

Measurement of Patient Satisfaction and Experiences with Nursing Care in a Maternity Gynecology Hospital

Kadın Doğum Hastanesinde Hemşirelik Bakımı ile İlgili Hasta Memnuniyeti ve Deneyimlerinin Ölçülmesi

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ABSTRACT Objective: The aim of this study were to determine the effected factors and to measure satisfaction and experiences with nursing care of admitted patients in prenatal, postpartum, obstetric and gynecologic surgery wards. **Material and Methods:** The research planned as cross-sectional and descriptive type. The data were collected using the Newcastle Satisfaction Nursing Scales (NSNS) instrument which made validity and internal reliability of the Turkish version by Uzun and via a demographic information questionnaire. The NSNS were administered by researchers to 424 inpatients immediately before discharge from hospital. Demographic variables were evaluated via descriptive statistics. **Results:** It was determined that 241 (56.8%) of patients were between 18-27 ages, 174 (41%) of them graduated from primary school, 280 (66%) of them had hospital experience previously, 165 (38.9%) of them admitted inpatient of obstetric and gynecologic surgery ward, 171 (40.3%) of them had spent two days in hospital at the time of their interviews. The Experience Nursing Care Scale (ENCS) and Satisfaction Nursing Care Scale (SNCS) scores from NSNS were positively and significantly correlated with each other ($r=0.39$, $P=0.000$). It was found that the mean score of SNCS was 69.89 ± 16.94 and the mean score of ENCS was 57.44 ± 18.94 . It was found a statistically significant difference between patient's SNCS scores with patient's admitted ward and their admitted reason in this research. **Conclusion:** In result of this research was found that admitted ward and admitted reason were affected for nursing care satisfaction. Also, the results of this study will supply data for advance quality researchs about patient satisfaction with nursing care before launching total quality work in this hospital.

Key Words: Nursing care, patient satisfaction

ÖZET Amaç: Bu araştırmanın amacı, prenatal, postpartum, obstetrik ve jinekolojik cerrahi servisinde yatan hastaların hemşirelik bakımı hakkındaki deneyimleri ve memnuniyetlerini ölçmek ve etkileyen faktörleri belirlemektir. **Gereç ve Yöntemler:** Araştırma kesitsel ve tanımlayıcı tipte planlandı. Araştırmanın verileri Türkçe geçerlik ve güvenilirlik çalışması Uzun tarafından yapılan Newcastle Hemşirelikten Memnuniyet Ölçekleri ve anket formu ile toplandı. Memnuniyet ölçekleri, 424 hastaya, hastaneden taburcu olmadan hemen önce araştırmacılar tarafından uygulandı. Demografik değişkenler, tanımlayıcı istatistik ile değerlendirildi. **Bulgular:** Hastaların 241 (%56.8)'i 18-27 yaşları arasında, 174 (%41)'ü ilkokul mezunu, 280 (%66)'i daha önce hastane deneyimine sahip, 165 (%38.9)'i obstetrik ve jinekolojik cerrahi servisinde yatmakta, 171 (%40.3)'i de araştırma için görüşme yapıldığında iki gündür hastanede yatmaktaydı. Hemşirelik Memnuniyet Ölçeklerinden Hemşirelik Bakımı ile İlgili Yaşananlar Ölçeği (HBYÖ) ve Hemşirelik Bakımından Memnuniyet Ölçeği (HBMÖ) ortalama puanları pozitif yönde birbiriyle ilişkili bulundu ($r=0.39$, $p=0.000$). HBMÖ puan ortalaması 69.89 ± 16.94 ve HBYÖ puan ortalaması 57.44 ± 18.94 bulundu. Bu çalışmada, HBMÖ puanlarının hastaların yattığı servislere ve hastaneye yatma nedenine göre istatistiksel olarak önemli düzeyde farklı olduğu bulundu. **Sonuç:** Bu araştırmanın sonucunda, hastaların yattığı servis ve hastaneye yatış nedeninin hemşirelik bakımı memnuniyetini etkileyen faktörler olduğu bulundu. Aynı zamanda bu araştırmanın sonuçları, bu hastanede toplam kalite çalışmaları başlatılmasından önce, hemşirelik bakımı ile ilgili hasta memnuniyeti hakkında yapılacak olan çalışmalara veri sağlayacaktır.

Anahtar Kelimeler: Hemşirelik bakımı, hasta memnuniyeti

Patient satisfaction is identified as the combination of experiences, expectations and needs perceived.¹ However, it has also been defined as the patients' subjective evaluation of their cognitive and emotional reactions as a result of the interaction between their expectations regarding ideal nursing care and their perceptions of the actual nursing care.² Patient satisfaction is the most important indicator of high-quality health care and is used for the assessment and planning of health care.³ A high correlation exists between patient satisfaction with nursing care. The greater the patient satisfaction with nursing care is the greater the satisfaction with care in general.⁴ The measurement of patients' satisfaction with nursing is a specific importance since nursing service is the primary determinant of overall satisfaction with a hospital stay. Measure of the patient satisfaction is not only useful for the study and delivery of quality healthcare, but also the evaluation of healthcare services since lack of satisfaction suggest possibilities for improvement.

Patient satisfaction is a multidimensional construct that is influenced by patient and health care variables.⁵ For example, patient sociodemographic characteristics (e.g. sex, age, marital status), physical and psychological health, perceptions, previous experiences and expectations of care may be reflected in satisfaction for survey results.⁶⁻⁸

Patient satisfaction in hospital settings is influenced by several components: nursing care, medical care, health professional/patient communication, ward management, and ward environment, studies have identified nursing care as the most influential of these.^{5,9}

The measurement of patients' satisfaction with nursing is of specific importance since nursing service is the primary determinant of overall satisfaction with a hospital stay.¹⁰

In Turkey, health organizations have seen an increase towards improving health services to increase patient satisfaction. To value the patient satisfaction regularly by valid and reliable scales will supply to follow the quality that perceived by patients. Therefore necessary managements related to

expectations of patients in nursing practises can be fulfilled and it will help to rise the quality of nursing services.¹¹

In this hospital, the direct measurement of patient satisfaction with nursing care is a new phenomenon. In addition, in Turkey, although a review of the literature identified several tests that measured patient satisfaction with hospitalization services, there are limited studies measured both patients' expectations and patients' perceptions.

The findings of this study will be useful to value the relationship between nursing care and patients' satisfaction, the quality of the nursing care and to organize the nursing care. At the same time, this study carries importance regarding data supplying for the future studies are related to the patients' satisfaction with nursing care and experiences of the patients at Maternity Gynecology Hospitals in Turkey.

The aim of this study were to determine effected factors and female patient satisfaction with nursing care in inpatient prenatal wards, postpartum wards, gynecologic and obstetric surgery ward in Ordu Maternity-Gynecology and Children's Hospital.

MATERIAL AND METHODS

This cross-sectional research was conducted at in Maternity Gynecology and Child Hospital in Ordu, in East Blacksee Region, in Turkey. The hospital is a publicly and state funded institution in which 2344 babies are delivered and admitted inpatient 7087 in 2005.

The sample consisted of 424 patients who were discharged on postpartum unit and gynecologic units of the hospital. These patients' interviews were conducted on a nonrandom basis during May 17, 2004 and February 3, 2005. The participants eligible for recruitment were:

- At least 18 years of age,
- At least primary school graduated,
- Discharged from maternity and gynecology wards,
- Spent two night or more in the ward,

- Able to read and understand Turkish,
- Not too confused or ill to complete the questionnaires,
- Was voluntary, and the respondents was assured confidentiality.

DATA COLLECTION

The data of the research were collected via a demographic information questionnaire and the Experiences of Nursing Care Scale (ENCS) and the Satisfaction with Nursing Care Scale (SNCS) of the NSNS (Newcastle Satisfaction with Nursing Scales). The NSNS previously developed by Thomas et al.^{12,13} Construct validity and internal reliability of the Turkish version of NSNS was made by Uzun in 2003. The questionnaire form and the scales were given to 424 patients on their day of discharge. They received them in well in advance of their discharge to allow for completion prior to departure. The questionnaire form and NSNS took approximately from 22 to 25 minutes to complete. The question form and scales were filled in as self-reported by women.

Using demographic questionnaire, patients provided their age, education level, hospital experience, staying duration in hospital and patient admitted services.

In Turkey, prenatal, postpartum, obstetric and gynecologic surgery care are usually delivered by a nurse or midwifery. Therefore, we have used the term nurse rather than midwife to reflect this context in this paper. We preferred the NSNS for evaluating patient satisfaction with one inpatient admission and addresses only nursing care.

NSNS INSTRUMENT

The NSNS were developed by Thomas et al by measuring patients' experiences of and satisfaction with nursing, based on a their perspective.^{12,13} A structured, self-completion questionnaire was developed by asking patients, through individual and focus group interviews, what they perceived was good or bad quality nursing. Major themes emerging related to the availability and attentiveness of nurses, the degree of individual treatment afforded to patients, the provision of reassurance and infor-

mation and the openness of informality of nurses. Other themes were mentioned less frequently; these were nurses' professionalism and knowledge ability, ward organization and the ward environment. The NSNS were developed from these concept. The scales are incorporated which comprises two sections: (i) ENCS and (ii) SNCS.^{12,13}

ENCS, a series of 26 statement on aspects of nursing are presented and respondents are asked to indicate how true each is of their own experience, using a seven point Likert scale (1= disagree completely, 2= disagree a lot, 3= disagree a little, 4= neither agree nor disagree, 5= agree a little, 6= agree a lot and 7= agree completely). To avoid affirmation bias, a mixture of positively and negatively worded statements (15 and 11 items, respectively) are included. Responses across all items are summed and transformed to yield an overall "experiences score", with a potential range of 0-100, where 100 represents the best possible experience.^{12,13} In the study of Thomas et al Cronbach's alpha was 0.91. In the study of Uzun, Cronbach's alpha was 0.75 for ENCS. Cronbach's alpha was 0.92 for ENCS in this study.

SNCS, consist of 19 items. All items are scored on a five-point Likert scale (1= not at all satisfied, 2= barely satisfied, 3= quite satisfied, 4= very satisfied and 5= completely satisfied). Total score was summed and transformed to yield an overall "satisfaction score" of 0-100, where 100 denotes complete satisfaction / highest level of satisfaction with all aspects of nursing care.^{12,13} In the study of Thomas et al Cronbach's alpha was 0.96 for SNCS, correlations between single items and total ranged from 0.53 to 0.82.^{12,13} In the study of Uzun, Cronbach alpha 0.94 for SNCS. In this study of Cronbach's alpha was 0.92 for SNCS.

The data were analysed using the SPSS for Windows 11.5 SPSS (Chicago, IL, USA, 2001) statistical package. Descriptive statistics (including mean, median, standart deviation, frequency, and percentage) were calculated for demographic variables. Differences were tested with the Pearson correlation test, the Kruskal-Wallis test, t-test. One-way ANOVA was used when three or more groups of scores were encountered.

Dependent variables of this research were experiences and satisfaction levels with nursing care. Independent variables of this research are patient's age, education level, hospital experience, staying duration in hospital and patient admitted wards.

Permission to use the NSNS in this study was obtained from Uzun who construct validity and internal reliability of the Turkish form of NSNS. The study was given permission by the hospital administration and conformed to the principles of the Declaration of Helsinki. Patient were invited to participate in the study and informed before verbal consent was obtained. The purpose of the study and the time it takes to complete the questionnaire were state to respondents in a covering letter. The researchers guaranteed patients that their identities and answers would be kept confidential.

RESULTS

The characteristics of the participants are described in Table 1. It was determined that 241 (56.8%) of patients were between 18-27 ages, 174 (41%) of them graduated from primary school. It was found that 280 (66%) of patients had hospital experience previously, 171 (40.3%) of them had spent two days in hospital at the time of their interviews, 165 (38.9%) of them admitted inpatient of obstetric and gynecologic surgery ward, 169 (39.9%) of them were sectio cesarian (Table 1).

In this study the level of patients' satisfaction with nursing care and experiences of nursing care with their recent hospital stay were investigated. The mean points of patients' satisfaction with nursing care was 69.89 ± 16.94 [median value 67.36 points (R= 0-100)]. The mean points of experiences of nursing care was 57.44 ± 18.94 [median value 58.24 points (R= 0-100)]. ENCS points of patient's was found 48 age and over groups, graduated from university higher than other groups but this research was compared patient's ENCS points according to their age, education levels as statistically significant a difference was not founded ($p > 0.05$), but ENCS points of patient's was found 48 age and over groups (61.02 ± 10.05) and graduated from university

TABLE 1: Distribution in according to age groups, education levels, ward, diagnosis, experience, time of stayed in hospital of participants *

Variables	n	%
Age groups (years)		
18-27	241	56.8
28-37	144	34
38-47	24	5.7
≥ 48	15	3.5
Education		
Primary school	174	41
Secondary school	49	11.5
High school	153	36.2
University	48	11.3
Experience		
Yes	280	66
No	144	34
Time of stayed		
2 days	171	40.3
3 days	162	38.2
≥ 4 days	91	21.5
Ward		
Prenatal ward	122	28.8
Postpartum ward	137	32.3
Obstet. & Gyn. surgery ward	165	38.9
Patient's admitted reason		
Myoma	29	6.8
Sectio cesarean	169	39.9
Birth	98	23.1
Hyperemesis / preeclampsia	64	15.1
Preterm	16	3.8
Ect. Pregn. /abort.	31	7.3
Other	17	4

*n= 424

(59.45 ± 10.13) higher than other groups (Table 2). This research was compared patient's SNCS points according to their age and education levels and was not founded a statistically significant difference ($p > 0.05$). SNCS points of female patient's were founded 38-47 age group (71.27 ± 16.29), graduated from university (74.07 ± 17.90) higher than other groups (Table 2).

ENCS points of patient's was found 4 days stayed in the hospital, admitted patients of prenatal unit, hyperemesis and preeclampsia diagnosis higher than other groups but this research was compa-

TABLE 2: Comparison of scores of their ENCS and SNCS with age groups and education levels of participants.*

Variables	ENCS scores			SNCS scores		
	Mean	SD	Med	Mean	SD	Med
Age groups (years)						
18-27	57.63	19.04	58.24	69.67	18.15	67.36
28-37	56.74	20.27	58.24	70.28	15.33	66.31
38-47	57.44	13.59	59.06	71.27	16.29	72.10
≥ 48	61.02	10.35	58.24	67.29	13.28	60.00
Test	$\chi^2_{KW} = 1.093$	$P = 0.779$		$\chi^2_{KW} = 1.253$	$p = 0.740$	
Education						
Primary school	57.05	22.90	57.96	62.45	16.88	67.89
Secondary school	56.34	20.16	58.24	69.79	16.28	62.10
High school	57.60	15.48	57.69	68.84	14.62	65.26
University	59.45	10.13	60.71	74.07	17.90	73.15
Test	$F = 0.262$	$p = 0.853$		$F = 1.184$	$p = 0.315$	
Total	57.44	18.94	58.24	69.89	16.94	67.36

*n= 424

ENCS: Experiences of Nursing Care Scale, SNCS: Satisfaction with Nursing Care Scale.

red female patient's ENSC points according to hospital experience previously, patient's admitted ward, duration stayed in the hospital, their diagnosis and a statistically significant difference was not founded ($p > 0.05$) (Table 3). This study was compared patients' ENCS points according to hospital experience previously, patient's admitted ward, duration stayed in the hospital, their admitted reason and a statistically significant difference was not found before state of experience in hospital (58.31 ± 17.14) longer than and 4 days stayed in the hospital (59.28 ± 17.41), admitted patients of prenatal ward (59.88 ± 17.13), among hyperemesis and preeclampsia patients (59.83 ± 17.42) higher than other groups (Table 3).

This research was compared female patient's SNCS points according to hospital experience previously, duration stayed in the hospital was not found a statistically significant difference ($p > 0.05$), but patient's admitted unit and admitted reason were found a statistically significant difference. SNCS points of patient's were found before not state of experience in hospital (70.16 ± 19.19), 3 days and over stayed in the hospital (72.10 ± 16.32), admitted patients of surgery ward (72.77 ± 17.22), the sectio caesarian (73.84 ± 17.74) and the preterm pregnancy (73.28 ± 14.31) higher than ot-

her groups. It was founded significant difference according to female patient's admitted unit ($p = 0.006$) and their admitted reason ($p = 0.001$). It has been determined that the patient's satisfaction is a significant difference the applying services of the patients and their admitted reason. The surgery patients have higher satisfaction levels of nursing care (Table 3).

Also, ENCS and SNCS scores were positively and significantly correlated with each other in this study ($r = 0.39$, $p = 0.000$).

DISCUSSION

The patients' perceive with nursing care largely depends on their social status, age, educational level, cultural background and previous hospital experiences. Support and respect from nurses, constant availability of nurses and appropriately given responses are the main indicators of satisfaction. It was determined that the negative relationship between total nursing hours per patient day and the dimension respect for patient's values, preferences, and expressed needs suggests that a lower number of total nursing hours per patient day may be associated with a higher percentage of patients indicating problems.^{11,14} In some studies the old patients

TABLE 3: Comparison of scores of their ENCS and SNCS with experiences, time of stayed, ward, admitted reason of participants.*

Variables	ENCS scores			SNCS scores		
	Mean	SD	Med	Mean	SD	Med
Experience						
Yes	58.31	17.14	58.24	69.74	15.69	65.78
No	55.74	21.99	59.06	70.16	19.19	68.42
Test	t= 1.323	p= 0.178		t= -0.241	p= 0.809	
Time of stayed						
2 days	55.74	21.03	57.69	67.62	17.81	62.10
3 days	58.19	17.35	59.61	72.10	16.32	72.10
≥ 4 days	59.28	17.41	59.89	70.20	15.94	67.36
Test	F= 1.243	p= 0.289		F= 2.952	p= 0.053	
Ward						
Prenatal ward	59.88	17.13	58.24	66.38	13.09	63.68
Postpartum ward	56.47	21.79	58.79	69.54	19.01	63.15
Obstet.&Gyn. surgery ward	56.43	17.58	58.24	72.77	17.22	72.63
Test	F= 1.427	p= 0.241		F= 5.124	p= 0.006	
Patient's admitted reason						
Myoma	59.26	13.26	58.24	70.49	15.63	67.36
Sectio cesarean	58.70	18.18	59.89	73.84	17.74	73.68
Birth	54.83	22.98	57.69	65.53	18.91	60
Hyperemesis / preeclampsia	59.83	17.42	58.51	67.13	13.03	67.36
Preterm	51.23	18.65	57.14	73.28	14.31	70
Ect. pregn. / abort.	58.25	13.20	57.69	67.77	13.57	63.15
Other	52.19	22.37	57.14	65.69	13.32	64.21
Test	$\chi^2_{KW}= 5.443$	p= 0.488		$\chi^2_{KW}= 23.805$	p= 0.001	

*n= 424

ENCS: Experiences of Nursing Care Scale, SNCS: Satisfaction with Nursing Care Scale.

were more satisfied than the young patients, in other studies these were no relation between the age and satisfaction.^{11,15-18} Increasing age and lower socio demographic status (i.e. education) were expected to be related to lower expectations.¹⁶ In this study, if the SNCS and ENCS are examined according to the age group, while there isn't a significant difference, it has been seen that the experience of nursing care of the patient gets higher as the patients get old, on the other hand the patient satisfaction with nursing care decreases. Comparing the younger women to the old, the older ones apply to the hospital more often and get more benefit from nursing care services because of birth, genital infection, abortion, and bleeding. This result shows that the nursing care experiences of the older women have negative features in those applications.

For this reason, their satisfaction could be effected in a negative way.

Carr-Hill (1992) stated that upper educated patients could expect high standard services so they could be less satisfied.¹⁵ Akgün (2002) found parallel results in this research results.¹⁹ In contrast, other study shows that education level doesn't affect satisfaction.²⁰ In this study, while there isn't an significant difference according to the education level, it has been founded that both ENCS and SNCS points are the highest among university graduated patients. Although the study place is a state hospital, as the education level gets higher, the ratio of being special patient gets higher and they are usually cured in special rooms. Those patients can tell themselves better about getting nursing care services and so they are more succes-

full about it. Also, usually those patients are a special patient position and they more benefit from the nursing care services. We think that this reason causes ENCS and SNCS points higher even if there isn't an significant difference among groups.

Forbes & Brown found that the patients who stayed in the hospital before have more nursing care expectations than the patients who come to the hospital firstly.²¹ O'Connel et al found that the staying duration in the hospital doesn't affect the satisfaction.¹⁸ According to Beck & Larrabee, nursing staff members' interaction and behaviors are essential to patient satisfaction.²² In a sample of 42 nursing units in hospital, Blegen et al found that patient complaints were inversely related to the proportion of hours of care delivered by registered nurses.²³ That is, if a patient perceives quality nursing care, he or she tends to be satisfied with his or her overall health care. In our study, according to hospital experience isn't significant difference, however, it is determined that the patients who are experienced about the hospital before have more nursing care experiences, but less nursing care satisfaction. Moreover, it is stated that as the staying time in hospital gets longer, the nursing care experiences gets higher, on the other hand the nursing care satisfaction gets lower while the difference isn't significant. In our study, the low SNCS points of the patients who have hospital experiences can be related to their previous experiences and having different expectations that are not satisfied.

Akın & Erdoğan found the satisfaction of nursing care is higher in medical services than surgical services and the difference statistically significant in medical-surgical services in Turkey by using SCNS of the NSNS.²⁰ Beck & Larrabee found a high correlation between satisfaction with nursing care and satisfaction with overall care.²² Burnes et al determined that across urban and rural, community and academic, small and large healthcare institutions, validates the importance of nursing staffing and patient satisfaction with nursing care.²⁴ High average points of SNCS in this study can be related to the patients long-term benefit of nursing care

and their succesful treatment during discharging of the hospital in obstetric and gynecologic surgery wards. When we evaluated the ENCS average points of patients, we found that prenatal patients have higher average points than other patients, but the difference among services isn't statistically significant. Prenatal ward is one in which the patients admitted for the longest time in hospital. So, the experiences of the patients with the nurse care take more time in this ward. In this study, prenatal ward patients have the lowest SNCS while obstetrics and gynacology surgery ward patients have the highest SNCS points. Surgery patients, although their ENCS points are the lowest, SNCS points of them is the highest. At the same time, it was found a statistically significant difference between patient's SNCS scores with patient's ward ($p= 0.006$). The experience of nursing care is not the only factor that should make for the patient satisfaction higher as paralel to this, it is thought that such factors socio demographic features, offering qualified services, service perceived nursing care services can be important factors that affects the result of the study.

In our study, according to admitted reasons of patient, respectively sectio ceaserian, preterm action and myomectomy patients have the highest average points of SNCS and the average is statistically significant ($p= 0.001$). We found that the sectio ceaserian, preterm action and myomectomy patients are longer time than other patients in hospital and more benefit from nursing care in a nursing day as totally. Preterm action patients who stayed the hospital for a long time and observed. Though those of ENCS points are lower, SNCS of them is the highest. Sectio ceaserian patients who have accompanions and babies with them so they are in the hospital as results of happiness. Myoma patients who got operations in order to be healthy. In those patients high satisfaction can be related to long term benefit of nursing care, and expectations and perception of nursing care services.

In this study, in addition to a positive significant relationship between ENCS and SNCS scores is determined ($r= 0.39$, $p= 0.000$). It is mean that nursing care experiences affect nursing care satis-

faction. In addition to the more offering qualified nursing services perceived by patients is the most important factors that makes patients' satisfaction higher.

Our study found that was mean of ENCS score was 57.44 ± 18.94 and the mean of SNCS score 69.89 ± 16.94 . Comparing the results of this study to the studies that were made with the same measurement in the literature, it was determined that SNCS scores are paralel to the literature, but ENCS scores are founded in a lower level than the literature.^{11-13,20,25} Our study result reminds that the patients included in this study got less benefit from nursing care services, so they have less nursing care experiences.

CONCLUSIONS

As a results, it was found a significant difference the between admitted wards of the patients and their admitted reason and satisfaction with nursing care. It was determinated satisfaction with nursing care in gynecologic and obstetrics surgery wards higher than other wards.

The experience of nursing care was higher of university graduated patients, the elders, hospital experienced patients, patients stayed in the hospital for a long-term, patients stayed in prenatal ward and hyperemesis and preeclampsia pa-

tients but, statistically difference wasn't significant.

It was determined that a significant positive relationship is between nursing care experiences and nursing care.

This study has shown us that the patients' satisfaction could be different according to patients' ward and the admitted reasons of the patients and nursing care satisfaction and experiences are related factors to each other. The results of this study are also important for the regulations that are made to make patients' nursing care satisfaction higher at Maternity Gynecology Hospitals.

The suggestions in the directions of the founded results;

- First of all determining the nursing care expectations of the patients,
- In a regular periods, investigation of nursing care experiences and satisfaction of patients; considering the results, making necessary regulations,
- Nursing care services must be controlled by authorized people and must be made solved the problems that cause bad services.

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