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Postpartum Patients Reports of Satisfaction with a Welcome Meal after a Vaginal Delivery

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ABSTRACT

The purpose of this research study was to Objective: assess patient perspectives regarding a special Welcome The focus was on patients' feeling welcomed and important because prior research has shown that when a patient's expectations are exceeded, patient satisfaction This study suggests that receiving a Welcome increases. Meal may improve their experience on a postpartum unit. Prior to discharge, each patient on the maternity unit was served a special Welcome Meal. A questionnaire was given to patients that consisted of six questions. six questions incorporated six themes found in research literature on improving patient satisfaction. These themes included exceeding one's expectations, feeling important, feeling welcome, having a positive experience, increasing one's morale and providing good quality food.

Patients/Participants: The sample consisted of 30 postpartum patients between the ages of 20-47 whom had undergone a vaginal delivery of a live infant.

Results: The highest rated question indicated that the Welcome Meal made the patients feel welcome (96.6%). The second highest rated question shows the Welcome Meal to be of good quality (96.6%). The Welcome Meal not only made the patient feel important, but also created a more

pleasant hospital experience. Overall 86.6% agreed that it gave a positive experience and exceeded their expectations (90%).

The research indicated that the six themes found in improving patient satisfaction were also present when asked about the Welcome Meal. The limitations to the study include having a small non-random sample of 30 This study suggests that having such a meal patients. implemented on the maternity unit may have a positive impact on patient satisfaction. Future studies should provide a larger sample size. Further research is needed to correlate improved patient satisfaction and the Welcome Meal in a pre and post test design.

Key Words: patient meals, patient satisfaction, postpartum

Introduction

A few people and some research studies have attempted to define satisfaction. Donabedian described patient satisfaction as an outcome not clearly defined, making it difficult to measure, and validates the quality of care (1966).He also states that patient satisfaction is an expression of a patients' judgment. The definition of patient satisfaction is constantly evolving. With the difficulty defining and measuring satisfaction, many studies have explored the relationship between satisfaction and variables that might affect it (Carr-Hill, 1992). studies also expressed that the sources of dissatisfaction can vary, and can be defined differently by different people and by the same person at different times. of this research is to determine if the themes or variables that affect satisfaction are present when receiving a special Welcome Meal.

Literature Review

Patient opinion of services has gained popularity and has increased research in possible ways to improving services provided to patients. In the review of research articles, there were six themes in patient satisfaction in relation to the Welcome Meal.

Theme 1: Exceeding one's expectation

Early research by Abramowitz (1987) shows that patients' who find the quality of care and the services better than expected are more satisfied. Carr-Hill (1992) expresses that satisfaction is complex and is related to factors including life style, past experiences and future expectations. Although patient satisfaction may be complex, there may be small special details that may help improve it. Exceeding a patients' expectation by providing a special Welcome Meal may be one.

Theme 2: Feeling important

According to Dube, Lauette, Trudeau, and Belanger, (2008), the satisfaction of basic human needs such as recognition, reassurance, and status is crucial. Acknowledging the patient provides satisfaction and contentment. It is necessary to emphasize patients' views in improving the quality of health services (Shaikh, Mobeen, Azam, & Rabbani, 2008). Patients' opinions and feelings should be recognized. A patient who is recognized with a Welcome meal is more likely to be satisfied with their hospital stay.

Theme 3: Feeling welcome

Not only is it essential for the patient to feel important, but they also need to feel welcomed. Hospital staff has a significant role in providing this to patients. research done by Davis and Adams-Greenly (1994), it is important on how welcome staff members make patients feel when they arrive. Showing genuine concern with responses, preparations and education make a significant difference.

Theme 4: Having a positive experience

Through surveying patients about their reaction to the Welcome Meal we can gain insight into how patients interpret the experience. Patient satisfaction is a reflection of their lived hospital experience (Henderson, Caplan, & Daniel, 2004). Providing a positive experience with a Welcome meal may improve the experience a patient receives on the postpartum unit. Personalizing care can give way to a positive experience (Schechter, 1993).

Theme 5: Increase one's morale

A low morale can contribute to negative outcomes (Beyea, 2004). A Welcome meal can provide a positive change in procedures, which may improve a patients' morale and quicken a recovery. Receiving a special Welcome Meal will change the daily routine and establish a good situation.

Theme 6: Provide good quality food

Dissatisfaction with meals results in reduced food intake, leading to poor nutritional status, weight loss, functional decline, and depression in patients (Galanos, Pieper, Cornoni-Huntly, Bales, & Fillenbaum, 1994). A patient who is better nourished and more satisfied has a speedier recovery.

Conceptual Framework

The Plan Do Study Act (PDSA) Cycle is a model framework for the improvement of a process used for testing a change in the work setting. According to the Institute for Healthcare Improvement

(http://www.ihi.org/IHI/Topics/Improvement/ImprovementMethods/HowToImprove/testingchanges.htm), Dr. W. Edwards Deming adopted Walter Shewarts' Plan Do Check Act (PDCA) Cycle from the 1930's. Later, it was known as the Plan Do Study Act (PDSA) Cycle. The model provides a framework for the improvement of a process. It can be used to guide the improvement project. The Shewhart cycle has four stages:

Plan: Determine what can be improved and what can be changed

Do: Implement the new processes

Study: Measure the new processes and compare the results

Analyze the differences to determine the cause and identify where to apply changes that will include improvement.

The cycle is used to make changes that lead to improvement and provide continuous quality improvement (Best & Neuhauser, 2006). By implementing the Welcome meal, one can use the PDSA cycle by planning the meal, trying the meal, observing the results, and acting on what is learned. By refining change through several PDSA cycles, one can continually improve the patient experience and ultimately implement the change to other hospital units.

Methodology

Study Design

The quality improvement program was implemented by the Dietary Department in October 2008, in hopes to improve patient satisfaction scores on the maternity unit. A Welcome Meal was served to postpartum patients during their first 48 hours before discharge. The Welcome Meal consists of choosing one special gourmet meal for lunch or dinner. The meal included a garden salad or soup Du Jour, rice risotto, and a choice between Beef Wellington, Balsamic chicken breast, or Ratatouille. A double layer chocolate piece of cake or fruit was served for dessert. Patients

also received a gift of an orchid with the meal. The Special Meal menu was translated into Spanish. A vegetarian plate was offered to those who desired one. This study was to demonstrate how the Welcome Meal may improve patient satisfaction.

A convenience sampling technique was used to recruit patients to complete the questionnaire. When a patient appeared awake, the patient was approached by the researcher to participate in the study. After receiving a written consent, the patient was given a questionnaire. total of 30 postpartum patients' between 20-47 years of age participated. Data were collected in the month of April in 2009.

The questionnaire consisted of six questions pertaining to The six questions incorporated six the Welcome Meal. themes found in research literature on improving patient satisfaction. An un-numbered five-point Likert scale was used to measure the responses to the questionnaire. The Likert scale determines the level of agreement or disagreement the patient has chosen for each statement. Responses to the Likert scale were subsequently converted to numerical scores for the purpose of statistical analysis.

The statements on the questionnaire were as followed:

- 1) The Welcome Meal meets and exceeds your expectations
- 2) The Welcome Meal makes you feel important
- 3) The Welcome Meal makes you feel welcome
- 4) The Welcome Meal gives you a positive experience
- 5) The Welcome Meal increases your morale
- 6) The Welcome Meal provides good quality food

The optional responses according to the Likert Scale were:

Totally Disagree

Disagree

Neither

Agree

Totally Agree

Results

The mean age was 31.5 years old, and the standard deviation was 6.91 years. Among the 30 postpartum patients, the race composition was Caucasian: 11 or 36.7 percent, Asian: 4 or 13.3 percent, Filipino-Pacific Islander: 4 or 13.3 percent, Hispanic: 11 or 36.7 percent.

The highest rated question indicated the Welcome Meal made the patients feel welcome (96.6%). The second highest

rated question shows the welcome Meal to be of good quality (96.68).

The welcome meal not only made patients feel important, but it also created a more pleasant hospital stay. Overall 86.6% agreed that it gave a positive experience and exceeded their expectations (figure 1).

Discussion

The purpose of this study was to determine what influences a special Welcome Meal has on patients on a postpartum The results show that the Welcome Meal did exceed their expectations and provided a positive experience. Patient satisfaction is crucial to remaining competitive in today's healthcare market. This study implies that it is beneficial to implement such quality improvement programs to improve patient satisfaction. A Welcome Meal is not only a meal, but also a small gift to patients. Welcome Meal is meant to celebrate the joyous occasion of giving life. Being able to celebrate this event with a Welcome Meal allows patients enjoy their birthing The Welcome Meal is a simple act that can experience. offer an advantage towards improving a patient's stay on the postpartum unit.

Conclusion

This study suggests that providing a special Welcome Meal may have an impact on patient satisfaction. Patient satisfaction data is important as an indicator of a patients' perception of quality. Identifying what influences healthcare consumers to perceive quality care and be satisfied is difficult. Healthcare facilities are interested in maintaining high levels of satisfaction in order to stay competitive in the healthcare market. conclusion, the findings help both nursing administrators and staff in their efforts to improve quality of care and patient satisfaction.

Limitations

This study design has some limitations and should be considered in light of the findings. First, the study was conducted in the postpartum unit of only one hospital. Allowing other postpartum units and other types of units to be incorporated would benefit the study. Second, the sample size was small and the study mean may not represent the true mean. Also, having a larger sample size will allow other races to be included in the study. Third, the sample was non-random. The participants were volunteers and were only patients that were awake. The results may

represent a positive bias towards persons willing to provide input about their hospital stay. Having a random sample of patients would increase the generalizability of the results of the study.

Fourth, there is no reliability or validity regarding the survey questions used in this research study. Future research may include using other units besides maternity and using a questionnaire that has been already used and tested in research. Fifth, this study was not correlated with overall patient satisfaction. A hospital experience is made up of many interactions and exchanges. The Welcome Meal is just one of many interactions patients experience. More research into the effect that one meal has on the overall patient satisfaction scores is needed.

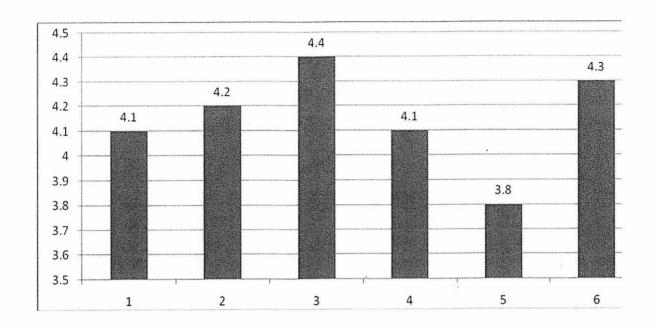
Implications for Practice

The data for this study emphasize that a special Welcome Meal on Maternity unit may improve a patients' hospital stay by exceeding their expectations, making them feel important and welcomed, providing a positive experience, increasing their morale, and providing good quality food. Using the PDSA cycle is valuable when implementing a quality improvement program such as the welcome meal. One

can improve the health care process by planning it, trying it, observing the results, and acting on what is learned.

Figure 1

Welcome Meal Item Means N = 30



Y Axis:

1 -Totally Disagree 2 -Disagree 3 -Neither 4 -Agree 5 -Totally Agree

X Axis:

- 1) The Welcome Meal meets and exceeds your expectations
- 2) The Welcome Meal makes you feel important
- 3) The Welcome Meal makes you feel welcome
- 4) The Welcome Meal gives you a positive experience
- 5) The Welcome Meal increases your morale
- 6) The Welcome Meal provides good quality food

References

- Abramowitz, S., Cte, A.A., & Berry, E. (1987). Analyzing patient satisfaction: A multianalytic approach. *Quality Review Bulletin*, 13(4), 122-130.
- Best, M. & Neuhauser, D. (2006). Walker A. Shewhart, 1924, and the Hawthorne Factory. Quality and Safety in Health Care, 15(2), 142-143.
- Beyea, S.C. (2004). Employee morale and patient safety. (Patient Safety First). AORN Journal. Retrieved May 17, 2009 from HighBeam Research:

http://www.highbeam.com/doc/1G1126315975.html

- Carr-Hill, R.A. (1992). The measurement of patient satisfaction.

 Journal of Public Health Medicine, 14(3), 236-249.
- Davis, S.L., & Adams-Greenly, M. (1994). Integrating patient satisfaction with a quality improvement program. *JONA*, 24(12), 28-31.
- Donabedian, A. (1966). Evaluating the quality of medical care.

 The Milbank Memorial Fund Quarterly, 44(3), 166-203.
- Dube, L., Trudeau, E., & Belanger, M.C.(1994). Determining the complexity of patient satisfaction with foodservices.

Journal of the American Dietetic Association, 94, 394-401.

Galanos, A.N., Pieper, C.F., Cornoni-Huntley, J.C., Bales, C.W.,

& Fillenbaum, G.G. (1994). Nutrition and function: Is there a relationship between body mass index and the functional capabilities of community-dwelling elderly? Journal of the American Geriatrics Society, 42, 368-373.

Henderson, A., Caplan, G., & Daniel, A. (2004). Patient satisfaction: the Australian patient perspective. Australian Health Review. Retrieved May 17, 2009 from HighBeam Research:

http://www.highbeam.com/doc/1P3-817654731.html

Institute for Healthcare Improvement: How to Improve. Improvement Methods. Retrieved July 7, 2009 from http://www.ihi.org/IHI/Topics/Improvement/ImprovementMethod

s/HowToImprove/testingchanges.htm

Schechter, M. (1993). Healthcare foodservice report 1993. Getting ready for reform. Food Management, 28(6), 70-79.

Shaikh, B.T., Mobeen, N., Azam, S.I., & Rabbani, F. (2008). Using SERVQUAL for assessing and improving patient satisfaction at a rural health facility in Pakistan.

Eastern Mediterranean Health Journal, 14(2), 447-456.