

Exploring Patient Views and Contentment with Healthcare Practitioners in Primary Health Centers within Onelga

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Received:

November 13, 2023

Accepted:

February 15, 2024

Published:

February 29, 2024

How to cite:

Orukwou et al. 2024. "Exploring Patient Views and Contentment with Healthcare Practitioners in Primary Health Centers within Onelga". *Healthcare Studies* 2(1): 9 – 26.

<https://doi.org/10.58612/hs212>


Abstract:

This study investigates the patient's perspective and contentment with healthcare professionals at primary health care facilities in Onelga (Ogba Egbema Ndoni LGA). Employing a survey research design, data was collected from 100 healthcare professionals using a structured questionnaire. The study's objectives include assessing patient satisfaction with healthcare services, exploring the correlation between physician behavior and healthcare services, and determining factors influencing satisfaction levels in the study area. Demographic data analysis reveals the majority of respondents are male, aged above 60, with educational backgrounds ranging from FSLC to MSC/PGD/PHD. Patient satisfaction findings indicate a significant proportion agreeing or strongly agreeing with positive sentiments regarding healthcare services, physician behavior, and facility cleanliness. Additionally, statistical tests affirm a significant relationship between healthcare services and patient satisfaction. The study concludes that patient satisfaction is influenced by efficient service delivery, physician behavior, and facility infrastructure. Recommendations include regular assessment of patient satisfaction, enhancing healthcare service efficiency, and addressing factors influencing patient contentment. This research contributes to the broader understanding of patient perspectives in healthcare settings, facilitating improvements in service quality and overall patient experience

Keywords: Patient's Perception, Healthcare professionals, Primary healthcare facilities, Ogba Egbema Ndoni LGA

Introduction

Patients' views regarding the quality of healthcare they receive gauge their needs fulfillment and alleviation of concerns. Patient satisfaction pertains to their valued assessments and subsequent reactions to healthcare experiences encompassing pre, during, and post-care interactions (Liyasu, Abubakar, Lawan, & Gajida 2010). It serves as a pivotal measure of healthcare quality, reflecting on physicians, paramedics, and overall hospital performance (Liyasu et al., 2010). This aspect can be viewed concerning service contentment and healthcare expectations, often associated with service efficiency. Service efficiency influences patient satisfaction, encompassing

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timely care, minimal waiting durations, consultation time, crisis responsiveness, medication dispensation, and laboratory efficiency. Contented patients are more inclined to comply with medical advice, revisit when necessary, and may be more willing to bear the costs. Efficiency can be evaluated through infrastructure standards like cleanliness, waiting room comfort, and consultation punctuality. Studies in Nigeria indicate dissatisfaction due to prolonged wait times in outpatient clinics, often attributed to the absence of appointment systems (Bamgboye and Jarallah, 2014).

Immunization stands out as a vital tool in child survival strategies globally, deemed a cost-effective public health intervention (Goel S, Lenka, Shailinder, Singh, 2016). Ensuring qualitative improvement, including client satisfaction with immunization services, necessitates periodic audits of the immunization chain. Common reasons for children not receiving vaccines include vaccine unavailability, distant vaccination sites, and lack of awareness (Al-Teheawy, Foda, 2012). Challenges in the primary healthcare system, suboptimal service delivery, staff skill gaps, and data management weaknesses hinder achieving acceptable immunization coverage (FMOH, 2014; Abebe, 2016). Client satisfaction levels serve as indicators for assessing the adequacy of immunization services, guiding quality improvement efforts for enhanced coverage nationwide.

Patient satisfaction is pivotal in assessing healthcare provider performance and facility success. The absence of time-specific appointments in Nigeria's outpatient clinics leads to overwhelming patient volumes during peak hours (Ogunfowokan, Mora, 2012). The efficiency of services provided influences patient contentment, encompassing prompt care, minimal wait times, consultation durations, crisis response, medication delivery, and lab accuracy. Patients' perceptions of outpatient services often reflect the overall hospital experience (Kunders, 2018). However, this study primarily focuses on patient satisfaction with primary care providers in Ogba Egbema Ndoni Local Government Area, River State, and their perceptions of these providers.

Statement of the Problem

Nigeria, comprising nearly 20% of Africa's population, holds significant sway over the region's disease burden, particularly those preventable through vaccination. Hence, Nigeria's immunization rates directly impact the region's ability to combat vaccine-preventable illnesses (WHO/AFRO, 2015). Healthcare management in developing countries often overlooks patient feedback, with physicians inadequately trained to address patient expectations (Yildiz, Erdogan, 2014; Rozenblum et al., 2011). Research indicates that prolonged waiting times are a primary concern, alongside discomfort in waiting areas, healthcare provider attitudes, and infrastructure deficiencies (Fouzia, Gobind, and Nawaz, 2012).

Assessing customer satisfaction levels will determine if immunization services are appropriately administered by qualified staff, at suitable times, locations, and methods. This assessment will establish a baseline for evaluating quality enhancement initiatives, potentially increasing the national vaccination rate. Therefore, this study aims to explore patient perceptions and satisfaction with healthcare professionals at

primary healthcare facilities in the Ogba Egbema Ndoni Local Government Area of Rivers State.

Objectives of the Study

The main objective of this study is to investigate patient's perception and satisfaction with healthcare professionals at primary health care facilities in Ogba Egbema Ndoni Local Government Area in Rivers State.

Specific objectives include;

- i. To assess patient satisfaction with healthcare services and investigate the role of physicians' behavior as a mediator between patient satisfaction and healthcare services.
- ii. To evaluate patient satisfaction with healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care in the public health sector of Ogba Egbema Ndoni Local Government Area, Rivers State.
- iii. To identify the factors influencing the level of satisfaction with different sections and services provided in Ogba Egbema Ndoni Local Government Area, Rivers State.

Research Questions

- i. How has patient satisfaction with healthcare services been influenced by the physician's behavior, acting as a moderating factor between patient satisfaction and healthcare services?
- ii. Is there a correlation between healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care, and patient satisfaction in the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State?
- iii. What factors contribute to the level of satisfaction with the different sections and services provided in Ogba Egbema Ndoni Local Government Area, Rivers State?

Research Hypotheses

H₀: There is no significant relationship between the health care services, like a laboratory and diagnostic care, preventive healthcare and prenatal care, to patient satisfaction in the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State

H₁: There is no specific factors responsible for the level of satisfaction with the various sections and services provided in Ogba Egbema Ndoni Local Government Area, Rivers State

Significance of the Study

In addition to training and research, the establishment of a tertiary healthcare facility aims to provide satisfactory health services tailored to meet patients' needs. While hospital management and healthcare providers employ various methods such as clinical audit, medical audit, and peer review mechanisms to assess the quality of care provided, the perspective of consumers, i.e., patients, is often overlooked.

The findings from this study will help identify deficiencies in the delivery of health services in Ogba Egbema Ndoni Local Government Area, Rivers State. It will address the lack of information on health service delivery in Rivers State and serve as a framework for implementing and evaluating health service delivery in the area. Recommendations derived from this study will contribute to enhancing overall patient satisfaction.

The insights gained from this study will be particularly valuable to general practitioners and other healthcare personnel, highlighting the importance of delivering quality healthcare services to patients. Additionally, the study's findings will be beneficial to other researchers seeking to delve deeper into this topic and can serve as a foundation for further research endeavors.

Ultimately, this study contributes to the body of knowledge in healthcare and can serve as a reference point for future studies, providing valuable insights and guidance for both researchers and non-researchers alike.

Scope of the Study

This research investigates the viewpoints and contentment levels of patients regarding healthcare practitioners working within primary healthcare centers situated in the Ogba Egbema Ndoni Local Government Area of Rivers State. The study will exclusively focus on the Ogbe Egbema Ndoni metropolis. It will employ a combination of primary and secondary data sources. Questionnaires will be disseminated to assess the relationship between patient satisfaction and the performance of healthcare professionals.

Limitations of the study

The busy work schedules of respondents posed significant challenges in securing their participation in the survey. Consequently, obtaining completed questionnaires promptly proved to be quite difficult. Additionally, as the researcher is a student, there are limitations in terms of both time and resources available to thoroughly explore the extensive literature relevant to this study.

It's important to note that the information provided by the researcher may not universally apply to all institutions but is specifically tailored to the selected organization under study, particularly within the local context of this research.

Financial constraints also hindered the researcher's ability to access necessary materials, literature, and information, as well as to carry out efficient data collection through methods such as internet research, questionnaires, and interviews.

Furthermore, the researcher faces time constraints, as they will be juggling this study alongside other academic responsibilities, resulting in a reduced amount of time allocated to the research work.

Lastly, the researcher's ability to determine the reliability and accuracy of the information provided is limited to the evidence presented by the participants in the research.

Definition of Terms

Patient Perception: Patient perception refers to the recognition, understanding, or interpretation of something. An example of perception could be recognizing when to employ a different teaching method to enhance a student's learning.

Patients' Satisfaction: Patient satisfaction denotes the degree to which patients are content with the healthcare they receive, encompassing experiences both within and beyond the doctor's office. Serving as a gauge of care quality, patient satisfaction provides healthcare providers with valuable insights into various facets of medical care, including the efficacy of treatments and the level of compassion exhibited.

Healthcare Professionals: Health professionals hold a pivotal and indispensable role in enhancing access to and the quality of healthcare for the population. They offer vital services aimed at promoting health, preventing diseases, and delivering healthcare interventions to individuals, families, and communities, all within the framework of primary healthcare principles.

Primary Health Care: Primary Health Care (PHC) denotes fundamental healthcare services that are grounded in evidence-based practices and socially acceptable methodologies. By adhering to the principles of primary healthcare, PHC endeavors to ensure equitable access to healthcare for all members of a community.

Research Methodology

Research Design

This study utilized a survey research design, which was selected based on the objectives outlined in chapter one. This particular research design offers a swift, efficient, and precise method for gathering information about a specific population of interest. The aim of this study is to examine patient perceptions and satisfaction regarding healthcare professionals at primary healthcare facilities located in Onelga (Ogba Egbema Ndoni Local Government Area) within Rivers State.

Population of the Study

The study focused on healthcare professionals working in primary healthcare facilities located in Onelga, Ogba Egbema Ndoni Local Government Area, Rivers State, Nigeria. From this population, 134 respondents were chosen for inclusion in the study, with the sample size determined accordingly. Rivers State was selected as the study area due to its close proximity to the researcher.

Sample and Sampling Techniques

The researcher used Taro Yamane's formula to determine the sample size from the population.

Taro Yamane's formula is given as;

$$n = \frac{N}{1 + N(e)^2}$$

Where N = Population of study (134)

n = Sample size (?)

e = Level of significance at 5% (0.05)

1 = Constant

$$n = \frac{134}{1 + 134(0.05)^2} = \frac{134}{1 + 134(0.0025)} = \frac{134}{1 + 0.335} = 100$$

The sample size therefore is 100 respondents.

Research Instrument and Instrumentation.

Data for this research was gathered from both primary and secondary sources. The primary data collection primarily involved the use of a structured questionnaire designed to gather information regarding patient perceptions and satisfaction with healthcare professionals at primary healthcare facilities in Onelga (Ogba Egbema Ndoni Local Government Area). The secondary data collection involved sourcing information from textbooks, journals, and scholarly materials.

Validity of Instrument.

The tool used in this study underwent face validation, which assesses the appropriateness of the questionnaire items. Face validation is utilized to determine whether an instrument appears to measure what it contains. Its aim is to ascertain the relevance of the questionnaire to the study objectives. During face validation, the initial draft of the questionnaire was reviewed by the supervisor, who critically examined its items in light of the study objectives and provided constructive feedback to enhance its quality. Based on the supervisor's recommendations, adjustments were made to the instrument before its administration in the study.

Reliability of Instrument.

The reliability coefficient of 0.81 was interpreted as satisfactory, as Etuk (1990) suggests that a test-retest coefficient as low as 0.5 is adequate to validate the use of a research instrument. Therefore, the coefficient of 0.81 further supports the reliability of the instrument.

Method of Data Collection.

This study is based on the two possible sources of data which are the primary and secondary source.

Primary Source of Data: The primary data for this study consist of raw data generated from responses to questionnaires and interview by the respondents.

Secondary Source of Data: The secondary data includes information obtained through the review of literature that is journals, monographs, textbooks and other periodicals.

Method of Data Analysis.

The collected data will undergo analysis employing methods such as frequency tables, percentages, and mean score analysis. Additionally, nonparametric statistical testing,

specifically the Chi-square test, will be conducted to assess the formulated hypotheses using the Statistical Package for the Social Sciences (SPSS). Following the administration of questionnaires to gather data, the collected information will be coded, tabulated, and analyzed utilizing the SPSS software, aligning with the research questions and hypotheses. The Chi-square method will be employed to ensure efficient data management and accuracy by conducting tests of independence. Chi square is given as:

$$X^2 = \frac{\sum(o - e)^2}{e}$$

Where X^2 = chi square

o = observed frequency

e = expected frequency

Level of confidence / degree of freedom

When utilizing the chi-square test, it is necessary to establish a specific level of confidence or margin of error. Furthermore, the degree of freedom within the table must be determined. In a simple variable, row, and column distribution, the degree of freedom is determined: $df = (r-1)(c-1)$

Where; df = degree of freedom

r = number of rows

c = number of columns.

In determining the critical chi _ square value, the value of confidence is assumed to be at 95% or 0.95. a margin of 5% or 0.05 is allowed for judgment error.

Results

Analysis of Demographic Data of Respondents.

The gender distribution of the respondents utilized in this study is presented in Table 1. Among the total of 100 respondents, 65 individuals, accounting for 65.0 percent of the population, are male, while 35 individuals, constituting 35.0 percent of the population, are female.

Table 1. Gender of Respondents

	Frequency	Percent	Cumulative Percent
Valid Male	65	65.0	65.0
Female	35	35.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 2 illustrates the age distribution of the respondents involved in this study. Among the total of 100 respondents, 15 individuals, making up 15.0 percent of the population, fall within the age range of 20-30 years. 10 respondents, accounting for

10.0 percent of the population, are aged between 31-40 years. 25 respondents, representing 25.0 percent of the population, are aged between 41-50 years. Additionally, 20 respondents, constituting 20.0 percent of the population, are aged between 51-60 years. Lastly, 30 respondents, making up 30.0 percent of the population, are above 60 years old.

Table 2. Age range of Respondents

	Frequency	Percent	Cumulative Percent
Valid 20-30years	15	15.0	15.0
31-40years	10	10.0	25.0
41-50years	25	25.0	50.0
51-60years	20	20.0	70.0
above 60years	30	30.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 3 displays the educational qualifications of the respondents involved in this study. Among the total of 100 respondents, 20 individuals, constituting 20.0 percent of the sample, hold FSLC qualifications. Additionally, 25 respondents, representing 25.0 percent of the sample, possess SSCE/GCE/WASSCE qualifications. Furthermore, 35 respondents, making up 35.0 percent of the sample, have OND/HND/BSC qualifications. Moreover, 15 respondents, accounting for 15.0 percent of the sample, hold MSC/PGD/PHD qualifications. Lastly, 5 respondents, comprising 5.0 percent of the sample, hold other types of educational qualifications.

Table 3. Educational Background of Respondents

	Frequency	Percent	Cumulative Percent
Valid FSLC	20	20.0	20.0
WASSCE/GCE/NECO	25	25.0	45.0
OND/HND/BSC	35	35.0	80.0
MSC/PGD/PHD	15	15.0	95.0
OTHERS	5	5.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 4 illustrates the marital status distribution of the respondents involved in this study. Thirty individuals, accounting for 30.0 percent of the sample, are single.

Additionally, 55 respondents, representing 55.0 percent of the sample, are married. Furthermore, 5 respondents, making up 5.0 percent of the sample, are divorced. Moreover, 10 respondents, comprising 10.0 percent of the sample, are widowed.

Table 4. Marital Status

	Frequency	Percent	Cumulative Percent
Valid Single	30	30.0	30.0
Married	55	55.0	85.0
Divorced	5	5.0	90.0
Widowed	10	10.0	100.0
Total	100	100.0	

Source: Field Survey.

Analysis of Psychographic Data.

Table 5 presents the responses of respondents regarding patient satisfaction with the healthcare services provided. Thirty individuals, constituting 30.0 percent, expressed strong agreement that patients are satisfied with the healthcare services provided. Additionally, 42 respondents, representing 42.0 percent, agreed with this statement. Furthermore, 10 respondents, accounting for 10.0 percent, were undecided. Ten individuals, comprising 10.0 percent, disagreed that patients are satisfied with the healthcare services provided, while 8 respondents, making up 8.0 percent, strongly disagreed with this statement.

Table 5. Patient are satisfied with the healthcare services provided

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	30	30.0	30.0
Agree	42	42.0	72.0
Undecided	10	10.0	82.0
Disagree	10	10.0	92.0
Strongly disagree	8	8.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 6 depicts the responses of respondents regarding whether the time spent with doctors during consultation is the most influential factor in determining overall patient satisfaction. Ten respondents, representing 10.0 percent, strongly agree with this statement, while 15 respondents, accounting for 15.0 percent, agree. Additionally, 5 respondents, making up 5.0 percent, were undecided. On the other hand, 40 respondents, constituting 40.0 percent, disagree that the time spent with doctors during

consultation holds the most significant influence on overall patient satisfaction. Lastly, thirty respondents, representing 30.0 percent, strongly disagree with this statement.

Table 6. Time spent with doctors during consultation is the most powerful determinant of the overall patient satisfaction

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	10	10.0	10.0
Agree	15	15.0	25.0
Undecided	5	5.0	30.0
Disagree	40	40.0	70.0
Strongly disagree	30	30.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 7 presents the responses of respondents regarding the existence of a correlation between physician behavior and healthcare services. Sixty respondents, accounting for 60.0 percent, strongly agree that such a correlation exists. Twenty-five respondents, representing 25.0 percent, agree with this statement. Additionally, 10 respondents, making up 10.0 percent, were undecided. Conversely, 5 respondents, comprising 5.0 percent, disagree that there is a correlation between physician behavior and healthcare services.

Table 7. There is a correlation between physician’s behavior and healthcare services

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	60	60.0	60.0
Agree	25	25.0	85.0
Undecided	10	10.0	95.0
Disagree	5	5.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 8 illustrates the responses of respondents regarding whether the level of patients’ satisfaction is contingent upon the healthcare services provided to them. Twenty-five respondents, comprising 25.0 percent, strongly agree that the level of patients’ satisfaction is dependent on the healthcare services rendered. Additionally, 32 respondents, representing 32.0 percent, agree with this statement. Thirteen respondents, accounting for 13.0 percent, were undecided on this matter. On the contrary, 15 respondents, making up 15.0 percent, disagree that the level of patients’ satisfaction is influenced by the healthcare services provided. Similarly, 15 respondents, representing 15.0 percent, strongly disagree with this notion.

Table 8. The level of patients' satisfaction depends on the healthcare services provided to the patient

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	25	25.0	25.0
Agree	32	32.0	57.0
Undecided	13	13.0	70.0
Disagree	15	15.0	85.0
Strongly disagree	15	15.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 9 presents the responses of respondents regarding whether there is a correlation between the perceived cleanliness of the hospital and the level of satisfaction derived from the services received. Sixty-five respondents, accounting for 65.0 percent, strongly agree that the higher the patient perceives the hospital as being neat, the greater the level of satisfaction they derive from the services received. Additionally, 30 respondents, representing 30.0 percent, agree with this statement. Three respondents, comprising 3.0 percent, were undecided. Conversely, 3 respondents, making up 3.0 percent, disagree that there is a correlation between the perceived cleanliness of the hospital and the level of satisfaction derived from the services received. Similarly, 2 respondents, representing 2.0 percent, strongly disagree with this notion.

Table 9. The more the patient perceives the hospital as being neat the higher the level of satisfaction they derive from the services they receive

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	65	65.0	65.0
Agree	30	30.0	95.0
Disagree	3	3.0	98.0
Strongly disagree	2	2.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 10 illustrates the responses of respondents regarding whether patient satisfaction is influenced by communication, provider empathy, and care coordination. Thirty respondents, comprising 30.0 percent, strongly agreed that patient satisfaction hinges on these factors. Additionally, 42 respondents, representing 42.0 percent, agreed with this statement. Ten respondents, accounting for 10.0 percent, were undecided. Conversely, 10 respondents, making up 10.0 percent, disagreed that patient

satisfaction is dependent on communication, provider empathy, and care coordination. Similarly, 8 respondents, representing 8.0 percent, strongly disagreed with this notion.

Table 10: Patient satisfaction boils down to communication, provider empathy, and care coordination

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	30	30.0	30.0
Agree	42	42.0	72.0
Undecided	10	10.0	82.0
Disagree	10	10.0	92.0
Strongly disagree	8	8.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 11 presents the responses of respondents regarding the existence of multiple healthcare services. Ten respondents, accounting for 10.0 percent, strongly agree that there are multiple healthcare services. Additionally, 15 respondents, representing 15.0 percent, agree with this statement. Five respondents, comprising 5.0 percent, were undecided on this matter. Conversely, 40 respondents, making up 40.0 percent, disagree that there are multiple healthcare services. Similarly, 30 respondents, representing 30.0 percent, strongly disagree with this notion.

Table 11: There are several healthcare services

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	10	10.0	10.0
Agree	15	15.0	25.0
Undecided	5	5.0	30.0
Disagree	40	40.0	70.0
Strongly disagree	30	30.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 12 displays the responses of respondents regarding whether healthcare services enhance patient satisfaction. Sixty respondents, comprising 60.0 percent, strongly agree that healthcare services improve patient satisfaction. Additionally, 25 respondents, representing 25.0 percent, agree with this statement. Ten respondents, accounting for 10.0 percent, were undecided on this matter. Conversely, 5 respondents, making up 5.0 percent, disagree that healthcare services improve patient satisfaction.

Table 12: Healthcare services improves patient satisfaction

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	60	60.0	60.0
Agree	25	25.0	85.0
Undecided	10	10.0	95.0
Disagree	5	5.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 13 presents the responses of respondents regarding whether providing more information to patients by physicians leads to greater satisfaction. Twenty-five respondents, accounting for 25.0 percent, strongly agree that the more information the physician provides to the patient, the greater the satisfaction. Additionally, 32 respondents, representing 32.0 percent, agree with this statement. Thirteen respondents, comprising 13.0 percent, were undecided on this matter. Conversely, 15 respondents, making up 15.0 percent, disagree that providing more information to patients leads to greater satisfaction. Similarly, 15 respondents, representing 15.0 percent, strongly disagree with this notion.

Table 13: The more information the physician provides to the patient the greater the satisfaction

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	25	25.0	25.0
Agree	32	32.0	57.0
Undecided	13	13.0	70.0
Disagree	15	15.0	85.0
Strongly disagree	15	15.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 14 displays the responses of respondents regarding whether medical staff service attitude and medical staff services technology are the primary factors responsible for the level of satisfaction. Sixty-five respondents, accounting for 65.0 percent, strongly agree that these factors are major contributors to satisfaction levels. Additionally, 30 respondents, representing 30.0 percent, agree with this statement. Three respondents, comprising 3.0 percent, were undecided. Conversely, 3 respondents, making up 3.0 percent, disagree that medical staff service attitude and medical staff services technology are the major factors responsible for satisfaction levels. Similarly, 2 respondents, representing 2.0 percent, strongly disagree with this notion.

Table 14: Medical staff service attitude and medical staff services technology are the major factors responsible for level of satisfaction

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	65	65.0	65.0
Agree	30	30.0	95.0
Disagree	3	3.0	98.0
Strongly disagree	2	2.0	100.0
Total	100	100.0	

Source: Field Survey.

Table 15 presents the responses of respondents regarding whether hospital convenience affects patient satisfaction levels. Thirty respondents, accounting for 30.0 percent, strongly agreed that hospital convenience determines patient satisfaction levels. Additionally, 42 respondents, representing 42.0 percent, agreed with this statement. Ten respondents, comprising 10.0 percent, were undecided. Conversely, 10 respondents, making up 10.0 percent, disagreed that hospital convenience determines patient satisfaction levels. Similarly, 8 respondents, representing 8.0 percent, strongly disagreed with this notion.

Table 15: Hospital convenience determines patient level of satisfaction

	Frequency	Percent	Cumulative Percent
Valid Strongly agree	30	30.0	30.0
Agree	42	42.0	72.0
Undecided	10	10.0	82.0
Disagree	10	10.0	92.0
Strongly disagree	8	8.0	100.0
Total	100	100.0	

Source: Field Survey.

Test of Hypothesis.

Hypothesis I

H₀: There is no statistically significant correlation between healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care, and patient satisfaction in the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State.

H_i: There is a statistically significant correlation between healthcare services, such as laboratory and diagnostic care, preventive healthcare, and prenatal care, and patient satisfaction in the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State.

Level of significance: 0.05

Decision rule: reject the null hypothesis H_0 if the p value is less than the level of significance. Accept the null hypothesis if otherwise.

Table 10. Test Statistics

	In the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State, there exists a significant correlation between healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care, and patient satisfaction.
Chi-Square	105.520 ^a
Df	3
Asymp. Sig.	.000

a. 0 cells (.0%) have expected frequencies less than 5. The minimum expected cell frequency is 25.0.

Conclusions based on decision rule:

As the p-value of 0.000 is below the significance level of 0.05, we reject the null hypothesis. Therefore, we conclude that there is a significant correlation between healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care, and patient satisfaction in the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State.

Hypothesis II

H₀: There are no specific factors responsible for the level of satisfaction with the various sections and services provided in Ogba Egbema Ndoni Local Government Area, Rivers State.

H_i: There are specific factors responsible for the level of satisfaction with the various sections and services provided in Ogba Egbema Ndoni Local Government Area, Rivers State.

Level of significance: 0.05

Decision rule: reject the null hypothesis H_0 if the p value is less than the level of significance. Accept the null hypothesis if otherwise.

Table 11. Test Statistics

	There are specific factors responsible for the level of satisfaction with the various sections and services provided in Ogba Egbema Ndoni Local Government Area, Rivers State
Chi-Square	74.520 ^a
Df	2
Asymp. Sig.	.000

a. 0 cells (.0%) have expected frequencies less than 5. The minimum expected cell frequency is 25.0.

Conclusions based on decision rule:

With a p-value of 0.000, which is less than the significance level of 0.05, we reject the null hypothesis. Consequently, we conclude that there are indeed specific factors accountable for the satisfaction level concerning the different sections and services offered in Ogba Egbema Ndoni Local Government Area, Rivers State.

Discussion

The research focuses on examining patient perceptions and satisfaction with healthcare professionals at primary health care facilities in Onelga. Two hypotheses were formulated to investigate whether there is no significant correlation between healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care, and patient satisfaction in the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State. Additionally, the hypotheses aimed to explore whether there are no particular factors accountable for the satisfaction level regarding the various sections and services offered in Ogba Egbema Ndoni Local Government Area, Rivers State.

Findings from the study revealed that majority of the respondents were of the opinion that

There exists a notable correlation between healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care, and patient satisfaction within the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State.

Decision Rule: The null hypothesis is rejected.

Specific factors contribute to the satisfaction level regarding the different sections and services offered in Ogba Egbema Ndoni Local Government Area, Rivers State.

Decision Rule: The null hypothesis is rejected.

Summary of Findings

The project titled "Patient Perception and Satisfaction with Healthcare Professionals at Primary Health Care Facilities in Onelga" aimed to investigate...;

- i. To ascertain patient contentment with healthcare services and consider the physician's conduct as a mediator between patient satisfaction and healthcare services.
- ii. To gauge the impact of healthcare services such as laboratory and diagnostic care, preventive healthcare, and prenatal care on patient satisfaction within the public health sectors of Ogba Egbema Ndoni Local Government Area, Rivers State.
- iii. To identify the factors influencing the level of satisfaction with the different sections and services offered in Ogba Egbema Ndoni Local Government Area, Rivers State.

Literature was also reviewed to substantiate the assertions made at the outset of the study, encompassing a comprehensive examination of the historical context of the study area and the evolution of primary healthcare policy in Nigeria. The study drew upon Critical Theory as proposed by Oliver (1990). This theoretical framework posits

that individuals construct diverse yet valid interpretations of their experiences, thereby establishing critical theory as a rational paradigm. Unlike viewing society as a well-functioning entity, critical theory perceives society as an amalgamation of multiple factions vying for power and resources. Within this framework, doctors are regarded as agents of social control with conflicting loyalties, especially when determining eligibility for medical or psychiatric treatment, or assessing sickness benefits. Rather than categorizing deviants as a minority of outsiders, critical theorists demonstrate how large segments of the population are marginalized or disabled due to their circumstances, such as poverty, rather than inherent shortcomings (Oliver, 1990).

Conclusion

In summary, Patients' perception evaluates the fulfillment of needs or desires and alleviation of anxiety regarding the quality of healthcare received. Patients' satisfaction entails their valued assessments and subsequent reactions to their healthcare experiences before, during, and after their clinical visits (Lliyasu, Abubakar, Lawan, Gajida, 2010), serving as a crucial outcome measure for healthcare services. Patient satisfaction data are pivotal indicators of the quality of care and treatment provided by physicians, paramedical staff, and the entire hospital (Lliyasu et al., 2010), which should be considered in relation to service contentment and healthcare expectations. Expectations often correlate with the efficiency of services received, influencing patient satisfaction significantly.

Efficiency in service delivery is a major determinant of patient satisfaction, encompassing promptness of care, waiting time duration (from registration to consultation start), consultation duration, responsiveness to emergencies, drug dispensation speed, and accuracy of laboratory tests. Satisfied patients are more likely to adhere to prescribed treatments and advice, return for additional care as needed, and may be more willing to pay for services. Service efficiency can be evaluated based on infrastructure, including environmental cleanliness, waiting room convenience, and waiting time before consultation. Numerous studies conducted in Nigeria have highlighted prolonged wait times in outpatient clinics, contributing to dissatisfaction with the services provided in these settings.

Recommendations

Patients' satisfaction with healthcare services significantly influences the success of healthcare providers and the overall healthcare delivery system, emphasizing the importance of regular assessment to improve service quality. Primary healthcare facilities should prioritize comprehensive and trustworthy diagnosis and medical services while actively encouraging patients to articulate their health concerns, aligning with the humanitarian mission of primary healthcare. Based on the study findings, recommendations were provided. This research could serve as a foundational study for future research endeavors.

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