



Perceived Quality and Satisfaction with Oncology Nursing Care Among Patients with Cancer in University College Hospital, Ibadan Oyo State Nigeria

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ABSTRACT: Nursing care of cancer patients has been described as stressful, challenging and emotionally demanding and have significant impact on overall quality of care among cancer patient. This study assess perceived quality and satisfaction with oncology nursing care among patients with cancer in university College Hospital, Ibadan Oyo State Nigeria using standard techniques on a total of 100 oncology patients who met the inclusion criteria. The results showed that larger percentages of the respondents are within the age range of 30-34 years, 66% were females. Majority of the respondents have good perception of oncology nursing care and larger percentage of the oncology patient (87%) are satisfied with oncology nursing care, socio demographic variable based on gender, religion, ethnicity, educational level and occupation show a significant association with overall level of satisfaction with healthcare services at ($\chi^2=7.698$, $P=0.006$), ($\chi^2=30.338$, $P=0.000$), ($\chi^2=4.215$, $P=0.040$), ($\chi^2=10.820$, $P=0.004$) and ($\chi^2=100.000$, $P=0.000$) respectively as $p<0.05$ and non-significant association with age and marital status of the respondents at ($\chi^2=2.588$, $P=0.629$) and ($\chi^2=4.215$, $P=0.004$) as $p<0.05$. In conclusion, more than two-thirds of participants were satisfied with healthcare services, with socio demographic characteristics such as age, gender, religion, marital status, and education playing a significant role in overall satisfaction with oncology nursing care. Healthcare providers should prioritize effective communication, provide clear explanations, and listen to patients' concerns to improve understanding and satisfaction. Consistent information and patient education materials can aid in understanding diagnosis, treatment options, and care processes.

DOI: <https://dx.doi.org/10.4314/jasem.v27i10.3>

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Cite this paper as: OYEKALE, A. O; UTHMAN-IZOBO, O. S; ADETOYI, T; BOBO, M. E; OYEKALE, A. O. (2023). Perceived quality and satisfaction with oncology nursing care among patients with cancer in University College Hospital, Ibadan Oyo State Nigeria. *J. Appl. Sci. Environ. Manage.* 27 (10) 2153-2160

Dates: Received: 27 July 2023; Revised: 25 August 2023; Accepted: 15 August 2023 Published: 30 September 2023

Keyword: Cancer; Nursing care; Oncology; Perceived quality; Satisfaction

Cancer is one of the most common and the second leading cause of death globally, accounting for an estimated 9.6 million death (Sung *et al.*, 2021). It also constitutes a major health concern in Nigeria despite the efforts to find a lasting solution to this menace at the international level (Nwozichi *et al.*, 2020) Quality care is meeting all the needs of the patients (Deribe *et al.*, 2021) However, Patient perception is an important indicator which gives an idea about the quality of

nursing care services. Patient perception also provides feedback to determine quality and evaluation of nursing care (Negussie, 2018). Health care professional and patients view quality nursing care from different perspective. Health care professional view competent nursing care as quality nursing care, using patients' perception as a proxy in measuring quality of nursing care is highly recommended (Gishu *et al.*, 2019).

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Currently, cancer is one of the public concerns, both in terms of the number of people affected and its burden. More than one-third of the population will develop a cancer in their lifetime. Although there have been large advances in treatment and survival, half of the cancer sufferers now live at least ten years after diagnosis. Early diagnosis and quality care including quality oncology nursing have a pivotal role in cancer survival and patient prognosis (Deribe *et al.*, 2021). Cancer and its treatment cause many complications with a detrimental effect on quality of life and a significant influence on health-related quality of life in general, quality of life is an issue investigated by many researchers, some of whom have done so during chemotherapy, radiotherapy and other treatments, and bone marrow transplants. Others referred to quality of life and care in specific types of cancer (breast, lung, prostate) (Lewandowska *et al.*, 2020). Evaluation of health care involves defining the objectives of care, monitoring healthcare inputs, measuring the extent to which the expected outcomes have been achieved and assessing the extent of any unintended or harmful consequences of the intervention (Clarke *et al.*, 2019). There is evidence suggesting that satisfaction levels are associated with health outcomes by affecting health-related behaviors, patient compliance, and motivation to seek care (Wang *et al.*, 2023). Assessment of patient satisfaction with cancer care experiences has increasingly gained attention over the last decade.

There is paucity of research on cancer patients' care experiences with end-of-life care, and it appears that patient satisfaction with risk assessment or primary prevention has not been investigated.

The most common attributes or dimensions evaluated in the current cancer literature are overall satisfaction, level of information received, and patient provider interpersonal interactions, whereas among the least common are symptom and pain management, waiting times, and coordination of care (Doyle *et al.*, 2013; Ferreira *et al.*, 2023; Golas *et al.*, 2016; Sandoval *et al.*, 2006).

Hence, this study is to assess the perceived quality and satisfaction with oncology nursing care among patients with cancer at university college hospital, Ibadan Oyo State, Nigeria

MATERIAL AND METHODS

Study Area: This study took place at the Radiation Oncology Department of University College Hospital (UCH), affiliated with University of Ibadan (UI) in Ibadan, Oyo State, Nigeria, Research employed a cross-sectional design and utilized patient

questionnaires. Ethical approval for the study was obtained from the UI/UCH Ethics Committee, and written informed consent was acquired from all participating patients prior to their inclusion in the study.

Data Collection: Convenience sampling technique was used in collecting the data from the oncology patient and also all eligible patients that meet up with the inclusion criteria were used for the study. The study utilizes primary data which were collected through the use of questionnaire from respondents. A structured standardized questionnaire were administered to the respondents to gather information about their socio demographic characteristics and perceived quality of care; this was carried out on respondents using total enumeration that was able to capture within the period of four weeks. All participants were informed about the study and provided consent, mostly verbal and signed.

Data Analysis: Statistical analysis was done using IBM SPSS version 25.0 software package, descriptive statistics, diagrams, crosstab, Chi-square are adopted for the analysis, $P < 0.05$ was considered as significant

RESULTS AND DISCUSSION

Table 1 presents the socio demographic characteristics of the respondents, more than two third of the participant had good perception about safety of healthcare services (Table 2).

The perception about effectiveness of healthcare services, 44% indicate strongly agree to Treatment given at the healthcare services is appropriate, 55 % indicate strongly agree to The healthcare service providers give assistance when needed, 55% indicate strongly agree to You are given a reason why you are kept waiting, 20 % indicate strongly agree to Health service are available almost every time, 42 % indicate strongly agree to Drugs are available when prescribed and they work for me and 31 % indicate strongly agree to The care I receive produce the expected results (Table 3). Perception about patient-centered healthcare services, in the table 44 % indicate strongly agree to Adequate information is provided about my treatment option, Healthcare providers show understanding when listening to patients and Complete and sufficient explanations are provided about why laboratory tests are requested and about the results, 57 % indicate strongly agree to Healthcare providers explain things in the language that is easy to understand, 68 % indicate strongly agree to Healthcare providers request feedback on the quality of healthcare provided (Table 4).

Table 1: Socio demographic characteristics of the respondents (n=100)

Variable	Categories	Frequency	Percent
Age	20 – 24 years	10	10.0
	25 – 29 years	17	17.0
	30 – 34 years	26	26.0
	35 – 39 years	23	23.0
	Above 40 years	24	24.0
Gender	Male	34	34.0
	Female	66	66.0
Religion	Christianity	67	67.0
	Islam	33	33.0
Ethnicity	Yoruba	78	78.0
	Igbo	22	22.0
Marital status	Single	11	11.0
	Married	78	78.0
	Divorced	11	11.0
Educational Level	Primary education	20	20.0
	Secondary education	22	22.0
	Tertiary education	58	58.0
Occupation	Unemployed	13	13.0
	Self-employed	23	23.0
	Trading	40	40.0
	Others	24	24.0

Table 2: Perception about safety of healthcare services

Variable	SAF& %	AF& %	UF& %	DF& %	SDF& %
I believe the services I receive here are safe	44	13	0	43	0
I believe the information I received at the healthcare facility is accurate?	57	0	0	43	0
The healthcare services provided at healthcare facility is free from errors?	31	45	13	0	11
The hospital environments do not pose any physical or mental danger to me?	35	13	0	52	0
Sometimes the information provided by the healthcare providers is misleading.	0	0	24	45	31
Laboratory results are always accurate?	44	0	13	43	0
I trust that the treatment I receive will not harm me in any way	44	13	0	43	0
I had some complications in the past from the treatments I received in this healthcare facility	24	25	0	20	31

SA=strongly agree; Agree, U=Undecided, D=Disagree, SD=strongly disagree and F=Frequency

Perception about timeliness of healthcare services in the table more than two third of the respondents had good perception about timelines of health care services as most indicate positive response to it takes much time to walk around the healthcare facility before being attended to by health providers, patients wait longer than expected to see a doctor/nurse/other healthcare workers, healthcare providers attend to patients promptly when called upon, patients wait for many hours to retrieve tests result, patients are schedule for unsuitable dates for subsequent visits, the hospital uses innovative ways to avoid delays in

healthcare delivery and complications that arise are handled quickly (Table 5), Perception about efficiency of healthcare services and equitability of healthcare services (Table 6-7). Socio demographic variable based on gender, religion, marital status, educational level and occupation show a significant association with overall level of perception with healthcare services at ($\chi^2=12.768$, $P=0.000$), ($\chi^2=6.229$, $P=0.013$), ($\chi^2=23.004$, $P=0.000$), ($\chi^2=19.034$, $P=0.000$) and ($\chi^2=11.475$, $P=0.000$) respectively as $p<0.05$ and non-significant association with age and ethnicity of the respondents at ($\chi^2=7.594$, $P=0.108$) and ($\chi^2=0.564$, $P=0.453$) as $p<0.05$ (Table 9).

Overall level of satisfaction with healthcare services shows that 62% indicate Highly satisfied with the healthcare services you get at the health facility, 68% indicate highly satisfied recommend the health facility to relations who are affected by cancer, 60% were highly satisfied with the nurses comportment, 75 % were highly satisfied with the information, communication and explanation rendered by nurses and orientation to the oncology units (Table 10),

Socio demographic variable based on gender, religion, ethnicity, educational level and occupation show a significant association with overall level of satisfaction with healthcare services at ($\chi^2=7.698$, $P=0.006$), ($\chi^2=30.338$, $P=0.000$), ($\chi^2=4.215$, $P=0.040$), ($\chi^2=10.820$, $P=0.004$) and ($\chi^2=100.000$, $P=0.000$) respectively as $p<0.05$ and non-significant association with age and marital status of the respondents at ($\chi^2=2.588$, $P=0.629$) and ($\chi^2=4.215$, $P=0.004$) as $p<0.05$ (Table 11), 57 % had good perception and 87% were satisfied with healthcare services (Figure 1 and figure 2).

Table 3: Perception about effectiveness of healthcare services

Variable	SAF& %	AF& %	UF& %	DF& %	SDF& %
Treatment given at the healthcare services is appropriate	44	13	12	31	0
The healthcare service providers give assistance when needed	55	13	0	12	20
You are given a reason why you are kept waiting	55	0	0	45	0
Health service are available almost every time	20	25	24	11	20
Drugs are available when prescribed and they work for me	42	25	13	0	20
The healthcare services are of high quality	44	13	12	11	20
The interventions have meaningful effects on me	42	26	0	32	0
The care I receive produce the expected results	31	13	13	23	20

SA=Strongly agree; Agree, U=Undecided, D=Disagree, SD=Strongly disagree and F=Frequency

Table 4: Perception about patient-centered healthcare services

Variable	SAF& %	AF& %	UF& %	DF& %	SDF& %
Adequate information is provided about my treatment options	44	13	0	43	0
Healthcare providers show understanding when listening to patients	44	13	0	43	0
Healthcare providers explain things in the language that is easy to understand	57	0	0	23	20
Healthcare providers request feedback on the quality of healthcare provided	68	0	0	32	0
Complete and sufficient explanations are provided about why laboratory tests are requested and about the results	44	25	0	31	0

SA=strongly agree; Agree, U=Undecided, D=Disagree, SD=Strongly disagree and F=Frequency

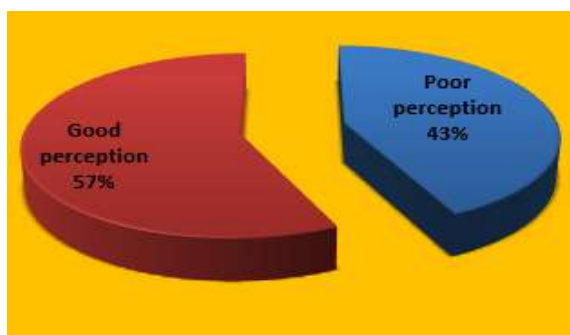


Fig 1: Overall level of perception with

Figure 2 shows the overall level of satisfaction with healthcare services, in the figure and 13 % were not satisfied. Cancer is among the top ten causes of morbidity and mortality worldwide, and every nurse, at some stage of their career, is expected to care for the cancer patients. Nurses are challenged to meet patients’ and its family’s needs through all cancer stages; from diagnosis, treatment, potential recurrence, to possible survivorship or death. Nursing care of cancer patients has been described

as stressful, challenging and emotionally demanding. It requires advanced communication skills, counseling skills and practical knowledge (Deribe *et al.*, 2021). The sense of anxiety, which is a common problem and has a negative impact on the quality of care, treatment, satisfaction with oncological care and the outcome of therapy is of particular importance (Konieczny *et al.*, 2021). The findings revealed that more than one third of believe the services received are safe additionally, 57% of respondents strongly agreed that they believed the information they received at the healthcare facility was accurate. Majority indicate healthcare facility were free from errors. In terms of the hospital environment, 35% of respondents strongly agreed that it did not pose any physical or mental danger to them and most indicate laboratory results were always accurate, which corroborate with the submission of (Konieczny *et al.*, 2023)on patients' perception of oncology care and further reinforces the importance of patients' trust and confidence in the safety of healthcare services. Perception about patient-centered healthcare services show that 44 % had adequate information about their treatment option, Healthcare providers show understanding when listening to patients and Complete and sufficient explanations are provided about why laboratory tests are requested and about the results, also more than two third indicate treatment given at the healthcare services is appropriate and the healthcare service providers give assistance when needed, this corroborate to the submission of (Lindsey, *et al.*, 2020)who also reported that patients believed that the hospital is properly prepared for cancer diagnostics and treatment, and that the hospital uses appropriate procedures before admitting a patient, i.e., epidemiological interview, temperature measurement.

Table 5: Perception about timeliness of healthcare services

Variable	SAF&%	AF&%	UF&%	DF&%	SDF&%
It takes much time to walk around the healthcare facility before being attended to by health providers	0	24	33	43	0
Patients wait longer than expected to see a doctor/nurse/other healthcare workers	11	11	33	45	0
Healthcare providers attend to patients promptly when called upon	31	13	13	43	0
Patients wait for many hours to retrieve tests result	11	36	33	20	0
Patients are schedule for unsuitable dates for subsequent visits	13	36	0	31	20
The healthcare facility has the capacity to provide care quickly	55	25	0	0	20
The hospital uses innovative ways to avoid delays in healthcare delivery	42	12	13	33	0
The services are accessible and available	31	0	13	20	36
Complications that arise are handled quickly	44	12	13	31	0

Table 6: Perception about efficiency of healthcare services

Variable	SAF&%	AF&%	UF&%	DF&%	SDF&%
Duplication and repetition of healthcare is prevented by healthcare providers	25	33	0	31	11
Healthcare providers are proficient in healthcare delivery	13	44	23	0	20
Healthcare providers provide healthcare voluntarily	31	0	25	33	11
Healthcare providers empathize with patients' concerns	75	13	0	0	12
Available equipment are functional	44	0	56	0	0
The care I receive is appropriate for me	44	13	31	1	11
The healthcare providers have the necessary skills to care for me	44	13	31	10	2

SA=strongly agree; Agree, U=Undecided, D=Disagree, SD=strongly disagree and F=Frequency

Table 7: Perception about equitability of healthcare services

Variable	SAF&%	AF&%	UF&%	DF&%	SDF&%
Each patient is treated as an individual	11	13	13	63	0
I perceived my socioeconomic status as a barrier to healthcare services	56	0	13	31	0
Healthcare providers give preference to patients according to religion	0	32	13	42	13
Healthcare providers give preference to patients according to ethnic group	0	31	14	42	0
Healthcare providers give preference to patients according to personal relationship	44	12	13	20	11
Healthcare providers treat all patients equally	11	25	12	52	0
I am given special /preferential treatment because of my state of origin	31	0	13	56	0
Optimal Healthcare services are only given to those who can afford	36	44	0	20	0
It is difficult to receive quality care if the healthcare providers do not know the patients	11	43	0	13	33

SA=strongly agree; Agree, U=Undecided, D=Disagree, SD=strongly disagree and F=Frequency

From the findings of the study larger percentage of the cancer patients are satisfied with the care received. This is in line with the statement of (Karaca and Durna, 2019) who opined that the survey in health services concerning health satisfaction are to be carried out In evaluating patients' satisfaction, to learn patients expectations, their suggestions and feedback (Mobolaji-Olajide *et al.*, 2020) also supported that a good assessment instrument measuring the factors that determine patients' satisfaction should be developed to improve nursing service quality.

The overall level of patient satisfaction with oncological care included in the study, as determined by was 87 %, with 68% indicate highly satisfied recommend the health facility to relations who are affected by cancer, 60% were highly satisfied with the nurses compartment, 75 % were highly satisfied with the information, communication and explanation rendered by nurses and orientation to the oncology units, this finding was lower compare to the submission of (Jin *et al.*, 2022) who reported 91.4% overall level of satisfaction with oncological care of women with breast cancer. Knowledge/understanding barriers, which reflected patients' beliefs about not having time to understand the information given by providers and inconsistencies in the quality of care, were predictive of overall satisfaction and in line with extant research that shows that patients' perceived quality of care and communication are essential in patient satisfaction. Though there are inconsistencies regarding patient satisfaction and its correlates in oncology, many studies find that patients perceive that time spent with the nurses, patient-centered counseling, and continuity of care are critical to their satisfaction with the care provided (Coban and Yurdagul, 2014).

Table 9: Association between socio demographic and overall level of perception with healthcare services

Variable	Categories	Poor perception	Good perception	Total	Pearson Chi-Square (χ^2)	df	P-value
Age	20 – 24 years	6	4	10	7.594	4	0.108
	25 – 29 years	11	6	17			
	30 – 34 years	8	18	26			
	35 – 39 years	7	16	23			
	Above 40 years	11	13	24			
Gender	Male	23	11	34	12.768	1	0.000
	Female	20	46	66			
Religion	Christianity	23	44	67	6.229	1	0.013
	Islam	20	13	33			
Ethnicity	Yoruba	32	46	78	0.564	1	0.453
	Igbo	11	11	22			
Marital status	Single	11	0	11	23.004	2	0.000
	Married	32	46	78			
	Divorced	0	11	11			
Educational Level	Primary education	0	20	20	19.034	2	0.000
	Secondary education	11	11	22			
	Tertiary education	32	26	58			
Occupation	Unemployed	0	13	13	11.475	3	0.009
	Self-employed	12	11	23			
	Trading	20	20	40			
	Others	11	13	24			

Table 10: Overall level of satisfaction with healthcare services.

Variable	Categories	Frequency	Percent
How satisfied are you with the healthcare services you get at the health facility	Highly satisfied	62	62.0
	Moderately satisfied	25	25.0
	Undecided	13	13.0
Can you recommend the health facility to relations who are affected by cancer	Highly satisfied	68	68.0
	Moderately satisfied	32	32.0
How will you judge the condition of the reception	Highly satisfied	22	22.0
	Moderately satisfied	45	45.0
	Undecided	33	33.0
How satisfied are you with the nurses comportment	Highly satisfied	60	60.0
	Moderately satisfied	40	40.0
How satisfied are you with the information, communication and explanation rendered by nurses	Highly satisfied	75	75.0
	Moderately satisfied	12	12.0
	Dissatisfied	13	13.0
How satisfied are you with the orientation to the oncology units	Highly satisfied	75	75.0
	Moderately satisfied	25	25.0

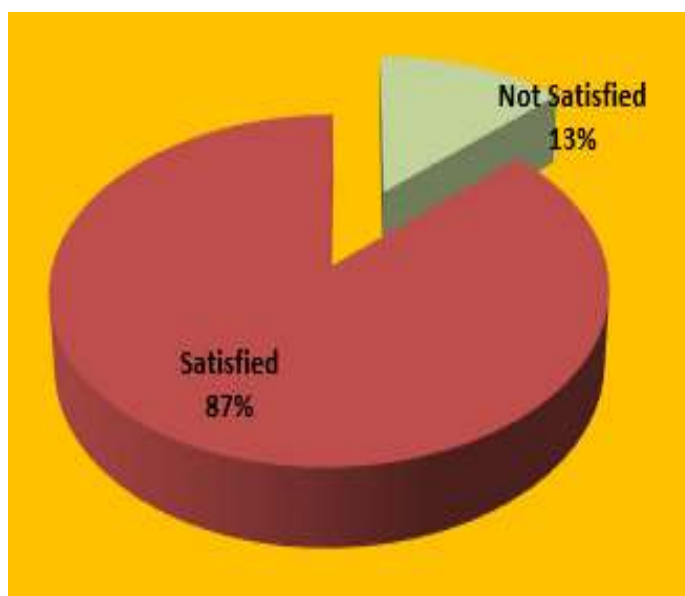


Fig 2: Overall level of satisfaction with healthcare services

Table 11: Association between socio demographic and overall level of satisfaction with healthcare services

Variable	Categories	Not Satisfied	Satisfied	Total	Pearson Chi-Square (χ^2)	df	P-value
Age	20 – 24 years	1	9	10	2.588	4	0.629
	25 – 29 years	1	16	17			
	30 – 34 years	5	21	26			
	35 – 39 years	4	19	23			
	Above 40 years	2	22	24			
Gender	Male	0	34	34	7.698	1	0.006
	Female	13	53	66			
Religion	Christianity	0	67	67	30.338	1	0.000
	Islam	13	20	33			
Ethnicity	Yoruba	13	65	78	4.215	1	0.040
	Igbo	0	22	22			
Marital status	Single	0	11	11	4.215	2	0.122
	Married	13	65	78			
	Divorced	0	11	11			
Educational Level	Primary education	0	20	20	10.820	2	0.004
	Secondary education	0	22	22			
	Tertiary education	13	45	58			
Occupation	Unemployed	13	0	13	100.000	3	0.000
	Self-employed	0	23	23			
	Trading	0	40	40			
	Others	0	24	24			

The result of findings shows that larger percentage of the cancer patients have good perception about the oncology nursing care received. This findings was supported by (Mosadeghrad, 2014)who reported a growing evidence that perceived quality is the single most important variable influencing consumers to purchase product or services. Findings by (Gishu *et al.*, 2019; Yusefi *et al.*, 2022)opined that patients perception is an important indicator which gives an idea about the quality of nursing care services and that it also provides feedback to determine quality and evaluation of nursing care and recommended that health professional view competent nursing care as quality nursing care; using patients perception as a proxy in measuring quality nursing care. The result of the study shows that there is a significant relationship between patients' socio demographic characteristics and patients' satisfaction with oncology nursing care this is in line with the findings of (Alharbi *et al.*, 2022; Lam *et al.*, 2020)who stated that global satisfaction with care is affected by many factors other than the quality of service delivery; it may include factors such as patients' demographic diagnosis, treatment, program and chronicity of the disease.

Conclusion: Findings from this study shows that majority of participants were satisfied with the healthcare services they received, and socio-demographic factors like age, gender, religion, marital status, education, and occupation were linked to overall satisfaction with oncology nursing care and quality of care. The study suggests that healthcare providers should prioritize effective and empathetic communication with cancer patients, including providing clear explanations of treatment options, test

results, and addressing patient concerns. Offering consistent information and patient education materials can enhance patient understanding and satisfaction.

Acknowledgement: We are grateful to all participants nursing in the oncology unit at the University College Hospital, Ibadan Oyo State Nigeria for their cooperation during the period of data collection.

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