

<https://doi.org/10.5281/zenodo.4574568>

SCI PATIENTS' SATISFACTION ABOUT NURSING SERVICE AT NATIONAL INSTITUTE OF TRAUMATOLOGY, ORTHOPEDIC REHABILITATION (NITOR) AND CRP HOSPITAL

Most Morsheda Parvin

Associate Professor in Pediatric Nursing
Enam Nursing College
Savar, Dhaka, Bangladesh

Esrat Jahan Sathi

Lecturer in Reproductive Health
Prince Nursing College
Savar, Dhaka, Bangladesh

Received: 2020-12-31

Accepted: 2021-02-14

Published online: 2021-03-02

Abstract

Spinal Cord Lesions are a major public health problem in Bangladesh. Patient satisfaction is an important and commonly used indicator for measuring the quality in health care. Patient satisfaction affects clinical outcomes, patient retention, and medical malpractice claims. It affects the timely, efficient, and patient-centered delivery of quality health care. Patient satisfaction is thus a proxy but a very effective indicator to measure the success of doctors and hospitals. This article discusses as to how to ensure patient satisfaction in dermatological practice. This epidemiological study was undertaken in order to identify the causes of spinal cord lesions and thus to allow prevention and control programs to be developed. The records of 247 patients with spinal cord lesions admitted to The Centre for the Rehabilitation of the Paralysed (CRP), Savar, Dhaka from January 1994 to June 1995 were reviewed retrospectively. Comparisons were made with the reports of studies from other countries, both developing and developed. The most common cause of traumatic lesions was a fall from a height followed by falling when carrying a heavy weight on the head and road traffic accidents. Most of the patients were between 20 - 40 years old and the overall age group ranged from 10 - 70 years. The male: female ratio was 7.5: 1.0. Among the traumatic spinal cord lesions, 60% were paraplegics and 40% tetraplegics. Among the non-traumatic spinal cord lesions cases 84% were paraplegics and 16% tetraplegics. The most common age group (10 - 40 years) of patients reflects the socio-economic conditions of Bangladesh. The male: female ratio (7.5: 1.0) of patients with a spinal cord lesion is due to the socio-economic status and to the traditional culture of the society.

Keywords: Patient, Satisfaction, Customer, Nursing Service, Quality.

Introduction

Patient Satisfaction is the ability to provide patient centered care that creates a culture that accept people unconditionally and provide quality care that involves mind, body, and spirit. Patient satisfaction is the most important indicator of quality nursing services provided by health care person. (Needleman et al., 2002) Patient satisfaction is defined that the similarity of between the expect quality of nursing care and the actual receive. Patient satisfaction with nursing care is very important because nurses provide majority of health care for patient in 24 hour a day. Patient satisfaction is one of the two main parts of quality of nursing care that is respect and understands the patient's needs. Nurses provide care of sick patient and they provide preventive care for promotion of patient health. Interpersonal relationship between patient and nurse has a powerful impact of patient satisfaction.

Spinal cord injury is a high-cost disability that effect personal life-style. As a result of advanced medical and nursing care, increased individual life expectancy of the spinal cord-injured (SCI) patient. Economic status also impacts and changes in life expectancy about life satisfaction in SCI patients. This study determining whether correlation existed between life satisfaction and physical functioning in SCI patients. Telephone interviews were conducted with 31 individuals who had suffered spinal cord injury. Data were collected through the use of the Life Satisfaction in the Elderly Scale (LSES). The data suggest that nurses may enhance life satisfaction in the SCI patient by focusing on adaptation in the three subscales of goals, mood and finance. 1990 American Association of Neuroscience Nurses.

Nursing practice is patient derived and patient centered. Accordingly, patient's satisfaction has been strongly advocated by nursing professionals. Assess patient's satisfaction, with the care they receive is assuming greater importance in the new style national health services. More than this evaluating the effectiveness of nursing care is necessary for developing sound knowledge base to guide practice. On patient's satisfaction at a super specialty in different hospital, this was to know the satisfaction level of the patient and also get the feedback about the services provided in admitted patient.

Satisfaction of patient has become increase interest of people, as a critique factors measuring of care. Satisfaction is one of the most important things which concerns come for health care. Satisfaction of health care is measured with a long history in the social science. Patient satisfaction is one of the most important components of the nursing services or Hospital services or both. To understand those things are looking the patient's eyes is understandable and central part quality of the services should be improvement. (Laschinger et al., 2005)

Justification of the study

Patients are the foundation of any institute and the medical care provided. It is a must that they are happy and satisfy while in need of care. It is seen as a way of determining hospital abilities and functionality. This study was conducted with the purpose of gathering information about the level of satisfaction of patient regarding nursing services for the SCI patient at CRP and NITOR. When we able to gather all the information it helps us to develop our nursing services at the field of nursing effectively where the nursing services inadequate. Incentive for hospital to improve quality of care. Increased accountability in health care by transparency of the quality of care provided.

To evaluate and improve the quality of care provided, it is of vital importance to investigate the quality of care in the context of health care. The aim of this literature study was to describe the influences on patient satisfaction with regard to nursing care in the context of health care. Patient satisfaction is a significant indicator of the quality of care. Consequently, quality work includes investigations that map out patient satisfaction with nursing care. To improve the quality of nursing care, the nurse needs to know what factors influence patient satisfaction. The results describe eight domains that have an influence on patient satisfaction with nursing care: the socio-demographic background of the patients, patients' expectations regarding nursing care, the physical environment, communication and information, participation and involvement, interpersonal relations between nurse and patient, nurses' medical-technical competence, and the influence of the health care organization on both patients and nurses. This means that the results should be applicable to health care in the western world. An important implication for future research is to continue to elucidate the factors that influence satisfaction with nursing care, as seen from the patient's perspective.

Study objectives

A. General objective

- The general objective of the study is to assess the patient satisfaction regarding nursing services.

B. Specific objective

- Incentive for hospital to improve quality of care.
- Increased accountability in health care by transparency of the quality of care provided.

Literature Review

Review of literature serves an important function in the research process. It is the critical summary of research on the topic of interest often prepared to put a research problem in context. Literature review helps to lay the foundation for a study and also can inspire new research ideas. It gives character insight into the problem and help in selecting methodology, developing tool and also analyzing data. With these in view an intensive review of literature has been done.

Findik et al., (2010) the aim of the study was to assess patient satisfaction with nursing care and relationship between patient characteristics. The study was conducted between December and January within different services in the Hospital. The participants who were eligible for recruitment were patients of above 18 years of age who had been admitted for at least 2 weeks. Data were collected using the Newcastle satisfaction with nursing care scale and a patient information form. Overall data indicated a high level of patient satisfaction. Hospitalization affected the Experience of Nursing Care Scale independently, while the type of ward, sex, income, and education independently affected the satisfaction with Nursing Care Scale. The quality of care is the significant indicator as the nursing profession views patients' satisfaction. To improve the quality of nursing care, the nurse needs to know what factors influence patient satisfaction". (Johansson et al., 2002)

Evidence of this phenomenon is found in the numerous publications that focus on patient satisfaction as a key outcome measure of the health care. Level of satisfaction will vary from person to person and product/service to product/service. Health care systems today are technically proficient. Strong emphasis is placed on patient service with organized efforts to understand measure and meet the needs of clients served. Patient satisfaction is therefore the perception of patient needs and expectations being met. The state of satisfaction will depend on a number of both psychological and physical variables which correlate with satisfaction behaviors such as return and recommend rate. (Donabedian, 1988).

Conducted a study on Nursing care quality and adverse events in US hospitals, to examine the association between nurses' reports of unmet nursing care needs and their reports of patients' receipt of the wrong medication or dose, nosocomial infections and patient falls with injury in hospitals. Secondary analysis of cross-sectional data collected in 1999 from 10,184 staff nurses and 168 acute care hospitals in the US. The proportion of necessary nursing care left undone ranged from 26% for preparing patients and families developing or updating nursing care plans. A majority of nurses reported that patients received the wrong medication or dose, acquired nosocomial infections, or had a fall with injury in frequently. The adverse events occurred frequently varied considerably (medication errors (15%), patient falls with injury (20%). After adjusting for patient factors and the care environment, there remained a

significant association between unmet nursing care needs and each adverse event.

Nurses complete care activities that require for patients to spend time with the patients. Hospitals should be engaged staff nurses in the creation of policies that influence awareness of the care environment and patient care delivery. (Lucero et al., 2010)

Conducted a study on the influence of demographic variables and ward type on elderly patients' perceptions of needs and satisfaction during acute hospitalization. The study designed to determine whether demographic characteristics of patients such as age, gender and cultural background were associated with different perceptions of the importance of and satisfaction with various aspects of nursing care. Data were analyzed using repeated measures analysis of variance to determine group differences on the four categories combined from the CAS Results demonstrated that patients who were older (aged > 80 years), female and from aged care wards perceived that physical aspects of nursing care were more important than did patients who were younger (aged 65–80 years), male and from medical wards. Older patients and those from aged care wards were more satisfied with physical care. (Chang et al., 2003)

Conducted a study on Gender-related difference in patient satisfaction with quality of nursing care. To conduct the study researcher was using data from a Norwegian survey of patient-satisfaction. The survey included 1469 male and 1226 female patients. Results showed that young female patients were less content with all aspects of nursing care when compared with young male patients. The RESKVA study is a Norwegian survey of in-patient satisfaction, conducted by The Foundation of Health Services Research from 1995 to 1998. The patient satisfaction questionnaire consisted of 39 questions (24). Thirty-four of the 39 questions had five response options, where the two extremes were specified (completely content – complete discontent). Six of the questions related to patient's experiences with nursing care. The total data set included 19,395 patients from two different Norwegian hospitals. The remaining data consisted of replies from 2695 respondents. There were 1469 male and 1226 female patients. The overall response rate was 59%. Mean score of satisfaction with the different areas of quality of nursing care the following levels of significance; personal commitment = 0.003, caring behavior = 0.001, time to talk = 0.004, time to help = 0.000, nursing skills = 0.006. The patients' experiences with the continuity of care did not show significant gender difference ($p = 0.117$). No significant differences were found between the sexes in mean age in any of the three groups. Mean scores were used when presenting the patients' level of satisfaction; score 1 representing the lowest – and score 5 the highest possible level of satisfaction. (Foss, 2002).

Methodology

Study Design

The researcher chose quantitative survey method to carry out the research aim and objectives because the quantitative methods are appropriate if the issue was known about, relatively simple and unambiguous. The purpose of quantitative research was theory testing to establish facts, show causal explanations and relationships between variables, allow prediction. Quantitative research designs were predetermined and structured and did not change during the study. Quantitative research studies answered specific research questions by producing statistical evidence to prove a point. Survey methodology was chosen to meet the study aim as an effective way to collect data.

Study Area

All spinal cord injury patients who admitted in Centre for the Rehabilitation of the Paralyzed (CRP) and National Institute of Traumatology and Orthopedic Rehabilitation (NITOR). A population is the total group or set of event or totality of the observation on which a research carried out.

Study Site

The research was conducted the study at the Centre for the Rehabilitation of the Paralyzed (CRP), Savar, Dhaka and National Institute of Traumatology and Orthopedic Rehabilitation (NITOR), Dhaka.

Researcher collected data from those peoples who are receiving treatment in SCI unit at CRP and National Institute of Traumatology and Orthopedic Rehabilitation (NITOR). The Centre for the Rehabilitation of the Paralyzed (CRP) and National Institute of Traumatology and Orthopedic Rehabilitation (NITOR) had developed into an internationally respected organization (CRP, NITOR-BANGLADESH). Researcher had chosen that setting because the participants were available in SCI unit. The hospital at CRP-Savar and National Institute of Traumatology and Orthopedic Rehabilitation (NITOR) was the hospital in Bangladesh that specializes in the treatment of spinal cord injuries. At CRP and NITOR inpatient unit most of admitted people with SCI. National Institute of Traumatology and Orthopedic Rehabilitation (NITOR) was consisted of Para ward with the 80 beds one female ward and two male ward and CRP was consisted with 100 beds, with 12 wards (one post-operative ward, one female and ten male wards, this was due to the majority of spinal cord injuries occurring in young males). The major cause of spinal cord injuries was via fall from height or tree, carrying heavy loads on head, diving into shallow water, heavy objects falling on their back, or road traffic accidents. Rehabilitation following a SCI consists of four phases: Acute, active, rehabilitation and community reintegration.

Study Populations

The study populations were people who are admitted SCI unit and spinal cord injuries patient and sample population were those who are receive nursing services from the SCI unit of Centre for the Rehabilitation of the Paralyzed (CRP) and National Institute of Traumatology and Orthopedic Rehabilitation (NITOR).

Sample Size

The researcher took data from 100 SCI patients at CRP and NITOR Statistical studies are always better when they are carefully planned. In the study, sample must be adequate in size, relative to the goals of the study.

Sampling Procedure

The study was conducted by using the purposive sampling methods due to the time limitation and as it was the one of the easiest, cheapest and quicker method of sample selection. The researcher was used this procedure, because getting of those samples whose criteria was concerned with the study purpose. Participants were chosen purposively because the participants had received particular nursing services which were enable detailed exploration of the research objectives. Some subjects were selected for the study according to the inclusion and exclusion criteria, because it was not possible to study the total population within the time. This method contained some inclusion criteria to select the participant. The researcher could find out the actual snap of the situation that they face in their everyday life.

Data Management and Analysis

The data analysis was performed in the program 'Statistical Package for Social Science' (SPSS) version 26. The presentation was performed in SPSS and in Microsoft office word 2010. Every questionnaire was rechecked for missing information or unclear information. At first put the name of variables in the variable 22 views of SPSS and the types, values, decimal, label alignment and measurement level of data. The next step was to input data view of SPSS. After input all data researcher checked the inputted data to ensure that all data had been accurately transcribed from the questionnaire sheet to SPSS data view. Then the raw data was ready for analysis in SPSS. Microsoft word excel was also used to present data using column, pie chart and bar chart.

Results

This chapter provides an overview of the findings and the results from the analysis were presented. The statistical Package for the Social Science (SPSS) 26.0 version and Ms- Excel spreadsheets 2007 were used to assist in the statistical analysis of the data from 100 participants from SCI patient of (CRP) &(NITOR)Hospital. To avoid any bias in the data caused by discussion between the participants, the investigator was present at all times during the data collection. The data obtained from the study

were analyzed using descriptive statistics. According to the appropriate scales of measurement, measures of central tendency, frequency distribution and measures of dispersion were used to analyze and describe the data. The most significant results are discussed. Percentage analysis had appeared to be the most effective method for providing the greatest amount of information about how the participants answered these questions.

A) Socio demographical information:

Socio-demographic characteristics of the respondents include their Gender, Age range, marital status, Educational level.

Age of patient:

The study was conducted with 100 participants. Among the participants age range were (18-27) 34%, (28-37) 32%, (38-47) 18%, (48-57) 8%, (58-67)6% and (68-77) 2%.

Age in years	Number of respondents	Number of percentage
18-27	34	34%
28-37	32	32%
38-47	18	18%
48-57	8	8%
58-67	6	6%
68-77	2	2%
Total	100	100

Figure: 1

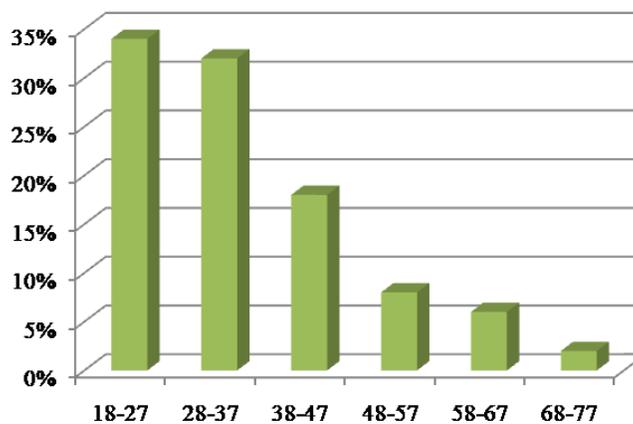


Figure 2: A chart showing percentage of age of the participant.

The study was conducted with 100 participants. Among the participant Male 82 % (n=100) and female 18 % (n=100).

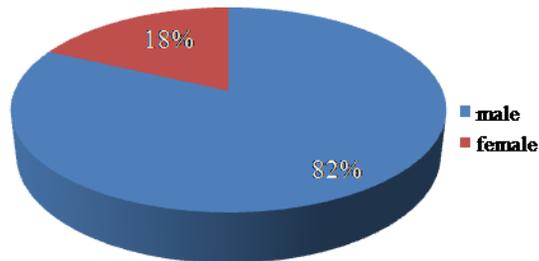


Figure 3: A pie chart showing percentage of gender of the participant.

Marital status

The study was conducted with 100 participants. Most of the participants 31% (n=100) were unmarried, were 69% (n=100) married.

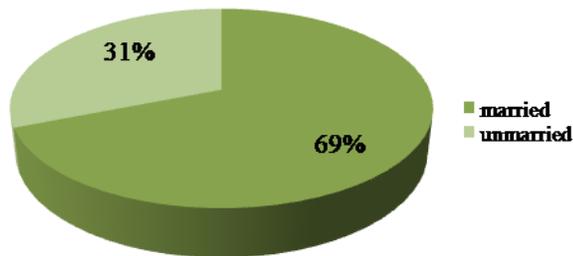


Figure 4: A chart showing percentage of marital status of the participant.

The study was conducted with 100 participants. Most of the participants 39% (n=100) were primary, were 31% (n=100) secondary, were 15% (n=100) higher secondary, were 15% (n=100) no formal education.

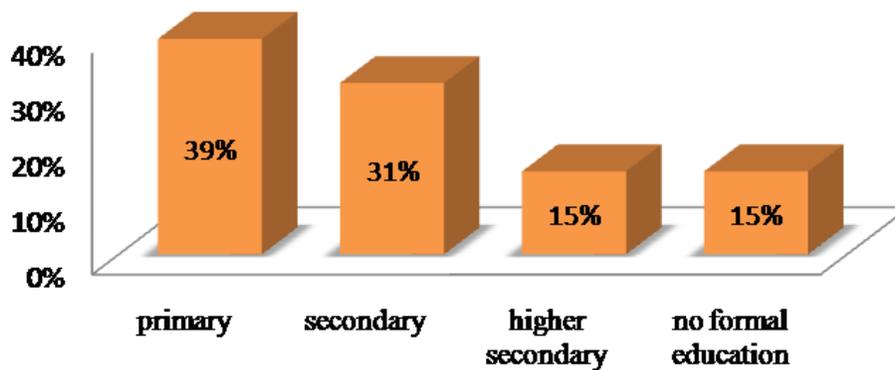


Figure 5: A chart showing percentage of educational level of the participant.

The study was conducted with 100 participants. Among the participant were giving statement about providing courtesy and respect during patient care out of 100% respondent 100% (n=100) were satisfied, were 0% (n=100) dissatisfied.

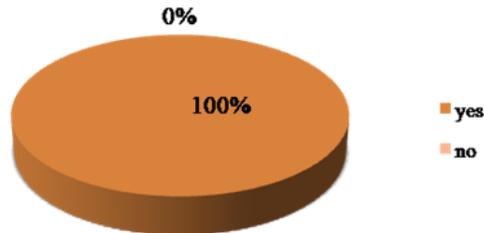


Figure 6: A pie chart showing percentage of giving courtesy and respect during care for the participant.

The study was conducted with 100 participants. Among the participant were giving statement about behave of nurses during patient care out of 100% respondent 98% (n=100) were positive, were 2% (n=100) negative.

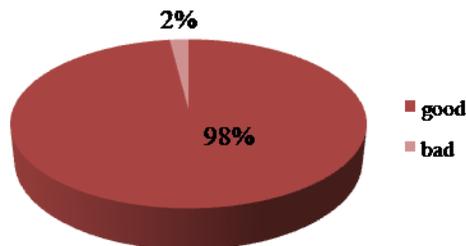


Figure 7: A pie chart showing percentage of about behave of nurses during care for the participant.

The study was conducted with 100 participants. Among the participant were giving statement about answering question out of 100% respondent 98% (n=100) were positive, were 2% (n=100) negative.

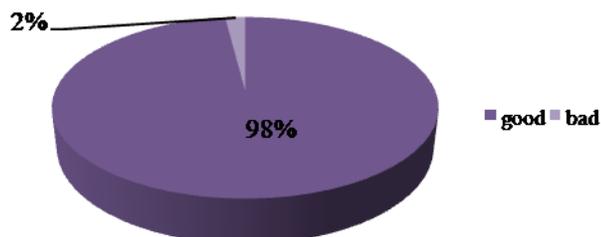


Figure 8: A pie chart showing percentage about answering question for the participants.

The study was conducted with 100 participants. Among the participant were giving statement about importance of participants opinion out of 100% respondent 80% (n=100) were satisfied, were 20% (n=100) dissatisfied.

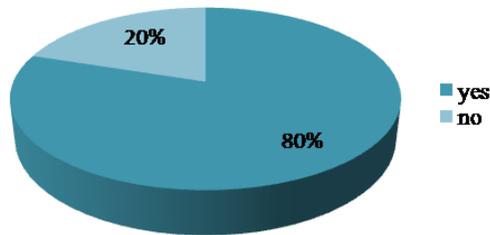


Figure 9: A pie chart showing percentage of giving importance participants opinion during care.

The study was conducted with 100 participants. Among the participant were giving statement about how flexible nurses during care for the participants out of 100% respondent 92% (n=100) were satisfied, were 8% (n=100) dissatisfied.

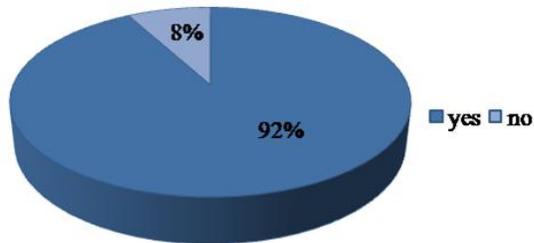


Figure 10: A pie chart showing percentage of how flexible nurses during care for the participants.

The study was conducted with 100 participants. Among the participant were giving statement about communication with family and physician during care for the participant out of 100% respondent 88% (n=100) were satisfied, were 12% (n=100) dissatisfied.

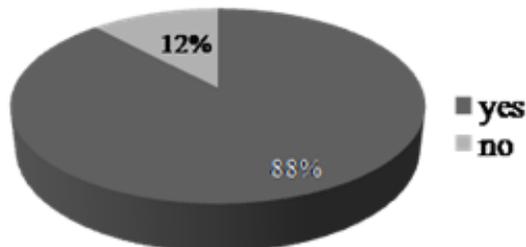


Figure 11: A pie chart showing percentage about communication with family and physician during care for the participant.

The study was conducted with 100 participants. Among the participant were giving statement about information giving for participants and their family out of 100% respondent 84% (n=100) were satisfied, were 16% (n=100) dissatisfied.

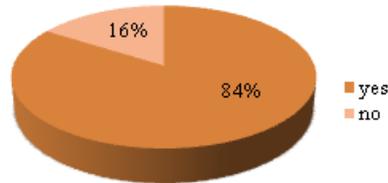


Figure 12: A pie chart showing percentage about information giving for participants and their family.

The study was conducted with 100 participants. Among the participant were giving statement about explaining operational procedure of the participants out of 100% respondent 90% (n=100) were satisfied, were 10% (n=100) dissatisfied.

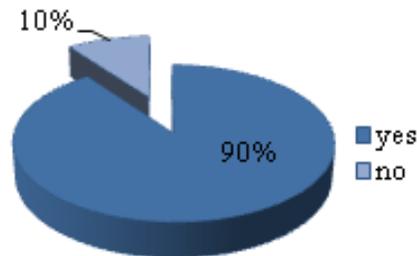


Figure 13: A pie chart showing percentage about explaining operational procedure of the participants

The study was conducted with 100 participants. Among the participant were giving statement about how protect privacy during care for the participants out of 100% respondent 83% (n=100) were satisfied, were 17% (n=100) dissatisfied.

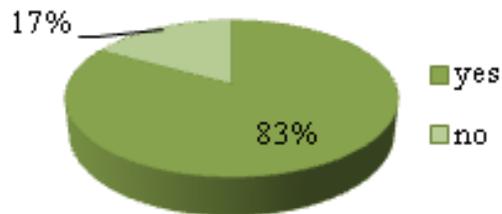


Figure 14: A pie chart showing percentage of how protect privacy during care for the participants.

The study was conducted with 100 participants. Among the participant were giving statement about maintaining precaution during medication of the participants out of 100% respondent 100% (n=100) were satisfied, were 0% (n=100) dissatisfied.

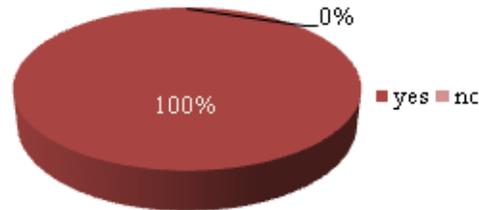


Figure 15: A pie chart showing percentage about maintaining precaution during medication of the participants.

The study was conducted with 100 participants. Among the participant were giving statement about maintaining sterility during catheterization of the participants out of 100% respondent 94% (n=100) were satisfied, were 6% (n=100) dissatisfied.

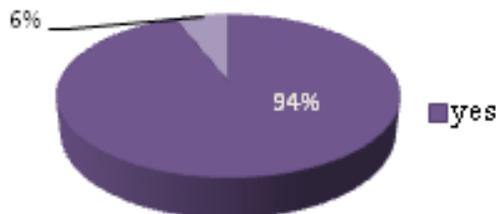


Figure 16: A pie chart showing percentage about maintaining sterility during catheterization of the participants.

The study was conducted with 100 participants. Among the participant were giving statement about care for personal hygiene of the participants out of 100% respondent 73% (n=100) were satisfied, were 27% (n=100) dissatisfied.

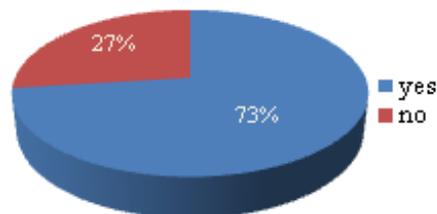


Figure 17: A pie chart showing percentage about care for personal hygiene of the participants.

The study was conducted with 100 participants. Among the participant were giving statement about helps in meets of participants needs out of 100% respondent 84% (n=100) were satisfied, were 16% (n=100) dissatisfied.

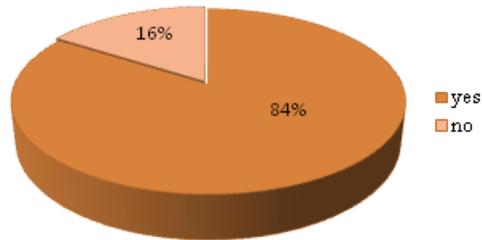


Figure 18: A pie chart showing percentage about helps in meets of participants needs.

The study was conducted with 100 participants. Among the participant were giving statement about how the nurses assist in meal time of participants out of 100% respondent 59% (n=100) were satisfied, were 41% (n=100) dissatisfied.

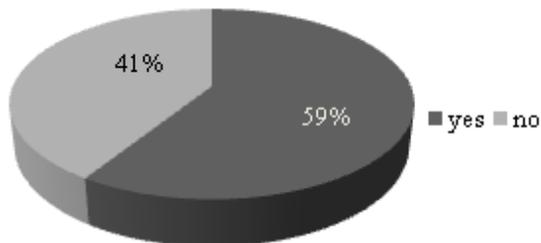


Figure-19: A pie chart showing percentage how the nurses assist in meal time of participants.

The study was conducted with 100 participants. Among the participant were giving statement about reassurance of the participants out of 100% respondent 62% (n=100) were satisfied, were 38% (n=100) dissatisfied.

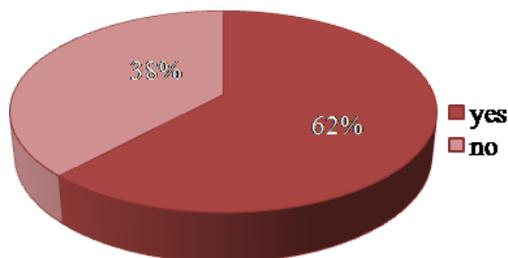


Figure 21: A pie chart showing percentage about reassurance of the participants.

The study was conducted with 100 participants. Among the participants age range were (18-27) 34%, (28-37) 32%, (38-47) 18%, (48-57) 8%, (58-67) 6% and (68-77) 2%. Among the participant Male 82% (n=100) and female 18% (n=100). Most of the participants 31% (n=100) were unmarried, were 69% (n=100) married. Most of the participants 39% (n=100) were primary, were 31% (n=100) secondary, were 15% (n=100) higher secondary, were 15% (n=100) no formal education.

Among the participant were giving statement about providing courtesy and respect during patient care out of 100% respondent 100% (n=100) were satisfied, were 0% (n=100) dissatisfied. Among the participant were giving statement about behave of nurses during patient care out of 100% respondent 98% (n=100) were positive, were 2% (n=100) negative. Among the participant were giving statement about answering question out of 100% respondent 98% (n=100) were positive, were 2% (n=100) negative. Among the participant were giving statement about importance of participants opinion out of 100% respondent 80% (n=100) were satisfied, were 20% (n=100) dissatisfied. Among the participant were giving statement about how flexible nurses during care for the participants out of 100% respondent 92% (n=100) were satisfied, were 8% (n=100) dissatisfied.

Among the participant were giving statement about communication with family and physician during care for the participant out of 100% respondent 88% (n=100) were satisfied, were 12% (n=100) dissatisfied. Among the participant were giving statement about information giving for participants and their family out of 100% respondent 84% (n=100) were satisfied, were 16% (n=100) dissatisfied. Among the participant were giving statement about explaining operational procedure of the participants out of 100% respondent 90% (n=100) were satisfied, were 10% (n=100) dissatisfied.

Among the participant were giving statement about how protect privacy during care for the participants out of 100% respondent 83% (n=100) were satisfied, were 17% (n=100) dissatisfied. The study was conducted with 100 participants. Among the participant were giving statement about maintaining precaution during medication of the participants out of 100% respondent 100% (n=100) were satisfied, were 0% (n=100) dissatisfied. Among the participant were giving statement about maintaining sterility during catheterization of the participants out of 100% respondent 94% (n=100) were satisfied, were 6% (n=100) dissatisfied. Among the participant were giving statement about care for personal hygiene of the participants out of 100% respondent 73% (n=100) were satisfied, were 27% (n=100) dissatisfied.

Among the participant were giving statement about helps in meets of participants needs out of 100% respondent 84% (n=100) were satisfied, were 16% (n=100) dissatisfied. Among the participant were giving statement about how the nurses assist in meal time of participants out of 100% respondent 59% (n=100) were satisfied, were 41% (n=100) dissatisfied. Among the participant were giving statement

about reassurance of the participants out of 100% respondent 62% (n=100) were satisfied, were 38% (n=100) dissatisfied.

Discussion

The study was conducted to find out the patient satisfaction with the nursing services among SCI patient at CRP and NITOR. This descriptive type of cross-sectional study carried out 100 patients. A close ended questionnaire was used to collect data by fact interview. All the data carried and analyzed by using statistical package of social science (SPSS) 26.0 versions. In this study, 85.5% patients are satisfied & 14.5% patients are dissatisfied.

Total 153 eligible patients were identified and invited for interview through questionnaire. Out of these, 122 patients agreed to participate. Overall, patients had a variable experience of nursing care; 45 % patients were satisfied with care provided, while 55 % were partially dissatisfied. Among 6 dimensions of care, 94 % liked nursing practice of keeping privacy of patients. When asked about behavior, 90 % patients were not feeling comfortable talking to nurses. Only 10 % felts nurses were excellent. 84 % patients had negative experiences as they observed nurses were not attentive to their needs, particularly at night. The same percentage also had negative perception with respect to physical care. Overall, the data showed that patients' expectations were not met.

Limitation

Our study has several limitations, which should be addressed for future research on this topic. First of all, the result of the study cannot be generalized to the whole SCI patient in Bangladesh as the samples were 100 and collected only from NITOR & CRP hospital. The sample size was small; time was short and chosen only for fulfilling the academic requirement which is included in the curriculum. In this study due to time and financial limitation they are the selected of the respondents were purposive selected. The selection bias also might exist in this study. Most of the patients who fulfilled our research criteria were confused to participate in our research findings although we had provided proper and necessary papers according to the criteria and needs. As most of the respondent giving information but did not ready to give their personal contact number. The respondents were varying reserved and feel fear to tell the accurate answer according to the question.

Conclusion

Patient satisfaction surveys have evolved as a powerful management and marketing tool. It is being widely used by various hospitals to capture the "Voice of the Consumer". It also helps to understand the views of the patients in respect of hospital services being provided. Despite certain structural constraints, 85.5% of all patients

have expressed overall satisfaction judgment with nursing services for SCI patient at CRP and NITOR. This bears a testimony to the efforts of the hospital management towards improvement of services. The hospital authority may derive affordable inputs from similar surveys to identify improvement opportunities. Continuous monitoring to assess the degree of sustainable improvement is required. The study suffers from certain limitations, namely recording of waiting time and consultation time. It is recommended that a future study with a larger scope to improve the quality and outcome of such studies.

Recommendation

On the basis of findings of the present study following recommendations are put forwards. Health care team members should be arranging some special training for nursing services with Spinal cord injured patients. Awareness program regarding special management the entire SCI patients should be arranged by health care agency & organization. National level survey can be conducted to know about the level of satisfaction regarding nursing services.

References

- Chang et al. (2002). "Evaluating quality of nursing care: The gap between Theory and Practice." *The Journal of nursing administration*, 32 (7/8):405-18.
- Donabedian, A. (1988). "The quality of care: How can it be assessed?" *Journal of the American Medical Association*.
- Findik U Y and Unsar S. (2010). "Patient satisfaction with nursing care and its relationship with patient characteristics." *Nursing and Health Sciences*, 12 (2):162-69.
- Foss C. (2002). "Gender bias in nursing care? Gender – related in patient satisfaction with quality of nursing care." *Scandinavian journal of caring nurses*, 16 (1): 19-26.
- Johansson P, Oleni M, Fridlund B. (2002). "Patient satisfaction with nursing care in the context of health care: Literature study." *Scandinavian journal of caring nurses*, 16 (4): 337-44.
- Laschinger H S. (2005). "A psychometric analysis of patient satisfaction with nursing care quality questionnaire: an actionable approach to measuring patient satisfaction." *Journal of nursing care quality*, 20 (3); 220-30.
- Lucero R J, Lake E T, Aiken L H. (2010). "Nursing care quality and adverse events in U S hospitals." *Journal of clinical nursing*, 19 (15): 2185-95.
- Needleman et al.(2002). "Nurse-Staffing Levels and the Quality of Care in Hospitals," *New England Journal of Medicine*, no. 22:1715–1722.