

Original Article

Quality of Care: View of Patient Satisfaction with Physiotherapy in Government and Private Settings in Dhaka, Bangladesh

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Abstract :

Patients' satisfaction plays an important role to attract patients for health services. It has not been closely monitored in physiotherapy; limited studies exist in this area of allied health services. The objective of the study was to determine the level of satisfaction of patients at the government and private hospitals in Dhaka and to compare between two facilities. This descriptive type of cross-sectional study was carried out with patients who sought physiotherapy care at the outdoor of Physical Medicine Department of the Dhaka Medical College Hospital (DMCH) and the Centre for Rehabilitation of Paralyzed (CRP), Mirpur, Dhaka. In total, 150 patients - 75 from each setting were interviewed. Appropriate research instruments comprising a structured and semi-structured questionnaire developed by the American Physical Therapy Association (APTA) were administered by interviewers to collect data. To find out any association among the socio-demographic characteristics, chi-square test was applied, and the level of satisfaction was measured in percentages to compare between the two settings (government and private). Patients attendance differ because different socio-demographic characteristics and location of physical health problem in two hospital. Location of the hospital, privacy of patients, behaviour of staff members, physical qualities of hospitals (cleanliness, light, ventilation, etc.) had more than 10% variation in the level of satisfaction between the two settings. So, patient satisfaction with physiotherapy is higher in private setting than that in government setting in Dhaka.

Key words : Satisfaction, Physiotherapy, Government, Private.

Introduction :

Patient satisfaction with care is a construct reflecting the overall experience of an individual receiving examination and treatment in a given environment during a specific time period. Measure by self-report, patient satisfaction with care has become a worldwide concern in virtually every health care speciality¹⁻³. Conceptually, patient satisfaction with care can be viewed from the perspective of quality of care and customer service^{3,4}. For example, people who are satisfied with care are more likely to complete a course of treatment; potentially improving their overall

outcomes over those of people who do not return for prescribe care^{5,6}.

Improved attendance also may have positive financial implications for treatment facility by reducing cancellation and these links between satisfaction with care and adherence to treatment may result in improved cost-effectiveness of care^{7,8}. In 1974, the quality of medical care was described as quality of care is effective health care to improve the health status and satisfaction of population, within the resources which society and individual have chosen to spend for that care⁹. The quality of medical care may refer to patient-provider interactions, physical examination, investigation, rational prescribing, nursing care, dietary services, linen services, physical facilities and treatment outcome, etc¹⁰.

Physiotherapy is an important care for some patients. But patients' satisfaction with physiotherapy has yet to measure in Bangladesh. This study tried to understand patients' satisfaction in government and private facilities and to compare between two.

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Materials and Methods :

The study was cross sectional type of comparative in its design with the objective of measuring patient satisfaction on physical therapy. The study was conducted from February to July in 2008. The study was carried out at Out Patient Department (OPD) of physical medicine department of DMCH and CRP, Mirpur, Dhaka. Both of the OPD manages referral patients. In our country these two OPD are prominent physical therapy centers who manage different type of physical therapy related problem and patient from different districts also come here. Though DMCH is a government hospital for physical therapy care, patients have to give user fee (for electrotherapy 24Tk and for exercise therapy 30Tk only). CRP Mirpur also has user fee base physical therapy care depending on patient needs. Usually they charge one hundred and fifty four taka for per physical therapy. That is why these study areas are suitable for the researcher to measure out patient satisfaction on physical therapy. Patient having age less than 14 years and critically injured patient who were unable to respond were excluded. Patients who had received physical therapy at least five days consequently and were coming still in the department were included under study. Sampling method for this study was absolutely purposive. Sample size was total 150. From government hospital seventy five were collected and another seventy five data were collected from private hospital. The non probability sampling procedure was followed. Sample size was determined as per general formula for cross sectional studies. Whatever it could be the sample size for representation of the population. Due to time constraint it was only 150 observations. Face to face interview was taken place for data collection with a structured and semi structured questionnaire of APTA made patient satisfaction questionnaire with some modification. A pretest was held and necessary steps were adopted before collection of data. Researcher had taken positive verbal consent before every interview from the respondent. After necessary coding data were represented by table and to find out any association Chi-square was done through SPSS software.

Results :

The result showed that almost same age group (35-65) people visited both government and private physiotherapy care. Male patients visited the government health facilities 51% and on the other hand it was 62% in private health facilities. Total 9.3% unemployed patients visited government health care system whereas this percentage in the private health care facilities was 4%. No patients with agriculture sectors visited the private health care facilities but 4% patients who are farmers dependent on government health care system. About 50% patients whose income range is 10000-20000 Taka per month received government physiotherapy care but 72% patients whose income more than 30000 Taka per month visited private physiotherapy center. Mean income of patient in government centre was 16000 + 12000 and it was 48000 in private center.

which showed that patients visited private physiotherapy facilities had three time more income than that of the patients visited government physiotherapy facilities. Sixty two percent educated (more than bachelor) patients received care from private system and this number was just inverse for government system (Table-I).

Table-I: Socioeconomic characteristics of respondents

Characteristics	Govt. Dhaka Medical Center for College Hospital (DMCH)	Rehabilitation of the Paralyzed (CRP)
Age (Year)		
15 -35	18(24%)	10(13.2%)
36 -45	17(22.7%)	22(29.3%)
46 -55	17(22.7%)	18(24%)
56 -65	16(21.3%)	16(23.3%)
65 +	7(9.3%)	9(11.9%)
Sex		
Male	51(68%)	47 (62.7%)
Female	24(32%)	28 (37.3%)
Occupation		
Employed	31(41.3%)	36(48%)
Unemployed	7(9.3%)	3(4%)
Agriculture	4(5.3%)	--
Housewife	14(18.7%)	20(20%)
Business	8(10.7%)	9(12%)
Others	11(14.7%)	7(9.3%)
Income		
<10000	40(27%)	9(6%)
10000 -20000	72(48%)	30(20%)
20001 -30000	10(%)	21(14%)
>30000	27(18%)	90(60%)
Education		
>Bachelor	60(40%)	93(62%)
<Bachelor	90(60%)	57(38%)

Most of the patients were suffering from neck, lower back, shoulder and knee pain for both the facilities. (Table II)

Table II: Distribution of respondents with physical location of the problem for which they were receiving physical therapy

Location	DMCH	CRP
Hip	--	1(1.3%)
Neck	18(24%)	14(18.7%)
Lower back	11(14.7%)	24(32%)
Shoulder	15(20%)	4(5.3%)
Foot	9(12%)	4(5.3%)
Hand	2(2.7%)	1(1.3%)
Elbow	3(4%)	2(2.7%)
Knee	12(16%)	19(25.3%)
Other	5(6.7%)	6(8%)
Total	75(100%)	75 (100%)

Most of the patients from both of the hospital understood that physiotherapy is an important medical science. Patients' satisfactions were assessed with different indicators in this study. A question was asked whether physiotherapy is an important medical science,

no patient disagreed from the both settings. A questions was asked on satisfaction with overall quality of care: most the patients answered agree: 29(38.7%), and strongly agree: 36(48%) from government facilities and these number were 38(50.7%) and 18(24%) from private facilities (Table-III)

Table III: Percentage of patient's opinion with different variables

Subjects of Satisfaction		Strongly disagree	Disagree	Neither agree no disagree	Agree	Strongly agree	No experience
Physiotherapy is an important medical science	DMCH	--	--	6(10%)	30(40%)	27(36%)	12(16%)
	CRP	--	--	1(1.3%)	36(48%)	34(45%)	4(5.3%)
Satisfaction with reception	DMCH	3(4%)	15(20%)	4(5.3%)	41(54.7%)	11(14.7%)	1(1.3%)
	CRP	2(2.7%)	18(24%)	7(9.3%)	39(52%)	8(10.7%)	1(1.3%)
Satisfaction with privacy	DMCH	5(6.7%)	19(25.3%)	2(2.7%)	34(45.3%)	12(16%)	3(4%)
	CRP	--	--	--	38(50.7%)	37(49.3%)	--
Satisfaction with provider behavior	DMCH	2(2.7%)	8(10.7%)	1(1.3%)	45(60%)	19(25.3%)	--
	CRP	--	--	1(1.3%)	34(45.3%)	40(53.3%)	--
Satisfied with clinic schedule appointment	DMCH	9(12%)	13(17.3%)	1(1.3%)	36(48%)	15(20%)	1(1.3%)
	CRP	6(8%)	25(33.3%)	2(2.7%)	38(50.7%)	4(5.3%)	--
Satisfied with Treatment provided by physical therapist	DMCH	--	4(5.3%)	6(8%)	48(64%)	15(20%)	2(2.7%)
	CRP	--	1(1.3%)	3(4%)	60(80%)	11(14.7%)	--
Satisfied with waiting Time of first appointment	DMCH	8(10.7%)	17(22.7%)	2(2.7%)	40(55.3%)	8(10.7%)	--
	CRP	1(1.3%)	17(22.7%)	5(6.7%)	48(64%)	2(2.7%)	2(2.7%)
Satisfied with waiting time for follow up visits	DMCH	1(1.3%)	4(5.3%)	1(1.3%)	59(78.7%)	9(12%)	1(1.3%)
	CRP	--	--	--	70(93.3%)	5(6.7%)	--
Satisfied with the problem that understand physical therapists	DMCH	--	3(4%)	2(2.7%)	51(68%)	15(20%)	4(5.3%)
	CRP	--	--	--	62(82.7%)	13(17.3%)	--
Satisfied with the instruction by physical therapists	DMCH	--	1(1.3%)	6(8%)	47(62.7%)	18(24%)	3(4%)
	CRP	--	1(1.3%)	1(1.3%)	47(62.7%)	26(34.7%)	--
Satisfied with the overall quality of care	DMCH	1(1.3%)	5(6.7%)	2(2.7%)	58(77.3%)	8(10.7%)	1(1.3%)
	CRP	--	2(2.7%)	3(4%)	52(69.3%)	18(24%)	--
Satisfied with returning to receive this care if required in future	DMCH	2(2.7%)	3(4%)	2(2.7%)	29(38.7%)	36(48%)	3(4%)
	CRP	1(1.3%)	5(6.7%)	9(12%)	38(50.7%)	18(24%)	4(5.3%)

Discussion :

The present study was attempted to assess the level of satisfaction of the patients with the various aspect of health care in government and private health facilities in Dhaka. Very few similar studies have been done and therefore we had limited data for the comparison. Yet the findings of the survey are quite helpful if they are transformed into actions for improving the quality of health care. It has been shown that socioeconomic background influences the level of patients' satisfaction¹¹. Since the present study was conducted in Dhaka city and as the patients who participated in the study enjoy better socioeconomic status compared to the average population of the country. It is expected that their level of expectation would be high. In this study we found that in private settings from the upper income group population sought physiotherapy care than the patients of government hospitals. It was because of that all the patients were receiving physiotherapy care in a big room in that setting. Most of the patients were satisfied with provider behavior (table-III). It might be that physiotherapy care needs long time and in the mean time patients and providers come many times in contact. So there developed a good relationship between two. In DMCH 8(10.7%) patients showed very disagree with the existing user fee as those were from poor income groups. On the other hand user fee were four times higher at CRP than the DMCH. Patients only 1(1.3%) showed dissatisfaction with health care served by CRP. Previous studies from identified long waiting time and insufficient consultation time as factor contributing to patient dissatisfaction in Bangladesh¹². Yet, overall ratings of providers in our study are positive.

Conclusion :

One of the measures of the quality of health care is by assessing client satisfaction. In this study we have attempted to assess the level of satisfaction of the patients in government and private hospital services. In Bangladesh further studies are needed to understand the patients view for satisfaction with physiotherapy care in government and private settings.

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