students' activity at their bedsides and level of satisfaction was correlated with sex and educational level. On the other hand, no significant correlation was found between level of satisfaction and other demographic characteristics(18).

In relations to influence of age on patient satisfaction, the majority of the past studies highlighted as age increased, the level of patient satisfaction was higher (4, 14, 32).

In line with this, study conducted in Ghana, showed that 37% and 46% of patient respondents below 40 and above 40 years respectively were fully satisfied with the care rendered(5). Different from this , finding in Addis Ababa showed that those whose age>50 were less likely to be satisfied than patients' <50 years of age(29).

Considering educational status, differences were also found in education in relation to the level of satisfaction with care. A study conducted in Turkey supported this finding through its finding on surgical patients' perceptions of the care provided by student nurses, satisfaction of the nursing care was high among the patients with low educational status (33).

In another study, it was determined that literate-primary school graduates are more satisfied with nursing services compared to college graduates(19), which is congruent with the finding in Iran that the highest level of satisfaction belonged to illiterate people(18). But in contradiction, patients' with greater level of education presented a higher level of satisfaction with the nursing care in Brazil(34).

Study of patients' satisfaction from clinical education of nursing student in Iran on Comparing patients' satisfaction based on their jobs, it was indicated that level of satisfaction was correlated with a patient's job and Housewives showed the highest level of satisfaction but laborers showed the least level of satisfaction(18).

Family income has been connected with greater satisfaction. people with lower income report more problems in hospital and reports dissatisfaction(17). In the other way about 77% of participants who had 150 birr/month and below income were fully satisfied compared to 52% of participants who had 1201 birr/month and above (28).

2.2.2. Admission and patient related factor on patient satisfaction

Hospitalizations increase patients' opportunities for receiving nurses' care and observing their caring behaviors' (35). From 2002-2007 study conducted in Iran showed that Patients with a history of admission to hospital were more satisfied with nursing care than those who did not(8).

Concerning history of previous admission ,finding in Addis Ababa showed that Patients who had no history of previous admission were less likely to be satisfied than those who had previous admission(28).

The length of stay is to be other aspect that directly influence on the patient satisfaction. The study report in Brazil revealed those who were hospitalized for four to seven days reported a higher level of satisfaction than those who stayed within the unit for less than three days(34). Likewise in Addis Ababa, those patient who spent 11to22 night and >22night were less satisfied than those who spent <10 day(29).

An exploratory study investigated patients' satisfaction with nursing care at a major teaching hospital in Jordan showed that patients in surgical wards had lower levels of satisfaction than patients in medical or gynecological wards(14). In contradiction to this, finding revealed in Addis Ababa people who were admitted in medical ward were less likely to be satisfied than Gyn/ Obs ward admitted patient(29).

Study conducted in Addis Ababa showed that concerning class of admission, 78% of patients' who were admitted in 3rd class were fully satisfied compared to 54% of those who were admitted in first class(private room) (28).

Study in Jordan revealed patients' with no other diseases tended to have higher satisfaction than those with other diseases(14).On other hand participants' who had other diseases different from the cause of admission, 75% were fully satisfied which is nearly similar to 71% of patients who had no other diseases(28).

Study undergone in northwest Ethiopia in selected hospital indicated that patients who were under acute illness conditions were less likely to report overall satisfaction with nursing care services than those under chronic conditions(13).

2.2.3. Nursing Care given on patient satisfaction

Various literature indicates the provider's personal qualities, the nature of the interpersonal relationship(communication gap between nurses and their patients'), the provider's competence and the perceived quality of care received and effect of care on the patients are among the factor influencing patient satisfaction(8, 17, 22, 28).

Patient outcomes of care are affected by rapport and interpersonal quality of practicing and professional nurse (7). The study finding in Jordan showed communication and offering emotional support had lowest satisfaction score(9, 14). On similar study the top aspects that patients scored highest for their satisfaction with nursing care were the feeling of privacy, nurses capability at their job, and nurses helpfulness(14).

A cross-sectional study among 200 patients' on relationship between quality of senior nursing students' caring behaviors and patients' satisfaction has been done in Iran, patients are more

satisfied with the caring behaviors of the students who focus on the communication with patients, nursing ethics, and especially patient education during the care. Besides significant correlation was found between the total quality of the caring behaviors with the patients' satisfaction and their subscales (36).

The study to examine surgical patients' satisfaction of nursing care at the orthopedic wards in hospital university Sains Malaysia revealed patients' rated "highly satisfied" with nurse's manner in going about their work. Apart from this patients were less satisfied with the way nurses made them feel at home, the amount of time nurses spent with them and the amount of information they received regarding their condition and treatment (3).

Despite the variety of approaches used, satisfaction studies have been surprisingly consistent in finding that interpersonal and communication skills are better predictors of patient satisfaction than technical care(37). In view of this a study conducted on adult patient satisfaction with nursing care at public hospitals in Addis Ababa , reported least satisfied score were the amount and type of information they received regarding their condition and treatment(13).

A descriptive study conducted using interaction model of client health behavior in Malaysia revealed that majority of the patients, were highly satisfied with the affective support showed by nurses which comprise of 'respect', 'smile' and 'caring'. But patients' were least satisfied with the aspect on 'decisional control' given to them and 'family involvement with care(4)

The study done in Jordan indicates patients' had low levels of satisfaction with the speed of nurses' response to their calls, the amount of freedom in the ward, nurses' willingness to respond to requests, and in treating patients as individuals(14)

2.3. Conceptual framework

Many studies in different parts of the world reviewed that patient satisfaction with nursing care is affected by different factors. For this study according to the literature review the main factors identified are socio demographic characteristics, Nursing Care given, patient and hospital condition.

The next conceptual frame work which depicts the relationship of the variables is adopted and modified from (Bekele Chaka, June 2005). It helps to summarize the relationship between dependent and independent variables.

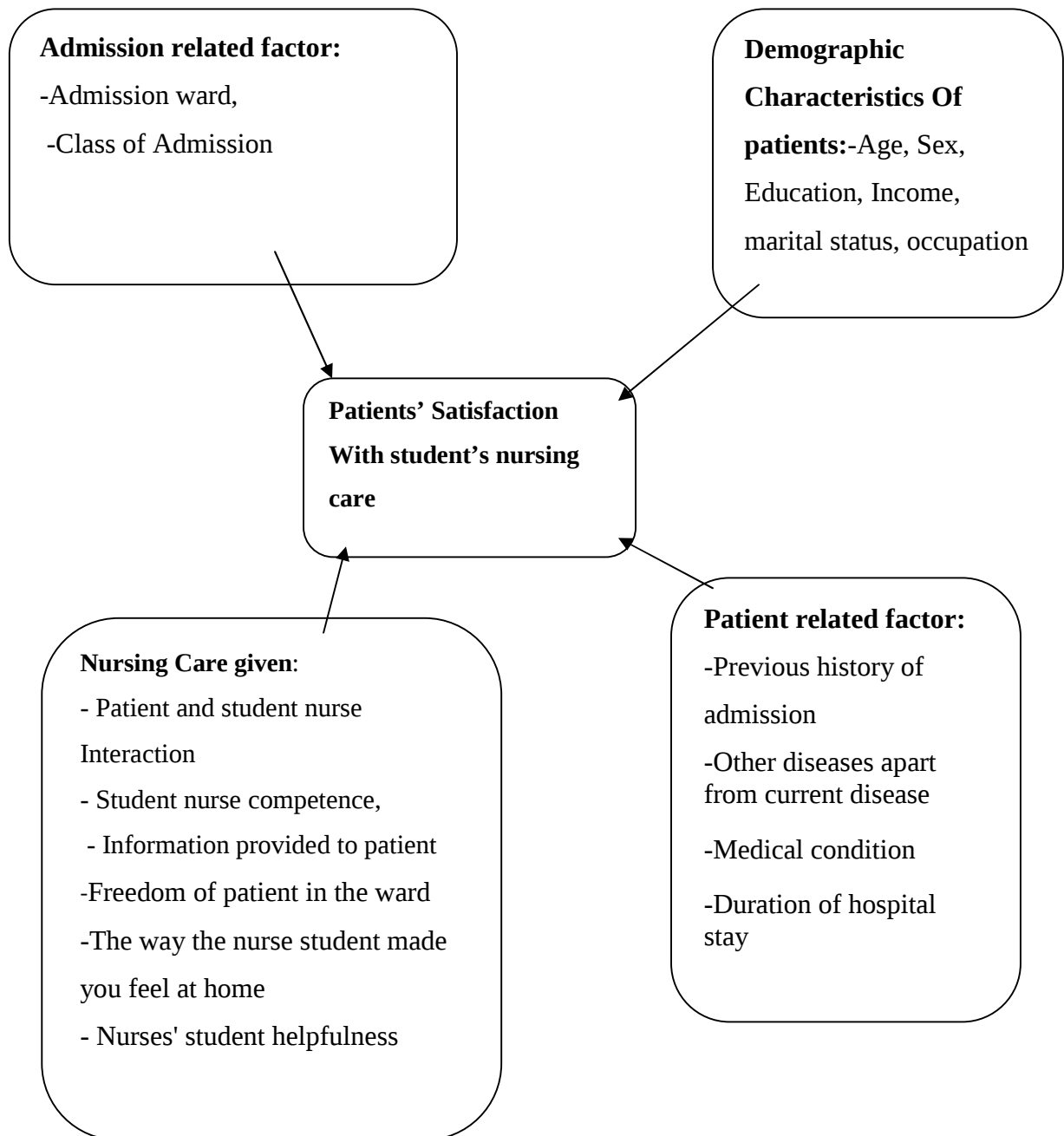


Figure 1: Conceptual framework on patient satisfaction (adopted and modified from Bekele Chaka, June 2005)

3. OBJECTIVES

3.1 General objective

- To assess patient satisfaction on nursing care provided by nursing student in Black lion hospital ,Addis Ababa ,Ethiopia ,2015.

3.2 Specific objectives

- To determine patient satisfaction on nursing care provided by student nurses in Black lion hospital ,Addis Ababa ,Ethiopia ,2015.
- To assess associated factors influencing patient satisfaction on student nursing care in Black lion hospital, Addis Ababa, Ethiopia, 2015.

4. Method and material

4.1. Study area

The study was conducted in Black lion Specialized hospital. Black Lion Specialized Hospital is found in Addis Ababa City, Lideta Sub City which is the last referral hospital in Ethiopia. According to data from the hospital's administrative unit, the hospital was inaugurated in 1964 E.C. This hospital sees approximately 370,000 – 400,000 patients a year but the exact number is not known. They have 625 beds with 130 specialists, 50 non teaching doctors and 721 nursing staff. Black lion(BLH) hospital is a specialized referral teaching hospital which is managed by Addis Ababa University (AAU).The hospital provides multi-dimensional aspects of care to clients who need health care service including ; pediatrics, medical, surgical, gynecological and other services. The hospital also have special units (Referral clinics), those are Chest, Renal, Neurology, Cardiology, Dermatology and Sexually Transmitted Diseases, Gastrointestinal, Infectious Diseases, Orthopedics, General Surgical, Gynecologic and Obstetrics, Diabetic, Hematology and Medical ICU. There were 21, 670 admitted patients within half a year from July to December 2014. The data collection was conducted from April 5 – May 5/ 2015.

4.2. Study design

Institution based Cross-Sectional study design was used.

4.3. Source Population

Patients who are all admitted to the wards in Black lion Specialized hospital was our source population.

4.4. Study Population

Sampled patients' who were admitted to selected wards for this study in Black lion Specialized hospital at the time of data collection.

4.5. Eligibility criteria

4.5.1. Inclusion criteria

- a. Patients who were admitted in medical, surgical and gynecological ward

- b. Patient's whose age were being 18 years or above
- c. Patients who were stayed in the ward for two day/nights or more
- d. Patients who reported receiving of care from student.

4.5.2. Exclusive Criteria

- a. Patient who were unable to respond or communicate.
- b. Severely ill patients.
- c. Patients who were admitted in ICU, pediatric and oncology ward.

4.6. Sample size and sampling procedure

4.6.1. Sample size determination

The sample size for this particular study was calculated using formula for a single population proportion considering the following assumptions.

Assumptions: A 95% confidence level, margin of error (0.05), proportion of patient satisfaction on nursing care ($p=67.1\%$, from previous study(27)) is substituted in the following single population proportion formula.

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

$$d^2$$

$$= \frac{(1.96)^2 (0.671) (0.329)}{(0.05)^2} = 339$$

$$(0.05)^2$$

Where n= required sample size

Z= = critical value for normal distribution at 95% confidence level which equals to

1.96 (z value at $\alpha = 0.05$)

P= (Proportion of patient satisfaction on nursing care 67.1%)

d= 0.05 (5% margin of error); and adding non-response rate 10%.

The total sample size is 373

4.6.2. Sampling technique and procedure

Since the large numbers of student were assigned in medical, surgical and gynecological ward, these three wards were selected purposefully but pediatric ward was not selected due to the respondent were not direct care receivers. The total sample size (n=373) was allocated proportionally in each ward according to the total number of beds in medical, surgical and gynecological wards. Through using a systematic random sampling technique, sample patients who stayed in the study wards for at least 2 nights was invited to the survey. By taking the number of patients who were admitted in the study ward for the last 3 month, number of patient expected in one month was estimated and then it was divided by sample size of each ward to get the interval. Then, K=2 for each ward (i.e. $306/160 \approx 2, 279/137 \approx 2, 141/76 \approx 2$). The first patients was selected by lottery method from their order of registration and then every other patient who had received care were selected and only those on the list was approached consecutively.

The sample size for each ward was determined by proportionate allocation formula:

$$n_j = \frac{n \times N_j}{N} \text{ where}$$

n_j = is sample size of the ward

N_j = is number of bed in the ward

n = is the total sample size (373) and

N = total number of bed (330)

$$n_{\text{medical}} = \frac{373 \times 121}{330} = 137$$

$$n_{\text{surgical}} = \frac{373 \times 67}{330} = 76 \text{ and}$$

$$n_{\text{gyn/obs}} = \frac{373 \times 142}{330} = 160$$

Accordingly 137 from medical ward 76 from surgical ward 160 from obstetrics and gynecology will be taken.

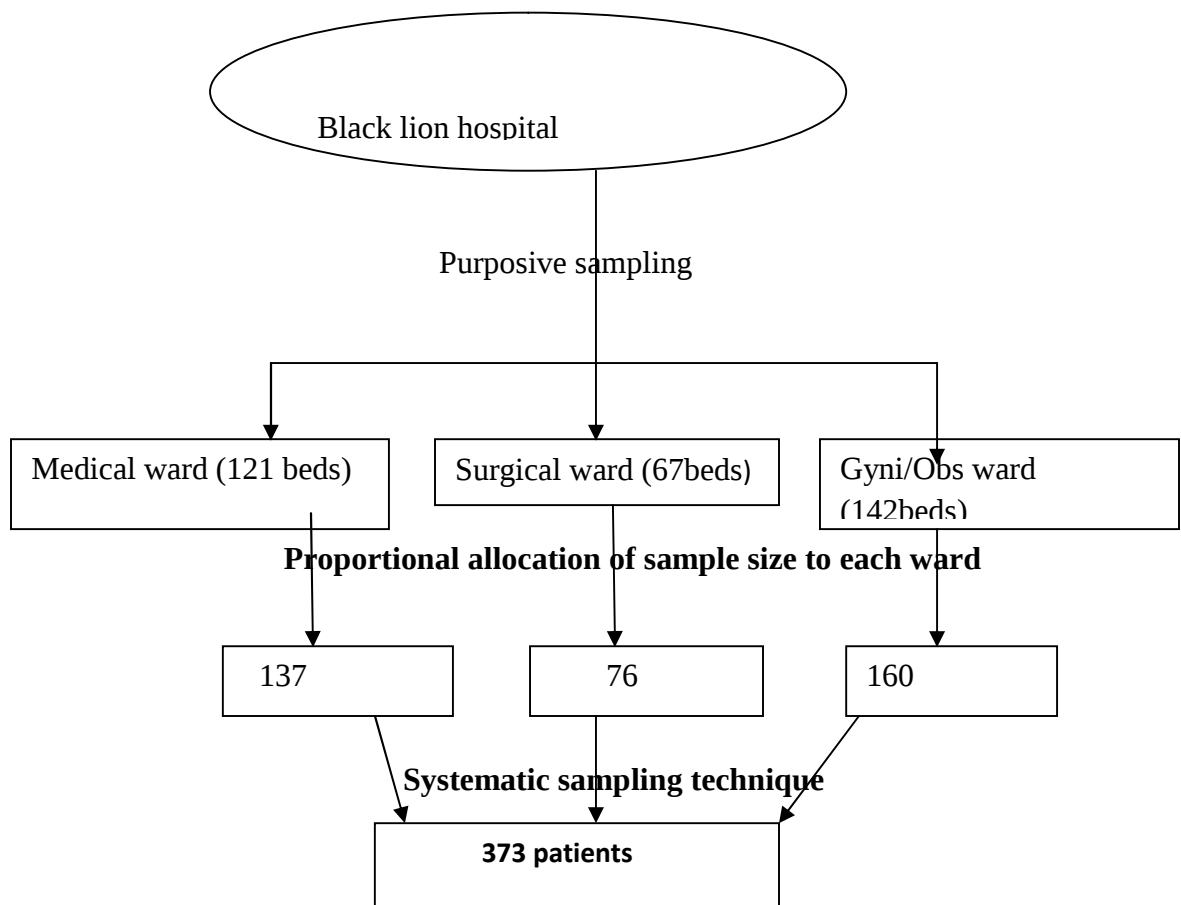


Figure 2: Schematic presentation of sampling procedure

4.7. Data collection instrument and procedures

4.7.1. Data collection methods and instrument

The data collection was collected by using structured interviewer administered questionnaire. The instrument was modified Newcastle Satisfaction with Nursing Scale (NSNS) that was formerly used in a related study conducted in Addis Ababa (Bekele Chaka, June 2005). It was modified for use in the current study depending on various patient satisfactions with nursing care tools used in different studies and presented in the contemporary health care literature.

The instrument had four parts. Part I- socio demographic characteristics of patient, part II-patient and admission related characteristics of patients, part III-patient satisfaction scale and part IV-patient general evaluation of the nursing care they received during their stay at the study wards

This questionnaire had a modified 18-items instrument that was employed in this study to determine selected patients' satisfaction with student's nursing care they received during their stay across various aspects of nursing care services. All the items were scored on a five-point Likert scale ranging from 1 = not at all satisfied, 2 = barely satisfied, 3 = neutral, 4 = satisfied and 5 = very satisfied). Participants was asked to rate their satisfaction with the various aspects of nursing care by selecting only one number that best describes their opinion on each item of the scale.

4.7.2. Data Collection Procedure

The data was collected from the study hospitals in one month by four diploma nurse and controlled by one supervisor who was not involved in patient care in the same ward. The data collector was interviewed the patient without wearing the gown in order to reduce bias. The items on the instrument were administered to the participants after they were translated into Amharic and back to English to keep its consistency.

The study participants were asked whether or not they are able to differentiate nursing student from nursing staff and other health professionals. If not, the data collectors were explained the activity and wearing style of nursing student to the participants, to help them to differentiate the nursing student before interview was conducted. They also instructed about what the items meant and how they could respond to them.

4.8.Data Quality Assurance

Pre-test was conducted on 5% of sample size of patients' in Zewditu memorial hospital 2weeks before data collection to make sure clarity of the questioner, after which correction of concepts and statements were made. The quality of data were ensured through training of data collectors, regular supervision, immediate feedback, spot checking and reviewing each of completed questionnaires daily was carried out by the principal investigator to maintain data quality. The questionnaire was prepared in English and translated into Amharic language and then back to English to keep its consistency. Data collectors were trained for one day. Epi-data version 3.1 was used to cleaned up and prevent data entry errors.

4.8.1. Study variable

4.8.2. Dependent variable

- ❖ Patient Satisfaction

4.8.3. Independent variables

✓ Socio demographic characteristics

- ❖ age
- ❖ gender
- ❖ income
- ❖ education
- ✓ patient and admission related factor**
- ❖ admission Ward
- ❖ class of admission
- ❖ having other diseases apart from current diseases
- ❖ previous history of admission
- ✓ Nursing care provided**
- ❖ Patient and student nurse Interaction
- ❖ Student nurse competence
- ❖ Information provided to patient
- ❖ Freedom of patient in the ward
- ❖ Privacy provided to patient
- ❖ the way the nurse student made you feel at home
- ❖ Nurses' student helpfulness

4.10. Operational definitions

Nursing staff: refers to senior nurses and junior nurses who are recruited and worked in hospitals under study

Nursing student: student joined in higher institutions to study nursing profession and assigned to wards at Black lion hospital for their practice.

Class of admission: level of admission (1st, 2nd and 3rd)

1st Class: rooms having only one bed

2nd class: rooms having two beds

3rd class: rooms having six and above bed.

Other disease: patients who reported having other disease apart from the main admission case.

Acute condition: patients who reported that experiencing of the admission case for less than 30 day.

Chronic condition: patients who reported that experiencing of the admission case for 30 day and above.

History of previous admission: patients who reported having history of admission in any hospital before admitting in the current ward.

Patient and student nurse Interaction: communicating and sharing ideas during the time of practice regarding the care.

Student nurse competence: student demonstrate sound nursing knowledge and practice and also have good knowledge of individual patient's condition and treatment.

For satisfaction scale items

- **Satisfied:** participants who respond as satisfied / very satisfied for satisfaction items.
- **Not satisfied:** participants who respond as not at all / barely / neutral for satisfaction items

Patients overall satisfaction level: by summing up the response of 18 satisfaction questions those who scored points more than the mean score were categorized as satisfied and those who scored less than mean score were categorized as not satisfied.

4.11. Data analysis procedures

Collected data were coded, checked for completeness and consistency. Then the data was entered into EPI data (version 3.1) and data analysis process was performed using SPSS (Statistical Package for Social Sciences, version 20).

Descriptive and bivariate analyses were computed to see the frequency distribution and to test whether there is association between dependent variable and selected independent variables respectively. Factors associated with patient satisfaction at bivariate analysis were identified and the variables with p-value of less than 0.25 and variables that are found to affect satisfaction from other studies were taken to multivariate logistic regression analysis and the model was built with enter method. Finally, the p-values < 0.05 were considered statistically significant.

4.12. Ethical Consideration

Ethical approval and clearance were obtained from Institutional Review Board (IRB) of Department of Nursing and Midwifery, School of Allied Health Sciences, college of Allied Health Sciences, Addis Ababa University.

Supportive letter were obtained from Department of Nursing and Midwifery to Black lion hospital to obtain permission to collect the data. Permission to conduct the study was also requested from Black lion hospital. Informed consent had been asked to the study participant to confirm willingness for participation after explaining the objective of the study. The respondents have also the right to refuse or terminate at any point of time. The information provided by each respondent was kept confidential through anonymous recording and coding of questionnaire.

4.13. Dissemination of the result

Final document of the study will be given to Department of nursing and midwifery, Addis Ababa University, Addis Ababa health bureau and MOH. The thesis will be presented to school of nursing and midwifery as it is a partial fulfillment of Master of Science in child health nursing. Attempt will be made to present at Ethiopian nursing association annual conference and for publication of the research on reputable Journal

5. Result

5.1 Socio-demographic characteristics of respondents

A total of 373 participants included in the study, of which 365 gave responses to the study items completely, which made the response rate of the study to be 97.9%. Among the participant 250(68.5%) were females and the mean age of the participant was 37.6 (SD=15.6) with 146 (40.0%) of the participants were in the age group of 18-30 years. The majority of the respondent 203(55.6%) were married, 156(42.7%) were orthodox Christian in religion and Oromo and Amhara accounts 33.8%, 30.4% respectively. Significant number of the participants 111(30.4%) had no formal education, whereas 90 (24.7%) of the participants were housewife and 189(51.8%) were living in urban. On the other hand, 209(57.3%) of them earn <500 ETB a month, with their mean monthly earning being 1199.4Ethiopian Birr (SD±1666.8) (Table 1).

Table 1: Socio-demographic Characteristics of patients' in Black lion hospital, Addis Ababa, Ethiopia, April 5 – May5/ 2015 (n=365).

Respondents' Characteristics	Frequency(N)	Percentage (%)
Sex		
Male	115	31.5
Female	250	68.5
Age		
18-30 yrs	146	40.0
31-40 yrs	94	25.8
41-50 yrs	53	14.5
51-60 yrs	34	9.3
≥ 61 yrs	38	10.4
Marital status		
Married	203	55.6
Single	89	24.4
Divorced	34	9.3
Widowed	34	9.3
Separated	5	1.4
Religion		
Orthodox	156	42.7
Muslim	109	29.9
Catholic	19	5.2
Protestant	81	22.2
Ethnicity		
Amhara	108	30.4
Oromo	120	33.8
Tigrie	49	13.8
Gurage	78	22.0
Others*	10	2.7
Educational status		
No formal education	111	30.4
Primary school	84	23.0
Secondary School	92	25.2
College Diploma and above	78	21.4

Occupation		
Government employee	45	12.3
NGO employee	27	7.4
Farmer	67	18.4
Private employee	88	24.1
House wife	90	24.7
Others (student)	48	13.2
Residence		
Urban	189	51.8
Rural	176	48.2
Income (In ETB)		
≤ 500 birr	209	57.3
501-1500 birr	59	16.2
1501-2500 birr	30	8.2
≥ 2501 birr	67	18.4

*= silte,sidama

5.2 Patient and Admission Related Characteristics

Regarding the patient and admission related characteristics, majority of participant were admitted Gyni/obs 160(43.8%) and 129(35.3%) in medical ward. Among the participant 254(69.6%) were admitted in the third class.

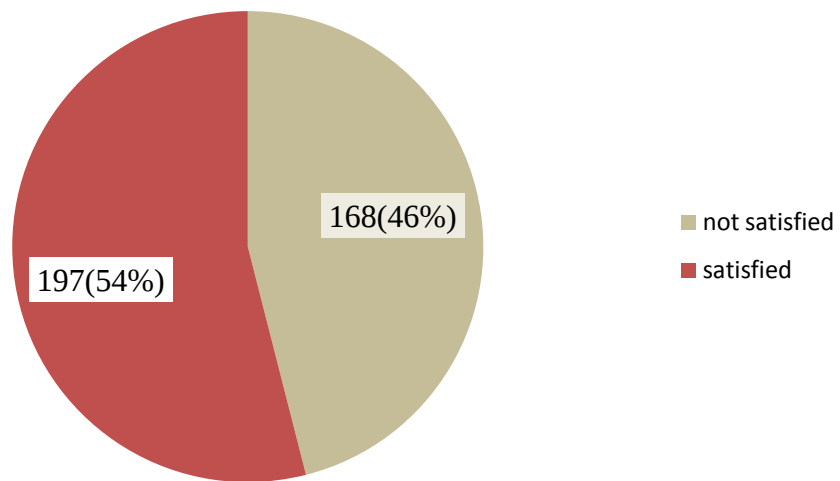
Concerning service 202(55.3%) of the participants received the services free of charge. Regarding the participants' history of admission 230(63.0%) of them were not previously admitted, while a considerable number of them, 214 (58.6%) were under acute illness conditions. Moreover 306(83.8%) of patient did not have other diseases apart from to current health problem.

Finally, 168(46.0%) of the participants stayed in the study hospitals for 2-10 night, with the mean length of stays (nights) 15.3 (SD±13.8) (Table 2).

Table 2: Patient and admission-related characteristics of the participants, in Black lion hospital, Addis Ababa, Ethiopia, April 5 – May5/ 2015 (n=365).

Respondents'	frequency(n=365)	Percentage (%)
Characteristics		
Admission ward		
Medical	129	35.5
Surgical	76	20.8
Obs/gyni	160	43.8
Class of admission		
First	17	4.7
Second	94	25.8
Third	254	69.6
Number of days (nights)		
stayed in hospital		
2-10	168	46
11-21	124	34
>22	73	20
Ward Service Type		
Free	202	55.3
Payment	163	44.7
History of previous		
admission	135	37.0
Yes	230	63.0
No		
Medical Conditions		
Acute Conditions	214	58.6
Chronic conditions	151	41.4
Other disease/s in addition		
to current health problem		
Yes	59	16.2
No	306	83.8

patient satisfaction



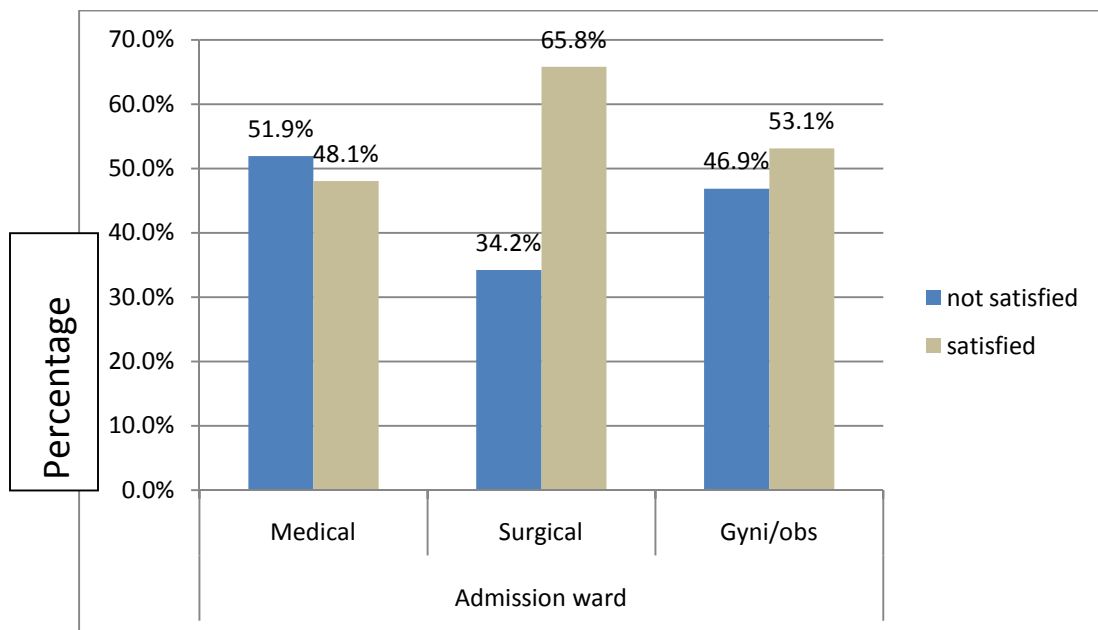


Table 3:Frequency distribution of satisfied/not Satisfied Patients with the different aspects of nursing care services in Black lion hospital, Addis Ababa, Ethiopia, April 5 – May5/ 2015 (n=365).

Items	S	NS
	NO (%)	NO (%)
The amount of time nurse student spent with you	275(75.1)	91(24.9)
How capable nurse student were at their job	218(59.7)	147(40.3)
The amount nurse student knew about your care	63(17.3)	302(82.3)
How quickly nurse student came when you called for them	283(77.5)	82(22.5)
The way the nurse student made you feel at home	177(48.5)	188(51.5)
The information nurse student gave to you about your condition and treatment	82(22.5)	283(77.5)
How often nurse student checked to see if you were well	236(64.7)	129(35.3)
Nurse student' helpfulness	240(65.8)	125(34.2)
The way nurse student explained things to you	215(58.9)	150(41.1)
How nurse student helped put your relatives' or friends' minds at rest	159(43.6)	206(56.4)
Nurse student' manner in going about their work	307(84.1)	58(15.9)
The type of information nurse student gave to you about your condition and treatment	46(12.6)	319(87.4)
Nurse student' treatment of you as an individual	306(83.6)	60(16.4)
How nurse student listened to your worries and concerns)	124(34)	241(66)
The freedom you were given on the ward	305(83.6)	60(16.4)
How willing nurse student were to respond to your requests	205(56.2)	160(43.8)
The of privacy nurse student gave you	270(74)	95(26)
Nurse student' awareness of your needs	113(31)	252(69)

S=satisfied and NS=Not satisfied

5.4: Patients' general Opinions on the students' nursing care services

The opinions of study participants on the general nursing care they received during their stay at the wards met their expectations were 33 (9.0%), while 185 (50.7 %) of the participants were overall satisfied with the nursing care services they received at the study hospitals.

Hundred forty two (38.9%) of the participants were recommend their family and friends to visit the hospitals they stayed and 270 (74.0%) participants want to come back if they get sick again and need hospitalization(Table4)

Table 4:The Patients' responses on the general opinions of the students' nursing care Services in Black lion hospital, Addis Ababa, Ethiopia, April 5 – May5/ 2015 (n=365)

General Opinions	Strongly Agree/Agree	Uncertain/Disagree/Strongly Disagree
Overall, the nursing care I received met my expectations	33(9.0%)	332(91.0%)
Overall, I am satisfied with the nursing care services I received at this hospital	185(50.7%)	180(49.3%)
I will recommend this hospital to my family and friends	142(38.9%)	223(61.1%)
If I get sick again and need hospitalization, I want to come back to this hospital	270(74.0%)	95(26.0%)

5.5. Regression analysis on patients' satisfaction with student nursing care and selected variables

The results from binary logistic analyses showed that there were no association between majority of socio demographic characteristics and class of admission with patients' overall satisfaction with student nursing care .However, there were relationship between educational status, place of residence, ward service type, history of previous admission, having other disease/s in addition to current health problem and medical conditions with patients' overall satisfaction with nursing care (p-value< 0.05). The explanatory variables (p-value <0.25) were entered again into multiple logistic regression analysis to control confounding. The independent variables with p-value <0.05 in multiple logistic regression analysis were taken as significant predictors of patients' satisfaction. So that among a number of socio-demographic and patient and admission related factors included in this study educational status, number of days (nights) stayed in hospital, history of previous admission, having other disease/s in addition to current health problem and medical conditions were found to be statistically significant predictors of patients' satisfaction(table5).

The regression analysis indicated that patients who had primary school were 4.9 times more likely to be satisfied than those who had College Diploma and above (AOR =4.9& 95% CI=1.744-14.197). On the question of history of previous admission, the regression result showed that patients who had previous admission were 2.0 times more likely to be satisfied than those who didn't had previous admission (AOR =2.01& 95% CI=1.100-3.694) .patients who were under acute conditions were2.7 times more likely to be satisfied than those under chronic illness conditions (AOR =2.7& 95% CI=1.320-5.462).

Regarding number of days (nights) stayed in hospital, those patients who stayed for 2-10 night were less likely to be satisfied(AOR =0.436& 95% CI=0.209-.909) compared to those stayed for >22 nights. Finally patients who had other diseases in addition to current health problem were less likely to be satisfied (AOR =0.273& 95% CI= 0.139-.536) than those who didn't had (Table5).

Table 5:Bivariate and multivariate logistic regression analysis of patients’ overall satisfaction with student nursing care services in Black lion hospital, Addis Ababa, Ethiopia, April 5 – May5/ 2015 (n=365).

Variable	Patient satisfaction			
	Satisfied	not	COR (95 % CI)	AOR (95 % CI)
	No (%)	satisfied No (%)		
Age				
18-30 yrs	69(47.3)	77(52.7)	0.414(.194-.882)	0.433(.158-1.188)
31-40 yrs	48(51.1)	46(48.9)	0.482(.218-1.066)	0.458(.168-1.247)
41-50 yrs	32(60.4)	21(39.6)	0.703(.292-1.692)	0.566(.201-1.592)
51-60 yrs	22(64.7)	12(35.3)	0.846(.317-2.257)	0.876(.284-2.704)
≥ 61 yrs	26(68.4)	12(31.6)	1.00	1.00
Educational status				
No formal education	72(64.9)	39(35.1)	4.699(2.506-8.811)	2.706(.893-8.196)
Primary school	56(66.7)	28(33.3)	5.091(2.605-9.950)	4.976(1.744-14.197)*
Secondary School	47(51.1)	45(48.9)	2.659(1.401-5.045)	2.549(.962-6.756)
College Diploma and above	22(28.2)	56(71.8)	1.00	1.00
Occupation				
Government employee	15(33.3)	30(66.7)	0.389(0.168-.903)	1.614(.288-9.051)
NGO employee	8(29.6)	19(70.4)	0.327(.120-.894)	0.896(.136-5.920)
Farmer	45(67.2)	22(32.8)	1.591(.740-3.419)	0.712(.251-2.020)
Private employee	47(53.6)	41(46.6)	0.892(.439-1.809)	0.847(.232-3.101)
House wife	55(61.1)	35(38.9)	1.222(.601-2.487)	0.934(.386-2.260)
Others (student)	27(56.2)	21(43.8)	1.00	1.00
Residence				
Urban	79(41.8)	110(58.2)	0.353(.230-.541)	0.532(0.280-1.012)
Rural	118(67.0)	58(33.0)	1.00	1.00
Income (In ETB)				
≤ 500birr	129(61.7)	80(38.3)	3.789(2.094-6.856)	1.420(.309-6.524)
501-1500 birr	35(59.3)	24(40.7)	3.427(1.640-7.164)	1.629(.450-5.897)
1501-2500 birr	13(43.3)	17(56.7)	1.797(.737-4.384)	0.949(.254-3.548)
≥ 2501 birr	20(29.9)	47(70.1)	1.00	1.00
Admission ward				

Medical	62(48.1)	67(51.9)	0.817(.513-1.299)	0.900(.508-1.596)
Surgical	50(65.8)	26(34.2)	1.697(.963-2.990)	1.521(0.769-3.008)
Obs/gyni	85(53.1)	75(46.9)	1.00	1.00
Number of days (nights) stayed in hospital				
2-10	70(41.7)	98(58.3)	0.419(.238-.738)	0.436(.209-.909)*
11-21	81(65.3)	43(34.7)	1.106(.606-2.019)	1.360(.678-2.729)
≥22	46(63.0)	27(37.0)	1.00	1.00
Ward Service Type				
Free	126(62.4)	76(37.6)	2.148(1.411-3.271)	1.040(.579-1.871)
Payment	71(43.6)	92(56.4)	1.00	1.00
History of previous admission				
Yes	87(64.4)	48(35.6)	1.977(1.277-3.061)	2.015(1.100-3.694)*
No	110(47.8)	1206(52.2)	1.00	1.00
Other disease/s in addition to current health problem				
Yes	23(39.0)	36(61.0)	0.485(.274-.857)	0.273(.139-.536)*
No	174(56.9)	132(43.1)	1.00	1.00
Medical Conditions				
Acute Illness/Conditions	105(49.1)	109(50.9)	0.618(.405-.943)	2.686(1.320-5.462)*
Chronic Illness/conditions	92(60.9)	59(39.1)	1.00	1.00

Note: * statistically significant at P <0.05 and 1=Reference

6. Discussions

The overall proportion of patients who were satisfied with student nursing care in this study was 54%. This percentage is lower compared to other studies in India on patient's satisfaction revealed about 58%(17) and Jordan(77%)(14), study done northwest Ethiopia the overall satisfaction was found to be 67.1%(13). The difference might be from low skill and knowledge competency of student as compared to established and experienced nurses. However it is greater than a study in study undergone in Ghana(33%) (5) and Pakistan revealed 45 %(1) patients were satisfied with care provided. The difference could be due to subjective nature of satisfaction, and/or study period difference.

The findings of this study showed that there was no relationship between most of socio demographic variables including age, marital status ,occupation ,ethnicity, income ,place of residence and patients overall satisfaction with student nursing care. This could be due to the fact that most of socio demographic variables did not affect overall level of satisfaction; hence they did not influence patient's expectations.

Concerning marital status this study showed that 55.7% married patient was satisfied than 48.3% of single and 41.2% of divorced patients'. This is in agreement with finding in Turkey that married patients' satisfaction levels are higher than those of widows and divorced patients' (19). This might be due to more than half of the patient was married and the social support and care that married patients receive from their spouses and children might decrease their care needs and expectation levels.

On other hand this study revealed that patients who had primary school were 4.9 times more likely to be satisfied than those who had college diploma and above (AOR =4.9& 95% CI=1.744-14.197). This is in line with previous studies done in Turkey(33) and finding in Iran that the highest level of satisfaction in belonged to illiterate and patients with low educational status(18). This may be due to patients who are highly educated might expect a higher standard care than lower education status patients. However it was incongruent with the study in Brazil(34).

Income has been connected with greater satisfaction. people with lower income report more problems in hospital and reports dissatisfaction(17). But the findings of this study showed that 61.7% of patients who had 500 birr/month and below income compared to 29.9% of patients who

had 2501 birr/month and above were satisfied which is nearly consistent with previous study done in Addis Ababa(28). This might be because of more than half of respondents had very low monthly income (<500birr) and nursing service didn't require much expense.

Patients' number of night spent in the ward had an association with patients' satisfaction. In this study those patients' who spent (2-10 night) were less likely to be satisfied than those ≥ 22 night (AOR = 0.436 & 95% CI = 0.209-.909). This was not in agreement with a study done in Brazil(34) and in Addis Ababa, those patient who spent 11 to 22 night and >22 night were less satisfied than those who spent <10 day(29). This could be due to nursing care can be done in line with other intervention including medical and surgical decision; laboratory and x-ray result that could not be completed within in a week time interval.

A study conducted in north west Ethiopia patients who earned free hospital services were more likely satisfied compared to those who paid for the services(27). Similarly this study found that 62.4% patients with free service more satisfied than 43.6% paid patient. This might be due to the difference in expectation in accordance with the cost they paid.

This finding indicates that patients' who had history of previous admission were 2.02 times more likely to be satisfied than those who didn't had (AOR = 2.02 & 95% CI = 1.100-3.694). This is clearly consistent with the findings in Addis Ababa(28) and study conducted in Iran showed that Patients with a history of admission to hospital were more satisfied with nursing care than those who did not(8). This might be due to hospitalizations increase patients' opportunities for receiving care and also helpful for comparing and observing their caring behaviors'.

In this study, patients' who had other diseases in addition to current health problem were less likely to be satisfied (AOR = 0.273 & 95% CI = 0.139-0.536) than those who did not had. This is in line with study in Jordan revealed patients' with no other diseases tended to have higher satisfaction than those with other diseases(14). This could be due to the fact that those patients' with other disease apart from the current health problem needs extra nursing care and follow up.

Moreover, patients who were under acute condition were 2.7 times more likely to be satisfied than those under chronic condition ($AOR=2.7$ & $95\%CI=1.320-5.462$). But it was not consistent with finding in north west Ethiopia in which patients who were under acute illness conditions were less likely to report overall satisfaction with nursing care services than those under chronic conditions(13). This might be due to as acutely ill patient might need strict follow up and supervision than the chronic one, so that students and nurses will be around them and allocate more time and provide more care to them.

Regarding satisfaction scale different literature revealed the amount and type of information nurses gave to patients about their condition and treatment were a major cause of dissatisfaction (5, 29, 30). Similarly in this study the amount nurse student knew about patient care, the amount and type of information given to patients about their condition and treatment 63 (17.3), 82(22.5), 46(12.6) %) respectively found to be the least satisfaction score which was is congruent with study in Ghana(5), north west Ethiopia in selected hospital(13) and public hospital in Addis Ababa(28).This might be due to the fact that students' inability to understand the case or quality of nursing care resulting from low provider competence.

Patients' who have got freedom 305 (83.6%), treatment of you as an individual 306 (83.6%) and came quickly when you called for them 283(77.5%) were the aspects of nursing care services which were satisfied with the highest proportion of the study participants. However this was not in line with finding in Jordan patients had low levels of satisfaction with the speed of nurses' response to their calls, the amount of freedom in the ward, nurses' willingness to respond to requests, and in treating patients as individuals(14). But this is in most cases congruent with previous studies(13, 28).

Furthermore this study also revealed patients are more satisfied with the caring behaviors of the students which is in agreement with the study conducted in Iran(36) and Malaysia(3).This could be due to students' are desperate to apply theoretical value in practical setting.

7. Strength and Limitation of the study

217.1. Strength of the study

- Used well structured questionnaire from validated survey instruments
- Participation of patients' was also generally satisfactory with 97.9% response rate
- Since interview was made with admitted patients, patients who stay for a long period of time were not missed.

7.2 Limitation of the study

- Since the study was cross sectional, it shows only temporal relationship between variables (inability to infer causality).
- Since level of student were not known by respondent it was difficult to see the relationship between levels of student with patients' satisfaction.
- Patients' were not interviewed at sites away from the health facility. So, social desirability bias is also likely as the respondents were interviewed at their beds.
- Satisfaction ratings were collected through face-to-face interviews which might be subjected to response biases
- Due to the fact that no studies conducted on student service so far in Ethiopia , no enough literature to discuss with Ethiopian context .

8. Conclusion and Recommendation

8.1 Conclusions

A little over half or 54% of the study participants were satisfied with the overall students' nursing care services; however, considerable proportions were not satisfied.

The information provision and communication skills and the awareness about patient care and patient needs at the study hospitals were found to be weaker.

On other hand, the freedom and privacy given to patients in the wards, student behavior and cooperation and responding quickly were important area of nursing care services with the highest satisfaction score.

This study also revealed educational status, number of night spent in the ward, history of previous admission, having other diseases in addition to current health problem and medical condition were found to be statistically associated with the patients' overall satisfaction with nursing care services.

8.2 Recommendation

- Teaching institution in particular instructor should give emphasis for regular in-service education programme for student to refresh, up-to-date knowledge and skill on different aspects of patients care.
- Nursing school and college should work in collaboration with hospital for facilitating students' learning and achieving educational goals in turn beneficiary for patients' satisfaction.
- Student behavior and cooperation and responding quickly were important area of nursing care services with strongest quality of healthcare services that should be continued and encouraged more.
- Student should aware and informed of extra care for those patient with co morbidity
- Nursing school and college should be strengthened regarding skills training for their student
- The future researcher should do an exit interview and qualitative study so as to minimize social desirability bias and to identify further confounder.

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Appendix

Appendix I: Participant Information Sheet

Good morning/ afternoon?

My name is _____. Currently I am a graduate student at Addis Ababa University, College of Health Sciences, School of Allied Health Sciences, Department of Nursing and Midwifery. And now I am conducting a research to assess satisfaction of patients' on nursing care provided by nursing student in black lion specialized hospital

Title of the research: assessment of satisfaction of patients 'on nursing care provided by nursing student in Black lion hospital, Addis Ababa, Ethiopia, 2015

Objective: To assess patient satisfaction on nursing care provided by nursing student in Black lion hospital ,Addis Ababa ,Ethiopia ,2015

Participants: Randomly selected patients' who have stayed two day in study ward

Potential Risks: There is no foreseen risk by being in this study.

Benefits: No financial benefits are related with this study. But by participating in this study, you will give an input for service provision in the hospital.

I would like to ask you few questions. Your honest response to the questions can make the study to achieve its objective. All the information that you give will be kept confidential and private. Only the principal investigator and interviewer will have access to the information. You are kindly requested to respond voluntarily. You can also choose not to participate in this study totally or if you become uncomfortable during the study, you will be allowed to leave the study at any time. At any time that you have questions, you can contact me by using the following addresses.

Amare Wondim,

Mobile: 09 13 76 87 82

E-mail:amarewondim556@gmail.com

Appendix II: Informed consent

Addis Ababa University

College of Health Sciences

School of Allied Health Sciences

Department of Nursing and Midwifery

I here with declare that:

- The objectives of this study are explained to me and are clear.
- The contents of the consent are verified to me to participate in the study.

I understand that participation in this study is completely voluntary and that I may withdraw at any time without supplying reasons. I agree to participate in this study to be interviewed, provided my privacy is guaranteed. When signing this consent form to participate in the study, I promise to answer honestly to all reasonable questions and not provide any false information or in any other way purposely mislead the researcher.

Respondent's signature_____

If no, skip to the next participant

Date of interview: _____ Time started: _____ Time finished: _____

Interviewer Name_____Signature_____Date_____

Supervisor's name _____ signature _____

Thank you

Appendix III: English version Questionnaire

Questionnaire ID number-----

Note: Encircle from the given option and write if any other idea

Section I: Socio-Demographic Characteristics of the respondent (patient's)

No	Question	Response
101	Sex	1. Male 2. Female
102	Age in years	
103	Marital status	1. Married 2. Single 3. Divorced 4. widow 5. Separated
104	Religion	1. Orthodox 2. Muslim 3. Catholic 4. Protestant 5.) Others(specify-----
105	Ethnicity	1. Amhara 2. Oromo 3. Tigrie 4. Gurage 5. Others
106	Educational status	1. No formal education 2. Primary school 3. Secondary School 4. College Diploma and above
107	Occupation	1. Government employee 2. NGO employee 3. Farmer 4. Private employee 5. House wife 6. Others(specify)-----
108	Place of residence	1. Urban 2. Rural
109	Income (In ETB)	

Section II: Patient-related (admission-related) Characteristics of the Participants

201	Admission ward	1. Medical 2. Surgical 3. Gyni/obs
202	class of admission	4. First 5. Second 6. Third
203	Number of days (nights) stayed in hospital	
204	Ward Service Type	1. Free 2. Payment
205	History of admission	1. Yes 2. No
206	Have you other disease/s in addition to current health problem?	1. Yes 2. No
207	Medical Conditions	1. Acute Illness/Conditions 2. Chronic Illness/conditions

Section III: Patient's satisfaction on nursing student care

No	Question	Not at all Satisfied	Barely satisfied	Neutral	Very satisfied	Completely satisfied
301	The amount of time nurses student spent with you					
302	How capable nurses student were at their job					
303	The nurses student knew about your care and giving physical comfort					
304	How quickly nurses student came when you called for them					
305	The way the nurses student made you feel at home					
306	The information nurses student gave to you about your condition and treatment					
307	How often nurses student checked to see if you were okay					
308	Nurses' student helpfulness					
309	The way nurses student explained things to you about continuity of care					
310	How nurses student helped put your relatives' or friends' minds at rest					
311	Nurses' student manner in going about their work					
312	The type of information nurses student gave to you about your condition and treatment					
313	Nurses' student treatment of you as an individual					
314	How nurses student listened to your worries and concerns					
315	The freedom you were given on the ward					
316	How willing nurses student were to respond to your requests					
317	The privacy that nurses student gave you					
318	Nurses student awareness of your needs and emotional and spiritual support					

Section IV: Patients' general Opinions of the nursing care services rendered at the study wards

No	Question	Strongly Disagree	disagree	Uncertain	agree	Strongly agree
401	Overall, the nursing care received met my expectations					
402	Overall, I am satisfied with the nursing care services I received at this hospital					
403	I will recommend this hospital to my family and friends.					
404	If I get sick again and need hospitalization, I want to come back to this hospital					

Appendix IV: የተሳታፊዎች መረጃ መስጫ ቅጽ-በአማርኛ

እንደምን አደሩ/ዋሉ?

አማረ ወንድም እባላለሁ። በአዲስ አበባ ዩኒቨርሲቲ፣ ጤና ሳይንስ ኮሌጅ፣ ነርሲንግና ሚድዌይድሪት ምህርት ክፍል በህፃናት ጤና የ2ኛ ዓመት የማስትሬት ድግሪ ተመራቂ ተማሪ ነኝ። በአሁኑ ሰዓት በጥቁር አንበሳ እስፔሻላይዝድ ሆስፒታል ተኝተው ለሚታክሙ ህሙማን ከነርስ ተማሪዎች ስላገኙት እንክብካቤ በማጥናት ላይ ነኝ።

የጥናቱ ርዕስ፡- በጥቁር አንበሳ እስፔሻላይዝድ ሆስፒታል ተኝተው ለሚታክሙ ህሙማን ከነርስ ተማሪዎች ስላገኙት እንክብካቤ፣ አዲስ አበባ፣ ኢትዮጵያ፣ 2007 ዓ.ም።

የጥናቱ ዓላማ፡- በጥቁር አንበሳ እስፔሻላይዝድ ሆስፒታል ተኝተው ለሚታክሙ ህሙማን ከነርስ ተማሪዎች ስላገኙት እንክብካቤ እና ተፅዕኖዎች ማወቅ

ተሳታፊዎች፡- በእጣ የወጡ እና ሁለት እና ከዚያ በላይ በመኝታ ክፍል የቆዩ ህሙማን

የጎንዮሽ ጉዳት፡- በዚህ ጥናት መሳተፍ ምንም አይነት ጉዳት የለውም።

ጥቅማ ጥቅም፡- በዚህ ጥናት መሳተፍ ምንም አይነት ገንዘብ አያስገኝም። ነገር ግን በዚህ ጥናት በመሳተፍዎ ለአገልግሎት አሰጣጥ መሻሻል ከፍተኛ አስተዋፅኦ ያደርጋሉ።

ስለዚህ የተወሰኑ ጥያቄዎችን ልጠይቅዎት እወዳለሁ። የእርስዎ በእውነት ላይ የተመሰረተ መልስ ለዚህ ጥናት መሳካት አስተዋፅኦ ያደርጋል። እርስዎ የሚሰጡት መረጃ ከአጥኚውና ቃለመጠይቅ አድራጊው በስተቀር በማንኛውም መልኩ ለሌላ 3ኛ ወገን ተላልፎ አይሰጥም። በሙሉ ፈቃደኝነት እንዲሳተፉ እየጠየቅሁ ያለመሳተፍ ወይም በማንኛውም ጊዜ ራስዎን ከጥናቱ የማግለል ሙሉ መብት አለዎት። ማንኛውም ጥያቄ ካለዎት በሚከተለው አድራሻዬ ማግኘት ይችላሉ።

አማረ ወንድም

ስ.ቁ. 091376 87 82

ኢ.ሜይል፡ amarewondim556@gmail.com

Appendix V: የስምምነት መግለጫ ፎርም - በአማርኛ

አዲስ አበባ ዩኒቨርሲቲ

ጤና ሳይንስ ኮሌጅ

ነርሲንግ እና ሚዲካል ሲፓርትመንት ድህረ ምረቃ ፕሮግራም

እኔ ከዚህ በታች የተገለፀው የዚህ ጥናት ዓላማ በደንብ የተብራራልኝ ሲሆን የጥናቱንም ዓላማ ተረድቻለሁ፡፡

በዚሁ ጥናት ላይ መሳተፍ በሙሉ ፈቃደኝነት ላይ የተመሰረተ መሆኑን በሚገባ የተረዳሁ ሲሆን በማንኛውም ጊዜ ከጥናቱ ራሴን የማግለል መብት እንዳለኝ አውቄአለሁ፡፡ ስለሆነም የምሰጠው መረጃ እስከተጠበቀ ድረስ በዚህ ጥናት ለመሳተፍ ተስማምቻለሁ፡፡ በዚህ ጥናት ለመሳተፍ ስምምነቴን ስገልፅ ለምጠየቀው ጥያቄ በእውነት ላይ የመሰረተ መልስ ለመስጠት የተስማማሁ መሆኔን አረጋግጣለሁ፡፡

የመረጃ ሰጪው ፊርማ _____

የመረጃ ሰብሳቢው ስም-----ፊርማ-----

የተቆጣጣሪ ስም -----ፊርማ-----

ቃለ መጠይቁ የተደረገበት ቀን -----የተጀመረበት ሰዓት-----ያለቀበት ሰዓት-----

አመሰግናለሁ!

Appendix VI: መጠይቅ - አማርኛ ቅጽ

አዲስ አበባ ዩኒቨርሲቲ ጤና ሳይንስ ኮሌጅ ነርቪንግ እና ሚድዋይሬሪ ዲፓርትመንት ድህረ ምረቃ ፕሮግራም

ይህ መጠይቅ ከዚህ ቀደም በተለያዩ ጥናቶች የተጠየቀ ነው። መጠይቁ ህመሙን ከነርስ ተማሪዎች ስላገኙት እንክብካቤ የሚያጠና ነው።

የመጠይቁ መለያ ቁጥር-----

ከተሰጡት አማራጮች ከርስዎ አስተያየት ጋር ተቀራራቢ የሆነውን አንዱን ብቻ በመምረጥ ተጨማሪ ሀሳብ ካለዎት ከጥያቄው ጎን ያስፍሩ ።

ክፍል አንድ:- የህመሙን አጠቃላይ ማሕበራዊ ሁኔታ

ቁጥር	ጥያቄ	ምላሽ
101	ፆታ	1. ወንድ 2. ሴት
102	እድሜ	
103	የጋብቻ ሁኔታ	1. ያላገባ/ች 2. ያገባ/ች 3. የተለያየ/ች 4. የሞተበት/ባት
104	የየትኛው ሀይማኖት ተከታይ ነዎት?	1. ኦርቶዶክስ 2. ሙስሊም 3. ካቶሊክ 4. ፕሮቴስታንት 5. ሌላ(ይጥቀሱ)

105	ብሔር	1. አማራ 2. ኦሮሞ 3. ትግሬ 4. ጉራጌ 5. ሌላ
106	የትምህርት ሁኔታ	1. መደበኛ ያልሆነ ትምህርት 2. የመጀመሪያ ደረጃ(1-8) 3. ሁለተኛ ደረጃ(9-12) 4. ኮሌጅ ዲፕሎማና ከዚያ በላይ
107	የሥራ ሁኔታ	1. የመንግስት ሰራተኛ 2. የግል ድርጅት ሰራተኛ 3. አርሶ አደር 4. የግል ተቀጣሪ 5. የቤት እመቤት 6. ሌላ(ይጥቀሱ)
108	የመኖሪያ ቦታ	1. ከተማ 2. ገጠር
109	ወርሃዊ ገቢ	

ክፍል ሁለት፡ህመማንን በተመለከተ

201	የመኝታ ክፍል	1. ሜዲካል 2. ሰርጅካል 3. ጋይኒ/ኦብስ
202	የመኝታ ማዕረግ	4. አንደኛ 5. ሁለተኛ 6. ሦስተኛ
203	በዚህ መኝታ ክፍል ውስጥ ምን ያህል ሌሊት አሳልፈዋል	
204	የአገልግሎት ዓይነት	1. ነፃ 2. ክፍያ
205	ከዚህ ቀደም ሆኖ ሆስፒታሉ ውስጥ ተኝተው ታክመው ያውቃሉ	1. አዎ 2. የለም
206	አሁን ተኝተው ከሚታከሙት ህመም ተጨማሪ ሌላ ህመም አለዎት	1. አዎ 2. የለም
207	የህመምዎ ሁኔታ	1. በቅርብ ጊዜ የጀመረ 2. የቆየ(ነባር) ህመም(>1ወር)

ክፍል ሦስት፡በዚህ መኝታ ክፍል ውስጥ እያሉ ከነርስ ተማሪዎች ስላገኙት እንክብካቤ የተሰማዎት ስሜት

ቁጥር	ጥያቄ	ሙሉ በሙሉ አላስደሰተኝም	አላስደሰተኝም	ገለልተኛ	በጣም አስደስቶኛል	ሙሉ በሙሉ ስደስቶኛል
301	ተማሪዎች ለርስዎ አገልግሎት በመስጠት ያሳለፉት ጊዜ					
302	ተማሪዎች በሙያቸው ያሳዩት ብቃት					
303	እርስዎ ምን ህል እንክብካቤ እንገምግማልግዎትማሪዎች ያላቸው እውቅና					
304	እርስዎ ነርስ በሚፈልጉበት ወቅት በቶሎ የማግኘትዎ ሁኔታ					

305	ተማሪዎች ቤትዎ እንዳሉ እንዲሰማዎት የሚደርጉት ጥረት					
306	ስለ ጤንነትዎ ሁኔታ እና ህክምናዎ ከተማሪዎች ያገኙት መረጃ/ምላሽ መጠን					
307	ተማሪዎች እርስዎ ደና ስለመሆንዎ ሆነ በተደጋጋሚ የመከታተል ሁኔታ					
308	ተማሪዎች እርስዎን ለመርዳት ያላቸው ፍላጎት					
309	ተማሪዎች ሁኔታዎችን /ነገሮችን ለርስዎ የሚያስረዱበት መንገድ					
310	ተማሪዎች አስታማሚዎችን ለማረጋገጥ የሚያደርጉት ጥረት					
311	ተማሪዎች ስራቸውን በሚያከናውኑበት ወቅት የሚያሳዩት ባህሪ					
312	ስለ ጤንነትዎ እና ስለ ህክምናዎ ሁኔታ ከተማሪዎች ያገኙት ምላሽ/መረጃ ዓይነት					
313	ተማሪዎች በርስዎነትዎ /በሰባዊ ፍጡርነትዎ ያደረጉለዎት መስተንግዶ					
314	ተማሪዎች በሚያስጨንቀዎትን ሆነ የሚያሳስብዎትን ነገር ለማድመጥ የነበራቸው ፍቃደኝነት					
315	በተኙበት ክፍል ውስጥ የነበረዎት ነፃነት					
316	ጥያቄዎትዎን ለመመለስ የነበረው የተማሪዎች ፈቃደኝነት					
317	በግልዎ ማከናወን ወይም እንዲከናወንልዎ ለሚፈልግዎቸው ነገሮች ከተማሪዎች ያገኙት የትብብር መጠን					

318	ተማሪዎች የርስዎን ፍላጎት ለማወቅ የሚያደርጉት ጥረት					
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ክፍል አራት፡ ህመማን በመኝታ ክፍል ውስጥ ስላገኙት እንክብካቤ የህመማን ጠቅላላ አስተያየት

ቁጥር	ጥያቄ	ሙሉ በሙሉ አልስማማም	አልስማማም	እርግጠኛ አይደለሁም	እስማማለሁ	ሙሉ በሙሉ እስማማለሁ
401	በአጠቃላይ የተማሪዎች እንክብካቤ እንዳሰብኩት ተሳክቶልኛል					
402	በአጠቃላይ በዚህ ሆስፒታል ያገኘሁት የተማሪዎች እንክብካቤ አስደስቶኛል					
403	ጓደኞቼ ወይም ቤተሰቦቼ ህመም በሚያጋጥማቸው ወቅት ሆስፒታሉን እንዲጎበኙ እጋብዛለው					
404	ህመም እሚያጋጥመኝ ከሆነ ወደዚህ ሆስፒታል ተመልሻ እመጣለሁ					

Declaration

I the undersigned declare that this MSc. thesis is my original work and it has not been presented for a degree in any other university. All source materials used for the thesis have been duly acknowledged.

Investigator: Amare Wondim (Bsc.)

Signature: _____ Date of submission: _____

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Signature: _____ Date: _____