

## Patients' Satisfaction towards Outpatient Department Services: Tool for Quality Improvement

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**Abstract:** Patient satisfaction is increasingly becoming the focus of research and evaluation of medical treatments, services, and interventions. The aim of the current study is to assess patients' satisfaction towards outpatient department services received at a PUBLIC HOSPITAL in Saudi Arabia. It was hypothesized that patients are less satisfied with certain issues related to the services provided to them. A descriptive cross-sectional survey was conducted among patients attending the outpatient department. The study was conducted in a PUBLIC HOSPITAL in Saudi Arabia in 2015-2016. Patients were requested to fill the Outpatient Department Patients' Satisfaction questionnaire. Different services were assessed and each item was scored on a 5- point Likert-like scale. The necessary approval for carrying out this study was requested from the PUBLIC HOSPITAL Authority. Data was analysed using SPSS version 17. The study included 436 patients including both gender. The overall patients' satisfaction was medium and mean satisfaction score ranged between 2.41-2.94. The highest percentage of dissatisfaction documented was the length of time waiting to be examined by physicians (58%) as well as the discomfort of the waiting area. The overall satisfaction with the reception and services provided was 50.4%. Gender and social class did not affect patients' satisfaction whereas age and educational level affected satisfaction with outpatient department.

**Keywords:** Satisfaction, Patients, Outpatient department, Quality, Saudi Arabia.

### INTRODUCTION

Patient satisfaction is increasingly becoming the focus of research and evaluation of medical treatments, services, and interventions. Satisfaction is achieved when the patient's perception of the quality of care and services that they receive in healthcare setting has been positive, satisfying, and meets their expectations [1]. Patient satisfaction with health care is important for several reasons; satisfied patients are more likely to maintain a consistent relationship with a specific provider [2] and by identifying sources of patient dissatisfaction, an organization can address system weaknesses, thus improving its risk management [3]. Moreover, satisfied patients are more likely to follow specific medical regimens and treatment plans thus contributing to the organization's total quality management [4].

Furthermore, patients' perceptions about healthcare systems seem to have been largely ignored by health care managers in developing countries [5,6]. This is despite the fact that patient satisfaction surveys are one of the established yardsticks to measure success of the service delivery system functional at hospitals.

Health professionals also benefit and are guided by the outcome of these surveys. Patient evaluations can help to educate medical staff about their achievements as well as their failure, assisting them to be more responsive to their patients' needs [7]. Therefore, patients' satisfaction is a useful measure to provide an indicator of *quality and availability* in healthcare and thus needs to be measured frequently [8,9].

Patients' perceptions about health care systems seem to have been largely ignored by health care managers in developing countries [10] and clinicians lack both awareness and adequate training to address patients' expectations [11]. In Saudi Arabia, the health care infrastructure is reasonable in terms of facilities and personnel. The real challenge is to improve staff performance and patient satisfaction, in order to minimize rework, wastage, delay and costs [12]. It is hard to identify a single factor that is directly associated with a low or high level of patient satisfaction. A variety of factors might be involved in patient satisfaction process. Some of these include patients' demographics, health status, characteristics of the health

care provider i.e. technical expertise, interest in patient-oriented care and waiting time [13].

Previous studies about the satisfaction level of patients attending the outpatient department (OPD) indicated that the former should be accessed periodically. The most important reason for conducting patient satisfaction surveys is that they provide the ability to identify and resolve potential problems before they become serious [14]. Therefore, this study focuses on various aspects of health care services provided by a public hospital's opd. The main findings could be utilized to know and improve the services at an OPD in a public hospital accordingly.

The aim of the study was to assess the patients' satisfaction towards outpatient department services received at public hospital in Saudi Arabia and to identify the specific areas of health services provision that could be targeted for improvement. It was hypothesized that:

H1: The level of satisfaction with the OPD services is medium

H2: Patients in the OPD will be less satisfied with certain issues related to the services provided to them.

H3: Demographic characteristics affect patients' satisfaction differently.

## MATERIALS AND METHODS

A cross-sectional, descriptive study design was used to achieve the study objectives. The study was conducted in OPD at a "PUBLIC HOSPITAL" in Saudi Arabia between January 2015 and February 2016. Saudi patients aged 16 years and above were eligible for inclusion in the study. Data were collected using face-to-face interviews. Patients were interviewed by the nursing staff at the OPD after seeing the physician and receiving OPD services. Every 5<sup>th</sup> patient aged 16 years and more and who was registering to be seen by doctors was invited to participate.

Patients were selected as follows: a list of patients usually visiting the different OPD clinics for the previous 6 months prior to the study was obtained. This is mainly to know how much patients were usually seen in each clinic and to select a representative sample. Also, this helped to determine the ratio of men and women that visit each clinic. For instance, it was found that most of the patients visit the orthopedic departments and the least number was from the nutrition departments. Thus, the ratio of patients was higher from the former than the later departments. The targeted sample size was 500 male and female patients.

In this study, after reviewing literature, Outpatient Department Patients' Satisfaction questionnaire (ODPSQ) was designed and consisted of

closed-ended questions covering several dimensions related to OPD services such as registration process, appointment arrangement, supporting staff, waiting time, waiting room, nursing care, physician care, equipment and facilities, testing services and overall satisfaction. Each item was scored on a 5- point Likert-like scale, ranging from 1 (very dissatisfied) to 5 (very satisfied). Also, the questionnaire consisted of general demographic characteristics about the patients including age, gender, marital status, occupation, and level of education. An open ended question was added so that patients could add their comments and suggestions on how to improve services in OPD.

The necessary approval for carrying out this study was requested from the PUBLIC HOSPITAL's Authority and ethical codes of conduct were strictly adhered to at all stages of the study. All patients provided their verbal consent before the start of the study.

Cronbach's alpha was used to test the internal consistency of the scales. Cronbach's alpha values for the subscales of ODPSQ had values ranging between 0.87 and 0.99. The Statistical Package for the Social Sciences (SPSS) version 20 (IBM, Armonk, NY) was used to analyse the data. Descriptive statistics was used and data was presented as numbers and percentages. Mean and standard deviations were used to determine the level of satisfaction which was classified as at average, above average and below average. Student t-test was used to define the patients' satisfaction according to differences in variables such as gender, social class, education level and marital status. Spearman rank correlation coefficients were used to explain the significance of relationship between patients' satisfaction with outpatient department services received at PUBLIC HOSPITAL and one-way ANOVA was also used. The level of significance was set at P value < 5%.

## RESULTS

In total, 500 patients were approached and kindly requested to take part in the study. Patients (n = 64) either refused to take part in the study or their information was not included due to incomplete data. Overall patients included in the study were 436. Thus the response rate was 87.2%.

Large number of women were included according to their appearance ratio in the clinics. Most of the patients aged between 15-30 years and were mostly married and had secondary schooling education (Table 1).

Most of the patients included were from the Orthopedic (22%), Neurosurgery (14%) and Medical (12%) departments (data not shown in Table). Nearly 60% of the patients were first time visitors.

**Table-1: Socio-Demographic characteristics of patients. Number and % were shown**

Descriptions Variables	Males		Females		Total	
	N	%	N	%	N	%
Sex	164				37.6	
			272		62.4	
Age (years)						
15-30	62	37.8	95	34.9	157	36
31-45	50	30.5	75	27.6	125	38.7
46-60	43	26.2	88	32.4	131	30
> 60	9	5.5	14	5.1	23	5.3
Social status						
Single	60	36.6	118	43.4	178	40.8
Married	86	52.4	123	45.2	209	47.9
Divorced	18	11	31	11.4	49	11.2
Education Level						
Secondary schooling and below	71	43.3	142	52.2	213	48.8
Undergraduate diploma	56	34.1	83	30.5	139	31.9
University degree	37	22.6	47	17.3	84	19.3
First time appointment						
	95	58.0	156	57.4	251	57.7

Nearly half of the patients included were satisfied with the services provided to them at the outpatient department (Table 2). The mean of satisfaction score was medium and ranged from 2.41 for the privacy of the registration process to 2.94 for spaciousness of the waiting area.

The least satisfaction was related to the waiting area in terms of its cleanliness and comfort. A large

number of patients were satisfied with the nursing staff. The overall satisfaction with the reception and services provided was 50.4% whereas the satisfaction from the waiting area and its characteristics such the ventilation system was only 44.6%. The mean length of time waiting to be examined by the physician was more than two hours and thus very few patients were satisfied with this long waiting times (Table 2).

**Table-2: The percentages of Patients satisfaction with outpatient department services received at public hospital in Saudi Arabia. Numbers, percentages and Mean±sd are shown**

Satisfaction with outpatient department services Sub-dimensions	Number of satisfied patients (%)	Mean±sem
Availability and adequacy of receptionists	223 (51.1)	2.51±1.4
Attitude and conduct of the receptionist	224 (51.4)	2.51±1.3
The registration process is simple and quick	220 (50.5)	2.48±1.3
Privacy of the registration process	228 (52.3)	2.41±1.2
Ease and promptness of the appointment scheduling	209 (48.0)	2.57±1.3
In an emergency, it is easy to get a quick appointment	210 (48.2)	2.72±1.5
Overall satisfaction with the attitude of the clerical staff	225 (51.6)	2.58±1.3
Waiting area is spacious	181 (41.5)	2.94±1.5
Cleanliness of the waiting area	209 (48.0)	2.69±1.4
Level of safety of the waiting area	203 (46.6)	2.66±1.4
Comfort of waiting area	184 (42.2)	2.90±1.4
The physical separation of male and female area is appropriate	193 (44.3)	2.86±1.5
Availability of enough chairs in the waiting area	200 (46.0)	2.71±1.4
Overall satisfaction with the ventilation system	190 (43.6)	2.51±1.3
Waiting time outside the examination room	195 (44.7)	2.8±1.4
Overall satisfaction with the nursing staff	229 (52.5)	2.51±1.4
Overall satisfaction with the clinical staff respect and understanding to my culture	209 (48.0)	2.66±1.3
Overall satisfaction with the attitude of the supporting staff*	210 (48.2)	2.60±1.3
Overall satisfaction with the physicians' listening and responding to complaints	197 (45.2)	2.77±1.4
Overall satisfaction with the pharmacy services	220 (50.5)	2.77±1.3
Satisfaction with the health education materials which allow patients to understand their medical condition	220 (50.5)	2.75±1.4
Length of time waiting to be examined by physician	184 (42.2)	2.8±1.4 minutes

\*Includes cleaners, security staff

Age significantly affected the level of patients' satisfaction (Table 3). That was specifically true for the space of the waiting area as older people were more dissatisfied than younger ones. This was followed by the

physical separation of the clinics into male and female areas. Older people and due to the general community in Saudi Arabia are more preserved and would prefer better separation of areas.

**Table-3: Patients satisfaction with outpatient department services received at PUBLIC HOSPITAL in Saudi Arabia according to age. Mean±sd and P-values are shown.**

Satisfaction Sub-dimensions	Mean±sd	P value <sup>#</sup>
The registration process is simple and not complicated	2.50±1.3	0.0001
Attitude and conduct of person booking the appointment	2.50±1.3	0.0001
Ease and promptness of appointment scheduling for the outpatient visit	2.57±1.3	0.0001
The physical separation of the clinic into male and female areas is done appropriately	2.87±1.5	0.001
Space of the waiting area/room	2.94±1.5	0.001
Availability of adequate waiting chairs in the waiting area/ room.	2.70±1.4	0.002
Overall satisfaction with the attitude of the nursing staff	2.52±1.4	0.0001
Overall satisfaction with the attitude of the clerical staff	2.58±1.3	0.0001
Overall satisfaction with the clinic staff respect for the values and traditions of my country	2.67±1.3	0.001
Overall satisfaction with the clinic Medical authorities' listening and responding to my complaints	2.78±1.4	0.001
Waiting time to be examined by the physician	2.8±1.4	0.001

<sup>#</sup>One way ANOVA was used

According to gender, using one way ANOVA, there were gender differences regarding the privacy of the registration process as well as the conduct of the persons booking the appointments (p = 0.02). The satisfaction with the health education materials was

significantly different between gender (p = 0.04). Females were less satisfied. Furthermore, participants' education level correlated positively with their satisfaction (Table 4).

**Table-4: Correlation between Patients satisfaction with outpatient department services received at PUBLIC HOSPITAL in Saudi Arabia and educational level. Spearman rank correlation coefficients are shown<sup>#</sup>**

Satisfaction Sub-dimensions	Correlation coefficients	P value
Overall satisfaction with the physicians' listening and responding to complaints	0.12	0.02
Ease and promptness of appointment	0.15	0.003
The physical separation into male and female are	0.13	0.01
Cleanliness of the waiting area	0.11	0.03
Attractiveness and size of the waiting area	0.12	0.02
Comfort of the waiting area	0.10	0.03
The presence of adequate chairs in the waiting area	0.10	0.02

<sup>#</sup>Only significant correlations were shown.

## DISCUSSION

Patient satisfaction is an important factor in evaluating the quality of the patients' care in the outpatient department. Thus enhancing patient facilities would improve the overall patients' perceptions [15,16]. Patients' participation in their care has a special place with regard to patients' satisfaction. In the current study, the mean score of satisfaction ranged from 2.41-2.94. In a previous study conducted in a primary health care in Saudi Arabia, the mean score was the mean satisfaction score was found to be higher between 2.85 and 3.02. From a Turkish perspective, in a study conducted in Ankara and Konya at a health centre, the mean scores of satisfaction ranged between 2.93 and 3.51 [17]. This might probably be due to the small sector where the studies were conducted but in our

study, it was an OPD at a hospital with a larger number of patients served.

Furthermore, our study showed that patients' satisfaction with the outpatient department varied according to the parameters included ranging from as little as 41.5% for the capacity and spaciousness of the waiting area to 52.5% for the satisfaction with the nursing staff. This satisfaction rate is considered similar compared to the findings by Chetwynd [18] where the overall satisfaction of patients was reported to be 49% and by Ibrahim *et al* [19] was even lower (10%). However, the satisfaction rate reported in the current study was lower compared with the study conducted by Kumari and co-workers [20]. In their study, the overall satisfaction was 73%. In a study conducted at

Magdeburg, Germany, only 3.6% of patients were dissatisfied [21]. Moreover, in a tertiary care hospital in India, 90-95% of patients were satisfied with the service offered in the hospital.

Patients (44.6%) replied that they were satisfied with the cleanliness, spaciousness and comfort of the waiting areas. This is probably due to the fact that the cleaning staff only did the cleaning during the morning hours before the beginning of the clinics and at the end of the day after all the clinics had finished seeing patients. Also, the number of cleaning staff is very few and there is no one supervising their work. These findings did not agree with the study by Javed [22], where 90.5% patients were satisfied with the cleanliness of the hospital and in Jawahar's research [23], where 61% were satisfied.

Furthermore, patients (50.4%) were satisfied with the registration staff in the current study. This might be due to the fact that some of the staff had secondary school education and were not well trained to be in such a position and deal with front desks. The current results were in contrast to other studies conducted. For instance, in a cross-sectional study of patient's satisfaction towards services received at tertiary care hospital on outpatient department basis reported that 94% patients were satisfied with friendliness and helpfulness of registration staff [24]. The findings of a study carried out in an internal medicine outpatient department of Khmer-Soviet Friendship Autonomous hospital in Cambodia, revealed that 93.5% (187) of the respondents were satisfied with the services provided in the hospital. 98.5% of the patients were satisfied with hospital facilities. The assessment of the services offered by physicians, nurses, and pharmacists, also showed that 81.5-96% of patients were highly satisfied with the service [25].

In the current study, 44.7% were satisfied by the waiting time needed to be seen by the physician. The waiting time for most of the patients was within one hour in various departments, except in some occasions where it is prolonged. Similar results were reported by others [20]. Patients (96.5%) were satisfied with the time spent by the doctors in consultations. The assessment of the services provided by nurses, security, receptionist and attendees also showed that 90-95% of patients were satisfied with those services [23].

With regard to the explanations given by doctors about patients' illness/prognosis/time required for treatment, the formers' care and attitudes only 55% patients were satisfied. This is a vital point and having only half of the participants satisfied should be a concern to the hospital management. Patients are already in pain or sufferings. Naturally they want to visit doctor as early as possible to get relieved from the

sufferings. This is probably due to the large number of patients who are seen by the physician in a very short time; from 9-12 a.m. and/or 1-4 p.m. In a study conducted in India, only 3% of patients were unsatisfied with the doctors' care [23].

Moreover, this current study revealed that only half of patients were satisfied with information about health problem given by doctors and nurses. A study conducted in Manglore, India 97% of patients found doctors efficient and same percentage were satisfied with explanation of disease [26]. High satisfaction rates were reported previously [23].

Half of the patients were unsatisfied with the pharmacy's services and reported a delay in receiving their drugs with having to stand in long queues. This finding was consistent with the study conducted by Prasanna and co-workers (2009) whereas other researchers reported that only 20% patient were satisfied with the pharmacy's services [27].

The current study further revealed that there were no statistically significant differences regarding gender and social class and their association with patients' satisfaction. Similar findings were reported elsewhere [16]. Our study showed that there was a positive relationship between education level and patients' satisfaction with services related to the waiting area. The reason may be due to high expectation by those who are more educated than those who are not. Other studies also suggested that level of education and age are major influences on patient satisfaction [14]. The expectation of patients with relatively higher educational attainment was high and they were more critical and as a result experienced less satisfaction [28]. A study conducted in Ethiopia also showed that satisfaction was significantly associated with age [29]. Bekele and colleagues reported that the respondents' age, marital status, and type of health facility were statistically significant in determining respondents' mean score satisfaction to health care providers' characteristics [30].

## CONCLUSION AND RECOMMENDATION

The current study aimed at assessing the patients' satisfaction towards outpatient department services received at PUBLIC HOSPITAL in Saudi Arabia. This study identified some of areas which can be improved in order to improve the patient care and quality of care. Hospital authority should take action to improve cleanliness in the hospital. Consulting doctor was one of the factors affecting patient satisfaction. The OPD services are an important part of health care services in hospital, they need to be improved with special emphasis on improving physician care and attitude, pharmacy services and cleanliness of the department. Waiting time for getting the drugs was one

of the important determinant of patient satisfaction. It can be reduced by for example introducing token system at the pharmacy counter. Therefore the drug policy should be revised quarterly in the year and most prescribed drugs in OPDs should be made available in the least waiting time.

The hospital need to develop a patient feedback system which is vital for quality of services. Patient satisfaction assessment should be conducted regularly every 6 months. In the OPDs, complaint and suggestion box should be kept in a visible area, so that patients can freely put their complaints and suggestions for improvement in services provided in this hospital. However, targeting a reduction in complaints only is not a sign of improvement. What is needed is an effective evaluation of the accessibility of complaints procedures and the introduction of incentives, such as feedback and proof of real action, to encourage and support complaints.

Furthermore, periodic assessment of health services and further study, especially from the user's satisfaction perspective is recommended as a fundamental initiative in the improvement of the performance of health facilities. Hence changes will have to be made in this area to fulfill the needs of the patients.

#### The study came to the following recommendations:

- Findings should be shared with the General Director of the hospital and the head of the outpatient department.
- Introducing simpler methods of registration.
- Amenities like clean waiting areas made available.
- Adhering to strict time schedules by doctors and other staff.
- Efforts made to reduce patient overload so that doctors and other staff can give more attention and time to the patients. The same can be achieved by strengthening the infrastructure and human resources at the health facilities.
- The overall quality of care can be improved more by raising the level of performance of all providers and continuously making small changes to improve their individual processes. This approach can be very powerful if applied over a period of time. Also, there is an imperative need to make good communication with the patients about their disease and the treatment.

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