

Evaluating the Effect of Emergency Department Standard Policies on Patient Satisfaction with Functional Patient Care

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ABSTRACT

This study evaluated the effect of Emergency Department (ED) standard policies on patient satisfaction with functional patient care. Specifically, it assessed the level of implementation of ED standard policies, determined the levels of functional patient care and patient satisfaction, examined the relationship between ED standard policies and patient satisfaction, and investigated the mediating role of functional patient care processes. A quantitative descriptive-correlational research design was employed. Data were collected from 100 ED patients using a researcher-developed questionnaire adapted from validated healthcare quality and patient satisfaction instruments. Statistical tools included frequency and percentage distribution, weighted mean, standard deviation, Pearson Product-Moment Correlation, and mediation analysis. The findings revealed that respondents agreed that ED standard policies were adequately implemented ($M = 2.91$), functional patient care was satisfactorily delivered ($M = 2.93$), and patient satisfaction was generally high ($M = 2.95$). Respondents also strongly agreed (Grand Mean = 3.42) that effective ED policies positively influence patient satisfaction through efficient patient care processes. Pearson correlation analysis demonstrated a very strong positive relationship between ED standard policies and patient satisfaction ($r = 0.93$), indicating that improved policy implementation is associated with higher patient satisfaction. Mediation analysis further suggested that functional patient care processes play an important role in explaining how ED policies influence patient satisfaction. The study concludes that effective implementation of ED standard policies enhances the quality of patient care and improves patient satisfaction. It recommends strengthening policy implementation, improving communication, patient flow, and care coordination, providing continuous staff development, and regularly monitoring patient satisfaction. Future studies should include multiple healthcare institutions and employ more advanced mediation techniques to further validate these findings.

Keywords: Emergency department, standard policies, functional patient care, patient satisfaction, healthcare quality, Pearson correlation, mediation analysis

INTRODUCTION

Emergency departments (EDs) play a vital role in providing immediate and life-saving healthcare services. To ensure quality, safety, and efficiency, hospitals implement standard policies, including triage protocols, patient flow procedures, communication guidelines, care coordination, and discharge and referral standards. However, despite these established policies, challenges such as prolonged waiting times, communication gaps, and inconsistent coordination continue to affect patient satisfaction. This study was conducted to evaluate how the implementation of emergency department standard policies influences patient satisfaction

with functional patient care and to determine whether functional patient care processes mediate the relationship between these policies and patient satisfaction.

Statement of the Problem

This Quantitative study sought to assess the effect of ED standard policies on patient satisfaction with functional patient care. It aimed to determine the level of implementation of ED policies, evaluate the quality of functional patient care delivery, and identify whether these factors significantly influence patient satisfaction outcomes in the ED setting.

1. What is the profile of the respondents in terms of: Age, Sex, Socio-Economic Status, Educational Attainment, Initial diagnosis, Reason for visit, Waiting time?
2. What is the effect of ED standard policies on patient satisfaction with functional patient care?
3. What is the level of implementation of ED standard policies in terms of: Triage protocols, Patient flow procedures, Communication Guidelines, Care Coordination?
4. What is the level of patient satisfaction with functional patient care in the ED of: Timeliness of care, Responsiveness of healthcare providers, Quality of communication, Coordination of services, Accessibility of care
5. Is there a significant relationship between ED standard policies and patient satisfaction with functional patient care?
6. Do functional patient care processes significantly mediate the relationship between ED standard policies and patient satisfaction?
7. Based on the findings, what patient satisfaction program can be enhanced?

Scope and Delimitations

The study focused on 100 patients who received treatment in the hospital's ED during the data collection period. It evaluated ED standard policies against triage protocols, patient flow procedures, communication guidelines, care coordination, and discharge and referral standards. Functional patient care was assessed using timeliness, responsiveness, communication quality, service coordination, and care accessibility. The study excluded critically ill patients, pediatric patients, unconscious individuals, and those who were unable or unwilling to provide informed consent. The findings are therefore limited to the respondents and hospital included in the study.

Review of Related Literature

The reviewed literature consistently shows that patient satisfaction is affected by operational efficiency, communication, and the quality of nursing care. ED standard policies that improve waiting time, patient flow, and communication significantly increase satisfaction and improve functional patient care. Together, these studies illustrate the complementary nature of different research approaches. Bhojak et al. (2022) provide depth through causal modeling, Hussein et al. (2022) offer breadth through synthesis of existing literature, and Abbasoğlu and Butun (2026) contribute contextual relevance through recent, real-world data. Their convergence on key factors—particularly communication, waiting time, and staff interaction—strengthens the evidence that patient satisfaction is primarily shaped by experiential and interpersonal elements rather than purely technical aspects of care. At the same time, their differences underscore the complexity of the concept, which is influenced not only by service delivery but also by patient expectations, socioeconomic context, and healthcare system characteristics. Ultimately, a critical comparison of these studies suggests that patient satisfaction in ED cannot be fully understood through a single methodological lens. Instead, it requires an integrated perspective that combines causal analysis, literature synthesis, and contextual observation. Collectively, the evidence indicates that improving patient satisfaction

depends less on enhancing technical quality alone and more on addressing the broader patient experience, including communication, efficiency, and responsiveness to individual needs.

Conceptual Framework

This study is anchored on the assumption that hospital policies influence care processes, and also care processes influence patient outcomes, particularly patient satisfaction. The framework is guided by systems theory and Donabedian's structure-process-outcome model, where institutional structures and policies shape care processes, which in turn determine patient outcomes.

Theoretical Framework

This study involves the integration of Lydia Hall's "Care-Core-Cure" Theory, Faye Abdellah's '21 Problems' theory, and Jean Watson's Theory of "Human Caring." The 'Care-Core-Cure' theory highlights its main themes: Care is for physical nursing care; Core is for the patient as a person—their emotions and thoughts; and Cure is for medical interventions. Faye Abdellah's '21 Problems' theory focuses on patient-centered care and addressing physical, emotional, and social needs, while Jean Watson's theory of 'Human Caring' is based on caring relationships and how they influence healing and patient perception. These theories collectively emphasize structured, patient-centered, and compassionate care, which this study applies through the facilitation of standardized emergency department policies, thereby enhancing both the quality of care delivery and patient outcomes.

METHODOLOGY

This study employed a quantitative, descriptive-correlational research design with an explanatory approach to evaluate the effect of ED standard policies on patient satisfaction with functional patient care.

Research Design

A descriptive design aimed to systematically describe the characteristics, levels, or conditions of a particular population or phenomenon using numerical data (Slater & Hasson, 2024). A correlational design examines the relationship or association between two or more variables without manipulating them, determining whether and to what extent they are related (Bhandari, 2021; Thomas & Zubkov, 2023). This design is appropriate because it allows for the systematic measurement of variables, examination of relationships among them, and the identification of predictive effects without manipulating the study environment.

Research Steps

The research began with identifying the research problem and reviewing related literature. The researcher then developed and validated the questionnaire, obtained approval from the hospital administration and ethics committee, and secured informed consent from participants. Data were collected from eligible ED patients, encoded, analyzed using statistical methods, interpreted, and finally used to develop a patient satisfaction enhancement program.

Data Collection and Sample Selection

After obtaining the necessary approvals, the researcher coordinated with the hospital administration and ED personnel. Eligible respondents who met the inclusion criteria were invited to participate. The purpose of the study was explained, informed consent was obtained, and the questionnaire was distributed and collected after completion. The collected data were checked for completeness before statistical analysis.

Data Analysis Methods

The collected data were analyzed using descriptive and inferential statistics. Frequency and percentage were used to describe the respondents' profile. The weighted mean and standard deviation were used to determine the level of ED standard policy implementation and patient satisfaction. Pearson product-moment correlation was used to measure the relationship between emergency department standard policies and patient satisfaction, while mediation analysis examined whether functional patient care processes mediated this relationship.

Research Assumptions and Validation

The study assumed that respondents answered the questionnaire honestly and accurately based on their actual experiences in the ED. It also assumed that the research instruments were valid and reliable for measuring the study variables. To ensure validity, the questionnaire underwent expert validation by nursing and research professionals. Reliability testing was also conducted prior to data collection to assess the instrument's consistency.

Study Limitations and Ethical Considerations

The study strictly adhered to ethical research principles. Ethical approval was obtained before data collection. Participation was voluntary, and informed consent was secured from every respondent. The researcher-maintained confidentiality, anonymity, and data privacy throughout the study. Participants had the right to refuse or withdraw at any time without affecting the healthcare services they received. The principles of autonomy, beneficence, non-maleficence, and justice were observed to protect the rights, safety, and welfare of all participants.

RESULTS AND DISCUSSION

The study found that most respondents were female, aged 56 years and above, belonged to the low-income group, and were high school graduates. The most common reasons for visiting the ED were fever or infection and severe pain, with most patients waiting one to two hours before receiving care. The implementation of ED Standard Policies obtained a grand mean of 2.91 (Agree), indicating that respondents perceived the policies as generally well implemented. Functional patient care received a grand mean of 2.93 (Agree), showing that patients experienced satisfactory levels of timeliness, responsiveness, communication, coordination, and accessibility of care. Likewise, Patient Satisfaction obtained a grand mean of 2.95 (Agree), reflecting an overall positive perception of the ED services. For the perceived effect, respondents Strongly Agreed (Grand Mean = 3.42) that effective ED policies, efficient patient flow, good communication, and coordinated healthcare services positively influence patient satisfaction. Pearson correlation analysis yielded an r-value of 0.93, indicating a very

strong positive relationship between ED standard policies and patient satisfaction. The findings also suggest that Functional Patient Care serves as a mediating process, demonstrating that effective policy implementation improves patient care processes, which in turn enhance patient satisfaction.

CONCLUSIONS

Based on the findings, the study concludes that ED standard policies are generally implemented effectively and contribute to satisfactory levels of functional patient care and patient satisfaction. A very strong positive relationship ($r=0.93$) exists between emergency ED policies and patient satisfaction, indicating that better policy implementation is associated with higher patient satisfaction. Furthermore, functional patient care is an important mechanism linking ED policies to patient satisfaction, underscoring the value of patient-centered, timely, coordinated, and responsive care in improving healthcare outcomes.

RECOMMENDATIONS

Based on the conclusionsfindings, the study recommends that the hospital administrators regularly review and strengthen ED standard policies, particularly in triage, patient flow, communication, care coordination, and discharge procedures. Continuous staff training, improved waiting-time management, enhanced communication skills, strengthened interprofessional collaboration, and implementation of the Patient Satisfaction Enhancement Program are also recommended. Additionally, hospitals should establish a continuous patient feedback system to monitor service quality and guide quality improvement initiatives. Future researchers are encouraged to conduct similar studies across multiple hospitals, using larger sample sizes and more advanced statistical analyses to validate and extend the findings.

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AI DECLARATION STATEMENT

AI-assisted tools were utilized to improve grammar, language, organization, formatting, and clarity of selected sections, as well as to generate preliminary drafts and suggestions for academic writing. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

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