

Relative Caregivers' Satisfaction towards Nursing Care of Neuro Patients in Hospital Universiti Sains Malaysia (USM)

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Abstract

Over the past decade, the provision of medical care had received increased attention in the general critical care community [1]. In the neurointensive care unit (neuro ICU), it is important to build a good rapport with their family member as the patient unable to decide for themselves. Assessing relative satisfaction level toward nursing care of neuro patients provides a way to determine whether the nursing care goals were attained. Directly measuring this in patients in the neuro ICU is difficult because of their clinical status. Thus, relative (surrogate) satisfaction is used as a proxy measure [3].

The satisfaction survey, Family Satisfaction-ICU (FS-ICU), has been thoroughly validated in the general critical care population [2]. The survey has been used in many countries which helped in improving the satisfaction of care of the relative caregivers with nursing care [4]. The assessment of the level of satisfaction among relative caregivers towards nursing care is important to enhance the decision-making for the patients. The current study aimed to assess the level of satisfaction among relative caregivers towards nursing care of neuro patients and to determine the relationship between the satisfaction among relative caregivers towards nursing care and decision-making related to patient care in neuro ICU, Hospital USM. The study was conducted in the neuro ICU ward, Hospital USM. A cross-sectional study was conducted among 80 respondents using the Malay version of the Family Satisfaction Intensive Care Unit (FS-ICU) questionnaire. The statistical analysis was conducted using descriptive statistics and the Pearson correlation test. There are three items to measure the satisfaction level among relative caregivers towards nursing care which are concern and quality of care toward patients; the service and efforts in meeting their needs; and skills, care, and the atmosphere in the ICU. These items were given the score of 1-5 (very dissatisfied) and 6-10 (very satisfied).

In this study, a total of 80 patients' relatives were included. The sociodemographic characteristics and the frequency of distribution among participants and their percentage were shown in Table 1. The items for service and effort in meeting their needs (Question 1-6) showed the highest mean score, 9.21 (SD=0.58). Next, the concern and quality of care towards patients (Question 7-12) stated a mean score of 9.20 (SD=0.56), and the items for skills, care, and the atmosphere in the ICU (Question 13-18) stated a mean score of 8.71 (SD=0.71). Taken together, the relative caregivers were satisfied with the treatment and care for the patient. The scores of a single item of the FS-ICU were presented in Table 2. There was a significant

correlation between the satisfaction level among relative caregivers towards nursing care and decision-making related to patient care in the neuro ICU, Hospital USM ($r = 0.805, p < 0.001$) (Table 3).

Table 1: Sociodemographic characteristics (n=80)

Variables		Frequency (n)	Percentage (%)
Age (years)	Below 30 years old	24	30.0
	30 - 39 years old	26	32.5
	40 - 49 years old	17	21.3
	50 - 59 years old	13	16.3
Sex	Male	29	36.3
	Female	51	63.7
Marital status	Married	62	77.5
	Single	18	22.5
	Divorcee	0	0
	Others	0	0
Races	Malay	62	77.5
	Chinese	10	12.5
	Indian	5	6.3
	Others	3	3.8
Education level	Does not go to school	0	0
	Primary school	3	3.8
	Secondary school	25	31.3
	College	23	28.7
	University	29	36.3
Profession	Government	20	25.0
	Private	14	17.5
	Self-employed	12	10.8
	Retiree	4	5.0
	Housewife	23	28.7
I am:	Not working	7	8.8
	Patient's spouse	27	33.8
	Patient's children	33	41.3
	Patient's parents	11	13.8
	Patient's siblings	9	11.3

Table 2: Level of satisfaction among relative caregivers towards nursing care of neuro patients in Hospital USM

No.	Item Statement	Mean Score	Standard Deviation
1	The patient has been well cared for by the ICU staff.	9.16	1.061
2	The courtesy, respect, and compassion for the patient.	9.06	0.959
3	The ICU staff service was satisfactory.	9.30	0.999
4	The pain treatment has been well given.	9.50	0.636
5	Management of breathlessness.	9.20	0.920
6	Management of agitation	8.98	0.888
7	Consideration for family needs.	8.76	0.945
8	Emotional support towards family.	9.50	0.675
9	The teamwork of all the ICU staff.	9.41	0.758
10	Concern and caring by ICU staff.	9.29	0.715

11	Service by ICU staff.	8.99	0.921
12	Skill and competence of ICU nurses.	9.34	0.745
13	Communication with ICU nurses.	9.51	0.503
14	Skill and competence of ICU doctors.	9.18	0.776
15	Atmosphere of ICU.	9.09	0.830
16	The atmosphere in the ICU waiting room.	7.86	1.473
17	Cleanliness in the ICU waiting room	7.70	1.436
18	Treatment by the doctor was satisfactory.	8.91	0.970
19	The doctor informs each development of the patient satisfactorily.	9.19	0.969
20	The ICU doctor's response to our inquiries was satisfactory.	9.16	0.818
21	The information provided by the ICU doctor is clear and easy to understand.	8.99	1.131
22	The information provided by the ICU doctor is adequate and satisfactory.	9.10	1.086
23	The ICU doctor's explanation of the patient's condition is satisfactory.	9.34	1.158
24	The ICU doctor's explanation of the treatment provided was satisfactory.	9.14	0.978
25	Explanations from doctors, nurses, and ICU staff about the treatments are consistent.	8.81	0.813
26	I am involved in making decisions related to patient treatment	8.54	1.136
27	I was supported by the doctor in ICU when making decisions about this patient.	8.24	1.503
28	I have control over the care and treatment of this patient.	8.16	1.216
29	I was given enough time to make any decision.	8.53	1.340
30	I was given a clear explanation of the possible risks when making a decision.	8.59	1.144
31	I was given a clear explanation of the cost of treatment when making a decision.	8.45	0.899
31	I have been given a clear explanation of any alternative available for decision-making.	8.24	1.161
32	I am satisfied with the decision I made for this patient.	8.93	0.808

Table 3: Correlation between satisfaction level among relative caregivers towards nursing care and decision-making related to patient care in neuro ICU, Hospital USM

Correlations			
		Nursing Care	Decision Making
Nursing Care	Pearson Correlation	1	0.805**
	Sig. (2-tailed)		0.000
	N	80	80
Decision Making	Pearson Correlation	0.805**	1
	Sig. (2-tailed)	0.000	
	N	80	80

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

A previous study reported a significant improvement in client satisfaction scores when a proper education of staff and the development of good strategies for addressing the concerns of family members were applied [5]. Furthermore, the delivery of nursing care was improved by identifying the right communication technique for patients' care with their relatives [5]. The nurses also created an awareness of good communication with patients' family members to reduce their anxiety regarding patients' current progress of treatment [5]. In general, collaboration in deciding has been promoted to incorporate patient and family preferences into the customized treatment plan for an individual [6]. Taken together, a high satisfaction level with the collaboration in decision-making shown in this study might use to enhance the opportunity to improve the satisfaction level among relative caregivers in the ICU.

In conclusion, relative caregivers' satisfaction has become an important measurement in improving the

quality of care for patients in neuro ICU wards. They are expecting the nurses to give the best quality of care to their family members' despite being unable to express their wishes, lack of knowledge, and fear. Hence, nurses play a major role in understanding the relatives' concerns and needs in determining the best decision-making for the patients.

Keywords

Relative caregivers' satisfaction, Nursing care, Neuro ICU

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References

1. Davidson JE, Powers K, Hedayat KM, Tieszen M, Kon AA, Shepard E, Spuhler V, Todres ID, Levy M, Barr J, Ghandi R. Clinical practice guidelines for support of the family in the patient-centered intensive care unit: American College of Critical Care Medicine Task Force 2004–2005. *Critical care medicine*. 2007;35(2):605-22.
2. Hwang DY, Yagoda D, Perrey HM, Tehan TM, Guanci M, Ananian L, Currier PF, Cobb JP, Rosand J. Assessment of satisfaction with care among family members of survivors in a neuroscience intensive care unit. *The Journal of neuroscience nursing: journal of the American Association of Neuroscience Nurses*. 2014;46(2):106.
3. Lam SM, So HM, Fok SK, Li SC, Ng CP, Lui WK, Heyland DK, Yan WW. Intensive care unit family satisfaction survey. *Hong Kong Med J*. 2015;21(5):435-43.
4. Rahman WN, Othman AK, Jusoh AF, Zani H, Awang Z, Ghazali S. Validation Instrument Measuring FS-ICU on Satisfaction Care Malay Language Version Among Relatives at the Intensive Care Unit in Public Hospitals. *Asian Journal of Medicine and Biomedicine*. 2020;4(2):22-9.
5. Nur Syakilah binti Mahyiddin, Rosmawati binti Mohamed, Hamid Jan bin Jan Mohamed. Perception of Family Satisfaction with Care at Critical Care Setting Hospital Universiti Sains Malaysia: A Pilot Study. *The Malaysian Journal of Nursing*. 2015;7(1), 32-37.
6. Sahgal S, Yande A, Thompson BB, Chen EP, Fagerlin A, Morgenstern LB, Zahuranec DB. Surrogate satisfaction with decision making after intracerebral hemorrhage. *Neurocritical care*. 2021;34(1):193-200.