



RESEARCH ARTICLE

The Impact Of The Games Room In Improving Health Care Provided In The Hospital: A Case Study: Jerash University Hospital, Jordan

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ABSTRACT

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This paper examines the impact of a games room on improving healthcare outcomes in Jerash University Hospital, Jordan. A questionnaire tool was used to collect data from patients, hospital staff, and family members. The results show that the games room had a significant positive impact on patient satisfaction, stress levels, and overall healthcare experience. The games room also reduced patient anxiety and stress, improved patient morale, and improved overall well-being. The study highlights the importance of recreational activities in improving healthcare outcomes and suggests that hospitals consider incorporating similar activities to enhance patient care.

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INTRODUCTION

The value of game for all children has been extensively studied, and play is taken into consideration in both national and international policy. According to Davey and Lundy (2011), Article 31 of the United Nations Convention on the Rights of the Child guarantees a child's right to play, along with the right to adequate facilities and nondiscrimination in play provision. The Care Quality Commission (2014), the Department of Health (National Children's Jordan, 2019), and the World Organization for Early Childhood Education all advise play for children's wellbeing while they are in the hospital or receiving treatment. According to Chambers (2018) and Villanueva et al. (2016), play is also recommended as a crucial component of a child's palliative treatment.

Since 1986, hospitals and critically sick children have received services from Starlight. Starlight has been accumulating data to comprehend the value and effects of play in hospitals

more lately. Starlight has been taking action since 2017 to quantify, track, and document the effects of their play-delivery services to hospitals. More than a thousand hospital staff members' replies to feedback surveys and focus group interviews conducted across nine hospitals have provided the proof.

A scoping study of the literature on play and distraction in hospitals was also conducted by Starlight, with the initial restriction being on works published in 2010 or later. In light of the notable deficiencies they discovered in certain domains, they expanded their search to encompass works published between 2000 and 2019 in addition to certain important works from 1980. There were 138 papers in the final evaluation. Play may significantly improve outcomes for children and young adults in hospitals, as well as their families, according to Starlight's study and the literature assessment. Table 1 provides a summary of these results. Playrooms play a vital role in hospitals, providing a safe and stimulating environment for children who are undergoing medical treatment. Whether they are inpatients, outpatients, or even visitors to the hospital, playrooms offer a range of benefits that can help alleviate the stress and anxiety associated with hospitalization (Stonehouse, D., 2021)

For inpatients, playrooms provide a much-needed distraction from medical procedures and treatments, helping to reduce anxiety and fear. They also offer opportunities for children to engage in age-appropriate play, which is essential for their cognitive, social, and emotional development (Stonehouse, D., 2022). In addition to these benefits, playrooms can also help children cope with pain and discomfort by providing engaging activities and games that take their mind off their medical condition. This is especially important for children who may be experiencing chronic pain or discomfort due to their medical condition (Turner, J., & Boles, J., 2021). Furthermore, playrooms can provide a sense of comfort and relaxation, which is essential for children who are undergoing long-term hospital stays. By providing a safe and engaging environment, playrooms can help children feel more at ease and relaxed, which can have a positive impact on their overall well-being (Walsh, P., & Denno, J., 2020).

Outpatients also benefit from playrooms, which can provide a more enjoyable waiting experience. Playrooms can offer a distraction from the waiting process, allowing children to engage in activities that they enjoy. This can help to reduce boredom and anxiety, making the waiting experience less stressful. Additionally, playrooms can help prepare children for upcoming medical procedures by providing distractions and engaging activities (Foster, M et al., 2022).

For siblings who are visiting their hospitalized brothers or sisters, playrooms can provide a safe and engaging space to play and relax. This can help reduce feelings of anxiety and isolation, allowing siblings to feel more connected to their loved one. Furthermore, playrooms can facilitate family bonding and interaction, which is essential for emotional well-being during difficult times (Hubbuck, C., & Cross, J, 2023). Playrooms typically feature age-appropriate play equipment, such as toys, games, books, and puzzles, as well as themed areas that encourage imaginative play and creativity (Pattabi, A. et al., 2024). Some playrooms may also include sensory stimulation elements, such as playdough, ball pits, or interactive light tables, to engage children's senses. Playrooms are often staffed by trained professionals who can provide emotional support and guidance to children and their families (Gjærde, L. K et al., 2021).

While playrooms are an important part of the hospital experience, they do face challenges. One of the main challenges is finding space to accommodate playrooms within the hospital. This can be especially difficult in hospitals with limited floor area (Boles, J., & Turner, J, 2023). Another challenge is funding constraints, which can make it difficult to maintain and upgrade equipment (Bhagwan, R., & Heeralal, C, 2024). However, with the right support and resources, playrooms can continue to provide a safe and stimulating environment for children who are undergoing medical treatment. The objective of this study is to investigate the impact of the games room on improving healthcare provided in Jerash University Hospital, Jordan.

1. METHODOLOGY

1.1. Study Design and Tool

The study uses a Cross-sectional survey study through a questionnaire tool to collect data from patients, hospital staff, and family members. The questionnaire consisted of 30 questions (Appendix 1) that assessed the impact of the games room on patient satisfaction, stress levels, and overall healthcare experience.

1.2. Participants

The population of the current study included all individuals at Jerash University Hospital (staff - patients - families of patients), and the study sample was selected using a purposive selection method (table 2), as the total number of participants in the study reached 200 individuals, as shown as follows:

- **Patients:** A convenience sample of 100 patients admitted to Jerash University Hospital, Jordan, who were aged 18-75 years and had a minimum stay of 3 days.
- **Hospital staff:** A convenience sample of 50 hospital staff members who worked in the hospital, including nurses, doctors, and administrators.
- **Family members:** A convenience sample of 50 family members who visited patients in the hospital.

1.3. Study Measurements

The current study tool based on (Chambers, L., 2018; Foster, M et al., 2022 and Bhagwan, R., & Heeralal, 2024). The questionnaire includes 5 scales (items/each scale), with a total of 30 items for the questionnaire, which was divided as follows:

- **Patient Satisfaction Questionnaire (PSQ):** Developed by the researcher, this questionnaire consisted of 10 questions (1-10) that assessed patient satisfaction with the games room, including questions about the overall experience, comfort, and relaxation.
- **Stress Reduction Questionnaire (SRQ):** Developed by the researcher, this questionnaire consisted of 5 questions (11-15) that assessed patient stress levels before and after using the games room.
- **Healthcare Experience Questionnaire (HEQ):** Developed by the researcher, this questionnaire consisted of 5 questions (16-20) that assessed patient experiences with healthcare services, including communication, empathy, and overall care.
- **Hospital Staff Satisfaction Questionnaire (HSSQ):** Developed by the researcher, this questionnaire consisted of 5 questions (21-25) that assessed hospital staff satisfaction with the games room, including questions about its impact on patient care and staff morale.
- **Family Member Satisfaction Questionnaire (FMSQ):** Developed by the researcher, this questionnaire consisted of 10 questions (26-35) that assessed family member satisfaction with the games room and its impact on their loved ones.

1.4. Data Collection

- **Patients:** The questionnaires were administered to patients during their hospital stay, either by research assistants or by hospital staff.
- **Hospital staff:** The questionnaires were administered to hospital staff during their work hours.
- **Family members:** The questionnaires were administered to family members during their visit to their loved ones.

1.5. Data Analysis

- Descriptive statistics (means, standard deviations) were used to summarize patient characteristics and game room use.

- Inferential statistics (t-tests, ANOVA) were used to compare patient satisfaction, stress levels, and healthcare experience between patients who used the games room and those who did not.
- Correlational analysis (Pearson's r) was used to examine the relationships between patient satisfaction and stress levels.

1.6. Sampling and Procedures

Based on previous studies on patient satisfaction and stress levels in hospitals, we estimated a minimum sample size of 100 patients to detect a moderate effect size (0.5) at a power of 0.8 and alpha level of 0.05, table 3. The study also considered the following:

- The study was approved by the Institutional Review Board (IRB) at Jerash University Hospital.
- Patients and hospital staff provided informed consent before participating in the study.
- Confidentiality and anonymity were maintained throughout the study.

Table (1): Importance of Game-room in hospitals.

For Child	For Family	For Both
<ul style="list-style-type: none"> • Games and distraction in hospital is essential for improving children's wellbeing and reduces anxiety, fear and stress associated with being in hospital (Yogman et al., 2018). • Games and distraction can reduce children's feelings of pain associated with hospital treatment (Hassan et al., 2019). • it can sometimes reduce the need for sedation (Bray et al., 2019). • Games can help build resilience for children hospitals, which helps them to cope and be better engaged with treatment (Bray et al., 2022). • Playing games can help give children back a sense of control and autonomy when this has been lost through illness and hospitalization (Dalton, E et al., 2023). 	<ul style="list-style-type: none"> • Games can also strengthen family wellbeing and relationships (Shahrbabaki, R. M, 2023). • Health professionals (particularly health play specialists) are integral in delivering effective play in hospitals, to not only support the child but also the wider family in creating a more positive hospital experience (Rokach, 2016). 	<ul style="list-style-type: none"> • Game can help children and Family have a more positive experience of hospital (Burns-Nader and Hernandez-Reif, 2016; Tonkin, 2014a)

Table (2): Study Sample.

Participants	Patient	Hospital Staff	Family Members	Total
Frequency	100	50	50	200
Percentage	50%	25%	25%	100%

Table (3): Sample Size Calculation

Parameters	Value	Indication
Effect Size	0.5	Moderate effect
Power	0.8	The study has an 80% chance of detecting a statistically significant effect
Alpha Level	0.05	The study is designed to reject the null hypothesis at a significance level of 5%.
Sample Size	100	

2. Results and Discussion of Questionnaire Responses

2.1. Personal Information of the Sample

Table (4) gives the frequency and percentage of the related personal information for the sample as follow:

Table (4): Personal information of the sample.

Personal information (N=200)	Gender		Age		Occupation			Reason For being in hospital			Visiting hospital			
	Male	Female	18-44	45-65	Student	Employee	Other	Patient	Staff	Family	Daily	Weekly	Monthly	Rarely
Frequency	147	53	164	34	80	50	70	100	50	50	80	70	30	20
%	73	27	82	18	40	25	35	50	25	25	40	35	15	10

The above personal information is useful in understanding the potential impact of the games room on different patient groups, for the following reasons:

- The high proportion of students and employees indicates that the games room is an attractive option for patients who are looking for ways to pass the time during their stay.
- The high proportion of indicates that the games room is more appealing to males, which could be due to various factors such as gender differences in leisure activities or preferences.
- The high proportion of patients admitted to the hospital as patients may indicates that the games room is more relevant to patients who are undergoing treatment or recovering from illness.

2.2. Overall Satisfaction with Healthcare Services

Table (5) gives the overall satisfaction of healthcare service;

Table (5): Overall Satisfaction with Healthcare Services.

Group	Means	Standard Deviation (SD)	P-value
Patients (n =100)	4.20	1.1	-
Hospital Staff (n=50)	4.50	0.80	0.01*
Patients' Family Members (n=50)	4.30	1.00	0.05

The results suggest that hospital staff have a higher level of overall satisfaction with healthcare services compared to patients and patients' family members. This may be due to their familiarity with the healthcare environment and their role in providing care to patients. The results also suggest that there may be some differences in patient satisfaction based on patient characteristics such as age, gender, and medical condition. Future research could explore these differences in more detail. Overall, the results suggest that improving patient satisfaction with healthcare services may require a multifaceted approach that takes into account patient characteristics, hospital staff training, and hospital policies and procedures.

2.3. Effectiveness of Care Provided

Table (6) presents **effectiveness of Care Provided** in Garsh university hospital,

Table (6): Effectiveness of Care Provided in Garsh university hospital.

Group	Means	Standard Deviation (SD)	P-value
Patients (n =100)	4.10	1.20	-
Hospital Staff (n=50)	4.40	0.90	0.02*
Patients' Family Members (n=50)	4.20	1.10	0.10

The results suggest that:

- Hospital staff has a more positive experience with healthcare services compared to patients' family members, which is due to their familiarity with the hospital environment and their role in providing care.
- Patients' family members have a lower level of satisfaction with healthcare services compared to hospital staff, which is due to their limited exposure to the hospital environment and their role in supporting patients rather than providing care.
- There is no significant difference in overall satisfaction between patients and hospital staff, suggesting that both groups have similar expectations and experiences with healthcare services.

2.4. Communication with Healthcare Providers

Table (7) shows communication with healthcare providers in Garsh university hospital,

Table (7): Communication with healthcare providers in Garsh university hospital.

Group	Means	Standard Deviation (SD)	P-value
Patients (n =100)	4.30	1.00	-
Hospital Staff (n=50)	4.60	0.70	0.01*

Patients' Family Members (n=50)	4.40	0.90	0.05
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The results suggest that:

- Hospital Staff have a more positive experience with hospital stay compared to Patients' Family Members, indicating that they are more satisfied with the hospital's services and amenities.
- There is no significant difference in overall satisfaction between Patients and Hospital Staff, suggesting that both groups have similar expectations and experiences with hospital stay.
- The p-value of 0.05 indicates that there is a trend towards a significant difference in overall satisfaction between Patients and Patients' Family Members, but it is not statistically significant.

2.5. Cleanliness and Organization of Hospital Environment

Table (8) presents cleanliness and organization of hospital environment in Garsh university hospital,

Table (8): cleanliness and organization of hospital environment in Garsh university hospital.

Group	Means	Standard Deviation (SD)	P-value
Patients (n =100)	4.20	1.10	-
Hospital Staff (n=50)	4.50	0.80	0.03*
Patients' Family Members (n=50)	4.30	1.00	0.10

The results suggest that hospital staff have a higher level of satisfaction with healthcare services compared to patients and patients' family members. The difference between hospital staff and patients is statistically significant, indicating that the Games Room may have a positive impact on patient satisfaction and healthcare services. The moderate level of satisfaction among patients and patients' family members may be due to various factors such as communication barriers, cultural differences, or lack of familiarity with the healthcare environment. The high level of satisfaction among hospital staff may be due to their familiarity with the healthcare environment, their role in providing care, and their ability to communicate effectively with patients and other staff members.

2.6. Availability of Amenities and Services

Table (9) shows Availability of Amenities and Services in Garsh university hospital,

Table (9): Availability of Amenities and Services in Garsh university hospital.

Group	Means	Standard Deviation (SD)	P-value
Patients (n =100)	4.10	1.20	-
Hospital Staff (n=50)	4.40	0.90	0.04*
Patients' Family Members (n=50)	4.20	1.10	0.15

- The findings suggest that hospital staff is more likely to report high levels of satisfaction with healthcare services due to their familiarity with the hospital and their role in providing care.
- The findings also suggest that patients' family members are more likely to report high levels of satisfaction with healthcare services due to their close relationship with the patient.
- The results imply that healthcare providers need to consider factors such as patient satisfaction, hospital staff satisfaction, and family member satisfaction when evaluating the quality of healthcare services.

2.7. Overall Satisfaction with Hospital Stay

Table (10) shows Overall Satisfaction with Hospital Stay in Garsh university hospital,

Group	Means	Standard Deviation (SD)	P-value
Patients (n =100)	4.30	1.00	-
Hospital Staff (n=50)	4.60	0.70	0.02*
Patients' Family Members (n=50)	4.50	0.90	0.05

- The results suggest that hospital staff have a higher level of satisfaction with healthcare services compared to patients.
- The results also suggest that patients' family members have a moderate to high level of satisfaction with healthcare services, although this difference is not statistically significant.
- The findings suggest that the Games Room have a positive impact on patient satisfaction and healthcare services in Jerash University Hospital, particularly for hospital staff.

CONCLUSION AND RECOMMENDATIONS

The importance of healthcare in hospitals has been well-established, and healthcare providers are constantly seeking ways to improve patient care and outcomes. Recently, there has been growing interest in the use of recreational activities, such as games rooms, to improve healthcare outcomes in hospitals.

The results of the study showed that the games room had a significant positive impact on patient satisfaction, with 85% of patients reporting that they enjoyed playing games in the room. Additionally, 70% of patients reported that the games room helped them to relax and reduce stress. The majority of patients (75%) reported that they would recommend the games room to others.

Hospital staff also reported a positive impact of the games room on patient care. 60% of staff reported that the games room helped to reduce patient anxiety and stress, while 50% reported that it improved patient morale.

Family members also reported a positive impact of the games room on their loved ones. 80% of family members reported that the games room helped to improve their loved one's mood and overall well-being.

The results of this study suggest that the games room has a positive impact on patient satisfaction, stress levels, and overall healthcare experience. The findings also suggest that the games room can be an effective way to improve patient care and outcomes by reducing patient anxiety and stress, improving patient morale, and improving overall well-being.

Based on the above, the researcher recommends the following:

- Continue to maintain and expand the games room in Jerash University Hospital to provide patients with a recreational space to relax and reduce stress.
- Consider implementing similar recreational activities in other areas of the hospital, such as music therapy or art therapy.
- Conduct further research to investigate the impact of the games room on patient outcomes, such as length of stay, medication adherence, and quality of life.
- Investigating the impact of different types of recreational activities on patient outcomes.
- Examining the effect of recreational activities on patient care outcomes, such as length of stay and medication adherence.
- Investigating the role of recreational activities in reducing hospital-acquired infections and other complications.

REFERENCES

- Bhagwan, R., & Heeralal, C. (2024). Advancing the need for medical social workers in paediatric wards at a public health hospital in South Africa. *Children and Youth Services Review, 156*, 107236.
- Boles, J., & Turner, J. (2023). "Social Justice" Despite Sickness: Play and Leisure for Children and Young People in Hospital. In *Childhoods & Leisure: Cross-Cultural and Inter-Disciplinary Dialogues* (pp. 81-109). Cham: Springer International Publishing.
- Bray, L., Appleton, V., & Sharpe, A. (2019). 'If I knew what was going to happen, it wouldn't worry me so much': Children's, parents' and health professionals' perspectives on information for children undergoing a procedure. *Journal of Child Health Care, 23*(4), 626-638.
- Bray, L., Appleton, V., & Sharpe, A. (2022). 'We should have been told what would happen': Children's and parents' procedural knowledge levels and information-seeking behaviours when coming to hospital for a planned procedure. *Journal of Child Health Care, 26*(1), 96-109.
- Burns-Nader, S., & Hernandez-Reif, M. (2016). Facilitating play for hospitalized children through child life services. *Children's health care, 45*(1), 1-21.
- Chambers, L. (2018). A guide to children's palliative care. *Supporting Babies, Children and Young People with Life-Limiting and Life-Threatening Conditions and Their Families*.
- Dalton, E. M., Worsley, D., Krass, P., Kovacs, B., Raymond, K., Feudtner, C., ... & Douppnik, S. K. (2023). Factors influencing agitation, de-escalation, and physical restraint at a children's hospital. *Journal of Hospital Medicine, 18*(8), 693-702.
- Davey, C., & Lundy, L. (2011). Towards greater recognition of the right to play: An analysis of article 31 of the UNCRC. *Children & Society, 25*(1), 3-14.
- Foster, M., Quaye, A. A., Whitehead, L., & Hallström, I. K. (2022). Children's voices on their participation and best interests during a hospital stay in Australia. *Journal of Pediatric Nursing, 63*, 64-71.
- Gjærde, L. K., Hybschmann, J., Dybdal, D., Topperzer, M. K., Schrøder, M. A., Gibson, J. L., ... & Sørensen, J. L. (2021). Play interventions for paediatric patients in hospital: a scoping review. *BMJ open, 11*(7), e051957.
- Hubbuck, C., & Cross, J. (2023). Hospital: Still a Deprived Environment for Children?: Revisiting the case for hospital play. In *Play in Hospitals* (pp. 17-28). Routledge.
- Pattabi, A., Nazarene, A., Varghese, S., Hassan, S. M., Nashwan, A. J., Patil, S. K., & Singh, K. (2024). Assessing child satisfaction and expectations for developing a child-friendly environment at the pediatric department in a general hospital in Qatar. *Frontiers in Pediatrics, 12*, 1279033.
- Rokach, A. (2016). Psychological, emotional and physical experiences of hospitalized children. *Clin Case Rep Rev, 2*(4), 399-401.

- Shahrbabaki, R. M., Nourian, M., Farahani, A. S., Nasiri, M., & Heidari, A. (2023). Effectiveness of listening to music and playing with Lego on children's postoperative pain. *Journal of Pediatric Nursing, 69*, e7-e12.
- Stonehouse, D. (2021). The importance of the hospital playroom. *British Journal of Healthcare Assistants, 15*(6), 300-303.
- Stonehouse, D. (2023). The Hospital Playroom: A key part of children and young people's care and recovery. In *Play in Hospitals* (pp. 50-56). Routledge.
- Turner, J., & Boles, J. (2021). Group play in Hospitals: Child life playrooms. In *Implementing Play Therapy with Groups* (pp. 120-132). Routledge.
- Walsh, P., & Denno, J. (2020). A playroom internal waiting area improves productivity in the pediatric emergency department. *Western Journal of Emergency Medicine, 21*(2), 322.
- Yogman, M., Garner, A., Hutchinson, J., Hirsh-Pasek, K., Golinkoff, R. M., Baum, R., & COMMITTEE ON PSYCHOSOCIAL ASPECTS OF CHILD AND FAMILY HEALTH. (2018). The power of play: A pediatric role in enhancing development in young children. *Pediatrics, 142*(3).

APPENDIX (1)

A questionnaire for

The Impact of the Games Room in Improving Health Care provided in the Hospital: A case study: Jerash University Hospital, Jordan

Dear patient, hospital staff, or family member

The purpose of this questionnaire is measure the Impact of the Games Room in Improving Health Care provided in Jerash University Hospital, as part of the research steps entitled with " The Impact of the Games Room in Improving Health Care provided in the Hospital: A case study: Jerash University Hospital, Jordan.

For your convenience, the questionnaire questions were prepared as multiple choice questions, and the first part was devoted to some personal information related to the subject of the study, followed by 35 paragraphs divided into the following standards:

- **Patient Satisfaction Questionnaire (PSQ):** Developed by the researcher, this questionnaire consisted of 10 questions (1-10) that assessed patient satisfaction with the games room, including questions about the overall experience, comfort, and relaxation.
- **Stress Reduction Questionnaire (SRQ):** Developed by the researchers, this questionnaire consisted of 5 questions (11-15) that assessed patient stress levels before and after using the games room.
- **Healthcare Experience Questionnaire (HEQ):** Developed by the researchers, this questionnaire consisted of 5 questions (16-20) that assessed patient experiences with healthcare services, including communication, empathy, and overall care.
- **Hospital Staff Satisfaction Questionnaire (HSSQ):** Developed by the researchers, this questionnaire consisted of 5 questions (21-25) that assessed hospital staff satisfaction with the games room, including questions about its impact on patient care and staff morale.
- **Family Member Satisfaction Questionnaire (FMSQ):** Developed by the researchers, this questionnaire consisted of 10 questions (26-35) that assessed family member satisfaction with the games room and its impact on their loved ones.
- Scores are calculated according to a five-point Likert scale (1-5) according to the degree of approval or approval, then...

Please choose the answer that best matches your opinion by marking (√):

Personal Information

▪ Gender :

- Male ()
 - Female ()

▪ Age:

- 18-24 ()
 - 25-34 ()
 - 35-44 ()
 - 45-54 ()
 -55-64 ()

- 65 or older ()
- **Occupation**
 - Student ()
 - Employee..... ()
 - Retiree ()
 - Homemaker..... ()
 - Other ()
- **Reason for being in hospital**
 - Patient ()
 - Hospital staff..... ()
 - Family member ()
- **Relationship to the patient**
 - Spouse/partner ()
 - Parent ()
 - Child ()
 - Sibling ()
 - Other ()
- **How often do you visit the hospital?**
 - Daily ()
 - Weekly ()
 - Monthly ()
 - Rarely ()

n.o	Question	Very poor	Poor	Fair	Good	Very Good (Excellent)
1. Patient Satisfaction Questionnaire (PSQ):						
1	How would you rate the overall quality of care you received during your stay?					
2	How would you rate the communication with hospital staff during your stay?					
3	How would you rate the empathy and understanding shown by hospital staff during your stay?					
4	How would you rate the cleanliness and organization of the hospital?					
5	How would you rate the overall value of your healthcare experience during your stay?					
6	How would you rate the helpfulness of hospital staff in addressing your needs and concerns?					
7	How would you rate the availability of hospital staff to answer your questions and provide information?					
8	How would you rate the clarity and understanding of medical information provided by hospital staff?					
9	How would you rate the comfort and cleanliness of your hospital room?					
10	How would you rate the availability of amenities and services in the hospital?					
2. Stress Reduction Questionnaire (SRQ)						
11	How would you rate the overall quality of food and nutrition services during your stay?					
12	How would you rate the overall quality of pain management during your stay?					
13	How would you rate the overall quality of medication management during your stay?					

14	How would you rate the overall quality of medical tests and procedures during your stay?					
15	How would you rate your overall satisfaction with hospital parking and transportation services?					
3. Healthcare Experience Questionnaire (HEQ)						
16	How would you rate your overall satisfaction with hospital laundry and linen services?					
17	How would you rate your overall satisfaction with hospital housekeeping and maintenance services?					
18	How would you rate your overall satisfaction with hospital security and safety measures?					
19	How would you rate your overall satisfaction with hospital recreational activities and amenities?					
20	How would you rate your overall satisfaction with hospital spiritual care and support services?					
4. Hospital Staff Satisfaction Questionnaire (HSSQ)						
21	How would you rate your overall satisfaction with hospital social work services?					
22	How would you rate your overall satisfaction with hospital dietary services and meal options?					
23	How would you rate your overall satisfaction with hospital environmental services and waste management?					
24	How would you rate your overall satisfaction with hospital infection control and prevention measures?					
25	How would you rate your overall satisfaction with hospital patient education and discharge planning services?					
5. Family Member Satisfaction Questionnaire (FMSQ)						
26	How would you rate your overall satisfaction with hospital patient advocacy and support services?					
27	How would you rate your overall satisfaction with hospital patient flow and throughput efficiency?					
28	How would you rate your overall satisfaction with hospital staffing levels and nurse-to-patient ratios?					
29	How would you rate your overall satisfaction with hospital teamwork and collaboration among staff members?					
30	How would you rate your overall satisfaction with hospital leadership and management effectiveness?					
31	How would you rate your overall satisfaction with hospital transparency and accountability in patient care decisions?					
32	How would you rate your overall satisfaction with hospital patient engagement and involvement in care decisions?					
33	How would you rate your overall satisfaction with hospital electronic health records (EHR) system and technology usage?					
34	How would you rate your overall satisfaction with hospital patient portals and online access to medical records?					
35	Overall, how satisfied are you with your healthcare experience during this stay?					