

# Patients' Satisfaction Towards Doctor's Behaviour and Environment of Outpatient Department of Shaikh Zayed Hospital Lahore

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## ABSTRACT

**Background:** Patients' satisfaction is defined as a subjective evaluation of the service received against the individual's expectations. Patients' satisfaction should be measured frequently as it is the important indicator of quality in health care and also because there is still room for improvement in quality of health care.

**Objective:** The aim of this research is to determine patients' satisfaction in reference to doctor's behavior and environment of the out-patient department at the tertiary care teaching hospital.

**Materials and Methods:** Study was carried out in OPD of Sheikh Zayed Hospital using a pretested questionnaire with 320 samples from January 2022 to March 2022, selected by systemic random sampling technique. The data was analyzed using SPSS version 21.00. Data was presented using figure and tables and described using frequencies and percentages.

**Result:** Patients expressing satisfaction were 68.4% while remaining 31.5% were dissatisfied with their OPD experience. Overall behavior of doctor towards patients was satisfying while the environmental structure of OPD showed some flaws. Mean consultation time given by doctor was found to be 5.78±4.28 minutes. And 53.1% of the patients waited for more than 45 minutes.

**Conclusion:** The findings of this survey must be used to bring improvement. Loopholes found in environmental structure should be addressed timely. Satisfaction level can further be improved and brought to the level of developed countries.

## INTRODUCTION

Patients' satisfaction is a relative phenomenon which came into light in the 1960s but active research was initiated on the topic in late 1970s and 1980s<sup>(1)</sup>. It is a key measure for assessing quality of health care. It is defined as a subjective evaluation of the service received against the individual's expectations. Conventionally researchers have ignored the patient's response and focused their investigations on technical and physiological aspects of healthcare outcome. However, lately researchers are trying to find out a way to provide clinically effective and evidence-based care which is also acceptable and favorable to the patient<sup>(2)</sup>.

Patients' opinion about service provision in hospitals is an important source of information for monitoring and improvement<sup>(3)</sup>. Donabedian, for example, has stated that "achieving and producing health and satisfaction, as defined for its individual members by a particular society and subculture, is the ultimate validator of quality of care" According to Donabedian model, information about the quality of care can be drawn from three categories: 'structure, processes, and outcomes'. The structure in Donabedian model refers to attributes of health care providers' their resources and the environment they work in. The processes refer to assessment of patients and outcomes point towards change in patients' health. This model continues to be the dominant paradigm for assessing the quality of health care<sup>(4)</sup>.

Patient satisfaction is measured across many different aspects of health care, such as how easily patients can get in touch with and use services, how knowledgeable and friendly service providers are, how comfortable and relaxing the setting is, how much money they save patients, and how effective the care is (4). The thoroughness with which their doctors examine and talk to them can greatly impact the patient's opinion of the treatment they received. (3). Privacy and confidentiality while interacting with the patient help in developing a trustful, honest and friendly doctor-patient relationship, thus improving patient care and their satisfaction level<sup>(5)</sup>.

Although patients are not best able to analyze a technical aspect of medical care but they offer a unique perspective for evaluating the nontechnical aspects such as clarity of explanations given by doctor, helpfulness of information they receive, barriers to obtaining care or the physician's interpersonal behavior<sup>(6)</sup>.

Patient satisfaction can also be influenced by relatively minor issues, from the length of waiting<sup>(7)</sup> in the out-patient department, or ease of getting a slip, status of the queue at the slip counter, attitude of the receptionist, to the out-patient signs such as adequate sitting arrangement, availability of clean drinking water or toilets.

International health agencies have been laying great stress over the concept of patients' satisfaction in last few decades. Wide variety of work has been done in developed countries on this topic and it is now regarded as a component of quality management reports in most health systems of developed countries<sup>(8)</sup>. Recently developing countries, influenced highly by findings of health care surveys in developed countries, have also started following this trend of assessing health care systems. World bank is also instructing developing countries to use their limited resources tactfully to provide patient-friendly environment<sup>(9)</sup>. In Pakistan, there still exists service quality gap in tertiary care hospital based on patients' perspective<sup>(10)</sup>. Most of the health care assessment studies are usually focused on departments like surgery, emergency and medicine<sup>(11)</sup>.

Thus, a study is required to evaluate the patient satisfaction in the out-patient department. There are numerous reasons to study the concept of patient satisfaction. A satisfied patient is more likely to be compliant to his medical regimes and eventually recovers fast. Moreover, patient satisfaction studies help health care providers to find out their flaws. Suggestions given by patients help hospital management to find areas of lacking and thereby introducing new ways to improve the system<sup>(12)</sup>. Policymakers can better meet patients' needs if they have a firmer grasp of the factors that contribute to their satisfaction<sup>(9)</sup>. Thus, there is an urgent need for improvement in health care services to enhance patients' satisfaction. For this purpose, a study was conducted in the out-patient department of tertiary care hospital in Lahore with the objective to assess patients' satisfaction towards the doctor's behavior and the environment. The result of this study will be useful for the hospital administration and manager of health system at different levels to institute meaningful interventions thus improving the patients' satisfaction and health care outcome.

## METHODOLOGY

This study was carried out at the out-patient department of Shaikh Zayed Hospital, a tertiary care center affiliated with Shaikh Khalifa

bin Zayed Al-Nahyan Medical College in a big metropolitan city, to evaluate patients' satisfaction. This is a cross-sectional study, conducted over a period of two months and the study population consisted of patients visiting the OPD during 8am to 2pm from January 2022 to March 2022.

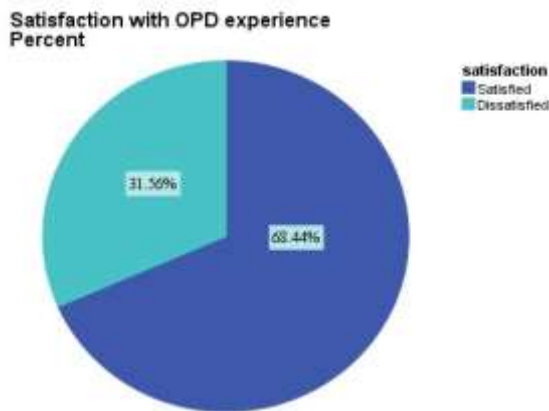
A pilot study was carried out and sample size was estimated to be 320 with a confidence interval of 95%. Systemic random sampling technique was used in which every tenth patient attending the OPD was selected. Patients visiting out-patient department of Shaikh Zayed Hospital for the first time were included in the study while patients working in health care facility, follow up patients and frequent visitors were excluded from the study.

All the patients were interviewed on a preformed, pretested questionnaire after they had consulted the doctor. Informed consent was taken and respondents were assured confidentiality and anonymity. And the prescribing doctor was kept unaware of the procedure. The questionnaire was divided into two parts, one part contained the sociodemographic information and the other part contained patients' satisfaction questions based on doctor's behavior and environment of OPD. The questionnaire was administered by the interviewer and answers were recorded according to the patient's response. Statistical analysis of data was carried out using SPSS software version 21 and conclusions were drawn from the analysis.

**RESULTS**

A total of 320 patients coming to the Shaikh Zayed OPD were sampled for the study. This sample consisted of 38.4% males and 61.6% females. The mean age of the patients was 35.37 ± 13.91. The age category of 21-40 years comprised of 52.5% of the sample population. While only 5.3% patients lied in the age group 61-80 years. Majority of the population had some educational background while only 16.3% were illiterate [Table 1].

On enquiring about the environment of OPD, majority of the patients were highly satisfied with respect to presence of clearly visible sign (90.3%) and the slip getting procedure (92.2%). While, satisfaction regarding the sitting arrangement and the provided fans was found to be moderate i.e.63.4% and 68.12% respectively. On the other hand, satisfaction was found to be quite low with respect to drinking water supply (29.4%) and the presence of toilets (1.3%) [Table 2]. Regarding the time spent by the respondents before consultation 75% (n=240) patients had to wait more than 30 minutes. Out of these 240 patients 71.25% (171) waited more than 45 minutes. When asked about the consultation time given by attending doctor, 67.5% (216) were given ≤ 5 minutes. Mean consultation times was 5.78 ± 4.28 minutes.



On questioning about doctor's behavior, 95% said that doctor listened to them with interest, adequate information about the disease was given to 65.9% respondents, 81.9% were

explained thoroughly about the treatment options, only 14.1% respondents were explained about side effects of the treatment, vast majority (93.4%) stated that doctor's prescription was quite comprehensible, and dietary advice was given to 33.8% respondents. Before the examination by doctor consent was taken from 21.6% patients and during the examination 97.5% respondents stated that proper privacy was maintained. [Table 3]

Result of this survey illustrated in the pie chart below shows that out of 320 respondents 219 expressed their satisfaction towards their overall experience in OPD while 101 negated this stance.

Table 1: Patient's demographic information

Variables	Frequency(n)	Percent (%)
Age		
≤ 20	44	13.8
21-40	168	52.5
41-60	91	28.4
61-80	17	5.3
Gender		
male	123	38.4
female	197	61.6
Literacy level		
illiterate	52	16.3
matriculation	92	28.8
intermediate	92	28.8
graduate	84	26.3
Family income		
Pkr. < 10k	19	5.9
Pkr. 10k-20k	90	28.1
Pkr. >20k	211	65.9

Table 2: Patients opinion about environment of OPD

Variables	Yes		No	
	n	%n	n	%
Clearly visible OPD sign	289	90.3	31	9.7
Satisfactory slip getting procedure	295	92.2	25	7.8
Satisfactory sitting arrangement	203	63.4	117	36.7
Enough fans provided	218	68.12	102	37.8
Satisfactory drinking water supply	94	29.4	226	70.6
Toilets provided	4	1.3	316	98.8

Table 3: Patients' opinion regarding doctors' behaviour

Variables	Yes		No	
	n	%	N	%
Doctor listened with interest	304	95	16	5
Consent taken	69	21.6	251	78.4
Privacy given	312	97.5	8	2.5
Information about disease	211	65.9	109	34.1
Treatment options explained	262	81.9	58	18.1
Side effects explained	45	14.1	275	85.9
Comprehensible prescription	299	93.4	21	6.6
Dietary advice given	108	33.8	212	66.3

**DISCUSSION**

The result of any patient satisfaction survey generates two kind of responses either of satisfaction or dissatisfaction. Satisfaction is achieved only when health care systems meet or exceed patient expectations. This study was conducted to determine whether outpatient department services of Shaikh Zayed Hospital fulfill consumers expectations. The result of this research showed satisfaction among 68.44% of the patients visiting the OPD while 31.56% showed dissatisfaction. A similar study was conducted at PIMS, Islamabad where 56% of patients were

satisfied with the services provided in the outpatient department<sup>(13)</sup>. International study conducted by University of North Carolina, Charlotte revealed patient satisfaction with primary care to be 78%(14).

Variables affecting the patient's satisfaction are environment, doctor-patient interaction, waiting time before consultation and length of consultation. Patients were asked about different aspects of the environment of the outpatient department and 63.4% were

satisfied with sitting arrangement in the waiting area, 68.12% were satisfied with the ventilation and the presence of enough fans, 29.4% were satisfied with the provision of clean drinking water. Provision of clean drinking water in waiting environment, which was found to be lacking, is highly important to prevent chances of dehydration in hot weather, and to provide relief to the waiting patients. Another important factor of the environment that came into highlight during this survey was the absence of toilets in the outpatient department which greatly affected the satisfaction of the patients. In a similar research conducted at a tertiary care hospital of Lahore, the satisfaction level for the adequate sitting arrangement was 63%, for enough ventilation was 90% and for drinking water supply was 69%<sup>(15)</sup>.

According to the World Health Organization, the length of time a patient must wait before receiving medical attention is one indicator of both the quality of that care and the level of satisfaction the facility's clients feel about receiving it.<sup>(16)</sup> Results of this survey showed that 53.1% patients had to wait more than 45 minutes before consultation by the doctor. This long waiting time combined with the poor waiting environment greatly affects the patients' satisfaction. In a research conducted in PIMS, Islamabad similar results were observed as 62% of the patients admitted that they experienced long waiting times<sup>(13)</sup>. Another survey conducted at University of Benin Teaching Hospital, Nigeria revealed that 66.1% patients had to wait more than 120 minutes before seeing a medical doctor<sup>(17)</sup>. In a study carried out by Erasmus University, Netherlands in Dutch hospital polyclinics only 23% patients had to wait more than 30 minutes<sup>(18)</sup>. This shows that the trend of long waiting periods is not seen in the developed countries while in developing countries it is still a major concern as described above.

The mean consultation time in this research was found to be 5.7 minutes. Consultation time length was found to greatly affect satisfaction level among patients which can be proved by the fact that 28 (8.75%) patients were given more than 10 minutes while consultation and all of them (100%) expressed satisfaction with their overall OPD experience. Globally average consultation time varies from few minutes in Bangladesh to 22.5 minutes in Sweden. In developed countries like UK, USA and Australia there is a trend of long consultation times which last more than 20 minutes. While developing countries such as China and Pakistan have short consultation times

i.e. 2 minutes and 1.79 minutes respectively<sup>(19)</sup>. The reason of the short consultation time can be explained by the fact there is significant patient load at the OPDs of the public hospital which makes it impossible for the doctors to give more time to every individual patient.

Increased satisfaction of the patient with doctor-patient interaction plays a key role in compliance with follow up visits and treatment. In this survey, 95% respondents stated that doctors listened to them attentively and with interest and proper privacy was administered during examination to 97.5% respondents. 81.9% patients were explained about the treatments options while only

14.1% were explained about the side effects of the treatment. 83.7% of the patients attending the SKZ OPD are literate and they demand that they are explained about their disease, the treatment options and the side effects of the treatment although which was found to be quite low. Similar study conducted in a tertiary care hospital of Lahore revealed that 88% patients were of the view that doctor listened them with interest and 66% patients were told about the treatment options and 52% were explained the side effects of treatment<sup>(13)</sup>. Results of a study conducted in Taif University, Saudi Arabia showed that 88% patients claimed about being listened with interest by the doctor, 87% were explained about the treatment options and 68% were explained about the side effects<sup>(20)</sup>. The trend of proper informed consent was found to be lacking in outpatient department of SKZ as only 21.6% respondents stated that consent was taken from them. In another research conducted in tertiary care hospitals of Lahore similar results were seen as no

informed consent was taken from 90% of the patients<sup>(5)</sup>.

The study was limited to only one tertiary care hospital hence cannot be generalized. Only some aspects of the outpatient department such as environment and doctors' behavior were surveyed while the facilities provided were not included. This study is only focused on the patients' perspective while the doctors' perspective was not incorporated.

## CONCLUSION

This study highlighted some areas which need improvement in order to improve patient care and satisfaction. Low satisfaction was observed due to absence of toilets, inadequate and uncomfortable sitting arrangement, lack of clean drinking water in the outpatient department. The providers need to take steps to resolve these issues. Although the patients were relatively satisfied by doctors' behavior but there is a need to focus on explaining the disease and side effects to the patients. The providers also ought to work out some strategy to improve the overall satisfaction of patient. The finding of this survey is quite helpful if they are transferred into actions for improving the quality of health care. It is recommended that such researches should also be conducted in private health facilities along with other secondary and primary health facilities.

## REFERENCES

1. Ekram AS, Rahman MF. The Concept 'Patient Satisfaction' as it Relates to Contemporary Health Care. TAJ: Journal of Teachers Association. 2006;19(1).
2. Jenkinson C, Coulter A, Bruster S, Richards N, Chandola T. Patients' experiences and satisfaction with health care: results of a questionnaire study of specific aspects of care. *Qual Saf Health Care*. 2002;11(4):335-9.
3. Nabbuye-Sekandi J, Makumbi FE, Kasangaki A, Kizza IB, Tugumisirize J, Nshimye E, et al. Patient satisfaction with services in outpatient clinics at Mulago hospital, Uganda. *International Journal for Quality in Health Care*. 2011;23(5):516-23.
4. Cleary PD, McNeil BJ. Patient satisfaction as an indicator of quality care. *Inquiry*. 1988;25-36.
5. Humayun A, Fatima N, Naqqash S, Hussain S, Rasheed A, Imtiaz H, et al. Patients' perception and actual practice of informed consent, privacy and confidentiality in general medical outpatient departments of two tertiary care hospitals of Lahore. *BMC medical ethics*. 2008;9(1):14.
6. Schoenfelder T, Klewer J, Kugler J. Determinants of patient satisfaction: a study among 39 hospitals in an in-patient setting in Germany. *International journal for quality in health care*. 2011;23(5):503-9.
7. Qidwai W, Dhanani R, Khan F. Implications for the practice of a patient expectation and satisfaction survey, at a teaching hospital in Karachi, Pakistan. *Journal of Pakistan Medical Association*. 2003;53:122.
8. Khan NA, Aslam SK, Rehman AU, Quresh MS, Inam S, Samo KA, et al. Satisfaction level and its predictors among out patients at public sector hospital in Karachi. *Journal of Dow University of Health Sciences*. 2014;8(3).
9. Aldana JM, Piechulek H, Al-Sabir A. Client satisfaction and quality of health care in rural Bangladesh. *Bulletin of the World Health Organization*. 2001;79(6):512-7.
10. Fatima I, Humayun A, Anwar MI, Iftikhar A, Aslam M, Shafiq M. How do patients perceive and expect quality of surgery, diagnostics, and emergency services in tertiary care hospitals? An evidence of gap analysis from Pakistan. *Oman medical journal*. 2017;32(4):297.
11. Imam SZ, Syed KS, Ali SA, Ali SU, Fatima K, Gill M, et al. Patients' satisfaction and opinions of their experiences during admission in a tertiary care hospital in Pakistan—a cross sectional study. *BMC health services research*. 2007;7(1):161.
12. Ahmad I, Nawaz A, Khan S, Khan H, Rashid MA, Khan MH. Predictors of patient satisfaction. *Gomal Journal of Medical Sciences*. 2011;9(2).
13. Javed A. Patient satisfaction towards outpatient department services in Pakistan institute of medical sciences, Islamabad. Master's thesis, Faculty of Graduate Studies, Mahidol University. 2005.
14. Harutyunyan T, Demirchyan A, Thompson ME, Petrosyan V. Patient satisfaction with primary care in Armenia: good rating of bad services? *Health Services Management Research*. 2010;23(1):12-7.
15. Mukhtar F, Anjum A, Bajwa MA, Shahzad S, Hamid S, Masood Z, et al. PATIENT SATISFACTION; OPD services in a Tertiary Care Hospital of Lahore. *Professional Medical Journal*. 2013;20(6).
16. WHO Arb. A review of determinants of Hospital Performance.
17. Enabulele O AJ, Enabulele JE. Patient Waiting and Consultation Time in the General Practice Clinic of the University of Benin Teaching Hospital, Edo State, Nigeria. 5(2): 1146. *J Family Med Community Health*. 2018.
18. Prun A, Smidts A. Effects of waiting on the satisfaction with the service: Beyond objective time measures. *International journal of research in marketing*. 1998;15(4):321-34.
19. Irving G, Neves AL, Dambha-Miller H, Oishi A, Tagashira H, Verho A, et al. International variations in primary care physician consultation time: a systematic review of 67 countries. *BMJ open*. 2017;7(10):e017902.
20. Samy W, Alswat KA, Serwah AH, Abdel-Wahab M. Patient satisfaction from medical service provided by university outpatient clinic, Taif University, Saudi Arabia. *Quality in Primary Care*. 2015;23(4):241-8.