

**Research Article****ASSESSING PATIENT PERCEPTIONS OF HEALTHCARE QUALITY IN UDI AND ENUGU SOUTH SECONDARY HEALTH FACILITIES****Johnson, Mary Elizabeth Chisom**

School of Public Health, University of Cape Town, Cape Town, South Africa

DOI: 10.5281/zenodo.19604563

**Abstract**

The increasing demand for high-quality healthcare services has become a central concern in global health systems, particularly in the context of growing patient awareness and heightened expectations. Quality of care, defined as the extent to which health services improve desired health outcomes, is expected to be safe, effective, timely, efficient, equitable, and people-centered. In low- and middle-income countries, however, poor quality care remains a major public health challenge, contributing significantly to preventable morbidity and mortality. Estimates suggest that between 5.7 and 8.4 million deaths annually in these settings are associated with poor quality healthcare, with a substantial proportion occurring even among individuals who access health services.

This study examines patient perceptions of healthcare quality as a key indicator for assessing service adequacy and performance in health institutions. It emphasizes that patient satisfaction and feedback provide valuable insights into the effectiveness of healthcare delivery systems, including dimensions such as clinical competence, communication, responsiveness, organizational efficiency, and provider attitudes. The growing emphasis on patient-centered care underscores the need to systematically evaluate service quality from the perspective of service users, who are ultimately the recipients of care.

The study further highlights that healthcare quality is influenced by multiple interrelated factors, including the skills and attitudes of healthcare providers, the effectiveness of communication between patients and providers, and the efficiency of institutional management systems. Understanding these factors is essential for identifying gaps in service delivery and informing targeted interventions aimed at improving healthcare outcomes. Regular assessment of patient satisfaction using valid and reliable instruments is therefore critical for continuous quality improvement, enabling healthcare managers to prioritize areas requiring urgent attention and implement evidence-based improvements.

By focusing on patient perceptions, this study contributes to ongoing efforts to strengthen healthcare systems and enhance service delivery in resource-constrained environments. It reinforces the importance of integrating patient feedback into health system evaluation and policy formulation as a pathway to achieving improved health outcomes and sustainable quality improvement in healthcare institutions.

**Keywords:** Healthcare Quality, Patient Satisfaction, Quality of Care, Health Service Delivery, Patient Perception

**Introduction**

Health care is changing rapidly and the need to improve quality in its delivery is increasing. The global competition on an emerging sector drives the curiosity of patients and makes them more anxious towards the delivery of healthcare services<sup>1</sup>. Quality has become an increasing predominant part of our lives. People are constantly looking for quality products and services, to which patients/clients are no exceptions. Quality of care is “the extent to which health care services provided to individuals and patient populations improve desired health

**Research Article**

outcomes. In order to achieve this, health care must be safe, effective, timely, efficient, equitable and people-centered”<sup>2</sup>.

The quality and adequacy of health care services can be measured based on views and satisfaction of patients and their relatives<sup>3</sup>. Globally, Between 5.7 and 8.4 million deaths are attributed to poor quality care each year in low- and middle-income countries which represents up to 15% of overall deaths in these countries. Sixty per cent of deaths in LMICs from conditions requiring health care occur due to poor quality care, whereas the remaining deaths result from non-utilization of the health system<sup>4</sup>. Quality of care refers to the best practice/desired health outcome (which are characterized by effective, safe and people-centred) of healthcare enjoyed by individuals and populations, who are the consumers of healthcare services<sup>5</sup>. Improving quality healthcare is a first consideration in healthcare management globally. A better understanding of factors influencing quality care can help hospital administrators implement effective programs to improve quality of service<sup>6</sup> Quality of care involves adequate skill, caring attitudes, effective communication, efficient organizational and management systems, and effective participation<sup>7</sup>. That is why patient satisfaction should be measured constantly using valid, reliable assessment instruments to assess care quality, identify variables that affect care and determine which items should be prioritized and which require alteration in the service based on patients’ responses<sup>8</sup>. A good assessment instrument measuring the factors that determine patient satisfaction should be developed to improve quality of care<sup>9</sup>. Patient satisfaction is a critical component in the measurement of health care quality; it reflects the ability of the provider to meet the patients’ needs. Patient satisfaction is defined as the extent or the balance between the expected quality of care and the actual care received<sup>10</sup> Patient satisfaction with healthcare care is of great importance to any health care agency because they are the employers of most of the health care providers that provide care for patients 24 hours a day<sup>11</sup>. Quality care has a prominent role in patient satisfaction. Patient satisfaction is a key determinant of quality in healthcare delivery and it must continuously be part of standards for institutions and training; healthcare facilities are interested in maintaining high levels of satisfaction in order to stay competitive in healthcare market<sup>12</sup>. A study was conducted by Afolabi et al, to assess patients’ satisfaction with quality of inpatient clinical care in a mission hospital in a semi urban setting. The study was a cross-sectional study carried out on 140 inpatients at a mission hospital in Afikpo, South East Nigeria. Data was collected using pretested structured questionnaires designed on a five-point likert scale with 1 indicating the lowest and 5 indicating the highest scale. Knowledge of factors contributing to quality of care and satisfaction in the following domains: patient-staff relationship, patient-staff (doctors/nurses) communication, facility convenience, technical aspect of care (availability of equipment, drugs and adequacy of staff) and overall general satisfaction were measured. Operationally, patients who rated 3 points and above were considered satisfied while ratings less than 3 points were considered dissatisfied. Knowledge of factors contributing to quality of care was  $4.65 \pm 0.48$ . General satisfaction rated  $4.22 \pm 0.52$ . Specifically, the different domains had the following scores: inter personal relationship  $4.28 \pm 0.81$ , technical aspect of care (availability of drugs, equipment and medical personnel)  $4.29 \pm 0.57$  and facility convenience  $4.21 \pm 0.51$ . Knowledge of factors contributing to quality of care and overall patients’ satisfaction with inpatient care were good and comparable with patients’ satisfaction with tertiary health

institutions in Nigeria. They concluded that Mission hospitals may serve as excellent alternatives to government hospitals in resource limited settings to promote health equity across populations <sup>13</sup>.

**Table 1: Demographic Characteristics of the Respondents** **n = 144**

	<u>Frequency</u>	<u>Percent</u>	<u>Range</u>	<u>M±SD</u>
<b>Age</b>				
- ≤ 20 years	5	3.5	– 96	39.64±17.78
- 21 – 30 years	54	37.5		
- 31 – 40 years	26	18.1		
- 41 – 50 years	21	14.6		
- ≥ 51 years	38	26.4		
<b>Gender</b>				
- Male	70	48.6		
- Female	74	51.4		
<b>Marital Status</b>				
- Married	118	81.9		
- Separated/divorced	3	2.1		
- Single	21	14.6		
- Widowed	2	1.4		
<b>Ethnicity</b>				
- Hausa	1	0.6		
- Igbo	135	93.8		
- Yoruba	3	2.1		
- Others (Efik, Ibibio, Tiv, Idoma)	5	3.5		
<b>Educational qualification</b>				
- FSLC	9	6.3		
- SSCE/GCE	46	31.9		
- ND	6	4.2		
- NCE	16	11.1		

## Research Article

- HND	4	2.8
- BSC	63	43.7

## How long have you stayed in

## Results; the health facility

		91.0
		6.9
- > 7 days	3	2.1

- < 3
- days 131
- 3 – 6 days 10

Table 4.1 present the demographic characteristics of the respondents. Their age ranged from 15 – 96 years with mean and standard deviation age of  $39.64 \pm 17.78$  and modal age group of 21 – 30 (37.5%), with little above average (51.4%) are female, (81.9%) married respectively. They were mainly Igbos (93.8%) with majority (31.9%) SSCE/GCE holder and most (91.0%) have stayed for less than 3 days in the health facility.

**Table 2: Level of patient's perception with quality of care n=144**

	UD	SA	A	D	SD	M±SD
The healthcare professional provides the patient With health education	1	58	59	22	4	3.31±0.74
The healthcare professional maintains the patient's Rights & needs.	1	74	57	12	0	3.50±0.60
The healthcare professional promotes patient's	1	71	51	18	3	3.41±0.78

## Research Article

Respect and self - esteem.

The healthcare professional monitors the patient's 1 62 66 13 2 3.40±0.66

Safety &amp; security.

The healthcare professional provides patient with 1 57 67 19 0 3.31±0.69

Clean &amp; quite environment.

Healthcare professionals smile whenever they 1 67 64 11 1 3.41±0.64

Approach me.

Healthcare professionals did not tell me enough 3 77 50 13 2 3.46±0.68

About my treatment

Healthcare professionals takes physical care of - 93 42 4 5 3.65±0.64

You.

Healthcare professionals gives advice - 22 54 52 16 2.66±0.84

Healthcare professionals responsibility of - 50 61 23 10 2.97±0.86

Ensuring total care

Healthcare professionals responds towards - 29 53 48 14 2.87±0.95

Patient's complaint

Healthcare professionals cordial relationship - 46 57 28 13 2.83±0.92

Towards patients.

Healthcare professionals confidentiality with - 48 68 19 9 3.02±0.82

Patients

Healthcare professionals used to go away and - 43 56 27 18 2.72±0.98

Forget what patients had asked for

Healthcare professionals had time to sit and talk to - 103 33 6 2 3.70±0.60

Me

The healthcare professional ensure patient takes - 27 49 50 18 2.53±0.93

Medication at the right time.

I saw the healthcare professionals as friends - 38 43 43 20 2.73±0.97

**Overall perception** 3.15±0.78**Overall perception grouped**

	Frequency	Percent	
- Poor ( <i>perception mean</i> ≤ 2.5)	(perception	mean	- Good
110	76.4	>	2.5)
34	23.6		

## Research Article

**Item with mean (M) > 2.5 was judged to be a good perception**

From Table 4.2, the main aspect of patient's perception with quality of care were; (a) Healthcare professionals had time to sit and talk to me ( $3.70 \pm 0.60$ ) (b) Healthcare professionals take physical care of me ( $3.65 \pm 0.64$ ), (c) The healthcare professional maintains the patient's rights & needs ( $3.50 \pm 0.60$ ), (d) Healthcare professionals did not tell me enough about my treatment ( $3.46 \pm 0.68$ ),

(e) The healthcare professional promotes patient's respect and self - esteem ( $3.41 \pm 0.78$ ) (f) Healthcare professionals smile whenever they approach me ( $3.41 \pm 0.64$ ). (g) The healthcare professional ensures patient takes medication at the right time was fairly above average ( $2.03 \pm 0.95$ ). **Generally, their overall perception was above average ( $3.15 \pm 0.78$ ); many had good perception with quality of care (76.8%).**

**Discussion;** The study revealed that majority of the patients had good perception with quality of care given by health care professionals in secondary health care facilities. Specifically, the overall perception score of the patients was 76.4% which could be adjudged to be very good. Impliedly, these findings prove that patients' perception of the quality of care are high. Similar assertion was made in the study of Afolabi et al.<sup>13</sup> where results revealed that the patients perceived comprehensive care from the healthcare professionals. Perhaps, one could suggest that the healthcare professionals are required to apply the ethical principles in what they do as their duties which will help in improving the patient care. In addition, the patients revealed the following perceptions: healthcare professionals taking physical care of you. Patient care is not just about the medical aspect of nursing. Patients may experience stress about their conditions, injuries, procedures, surgeries, or recovery. It is important for healthcare professionals to treat a patient's physical ailments as well as his or her emotional needs. When healthcare professionals show empathy, they foster a collaborative relationship with patients, which can help in rooting out causes, symptoms or explanations that result in a proper diagnosis and appropriate treatments. The next perception was healthcare professional's confidentiality with patients. Healthcare professionals maintain this confidentiality by being extra cautious when they handle documents. This includes both paper and electronic records. When it comes to physical copies of data, it relies on more precaution that the healthcare professional doesn't leave it in plain sight by mistake. It could be forgetting it in a room, leaving it on a desk where anyone could see, or accidentally dropping it. These mistakes lead to more likely scenarios for a breach. Others are; healthcare professionals responsibility of ensuring total care; healthcare professionals cordial relationship towards patients; healthcare professionals giving advice; healthcare professionals responds towards inpatients complaint and that healthcare professionals teaching on health conditions. Healthcare professionals who truly care for their patients while providing medical assistance create a rewarding experience for everyone. **Conclusion;** The findings from our study which correlates with the study of Afolabi et al<sup>13</sup>, indicate that healthcare professionals, as the main personnel of medical team, should include these perceptions in their care program and management of patients

.Again paying attention to patient's perceptions and needs results in patient's satisfaction and decrease in hospital stay.

**Research Article****References**

- Manzoor, F., Wei, L., Hussain, A., Asif, M., & Shah, S. I. A. (2019). Patient Satisfaction with Health Care Services; An Application of Physician's Behavior as a Moderator. *International Journal of Environmental Research and Public Health*, 16(18). <https://doi.org/10.3390/ijerph16183318>
- World Health Organization. (2020). Quality Health Services. World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/quality-health-services>
- Amporfro, D. A., Boah, M., Yingqi, S., Cheteu Wabo, T. M., Zhao, M., Ngo Nkondjock, V. R., & Wu, Q. (2021). Patients satisfaction with healthcare delivery in Ghana. *BMC Health Services Research*, 21(1), 722. <https://doi.org/10.1186/s12913-021-06717-5>
- World Health Organization. (2020). Quality Health Services. World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/quality-health-services>
- Gishu, T., Weldetsadik, A. Y., & Tekleab, A. M. (2019). Patients' perception of quality of nursing care; a tertiary center experience from Ethiopia. *BMC Nursing*, 18(1), 37. <https://doi.org/10.1186/s12912-019-0361-z>
- Liu, Y., & Aunguroch, Y. (2018). Factors influencing nurse-assessed quality nursing care: A cross-sectional study in hospitals. *Journal of Advanced Nursing*, 74(4), 935–945. <https://doi.org/10.1111/jan.13507>
- WHO/World Bank. (2018). Delivering quality health services. In World Health Organization, World Bank Group, OECD (Issue July). <http://apps.who.int/bookorders>.
- Male, L., Noble, A., Atkinson, J., & Marson, T. (2017). Measuring patient experience: a systematic review to evaluate psychometric properties of patient reported experience measures (PREMs) for emergency care service provision. *International Journal for Quality in Health Care*, 29(3), 314–326. <https://doi.org/10.1093/intqhc/mzx027>
- Carretta, E., Bond, T. G., Cappiello, G., & Fantini, M. P. (2017). Looking Through the Patients' Eyes. *Journal of Patient Experience*, 4(3), 121–128. <https://doi.org/10.1177/2374373517706614>
- Hemadeh, R., Hammoud, R., Kdouh, O., Jaber, T., & Ammar, L. (2019). Patient satisfaction with primary healthcare services in Lebanon. *The International Journal of Health Planning and Management*, 34(1), e423–e435. <https://doi.org/10.1002/hpm.2659>

**Research Article**

- Karaca, A., & Durna, Z. (2019). Patient satisfaction with the quality of nursing care. *Nursing Open*, 6(2), 535–545. <https://doi.org/10.1002/nop2.237>
- Alshazaly, A. A., & Hayat, F. M. (2021). Patient's satisfaction with nursing care in medical and surgical departments in khartoum state hospitals. *Pak-Euro Journal of Medical and Life Sciences*, 4(4), 283–290. <https://doi.org/10.31580/pjmls.v4i4.2160>
- Afolabi, O. F., Ugwu, C. N., Eze, C. O., Serges-Anthanase, D. F., Onwuchekwa, C. O., & Ude, M. A. (2021). Quality of Health Care in Resource Limited Settings-Patients' Satisfaction Survey at a Mission Hospital in South East, Nigeria. *Open Journal of Internal Medicine*, 11(04), 201–209. <https://doi.org/10.4236/ojim.2021.114016>