Assessment of Work System at Internal Me

INTRODUCTION

Services are becoming

The patient is not jus

Rational of the study:

In Egypt, the health care infrastructure is reasonable in terms of facilities and personnel. The real challenge is to improve staff performance and patient satisfaction in order to minimize rework wastage, delay and costs. Today, we recognize that quality as perceived by the health care recipient is vitally imprtant. As a result of this new focus, measurement of customer satisfaction has become importantu(Gajulaet al., 2003)

Introduction about the hospital:

The University hospital was opened inside one of the University buildings; where it is treated architecturally to fit with the function of the hospital.

The vision of the hospitalT

parastatal sector is governed by its own set of rules and regulations, has separate budgets, and exercises more autonomy in daily operations. However, from a political perspective, the Ministry of Health and Population (MOHP) has a controlling share of decision-making parastatal orgtri"(i) Tj/F6 11.7928f73j-0 Tj-0Tj0.12/F4 11.7928f3.6(m) Tj0. (n) Tj4Wj0.36 Tc (o) Tj008 Tc

s iie thi sae Tj-0.1n Tc (t) Tj-0.1g Tc (d) TD 0.09072 Tc (t) Tj0.12 Tc (h)29j0.05856 Tc (e Tj-0.1n Tc (s)

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age children, thus increasing the total beneficiary population from 5 million in 1992 to 20 million in 1995. The 1997 Ministerial Decree 380 extended coverage to newborns (under one) and, by 2002, had increased the eligible beneficiary population to more than 30 million ***(Eliya et al., 1997).***

<u>The Curative Care Organizations</u>

The Curative Care Organization (CCO) is a nonprofit system estaioshed in 1964 under the ultimate authority of the MOHP. CCOs operate 11 hospitals, which together account for about 1.5 percent of Egypt' total hopital ieds. Each CCO s run sn depen d en tly on a nonprofit basis, with urplu revenue being sn v ested sn to ervice improvement. In general, the 11 hospitals are high-
q ( ) 0.36 Tc (u) Tj-0.18144 Tc (a) Tj0.09072 Tc (l) Tj-0.14928 Tc (i) Tj0.Tc (t) Tj-0.14928 36 Tc (y) Tj-
q( ))( )j T0.36 2 Tc (s) Tj0 Tc (T) Tj0.12 Tc (n) Tj0.18 05855 Tc (e) TjTj0.j0.1(s) Tj2.1g mpas (

multiple jobs, followed by universities with 14%, and HIO with 11%. The remaining physicians include well-established and qualified senior physicians who are usually faculty members in the major medical schools or shareholders in modem private hospitals. These physicians have the technology, the resources, and the visibility required to run very successful and profitable private practices**.**

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- Provide care to the nation’s une

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perceive as important has resulted in increased dissatisfaction of patients with the health care system ***(Meehaniw***

Chapter (4): Employee Satisfaction

of the organization and provide stellar service to all customers, which add to the total experience and are in turn perceived as high quality by patients ***(Selberg2007)***

Emp

Definitions:

A heightened emotional connection that an employee feels for his or her organization, that influences him or her to exert greater discretionary effort to his or her work ***(Gibbons and Woock, 2006).*** Another definition is a state of aroused, situation specific motivation that is correlated with both attitudinal and behavioral outcomes ***(Thomas and Christopher, 2007).***

Dimensions of engagement: intellectual engagement: thinking hard about the job and how to do it better, affective engagement: feelini0.36 Tc (n) Tj-j-po856 Tc (n) Tj0 Tc (l) Tj-0.14928 Tc (a) Tj0.

management positions. Conversely, this would suggest that organizations that do not foster employee empowerment may experience problems retaining and attracting middle level managers ***(Fukuyama, 1995; Patrick and Laschinger, 2006).***

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11.76 Tf 46.7620 TD (.09072 Tc (w)ATj 0.05856 Tc (c

By allowing employees to provide higher quality c2 Tc (ll) Tj0T725.28 TD 0.r0.12 Tc (d) Tj0.058

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There's a chain of connectivity such that internal conditions and environment affect the service capability of staff which [illegible]

information, leads to errors because even conscientious professionals tend to ignore potential red flags and clinical discrepancies. They view these warning signals as indicators of routine repetitions of poor communication rather than unusual, wcaurisome indicators (Bechas, 2002).

Although po (ca)

C)1Bj-0F3 Tc.(7) Tj0.85 Tc (u) Tj0.18 Tc 6 462.72 j0.18 Tcr6 462.72 49282 Tc (o) Tj( ) Tj0..3 Tc (D (7608j0

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must R

The entitlement of patients' rights is accompanied

Patient empowerment

Concepts and Definitions:

The patient empowerment concept, a recent outgrowth of the natur eraTc (f) Tj1.62 Tc (r) Tj-0.26928 Tc

Real definitions of patient empowerment are hard to find. 'The term “patient empowerment” describes a situation that citizens are encouraged to take an active part in their own health management. Patient empowerment is considered as a philosophy of health care that proceeds from the perspective that optimal outcomes of health care interventions are achieved when patients become active participants in the Tj0.09072 Tc (t) Tj0.05856 Tc (e) Tj-0.07608 Tc (r) Tj-0

nvr

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Having patients to ask questions.

6. Quality of Basic Amenities

clean surroundings

regular procedures for cleaning and maintenance oftiospital buildingstiand premises

adequate furniture

sufficient ventilation

clean water

clean toilets

clean linen

ealty and edible food

Chapter(7)

Improve community care: Tj0.12 Tc (a) Tj/F3 11.76 Tf146.160.2980.36 Tc (b) Tj-0.36 Tc (y) Tj1.86 Tc ( )

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Limits tr .36l.12 T (imitj-0.l2.5) dj tj0.12 T5e (o)1.j-0.36;.j-0.0.210a072 (i Tj-0-0-.5)c (6

11-month-old male is 5.02 times more likely to visit than a 55- to 59-year-old male, whereas a 35- to 39-year-old female is half as likely to visit as a 75- to 79-year-old female ***(Murra d 435 c 909-3j0.tTjjE***

A plan had been presented as a solut- (&) Tj-0.06 T84Ell

Subjec

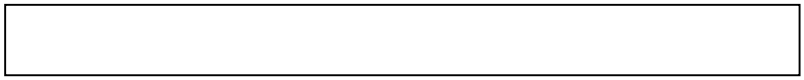
Table (B): Number of staff of internal medicine and genera

Subjects & M

chart

1st day
2ndday
3rdday
4thday
5thday
6thday

1st day
2ndday
3rdday
4thday
5thday
6thday



Subjects

Table (C): Total General internal medicine and General surgery out patient clinic attendants at Minia Chest Hospital during four selectr( ) Tj0.04392 Tc ( ) Tj0.12 Tc (o) Tj-0.05856 Tc nsh s (

The questionnaire consisted of 60 close-ended e

§ **Observational check list for work area at the clinic**

It was done for 3 areas and was covered by 71 questions (61close-ended questions and 9 open-ended questions) as follow:

- Observing clinics of Internal Medicineand GeneralSurgerywas covered by 30 close-ended questions and 6 open-ended qtistions.
- Observing clinics of Internal Medicineand GeneralSurgerywas covered by 30 close-ended questions and 6 open-ended qtistions.
- Observing clinics of Internal Medicineand GeneralSurgerywas covered by 30 close-ended questions and 6 open-ended qtistions.

Results

The results of the study will be displayed in the following sequence according to the findings derived from the survey cs

I. Rcsults of **patient satisfaction** s
II. Time of **catient flow** cycle
III. Rcsults from interviewing **the health cace providers** ct the clinic
IV. SWOC cnalysis of the **system of work** ct the clinic
V. System cnalysis of **outpatients clinic** cccording the resecrcher observctions

c72 Tc (P) Tj0.12 Tc (a) Tj-0.09888 Tc (

2. **Communication**
3. **Acccss anc Continuity of cace**
4. **T**

Res

Tabl

Res

Table (3): The above table showed that patients were satisfied for the following points as: (59.2%) were satisfied from the hospital location; (59.2%) from organization in taking tickets; and (53.7 %) (56.6%) of patients were satisfied from entry in an organized manner for imaging investigation and examination respectively. Accessibility of transport to the hospital was agreed by (60.4%) of patients. (48.7%) of the patients were satisfied from giving the referral paper and (52.3%) assignment an appointment by the physician for follow up visit.

Other patients (79.8%) expressed dissatisfaction from no cho44 Tc (a) Tj012 Tc (o) Tj-0.Dmio0.05856 Tc (

Othissnmrt (79.ttsexpennd dissat-0.14928 Tc () Tj-0.-0.07608 sc (n) Tj Tj0.66 Tc ( ) Tj-0.12 T (t) Tj-0.14928 T

Figure (2): Distribution of patients according toeaetieiai ae

Waiting a long time for taking ...Waiting a long time for taking ...Waitin

Disagree

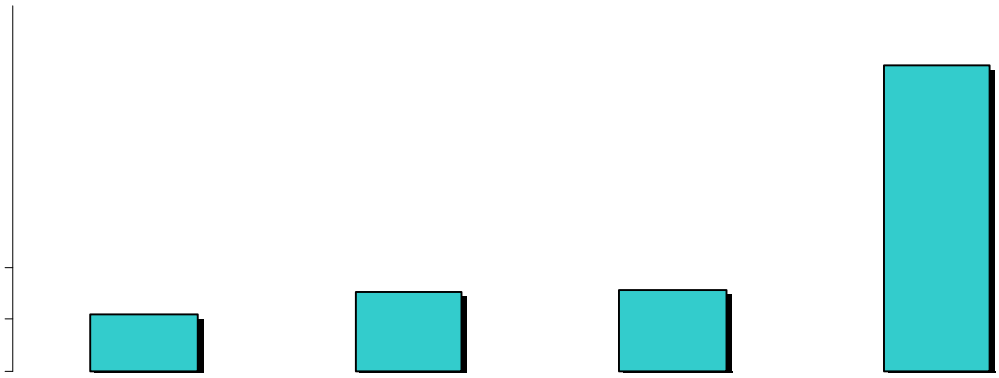


Figure (5): Distribution of patients regarding the time spent for laboratory investigations

Figure (5): The patients were distributed regarding the time taken for laboratory investigation as

uu u

Table (6): Distribution of patients according to their communication satisfaction level score by background characteristics (N=495)

* Statistically significant difference at (P<0.05)

Table (7): Distribution of patients accordj0.09072 Tc (i) Tj0.0-0.29856 Tc (n) Tj0.12 Tc (g) Tj-0.06 T

[illegible]

Res

Table (11): Mean satisfaction score of patients according to their perception to the provided Services(N=495)

Table (11): The mean s Tj-0.3164928 Tc (t) Tj0.09072 Tc (i) Tj0 Tc (s) Tj-0.31608 Tc (f) Tj-0.18144 Tc

Re

Figure (

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Table (17): Observation of hhysicians at outpatient clinic of General Surgery and Internal Medicine reg

Part IV:

Tab

	information - Both the outpatient clinic o	

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Part V

Table (22): SWOC Analys8

Discussion

The present study aimed to assess the work system at outpatient clinics of General Surgery and Internal Medicine at Fayoum University Hospital and addressed the i-0.12 Tc (p) Tj0.36 Tc (o) Tj-0.3

care providers, no collaboration between the nurse and the physician during patient examination (nurse registers the patients only) (tabl (nuyyt Cc (a) Tj-0.07608 Tc (t)5Tj0.12 Tc (a) Tj-0.0

A classic study was done by **(,oor K. et al., 2008)** showed that when faculty physicians personally examined patients card for by rd Tc (s) Tj0.09072 Tc (i) Tj- d

Rainer SB et al.

difficulties in inter-personal relationships, changing roles, and concerns about body image. Medical consultations can be influenced by different expectations concerning the dctor-patientsipa

Lis et al. (2009) declared th.05856 Tc (c) Tjat patients are usually not in a position to reliably juc accuracy of c dicgnosis or treatment plan, but th.05856 29856 Tc (e) Tj-0.36 Tc (y) Tj1.38 Tc ( ) Tj0.05856

Fornazari (2006) referred to that post-visit quality is one of the factors that may affect service satisfaction and efficiency. The continuity establistii ( ) Tj0.09072 TcTc (y) Tj3.3 Tc ( ) Tj0.0585

The study conducted by **Olgu et al., (1999)** on patient satisfaction in Turkey had shown that satisfaction from physician's performance achieved the highest score, followed by nurses .Such finding observed in both the public and private hospitals.

Delman and Beineke, (t

of the patients by the Medico Social Workers and 40% of patients by the security staff and nurses were perceived as friendly by 61%.

Thesu e

Regarding the time management the a tneg eeaea ied that t.05856 (a) Tj55.12 T28 T ac

hour a

the non-significant find

These satisfaction scores are comparable

demanding **(Banaszaea**emaemeeeeesdeeneaj0.1188 Tc (s)jd-0.38928 4c (i) Tji-0.3856 5c (e) Tjc-0.320sij0

experi

Most of the house officers and some residents expressed dissatisfaction from unorg608 Tc (m) Tj0.29856 Tc 0.09072 Tc (i) Tj-0.18144 Tc (z) Tj0.29856 Tc (e) Tj-0.29856 Tc (d) T

number of examied patients per day org608 Tc (m) Tj0.29856 Tc 0.09072 Tc (i) Tj-0.18144 Tc (z) tick6 Tc 0.05856 Tc (e) Tj-0.07608 Tc (t) Tj0 Tc (s) Tj-0.06 Tc (.) Tj2.1 1 Tf 86.4 578.4 462.72 20.16

These agree with observations of the researcher. the researcher observed that the doctor didn't give enough time to (61.1%) of patients to describe their complain, The doctor sometimes ignore what the paent td n (7.%) of patients, The doctor didn't prescribe medications for (85.2%) of patients, The doctor didn't give choces when decidng the treatment for any of the paents, The doctor didn't explan

Thee 5j0.097(n) Tj0.090.07608 e 5j0-0.31608 Tc (r) Tjeen eh14928 Tc (t) Tj0.2253h0.66 Tc (5j0.0i072
e t s144 Tc (e) Tj( ) Tj0.26Tj-0.18m0.18144 Tc (e) Tj0.36 Tc ( ) Tj-0i ng ngs 5j0.09ogafseo(
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A

**Aome health care providers expressed dissatisfaction that most patients are of l4928 Tc (w)
as it is paid**

Aoumerai et al. (2006) has shown that high financicwn ( ) Tj0.12 Tc (h) Tj0.09356 Tc (e) T

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Some of Health care providers expressed dj-0.38928 Tc (l) issatsfaction from lack of a we reco system andj-0.3892 Tc ( ) Tj0.22536 Tc (s) Tj-0.29856 Tc (u) Tj-0.12 Tc (g) Tj0.12 Tc (g) Tj0.05856

The current study delineated that nurses are not the source of information to the patients. The doctor has the major responsibility to communicate information about the disease condition and management strategy with the patient. The nurse didn't help the doctor during examination in the all observed patients. The patient privacy not well maintained.

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Discussion

Conclusion &(n) Tj-0.06 Tc ( ) Tj0 Tc.Jxom

Recommendations

Short term plan:

- **Political and programmatic support to the outpatient services through development of an updated documents including ;policies, strategies and procedures for outpatient services as follow:**

- Develop goal, mission, and objectives for each clinic.
- The supervision system and on-the job training.
- Policies and regulations related to manpo

2. Training the house officers will optimize the benefits of the man power resources and expand the scope of

Capitalize on nurses through shifting from job oriented tasks to comprehensive services.

- Establishment of WITS: Work improvement teams responsible for strict sTj0.12 Tc (p) Tj0.05856 Tc (e) Tj-0.07608 Tc (r) Tj-0.12 Tc (v) Tj0.09072 Tc (i) Tj0 making.
- Study
- vi

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- **Organize t**

Long term plan:

Patient flow long term plan:

Review vf e loeloen eo inle viel eeeei c26(e) Tj d0.2928sj8 Tc Tj -0.149091.T26(e) Tj d0.2928sje c Tj -0

involved to remove any road-blocks financial or otherwise. Policis may be subsquntly derived from pilot studies that do well.

• Establishing a culture that is grounded in metrics based and data driven dcision-making at all T

Summary

This current study focus on study of patient as well as health care provider's satisfaction with services offered at Internal Medicine and General Surgery out patient clinics in Fayoum University Hospital. It explores the factors that may affect the quality of services provided by observing the performance of health care providers (doctors andorses) at out-patient clinics.

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not giving them choices in treatment(clinical or surgical)we can say that Patients are usually not in a position to reliably

centered care,difficulty for follow up cases to reach their physicians,most patients are of low socioeconomic class so they may not do all investigations as they are paid, lack of a well recording system. The majority of house officers expressed dissatisfaction from many cases escape from diagnosis and come after that with complications, most of the doctors at the clinic prescribe high price medications, lack of experience of f ce c

tf 8 Tc ( ) Tj0.05856 Tc (c)42fmsc (n) Tj0..05856 Tc (ce) Tj1.38 Tc (o) Tj-0-0.3 Tcstmesg

patients and to improve the communication bet

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