



Patients Satisfaction with Waiting Time and Attitude of Health Workers in the General Outpatient Department of a State Teaching Hospital, Enugu State, Nigeria

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Authors' contributions

This work was carried out in collaboration among all authors. Author EON conceived the study, developed the study instrument and wrote introduction, methodology and discussion sections of this paper. Author BIO reported the results of the study, and also compiled the references. Author OHC analyzed the findings of the research work using SPSS version 21.0 for widows. She also developed the tables and figures used in the paper. All authors read and approved the final manuscript.

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ABSTRACT

Background/Aim: Overall patients' satisfaction with services provided in a hospital is an objective of care, and also a desired outcome. Dissatisfied patients are more likely not to comply with prescriptions, follow-up appointments, or further use the health facility. Services provided in public health facilities in Nigeria have been perceived by both patients and health care providers as being poor. Teaching hospitals in Nigeria are the apex referral centers, with the General Outpatient Department (GOPD) being the first unit that patients mostly go to first. Waiting time and attitude of

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health workers are key contributors to overall patients' satisfaction. The objective of this study is to assess patients' satisfaction with waiting time, and attitude of health workers in the GOPD of a Teaching hospital in Nigeria.

Materials and Methods: Cross-sectional study, conducted over three months in 2017 at the GOPD of Enugu State University Teaching Hospital, Nigeria. Structured, interviewer-administered questionnaire was used. Exit interview was conducted on randomly selected 13 patients as they were leaving the GOPD Pharmacy unit on Tuesdays and Thursdays of every week, until 313 respondents were interviewed.

Results: A total of 313 patients were interviewed, 131 (41.9%) males and 182 (58.1%) females. Analysis was done using Statistical Package for Social Sciences (SPSS) version 21.0, and the results were expressed as percentages. Patients' satisfaction score for the various items studied were found to be 53.7% for waiting time, 74.4% for attitude of Records staff, 78.3% for nurses, 71.9% for doctors, 70.6% for time spent with doctor, 72.5% with doctor's explanation and 40.6% with privacy.

Conclusions: Overall satisfaction with services rendered at the GOPD was 60.4%. Identifying and implementing interventions that will enhance patients satisfaction, shall improve health facility utilization.

Keywords: Patients; satisfaction; time; attitude; health; worker.

1. INTRODUCTION

Patients' satisfaction could be said to be a reflection of judgement on the quality and goodness of care [1]. Patients' satisfaction is an objective of care, as well as a desirable outcome of care, hence a satisfied patient is more likely to adhere to the health care providers instructions [2]. Many factors such as patient's socio-demographic characteristics, health care setting, availability of commodities, etc; influence patients' satisfaction. Some studies however revealed that the attitude and perceived competence of health care workers had greatest effect on patients satisfaction [3]. Specifically, the interpersonal skill of health care providers has been found to be the most important determinant of patients' satisfaction [4,5]. Patient's waiting time in the General Outpatient Department (GOPD) could be defined as the time from when the patient enters the GOPD to the time he leaves the GOPD [6]. However, for the purpose of this study, the waiting time was defined as the time spent by the patient, from the moment he arrived the GOPD, to the time he is seen by a doctor.

Some previous studies revealed that the patients' waiting time in the clinic of any hospital is a key indicator of the quality of services rendered by the hospital [7]. Long waiting time could be an indication that the resources and staff available are insufficient to cope with the number of patients desiring care, or that these available resources and staff are inefficiently being deployed [8]. Anxiety and stress from long

waiting time could further complicate the patient's problems [9]. Generally, patients long waiting time for health services tend to reduce their level of satisfaction, while friendly attitude such as good interpersonal communication skills by the doctors and other health workers enhance patients' satisfaction [10]. Some people believe that the Outpatient Department of any hospital is the window to the health care services in that hospital, and indicates the quality of health services provided in that hospital [11]. In many developing countries including Nigeria, patients wait for a long time in health facilities before accessing health care. This usually could be as a result of weak health systems and inadequate health care workers [12]. Time-specific appointments that is known to be a beneficial practice in reducing patients' waiting time in outpatient clinics, is not the norm in Nigeria. Many patients usually arrive early to outpatient clinics, and wait for a reasonable length of time before being seen by a doctor [13].

It is therefore very crucial that all persons involved in the planning and delivery of health care services, do all that are necessary to ensure that waiting time at health service delivery points are reduced to the barest minimum; and steps taken to improve friendly attitudes of health care workers towards patients. The objective of the study is to assess patients' satisfaction with the waiting time in the General Outpatient Department of Enugu State University Teaching Hospital, as well as satisfaction with the attitude of the health workers in that department of the hospital.

2. MATERIALS AND METHODS

2.1 Study Area

The study was conducted in the General Outpatient Department of Enugu State University Teaching hospital, located in Enugu metropolis, Southeast Nigeria. Enugu metropolis is an urban area that, in addition to having a good number of primary and secondary health facilities; has two tertiary hospitals that offer general outpatient services to the public. The study site is a three hundred and twenty bedded hospital, with a daily average General Outpatient turn-over of about one hundred and ten patients, as documented in the first 2017 quarter report of the Planning, Research and Statistics unit of the hospital.

2.2 Study Design

This research work was observational, descriptive, cross-sectional study involving patients who presented in the GOPD between August 1st, and October 31st, 2017.

2.3 Study Population

This study was conducted among patients who presented at the GOPD of the Enugu State University Teaching hospital, which was the only State-owned tertiary health institution. Very ill patients were excluded from the study. Only adults aged 18 years and above are accepted in the GOPD.

2.4 Sampling Instrument

Structured, interviewer-administered questionnaire was used to collect information from the respondents.

2.5 Sample Selection and Data Collection

The Authors agreed on a population size of 300 or more. This was based on the desire to have a sample size that could guarantee reasonable validity, and also a size that the Authors had enough resources to process. Since the hired Research Assistant could reliably interview about 13 respondents within the GOPD clinics consulting hours in a day, and was only available for 2 days in a week (Tuesdays and Thursdays); systematic sampling method

was used to select 13 respondents in each of those days until a total of 313 respondents were recruited. The first patient that left the GOPD Pharmacy unit was usually the first to be interviewed, and subsequently the ninth patient, and after every eight patients. The systematic sampling interval of eight was based on the finding that an average of 110 patients was seen at the GOPD each consulting day.

2.6 Data Analysis

Information collected were analyzed using SPSS version 21.0 for windows, and expressed in percentage of patients that were satisfied with the waiting time or attitude of the health workers. Those that responded "satisfied or very satisfied" were grouped as being satisfied, while those that responded "dissatisfied or very dissatisfied" were grouped as being dissatisfied.

2.7 Limitations

In many studies, assessment of patient's waiting time in the GOPD covers the period from entrance into the unit, to the time the patient leaves the Pharmacy unit of the GOPD. That usually would give a more comprehensive picture of the time spent by the patient while trying to access health care in the GOPD. A patient who was satisfied with time spent, prior to being seen by a doctor, might be very dissatisfied with the extra time spent, trying to access medical investigations and collecting prescribed drugs from the GOPD Pharmacy.

3. RESULTS

3.1 Socio-Demographic Variable

Highest number of respondents was within the age range of 30 - 39 years (27.8%).

Overwhelming number of respondents were between 20 to 59 years (87.8%). Almost half of the respondents were graduates (48.9%). Patients who classified themselves as businessmen/women had the highest number of respondents (22.7%). Most of the respondents were females (58.1%), married (66.8%), Christians (93.6%), and Igbo by tribe (86.9%).

Table 1. Socio-demographic variables

Variable	N (313)	% (100)
Age at last birthday (Years)		
19 and below	19	6.1
20 - 29	83	26.5
30 - 39	87	27.8
40 - 49	62	19.8
50 - 59	43	13.7
60 - 69	14	4.5
70 and above	5	1.6
Sex		
Male	131	41.9
Female	182	58.1
Tribe		
Igbo	272	86.9
Yoruba	22	7.0
Hausa	7	2.2
Efik	1	0.3
Calabar	4	1.3
Ibibio	1	0.3
Kogi	2	0.6
Edo	3	1.0
Idoma	1	0.3
Marital Status		
Married	209	66.8
Single	84	26.8
Divorced/Separated	6	1.9
Widowed	14	4.5
Religion		
Christian	293	93.6
Muslim	13	4.2
Traditional religion	7	2.2
Educational Status		
No formal education	40	12.8
Primary level	21	6.7
Secondary level	63	20.1
Tertiary level	153	48.9
Postgraduate level	36	11.5
Occupation		
Unemployed/applicant	13	4.2
Farmer	25	8.0
Teacher	42	13.4
Businessman/woman	71	22.7
Petty trader	19	6.1
Civil servant	63	20.1
Retiree	13	4.2
Student	52	16.6
Medical practitioner	7	2.2
Legal practitioner	1	0.3
Public servant	5	1.6
Engineers	2	0.6

3.2 Overall Perception of Waiting Time

Highest number of respondents saw the waiting time as being long (35.1%), while only 6.1% saw it as being short. However,

31.9% of respondents felt that the waiting time was moderate, while 26.2% perceived the waiting time as very long and only 0.6% saw the waiting time as being very short.

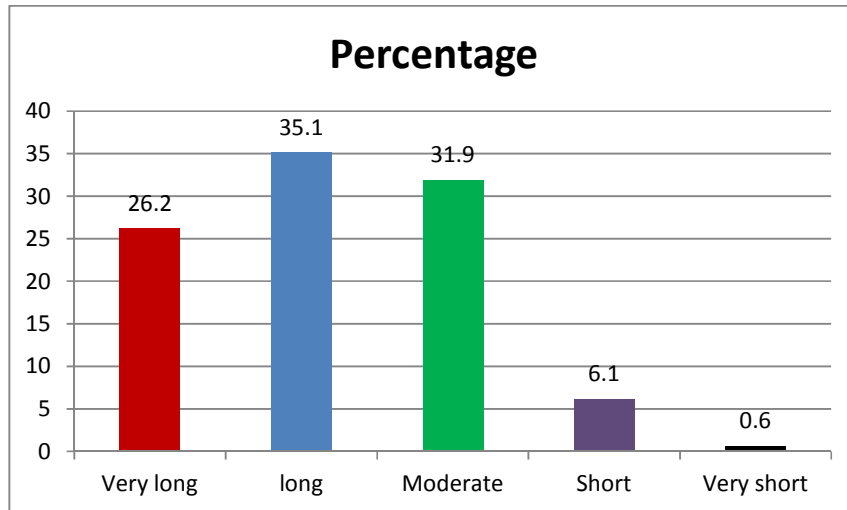


Fig. 1. Overall perception of waiting time

3.3 Overall Satisfaction with Waiting Time

Majority of the respondents (53.7%) were either satisfied or very satisfied with the waiting time, while 30.3% were dissatisfied or very dissatisfied; and 16.0% were uncertain about how they perceived the waiting time.

3.4 Satisfaction with Attitude of Different Cadre of Health Workers

The perception of patients with the attitude of Health Workers was assessed in terms of “very friendly, friendly, uncertain, unfriendly and very unfriendly”. Those that responded “friendly and very friendly” were interpreted as being satisfied with the attitude of the health workers. Most

patients expressed satisfaction with the attitude of nurses (78.3%), followed by the Records staff (74.4%), and lastly by the Doctors (71.9%).

3.5 Perception of Consultation Time Spent with the Doctor

Overall, 70.6% of the respondents perceived the time spent with the doctor as “very adequate” or “adequate”, and hence were presumed to be satisfied with the time, while 14.4% perceived the time as “inadequate” or “adequate”, and were thus presumed to be dissatisfied, However, 15.0% were uncertain about the adequacy of the time spent with the doctor.

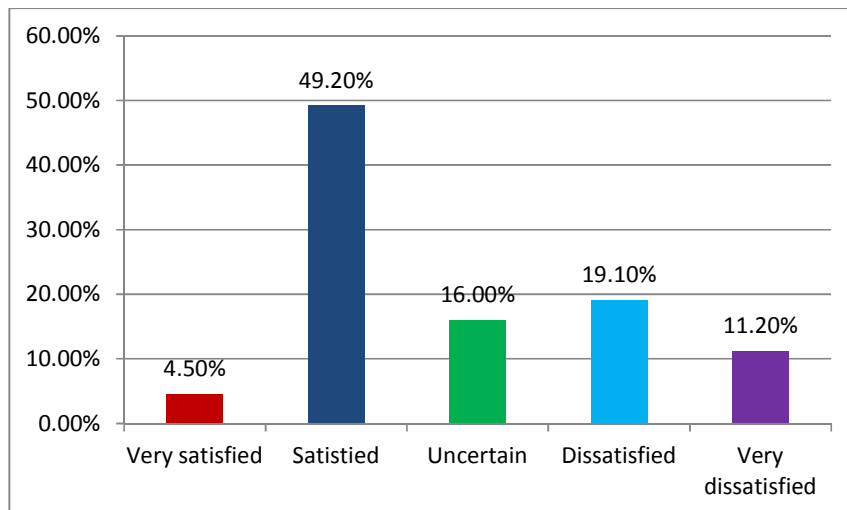


Fig. 2. Overall satisfaction with waiting time

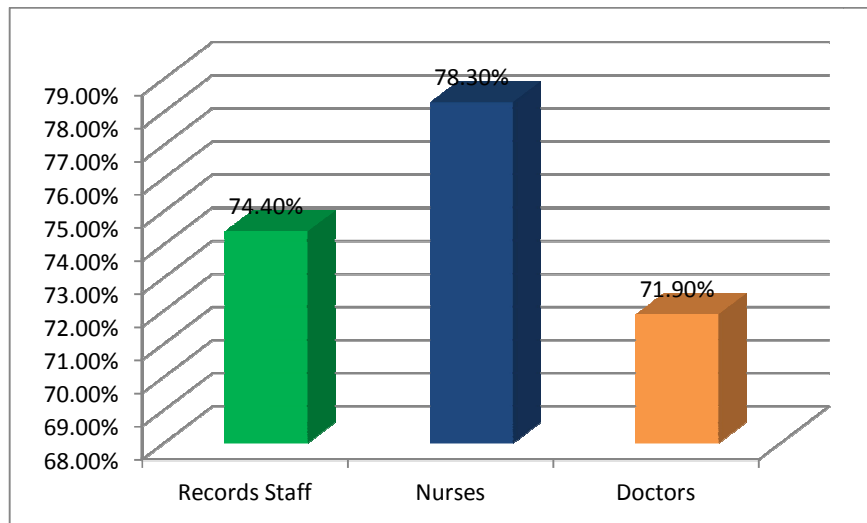


Fig. 3. Satisfaction with attitude of different cadre of health workers

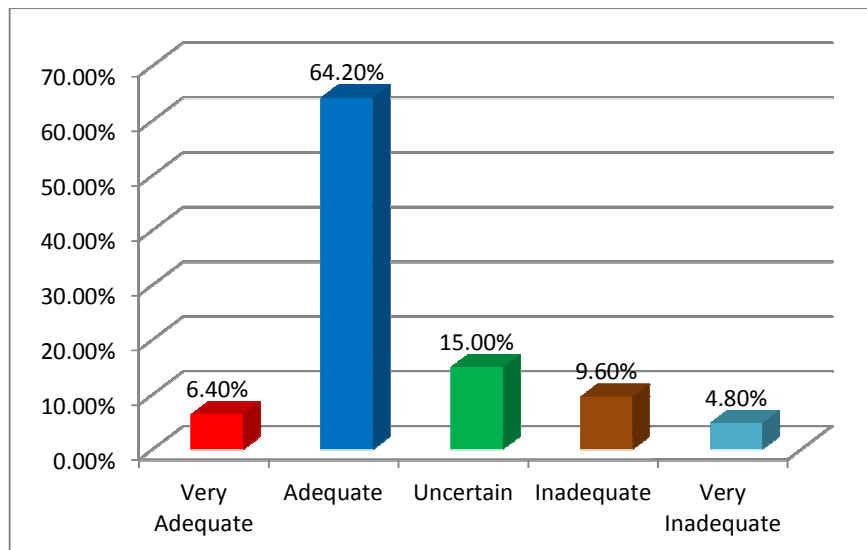


Fig. 4. Perception of consultation time spent with the doctor

3.6 Satisfaction with Doctor's Explanation

A total percentage of 72.5% of the respondents could be said to be satisfied with the doctor's explanation of the patients' condition, while only 9.0% were dissatisfied or very dissatisfied. Up to 18.5% of the respondents were not sure of their satisfaction level with the doctor's explanation.

3.7 Satisfaction with Privacy during Consultation with the Doctor

Overall, 40.6% of the respondents were very satisfied or satisfied with the privacy provided

during consultation with the doctor, while almost half of the respondents (49.5%) were either dissatisfied or very dissatisfied with the privacy they had, when they were attended to, by the doctor.

3.8 Perception of Waiting Time, among Different Age Groups

Aside from respondents aged 70 years and above, where 2 out of the 3 that participated reported that waiting time was very long, persons between the age group 40 to 49 years reported the highest score of 33.9% with respect to

waiting time being very long, while those 50 to 59 years of age had the highest score of 50% with respect of the waiting time being long, among each age group of ten. The age group 30 to 39

years scored highest (35.6%) on the waiting time being moderate. The perception that the waiting time was short had highest percentage (21.1%) of respondents that were 19 years and below.

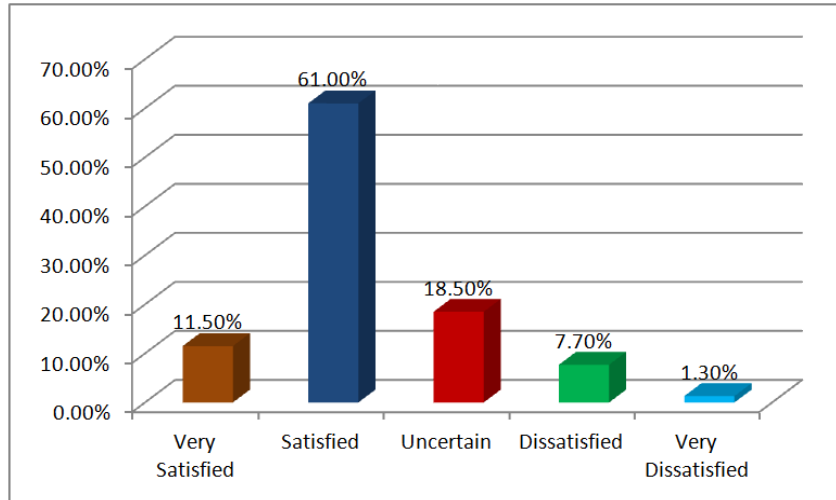


Fig. 5. Satisfaction with doctor's explanation

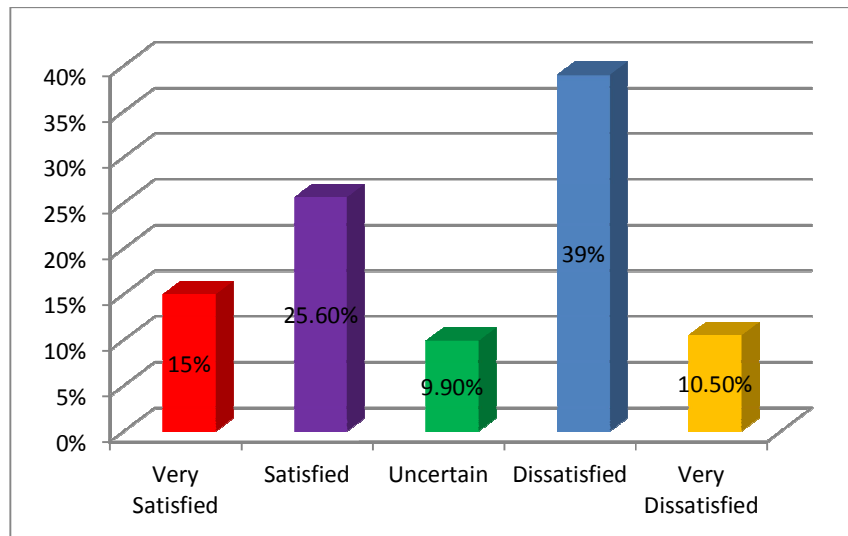


Fig. 6. Satisfaction with privacy during consultation

Table 2. Perception of waiting time among different age groups

Age (Years) last birthday	Very Long	Long	Moderate	Short	Very Short	Total
19 and below	6 (31.6%)	4 (21.1%)	5 (26.3%)	4 (21.1%)	0 (0.0%)	19 (100%)
20 - 29	20 (24.1%)	29 (34.9%)	29 (34.9%)	4 (4.8%)	1 (1.2%)	83 (100%)
30 - 39	19 (21.8%)	28 (32.2%)	31 (35.6%)	9 (10.3%)	0 (0.0%)	87 (100%)
40 - 49	21 (33.9%)	24 (38.7%)	17 (27.4%)	0 (0.0%)	0 (0.0%)	62 (100%)
50 - 59	11 (25.6%)	17 (39.5%)	13 (30.2%)	1 (2.3%)	1 (2.3%)	43 (100%)
60 - 69	2 (14.3%)	7 (50.0%)	4 (28.6%)	1 (7.1%)	0 (0.0%)	14 (100%)
70 and above	3 (60.0%)	1 (20.0%)	1 (20.0%)	0 (0.0%)	0 (0.0%)	5 (100%)
Total	82 (26.2%)	110 (35.1%)	100 (31.9%)	19 (6.1%)	2 (0.6%)	313 (100%)

4. DISCUSSION

In the United States of America in 1957, the nursing department started the first assessment of patients' satisfaction with health services [14]. Since then, patients' satisfaction assessment has been variously used in identifying gaps with health services, and developing strategies for mitigating such gaps [15]. Many people in Nigeria perceive services provided at Public hospitals as poor [16]. In most cases, the GOPD is the first point of contact of the patient with health services in a hospital, and provides the first impression on the care expected; hence it is considered the shop window of the hospital [17,18].

Though it is generally known that long waiting time contributed to patients not being satisfied with services provided in health facilities [10], this study found that as high as 61.3% of the respondents perceived waiting time as either being very long (26.2%) or long (35.1%); but curiously, majority of them (53.7%) were still very satisfied (4.5%) or satisfied (49.2%) with the waiting time. Even if all the respondents that perceived the waiting time as being moderate (31.9%), short (6.1%), or very short (0.6%) were satisfied with the waiting time, only 38.6% would have been satisfied. It is therefore possible that in addition to the length of waiting time in the GOPD of a hospital, other factors could contribute to the ultimate satisfaction level of the patients with the waiting time. Such factors may include; comfort of the waiting arena (comfortable chairs, availability of Air-conditioner or fan, etc), health education talk, and availability of relaxation facilities (eg. Television, Radio, etc). Some previous studies in Nigeria and elsewhere identified long waiting time as a major cause of patients not being satisfied with health care services [19-22]. However, as high as 70% of the respondents were satisfied with the waiting time in a study conducted ten years ago in the Northern part of Nigeria [23]. The finding of 53.7% of the respondents being satisfied with waiting time in this study is similar to 51.1% and 50% found in other studies in Nigeria, three and six years ago, respectively [24,25].

Some studies found that the overall patient satisfaction with hospital services is mostly determined by satisfaction with Physicians services [26]. However in this study, attitude of Physicians towards patients when assessed as being very friendly, friendly, uncertain, unfriendly and very unfriendly was found to be the poorest (71.9%), when compared to that of the records

staff (74.4%) and nurses (78.3%). This could well be as a result of few doctors in the GOPD having to see a lot of patients, with some seeing more than forty patients in some days, as observed in the course of this study. Attending to this very high number of patients could make the doctor irritable and unfriendly. The assessment of other aspects of the quality of doctors' practice such as time spent with the patient, and explanation given to the patient about his health condition, revealed similar pattern of satisfaction; which was 70.6% and 72.5% respectively. These findings are however better than the findings in India two years ago where 50.62% of respondents and 40.06% respectively were satisfied with the time spent with the doctor, and the explanation given by the doctor [27]. In Nigeria however, some studies such as the one conducted in Nasarawa state about 3 years ago revealed that Patient satisfaction with Doctor's consultation was similar to our finding (70.5%), while overall satisfaction with staff attitude was 61.0% [28] in another study in Amino Kano Teaching Hospital, Kano, patients' satisfaction with the attitude of the doctors was as high as 90%, while 86% were satisfied with the attitude of other health workers including the nurses [23]. The satisfaction of respondents in this study with privacy during consultation with the doctor was found to be poor (40.6%). It was observed during this study that each consulting room was occupied by at least two doctors attending to patients at the same time. This certainly militated against patients' privacy. In health conditions such as sexually transmitted infections, the patient might not freely discuss his/her health challenge with the doctor.

Assessment of age, as a possible factor that affected patients' satisfaction with waiting time revealed that overall, older patients that were 40 years and above perceived waiting time as being very long or long, hence were less satisfied. It could be that respondents in that category have more social responsibilities, and hence are not satisfied with what could be considered unproductive time spent at the GOPD. This assertion however requires more research work. The trend also revealed that among patients aged 30 to 39 years, persons who perceived waiting time as being moderate was highest in number. Among all the age groups, patients that were 19 years and below scored highest on the aspect of perception of waiting time as "short". These also could be explained by the possibility of the younger patients being under less pressure, when it comes to availability of time.

Again, this assertion requires further research work.

5. CONCLUSIONS

This research work found that majority of the patients that attended the GOPD of Enugu State University Teaching Hospital between August 1, and October 31, 2017 were satisfied with the time they spent, waiting to see a doctor; and the attitude of the health workers, especially the nurses. Majority were however not satisfied with the privacy provided in the doctors' consulting rooms. Since patients' satisfaction study as a quality improvement tool, could be used for evaluation and improvement of health care services; findings from this study would be very useful in addressing some aspects of service delivery gaps at the study site and other similar locations. Identifying and implementing interventions that will enhance patients satisfaction, shall improve health facility utilization, and ultimately contribute to Universal Health Coverage.

CONSENT AND ETHICAL APPROVAL

The aim of the study was adequately explained to the respondents, and their informed consent obtained, prior to the interview. Ethical clearance was obtained from the hospital Ethical Research committee.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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