

**ASSESSMENT OF PATIENTS' PERCEPTION OF HEALTH SERVICE DELIVERY IN
MUBENDE REGIONAL REFERRAL HOSPITAL (OUTPATIENT DEPARTMENT)**

**A THESIS
PRESENTED TO THE SCHOOL OF GRADUATE STUDIES
AND RESEARCH KAMPALA INTERNATIONAL
UNIVERSITY KAMPALA,
UGANDA**

**IN PARTIAL FULFILLMENT
OF THE REQUIREMENTS OF THE AWARD OF A MASTER'S
DEGREE IN PROJECT PLANNING AND
MANAGEMENT**

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Oct 2010

DECLARATION A

I **Ssendikadiwa Vito Bosco** declare that, this study, assessment of patient's perception of health service delivery in Mubende regional referral Hospital (outpatient department), is my original piece of work which has never been presented to any University or Higher Institution of learning for the award of the same or other qualification.

I am therefore, entirely responsible for any errors and omissions which remain.

Student's Signature *Ssendikadiwa*

Date: *18/10/10*

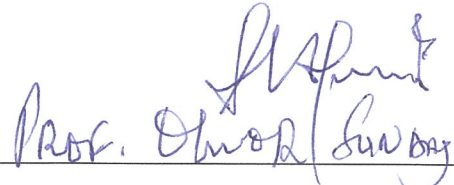
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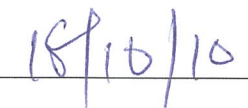


DECLARATION B

"I confirm that the work reported in this dissertation was carried out by the candidate under my supervision".


Name and Signature of Supervisor

Name and Signature of Supervisor


Date


Date

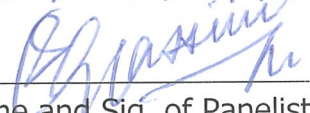
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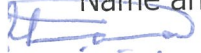
This dissertation entitled "assessment of patients' perception of health service delivery in Mubende Regional Referral Hospital Outpatient department" prepared and submitted by Ssendikadiwa Vito Bosco in partial fulfilment of the requirements for the Masters Degree in Project Planning and Management. Has been examined and approved by the panel on oral examination with a grade of PASSED.


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ABSTRACT

This is a study carried out in Mubende Regional Referral Hospital with the aim of assessing patients' perception of health service delivery in Outpatient department (OPD). The hospital faces challenges among which include limited space, inadequate funding and inadequate staffing. The hospital receives criticism from politicians that the services offered are inadequate, yet the health workers feel that they provide the best services to patients. It is upon this background that the researcher proposed to undertake this study to assess and find out from patients who are the primary recipients of the health services, their views, remarks and beliefs in relation to services offered to them. This was a cross sectional study in form of a survey. 384 respondents of age 18 years and above were selected randomly to participate. Data was collected using questionnaires, analyzed and presented using frequency table and graphs. The findings indicate that perception of patients receiving services in OPD is generally good in view of the following: Clients receive good hospitality at the entrance to hospital, the general cleanliness of the hospital is good, health workers available to receive clients at OPD and handle them professionally, patients receive adequate information and education regarding their illness and the use of prescribed medicines. However clients wait longer hours between 2-4 hours to receive attention. The Hospital Administration is recommended to re-organise the outpatient department, the triage system and allocate more staff so that the waiting time is reduced.

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ABBREVIATIONS

ED	Emergency department
HUKM	Hospital University Kabansaan Malaysia
HSSP	Health Sector Strategic Plan
MBS	Mubende Broadcasting Service
OPD	Outpatient Department
UK	United Kingdom
UNHCO	Uganda National Health Consumers' Organization.
WHO	World Health Organization

CHAPTER ONE: THE PROBLEM AND ITS SCOPE

1.0 OVERVIEW

This study aimed at assessing patient's perception of health service delivery in Mubende regional referral Hospital, outpatient department. This section presents the following chapters and section as they are arranged in this report. Chapter one contains a general introduction and background of the study, problem statement, justification, objectives of the study, hypothesis and the scope of the study. Chapter two discusses literature review. Chapter three explains the methods which were used in the study. Chapter four presents results and analysis. Chapter five discusses results. Chapter six presents conclusions and recommendations. A list of references, appendixes which includes: a time frame, an estimated budget for the study, participant's consent form, and a questionnaire.

1.1 BACKGROUND OF THE STUDY

Mubende hospital is a regional referral hospital since July 2009. It is the largest care center in Mubende District, Located in Mubende town council, Kyaterekera parish. Serves a population of approximately 1.2 million people spread in 6670 square kilometers. The catchment area includes the districts of Mityana, Kiboga and Mubende. The hospital is government funded, charges no fee for service. Its mission is the attainment by the people in the catchment area of a high

status of health that can enable them lead a healthy and productive life. The hospital aims at achieving this through provision of the following services: It runs a general out patient clinic daily Monday to Saturday and in-patient admission daily including weekend and public holidays, quite a big number of clients attend regularly. The general out-patient clinic is entirely run by Doctors, Nurses, clinical officers, Data personnel and counselors. The main routine activities include: receiving of clients at reception and triage, health education and counseling, monitoring for vital observations, clinical review and treatment. Other services include: Health promotion, Disease prevention, and rehabilitation services. These activities are time consuming; there is a limited space in the clinic, and inadequate human resource. The current strength of work force is 127 staffs, composed of 70 established staffs and 57 support staff, as compared to ministry of public service staffing norm 2009 recommends 300 health workers 200 established and 100 support staff. A lot of effort is being put in by the Hospital management and entire staff to provide the best services to their esteemed clients to fulfill the mission of Mubende hospital and ensure that residents in the catchment area get the widest access to the national minimum health care package.

Despite all that, on several occasions Mubende District local leaders (politicians) criticize the services offered by the Hospital as being poor, by quoting parameters Like: "No drugs in the Hospital, you do not see doctor in Hospital,

patients are charged fee for service, Nurses do not care, and staff members do not work at night and weekends” and so on. However no information has been made available through research regarding client’s perception towards services offered to them, as the consumers of health services.

The information noted above stimulated the interest and initiative of the researcher to carry out this study in Mubende hospital out patient department, it being the reception and the first point of entry to all hospital services, to assess patients’ Perception towards health service delivery. It was hoped that the findings of this study would guide future health service delivery in Mubende hospital

1.2 STATEMENT OF THE PROBLEM.

Since inception in 1964, Mubende hospital has been operating under a number of challenges among which include limited space to accommodate the increased population, inadequate funding, inadequate staffing, shortages of drugs and other supplies. (Ministry of health, 2008)

On several occasions the hospital receives criticism from politicians on public rallies and mass Medias that the services offered in Mubende hospital are inadequate. (MBS report, 2009) Despite the above constraints and their compromise to the quality of service, the hospital management and staff of Mubende hospital try to provide the best services to patients although the

practice of assessing patients' perception, opinions, attitudes and satisfaction towards health services offered to them while in hospital is not mandatory.

Zeki (2004) argues that, Patients' perceptions about health care systems seem to have been largely ignored by Health Care Managers in developing countries. It is upon this background that the researcher proposes to undertake the study in Mubende hospital as a case study thus, timely to assess and find out from clients (patients) - the primary recipients of the health services, their views, remarks and beliefs in relation to services offered to them. Mubende Hospital would experience disastrous management if this is not checked early enough.

1.3 PURPOSE OF THE STUDY

The purpose of this study was to assess perception of patients/clients of the service they received while in the hospital. It was hoped that information would be generated from which gaps would be identified and addressed as well as the positive ideas transformed to improve service delivery.

1.4 OBJECTIVES

1.4.1 General objective

To assess patients' perception of service delivery in Mubende hospital.

1.5 Specific objectives.

1.4.2 To determine patients' waiting time in the clinic at Mubende Hospital.

1.4.3 To assess patients' views of the health workers conduct while in the clinic at Mubende Hospital.

1.4.4 To assess patients understanding of the information given in the clinic at Mubende Hospital.

1.4.5 To determine patients' views about the treatment they received at Mubende Hospital.

1.5 RESEARCH QUESTIONS:

The research was guided by the following questions:

1.5.1 What is the patients' waiting time in Mubende Hospital OPD clinic?

1.5.2 What are the patients' views of the health workers conduct while in the clinic?

1.5.3 What is the patients understanding of the information given in the clinic.

1.5.4 What are the patients' views about the treatment they receive in Mubende Hospital OPD clinic?

1.6 SCOPE OF THE STUDY

The study was limited to only patients seen and discharged through out patient department in Mubende regional referral hospital after receiving their drugs from pharmacy for a period of two months January - February 2009. Patients of age 18 years and above and not participating in any research study at the clinic were contacted.

SIGNIFICANCE OF THE STUDY

The study to assess patients' perception of service delivery in Mubende hospital.

Will be relevant to the following:

➤ **Uganda Government (ministry of health)**

This study provides information to the policy makers in the Government, and other health related organization about how patients receive the services offered to them. Gaps can be identified in service delivery and appropriate measures be drawn to address them. The findings may provide a basis upon which policy makers may base to make proper planning and supervision of health services.

➤ **To practitioners (health staff).**

The finding of the study will enable health workers to know how patients perceive health service. This may be an eye opener to the health staff to seek ways of improved service delivery. The findings may help management to draw appropriate resolutions.

➤ **To the researcher.**

Successful completion of this study fulfills the requirement for the award of Masters in project planning and management. It also widens the knowledge and improves skills of the researcher in research projects.

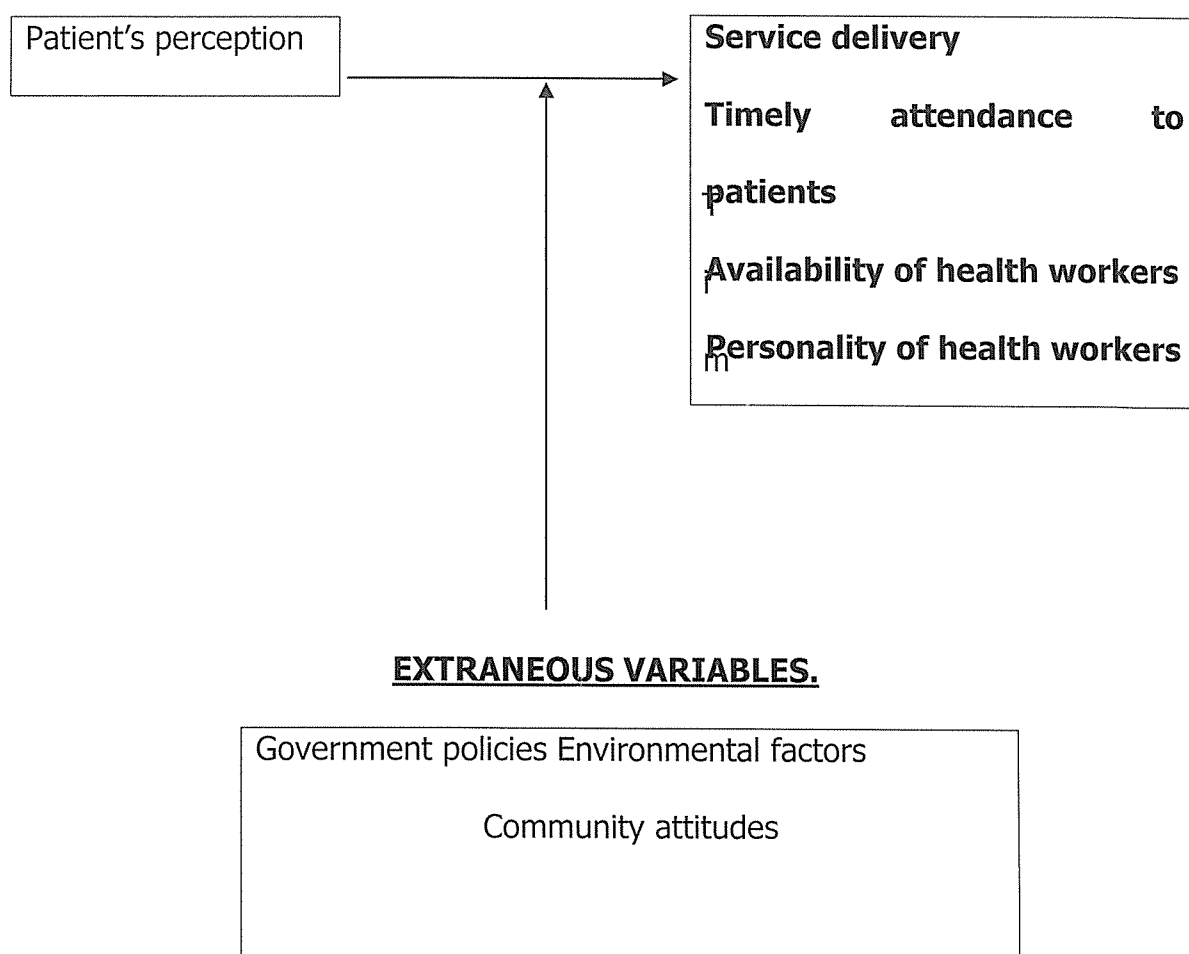
1.8

CONCEPTUAL FRAME WORK

This conceptual frame work shows the relation ships between the independent, dependent, and extraneous variables. The dependant variables affect patients' perception directly while the extraneous variables affect perception indirectly.

INDEPENDENT VARIABLES

DEPENDENT VARIABLES



This chapter highlighted the background of the study and the problem statement, the purpose of carrying out the study, study objectives, the research questions to be answered so as to address the research problem , the significances of the study to the nation, practitioners and the researcher. Chapter two reviews the related literature to the variables of the study. Chapter three explains the methods which were used in the study. It covers the following sections: study design, study area and population, Sample selection and size, plan for data collection, analysis and presentation. Limitation of the study, ethical consideration and dissemination of results. Chapter four presents findings of the study done to assess patients' perception of the health services offered in Mubende Hospital. The data is presented for analysis in different forms using frequency distribution tables, bar graphs, line graphs and pie charts. Data is presented in the order from social demographic characteristics of respondents, perception of respondents and patients waiting time. Chapter five discusses the findings of the study. .The 384 completed questionnaires were analyzed according to the major variables of the study. These included: Demographic characteristics of the Respondents. Perception of respondents towards health service delivery in Mubende hospital. Respondents waiting time in Mubende hospital Out Patient

Department. The results of the study were discussed in the above order.
Conclusions and Recommendations are made based on the findings.

CHAPTER TWO: REVIEW OF RELATED LITERATURE

2.0 INTRODUCTION

This chapter reviews the already existing literature on patient's perception towards health services worldwide. In this chapter health and perception are defined, the literature is organized in the order of the objectives as follows; Literature on patients' waiting time in hospitals. Literature on patients' views of the health workers conduct while in hospitals. Literature on patients' understanding of the information given to them in hospitals and Literature on patients' views of the treatment they receive in hospitals.

Definition of health.

Good health is an essential resource for social and economic development and an important dimension of quality of life. The World Health Organization (WHO) in 2000 defined health "as a state of mental, and social well being not merely the absence of disease or infirmity". For development to be sustainable health and economic growth must be mutually reinforced. Without good health, individuals,

families, communities and nation can not hope to achieve their social and economic goals. Uganda Ministry of health (2005).

Y. K. Museveni the President of Uganda recognized improving health as a key element in poverty eradication action plan, showing a need to carry out clients' satisfaction survey as a way forward to monitoring health services delivery (HSSP II 2004)

From points of view of philosophy, psychology, and the cognitive sciences, perception is the process of attaining awareness or understanding of sensory information. Perceptions vary from person to person. Different people perceive different things about the same situation. But more than that, we assign different meanings to what we perceive, however, perception may differ with differing persons. One might change one's perspective or simply make things mean something else. (Flanagan, 2001)

2.1 Literature on patients' waiting time in hospitals.

According to the Study on outpatient waiting time that was conducted in Hospital University Kebansaan Malaysia (HUKM), it was revealed that average waiting time for patients to see a Doctor was 4-5 hours which would give a negative perception on the quality of service in outpatient clinic at HUKM. It also noted

that after a long waiting time, patients spent short time intervals with the physician (Mohamad, 2005)

.

In another study which was conducted by Zelder (2004) in the University of Chicago to examine the association of a variety of patient and hospital-level factors with emergency department (ED) waiting time, using the National Hospital Ambulatory Medical Care Survey (NHAMCS) database for the year 2000, with special interest in the following factors: patient insurance status, patient race, intentionality of patient injury (e.g., suicidal), and hospital ownership status. Data was drawn from 9,000 ED visits. It was found that privately-insured patients have significantly shorter waits by 5.6 minutes; blacks wait 24.6 minutes longer than non-blacks although this difference narrows as triage acuity worsens, suicide attempters wait 10.5 minutes less and hospital ownership status is insignificantly related to waiting time. In conclusion Patient insurance status, race, and intentionality of injury each appear to affect waiting time,

2.2 Literature on patients' views of the health workers conduct while in hospitals.

Uganda National Health Users'/Consumers' Organization UNHCO (2005) promotes awareness on the rights of health consumers. It also highlights the rights of health consumers as follows: Right to respect of life, body, personality in the course of treatment; Right to privacy and confidentiality during the course

of treatment; Right to non-discrimination and equal treatment; Right to self determination to choose from the available service with the help of the health workers; Right to participate in planning, management and monitoring of health services. Right to safety and address, consumers have the right to have their complaints fairly handled by the health facility. Right to know basic treatment available and adequate information regarding ones illness, diagnosis, treatment and risk involved, Right to spiritual and psychological comfort. These can be achieved through Advocacy, lobbying and constructive engagement with health providers, policy makers, development partners and other interest groups at both national and local levels to enhance the quality of health care through consumer participation.

In another attempt, the human rights as stated by UNHCO, Rome (2006) carried out a study and identified the people perception on the quality of public health services in Norte and Ichilo health district in Malawi, with particular emphasis on the relationship between health workers and patients. Results show that the public health services reputation is affected by elements as discriminatory attitude towards people belonging to low socio-economic strata, lack of communication between health workers and patient, perceived insufficient technical skills. Singer (1982) argues that methods used to evaluate health care delivery concentrate on areas like medical review and financial audit, information on mortality, Inpatient and Outpatient enrollment, vaccination coverage .Do not consider patients perception. While As-Locker (1982), added that the assessment

of consumers' reaction and perception towards health can provide prescription for actions for improving services in some way that is beneficial to patients and health care system as a whole.

Save the Children (UK) has been working on health issues in the West Nile region of Uganda since 1980. Between 2000 and 2002, a number of operational research studies were conducted which "shed light" on patient perceptions of the quality of services, and barriers to access and utilization patterns. The results showed that despite considerable progress such as rebuilding infrastructure, training staff and investing in health systems in these districts, there is still a long way to go to provide services of an acceptable quality to users (Sophia 2004).

2.3 Literature on patients' understanding of the information given to them in hospitals.

Best understanding of medical information will depend on the effectiveness of the communication between the health worker and the client.

Communication means the transference and understanding of meaning i.e. dissemination of information. An idea no matter how great is useless until it is transmitted and mutually understood by both parties. Stephan (1981), however, argues that mutual understanding may be inhibited by barriers to communication. These include all those things that hinder the communication process and result in some kind of distortion in the message. Such barriers can

be physical, perceptual, emotional, language and personality barriers or state of a communicator or receiver and their willingness to communicate or receive the message. At all organizational levels, at least 75% of each workday is consumed by talking and listening. However 75% of what we hear, we hear incorrectly and 75% of what we hear accurately we forget in 3 weeks and 70% of all business communication fail to achieve the intended purpose. Robert, N. (2002

Kemp (2008), conducted a study to assess how clients understand instruction regarding use of prescribed drugs from pharmacy in three public hospitals in India. By looking at parameters like; number of tablets to be taken a day, interval between doses, and precautions like food restrictions, when to return to hospital.

Ninety-six clients attending outpatient adult clinic were selected randomly in three consecutive days to participate in the study. An exit oral interview was then subjected to participants using structured questions while recording their responses.

Results; Sixty-nine clients(71%) understood the information communicated to them and reported rightly how to take their medicines.22 clients (23%) reported having received information regarding use of their medicine, however did not understand.5 clients (6%) denied having received any communication from a

health worker about the use of drugs and did not know what to do with their drugs.

He recommended that health workers provide adequate information to clients regarding use of their prescribed drugs and also check understanding before a client is discharged from the clinic/hospital.

In a study to assess understanding of medical information, Engel et al., (2009) agreed with Kemp (2008) when he noted that; over the past few years, multiple studies have demonstrated that patients often leave medical encounters with a poor understanding of their health conditions and recommended treatment. One published study on this subject demonstrates the low level of understanding patients have about follow-up care and medication therapy upon discharge from the emergency department. He then recommends that when educating patients and their caregivers about their medications, instead of asking "Do you have any questions?" or "Do you understand?" ask them to restate their understanding of the information provided in their own words within a shame-free environment. It is critical that patients and/ or caregivers be able to recite back the information they received on how to properly take their medications, rather than just be given a leaflet or be asked if they have any questions.

Ministry of health March (2002) provided an opportunity to client to share their opinion and ideas in health workers Newsletter through writing and postage;

however this is an opportunity to people of a high social class who can read and write and meet postage expenses; this leaves the opinion and ideas of illiterate and people of low social- economic class.

2.4 Literature on patients' views of the treatment they receive in hospitals.

David (1982) noted that hospitals have a high frequency of complaints from their patients; and that seeking consumers' opinion can yield valuable information about the function of the health care system should be taken into account in assessment of quality. In Uganda some rural women lack exposure and confidence to enter modern hospital environment and so should only seek such service in emergence (Gender Bulletin (1997)

In a similar study in an effort to assess the emergency obstetric care concluded that women do seek access to care for obstetric emergencies because of a variety of problems encountered therefore delaying appropriate care.

Disorganized health care with lack of prompt response to emergencies is a major factor contributing to a continued high mortality rate (Gender Bulletin 1997) Many care seekers also mistrust health workers, feel that health workers do not treat them with respect, so they decide not to return for additional treatment visits

WHO Report (2002) conducted similar studies in developing countries among which Uganda is inclusive, have shown that patients are able to evaluate

structural, process, and outcome measures of quality. No research of such kind has been done on patient perceptions in Mubende hospital. Whereas some local studies have attempted to measure patient perceptions of health care quality; the validity and reliability of these scales are unknown. The applicability of these instruments is questionable.

Zeki (2004) stated that "Patient satisfaction is an important measure of service quality in health care systems" and stated that patients' perceptions about health care systems seem to have been largely ignored by health care managers in developing countries". He developed a reliable and valid instrument to measure patient satisfaction in Turkey. A questionnaire was developed and a total of 1100 patients in 31 different hospitals were interviewed. 78% reported that it was their first time to interact with health managers towards improving health services. The next chapter discusses the methodology that was employed in the study.

CHAPTER THREE: METHODOLOGY

3.0 INTRODUCTION

This chapter explains the methods which were used in the study. It covers the following sections: study design, study area and population, Sample selection and size, plan for data collection, analysis and presentation. Limitation of the study, ethical consideration and dissemination of results.

3.1 The study design

This was a cross sectional study in form of a survey. Structured method for data collection was used in form of Questionnaires.

3.2 Study area and population

The study was carried out in Mubende Hospital out patient department, Mubende District located in Mubende Town Council, Kyaterekera parish. The population in this study was the patients on discharge after attending the clinic. Patients of age 18 years and above participated in this study. These were old enough to express their own perception regarding services rendered to them throughout the whole process of receiving treatment. That is: - reception and triage, health education, counseling, examination, investigation, dispensing, and discharge. Only Out patients participated in this study.

3.3 Sample selection and size

Three hundred and eighty four Respondents participated in this study.

This sample size of 384 was reached at basing on Krejcie and Morgans's table as cited in Amin (2005:454) states that, for any population beyond 100,000 a sample of 384 is representative. Mubende Hospital serves a population of approximately 1.2 million people thus a convenient sample of 384 Respondents were selected participant in this study.

3.4 Instrument for data collection

Data was collected using structured Questions in form of questionnaires, which were administered to respondents at their exit from the clinic. The questionnaire had 3 sections. Questions in section A and C, respondents were required to choose one correct answer from a number of multiple choice questions. Responses for questions in section B were rated on scale ranging from strongly agree to strongly disagree whereby respondents were required to choose one appropriate response A trained research assistant was available to provide clarification. Respondents who were not able to read or write, the research assistant interpreted the Questionnaire to them and their responses were recorded appropriately.

3.5 Data processing and analysis

All Questionnaires were edited for completeness and accuracy, information collected was analyzed using frequency distribution tables, Microsoft excel and Epi info.

3.6 Data presentation. Data was presented using frequency distribution tablets, pie charts, bar graphs and percentages.

3.7 Limitation of the study

The study was selective to include respondents within Mubende Hospital boundary on discharge from the Out Patient Department, respondents of age eighteen years and above were contacted. A convenient sample of 384 respondents was used. Data was corrected in a specified period of two months

3.8 Ethical consideration

All respondents were informed of the purpose of the study and consent form was availed for them to sign. Only respondents who consented after listening to objectives were included in the study. Respondents were assured that their identity would be known only to the researcher. Information was kept confidential and used for study purpose. Permission to conduct the study was sought from Kampala International University and Mubende Hospital administration.

3.9 Dissemination of results

After completion of the study, copies of the research report were distributed to Kampala International University, Mubende Hospital and Mubende local Government.

3.10 Review

The above methods were used to successfully conduct this study to correct data, analysis ,presentation and dissemination of results. The next chapter presents the findings of the study.

CHAPTER FOUR FINDINGS OF THE STUDY






4.0. INTRODUCTION

This chapter presents findings of the study done to assess patients' perception of the health services offered in Mubende Hospital. The data is presented for analysis in different forms using frequency distribution tables, bar graphs, line graphs and pie charts. Data is presented in the order from social demographic characteristics of respondents, perception of respondents and patients waiting time.

4.1 Social - Demographic characteristics of respondents.

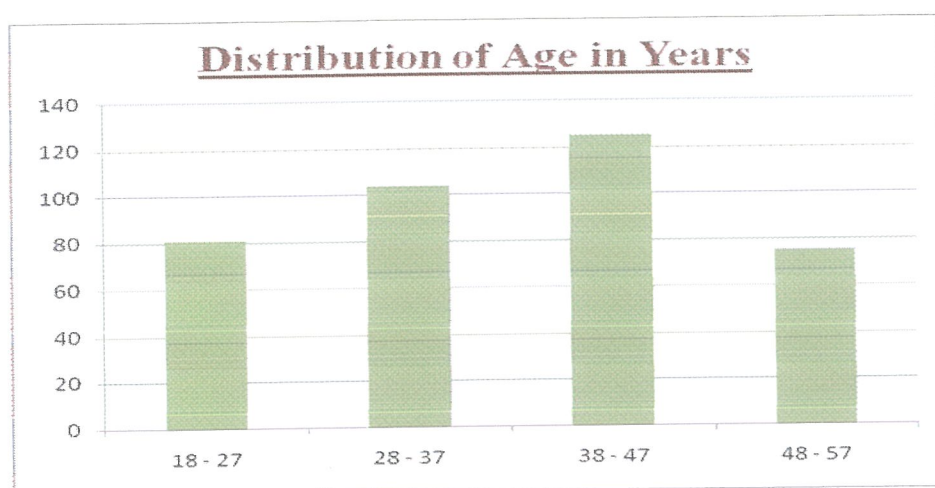
Presentation of social demographic characteristics of respondents using parameters such as age, sex, occupation, marital status, level of education and area of residence (proximity to hospital).

4.1.1 Table I Age distribution of Respondents

Age range in years.	Frequency	Percent	Cum Percent	
18 – 27	81	21.0%	21.0%	
28 – 37	104	27.0%	48.1%	
38 – 47	125	32.5%	80.5%	
48 – 57	75	19.5%	100.0%	
Total	384	100.0%	100.0%	

The respondents were fairly distributed across all the age groups with the most lying between the age group of 38 – 47 with a percentage of 32.5% followed by the age group of 28-37 at 27%, 18-27 at 21% and finally the age group of 48-57 at 19.5%.

Figure I Age distribution of respondents.



4.1.2 Table II Respondents' gender.

Sex	Frequency	Percent	Cum Percent	
F	193	50.3%	50.3%	<div></div>
M	191	49.7%	100.0%	<div></div>
Total	384	100.0%	100.0%	<div></div>

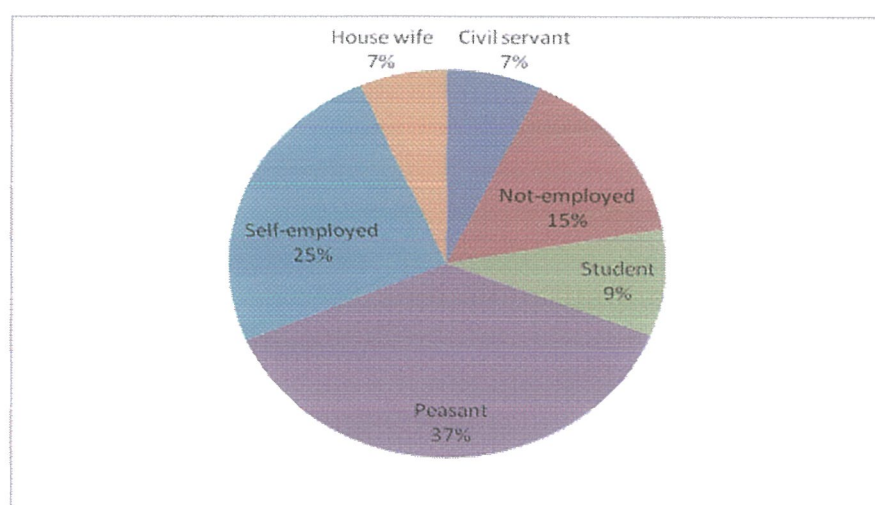
50.3% respondents were females while 49.7% were males.

4.1.3 Table III Occupation of respondents

Occupation	Frequency	Percent	Cum Percent	
Civil servant	27	7.0%	7.0%	
Not-employed	58	15.1%	22.1%	
Student	34	8.9%	31.0%	
Peasant	144	37.5%	68.5%	
self-employed	96	25.0%	93.5%	
House wife.	25	6.5%	100.0%	
Total	384	100.0%	100.0%	

Only 32% of the population of respondents are employed whereby 7% of those are civil servants and 25% are self employed while the rest are unemployed and these comprise of peasants, house wives and students

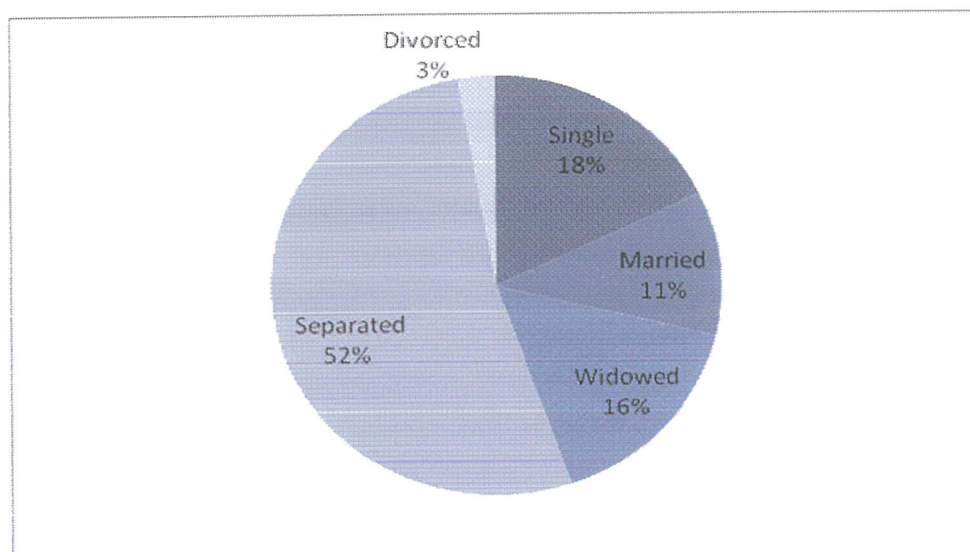
4.1.4 Figure II Pie Chart Showing Occupation of respondents



4.1.5 Table IV Marital status







Marital status	Frequency	Percent	Cum Percent	
Single	68	17.9%	17.9%	
Married	42	11.1%	28.9%	
Widowed	60	15.8%	44.7%	
Separated	200	52.6%	97.4%	
Divorced	10	2.6%	100.0%	
Total	380	100.0%	100.0%	

4.1.6 Figure III Pie Chart showing Marital Status of respondents



52.6% of are separated, 17.9% were single, 15.8 were widowed, 11.1% married and 2.6% divorced.

4.1.7 Table V Level of education

5. Level of education	Frequency	Percent	Cum Percent	
None	63	16.4%	16.4%	
Primary	133	34.7%	51.2%	
Secondary	138	36.0%	87.2%	
Tertiary	40	10.4%	97.7%	
University	9	2.3%	100.0%	
Total	384	100.0%	100.0%	

The level of education of the respondents is relatively good with 36% having attended secondary school, 34.7% have had primary education 10.4% completing tertiary education and only 2.3% have gone to university. 16.4% of the population have not had any form of formal education.

4.1.8 Table VI Area of Residence

Address (county)	Frequency	Percentage
BUGANGAYIZI	16	4.17%
BUWEKLULA	262	68.23%
BUYAGA	30	7.81%
GOMBA	1	0.26%
KASANDA.N	9	2.34%
KASANDA.S	32	8.33%
KYAKA	30	7.81%
LWEMIYAGA	3	0.78%
MAWOGOLA	1	0.26%
Total	384	100.00%

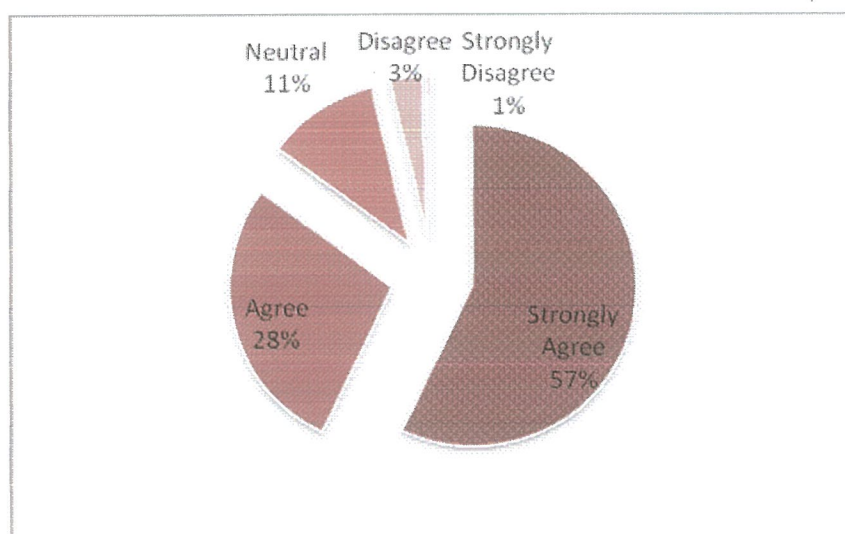
The hospital mainly receives patients from the county of Buwekulula. The study shows that 68.23% of the respondents are from Buwekulula the rest of the people coming from other areas as shown above.

4.2 Perception of Respondents

4.2.1 Table VII Hospitality of the Gatemen

At the entrance to the hospital, I was fairly handled by the Askaris	Frequency	Percent	Cum Percent	
Strongly Agree	219	57.2%	57.2%	<div style="width: 57.2%;"></div>
Agree	107	27.9%	85.1%	<div style="width: 27.9%;"></div>
Neutral	43	11.2%	96.3%	<div style="width: 11.2%;"></div>
Disagree	12	3.1%	99.5%	<div style="width: 3.1%;"></div>
Strongly Disagree	2	0.5%	100.0%	<div style="width: 0.5%;"></div>
Total	383	100.0%	100.0%	<div style="width: 100%;"></div>

Figure IV Hospitality of the Gateman



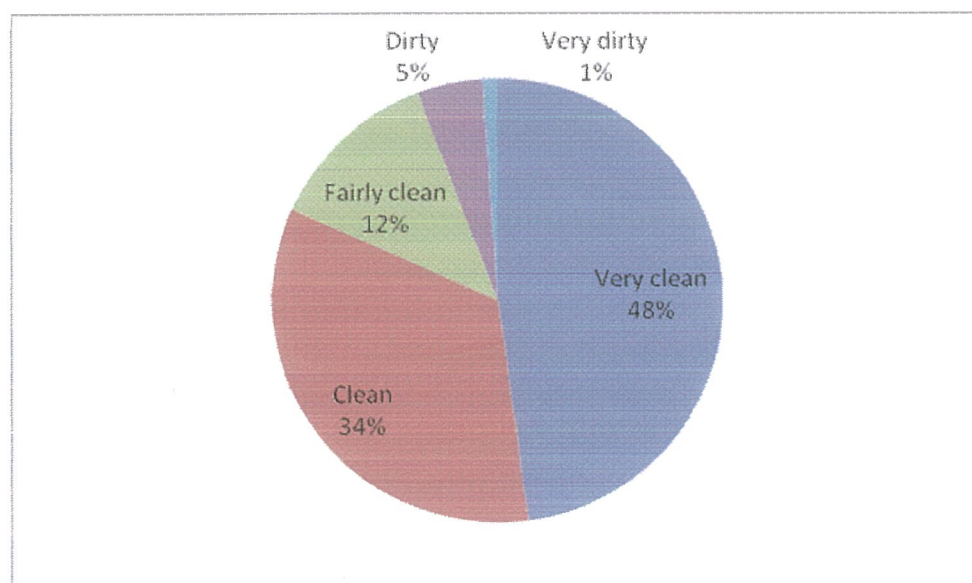
The hospitality of the gatemen at Mubende hospital is good as a very high percentage of 96.3% of the respondents agree that they were handled very well by the gatemen where as only 3.6% disagree with this.

4.2.2 Table VIII

Cleanliness of the Hospital Environment

When I entered the hospital, the environment was generally clean and adequate for hospital set up.	Frequency	Percent	Cum Percent	
Strongly agréé/very clean	184	47.9%	47.9%	
Agree /clean	130	33.9%	81.8%	
Neutral/fairly clean	48	12.5%	94.3%	
Disagree/dirty	18	4.7%	99.0%	
Strongly Disagree/very dirty	4	1.0%	100.0%	
Total	384	100.0%	100.0%	

Figure V Pie Chart Showing Cleanliness of Hospital Environment



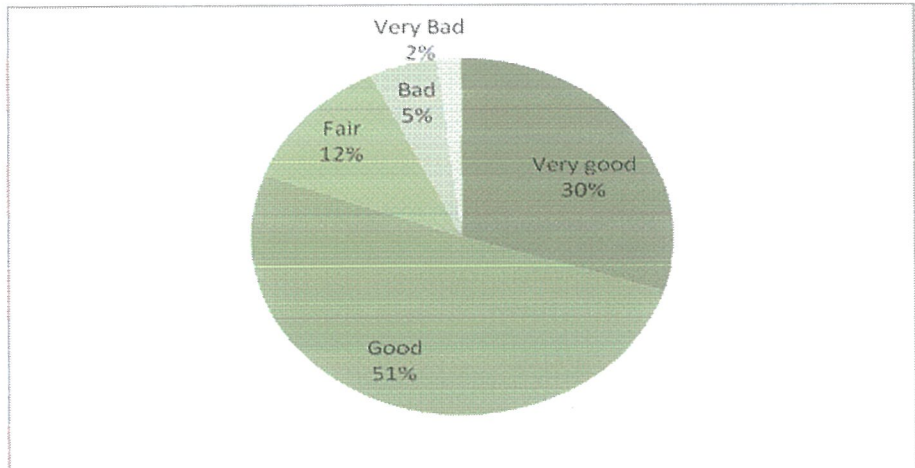
94.3% of the respondents agree that the hospital is fairly clean enough for hospital standards 5.7 % of them say that the hospitals cleanliness is not up to

standard of a good hospital and they suggest improvement in the cleanliness service in the hospital.

4.2.3 Table IX Reception at OPD

At OPD reception I found a staff to receive me and directed me where to go.	Frequency	Percent	Cum Percent	
Strongly Agree /very good.	115	29.9%	29.9%	
Agree /Good	195	50.8%	80.7%	
Neutral / Fair	47	12.2%	93.0%	
Disagree / Dad	20	5.2%	98.2%	
Strongly Disagree / Very bad	7	1.8%	100.0%	
Total	384	100.0%	100.0%	

Figure VI Pie Chart showing perception of patients about Reception at OPD



Most of the respondents 79% commented that the reception was good, they found a staff at OPD reception and they were directed where to go. 12.2 % commented that reception was fair, However 5% and 2% commented that the reception was bad and very bad respectively.

4.2.4 Table X Professionalism of the Nurses at OPD






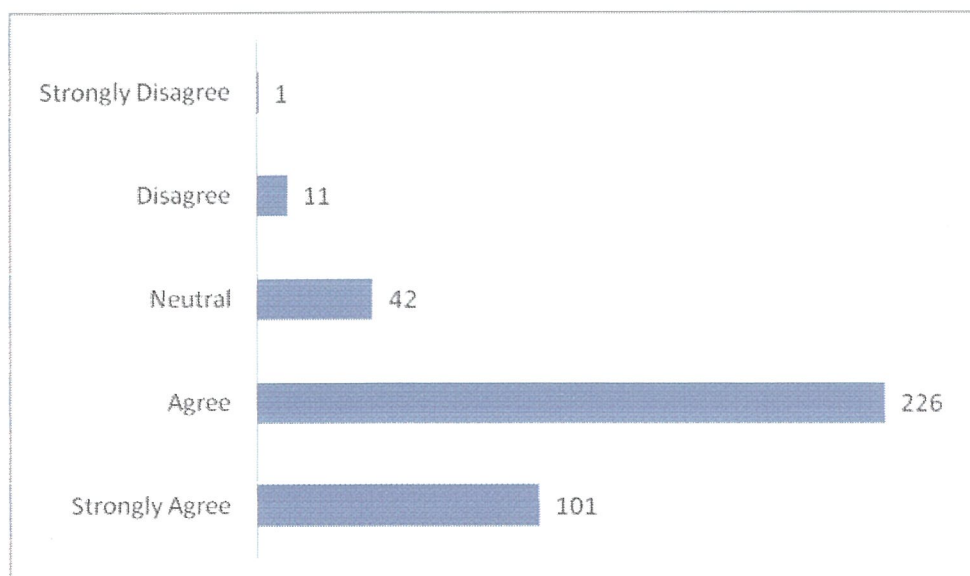






The Nurses in OPD clinic handled me well and professionally.	Frequency	Percent	Cum Percent	
Strongly Agree	101	26.5%	26.5%	
Agree	226	59.3%	85.8%	
Neutral	42	11.0%	96.9%	
Disagree	11	2.9%	99.7%	
Strongly Disagree	1	0.3%	100.0%	
Total	381	100.0%	100.0%	

Figure VII The Nurses at OPD are Professional


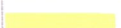






85.8% of respondents agree that the nurses at OPD are professional, 11% find the nurses ok while 3.2% of the patients think that these nurses act unprofessionally while carrying their duties at OPD. The handling of patients by staff of the hospital is relatively good with 96.9% of the respondents saying that on arrival at the hospital they were well handled by the staff of the hospital.

4.2.5 Table XI Professionalism of Doctors at OPD


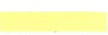




The Doctor /Clinical Officer in OPD clinic Handled me well and professionally.	Frequency	Percent	Cum Percent	
Strongly Agree	99	25.8%	25.8%	
Agree	227	59.1%	84.9%	
Neutral	40	10.4%	95.3%	
Disagree	12	3.1%	98.4%	
Strongly Disagree	6	1.6%	100.0%	
Total	384	100.0%	100.0%	

4.2.6 Table XI Doctor/Clinical officer listen to client.

The Doctor/clinical officer allowed me to explain my illness and he listened to me.	Frequency	Percent	Cum Percent	
Strongly Agree	101	26.3%	26.3%	
Agree	211	54.9%	81.3%	
Neutral	35	9.1%	90.4%	
Disagree	23	6.0%	96.4%	
Strongly Disagree	14	3.6%	100.0%	
Total	384	100.0%	100.0%	

The doctors/clinical staff of the hospital listen to patients and allow them to explain their health problems. This allows for proper diagnosis and treatment of the patients. It also shows that the doctor patient relationship in this hospital is very good and this has been reflected by the high number of patients who agree to come back to this hospital in case they fall sick again.

4.2.7 Table XIII Provision of information by Health Workers to Patients

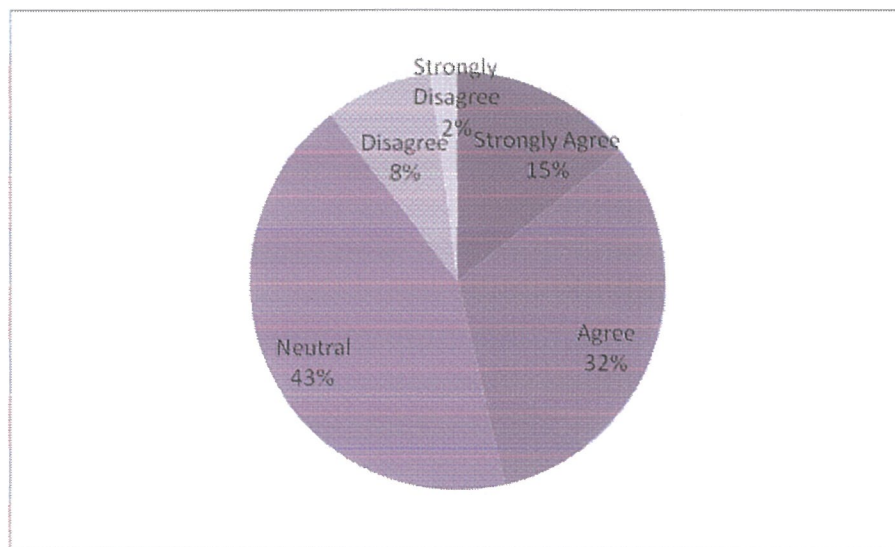
The health worker gave me adequate information and education about how to take my prescribed medicine.	Frequency	Percent	Cum Percent	
Strongly Agree	69	18.0%	18.0%	
Agree	209	54.4%	72.4%	
Neutral	68	17.7%	90.1%	
Disagree	23	6.0%	96.1%	
Strongly Disagree	15	3.9%	100.0%	
Total	384	100.0%	100.0%	

72.4% of the patients agree that the staff of the hospital provide adequate information and education about their health problem and the drug prescription they have been given by the doctors so they leave the hospital satisfied with the information given to them. While 9.9% of the patients disagree with this.

4.2.8 Table XIV Understanding use of Prescribed Medicines.

I understood fully how to use my prescribed medicines	Frequency	Percent	Cum Percent	
Strongly Agree	55	14.3%	14.3%	<div style="width: 14.3%;"></div>
Agree	123	32.0%	46.4%	<div style="width: 32.0%;"></div>
Neutral	166	43.2%	89.6%	<div style="width: 43.2%;"></div>
Disagree	32	8.3%	97.9%	<div style="width: 8.3%;"></div>
Strongly Disagree	8	2.1%	100.0%	<div style="width: 2.1%;"></div>
Total	384	100.0%	100.0%	<div style="width: 100%;"></div>

Figure VII Pie chart showing understanding use of prescribed medicines.

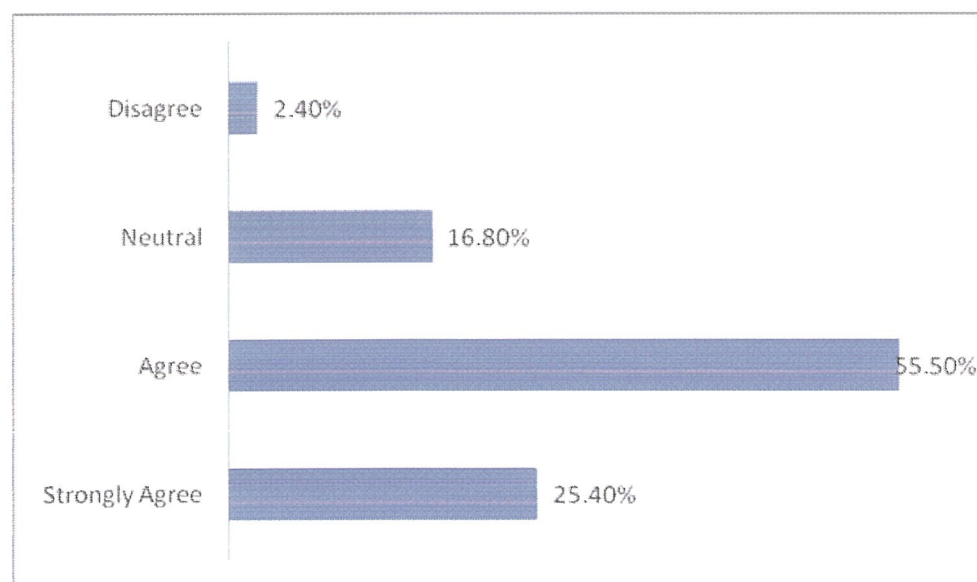


Due to the good doctor patient relationship and good hospitality of the staff 90% of the patients fully understand the prescription of medicines by the doctors/clinical staff of the hospital.

4.2.9 Table XV SERVICE PROVISION






The services offered to me while in Mubende hospital is generally good and adequate.	Frequency	Percent	Cum Percent	
Strongly Agree	97	25.4%	25.4%	<div></div>
Agree	212	55.5%	80.9%	<div></div>
Neutral	64	16.8%	97.6%	<div></div>
Disagree	9	2.4%	100.0%	<div></div>
Strongly disagree	0	0.0%	100.0%	
Total	382	100.0%	100.0%	<div></div>

Figure X Quality of service is good and adequate



The results show that service delivery by support staff, doctors and clinical staff of the hospital is very good since 97.6% of the respondents claim that the services offered by the hospital are very good.

4.2.10 Table XVI Patient - Staff Relationship

I have observed that health workers communicate and behave well among patients	Frequency	Percent	Cum Percent	
Strongly agree	151	39.4%	39.4%	
Agree	167	43.6%	83.0%	
Neutral	53	13.8%	96.9%	
Disagree	11	2.9%	99.7%	
Strongly Disagree	1	0.3%	100.0%	
Total	383	100.0%	100.0%	

4.2.11 Table XVII Return to Mubende Hospital for treatment.







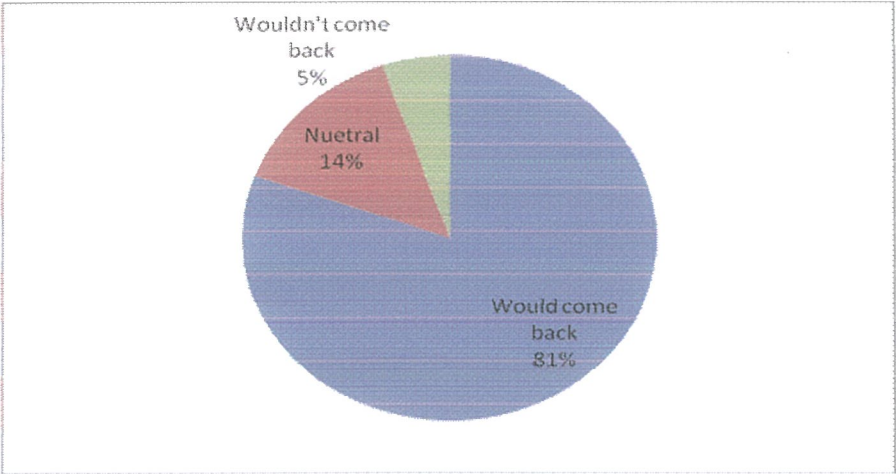
If I fall sick again, I would like to come back to Mubende hospital for treatment	Frequency	Percent	Cum Percent	
Strongly Agree/	205	53.7%	53.7%	
Agree	103	27.0%	80.6%	
Neutral	54	14.1%	94.8%	
Disagree	13	3.4%	98.2%	
Strongly Disagree	7	1.8%	100.0%	
Total	382	100.0%	100.0%	

Figure XI **Table XVII Return to Mubende Hospital for treatment.**



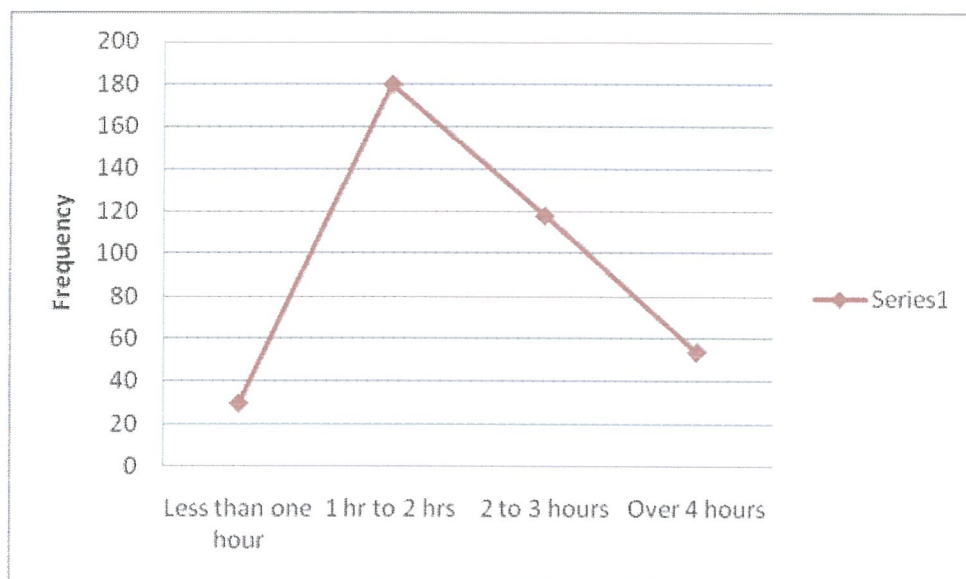
80.6% of the patients would choose to come back in case they fall sick again with only 5.2% who would not come back to Mubende hospital in case they fell sick again.

4.3 SECTION C

Table XVIII Patient’s Waiting Time

1. For how long have you waited to receive service in the clinic?	Frequency	Percent	Cum Percent	
Less than one hour	30	7.9%	7.9%	<div></div>
1 hr to 2 hrs	180	47.1%	55.0%	<div></div>
2 to 3 hours	118	30.9%	85.9%	<div></div>
Over 4 hours	54	14.1%	100.0%	<div></div>
Total	382	100.0%	100.0%	<div></div>

Figure XII Line Graph showing Time Taken by Patients to receive service

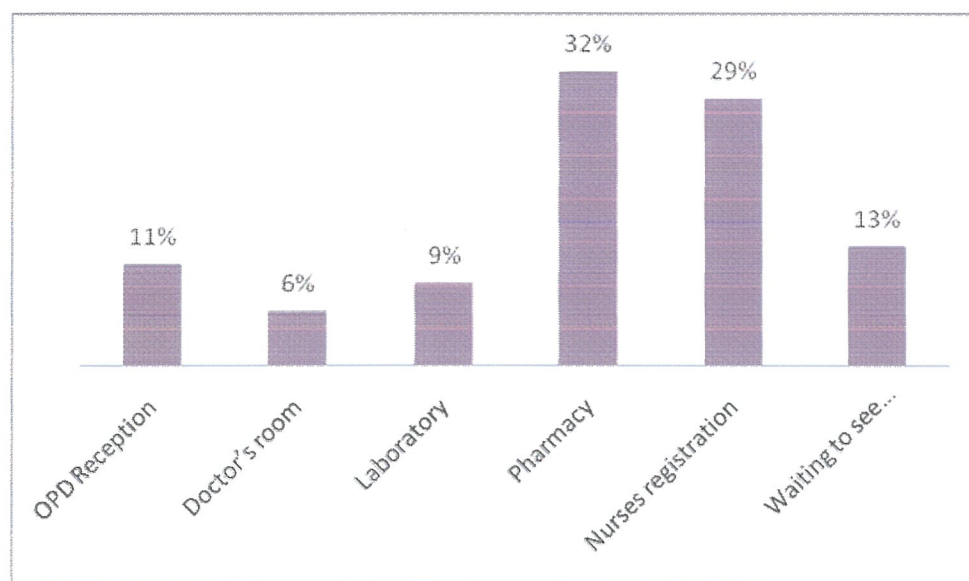


A patient has to wait for an average of 2 hours before they can receive medical attention, only 7.9% of the patients at the hospital receive treatment within an hour of arrival at the hospital while the rest have to wait for 2 - 4 hours or even more and this has been attributed to high patient to staff ratio with most respondents recommending the increase in staff members.

Table XIX Patients' waiting time.

2. Which areas did you spend more time waiting?	Frequency	Percent	Cum Percent	
OPD Reception	43	11.3%	11.3%	<div></div>
Doctor's room	22	5.8%	17.0%	<div></div>
Laboratory	35	9.2%	26.2%	<div></div>
Pharmacy	121	31.7%	57.9%	<div></div>
Nurses registration	110	28.8%	86.6%	<div></div>
Waiting to see Doctor/Clinical Officer	51	13.4%	100.0%	<div></div>
Total	382	100.0%	100.0%	<div></div>

Figure XIII Patients' waiting time.

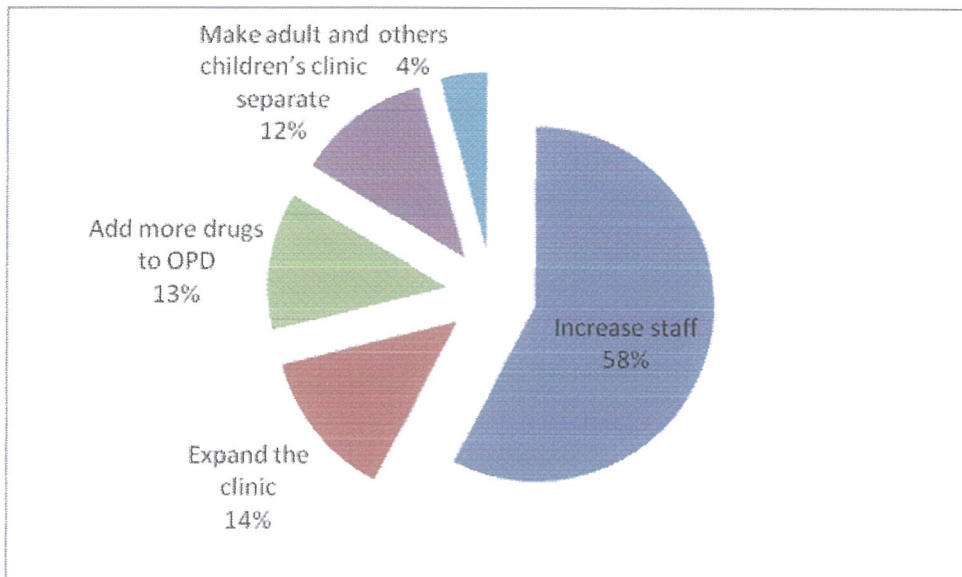


32% of the patients waited more at the pharmacy than any other department, with the next most time spent to get medical attention by patients was when waiting at nurses registration with 29%. The least time spent at the hospital by patients was when they were in the doctor's room.

Table XX Improvement of services.

3. How do you think services can be improved in Mubende hospital out patient clinic?	Frequency	Percent	Cum Percent	
Increase staff	219	57.5%	57.5%	
Expand the clinic	52	13.6%	71.1%	
Add more drugs to OPD	48	12.6%	83.7%	
Make adult and children's clinic separate	46	12.1%	95.8%	
others specify	16	4.2%	100.0%	
Total	381	100.0%	100.0%	

Figure XIV Improvement of services.



57.5% of the patients suggested that the hospital should increase staff if service provision at the hospital is to improve while 13.6% of them recommended an expansion of the clinic, 12.6% call for increase of drugs at the out patients department, 12.1 call for a different depart for adult and children i.e. paediatrics department should be introduced at the hospital.

4.4 Summary

The above findings indicate that respondents of age group 38 – 47 participated more in this study. Males and females were more less the some, and most respondents were peasants. Perception of respondents to the services offered in the Hospital is good. Patients wait relatively longer to receive services in the hospital. The next chapter discusses the findings, draws conclusions and makes recommendations from the study.

CHAPTER FIVE: DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

This chapter discusses the findings of this study. 384 respondents participated in the study. The 384 completed questionnaires were analyzed according to the major variables of the study. These included:

- i) Demographic characteristics of the Respondents.
- ii) Perception of respondents towards health service delivery in Mubende hospital.
- iii) Respondents waiting time in Mubende hospital Out patient Department

The results of the study were discussed in the above order.

Conclusions and Recommendations are made based on the findings.

5.1.1 Social demographic characteristics of respondents

The social demographic characteristics of respondents indicates that respondents were fairly distributed across all the age groups with the most lying between the age group of 38 – 47 with a percentage of 32.5% followed by the age group of 28-37 at 27%. People in these age brackets are more exposed to health hazards such as occupational risks, reproductive health hazards, accidents and other psychosocial factors. These predispose them to seeking health services

more than the age group of 18-27 at 21% which is dominated by students and other youths. Males and females participated equally in this study.

Only 32% of the population of respondents are employed whereby 7% of those are civil servants and 25% are self employed while the rest are unemployed and these comprise of peasants, house wives and students. The unemployed categories mostly seek free health services from the government health facility.

Mubende regional referral hospital is located in Buwekula county and receives most patients (68.23%) from Buwekulula. The rest of the respondents significantly come from counties of Kasanda.s ,Kyaka and Buyaga.

The level of education of the respondents is relatively good with 36% having attended secondary school, 34.7% have had primary education .Universal primary and secondary education has a contribution to improved level of education. 10.4% completing tertiary education and only 2.3% have gone to university. 16.4% of the population have not had any form of formal education probably the Universal education programme was introduced when they were already old.

5.1.2 Perception of Respondents

At the entrance to the Hospital, the hospitality of the gatemen is good as a very high percentage of 96.3% of the respondents agree that they were handled very well by the gatemen where as only 3.6% disagree with this. Good handling at the gate includes opening the gate, greeting and directing a client. However mishandling would include refusal of a client or attendants to enter the Hospital or any inappropriate response by Askaris.

Cleanliness of Hospital Environment: 94.3% of the respondents agree that the hospital is fairly clean enough for hospital standards by looking at the general out look of infrastructure and compound. 5.7 % of them say that the hospitals cleanliness is not up to standard of a good hospital and they suggest improvement in the cleanliness of the hospital.

Reception at OPD: Most of the respondents 79% commented that the reception was good, they found a staff at OPD reception Who received them triaged and they were directed where to go for subsequent service. However 5% and 2% commented that the reception was bad and very bad respectively.

Professionalism of the Nurses at OPD: 85.8% of respondents agree that the nurses at OPD are professional. 11% find the Nurses ok, That is to say they are good in terms of conduct and behaviours. While 3.2% of the patients think that these Nurses act un professionally while carrying their duties at OPD. The handling of patients by staff of the hospital is relatively good with 96.9% of the

respondents saying that on arrival at the hospital they were well handled by the staff of the hospital. However there is still a need to investigate why the 3.6% were handled unprofessionally so that the gap in service delivery is bridged before is too wide.

Professionalism of Doctor/Clinical officer at OPD: The doctors/clinical staff of the hospital listen to patients and allow them to explain their health problems. This allows for proper diagnosis and treatment of the patients. It also shows that the doctor patient relationship in this hospital is very good and this has been reflected by the high number of patients who agree to come back to this hospital in case they fall sick again. This indicates that health workers in Mubende Hospital observe patients' rights as speculated in Uganda National Health Users'/Consumers' Organization UNHCO (2005) that patients have a Right to know basic treatment available and adequate information regarding their illness, diagnosis, treatment and risk involved. However the findings of this study disagrees with the findings of UNHCO in the research done in Malawi in (2006) to assess peoples' perception on the quality of public health services in which Results showed that the public health services reputation is affected by elements of discriminatory attitude towards people belonging to low socio-economic strata, and lack of communication between health workers and patient

Provision of information by health workers to patients regarding use of prescribed medicines.

72.4% of the patients agree that the staff of the hospital provide adequate information and education about their health problem and the drug prescription they have been given by the doctors, so they leave the hospital satisfied with the information given to them. While

9.9% of the patients disagree with this. The findings of this study are in agreement with the findings of Kemp (2008), who conducted a similar study to assess how clients understand instruction regarding use of prescribed drugs from pharmacy in three public hospitals in India..He found out that Sixty-nine clients(71%) understood the information communicated to them and reported rightly how to take their medicines. However 5 clients (6%) denied having received any communication from a health worker about the use of drugs and did not know what to do with their drugs.

Quality of services delivered: The researcher has concluded that service delivery by support staff, doctors and clinical staff of the hospital is very good since 97.6% of the respondents perceived that the services offered by the hospital are generally very good.

Patient - staff relationship

Health workers conduct among patients in terms of behaviour and communication is very good. 97% of respondents stated that health workers

communicate and behave well among patients. 3% disagreed, and stated that health workers poorly communicate and misbehave among patients.

Because the service offered to patients in the hospital is generally good, 80.6% of the respondents would choose to come back in case they fall sick again with only 5.2% who would not come back to Mubende hospital in case they fell sick again.

5.1.3 Patients' Waiting Time

A patient has to wait for an average of 2 hours before they can receive medical attention, only 7.9% of the patients at the hospital receive treatment within an hour of arrival at the hospital while the rest have to wait for 2 - 4 hours or even more and this has been attributed to high patient to staff ratio with most respondents recommending the increase in staff members. A similar study was conducted to assess outpatient waiting time in Hospital University Kebangsaan Malaysia (HUKM), it was revealed that average waiting time for patients to see a Doctor was 4-5 hours which would give a negative perception on the quality of service in outpatient clinic at HUKM. The recommended waiting time .OPD by WHO is It was also noted that after a long waiting time, patients spent short time intervals with the physician (Mohamad, 2005) Likewise in Mubende Hospital, 32% of the patients waited more at the pharmacy than any other department, with the next most time spent to get medical attention by patients was when waiting at nurses registration with 29%. The least time spent at there

hospital by patients was when they were in the doctor's room. Much as majority of respondents report having had adequate time to explain their complaints to Doctors and Clinical officers, results show that least time was spent in Doctors'/Clinical Officers' room.

When respondents were asked how services could be improved in the Hospital, the responses were: 57.5% of the patients suggested that the hospital should increase staff if service provision at the hospital is to improve while 13.6% of them recommended an expansion of the clinic, 12.6% call for increase of drugs at the out patients department, 12.1% call for a different department for adult and children i.e. paediatrics department should be introduced at the hospital

5.2 CONCLUSIONS.

With regard to the findings of the study and the foregoing discussions, the following conclusions are made.

The findings of this study indicate that perception of patients receiving services in Mubende Hospital is generally good in view of the following parameters: Clients receive good hospitality at the entrance to hospital, general cleanliness of the hospital is good, health workers are always available to receive the client and handle them professionally .patients receive adequate information and education regarding their illness and the use of prescribed medicines. However clients wait longer hours to receive appropriate attention.

5.3 RECOMMENDATIONS

The recommendations of this study are addressed to the following categories of people.

Policy Makers /Politicians: Need to be part of the health care team and always present research based data while addressing general public.

Ministry of public service in collaboration with Ministry of Health need to train, recruit and retain more health workers in the Hospital.

Mubende Hospital Administration should re-organise the outpatient department, the triage system and allocate more staff so that the waiting time is reduced. The administration also need to consider patients opinions for improving Hospital services such as increase staff , expansion of the clinic, increase of drugs at the out patients department, a different depart for adult and children i.e. paediatrics department should be introduced at the hospital.

Staff of Mubende Hospital, need to improve more in communication and provide full information and counselling to patients/clients regarding their illnesses and use of prescribed medicines. There should be refresher courses to orient staff on the above subject. More Studies on the subject of assessing perception of service delivery are recommended in other departments in Mubende Regional Referral Hospital and other health facilities.

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CONSENT FORM:

Purpose of the study: To assess Out patients' perception of health service delivery in Mubende Hospital..

I -----, having been fully explained the objective of the study; I understand my participation is voluntary and that there will be no reward for my participation. I further understand that I may choose not to participate or withdraw my participation at any time with out penalty. I understand my decision to participate or not will not affect the care I receive in Mubende Hospital. I understand that the response I give will be kept confidential, my identify will be only know to the researcher.

I agree to participate in this study by filling in the questionnaire. I will attempt to answer the questions to the best of my ability.

Participant's Signature

Researchers/Research assistance's signature

Date...-----

PERMISSION LETTER

Kampala International University

P.O.Box 20000 Kampala

Date 07 / 12 /2006

The Medical superintendent

Mubende Regiona Referral Hospital.

P.O.Box 4 Mubende

Dear Sir,

RE: PERMISSION TO COLLECT INFORMATION FROM MUBENDE OUT PATIENT CLINIC.

I wish to inform you that I am a student of the above institution pursuing a Masters degree in project planning and management. I am required to prepare an individual research project as partial fulfillment for the award of a master's degree. The purpose of this letter therefore, is to request your permission to carry out this study in Mubende Hospital out patient clinic and involve patients to fill-in questionnaires with information regarding their perception towards health service delivery in the out patient clinic. I will be very grateful for all the necessary support and guidance which will enable me to complete the research project successfully.

Yours faithfully,

Sendikaddiwa V. Bosco

MPM/10016/81/DU

QUESTIONNAIRE .1

This study is aimed at assessing patients' perception of the health services offered in the out patient clinic of Mubende Hospital.

Instructions:

- You are requested not to write your name on the sheets because all the information given here will be kept confidential.
- Read the questions carefully.
- Where necessary choose and fill one answer of your choice.
- Ask the researcher about the question which you do not understand.

Respondents Number, -----

Section A Social - Demographic characteristics of respondents.

Instructions choose and tick the appropriate answer.

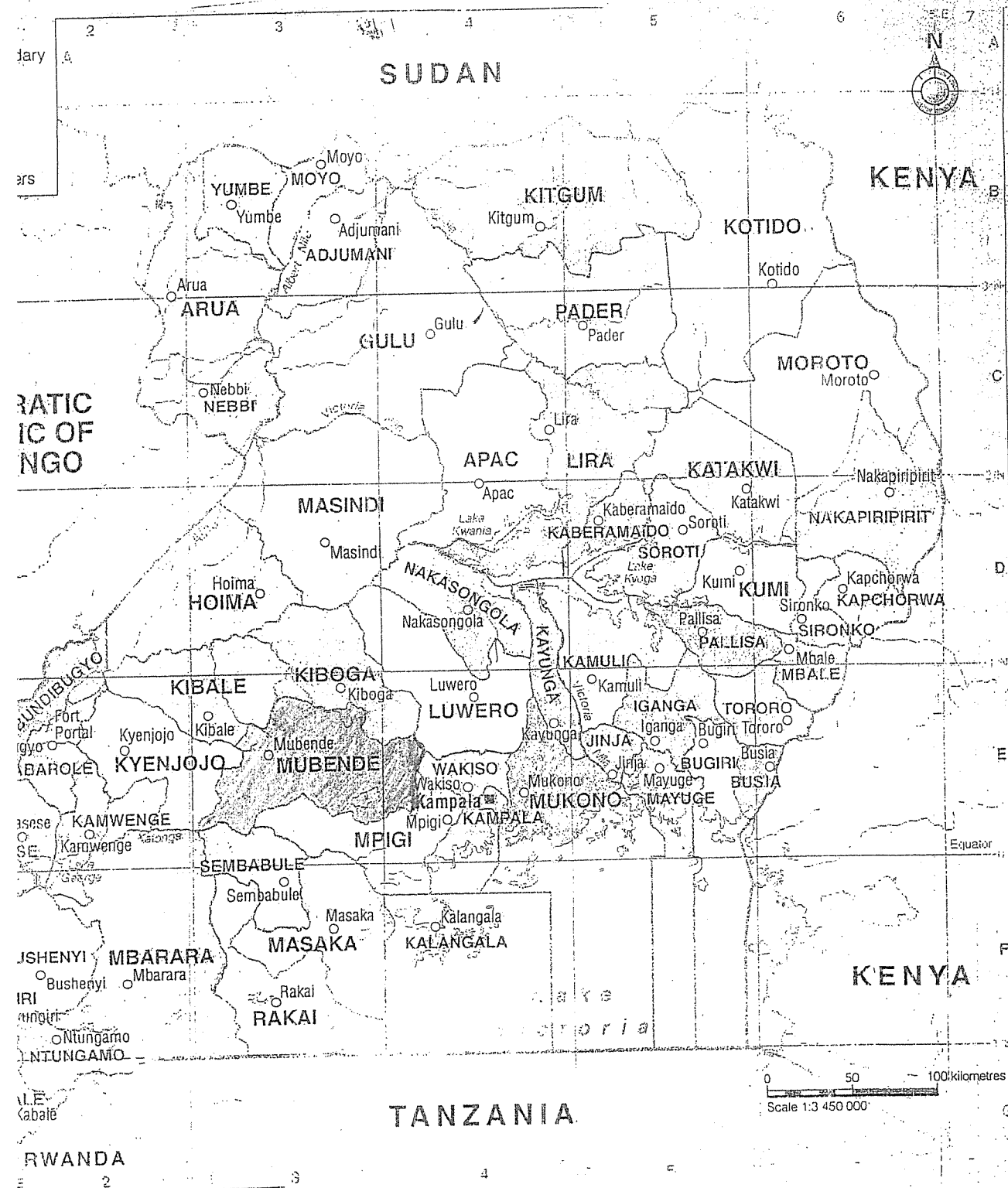
1. Age (Adult) in years, choose appropriate age range.
(a) 18 – 27 (b) 28 – 37 (c) 38 – 47 (d) 48 -57 (e) >58
2. Sex (a) Male..... (b) Female
3. Occupation
(a) Civil servant (b) Not-employed (c) Student
(d) Peasant (e) self-employed (f) House wife.
4. Marital status
(a) Single (b) Married (c) Widowed (d) Separated (e) Divorced
5. Level of education
(a) None (b) Primary (c) Secondary (d) Tertiary (e) University
Instruction: write the county where you come from.
6. Address (county) -----

Section B Perception of respondents

Question 1 to 14 in this section, responses are rated on scale ranging from 1 to 5 , meaning as follows : 1 **strongly agree**. 2 **agree**, 3 **neutral** ,4 **diagree**, 5 **strongly disagree**.

1	At the entrance to the hospital, I was fairly handled by the Askaris	1	2	3	4	5
2	When I entered the hospital, the environment was generally clean and adequate for hospital set up.	1	2	3	4	5
3	At OPD reception I found a staff to receive me and directed me where to go.	1	2	3	4	5
4	The staff handled me well and professionally while in the clinic	1	2	3	4	5
5	I received a staff to work on me immediately; with in two hours I had left the clinic.	1	2	3	4	5
6	I spent adequate time discussing with the health worker about my illness	1	2	3	4	5
7	The healthy worker gave me adequate information and education about how to take my prescribed medicine.	1	2	3	4	5
8	I understood fully how to use my prescribed medicines	1	2	3	4	5
9	The services offered to me while in Mubende hospital is generally good and adequate)	1	2	3	4	5
10	I feel satisfied by the way my problem is managed while in the hospital	1	2	3	4	5
11	I have observed that healthy workers communicate and behave well among patients	1	2	3	4	5
12	If I fall sick again, I would like to come back to Mubende hospital for treatment	1	2	3	4	5

Appendix 6 MAP OF UGANDA SHOWING MUBENDE DISTRICT



MUBENDE DISTRICT.

MUBENDE DISTRICT ADMINISTRATION

R.Cc	I	1154
	II	131
	III	20
	IV	4
	V	1

TOTAL POPULATION 497500
SQUARE KILOMETER 6327

LAND AREA

DA P.O. Box Phone: 8

Adm. P.O. Box 93 Phone: 15

D.C. P.O. Box 1 Phone: 15

