

Parents' Expectations and Satisfaction on Pediatrics Clinic

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Abstract

Parents whose child is in hospital are generally in anxiety because of the foreign environment and child's disease. This condition of uncertainty also makes them worried. Therefore, the expectations of parents of hospitalized children and how much of this expectation in the hospital were met must be set forth.

The aim of this study; is to investigate what the expectations of parents about their child's care were, how care and treatment practices affect parents' satisfaction and what kind of a relationship between the expectation and the satisfaction.

The research was implemented during the timeframe of January-April 2008 by using face-to-face interviews with the parents of children at the age of 0-18 years in pediatrics clinic by means of two questionnaires. Parents completed one questionnaire immediately after their child's admission and the second after hospital discharge.

As a result, mothers are mostly satisfied with the approach of doctors and nurses except the expectation "caring about children's home routines". Supportive approach of health care personal adds a big deal to satisfy parents' expectations. Keeping communication channels open, answering their questions and giving the best care available are respective ways to catch better standards in health care.

Keywords: Pediatric nursing; Parents' expectations; Parents' satisfaction; Child care

Introduction

The hospitalization of a child would create significant changes in the lives of all families. These changes could be caused from such situations as family members concern for the child's care; they feel insecure and low-spirited because of being in a foreign environment and the probability of inefficiencies in child's care [1,2].

Parents whose child is in hospital are generally in anxiety because of the foreign environment and child's disease. This condition of uncertainty also makes them worried. Therefore, the expectations of parents of hospitalized children and how much of this expectation in the hospital were met must be set forth.

The impact of the disease on the parents could vary depending on the situations as follows: The child's disease being acquired at birth or later; the child's age by the time the disease has been acquired; the child's level of development and integration capabilities; a parent-child relationship and family balance; the degree of illness (that create impact and limitations), treatment method, meaning of the disease to the parents; the impact of the disease on the child's the social environment, school life and other relations [3,4].

Parents often feel helpless and desperate in the hospital and do not know what to do for their children. Although they are exactly not aware of their role in the hospital, they seem eager to take part in the

child's care and treatment process. Therefore they expect guidance on what to do to help their children. Moreover, they feel the necessity to share emotional burden with someone other than relatives, often with nurses, and create a reliable relationship along with them. The other expectations of parents from nurses are;

To provide necessary information and options,

To get acknowledged and provide support during the periods of initial processing, diagnosis, changes in the treatment methodology,

To learn about the children's pre-hospital daily routine and personality traits so as to provide care accordingly.

Comforting both parents and children in adaptation to the new environment and supporting them to ease the feeling of loneliness,

Providing necessary information on the child's status or any changes in a timely and appropriate manner.

To show proper respect to the parents and seriousness to the situation with opportunity to express ideas [5].

In Homer's study, the most effective factor on the patients' hospital experience identified as the communication between the staff and patients. Parents become more dissatisfied during the child-care if their communication and information expectations were not met.

Studies indicate that there is a close relationship between patient satisfaction and their expectations [6].

The most commonly used definition for the word "Expectations" is "beliefs about future clinical confrontations" [7].

The definition of "Satisfaction" is "meeting the expectations and experiencing the clinical procedures not far from the expectations". Patient expectations and the satisfaction are true determinations for the care provided [8].

The identification of the parents' expectations and meeting the care requirements in accordance with their expectations truly affect their level of satisfaction [9].

In fact, further information is required on the improvement of quality on pediatric care in military hospitals as it may affect children's care.

The purpose of this study; was to find answers to the following questions and improve the quality of care in accordance with those answers.

What were the expectations of parents about their child's care?

How care and treatment practices affect parents' satisfaction?

What kind of a relationship between the expectation and the satisfaction?

Materials and Method

The location and date of the research

The research was implemented during the timeframe of January-April 2008 by using face-to-face interviews with the parents of children at the age of 0-18 years in pediatrics clinic. Pediatrics clinic houses 27 beds and approximately 1000 children per year are hospitalized.

Sample

One thousand parents of the children at the age of 0-18 months applied for the pediatrics clinic in the year 2007 constituted the population for the research. The sample was constructed as 56 parents of the children at the age of 0-18 years applied for the pediatrics clinic in between the dates January 2007 and April 2007. Pediatrics clinic houses 27 beds and during the timeframe of January and April 2007 the number of patients hospitalized was 280. Several patients were excluded in the sample because of such reasons as patients being hospitalized in the ICU without seeing their parents, and short term visits to the clinic as in the asthma attacks. The sample was constructed with 56 consented parents of children who were hospitalized in the clinic for at least one day.

Data sources and specs for the research

The data have been obtained via three different question forms. The first was consisted of 12 questions of demographics such as age, sex and education. The second was consisted of 19 questions on the literary towards parental expectations (from doctors, nurses and care procedures), developed by the researcher. The third was consisted of 22 questions on parents' satisfaction (how much of the expectations were met, health staff behaviors). The first two forms have been applied to patients while in-processing and the third one was applied during out-processing in the patients' room. The application of the first two forms lasted about 15 minutes and the third one took 10

minutes. In January, parents of 10 patients have been pre applied and no change has been made in the forms.

Data collection and verification

Data were analyzed by using SPSS 13.0 for Windows (SPSS Inc. IL., USA) software package with the utilization of percentage calculations, chi-square and Pearson correlation tests.

Results

Parents contained in the sample were all females and their age varied from 18 to 54 (mean=29.50±6.7), 66% of them (n=37) were high school graduate or more and 34% of them (n=19) were elementary school graduates, 62.5% of the mothers were housewives and 37.5% of them were working in the public and private sector.

According to the general health conditions of the children, moms considered their children healthy with the percentage of 71.4 during their daily routine. During the research 57.1% of the children were hospitalized resulting from an acute illness. Average days of stay in the hospital for the children was 6.93 ±7.3.

In Table1, children's days of stay in the hospital and mothers' anxiety levels have been compared. It has been found that the more children stay in the hospital, the higher level of anxious mothers could get. While mothers of children with the stay period of three days or less in the clinic have felt less anxious (16.6%); mothers of children with the stay period of more than three days have expressed that they had felt more anxious (83.3%) ($X^2=11.764$; $p<0.001$).

Time	Anxiety	
	Anxious	Very Anxious
3 days and less	20	4
4 days and more	12	20
Total	32	24

Table 1:The effect of hospitalization time to anxiety of mothers

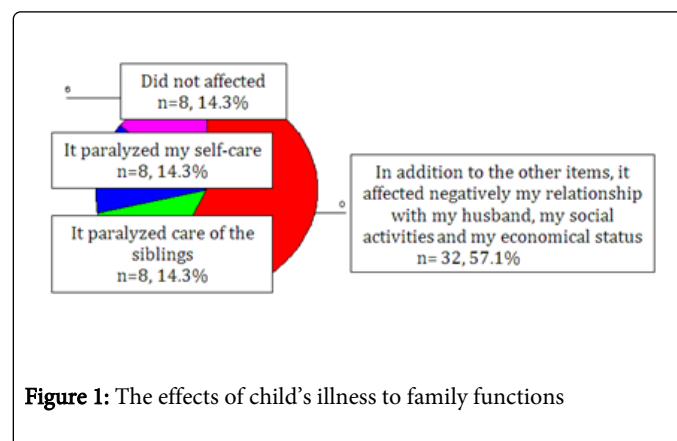


Figure 1: The effects of child's illness to family functions

Figure 1 depicts the effect of the child's disease over family relations. More than half of the mothers indicated that the situation of their children in the clinic would make a significant impact on their self-care, other siblings' care and social and economic conditions. On

the other hand, 14.3% of the mothers expressed that they have not been affected at all from these circumstances.

Based on the evaluations of mothers about nurses' attitudes beginning from in-processing thru out-processing, mothers evaluated nurses quite sincere and compassionate with the percentage of 85.7% (n=48).

In the same period, when they were asked to assess the attitudes of physicians, during in-processing 85.7% (n=48) of the mothers have found physicians very concerned while some 14.3% (n=8) found them indifferent. During the period of hospitalization, 28.6% (n=16) of mothers assessed the doctors as indifferent.

Although 71.4% (n=40) of mothers expressed that taking the history of illness is definitely important, records taken during patient discharge showed that only 71.4% (n=40) of mothers' histories were taken by nurses.

When the importance of doctors' taking illness history was asked 85.7% (n=48) of mothers answered as definitely important. However the records taken during discharge showed that doctors took 71.4% (n=40) of mothers' histories.

All of mothers (n=80, 100%) expressed their expectations from the nurses as; introducing themselves, showing the way to their ward, meeting the needs for clean material, informing about the condition of the child, telling them about the things they should especially take care in the course of clinic entry. 14.3% (n=8) of the mothers reported that nurses only showed their ward while 85.7% (n=48) said nurses did everything except introducing themselves.

Parents denoted that (71.4%, n=40) the frequency of patient observation should be left to nurses initiative, adding that the frequency and approach was appropriate (85.7%, n=48).

The expectations of mothers about nurses' attitudes to patients and their mothers showed that 14.3% of mothers expected tolerance to their stress, 85.3% added that nurses should support them in overcoming the discomfort originating from their patients pain, show positive attitude while communicating with the children and give information on what was to be faced during the treatment. Assessment of the results showed that 14.3% (n=8) of mothers were fully satisfied with their expectations. However, the ratio of mothers who reported that nurses showed only tolerance to their stress was 57.1% (n=32).

The expectations of mothers from doctors are seen in Table 2. All mothers expected the doctors diagnose the children's illness in a short time, inform about the developments from time to time during and after the treatment (100%). Only 71.4% of mothers expected a short waiting time for medical examination and, informing the children besides themselves.

Expectations from Doctors	N	%
Finding out what's wrong with the child	n=16	28.6%
The doctors seem prepared		
Explanation of the diagnosis / problem		
Information about the medicine		
Information about the procedures		
Information about progress of the diseases		
Information about what to do, if the same problem should occur after admission or discharge.		
In addition to these expectations;	n=40	71.4%
Short waiting time for the medical examination		
Inform the child with appropriate information		
Total	n=56	100%

Table 2: Expectations of Mothers' from Doctors

Expectations from Nurses	N	%
Teaching us to give our child medicine	56	100%
The child's needs are being taken care of, without waiting too long		
Considering the child's daily routine		
Information about what is going to happen the next day		
Showing us around in the ward		
Information about how to find things in the ward		
Providing a balanced diet for the child		
Information about clinical procedures		
Total	56	100%

Table 3: Expectations of Mothers' from Nurses

Results showed that 85.7% (n= 48) of mothers were fully satisfied with the doctors in terms of their expectations.

All expectations from nurses fully agreed on by mothers were shown in Table 3.

Table 4 shows the ratio for fulfillments of expectations from nurses. More than half of the mothers (57.1%) denoted that nurses didn't care about children's daily home routines while in hospital while all mothers (100%) added that all their expectations were fulfilled except this one.

Fulfilled Expectations	N	%
The child's needs were being taken care of, without waiting too long	n=8	14.3%
All of my expectations are fulfilled except Considering the child's daily routine	n=32	57.1%
All of my expectations are fulfilled.	n=16	28.6%

Table 4: Mothers' Fulfilled Expectations by Nurses

Discussion

In this part, findings about mothers concerns about children, the influence of the illness on family functions, mothers' expectations from doctors and nurses have been discussed.

Evaluating the parents' worry about their children, 43% (n=24) of parents defined their condition as very stressed. The stress level was increasing as the time period of hospitalization does. Hallström et al., pointed out that the children's illness and hospitalization effects family functions and creates intense confusion and worry for mothers.

57.1% (n=32) of mothers denoted that they disrupted both their and other children's care, their relation with their husbands and social activities were negatively affected. The financial effects were less important since all the patients had health insurance. But the children's disease and hospitalization affected all the family negatively anyway. These findings were also parallel to the literature. Parents reported that receiving answers to their questions, concerning approach during hospitalization, toward families; extensive evaluation of the disease was major factors that affect satisfaction. Keating et al. and Wissow also reported that factors like families' trust to doctors and nurses, and concerned approach of health care affects parents' satisfaction. The findings of this study is consistent with the one carried out by Keating and Wissow [9,10].

Evaluating the expectations of mothers from doctors, all the mothers expected the doctors; to be equipped and diagnose and perform treatment in a reasonable period of time, inform them by no means about the implementation and prognosis. In this study 85.7% of mothers thought that all their expectations were satisfied. This clearly means that most of mothers were pleased with the approach of doctors. Dellholm and Lambertsen, pointed out that parents satisfaction with the condition in hospital depends on the trust they feel for the doctor. The time the doctor shares with the patients, explanations made by the doctor [11].

Evaluating expectations from nurses; explaining the conditions and procedures, satisfying children's needs within a short period of time, keeping a supportive and concerned manner were main expectations of mothers. 28.6% (n=16) of mothers reported that they were fully satisfied with nurse in respect to these expectations. The rate for those mothers who concluded that all but care about children's daily home routines were satisfied was 57.1% (n=32), which was a fairly high one. Brody et al. [12] stated the same factors as nurses' approach, competency in health care and communication skills. Tanila stated that the support of nurses helps overcome the parents with the difficulties of a patient child. Hopia et al. also mentioned about the positive effect of a relation based on trust between parents and nurses, supportive approach and informing the parents on the patient's condition.

Conclusion

There is a correlation between mothers' anxiety level and children's time period of hospitalization.

The hospitalization of a child affects the care of the mother herself and the other children, relating with the husband, social activities and economic condition.

Mothers are mostly satisfied with the approach of doctors (85.7%, n= 48).

All expectations of mothers except caring about children's home routines are satisfied by nurses (100%, n=56).

Suggestions

Supportive approach of health care personal adds a big deal to satisfy parents' expectations. Keeping communication channels open, answering their questions and giving the best care available are respective ways to catch better standards in health care.

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