

Review on Client Satisfactions on Emergency Services in Health Centers

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Abstract: Client or patient satisfaction has been defined as the degree of congruency between a patient's expectations of ideal care and his or her perception of the real care (s) he receives. It is a multidimensional aspect, represents a vital key marker for the quality of health care delivery and this is an internationally accepted factor that needs to be studied repeatedly for smooth functioning of the health care systems. It has been an important issue for health care managers. The client here does not technically assess their own health status after receiving care but the degree of satisfaction with the services delivered. It is state of pleasure or contentment with an action, event or service, especially one that was previously desired. Regarding to client, satisfaction is the level of happiness that clients experience having used a service. It therefore reflects the gap between the expected service and the experience of the service, from the client's point of view. Furthermore, patient satisfaction is the patient's perception of care received compared with the care expected. Therefore, this review was undertaken to compile available information on customers' satisfaction.

Key words: Clients • Satisfaction • Emergency • Services

INTRODUCTION

Satisfaction refers to a state of pleasure or contentment with an action, event or service, especially one that was previously desired [1]. Regarding to client, satisfaction is the level of happiness that clients experience having used a service. It therefore reflects the gap between the expected service and the experience of the service, from the client's point of view [2]. Furthermore, patient satisfaction is the patient's perception of care received compared with the care expected [3].

Measuring client or patient satisfaction has become an integral part of hospital/clinic management strategies across the globe [4]. Moreover, the quality assurance and accreditation process in most countries require measuring the satisfaction of clients on a regular basis [5]. Moreover, patient satisfaction had been an important issue for health care managers and health care providers [6]. Among factors influencing patient satisfaction, the relationship between health care providers and patients was reported to be the most influential. Meanwhile,

expectations about the services, perceived adequacy of consultation duration, welcoming approach and perceived body signaling are considered as determinants of satisfaction [7].

As patient satisfaction is considered to be a health care outcome and predictor of treatment utilization and adherence to the care and support, assessment of the level of patient satisfaction is very vital. In addition, knowing the needs of patients is of paramount essential for the achievement of sustainable development goals on health service delivery [8].

Previous studies have developed and applied patient satisfaction as a quality improvement tool for health care providers. Thus, patient satisfaction is an important issue both for evaluation and improvement of healthcare services. Long waiting hours during registration, visiting of Doctors after registration, laboratory procedures and re-visiting of the Doctor for evaluation with laboratory results failure to obtain prescribed medications from the hospitals' pharmacies and difficulty to locate different sections were the frequently faced problems affecting utilization leading to dissatisfaction [9].

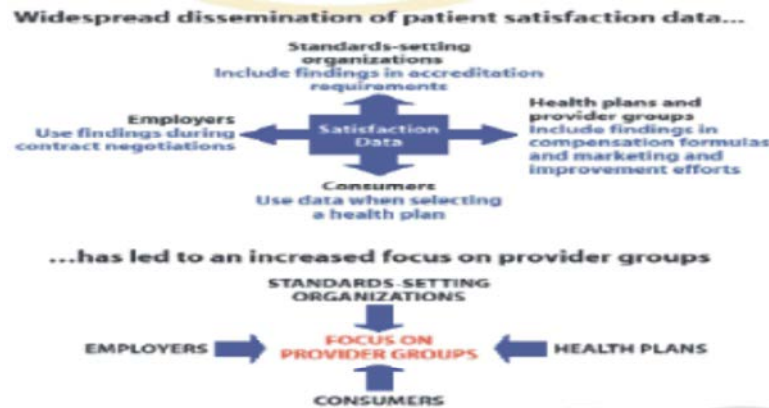


Fig. 1: Dimensions of client satisfaction [11]

Patients choose healthcare based on the satisfaction they receive from different health facilities Aragon *et al.* [10] carried out a study in emergency department of a hospital and determined client level of satisfaction in relating to waiting time. It was concluded that overall patient satisfaction was linked positively with two indicators of clients' recommendation and the extent to which service is satisfactory. Therefore, this review was undertaken to compile available information on customers' satisfaction.

Client Satisfaction: Overview: Satisfaction is a person's feelings of perceived performance and expectations. If a hospital performance falls below expectations, the patient becomes dissatisfied. Likewise, if the services performed matches or exceeds expectations the patient is satisfied. Most companies today are focused on truly satisfying their clients and the reason being that just-satisfied clients are prone to switch when they find better options [11]. Patients that are highly satisfied always create personal connections with their health care providers. Kotler [11] clearly stated that managers need to focus on setting the right level of customer service expectations in order to develop and manage interpersonal bonds [11]. Patients will evaluate a service as satisfying when it is useful, effective and beneficial. Satisfaction is a very complex concept. It is multi-dimensional and difficult to measure because at this juncture the product is an idea and not an object [11].

However, patient's judgments are significant indicators of the quality of care, accuracy of diagnoses and the effectiveness of treatment [12]. When satisfaction is measured, changes can be very essential to make the service delivery process impeccable. Thus identifying the

needs and wants of customers can create dazzling offers, stimulate minds and develop familiarity [13]. The outcome from highly satisfied customer is loyalty [11].

Background Knowledge of Patient Satisfaction: In many countries today, the healthcare management sector, places a lot of emphasis on patient satisfaction. Evidence can be found from the frequency of observed recent academic publications related to satisfaction. For instance, Donabedian [14] claimed that quality care can be attained by generating satisfaction. Furthermore, surveys about patient satisfaction have used some data as dependent variables to evaluate SERVQUAL on the assumption that patient satisfaction depends on the structure, process and outcome of care available at the time of delivery. Other scholars defined patient satisfaction as those contributing factors and components that generate satisfaction [11].

Major Contributing Factors of Patient Satisfaction: A patient's expectation about a healthcare provider can greatly influence perception and the level of satisfaction. There are eight well-known dimensions which create the foundation of satisfaction and dissatisfaction; Such as Care; the art of care, technical quality of care, accessibility, convenience, financial and the, physical environment, continuity care and finally, the outcome of care. In addition, three categories of patient's expectations as explained below as follows: Background, Interaction, Collaboration and Outcome [12].

Background Expectations: Are constructs built upon previous experiences and interactions between the doctor and patient during the phases of consultation and treatment.

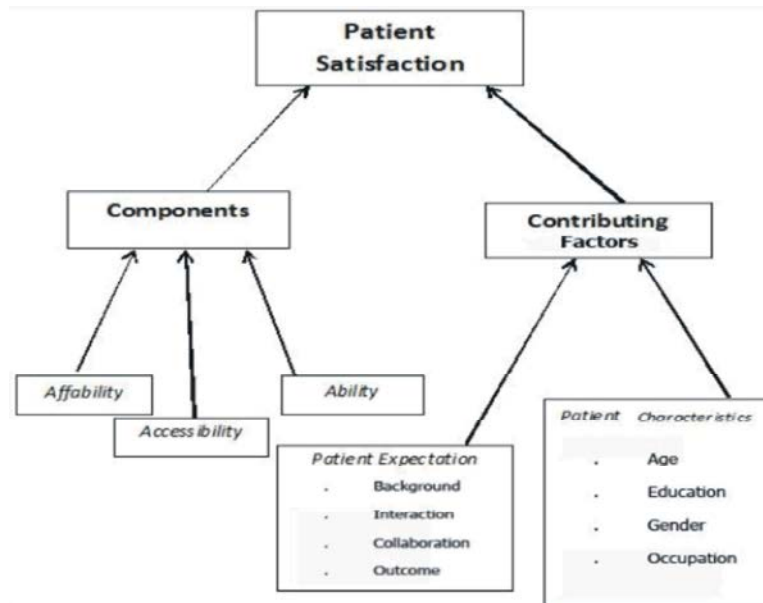


Fig. 2: Describes the background knowledge of Patient Satisfaction [11]

Interaction Expectations: Explains how a patient would like to interact with other members of the health care team, for example the method of investigation.

Collaboration Expectations: Refer to the referral procedure from one specialist to another and also how medications are prescribed to the patient.

Outcome Expectations: Depend on the end result of care services and whether or not it equals patient's needs and wants. An example would be that of a patient after a complex surgery; in this case, patient satisfaction is subjected to a gradual symptomatic relief outcome [14, 15].

Moreover, patients' expectations and satisfaction related causal factors certainly determine the characteristics of patients themselves. One of the most socio-demographic factors of patient satisfaction is Age. Blanchard stated the fact that younger generations tend to be less satisfied than the older generation, which explains why the old easily comply with treatment and demand less from their physicians as compared to the young. Another demographic factor is the educational level which correlated to satisfaction. Similarly, gender, occupation, cultural origin and Income level also play an essential part in determining satisfaction levels [11, 12].

Client Satisfaction Components: Different scholars categorized satisfaction modules into seven elements which closely reflect the most common components

associated with satisfaction. These seven elements are outlined and explained below as follows: Permanence of care, outcomes of care, technical quality of care, accessibility, convenience and the physical environment of care, financial aspect and the availability of care. Also these above mentioned elements are broadly summarized in the three A's to fit the health care context discussion as follows: Affability, Accessibility and Ability [11, 12].

Permanence of Care: This is related to the degree of Care made know to a patient. It is actually one of the values a health provider should reveal. When care becomes reliable, it contributes greatly to patient satisfaction. Still on the positive end of this dimension, a health care provider should place more emphasis on the consideration of responsiveness and genuineness in order to deliver quality service. And finally is the art of care which measures the magnitude of the health care provider's rapport [14].

Technical Quality of Care: The technical quality component of care is related to the provider's conduct, competence and devotion to the high standards of diagnosis and treatment. Elements assessing a patient's perception or expectation as regards to technical quality depend on the work experience of the healthcare provider on the other hand; technical malpractice can be a great deterrent because of faulty machinery and poor facilities, wrong prescriptions and procedures [12, 13].

Accessibility: Accessibility is the term used to denote the level of convenience involved in the arrangement and delivery of health care services. The focus of health care should be placed on the older population, the numbers of which are gradually increasing. Another facet of health care to take into consideration would be whether healthcare can be obtained from home, the time and the effort required delivering healthcare services. Indeed, there are some evolving concerns over access to healthcare in terms of the present trends. This is as a result of responding to an increased level of the costs of healthcare, thus customers tend to limit coverage or switch to other forms of health care delivery services that they can afford [15]. The new era on health policy encourages insurance coverage and newly-established healthcare providers in order to limit the geographical and financial barriers to health care delivery system most especially the vulnerable population [15].

Convenience of Location and Efficacy or Outcome of Care: Convenience meant the ease to travel to the service, an opportunity of meeting the health provider, waiting time, receiving the services as wanted and willingness of the health providers to treat patients. The convenience and characteristic of place people go for medical care sheds light on whether there is differential treatment of individuals depending on where they take chance to go for services. In addition waiting time in getting services should be an indirect indicator of convenience in any service [16].

Location is another area of focus to be studied, as well as the convenience of hours during which care can be obtained and the waiting time before care is received. Most health care providers that consider these dimensions during the service delivery process easily out-grow competitors and attract more customers. Efficacy, or in other words locus of control is the usefulness of a health provider to develop and sustain health statuses. This is an advantageous indicator for the healthcare provider [16].

Perceived Service Quality and Customer Satisfaction in Healthcare Services: Healthcare service quality defined as the difference between patient's perceptions of services offered by a particular health center and their expectations about the health center offering such services. Explaining further, patients' expectations are dependent on their perception of the best care standards of their former experiences in the consumption of services. This means that satisfaction has a greater tendency to

motivate satisfied customers to continue consumption, spread positive views or increase word of mouth recommendations to yield new customers without extra cost on marketing communication [15]. The reverse is true; as unfulfilled expectations inevitably lead to dissatisfaction. With regards to these discrepancies, it is highly crucial for healthcare providers to continuously observe and measure customer service expectations and perceptions. Suggestions to continuously monitor how well customers' expectations have been met are very obligatory as a form of after-delivery activities [17].

Customer satisfaction can lead to high customer loyalty though it may differ from one industry to another. This means that in an industry where switching cost is heavy customers tend to be more loyal. However, the issue of loyalty can be questioned since health is very vital to all societies that revolve around patients. Health care services are interesting by nature because they are services that most individuals do not want but need at a certain point in time. A significant relationship between the five factors of service quality and patients' satisfaction has been showing. The discipline factor, covering "tangible" and "assurance", had the greatest influence on patients' satisfaction, while the gratuity factor had the lowest effect [16, 17].

Elements of Satisfactory Health Service Delivery: Some scholars enumerated communication with patients, competence of staff, staff demeanor, quality of the facilities and perceived costs as outstanding factors of health service satisfaction. This can be claimed in the context of health service delivery because there are different services within the service industry. Therefore, in the instance of automobile and railway service sectors, availability and quality of refreshments, effectiveness of information systems and behavior of railway staff, basic amenities provided on platforms and safety and security are important factors that define customer satisfaction. Delay in delivery is a crucial factor in dissatisfaction of customers [17, 18]. It is therefore necessary to note that service quality can be assessed in terms of customer perception, customer expectation, customer satisfaction and customer attitude whereas service quality may be identified as customer perception of how well a service meets or surpasses their expectations [17]. The SERVQUAL model is relevant to the healthcare sector in the following satisfactory elements: appointments kept on schedule, accurate diagnoses covered under Reliability where as accessible services, no or less waiting, willingness to listen identified

as Responsiveness. Knowledge, skills, credentials, reputation relate to Assurance. Empathy captures how a patient is acknowledged as a person, the awareness of patient's previous problems, good listening and patience. Finally better waiting room, better examination room and quality equipment, better written materials can all be captured under Tangibles. Effective information and communication at comprehensible degree are deemed satisfactory [18]. Other studies on customer satisfaction in health care stress the significance of convenience, access, waiting time, choice, quality of information, range of services, nature of the patient's medical problems, patients' demographic background, a comfortable environment and a courteous and caring medical staff [19].

Major Challenges to Effective Quality Service Delivery:

One major reason for delivering poor quality services to patients is the overcrowding in the majority of public hospitals [19]. People living in the rural areas are lacking basic health facilities and so when the need arises, they only have opportunity to visit these public hospitals located in the cities. The excessive crowding in the public hospitals can be attributed to affordable healthcare services. Management is unable to manage the large number of patients [18]. This is the main reason that doctors and staff are unable to provide individual attentions to patients. Hygienic conditions, cleanliness in the hospital environment is very poor in the public hospitals. Scholars observed that the lower staff charged to maintain cleanliness is always waiting for tips from patients. Another key challenge is the failure to implement quality management systems in the healthcare sector.

Patients' expectations and priorities with regards to health care vary among countries and are highly related to cultural background and the local health care system. There are various challenges that face government hospitals. Some of these challenges include; increase in patient load while hospital infrastructure remains the same, enormous financial constraints, negative utilization of resources and unsatisfactory administrative support from authorities. Increasing costs in public healthcare spending has affected most governments in their effort to offer improved service [17]. Besides, hospitals that try to utilize modern technology are not able to deliver up to expectation all because of inadequate training [18].

Causes of Poor Quality Healthcare Delivery:

Poor Customer Service: Inadequate provision of care in hospitals leads to lack of funds, interest, respect, belief

etc. In Ethiopia, health service leading unproductivity main aim is to enhance the best care services given to the citizens. It envisaged clients receive good customer care by health facilities given much focus so far as patient's expectation is concerned. In the healthcare facility, for every 100 clients that experienced poor services, about 70 patients would be unlikely to patronize the same health facility again. Moreover, for the same 100 patients who have experienced deficient services, about 75 of them will tell average 9 relatives members and colleagues about their experiences. 75 dissatisfied patients will finally be about 465 people who might have been potential patients will probably not patronize the health facility [19].

Inadequate Health Professionals: According to a study conducted in 2006 by an organization responsible for health issues, propounded that African accounts for 24% of the world sickness, meanwhile, 3% of the whole health employees to take care of them and the Movement of health professionals from developing countries to develop areas. This showed worldwide worry which is called "brain drain". An organization concerned for health outlined Tuberculosis, Fever and Human Immune Virus as being the main concern to be addressed. The result arising from these sicknesses is amazing. Statistically, 350, 000 persons live having human immune virus and Acquired Immune Deficiency Syndrome living here in the country. Diseases that affect the lungs also recorded 79, 000 whilst 3.5million was recorded for yearly. With a population size of 22 million citizens, such challenges affect the countries [20].

Inadequate Resources/Materials: Inadequate Resource like human resources, equipment, consumable supplies and some essential medicine undermines facility functioning, damages reputation, increased out-of-pocket costs to patients and bring a spiral of mistrust and alienation. According to the study health professionals move seek for better remuneration and, the arrangement is even made before they are awarded the certificate.

Quality Gap in Health Service Delivery: There are five service quality gaps that exist in service businesses. They named the first gap as the listening gap, which is the discrepancy between customer expectations of service and company understanding of those expectations. The service design and standards gap follows as the second and represents the discrepancy between a firm's empathy towards customer expectations and the creation of customer-driven service policies and values.

The third gap, which is the service-performance gap, explains the discrepancy between the development of customer-driven service standards and real service performance [21]. Service success suffers when service delivery is below the belt of the set standards, which occurs as a result of the people, systems or technology, involved. The external communications gap, the fourth gap, is based on the firm's competence to deliver what is promised and absolutely ensure effective communication to consumers. Lastly, the fifth gap is the expected service-perceived service gap, which is explained by as the variance between customers' expectation and perception in service quality [21].

The five dimensions include; Tangibles (physical facilities, medical equipment and appearance of personnel), Reliability (capacity to deliver services accurately dependably and in line with promises), Responsiveness (disposition to help customers and provide prompt services), Empathy (Convenient opening hours and providing individualized care and attention, which includes both access to and understanding of the customers) and Assurance (patient safety and health provider demeanor, providers' knowledge, courtesy and ability to convey trust and confidence) [22].

Measuring Patient Satisfaction with Health Services: Measuring the patient satisfaction with health services is a part of the process of monitoring the success of community participation and quality improvements strategies. However, measuring patient satisfaction is not straight forward. "Satisfaction is a complex concept that is influenced by factors including socio-demographic characteristics, physical and psychological status, attitude and expectations about medical care structure, process and out come of care [23].

Despite these difficulties, methods for measuring patient satisfaction have developed rapidly in recent years by the emergence of an explicit voice in health and the resulting need to incorporate patient voice prospective into development and evaluation of health services. The influence of market idea on health, which has been patient satisfaction included in evaluation for purposes of quality assurance and allocating resources. The desire to improve compliance with treatment, since patient satisfaction is a strong predictor [23].

For the purpose of quality assurance, measurement of patient satisfaction has the potential to be an educational process, to identify improvements that are cheap to make, to identify good practice and to set standards that incorporate patient's prospective. At the local level, the results should feed back into the local

organization process to improve the quality of services. At the state level, the results can help to identify areas of need through monitoring variations based on different population characteristics, e.g. by age, geographic area or ethnicity [23].

CONCLUSIONS

Satisfaction refers to a state of pleasure or contentment with an action, event or service, especially one that was previously desired. Regarding to client, satisfaction is the level of happiness that clients experience having used a service. It is therefore reflects the gap between the expected service and the experience of the service, from the client's point of view. In conclusion, patient satisfaction is considered to be a healthcare outcome and predictor of treatment utilization and adherence to the care and support, assessment of the level of patient satisfaction is very vital. In addition, knowing the needs of patients is of paramount essential for the achievement of sustainable development goals on health service delivery.

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