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Relationship Between Discharge Planning Implementation and Patient Satisfaction in The Inpatient

Zuhairiah[1*], Rostime Hermayemi Simanullang[1]

[1]Bachelor of Nursing Study Program, Murni Teguh University

*Correspondence:
Zuhairiah
Zuhairiah98@gmail.com

Abstract

Background: Discharge planningis a dynamic and systematic process of assessment, preparation, and coordination carried out to facilitate supervision of nursing services after discharge. There is a relationship between the implementation of nurse discharge planning and patient satisfaction in the inpatient room on the 10th floor of Murni Teguh Sudirman Hospital.

Methods: This study uses a cross-sectional approach, conducted in June - July 2024. The number of samples in this study was 52 respondents.

Results: Implementation of Nurse Discharge Planning and Patient Satisfaction in the Inpatient Unit of Murni Teguh Hospital, Sudirman, Central Jakarta. The majority of respondents with Age > 46 Years with a percentage of 40.4% with the majority of Female Respondents with 57.7%, private employees namely 90.4% and Using BPJS Insurance, the Correlation Coefficient value between variables is 0.036 with a value much smaller than 0.05 which means that both variables are correlated or positive with Ho rejected and Ha accepted.

Conclusions: There is a relationship between the implementation of discharge Planning and patient satisfaction in the Inpatient.

Introduction

Patient services are not only focused on the adequacy of facilities and infrastructure. Patient satisfaction is one of the indicators of quality in health services. An important element that can be used as a reflection of quality services is the fulfillment of patient rights from the time they enter the hospital until they are discharged from the hospital. One of the rights inherent in patients and their families when they enter the hospital for treatment is to receive comprehensive information about their health in preparation for discharge. (Asmuji and Faridah, 2020). Data from the World Health Organization (WHO) in 2021 shows data on the level of patient satisfaction in hospitals in various countries consisting of more than 6 million patient inputs in health care in 25 countries.

Full list of author information available at the end of the article.

The highest level of patient satisfaction is in Sweden with a satisfaction index reaching 92.37%, Finland (91.92%), Norway (90.75%), USA (89.33%), Denmark (89.29%), while the lowest level of patient satisfaction is in Kenya (40.4) and India (34.4%) (WHO, 2021). Based on data from the Central Statistics Agency (2020), it is known that out of 17,280 respondents from the community throughout Indonesia, 81% stated that they were satisfied with the services provided by BPJS. Patient satisfaction at the Advanced Referral Health Facility (FRKTL) or Government Hospital level is at 80%, while for Private Hospitals it is 83% (BPJS, 2014). Patient satisfaction is one of the goals of improving the quality of health services, the better the quality of service, the more satisfied the patient is with the discharge planning service, and vice versa (Nursalam, 2020). Decree of the Minister of Health No. 30 / Menkes / 2022 / Article 4 concerning Minimum Hospital Service Standards states that patient satisfaction must reach 90% and above. The 2012 Hospital accreditation standard PMKP.3.2 requires hospitals to measure the expectations and satisfaction of patients and families, and make it one of the indicators of managerial quality. Patient satisfaction surveys are important for hospitals as providers of public services. Patient satisfaction surveys are used as a benchmark to assess the level of service quality. Patient satisfaction data can be used as assessment material for service elements that still need improvement and become a driver for each service provider unit to improve the quality of its services.

Patient satisfaction is influenced by several factors, namely product or service quality, price, emotional, performance, ethics, product characteristics, service, location, facilities, communication, atmosphere, visual design (Nursalam, 2020). The impact of discharge planning if not carried out by nurses will fail to provide and document discharge planning which will be at risk of disease severity, life threats and physical dysfunction (Nursalam, 2020). The implementation of structured discharge planning can improve the smooth care process from the hospital to the patient's home so that it does not affect the patient's illness (Fitri et al., 2020). Therefore, the solution to optimize the quality of nursing services, especially the implementation of discharge planning, is to conduct nursing training. Nursing training is important for nurses to improve the quality of nursing services, especially discharge planning. Such as coaching training, which is a method to improve the professionalism of nurses in delivering nursing and caring for

patients. Training in nursing will improve the skills, knowledge, and motivation of nurses in providing nursing planning, for example the implementation of discharge planning or discharge planning (Mustikaningsih et al., 2020).

Several studies on discharge planning and patient satisfaction include: Yati Sumiati & et al, November 2019 at the Jakarta Hajj Hospital which is a type B hospital, the application of discharge planning to the most dominant satisfaction in nursing care at the Jakarta Hajj Hospital which has the most influence on satisfaction is reliability p value = 0.002 (α <0.05) it is explained that discharge planning affects satisfaction during treatment, the dominant reliability indicator is influenced by discharge planning. Rahayu Winarti & Niken Sukesi (2023), at the Ungaran Regional General Hospital, the level of patient satisfaction before discharge planning was dissatisfied 11 people (36.6%) and satisfied 19 people (63.4%) and the level of patient satisfaction after discharge planning increased to 26 people (87%) and dissatisfaction decreased to 4 people (13%). Ageng Abdi Putra1 & et al, at the Biomedika Mataram Hospital (2023), The results of the study showed that there was a relationship between the provision of discharge planning and patient satisfaction in the inpatient room of the Biomedika Mataram Hospital, as evidenced by the p value = 0.000 and r = 0.711, meaning that there was a strong correlation/relationship between the provision of discharge planning and patient satisfaction in the inpatient room of the Biomedika Mataram Hospital. Murni Teguh Sudirman Hospital Jakarta is a private hospital that has 6 floors of inpatient rooms (floors 5, 10, 11, 12, 16 and 17). The number of inpatients on the 10th floor of the Edelweiss room in June 2024 was 60 people with BPJS insurance. The level of satisfaction of inpatients was obtained from the Hospital Quality service data in May 2024, 98% of patients said they were very satisfied, in June 2024 97% of patients said they were very satisfied and in July 2024 98% of patients said they were very satisfied.

Based on the background and the results of data collection obtained from interviews with 10 nurses in the inpatient room of Murni Teguh Sudirman Hospital, Jakarta, said that discharge planning nurses only conduct assessments when admitted to inpatient care and provide drug therapy according to doctor's advice and only provide information regarding the provision of supporting medical documents when being treated, reminding the medicines that need to be consumed when the client is at home and

the control schedule. Patient dissatisfaction was obtained from the statements of 10 other patients while being treated at Murni Teguh Sudirman Hospital, Jakarta, who said that discharge planning was carried out when the patient wanted to go home and sometimes they only filled out the form without discussing directly with the patient regarding the patient's condition and what they had to prepare when they were going home.

Methods

The type of quantitative research using a descriptive correlative research design is a study that aims to determine the relationship between two variables (Notoatmodjo, 2012). The sampling technique in this study is non-probability sampling using the purposive sampling method is a sampling determination technique with certain considerations (Sugiyono, 2016). The population of inpatients on the 10th floor of the Edelweiss room was 60 people with BPJS health insurance in May 2024. The sample in this study were inpatients from the time they were admitted until they were discharged immediately according to the researcher's inclusion criteria. The sample is part of the number of characteristics possessed by the population, the sample in this study was 52 patients as respondents obtained based on the Slovin formula with a precision/error rate of 5% (Sugiyono & Puspandani, 2020). The research design used was correlative with a cross-sectional approach to determine the relationship between the implementation of discharge planning and patient satisfaction by conducting the Spearman rank test.

Results

Table 1. Characteristics of Respondent

Characteristics	F	%
Age 18 - 25 years	6	11.5
Age 26-35 years	15	28.8
Age 36-45 years	10	19.2
Age > 46 years	21	40.4
Total	**52**	**100**
Gender		
Man	22	42.3
Woman	40	57.7
Total	**52**	**100**
Work		
Doesn't work	2	3.8
Private sector employee	47	90.4
civil servant	3	5.8
Total	**52**	**100**
History of Previous Hospitalization		
Once	50	96.2
Never	2	3.8
Total	**52**	**100**
Last education		

Senior High School	6	11.5
Bachelor	46	88.5
Total	**52**	**100**

Based on the table above, it is known that the majority of respondents with age > 46 years with a percentage of 40.4%, while the age of 26-35 years with a percentage of 19.2%, while patients aged 36-45 years were 19.2% and patients aged 18-25 years were 11.5%. For the gender of the respondents, the majority were female with 57.7% more than male patients with 42.3% and the majority of respondents who worked as private employees were 90.4%, while respondents who were civil servants were 5.8%, and did not work each 3.8%. The majority of patients who had a history of hospitalization with 96.2% while those who had never been 3.8% and the majority who had a high school education background were 11.5%, and those with a bachelor's degree background were 88.5. And the majority of respondents used BPJS as a source of financing.

Table 2. Discharge Planning Implementation Variables

Category	Formula	Range	F	%
Not enough	X ≤ 60%	1%-60%	5	9.6
Enough	61% ≤ x ≤ 75%	61%-75%	5	9.6
Good	76% ≤ x	76%-100%	42	80.8
	Total		**52**	**100**

Based on the table above, it shows that the implementation of discharge planning by nurses with the highest percentage is in the good category, namely 80.8%, while the data in the sufficient and lacking categories is 9.6%.

Table 3. Patient Satisfaction

Category	Formula	Range	F	%
Not satisfied	X ≤ 34%	0%-34%	4	9.5
Less satisfied	35% ≤ x ≤ 50%	35%-50%	1	1.4
Quite satisfied	51% ≤ x ≤ 70%	51%-70%	5	9.6
Very satisfied	71% ≤ x	71%-100%	42	80.8
Total			**52**	**100**

Based on the table above, it is known that the majority of the Patient Satisfaction category is in the Very Satisfied category, which is 80.8%,

the fairly satisfied category is 9.6%, while the dissatisfied category is 9.5% and the less satisfied category is 1.4%. So it is concluded that patient satisfaction is included in the Very Satisfied category.

The normality test is used to determine data obtained from research results are normally distributed or not. Data is said to be normally distributed if the level of significance ≥ the probability value, whereas if the level of significance < the probability value then the data is said to be not normally distributed.

Table 4. Kolmogorov Smirnov Test

Variables	*Statistics*	Significance	Decision
Implementation of Nurse Discharge Planning	0.481	0.0001	Abnormal
Patient Satisfaction	0.124	0.014	Abnormal

From the Tests of Normality table using the Kolmogorov Smirnov Test above, it can be seen that the significance level obtained for both variables is 0.0001 and 0.014, which is smaller than the probability value of 0.05. So it can be concluded that the research data is not normally distributed. Because the normality assumption is not met, the test is continued using the Spearman Rank Test Correlation.

Table 5. Spearman Rank Test Correlation of Nurse Discharge Planning Implementation Variables and Patient Satisfaction

			Correlations	
			Discharge_ Planning	*Patient_Sati sfaction*
Spear man's rho	*Disch arge_ Plann ing*	*Correl ation Coeffi cient*	1,000	.292*
		Sig. (2-tailed)	.	.036
	Patie nt_S atisfa ction	*Correl ation Coeffi cient*	.292*	1,000
		Sig. (2-tailed)	.036	.
		N	**52**	**52**

Based on the percentage results with using Spearman S Rho, the p value obtained is 0.036 which is smaller than the value of α = 0.05, thus Ho is rejected and Ha is accepted,so it can be concluded that there is a significant correlation between the Implementation of Nurse Discharge Planning and Patient Satisfaction in

the inpatient unit of Murni Teguh Sudirman Hospital, Central Jakarta.

Discussion

Results of research conducted in the inpatient room on the 10th floorat the Pure Teguh Sudirman Hospital in Jakarta 2024,it is known that the majority of respondents with Age > 46 Years with a percentage of 40.4%, while the age of 25-35 years with a percentage of 19.2%, and patients aged 18-25 years are 11.5%. while the characteristics of the gender of the majority of Female Respondents 57.7% more than male patients 42.3%. and the implementation of nurse discharge planning is in the good category with the highest percentage in the good category, namely 80.8%. Discharge Planning is (discharge planning) a dynamic and systematic process of assessment, preparation, and coordination carried out to facilitate supervision of social services after returning home (Asmuji, 2018). Examples of discharge planning implementation that must be carried out by nurses include assessing the health service needs required by patients when returning home from the hospital, nurses work with doctors and other health workers about the need for referrals to get home care or other health services, nurses work with other health teams to meet the patient's needs after returning home from the hospital, nurses explain to patients and families about the medications given, nurses explain to patients and families about foods that can and cannot be consumed, nurses prescribe medications according to the doctor's orders, and nurses offer patients to use a wheelchair until the vehicle that will take the patient arrives. The benefits of implementing nurse discharge planning are that patients and their families are able to care for patients independently after returning home from the hospital (Sulistyowati, 2022). The implementation of discharge planning in this place is lacking because nurses' knowledge of nursing services, especially discharge planning, is less than optimal and incomplete in delivering health education about the patient's illness and will be at risk of recurrence of the patient's illness. Where the implementation of discharge planning is said to be Good because the nursing service, especially discharge planning in that place, is optimal and complete in providing Health Education regarding the patient's illness and will create patient satisfaction and will have a positive impact on patient recovery. And will cause changes in patient and family behavior regarding the patient's condition and will avoid recurrence of the same disease. So it is very important to implement optimal discharge

planning for the patient's needs when going home to avoid the patient returning to the hospital. Implementation of inadequate discharge planning will also have an impact on health and risk the patient's illness, because nurses have not yet carried out discharge planning optimally and have an impact on health or hospitals which will later be considered the implementation of the nurse's discharge planning as incompetent and less than optimal. This study is almost in line with the results of the study of the implementation of nurse discharge planning conducted by Andriani Dwi et al. With the title "The Relationship between Discharge Planning and the Level of Satisfaction of Inpatients in the Catheley Room of the Jember Plantation Clinic Hospital." Based on the results of the study, it was stated that the implementation of discharge planning was in the fairly good category with 23 respondents or equivalent to 71.9%.

Patient satisfaction in inpatients is the dependent variable. The majority of patient satisfaction categories are in the Very Satisfied category, which is 80.8%. So it is concluded that patient satisfaction is included in the Very Satisfied category. Satisfaction is a perception of a product or service (performance) that meets patient expectations, therefore patient satisfaction is the result of the accumulation of the use of the product or service by the patient (Nursalam, 2021). Patient satisfaction is one of the goals of improving the quality of health services. The higher the quality of service, the more satisfied the patient is with health services and vice versa. Patient satisfaction with money is very subjective, can vary and have many factors that touch so many dimensions of human life. This subjectivity can be reduced and even become objective if enough people have the same opinion about something (Pohan, 2018). Based on the description above, the level of respondent satisfaction with the implementation of Discharge Planning in this place is less than satisfactory, this is because in the implementation of Discharge Planning by nurses, the treatment and health education regarding the patient's disease are not explained in detail and can cause patient dissatisfaction, resulting in disruption of the patient's healing process at home and unclear information about the patient's illness and can cause the patient to return to the hospital. And if the implementation of Nurse Discharge Planning is good and optimal, it can produce patient satisfaction that is quite satisfactory or very satisfactory and can support patient recovery at home optimally, because the implementation of good Nursing Discharge

Planning because the nurse looks optimal when she is at home. holding. education health information about the patient's illness in a comprehensive and detailed manner.

The results of the variable data between the Implementation of Nurse Discharge Planning and Patient Satisfaction above, obtained a significance value of 0.036, where this value is smaller than the probability value of 0.05. So there is a significant correlation between the Implementation of Nurse Discharge Planning and Patient Satisfaction in the inpatient unit of Murni Teguh Sudirman Hospital, Jakarta. From the table, it is also known that the Correlation Coefficient or R count value between variables is 0.292 where the two variables are weakly correlated. So the decision of the hypothesis of this study is Ho is rejected and Ha is accepted that the Implementation of Nurse Discharge Planning has a correlation and is significant to Patient Satisfaction. With the final conclusion that "there is a relationship between the implementation of discharge planning and patient satisfaction in the Inpatient Room on the 10th floor of Murni Teguh Sudirman Hospital, Jakarta".

Patient satisfaction is related to the quality of health services. By knowing the level of patient satisfaction, health service management and nursing services, nurse performance can be improved in providing optimal nursing services. And patient satisfaction will improve the welfare and morale of health workers, as well as the economy of health services. Therefore, nurses are required to plan patient discharge because it is an important part. in nursing services to avoid patient dissatisfaction (Nursalam, 2018). Based on the description above, the assessment of satisfaction is the implementation of the discharge plan carried out by the nurse when explaining dietary restrictions and patient needs at home in great detail and the nurse's attitude at that time was friendly, giving the patient the opportunity to ask questions and giving the impression of being in a hurry in providing health education. And this has an impact on reducing the risk of recurrence of the patient's disease and making the patient and his family feel satisfied with the nursing services. Therefore, it is important for nurses to plan patient discharge optimally to prevent the risk of recurrence and shorten the number of days of patient care. And the results of the implementation of Discharge Planning have been good because nurses provide comfort to patients when they go home and the nurse's friendly attitude in providing information. Health is given to patients at home and according to their expectations, then

patients will feel happy and support their recovery because the implementation of the discharge schedule received by the patient is optimal. Patients are very satisfied with the implementation of optimal nursing planning and will produce positive values for nursing services or nursing performance, so that patients who have been treated return because they feel comfortable with the service. And if there is dissatisfaction with the service received because it is incomplete and not detailed enough in explaining what can and cannot be done at home, then this will cause dissatisfaction in patients who do not meet their expectations and have a negative impact on health services. in the future they will consider hospital services not optimal and will not want to seek treatment here again and will look for other alternatives. It is known from the research results for the Patient Satisfaction category that the majority are in the Very Satisfied category, namely 80.8%. Meanwhile, from the quality indicator data of the Murni Teguh Sudirman Hospital, Jakarta, the results of patient satisfaction are in the very satisfied category, namely 98%.

Conclusion

The characteristics of patients at Murni Teguh Hospital are that the majority of respondents are aged > 46 years and the gender characteristics of the majority of respondents are female.Implementation of Discharge Planning in the Implementation of discharge planning by nurses with the level of patient satisfaction in the inpatient ward of Murni Teguh Sudirman Hospital, Central Jakarta, the results are good. The level of satisfaction of inpatients at Murni Teguh Sudirman Hospital, Central Jakarta is very satisfied. There is a relationship between the implementation of nurse discharge planning and patient satisfaction in the inpatient room on the 10th floor of Murni Teguh Sudirman Hospital, Jakarta.

Limitations

It is best to conduct the research 1 day before the patient goes home so that the family and patient are not in a rush to go home.

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Author's contributions

Made substantial contributions to conception and design. or acquisition of data. or analysis and interpretation of data: IY. SS. HSM. AM. TH; Involved in drafting the manuscript or revising it critically for important intellectual content: IY. SS. HSM; Given final approval of the version to be published. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content: IY. SS. HSM. AM. TH; Agreed to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved: IY. SS. AM. All authors read and approved the final manuscript.

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Availability of data and materials

The data that support the findings of this study are available from the corresponding author. [IY]. upon reasonable request

Declarations

Ethics approval and consent to participate
Not applicable

Competing Interest

The authors declare no competing interest

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