

Awareness of Hospital Functioning in General Public Seeking Treatment in Public Sector Hospitals: A Cross Sectional Study

AYESHA ZAHEER¹, ANSA LATIF², FATIMA TU ZAHRA³, MUHAMMAD AHMED⁴, MUHAMMAD NAEED⁵, NAMRA CHAUDHARY⁶

ABSTRACT

Aim: To assess the level of awareness of general public about health care facilities available and the problems faced by them in its utilization.

Study design: questionnaire based prospective study.

Place and time of study: Department of Surgery and Department of Medical Education, Khawaja Muhammad Safdar Medical College, Sialkot. From April 2018 to August 2018.

Methods: almost 500 patients and their attendants visiting opd and indoor of public sector hospitals were included in the study. Questionnaire designed for the study were distributed and were asked to fill it completely. The patients who were illiterate and were unable to fill the questionnaire were given assistance for its completion. Incompletely filled questionnaire were completed by interviewing the subjects. Incompletely filled questionnaires were excluded. The hospital employees were not included.

Results: Total number of patients in our study were 75 and number of attendants included in study were 425, out of all these, 22 people were having their 1st visit & 378 people were regular visitors, 43 doctors from administration, 45 treating physicians and 109 individuals from technical staff of the hospital were also included in our study. Queries and reservations made were: Sign markings were known by 36% patients of group I & 47% of Group II, timings of OPD were known to 54% of Group I and 64% of Group II, Availability of staff in emergency department was told by 80% of Group I and Group II people, 53% of Group I & 84% of Group II people said that lab facilities were available, 81% of Group I and 72% of Group II people said that radiology services were present.

Conclusion: the education level of the patients and attendants is one hurdle in knowing the facilities available with the hospitals and thence its utilization.

Key words: Health education, health care professionals, awareness, facilities, sign markings

INTRODUCTION

Awareness of functioning systems of a hospital is an essential and very important factor in establishment of good working environment in the hospitals, and in fulfilling the treatment requirements of the patients¹.

As unawareness and very less knowledge of patients as well as their attendants about hospital doctors, departments, available facilities, lab and pharmacy puts a huge burden on nerves of hospital administration as well as the working physicians and staff².

All these problems are more prevalent in the patients visiting the public sector hospitals, as they mostly belong to a middle to low socioeconomic status, where level of literacy and information is medium to low. Creating awareness in these people sometimes becomes a very difficult task³.

Knowledge about all the available systems, facilities and their proper and timely utilization can be spread in many different ways⁴. Social media and internet are very useful tools in this aspect. But, again, the people especially of old age who do not use these things and sites have to be taught in some other way⁵.

A very good mean of communicating with these patients and their relatives is by creating some assisting signs and symbols, placed at different areas of a hospital. Moreover, one or two guiding rooms or counters should always be there for help^{6,7}.

Another very much needed aspect to be taught to the coming individuals is that patients and their attendants must realize about the very tough routine and schedules of duty hours of senior and junior doctors. Sometimes the attendants of the patients do not take this point into consideration⁸.

Problems can also arise when patients are sometimes suffering from a serious and a long running illness and they need a long hospital stay⁹. Also, when people are unaware of the policies of working system and departments of a hospital, they ask everything from every person present as a doctor or a staff, which puts an additional burden on them¹⁰.

PATIENTS AND METHODS

Almost 500 patients and their attendants visiting opd and indoor of public sector hospitals were included in the study. Questionnaire designed for the study were distributed and were asked to fill it completely. The patients who were illiterate and were unable to fill the questionnaire were given assistance for its completion. Incompletely filled questionnaire were completed by interviewing the subjects. Incompletely filled questionnaires were excluded. Two groups were made Group I- First time visitors and Group II- Regular visitors. The hospital employees inclusive of administrators, treating physicians and technical staff were also included to get answers of the queries and reservations raised by the patients and attendants. The findings recorded and analysed and conclusion made.

RESULTS

General demographic data is shown in table I. Queries and reservations raised by the patients and attendants. Opinion and explanations of the staff is as under

¹Assistant Professor, Department of Physiology, Khawaja Muhammad Safdar Medical College, Sialkot.

²Associate Professor Surgery, Kh. Safdar Medical College, Sialkot.

³HO Surgery, Allama Iqbal Memorial Teaching Hospital, Sialkot.

⁴Associate Professor of Surgery, Hi Tech Medical College, Taxilla

⁵Associate Professor, Dermatology, Islam Medical College, Sialkot.

⁶HO, Surgery, Kh M Safdar Medical College, Sialkot.

Correspondence to Dr Ansar Latif, Email: ansarlatif2013@gmail.com Cell. +923217103994, e mail :

Table I: General demographic data

Number of patients in the study	75
Number of attendants in the study	425
First visitors	122
Regular visitors	378
Doctors in Administration	43
Treating physicians	45
Technical staff of the hospital	109

Table II- Queries and reservations

	Group I-	Group II-
Sign markings	45(36%)	178(47%)
Timings of OPD	67(54%)	245(64%)
Availability of staff in Emergency department	98(80%)	306(80%)
Laboratory facilities	65(53%)	320(84%)
Radiology services	100(81%)	275(72%)
Surgical facilities	93(76%)	193(51%)
Medicine dispensing	34(27%)	327(86%)
Documentation	3(2%)	78(20%)
Follow up facilities	10(8%)	202(53%)
Regularity of the staff	37(30%)	327(86%)
Attitude of the staff	67(54%)	45(11%)
Cost issues/ proper receipts	28(22%)	96(25%)

Table III- opinions and explanations of Staff

	Administrators	Treating Physicians	Technical Staff
Budget concerns	42(97%)	15(33%)	100(91%)
Literacy of general public	23(53%)	25(55%)	43(39%)
Thankless attitude of the public	16(37%)	14(31%)	37(33%)
Workload per head/ manpower	25(58%)	40(88%)	19(17%)
Lack of training	10(23%)	14(31%)	1(0.9%)
Unsatisfaction with the monetary returns/ salaries	10(23%)	16(35%)	0

DISCUSSION

Our study showed that budget concerns were present in 97% of administrators, 33% of treating physicians & 91% of technical staff, while they were 78% in the study by Karnieli-Miller et al¹¹.

We observed literacy of general public was present according to 53% of administrators, 55% of treating physicians and 39% of technical staff, while it was 60% according to observation of Borden et al¹².

Our collected data showed 37% of administrators, 31% of treating physicians & 33% of technical staff noticed thankless attitude of the public, while it was present in 35% of the public in the data given by Tim et al¹³.

Workload per head was a problem according to 58% of administrators, 88% of treating physicians and 17% of technical staff, while it was a problem by 50% of people included in the study by Mahboob et al¹⁴. 23% of administrators and 35% of treating physicians were having Unsatisfaction with the salaries, while it was present in 27% of people according to the research done by Birden et al¹⁵.

CONCLUSION

The education level of the patients and attendants is one hurdle in knowing the facilities available with the hospitals and thence its utilization. The regular visitors have less reservations over the facilities available and relatively better level making use of the different setting of the hospital. However, the administration and treating physicians need to do a lot in educating and guiding the patients for better care and acceptance of the system. Time factor and work load are the main culprits that undermine the efficiency of the healthcare professionals.

Conflict of interests: Nil

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