

PATIENTS' SATISFACTION WITH ATTITUDE OF HEALTH WORKERS IN A STATE TEACHING HOSPITAL EYE CLINIC, ENUGU, NIGERIA

ABSTRACT

Aims: To assess patients' satisfaction with attitude of health workers, in a state teaching hospital Eye clinic in Enugu, Nigeria.

Study design: Observational, descriptive, cross-sectional study design was used.

Place and Duration of Study: The study was conducted in Eye clinic of a teaching hospital in Enugu state, Nigeria; and lasted for eight weeks in October and November, 2022.

Methodology: Interviewer-administered questionnaire was used to collect information from 348 respondents on their perception of attitude of key health workers, rating of time spent with the doctor, satisfaction with doctor's explanation, and perception of privacy provided during consultation.

Results: More females (63.5%) than males (36.5%), participated in the study; with 50.0% of all respondents being 50 years and above, while 50.0% were below 50 years of age. Highest percentage of respondents (87.1%) perceived the attitude of the doctor as being "friendly/very friendly", followed by nurses (83.6), and finally records staff (78.5%). Many respondents (84.8%) rated time they spent with the doctor as "adequate/very adequate", while 85.3% were "satisfied/very satisfied" with the doctor's explanation of their eye condition, and 60.1% felt that there was "reasonable privacy/complete privacy" when they were consulting the doctor.

Conclusion: Overall perception of attitude of health workers in the study eye clinic was very good. Over 80.0% of patients also gave very good perception for time spent with the doctor, and satisfied with explanation of their health conditions given by the doctor. However, perception of the privacy provided in the clinic was just 60.1%.

Key words: *Patients, Satisfaction, Attitude, Health, worker, Eye, Clinic*

INTRODUCTION

Health care workers are people engaged in actions whose primary intent is to enhance health.¹ Specifically with respect to Eye clinic, they work towards providing better eye care services, and improve the eye health of individuals that visit the Eye clinic. These human resources for health include clinical and non-clinical personnel. Clinical personnel deliver services directly to patients and include medical doctors, pharmacists, nurses; while non-clinical personnel could be laboratory, management, administrative, and support staff.^{1,2}

There are various explanations of the meaning of "Patients' Satisfaction", but all however point to the fact that it is a measure of the degree to which the patient is happy with the attention and services he/she received in the health facility. It can be said to be the extent to which the patients feel their needs and expectations were met.³ These needs and expectations as they concern health workers, start with the health facility record workers that issue card to the patients. The next cadre of health workers encountered is mostly the nurses, who usually will check the records and vital signs of the patients before directing them to the medical doctor that they will consult.

Some studies found that the attitude of health workers and their relationship with patients such as welcoming approach and perceived adequacy of consultation duration, ranked highest in influencing

patients' satisfaction with services provided in the health facility.^{4,5} Health worker behaviour, especially respect and politeness, was also found to be the most important determinant of patients' satisfaction with services provided in a government rural health facility in Bangladesh.⁶ On the other hand, some researchers found that quality and attitude of non-clinical health care workers in outpatient clinics did not influence patients' satisfaction with services rendered in those clinics.⁷ Good attitude of health workers will enhance patients' satisfaction with services provided in that health facility; and consequently make them keep patronizing the facility, and also recommend the facility to relatives and friends. This ultimately will improve the patronage of the facility.⁸

It is known that every service provider has satisfaction of customers as the prime goal, and in the Eye clinics, patients are the ultimate consumers.⁹ Some researchers found out that up to 70% of patients who are dissatisfied with services provided in a health facility may never revisit that facility, and 75% of those dissatisfied will discourage up to nine family members or friends from using that same health facility.¹⁰ Since the quality of services delivered, and the satisfaction of patients that attend Eye clinics determine the continued uptake of eye care services in that clinic,¹¹ and since it has been established that in many cases, attitude of health workers is a major determinant of patients' satisfaction; assessing patients' satisfaction with attitude of health workers in a tertiary hospital Eye clinic, will provide essential data for improving eye care services in the clinic, and other Eye clinics. The main objective of this study is to assess patients' satisfaction with attitude of health workers, in a state teaching hospital Eye clinic in Enugu, Nigeria.

MATERIALS AND METHODS

Study Area

Nigeria has thirty six states and the federal capital territory, and is divided into six geo-political zones with Enugu state being one of the five states that make up the Southeast geo-political zone. Enugu state Teaching hospital is the only tertiary health institution owned by the state government, and with the federal government owned teaching hospital; are the only public health facilities where specialized eye care services are offered in the state. Eye clinics are open every working day, from Monday to Friday in the study teaching hospital. In addition to eye patients that present in the outpatient departments of the teaching hospital, the Eye clinics receive referred patients from every part of Enugu state, and beyond.

Study Design

The study design for this research was observational, descriptive, cross-sectional type

Study Population

Every adult patient attending Eye clinic in Enugu State University Teaching hospital was eligible for the study. However, only those that were physically and mentally fit to respond to our questionnaire were included in the study.

Sample size determination and Sample selection

The average number of patients seen every month in the eye clinic is 1,300 (one thousand, three hundred). The study was conducted for two months, so the estimated total number of patients was 2,600 (two thousand, six hundred). The sample size with degree of accuracy set at 0.05 was calculated, using the formulae below;¹²

$$(A) n = \frac{z^2 pq}{d^2} \quad (\text{For sample calculation when population is over 10,000}). \text{ Must be calculated first}$$

$$(B) nf = \frac{n}{1 + \frac{(n)}{10000}} \quad (\text{Adjustment for population less than 10,000})$$

(N)

n = Desired sample size when population is greater than 10,000

z = Standard normal deviate, usually set at 1.96, which corresponds to 95 percent confidence level (0.05 accuracy)

p = Proportion in the target population estimated to have a particular characteristics. 50% (0.5) is usually used

q = 1.0-p

d = Degree of accuracy desired, usually set at 0.05.

nf = Desired sample size when population is less than 10,000

N = Estimate of the population size that is less than 10,000

The calculated sample size was 334 (three hundred and thirty four). Fourteen (14) more respondents were added to enhance the validity and reliability of the study, making a total of 348 (three hundred and forty eight) respondents.

The samples were selected through simple random sampling method. Balloting was used to select the respondents on each Clinic day.

Sampling instrument and data collection

Interviewer-administered questionnaire was used for the study. Oral Consent was sought and obtained from each respondent, before the questionnaire was administered. Nine (9) respondents were interviewed each clinic day (Monday to Friday). Administration of the questionnaire commenced on 03/10/2022. A total 45 respondents were interviewed weekly, making 315 for seven weeks. The remaining 33 respondents were interviewed on the fourth week of November (9 each day for the first 3 days, then 6 on the 4th clinic day of the week).

Data analysis and management

The information collected were analyzed with Statistical Package for Social Sciences (SPSS), version 23.0 for windows. Findings were expressed in frequency and percentage. Scores of 50.0% and above were considered good, while those below were considered poor.

RESULTS

Three hundred and forty eight (348) respondents were interviewed over a period of eight weeks.

Socio-demographic variables

Half of the respondents (50.0%) were aged 50 years and above, while the rest were 49 years and below. Majority were females (63.5%), and also of Igbo tribe extraction (94.8%). Most of them were married (63.2%), while 26.7% were single. Most of the respondents were Christians (96.6%). Distribution of respondents based on educational level was not very different among people with secondary level (25.9%), tertiary level (28.4%), and postgraduate level (24.1%). The least number had no formal education (8.3%), while 13.2% had primary level education. Respondents who were businessmen/women were highest in number (21.3%), followed by civil servants (19.0%). Occupation of other respondents were students (13.8%), retirees (12.1%), petty traders (9.5%), teachers/lecturers (9.2%), farmers (8.0%) and artisans (4.3%).

Table 1: Socio-demographic variables of respondents

S/N	VARIABLES	FREQUENCY (n)	PERCENT (%)
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		= 348)	= 100)
1.	Age (At Last Birthday)		
	19 years and below	41	11.8
	20 - 29	39	11.2
	30 - 39	44	12.6
	40 - 49	50	14.4
	50 - 59	72	20.7
	60 - 69	60	17.2
	70 and above	42	12.1
2.	Sex		
	Male	127	36.5
	Female	221	63.5
3.	Tribe		
	Igbo	330	94.8
	Yoruba	10	2.9
	Hausa	5	1.4
	Others	3	0.9
4.	Marital Status		
	Married	220	63.2
	Single	93	26.7
	Divorced/Separated	6	1.7
	Widowed	29	8.3
5.	Religion		
	Christian	336	96.6
	Muslim	4	1.1
	Traditional Religion	7	2.0
	Others	1	0.3

6.	Education		
	No formal education	29	8.3
	Primary level	46	13.2
	Secondary level	90	25.9
	Tertiary level	99	28.4
	Post-graduate level	84	24.1
7.	Occupation		
	Farmer	28	8.0
	Teacher/Lecturer	32	9.2
	Businessman/woman	74	21.3
	Petty Trader	33	9.5
	Civil Servant	66	19.0
	Artisan	15	4.3
	Retiree	42	12.1
	Student	48	13.8
	Unemployed	2	0.6
	Others	8	2.3

Perception of Attitude of Key Health workers in the Eye clinic

Many respondents (78.5%) perceived the records staff that received them as “friendly/very friendly”, while only 10.6% rated the interaction as “unfriendly/very unfriendly”. Some (10.9%) were not certain of their perception of the record staff. Many (83.6%) perceived the nursing staff as “friendly/very friendly”, while 7.2% perceived the nursing staff as being “unfriendly/very unfriendly”. Few (9.2%) were not certain of their perception of the nursing staff. Highest percentage of respondents (87.1%) perceived the attitude of the doctor as being “friendly/very friendly”, while 3.7% perceived it as “unfriendly/very unfriendly”. Again, 9.2% were uncertain of their perception.

Table 2: Perception of Attitude of Key Health workers in the Eye clinic

S/N	VARIABLES	FREQUENCY (n = 348)	PERCENT (% = 100)
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1.	What is your perception of the attitude of Records Staff that issued card to you?		
	Very Unfriendly	13	3.7
	Unfriendly	24	6.9
	Uncertain	38	10.9
	Friendly	199	57.2
	Very Friendly	74	21.3
2.	What is your perception of the attitude of Nurses that attended to you?		
	Very Unfriendly	10	2.9
	Unfriendly	15	4.3
	Uncertain	32	9.2
	Friendly	206	59.2
	Very Friendly	85	24.4
3.	What is your perception of the attitude of Doctor that you consulted?		
	Very Unfriendly	5	1.4
	Unfriendly	8	2.3
	Uncertain	32	9.2
	Friendly	152	43.7
	Very Friendly	151	43.4

Rating of time spent with the doctor

Many respondents (84.8%) rated time they spent with the doctor as “adequate/very adequate”, while 7.4% rated it as “inadequate/very inadequate”. Only 7.8% were uncertain of how to rate time spent with the doctor.

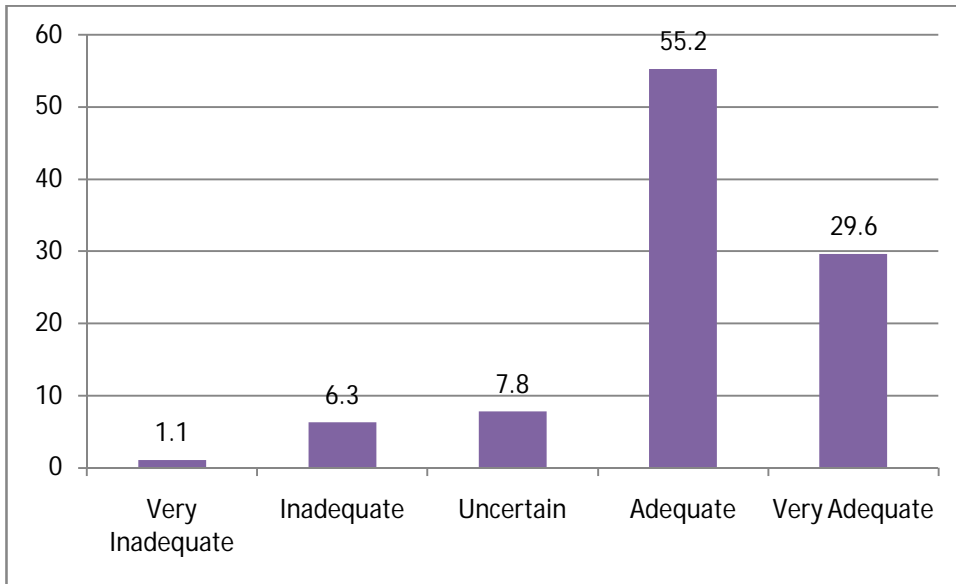


Figure 1: Rating of time spent with the doctor

Satisfaction with doctor's explanation

High percentage of respondents (85.3%) were "satisfied/very satisfied" with the doctor's explanation of their eye condition, while only 4.0% were "dissatisfied/very dissatisfied". Some (10.6%) were uncertain.

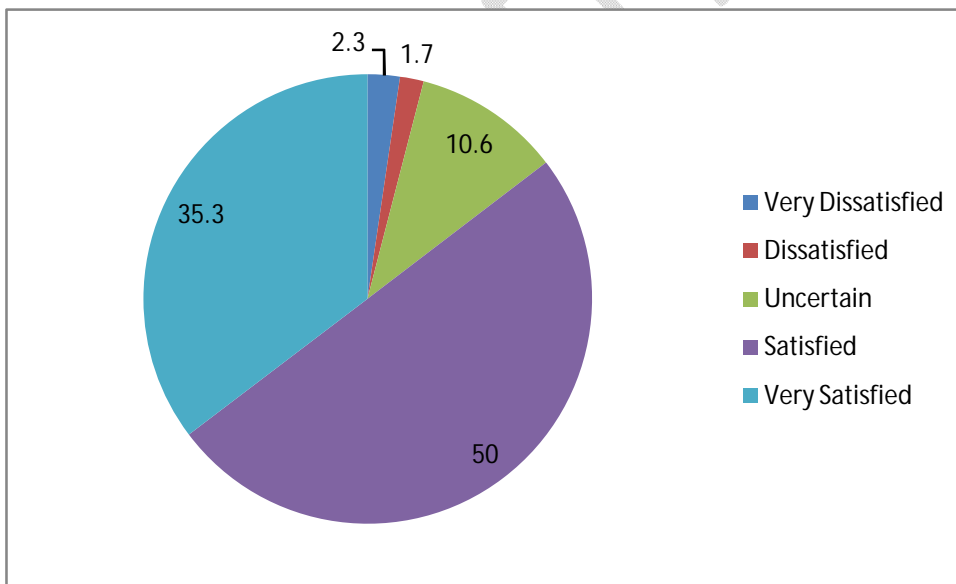


Figure 2: Satisfaction with doctor's explanation

Perception of privacy provided, when consulting the doctor

Above average percentage of respondents (60.1%) felt that there was “reasonable privacy/complete privacy” when they were consulting the doctor, while 35.3% felt that privacy was “little privacy/absolutely no privacy”. Very few (4.6%) were uncertain on how to rate the privacy during consultation.

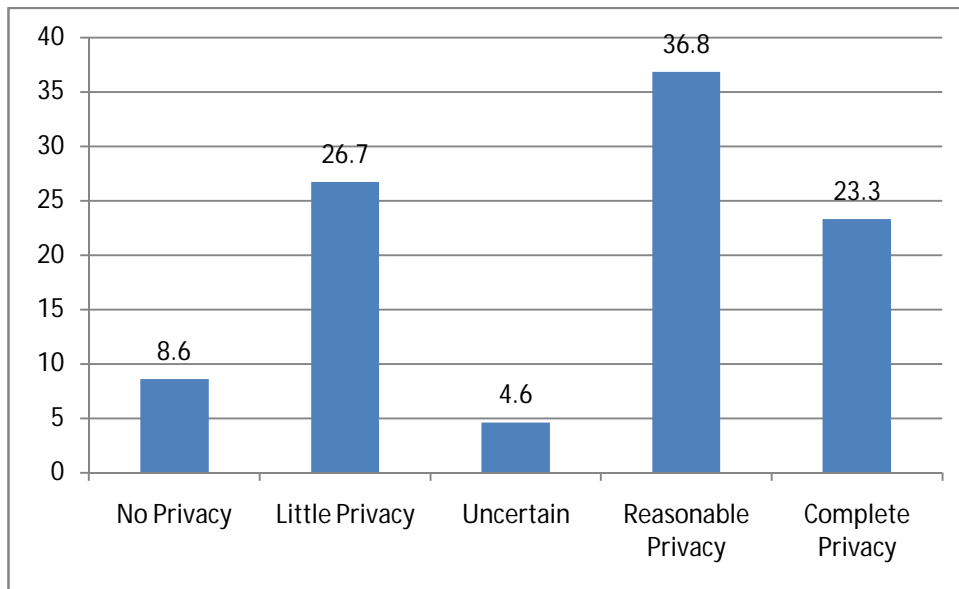


Figure 3: Perception of privacy provided, when consulting the doctor

DISCUSSION

It has been found that among factors that influence patients' satisfaction with services provided in any health facility are attitude of the health workers, time spent with the doctor, the explanation offered by the doctor, as it concerns the patient's problem and treatment plan, and the privacy provided during consultation with the doctor.¹³ Some other aspects of health care services that influence patients' satisfaction, such as waiting time, health care facility environment, and cost of drugs were also assessed during this study, but published separately.

Majority of patients that attended the study Eye clinic were females (63.5%) (**Table 1**). This is expected to be so, since females generally have higher health seeking behaviour than males.¹⁴ In this Eye clinic, Records staff serve as receptionists for patients that seek eye care services in the hospital. They are the first point of contact for patients; thus, patients' perception of their attitude could play a significant role in the overall assessment of perception and satisfaction with services provided in the Eye clinic. As high as 78.5% of patients perceiving attitude of Records staff as “friendly/very friendly” (**Table 2**), will encourage the patients to keep using the Eye clinic, and also recommend it to friends and family members. This finding of high percentage of patients that perceived attitude of Records staff as being friendly or very friendly, is apparently better than 2017 finding, in a tertiary hospital located in the same city as our study health facility; where only 60.6% of respondents were satisfied with the attitude of Record staff.¹⁵ An earlier finding in that same hospital in 2013 showed that as high as 87.6% of records staff were satisfied/well satisfied.¹⁰ This other tertiary hospital is owned by the Federal government, while our study tertiary hospital is owned by the State government. It is possible that supervision of work ethics of Record staff in the Federal government-owned tertiary hospital had dwindled over the years. Attitude of health workers could be a reflection of supervisory emphasis of the health facility management. It is possible that the hospital management in place, in the other tertiary hospital in 2017; paid less attention to the activities of Record staff, than the hospital management in 2013.

Higher percentage of patients perceiving the attitude of nurses as friendly/very friendly (83.6%), than found with record staff, could be an indication that the nurses have more empathy for the patients than the Records staff. This could be attributed to the training of Nurses, which emphasizes empathy more, than is observed with the training of record staff. In a similar study conducted in 2013, in another tertiary hospital within the same locality as ours, 92.7% of patients were found to be satisfied/well satisfied with attitude of nurses.¹⁰ However by 2017, the level of satisfaction with attitude of nurses has declined to 64.5% in that same hospital¹⁵. This decline, again could be due to poor management supervision as suggested earlier. Some studies in the United States of America in 2011, involving thirty two tertiary hospitals, found that nursing care was the most important factor for increased overall patient's satisfaction.¹⁶

Incidentally, doctors were recorded as having the highest level of positive perception in the area of being friendly/very friendly to the patients (87.1%). The already cited studies that were conducted in the same locality as our study found that 97.4% and 90.0% of patients respectively, positively rated attitude of doctors^{10,15}. Though perception of attitude of doctors is reasonably high in this our study, it still could be improved upon, in view of findings in neighbouring tertiary hospital. Overall patients' satisfaction with services provided in a health facility largely depends on the attitude of doctors.^{5,17}

Some patients are dissatisfied with services provided in a health facility because they consider time they spent, discussing their health issues with the doctor, as inadequate. They believe that the doctor was in a hurry to attend to other patients or other issues. It was documented many years ago that a doctor spending little time with the patient, may adversely affect both patient's and doctor's satisfaction, and enhance faulty prescription by the doctor.¹⁸ Many of the respondents in our study rated time they spent with the doctor as adequate/very adequate (84.8%) (**Figure 1**). This is a possible indication that there are sufficient doctors, attending to patients in the Eye clinic, every clinic day. The doctors probably are not under pressure to attend to large number of patients each day; hence they could spend enough time with each patient.

In the past, some researchers had found that doctor's explanation and communication to patients play significant role in determining the satisfaction level of the patients with services rendered by the health care provider. Some even rate doctor's explanation and communication, as the second most important factor influencing patients' satisfaction.¹⁶ Other researchers went further to document that doctor's interpersonal communication skills, which include explanation of patient's condition, and involving the patient in taking decisions about his/her treatment plan; influenced patients' satisfaction more than clinical competence of the doctor, and other situations found in the health facility.¹⁹⁻²¹ Again in this our study, we found that large number of patients were satisfied/very satisfied with explanation given by the doctor during consultation (85.3%) (**Figure 2**). Our finding in this aspect is better than 74.1% found in the other tertiary health institution in our locality¹⁵. This disparity could however be as a result of the assessment on doctor's explanation in the other hospital, being based only on explanation for laboratory tests indications.

Patient's privacy is essential for achieving desired outcomes after being seen by an attending Physician. Privacy commonly, could be relevant in determining Patients' satisfaction with services provided in a health facility.²² As high as 35.3% of respondents in our study perceived privacy provided when consulting the doctor as little/absolutely no privacy, with 60.1% perceiving privacy as reasonable/complete; while only 4.6% were uncertain how to rate privacy provided in the study Eye clinic (**Figure 3**). The finding is better in the federal government tertiary hospital in same locality as ours; where only 25.9% of respondents were not satisfied with the privacy provided during consultation, 67.6% satisfied, and 6.5% uncertain.¹⁵ In our study Eye clinic, more than one doctor consult in one room, and this certainly compromises the privacy of patients; since patients that are being seen simultaneously in one consulting room, could overhear the health conditions of the other patients. The federal government tertiary hospital in the same locality is more funded, and possibly assign one room to one doctor for clinical consultations. In a similar study conducted in a tertiary hospital, in Pakistan; patients' perception of privacy was higher with 76% strongly agreeing that they had enough privacy when discussing their medical conditions, and 79% agreeing/strongly agreeing that other patients could not hear their discussions with health care worker.²³ The hospital in Pakistan possibly has one doctor occupying one consulting room.

LIMITATION OF STUDY

Validity and reliability of this study would have been significantly improved if it was combined with Focus Group Discussion. This qualitative aspect of research would have provided opportunity for respondents to better understand the issues, since they would have had the opportunity to interact with others, and possibly modify or change some views on certain issues.

CONCLUSIONS

Attitude of health workers towards patients that present in their health facility, is key to determining the overall level of satisfaction that the patients derive from seeking care from the health facility. Overall perception of attitude of health workers in the study Eye clinic was very good, with that for doctors' being highest, followed by nurses, and finally records staff. Over 80.0% of patients also gave very good perception for time spent with the doctor, satisfied with explanation of their health conditions given by the doctor. However, perception of the privacy provided in the clinic was just 60.1%. This is poorer than the finding in a neighbouring teaching hospital. It is very important that management of the study hospital, works hard towards providing separate consulting room for each doctor. This certainly will improve the privacy needed for confidential doctor/patient interaction.

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