

# THE PATIENTS' EXPERIENCES IN GYNAE/OBSTETRICAL WALK-IN SERVICES IN LADY READING HOSPITAL PESHAWAR

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## ABSTRACT

**Objective:** To assess the patients' experiences regarding the provision of outdoor health care services in Lady Reading Hospital Peshawar.

**Materials and Methods:** This cross-sectional study was conducted in Gynecology/Obstetrics OPD (outpatient department), Lady reading hospital (LRH), Peshawar from 1st December 2019 to 29th February 2020. A total of 500 patients were selected by the non-probability convenience sampling method. Results were calculated as frequencies, percentages, and Mean  $\pm$  SD used for continuous variables. A questionnaire was filled out after taking verbal consent regarding the patient's experience in OPD.

**Results:** Patients from 12-73 years were included, 92.8% were married, 7.2% were unmarried, and 77.4 % attended the OPD less than 4 times. Seventy-seven percent mentioned OPD staff cooperation, 73.8% were satisfied with over-crowd handling, 26.4% referred cases from other hospitals, and only 5.8% failed to receive medical advice on the day of visit. Eighty-six percent were satisfied with laboratory staff behavior and 24 were not happy with receiving reports on the same day. Most of the patients were satisfied with the in-time availability of the consultant's skills, and treatment. Eighty percent were guided adequately by clinical assistants and 70.2% mentioned their good behavior.

**Conclusion:** Making clinical well-being care and better administration arrangements are considered very crucial for patient satisfaction regarding the provision of better services in OPD.

**Keywords:** - Health care services, outpatient department, patient experience.

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## INTRODUCTION

The patients' feedback form regarding medical services is one of the best ways to evaluate the quality of care, detect problems and bring improvement to the existing health system. It includes patients' expectations and perceptions of the health system. Nowadays patients are more aware of health care services and demand proper health plan quality. <sup>1</sup> In general, patient satisfaction has been defined as an evaluation that reflects the perceived differences between the expectations of the patient to what is received during the process of care. <sup>2</sup>

The out-patient department (OPD) is the first place in the hospital where the clinical staff should communi-

cate with the patient. It provides the best, most efficient administrative and clinical care, which in turn is reflected by patients' impressions and satisfaction. <sup>3</sup> The patient's satisfaction is affected by multiple determinants that may be clinical like the doctor's interpersonal communication and treatment skills or administrative related including the provision of basic facilities and infrastructure. The hospitals providing standard clinical care do follow-ups and satisfy patients. In return, they will be more likely to come for visits and follow the recommendations of the clinicians whom they trust. So, the better patient experience scores could indicate that a hospital has stronger teamwork, organizational leadership, and commitment to improvement. <sup>4</sup> It is obligatory to distinguish blemishes within the regulatory and patient well-being care facilities, help the decision-makers to bring changes, and encourage the advancement in existing administration services.

The main aim of conducting this study is the assessment of patients' experiences regarding the provision of clinical and administrative services in OPD, which is very crucial for improving policies and recommending the same hospital walk-in services to other patients.

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## MATERIALS AND METHODS

This Cross-sectional study was conducted in Gynecology and Obstetrics outpatient department in Lady reading hospital Peshawar from 1<sup>st</sup> December 2019 to 29<sup>th</sup> February 2020 after taking permission from the hospital's Institutional research ethical board. For sample size calculation, the WHO calculator was used and 500 patients were selected by the non-probability convenience sampling method. After giving verbal consent, the questionnaire was filled out by the patients regarding the availability of clinical, and administrative services, including the difficulties while getting the registration slips, waiting for the duration, proper handling of overcrowding, drinking water facility, and overall discipline maintenance. Data were also collected regarding the provision of laboratory services, staff behavior, experience, and satisfaction with consultants, junior doctors, and other allied clinical staff. Patients who did not have any formal education were facilitated by their attendant or trained personnel from the healthcare system.

Data were analyzed using (SPSS) version 20.0 and presented in figures and tables. It was described using frequencies and percentages. Mean  $\pm$  SD was used for continuous variables.

## RESULTS

Patients of different age groups ranging from 12 to 73 years with a mean age group of 30.4 years were selected. Among them, 92% were married 65.2% were un-educated, 23.2% had primary education, and 11.6% had secondary and above education. Most of them belong to poor socioeconomic status, 51.8% were very poor and they earned about less than 20,000 rupees per month. Three-fourth of patients attended the OPD less than 4 times, while 4.4% had more than 7 visits in total 3 months duration.

Regarding the OPD facilities, more than 50% of patients were satisfied, and only 5.8% failed to receive medical advice on the same day of the visit. The majority of patients were satisfied with laboratory services. Only 24.8% had not received investigation results on the same day. In our study majority of patients had a good experience with their receptive behavior, examination skills, treatment, and documentation. Regarding patients' experience with clinical assistants, 70.2% mentioned the good behavior of staff members.

## DISCUSSION

The provision of the best walk-in services in hospitals is of utmost importance to present the quality performance of hospital clinical and administrative staff. These services and their development are usually ignored by administrative authorities of hospitals in many countries. Patients expect a respectable place, availability of quality

clinical services, provision of free-of-cost medicines, proper guidance, and responsive and acceptable behavior of doctors and staff. The provision of proper well managed health care services is reflected by the patient's experiences and satisfaction regarding her disease diagnosis and treatment.<sup>5</sup>

The results of our study showed that the majority of patients were satisfied with the cooperative behavior of staff, discipline maintenance, and proper rules for crowd control. Some of the patients had issues regarding receiv-

**Table 1: Data regarding services available in OPD**

OPD services	Sample size n=500	Percentages %
Displayed direction boards		
Yes	201	40.2
No	299	59.8
Identified reception area-		
Yes	406	81.2
No	94	18.8
Cooperative reception staff		
Yes	385	77
No	115	23
Difficulty in getting OPD slips		
Yes	281	56.2
No	219	43.8
Time spent in the queue to get the OPD slip		
1/2 hour to 1 hour	308	61.6
More than 1 hour	192	38.4
Discipline maintenance		
Yes	386	77.2
No	114	22.8
Proper handling of the crowd by administration staff		
Yes	369	73.8
No	131	26.2
Sufficient waiting area		
Yes	299	59.8
No	201	40.2
Drinking water facility		
Yes	233	46.7
No	266	53.3
Provision of written information regarding disease		
Yes	77	15.4
No	423	84.6
Referred from other hospitals		
Yes	132	26.4
No	368	73.6
Failed to seek medical advice		
Yes	29	5.8
No	471	94.2

**Table 2: Data regarding laboratory services**

Laboratory services	(Sample size) (n) = 500	Percentage%
Sufficient staff		
Yes	423	85.2
No	77	24.8
The behavior of laboratory staff		
Yes	433	86.6
No	67	13.4
Time spent while receiving reports		
1-2 hours	292	58.4
3-4 hours	173	34.6
Received next day	35	7.0
Failed to receive the investigation reports on the same day		
Yes	124	24.8
No	376	75.2

**Table 3: Data regarding patients' experiences with consultants and junior doctors**

Data about patient experience	(Sample size) (n) = 500	Percentage%
Satisfaction with the availability of doctors on time		
Yes	432	86.4
No	68	13.6
How long do you wait to be seen by a doctor?		
Right away	246	49.2
Wait for 1-2 hours	167	33.4
Wait for 3-4 hours	56	11.2
Wait for more than 4 hours	31	6.2
Receptive behavior		
Yes	446	88.8
No	54	10.8
Satisfied with examination skills and keeping privacy		
Yes	445	89.0
No	55	11.0
Showing interest in treatment and documentation		
Yes	451	90.2
No	49	9.8
Inviting me to ask questions about my disease		
Yes	423	84.6
No	77	15.4
Giving sufficient information regarding the disease, co-morbidities, investigations, and medicines		
Yes	413	82.6
No	87	17.4
Discuss treatment options and consider my wishes		
Yes	460	92.0
No	40	8.0

Easy hospital admission if needed		
Yes	337	67.4
No	163	32.6

**Table 4: Data regarding patient experience with allied clinical health assistants**

Data about patient experience	(Sample size) (n) = 500	Percentage%
Properly guidance		
Yes	401	80.2
No	99	19.8
The behavior of staff members		
Good	351	70.2
Satisfied	97	19.4
Bad	52	10.4

ing the registration slip. They had to wait in queue for a long time. The study conducted by Javed, S.A et al.<sup>6</sup> mentioned the problems faced by patients in public sectors regarding the registration services. They have to wait and stand for long times to avail each service, which negatively affects the patient's experience. Another study conducted by Sun et al.<sup>7</sup> also mentioned the negative impact of prolonged waiting time for receiving a proper prescription and pharmacy services. The problem for those patients who spend more than 1 hour in the queue was because of fewer counters or more patient load. Some of them were also not satisfied with the proper direction of the board's display, availability of a proper waiting area, and drinking water facilities, which affect the administrative services. Even some of the patients were left unattended, which in turn provoked them to react badly against the services. Solanki NV et al.<sup>8</sup> mentioned that 80% of patients felt overcrowding in the waiting area, but still, it was cleaned and only 50% of patients knew about drinking water facilities in OPD. In addition, on part of the administration, the patients facing these problems may be because of their lack of education. The government and hospital administration should focus on the provision of basic facilities, and adequate medical and trained ancillary staff to avoid the existing problems. Proper patient referrals and improvement of basic health facilities will help to reduce the burden on tertiary care hospitals. Facilities like proper and sufficient waiting areas, drinking water facilities, and displaying boards in more than one language should be there.

Regarding the provision of laboratory services, 86% of patients were satisfied with the good behavior of the staff and giving adequate information about the collection of specimens. But 58.4% of patients and their relatives complained about receiving delayed reports and even some of them had not received the report results on the same day, for which they were advised to come on

the next day. The study conducted by Bogale AL et al.<sup>9</sup> and another study by Abera RG et al.<sup>10</sup> mentioned about 52.6% and 59.7% satisfaction rates which are almost consistent with our results. According to both studies, it might be due to overcrowding and increased referrals from other hospitals, which have a significant impact on the overall satisfaction of patients towards the laboratory working capacity in outpatient services in hospitals.

The proper treatment by consultants and young doctors has a crucial role in the health care system and is a key determinant of patient satisfaction. In our study, the majority of patients were satisfied with the good behavior and treatments of doctors. A study conducted by Mukhtar F et al.<sup>11</sup> mentioned that 94% of the patients who visited the OPD were satisfied with their doctor. The results of this study are more or less consistent with our study outcome. A study conducted by Khalid, F et al.<sup>12</sup> validated the problems of waiting for a long time to have proper consultation, examination, and investigations. A study conducted by Sun et al.<sup>7</sup> included the association of waiting time for consultancy with patient satisfaction levels.

In Pakistan, because of the overburdened population and excessive workload in OPD, the health staff face problems in consultation, proper physical examination, and giving sufficient information regarding the disease, co-morbidities, investigations, and medicines.<sup>13</sup> A study conducted in India mentioned an 81% satisfaction level regarding doctors' proper treatments and competence.<sup>14</sup>

Our study results suggest that most of the patients were satisfied with services provided by paramedical staff and allied clinical assistants. A study done by Conway J and Kearin M.<sup>15</sup> showed the role of clinical health assistants in general assistance, housekeeping duties, and providing physical assistance to all medical staff in handling patients. Another survey done by Lin, I et al.<sup>16</sup> mentioned their role in administration duties and health promotion. Regular training and teaching of ancillary staff should also be focused on, as it has a great impact on the overall image of hospital services.

This small descriptive study helped us in understanding the patient's problems in OPD while focusing on the strength and weaknesses of government, hospital administration, and clinical services in OPD. Further large-scale studies auditing such services is needed to evaluate the hospitals.

## CONCLUSION

To maintain the best outdoor patient services, the government and hospital administration should make proper health services promoting policies. To get positive feedback, they should involve the clinical staff in solving their problems, develop a proper patient referral system, and develop online telemedicine appointment services for avoiding overcrowding.

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#### **AUTHOR'S CONTRIBUTION**

Following authors have made substantial contributions to the manuscript as under

**Wahab S:** conceived, designed, and drafted the initial manuscript, and data analysis supervised the project and was responsible for the authenticity and integrity of the research work.

**Wahab A:** Data collection, and analysis carried out a bibliography, critical appraisal

**Zahoor F:** Data collection and analysis carried out a bibliography, and did the critical appraisal.

**Qazi Q:** Did data collection, and analysis carried out a bibliography, and did the critical appraisal,

**Razzaq A:** Did data collection, and analysis carried out a bibliography, and did the critical appraisal

**Zaib L:** Did data collection, and analysis carried out the bibliography and critical appraisal and helped in data collection.

Authors agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.