

PATIENTS' ASSESSMENT OF EFFICIENCY OF SERVICES AT A TEACHING HOSPITAL IN A DEVELOPING COUNTRY

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Key words: Services, efficiency, teaching hospital, patients

Abstract

Background: One of the factors that influence patients' satisfaction is efficiency of services rendered to patients. This study aims to determine patients' assessment of services rendered at a University Teaching Hospital.

Method: The study was a cross-sectional study carried out between July 2002 and September 2002 at the University of Benin Teaching Hospital, Benin – City, Edo – State, Nigeria. All patients (255) on admission were included in the study.

Results: The average waiting time of patients was 2 hours 53 minutes (173 minutes) and the range was 2 minutes to 2 days. Two hundred and ten (84%) of the patients were satisfied with time spent with the doctor (consultation time). Services at the pharmacy were satisfactory to 140 (56.0%) patients while 73.2% were satisfied with services rendered at the laboratories. Eight – five percent and 76.8% of patients were satisfied with the X – ray and catering departments respectively. However, patients' rating of the level of sanitation was poor (46%).

Conclusion: Areas of need identified include, waiting time prior to consultation, sanitation of the hospital and pharmacy department. Although patients expressed a high level of satisfaction with the laboratories, X – ray and catering departments, there is a need to work towards achieving total satisfaction with all facilities.

Mots clés: Services, efficacité, hôpital universitaire, patients

Résumé

Contexte: L'un des facteurs influent sur la satisfaction des patients est l'efficacité des services rendus aux patients. Le but de cette étude est de déterminer l'évaluation par les patients des services rendus dans un hôpital universitaire.

Méthodes : Il s'agit sur un échantillon représentatif réalisée entre juillet 2002 et septembre 2002 à l'hôpital universitaire de Bénin, Benin-City, Edo-State, Nigeria. Tous les patients (255) ont été inclus dans l'étude, dès leur admission.

Résultats : La durée moyenne d'attente des patients était de 2h 53 mn (173 minutes) avec des extrêmes de 2 minutes à 2 jours. Deux cent dix (84%) des patients étaient satisfaits de la durée de leur entretien avec le médecin (Durée de la consultation). Les services de la pharmacie étaient satisfaisants pour 140 patients (56,0%), tandis que 73,2% des patients étaient satisfaits des services rendus dans les laboratoires. Quatre cinq pour cent et 76,8% des patients étaient respectivement satisfaits des services de radiologie et de restauration. Toutefois l'appréciation par les patients du niveau d'hygiène était faible (46%).

Conclusion: Les besoins identifiés étaient dans les domaines suivant: délai d'attente avant la consultation, niveau sanitaire de l'hôpital et le service de la pharmacie. Bien que les patients aient exprimé le haut niveau de satisfaction avec les laboratoires, les service de radiologie et de restauration, il y'a nécessité d'aller dans le sens d'une satisfaction totale à tous les niveaux.

Introduction

Satisfaction refers to a state of pleasure or contentment with an action, event or service, especially one that was previously desired.¹ When applied to medical care, patient satisfaction can be considered in the context of patient's appraisal of their desires and expectations of health care. One of the factors that influence patient satisfaction is efficiency of services rendered to patients.² The "efficiency" of service refers to the promptness of the care given to patients, including issues like waiting time before consultation, duration of consultation, amount of time spent with the doctor subsequently, quick response to emergencies, quick dispensation of drugs, fast and accurate laboratory tests.²

Satisfied patients are more likely to comply with prescribed treatment and advice from doctors; they are also more likely to return for additional care when necessary and may be more willing to pay for services, thereby increasing revenue.

A study revealed that the average waiting time in hospitals in Trinidad and Tobago was 2 hours 40 minutes, with a range of less than 1 hour to 6 hours.³ This prolonged wait before consultation was reflected in the 48% of patients who were dissatisfied with hospital care for this reason.³ Long waiting time has frequently been mentioned as one factor which may limit health service utilization by any given community.⁴⁻⁷ Studies carried out in developing countries, has also shown that patients spent 3-4 hours in outpatient departments before seeing the doctor.⁸⁻¹⁰ These findings are at variance with the developed country.¹¹ Long waiting time before medical intervention may result in the worsening of the illness and death or a permanent disability, if the patient recovers.¹² One of the most distressing things that patients have to contend with is hospital waiting time. For patients who are severely ill or in pains, this can be quite an ordeal.

Duration of consultation can also affect patient satisfaction. Singh and co-workers in their study found the duration of examination to be three minutes.³ They also found that 47% of patients expressed dissatisfaction over that. Prolonged waiting time before consultation and average duration of examination were found to be the greatest source of discontent among patients in Trinidad and Tobago.³ Patients' satisfaction could also be affected by quality of services provided by laboratories, pharmacy, X-ray and catering departments.

This study is therefore borne out of the need for periodic assessment of the services in health facilities. This will enable health managers identify deficiencies and improve on the quality of health services rendered.

Materials and Methods

This study was carried out between July 2002 and September 2002 at the University of Benin Teaching Hospital (UBTH), Benin City, Edo State, Nigeria.

The study was a cross-sectional study and all patients (255) on admission at the beginning of the study were included. The researchers developed a structured questionnaire, which sought information on time spent with a doctor, waiting time, patient satisfaction on quality of services provided by various departments as well as socio-demographic characteristics of the respondents.

The questionnaire was pretested at the general outpatient clinic located some distance from the hospital wards. After the pre-test, amendments were made as necessary. For instance waiting time was more explicitly defined to mean the time the patient spent in U.B.T.H from arrival to first contact with a doctor. The face validity of the questionnaire was ascertained by the evaluation of six professionals in Community Health and Mental Health.

The eligibility to participate in the study was based on the respondent's willingness to take part in the study. Psychiatric patients who were not oriented in time, place or person and patients who were seriously ill were exempted from the study.

A total of 255 respondents drawn from all wards in the hospital were included in the study. However five patients were unable to participate because of death (4) and discharge (1) giving a response rate of 98%. Data generated was then analysed.

Results

A total of 250 respondents participated in the study. Two hundred and fifty-five (255) patients were initially enrolled in the study. Five patients were unable to participate because of death (4) and discharge (1). The mean age of the respondents was 36.2 ± 19.7 years. One hundred and one (40.4%) of the respondents were males while 149 (59.6%) were females. Forty-five (18.0%) patients completed primary education only, 85 (34.0%) secondary school, while 50 (20.0%) had university degrees or other qualifications from tertiary institutions. Those who had no formal education were 70 (28.0%).

The average waiting time was 2 hours 53 minutes (173 minutes). While the range was 2 minutes to 2 days. Eighty-five (34%) patients were seen within 1 hour of arrival in the hospital, 14.8%, 15.6%, 24.0% and 6.8% waited for 61-120 minutes, 121-180 minutes, 181-240 minutes and 241-300 minutes respectively. Four (1.6%) patients waited for 301-360 minutes, 3 (1.2%) patients waited for 361-420 minutes while 5 (2.0%) waited for over 421 minutes before they were attended to. (Table 1). Two hundred and ten (84%) patients were satisfied with the amount of time spent with the doctors, while forty of them (16.0%) were not.

Services at the pharmacy were satisfactory to 140 (56.0%) patients, while 108 patients (43.3%) were not satisfied. (Table 2) Reasons given for the dissatisfaction were long delay in serving customers (73.1%), unavailability of certain drugs (13.8%), high cost of drugs (11.1%), and rudeness of staff (1.8%) (Table 3).

One hundred and eighty three patients (73.2%) were satisfied with services in the laboratories, while 25.6% were dissatisfied (Table 2). Reasons for the dissatisfaction were mostly delayed results (48.4%) and expensive tests (23.4%) (Table 4).

One hundred and ninety-two (76.8%) of the patients were satisfied with the quality of food provided by the hospital, while 58 (23.2%) were not. One hundred and fifteen (46.0%) thought the bathrooms and toilet facilities were dirty, while 135 (54.0%) thought they were clean enough. Only 40% of the patients had utilized services at the x-ray department and 85 (85%) of them were satisfied and 15 (15%) who were not. Sixty-four (25.6%) patients were dissatisfied with services at the laboratories.

Table 1: Patients' waiting time before consultation at the University of Benin Teaching Hospital

Waiting time (minutes)	No. (%)
≤60	85 (34.0)
61- 120	37 (14.8)
121 – 180	39 (15.6)
181 – 240	60 (24.0)
241 – 300	17 (6.8)
301 – 360	4 (1.6)
361 – 420	3 (1.2)
≥421	5 (2.0)
Total	250 (100)

Table 2: Patients' assessment of quality of services provided by various departments

Patients' assessment of service department	Satisfactory (%)	Not satisfactory (%)	No response (%)	Total (%)
Doctors ward rounds	234 (93.6)	16 (6.4)	-	250 (100)
Catering department	192 (76.8)	58 (23.2)	-	250 (100)
Laboratories	183 (73.2)	64 (25.6)	3 (1.2)	250 (100)
Pharmacy	140 (56.0)	108 (43.2)	2 (0.8)	250 (100)
Sanitation of toilet/ Bathroom	115 (46.0)	135 (54.0)	-	250 (100)
X-ray department	85 (85.0)	15 (15.0)	-	250 (100)

Table 3: Complaints of 108 patients about services at the pharmacy department

Complaints	No. (%)
Long delay in serving customers	79 (73.1)
Unavailability of certain drugs	15 (13.9)
High cost of drugs	12 (11.1)
Rudeness of staff	2 (1.9)

Table 4: Complaints of 64 patients about services at the laboratories

Complaints	No. (%)
Delayed results	31 (48.4)
Expensive tests	15 (23.5)
Rude workers	7 (10.9)
Delay in attending to patients	6 (9.4)
Missing results	5 (7.8)

Discussions

Patients' assessment of the efficiency of services provided by a hospital is an important index of patient satisfaction.² In view of the positive relationship between patient satisfaction and health outcomes,¹³ satisfaction or dissatisfaction with facilities provided in hospitals as assessed by patients provides opportunity for improvement or change.

A majority of patients (84%) were satisfied with the amount of time spent with their doctors, and were

satisfied with the doctors' ward-rounds. The average waiting time of patients in the study was 2hours 53minutes (173 minutes). This is similar to the findings in hospitals in Trinidad and Tobago (2hours 40minutes) and in an emergency paediatric unit (EPU) of Jos University Teaching Hospital, where the Pre – intervention waiting time was found to be 156 minutes.¹² In spite of the seeming similarity across continental borders, it must be acknowledged that there's a need for reduction in waiting time. The similarity may be reflective of a need that is wide spread rather than an acceptable norm. Thus, deliberate efforts at reduction of waiting time are necessary. The finding is at variance with waiting time at the University College Hospital Ibadan, Nigeria (73.9minutes).¹⁵ The long waiting time found in this study could be as a result of large number of patients waiting to see relatively few doctors. Other contributory factors could be scheduling problems and delays caused by hospital bureaucratic bottleneck.

A study of primary care facilities identified the drug supply system in hospitals as poor.³ In consonance, this study found that 44% of the patients were dissatisfied with pharmacy department. The major complaint made by patients about services at the pharmacy department was long delay in serving customers (79%). Could this be due to shortage of staff or because of bureaucratic bottleneck? In the laboratory department, the major complaints was also delay in receiving results (48.4%), expensive test (23.4%) rude workers (10.9%), delay in attending to patients (9.4%) and missing results (7.8%).

With better administrative policies, these problems can be surmounted.

Seventy-three point two percent (73.2%), 85% and 76.8% of patients were satisfied in the laboratories, X-ray and catering departments respectively. However, there is a need to work towards achieving total satisfaction with all facilities. Patients rating of the level of sanitation are particularly worrisome. Only 46% of patients were satisfied with level of sanitation of the toilets and bathrooms. This is in contrast to 84% found in a study in Canada.¹⁶ This calls for a pragmatic approach to attending to sanitation issues as this could result in infection and cross infection among patients. Although it is worthy of note that hospital public health unit undertakes sanitation directed schemes periodically, the patients evaluation of the status quo as reported by our finding gives an objective appraisal devoid of propaganda from the consumer's perspective.

Overall, the survey has highlighted areas of need. This provides an objective analysis of patient satisfaction with hospital facilities. Attempts at improvement can focus on identified areas.

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