# Patient's Satisfaction with Primary Health Care Services Provided by Voluntary Organization

<sup>1</sup>Dr. Adam Abdalla Mater, <sup>2</sup>Omaima Mirghani Hanafi

<sup>1</sup>Faculty of Public Health, Alzaeim Alazhari University, Sudan <sup>2</sup>Ministry of Health, Khartoum State, Sudan

Abstract: Patient' satisfaction is of value to evaluate the quality of health services delivery of PHC services in Khartoum state is a joined responsibility between the government and voluntary organizations. A sample of 366 beneficiaries were interviewed in 22 health centers in Omdurman locality to explore their opinions and degree of satisfaction for the care .The sample reflected more females participants than males were using health services (68%) majority in age 25-40 years, house wives 48.4%, majority completed secondary education and of low socio economic status with monthly income less than 500SDG.

The results revealed high level of satisfaction with immunization services in the top. The attitude and humanness of the administrative and treating cadres were the main reason of complete satisfaction. Main challenges were absence of health insurance, inability to afford treatment cost, lack of specialized services like dental and ophthalmology.

We recommended that NGOs should be encouraged to continue and improve their services by completing their PHC packages and introducing health insurance in their health faculties.

Keywords: NGOs, PHC packages, Primary Health Care often abbreviated as (PHC).

## 1. INTRODUCTION

Primary Health Care often abbreviated as (PHC), has been defined as "essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and the country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination" (2).

Primary Heath Care (PHC) services as a governmental responsibility should be accessible and available for all citizens free of charge.

In Khartoum state up to 2013 there is Total of 457 Primary Health Care centers, of this number 218 centers are governmental and 239 are belonging to voluntary organizations under the supervision of Ministry of health (MOH) Khartoum State <sup>(3)</sup>.

These centers provide medical care at primary level (curative), laboratory, pharmacy (with minimum charge), antenatal care, nutrition assessment and advice for under5 children, immunization and health education services (free of charge).

The ultimate goal of primary health care is better health for all <sup>(4)</sup> and In order to assess the quality of care, beneficiaries prospective must be examined.

Vol. 4, Issue 1, pp: (82-86), Month: April 2016 - September 2016, Available at: www.researchpublish.com

Patient's satisfaction is the degree to which the individual regards the health care service or product or the manner in which it is delivered by the provider as useful, effective or beneficial .Patient's satisfaction has long been considered as an important component when measuring health outcome and quality of care<sup>(5)</sup>.

A satisfied patient is more likely to develop a deeper and longer lasting relationship with their medical provider, leading to improve compliance, continuity of care and ultimately better health outcome, also patient's satisfaction contribute to the improvement and continuity of the service. This study aims to assess the satisfaction of clients attending voluntary organization PHC centers in Omdurman locality.

This study aim to explore the beneficiaries' opinions and perception about the PHC services and to find out if this is related to their socioeconomic status. Also to investigate about the causes of dissatisfaction and their opinions to improve the services.

Omdurman locality was chosen as study area because Omdurman as the national capital and residence in the locality represents the diversity (cultural, religious, ethnicity, economical and social) of the country.

#### 2. METHODOLGY

## Research design:

The Study was a descriptive cross sectional facility based study in Primary Health care centers provided by voluntary organizations in Omdurman locality was the study area where data was collected. There are 22 functioning centers distributed all over the locality.

## **Study Population:**

The study population consisted of clients visiting the health centers during the study period. Patients seeking medical advice, Co-patients accompanying adults or minors, Pregnant women in antenatal care clinics, Parents or caretakers coming to vaccinate their children or seeking nutritional advice. They are all residents in the locality which is characterized by wide range of ethnical, cultural and social diversity.

## Sample size:

It was calculated by using the following equation

Sample size =N/1+N (e) <sup>2</sup>

Where:

n	Sample size.	wanted
N	Total population	4233
e	Desired margin of error, expressed as decimal.	0.05

The total population was obtained from Omdurman locality PHC records.

n = 4233/1 + (4233x0.0025) = 366

#### Sampling method:

The sampling technique was stratified sampling technique. Sampling frame was divided into subgroups in accordance to the number of visits to the centers. 24 centers were identified initially during data collection 2 centers were closed permanently due to administrative and financial problems. The sample size was divided between the 22 centers according to the frequency of the visitors.

## Study variables:

#### Dependent variables:

The client's satisfaction of the service.

## Independent variables:

Age, Sex, Level of education, Marital status, Occupation, Monthly income, Residence, Patient's satisfaction about the quality of health services in the centre, The center's staff (performance, appearance and attitude), The clinic, The Ward and dressing room, The lab, The pharmacy, The antenatal care, Vaccination, Nutrition, General degree of satisfaction from the centre services.

Vol. 4, Issue 1, pp: (82-86), Month: April 2016 - September 2016, Available at: www.researchpublish.com

#### **Data collection tools:**

By using pretested structured questionnaires to collect the data. Illiterate candidates were interviewed verbally by the researchers and assistants and their responses were written in the questionnaire.

#### Data analysis:

Questionnaires completeness and validity were checked before data entr manually and computer system.

# **Ethical Issues and Protecting Human Subjects:**

Before the collection of data, ethical clearance and approval to conduct the study was obtained from Alzaeim Alazhari University Faculty board, Ministry of health Khartoum state and Omdurman locality PHC departments. Precautions were taken to prevent or minimize any effects of the study upon the respondents. It was explained to all respondent that it is voluntary to participate on the study and the purpose of conducting it and that their opinions will not generate any harm on the services they are receiving. Verbal consent was obtained and participants were informed that their information would be kept extremely confidential and would only be used for the benefit of the study.

## 3. RESULTS

#### General characteristics of the participants:

366 Respondents were interviewed the majority 83% were the beneficiaries themselves. Most of the respondents were females between the age 25-45 years, 70.8% were married and 48.4% are housewives. The level of education 36.6% completed secondary school, 34% university education, only 9% were illiterate. 26.2% were unable or did not want to give range to their monthly income while 23% have monthly income between 250-500SDG.

Most of the respondents use to visit the centers frequently and the majority

Table (1) Type of the service, Voluntary Organization Health centers, Omdurman locality.

Type of the service	Frequency	Percent
Free	81	22.1
Economical	239	65.3
Insurance	46	12.6
Total	366	100.0

Source: Investigation performed

Table (2) Number of the visits Voluntary Organization Health centers, Omdurman locality 2013.,

Number	Frequency	Percent
First time	76	20.8
Many times	157	42.9
Frequently visiting the centre	133	36.3
Total	366	100.0

Source: Investigation performed

## Assessment of the degree of satisfaction of Health services:

The general degree of satisfaction of health services for the majority 56% was completely satisfied. Only 1.5% reported completely unsatisfied. Almost all services provided scored above 50% of complete satisfaction with the vaccination services on top of the list scoring 60%.

Table (3) Assessment of the quality of health services, Voluntary Organization Health centers, Omdurman locality.

Items	Frequency	Percent	
Completely unsatisfied	5	1.4	
Unsatisfied	11	3.0	
Neutral	23	6.3	
Satisfied	108	29.5	
Completely satisfied	219	59.8	
Total	366	100.0	

Source: Investigation performed

Vol. 4, Issue 1, pp: (82-86), Month: April 2016 - September 2016, Available at: www.researchpublish.com

Table (4) Patient Satisfaction, Voluntary Organization Health centers, Omdurman locality.

Items	Frequency	Percent
Completely unsatisfied	8	2.5
Unsatisfied	9	2.8
Neutral	19	6.0
Satisfied	107	33.9
Completely satisfied	173	54.7
Total	366	100.0

Source: Investigation performed

#### 4. DISCUSSION

The objective of this study was to estimate the degree of patient's satisfaction with primary health Care services provided by voluntary organizations in Omdurman locality. The type of study which is surveyed to collect beneficiaries' opinions was conducted before In Sudan in a study to estimate the degree of satisfaction on emergency departments as indictor of service quality <sup>(6)</sup> and in many other countries as mentioned in the literature review. The cross sectional descriptive design of this study was suitable to meet the objective and reliable in similar studies <sup>(8, 9, 10)</sup>.

The response rate for the questionnaire was excellent almost all those who have been asked to participate accepted. The assessment included all types of services provided in the centers, the general appearance of the place, attitude of the treating cadres, waiting time, price of the service, convenience of the waiting time and the other facilities like waiting area and parking. The results revealed that the majority of the respondents were female as patients or accompanying minors (their children for vaccination and nutritional follow up). Most of them were housewives and of low socio economic status with monthly income less than 500SDG. Those who completed secondary schools were highest number, followed by university then basic education the least was those with post graduate. This group has high level of satisfaction 56% completely satisfied and 31.1% satisfied which means they perceive that the care they receive is better or almost the same to their expectations. Similar findings were obtained in study in Saudi Arabia by Saeed A. A. et al 2001 that relate high degree of satisfaction to less level of education and social class. As in Egypt 2003 <sup>(10)</sup> there is no significant differences between males and females in assessing most of the services wards, rooms, pharmacy, lab or nutrition. But there is significant difference in assessing vaccination and antenatal care as they are more adherent to these services.

Astonishingly the educational level has insignificant effect in client assessment of the quality of the provided service in contrast to Saeed A.A. 2001 (17)

The attitudes of the staff and treating cadre and their understanding and response to their clients' needs were the main reason for satisfaction, also easy geographical access increase the degree of satisfaction these findings were similar to clients response from Libya 2010 and Egypt 2003 (10) (15).

Compared to results from Egyptian author who described no relation between socio demographic characteristics and the degree of satisfaction <sup>(15)</sup> Our results find an association. In the same study level of privacy in consultation room was a reason of dissatisfaction for 33% of patients, there was no complain about this in our study. The main reasons of dissatisfaction among respondents were financial cost especially for drugs, absence of health insurance and specialized services.

PHC centers are charity services with minimum fee o free of charge, still many has complained that they cannot afforded the lab and pharmacy costs(they can receive consultation for free or minimum cost but have to pay for the laboratory investigations and medicines.

Although the country policies are encouraging to introduce health insurance, Patients who have health insurance were only 12% among the participants. The numbers of health centers that provide insurance services are only 3 from the 24 centers<sup>(4)</sup>.

Another challenges mentioned by the respondents are lack of additional or specialized services like Dental and ophthalmological services. Comprehensive packages of PHC should include dental and ophthalmological basic care but many NGOs couldn't provide this.

Vol. 4, Issue 1, pp: (82-86), Month: April 2016 - September 2016, Available at: www.researchpublish.com

Patient's satisfaction is a good indicator of quality of services and has been used before for such purpose (11). The results of this study reflect good quality of the PHC services and pointed he main reasons of satisfaction and dissatisfaction of this type of care and services delivery.

The primary health care services provided by voluntary organization health centers showed high rate of client's satisfaction and this can be used as indicator of good quality. Low percentage of beneficiaries with insurance and low number of health centers are under insurance scheme, efforts should be made to increase the number of centers that provide health insurance. We recommended that Ministry of health should enhance collaboration between governmental and non-governmental organizations in maintaining acceptable level of health service. Also encourage Voluntary NGOs to continue providing and improving the primary health care services.

#### REFERENCES

- [1] Hollly Quran.
- [2] World Health Organization. Declaration of Alma-Ata. Adopted at the International Conference on Primary Health Care, Alma-Ata, USSR, 6-12 September 1978. Accessed on February 2014.
- [3] WHO website accessed on February 2014 http://www.who.int/topics/primary\_health\_care/en/
- [4] Basic facts about Voluntary organization Centers in Khartoum State 2013
- [5] Stiftung, V.B., *Quality management in primary care*, in *European Practice Assessment*, M.D. Richard Grol and H. Brinkmann, Editors. 2004, Die Deutsche Bibliothek: Gütersloh.
- [6] Halaa Awadallh Mohammed and Abdel Rahman lttom. Custumer satisfaction with emergency Health Services provided by Federal Teaching Hosoitals, Khartoum 2005.
- [7] WHO -Client satisfaction evaluation 2002
- [8] Vukovic, M., et al., Validation of a patient satisfaction questionnaire in primary health care. Public Health, 2012. 126(8): p. 710-8.
- [9] Rima M. A., Mohammad R. S., and Ali A. K., *Clients' Satisfaction with Primary Health Care in Muscat*. Int J Prev Med., 2010.
- [10] Salam, A.A., et al., Patient satisfaction with quality of primary health care in Benghazi, Libya. Libyan J Med, 2010. 5.
- [11] Al-Sakkak, M.A., et al., *Patient satisfaction with primary health care services in Riyadh*. Saudi Med J, 2008. 29(3): p. 432-6.
- [12] Miller, M., et al., [Evaluation of patients' satisfaction level as a part of the quality of primary health care functioning]. Pol Merkur Lekarski, 2007. 23(137): p. 367-70.
- [13] de Oliveira DF, et al., *Quality of health care: patient satisfaction in a university hospital.* Arq Bras Oftalmol, 2006. 5: p. 731-6.
- [14] Polluste, K., R. Kalda, and M. Lember, Evaluation of primary health care reform in Estonia from patients' perspective: acceptability and satisfaction. Croat Med J, 2004. 45(5): p. 582-7.
- [15] Gadallah, M., et al., *Patient satisfaction with primary health care services in two districts in Lower and Upper Egypt.* East Mediterr Health J, 2003. 9(3): p. 422-30.
- [16] Bojar, I., T. Ostrowski, and R. Sapula, [Patients' satisfaction with primary health care services]. Wiad Lek, 2002. 55 Suppl 1: p. 54-60.
- [17] Saeed, A.A., et al., Satisfaction and correlates of patients' satisfaction with physicians' services in primary health care centers. Saudi Med J, 2001. 22(3): p. 262-7.
- [18] Al-Doghaither, A.H., et al., *Patients' satisfaction with primary health care centers services in kuwait city, kuwait.* J Family Community Med, 2001. 8(3): p. 59-65.
- [19] Singh, H., E.D. Haqq, and N. Mustapha, *Patients' perception and satisfaction with health care professionals at primary care facilities in Trinidad and Tobago*. Bull World Health Organ, 1999. 77(4): p. 356-60.
- [20] Khartoum state website accessed on Feb.2014 http://www.krt.gov.sd/om.php.