



Satisfaction of Patients under Gynaecological and Obstetric Care in a Selected Medical Facility Providing Services under Coordinated Care for Pregnant Women (CCPW)

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Abstract

Introduction: *The objective of services provided within CCPW is providing pregnant women with coordinated care at the 2nd or 3rd level of perinatal care, including specialist outpatient care, childbirth and care for the newborn, and, if there are medical indications, also hospitalisation.*

Objective: *The main objective of the paper was to learn about change in satisfaction level of patients under gynaecological and obstetric care in a selected medical facility providing services under Coordinated Care for Pregnant Women (CCPW).*

Material and methods: *The study was conducted in two stages. The first stage of the study was carried out one month after the introduction of Coordinated Care for Pregnant Women (CCPW) in the facility, while the second stage of the study was carried out after seven months of providing services under the CCPW. In the first stage of the study, 150 patients, i.e. 98.7% of those who gave birth in the analysed period, returned the completed questionnaires, and 162 patients (83.1% of those giving birth) in the second stage.*

Results: *Most of the respondents (103 people), i.e. 68.7%, participating in the first stage of the study, assessed the services provided under outpatient care very well. The second largest group were patients who rated the discussed services as good – 22.7% (34 people). In the second stage of the study, as in the first stage, the majority of people assessed the outpatient specialist care very positively – 79.6% (129 people), while 28 women, i.e. 17.3% of the respondents, rated it good. The respondents were asked if they would choose the facility again as a place for giving birth again. Both in the first and in the second stage of the study, almost all respondents – 98.0% (147 people) vs 98.1% (159 people) answered the question: yes or definitely yes.*

Conclusions: *The conducted research has shown a high level of patient satisfaction with care and proper functioning of the assessed elements of service provision both in outpatient specialist care and during hospitalisation.*

Key words: *coordinated care for a pregnant woman, patient satisfaction, quality of medical care.*

Introduction

Elements of coordinated health care are being introduced more and more often in the Polish health care system as a tool to improve the quality of medical care, and thus the effectiveness of patient treatment, e.g. coordinated care for an oncologically ill patient DILO, Coordinated Care for Pregnant Women CCPW, Comprehensive Patient Care Programme after a Heart attack [1]. Coordinated Care for Pregnant Women (CCPW) was introduced as part of the comprehensive support program for families, "For Life" [2]. The objective of services provided within CCPW is providing pregnant women with coordinated care at the 2nd or 3rd level of perinatal care, including specialist outpatient counselling, childbirth and care for the newborn, and, if there are medical indications, also hospitalisation. The facility providing services under the Coordinated Care for Pregnant Women is obliged to perform a wider range of tasks compared to standard obstetric and gynaecological care for a pregnant woman. The tasks of the coordinating facility include, *inter alia*: coordinating the entire process of caring for a pregnant woman; developing an individual perinatal care plan; developing and submitting to the National Health Fund an organisational chart for the implementation of the CCPW; preparing "Information for a woman under coordinated care for pregnant women" for patients; coordination of activities related to the provision of additional specialist consultations resulting from the care process; providing the patient with the possibility of 24/7 contact with the facility on an individual telephone number for patients covered by the CCPW programme; establishing the principles of consultation and cooperation with the 3rd reference level centre, which provides consultations in cases of abnormalities in the course of pregnancy [3].

One of the tasks of the facility providing services under Coordinated Care for Pregnant Women is to evaluate the satisfaction of patients with care and the quality of services provided by means of regular surveys among patients.

The method of assessing the quality of medical care provided to patients more and more often used nowadays is testing their satisfaction with the received services [4, 5, 6, 7]. Constant monitoring of the level of patient satisfaction is of great importance for entities providing health-care services because patients shape the current market of medical services, *inter alia*, by expressing their opinions and expectations towards medical and nursing care [8, 9]. Particularly noteworthy is the fact that patient satisfaction is positively correlated with the safety and clinical effectiveness of health care [10, 11, 12].

The high quality of services determines the patient's safety, which in turn translates into their life and health. The quality of services and its role is still growing, it is, *inter alia*, a consequence of the progressive standardisation, but also the growing importance of the individual approach to the patient, as well as the increase in their expectations towards care and the service provider [13, 14, 15, 16].

The importance of assessing patient satisfaction with health care services for health system evaluation is underlined by the fact that patient satisfaction, along with mortality and morbidity, was included among the three measures of overall health care assessment established in 1970 by the United States National Center for Health Services Research and Development. The Organization for Economic Cooperation and Development (OECD) and the World Health Organization (WHO) also emphasise the importance of assessing health care services from the perspective of recipients for the development of health care and the quality of medical care [17, 18, 19].

Objective

The main objective of the paper was to learn about change in satisfaction level of patients under gynaecological and obstetric care in a selected medical facility providing services under Coordinated Care for Pregnant Women (CCPW).

Material and methods

The study was carried out in 2020 in a selected medical facility providing services in the field of obstetrics and gynaecology as part of the basic hospital health care system. The study was conducted in two stages. The first stage of the study was carried out one month after the introduction of Coordinated Care for Pregnant Women (CCPW) in the facility, while the second stage of the study was carried out after seven months of providing services under the CCPW. At each stage of the study, empirical material has been collected for two months.

When collecting the empirical material, a questionnaire provided by the National Health Fund was used to assess the level of satisfaction of patients using CCPW services, consisting of 21 questions, including 8 questions on outpatient care and 13 questions on hospital care. The questionnaire was intended for self-completion by respondents. Participation in the study was voluntary and anonymous. Patients were asked to fill in the questionnaire after delivery, before leaving the hospital.

In the first stage of the study, 150 patients, i.e. 98.7% of those who gave birth in the analysed period, returned the completed questionnaires, and 162 patients (83.1% of those giving birth) in the second stage.

The data contained in the surveys were entered into the MS Excel spreadsheet. In order to develop the collected empirical material, descriptive methods and methods of statistical inference were used. For the description of the whole group of examined and subgroups distinguished on the basis of qualitative features, structure indicators were calculated, which were expressed as a percentage [%]. To compare the incidence of particular categories of quantitative features in the analysed groups, the chi-square independence was used. The results for which the values of the statistics obtained in the conducted tests belonged to the critical area of the relevant distribution at the significance level $p=0.05$ were considered significant.

Results

Among the total number of patients (150 women) who submitted the completed questionnaires in the first stage of the study, the vast majority, i.e. 86.7% (130 people) of the respondents admitted that the person conducting the pregnancy established a plan of care for her and the baby at the first visit, during which the patient's pregnancy was confirmed. In the second stage of the study, the percentage of women who confirmed the plan of care for the patient and the child was higher and amounted to 95.7% (155 people). The observed differences turned out to be statistically significant – $p < 0.005$, $\text{Chi}^2 = 8.003$ (Table 1).

In the first stage of the study, 123 patients (82.0%) replied that they had obtained information on practical and theoretical preparation for childbirth while using the outpatient specialist care. In the group of 162 women who took part in the study, 151 respondents, i.e. 93.2%, gave a similar answer after 7 months of CCPW services in a facility. The differences in the distribution of answers to the question asked were statistically significant – $p < 0.005$, $\text{Chi}^2 = 9.15$ (Table 1).

In the group of 150 women participating in the first stage of the study, the majority, that is 79.3% of the respondents (119 people), stated that they had received information on newborn care and breastfeeding in the outpatient specialist care. Among 162 women who submitted completed questionnaires in the second stage of the study, the percentage of patients who admitted that they had been provided with such information was significantly higher and amounted to 92.0% (149 people) – $p < 0.005$, $\text{Chi}^2 = 10.276$ (Table 1).

In the last question on outpatient specialist care, patients were asked to give an overall assessment of the services provided. Most of the respondents (103 people), i.e. 68.7% of those participating in the first stage of the study, assessed the services provided under outpatient care very well. The second largest group were patients who rated the discussed services as good – 22.7% (34 people). In the second stage of the study, as in the first stage, the majority of people assessed the outpatient specialist

care very positively – 79.6% (129 people), while 28 women, i.e. 17.3% of the respondents, rated it good (Table 1).

Table 1. Implementation and comparison of the assessment of selected elements of specialist outpatient care by patients under Coordinated Care for Pregnant Women (CCPW) in the analysed periods

Outpatient specialist care	One month after the introduction of CCPW		7 months after the introduction of CCPW		p
	N	%	N	%	
Establishing a care plan for the patient and the child by the person carrying out the pregnancy at the first visit					
yes	130	86.7	155	95.7	p<0.005 Chi ² =8,003
no	20	13.3	7	4.3	
Obtaining information on preparation for childbirth	N	%	N	%	p
yes	123	82	151	93.2	p<0.005 Chi ² =9,15
no	27	18	11	6.8	
Obtaining information on newborn care and breastfeeding	N	%	N	%	p
yes	119	79.3	149	92.0	p<0.005 Chi ² =10,276
no	31	20.7	13	8.0	
Assessment of outpatient care	N	%	N	%	p
very good	103	68.7	129	79.6	p<0.05
good	34	22.7	28	17.3	
rather good	12	8	5	3.1	
poor	1	0.7	0	0	
very poor	0	0	0	0	

Source: own research.

Another analysed area of CCPW benefits was hospital care. In the first stage of the study, the vast majority of the respondents, i.e. 87.3% (131 people), assessed the organisation of admission to the ward as good or very good. A similar distribution of responses was noted among the

women participating in the second stage of the study. The organisation of admission to the ward was rated very well by 82.7% (134 people) of the respondents, while well by 9.3% of the respondents, i.e. 15 people ($p>0.05$) (Table 2).

Almost all patients participating in the first stage of the study – 96.7% (145 people) admitted that during their stay in hospital, care was always performed with preservation of privacy. In the second stage of the study, the percentage of people who gave a similar answer was higher by over two percentage points (98.8%, 160 people) – $p>0.05$ (Table 2).

Among 150 women participating in the first stage of the study, 139 people (92.7%) admitted that all information about their health was always provided to them in an understandable way. In the group of patients who took part in the study, seven months after the commencement of CCPW in the facility, almost all patients – 97.5%, gave a similar response ($p>0.05$) (Table 2).

The patients were then asked to assess the availability of a doctor and midwife in the ward. The availability of a doctor, both in the first and in the second stage of the study, was assessed by almost all patients as good or very good – 98.0% vs 98.2% ($p>0.05$) (Table 2).

The availability of the midwife, regardless of the stage of the study, was assessed by all patients as good or very good (Table 2).

In the last question on hospital care, the respondents were asked if they would choose the facility again as a place to deliver another baby. Both in the first and in the second stage of the study, almost all respondents – 98.0% (147 people) vs 98.1% (159 people) answered the question: yes or definitely yes 2).

Table 2. Comparison of the assessment of selected elements of hospital care by patients under Coordinated Care for Pregnant Women (CCPW) in the analysed periods

Hospital care	One month after the introduction of CCPW		7 months after the introduction of CCPW		p
	N	%	N	%	
Assessment of the organisation of admission to the ward	N	%	N	%	p<0.05
very good	120	80.0	134	82.7	
good	11	7.3	15	9.3	
rather good	13	8.7	12	7.4	
poor	6	4.0	1	0.62	
Preservation of privacy and confidentiality while being taken care of	N	%	N	%	p>0.05
yes, always	145	96.7	160	98.8	
usually yes	5	3.3	2	1.2	
rarely	0	0.0	0	0.0	
no, never	0	0.0	0	0.00	
Understandable communication of information on health	N	%	N	%	p>0.05
yes, always	139	92.7	158	97.5	
usually yes	7	4.7	3	1.9	
rarely	4	2.7	1	0.6	
no, never	0	0.0	0	0.0	
Doctor's availability assessment	N	%	N	%	p>0.05
very good	135	90.0	155	95.7	
good	12	8.0	4	2.5	
rather good	3	2.0	3	1.9	
poor	0	0.0	0	0.0	
very poor	0	0.0	0	0.00	
Midwife's availability assessment	N	%	N	%	p>0.05
very good	140	93.3	155	95.7	
good	10	6.7	7	4.3	
rather good	0	0.0	0	0.0	
poor	0	0.0	0	0.0	
very poor	0	0.0	0	0.0	

Choosing the hospital as a good place to deliver another baby	N	%	N	%	p
definitely yes	137	91.3	150	92.6	p>0.05
yes	10	6.7	9	5.5	
rather yes	3	2.0	3	1.9	
no	0	0.0	0	0.0	
definitely yes	0	0.0	0	0.0	

Source: own research.

Discussion and Conclusions

The provision of services under Coordinated Care for Pregnant Women imposes additional obligations on medical facilities, including the need to evaluate the quality of selected elements of service delivery and the level of patient satisfaction with care. This, in turn, allows the identification of factors that are worse assessed by patients or implemented at an inappropriate level.

The conducted research has shown a high level of patient satisfaction with care and the proper functioning of the assessed elements of service provision both in outpatient specialist care and during hospitalisation.

Compared to the first stage of the study in the second stage, i.e. 7 months from the start of CCPW, a statistically significant improvement was observed in the following elements of the provision of services in outpatient specialist care: establishing a care plan for the patient and the child by the person carrying out the pregnancy at the first visit 86.7% vs 95.7%; obtaining information on preparation for childbirth 82.0% vs 93.2% and obtaining information on newborn care and breastfeeding 79.3% vs 92.0%. The observed improvement of the assessed elements did not, however, significantly change the overall, very high assessment of the services provided in outpatient specialist care, which almost all patients, both in the first and in the second stage of the study, assessed well or very well. It should be emphasised that the assessment of outpatient specialist care performed by patients does not give fully reliable results,

which is related to the process of providing services. Individual patients can be included in CCPW at any stage of pregnancy. Some of them, before the first visit to a given facility, receive care in other clinics or private doctor's offices, which in turn may negatively or positively translate into the overall assessment of outpatient specialist care used by the patient during pregnancy.

The conducted studies did not show statistically significant changes in the level of patient satisfaction with selected elements of obstetric and gynaecological care during hospitalisation in the first and second stages of the study. The lack of the observed differences could be caused by a very high assessment of all analysed elements of care in the first stage of the study.

In order to maintain high-quality medical care and to quickly identify possible unfavourable changes in the level of satisfaction of patients with CCPW programme, regular analyses of empirical material from the conducted surveys among patients covered by Coordinated Care for Pregnant Women should be conducted.

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