

ASSESSMENT OF PATIENTS SATISFACTION WITH PHYSIOTHERAPY CARE

T. O OLATUNJI

M. O OGUNLANA

M. A BELLO

S. O OMOBAANU

Department Of Physiotherapy, Federal Medical Centre Abeokuta Ogun State Corresponding Author

MR. OGUNLANA M.O

C/o Physiotherapy Department Federal Medical Centre, Abeokuta Ogun State.

Correspondence: Opeoluwamic@yahoo.com 234-08034659378

Abstract

Patients' satisfaction has not been closely monitored in Physiotherapy and limited studies exist in this area of allied health services. This study focused on patients' satisfaction with Physiotherapy services in the Federal Medical Centre, Abeokuta, Nigeria (FMCA). A self administered questionnaire in English and Yoruba versions, was distributed to 51 respondents (Patients and Patients' proxies) who had received Physiotherapy care at the Physiotherapy outpatient department of the FMCA. Respondents' consent was sought. Questionnaire distribution and collection was done by a health record clerk of the FMCA. Respondents revealed that they were largely satisfied with; the amount of privacy they received during Physiotherapy treatment. The respondents were equally satisfied with Physiotherapists' character, the pieces of advice given to them on their health, overall care, interest shown, explanation of treatments, willingness to listen, explanation of problem, answers given, physiotherapists' skill and ability, courtesy and respect. The participants were however not satisfied with the small amount of time spent with them and the cost of treatment per session. The study concluded that the participants were well satisfied with the physiotherapy care but the cost may be a barrier for benefiting from physiotherapy intervention.

Keywords: Assessment, Satisfaction, Physiotherapy, Patients.

INTRODUCTION

Patients and health practitioners have been found to have differing views of health and progress in rehabilitation^{1,2}. Thus, the importance of patient centered care has been recognized in Physiotherapy^{3,4} along with general medicine, nursing and other allied health professions^{5,6,7}. In their study on expert practice in physiotherapy, Jensen et al⁸ identified the patient as the key source of knowledge in the consultation. They reported that expert physiotherapists recognize the importance of gaining an understanding of the social and psychological context of the patients' world rather than just focusing on the diagnostic process. To achieve this, they note that physiotherapists have effective listening skills and adopt a patient centred approach.

In an in-depth analysis of a physiotherapist-patient consultation, Thornquist⁹ states that the physiotherapist controls almost every aspect of the consultation and dominates the interaction, with patient questioning designed to elucidate the problems requiring treatment. However, Thornquist⁹ also concedes that Physiotherapists control is important, particularly the physiotherapist use of language, active listening skills and promoting patient involvement. This highlights the importance of practitioner communication skills in the interaction and is endorsed by research indicating that effective communication promotes patient adherence

and enhances patient satisfaction¹¹.

In an exploratory study of patients' satisfaction with Physiotherapy, May¹¹ interviewed 34 patients with back pain who had received outpatient physiotherapy at one of two hospital sites during the previous year. The aim of the study was to identify areas of care that the patients considered to be important for their satisfaction with physiotherapy.

It was concluded that patient care should be tailored to meet specific patient needs and that effective treatment outcome requires not only competence in certain techniques, but also that physiotherapists have a range of interpersonal skills to assist in patient management.

Patient satisfaction has not been closely monitored in physiotherapy and limited research data exist in this area of allied health services. By actively seeking patient input, the importance of the patient to the success of the physiotherapist patient interaction is highlighted and the benefit of adopting a patient centred approach in physiotherapy is reinforced.

In view of current trends towards improving quality of care by all Health Care Providers (HCPs), it will be needful to investigate the major areas that will ensure patients satisfaction; this could serve as premise for health care providers towards improved quality of care. In recent times, improved health care has been directed towards acquisition of equipments, and necessary manpower. This has not totally ensured improved quality of care, its might therefore be necessary to enquire from patients, critical areas that will assure patients satisfaction. Thus, this study is aimed at investigating the present level of satisfaction of patients receiving treatment in the physiotherapy outpatient clinic of the Federal Medical Centre Abeokuta Ogun State.

MATERIALS AND METHODS

Fifty-one participants receiving physiotherapy care at the Physiotherapy

department Federal Medical Centre Idi Aba, Ogun state were involved in this study. Ethical permission for the study was obtained from the Ethical Committee of the Federal Medical Centre Idi Aba Abeokuta.

Participants were recruited on a consecutive sampling technique involving them after their sessions of physiotherapy. Proxies (Parents and caregivers) stood in for patients that were not able to participate in the study due to age or cognitive impairment.

Participants of the study were given informed consent forms to seek their permission for the study. The questionnaire was administered by the record clerk, who ensured anonymity of the respondents. A 3- sectioned patient- satisfaction questionnaire was used to elicit information from patients as regards to their satisfaction with physiotherapy services in the study location. The questionnaire was developed by the research team. Face and content validity of the instrument was done by a panel of reviewers using a checklist of determinants of patients' satisfaction from literature. The Yoruba version was translated backward and forward to ensure that this version retains its internal consistency. Linguistics expert in English and Yoruba Language was involved in the translation. Test retest reliability of the questionnaire was done with a Cronbach alpha of 0.93.

Section A consists of questions that sought to obtain Demographic information from patients. Section B consists of 14 close ended questions that sought to assess level of satisfaction with Physiotherapy services. The questions were in a likert format ranging from not satisfied to excellently satisfied. The questions assessed the extent of satisfaction with amount of privacy given and the interest shown by the physiotherapists; character and willingness of the Physiotherapists

DATA ANALYSIS

Descriptive Statistics were used in summarizing the level of satisfaction of the respondents. A new variable Patient Satisfaction Score (PSS) was developed for

each respondent to be an objective reflection of the patients' level of satisfaction. This was developed from the summation of the grading of patient's response as follows: Excellently satisfied=5 very satisfied=4 satisfied=3 fairly satisfied=2 not satisfied=1.

A total of 14 questions were asked, giving a maximum PSS of 70 and a minimum of 14.

RESULTS

A total of 51 copies of questionnaire were received for analysis out of 60 questionnaires given out. 50.98% were female and 49.02% were male. The mean age of patients was 40.35 ± 26.37 .

Of the 51 respondents, 39.22% attends the Medicine Unit, 33.33% attends the Orthopaedic Unit, and 27.45% attends the Paediatric Unit of the Physiotherapy Department. 84.31% of these respondents have not attended any other Physiotherapy Clinic while 15.69% have attended other Physiotherapy Clinics. Forty-one of the 51 respondents gave responds to the section on education status. 11.76% had no education, 25.49% had primary education, 17.65% had secondary education and 25.49% had tertiary education. The mean PSS of 55.94 ± 10.76 was obtained.

Out of 51 respondents involved in this study, 41% were excellently satisfied with the amount of privacy they received during physiotherapy treatment, and 11.76% were fairly satisfied. On therapist's character, 55% were excellently satisfied, 2% were fairly satisfied and 0% was not satisfied. On the amount of time spent for treatment, 30% were excellently satisfied, 36% were just satisfied and 2% were not satisfied. 12% were not satisfied with the cost per treatment session, 32% were just satisfied while 26% were excellently satisfied. On advises given to patients on health, 40% were excellently satisfied, 37% were very satisfied and 4% were not satisfied. On overall care, 48% were excellently satisfied, 26% were very satisfied, 22% were just satisfied, 2% were fairly satisfied and 2% were not satisfied. Table 1 shows a frequency distribution of the

respondents' levels of satisfaction with respect to different care indices.

DISCUSSIONS

The purpose of this study was to investigate the present level of satisfaction of patients receiving treatment in Physiotherapy outpatient clinic. The findings from this study support earlier research in Physiotherapy^{9,16,12} and endorse the importance of Physiotherapist adopting a patient-centred approach and developing effective communication skills to optimise the Physiotherapist Patient interaction^{13,14,15}.

The outcome of this study revealed that the respondents were generally satisfied with the Physiotherapy care provided at the study centre. Respondents were excellently satisfied with the therapist character, Courtesy, respect, skill, ability and willingness to listen to their complaints. This corresponds with the study by May¹¹ who also discovered that patients were satisfied with the Physiotherapists who attended to them during their treatment sessions.

The major area of dissatisfaction expressed by the respondents was the treatment cost per session and time spent during treatment. The recent drive to improve revenue generated to augment maintenance cost of the health facility where this study was conducted may account for the seeming exorbitant rate of physiotherapy care. Patients may expect that if they pay more, they deserve much more attention which is not very feasible in the facility where this study was carried out; as it had limited space and fewer therapists. Time spent with each patient had to be minimized to reduce the waiting time of other patients.

The comment of the respondents was generally good and positive. Nevertheless, one respondent stated that the Physiotherapist needs more encouragement to improve their patient care. The discreet way people give out information in our environment hoping they would not implicate anyone with the information they give might have influenced the specificity of the kind of encouragement

this respondent is pointing at.

The respondents who had previous Physiotherapy experience were less satisfied than those who had not had such experience. This is understandable as the respondents without a previous Physiotherapy experience in other Physiotherapy clinics do not have a standard to compare the services given to them. But those that had been to other Physiotherapy facility might have a more objective outlook since they have a standard for making comparison. Since these groups of respondents' level of satisfaction were reduced compared to the other group, one might wonder the seeming expression of satisfaction by the respondents as false. There might be need to investigate the specific determinants of patient satisfaction with physiotherapy services especially involving patients that have had experience of different physiotherapy clinics.

According to May¹¹ the determinants of patients' satisfaction are a professional approach by physiotherapist, good communication skills, flexibility of patient's appointments and good treatment outcomes. Physiotherapists in the study location have been rated highly with reference to the level of patient satisfaction with their professional skills, counselling ability, character and courtesy shown. With the Physiotherapists been adjudged capable in these determinants of patient satisfaction; indicating a correlation with May¹¹ criteria for patients' satisfaction, hence the respondents consensus opinion of satisfaction with Physiotherapy care offered at the study location may not be far from being accurate.

ACKNOWLEDGEMENT

The authors acknowledged the immense contribution of the Management of the Federal Medical Centre Abeokuta, headed by Dr. T. Motayo for funding this research.

REFERENCES

1. Malzer RL: Patient Performance Level during Inpatient Physical Rehabilitation: Therapist, Nurse and Patient

- Perspective. Archives of Physical Medicine and Rehabilitation 1988; (69): 363 - 365.
2. St Claire L, Watkins J and Billingham B: Differences in meaning of health: a n exploratory study of general practitioners and their patients. Family Practice:1996; (13): 511 516.
 3. Grant R: Continuing Education does it make for a more competent practitioner? Australian Journal of Physiotherapy: 1994; 40th Jubilee: 33 37.
 4. Potter M, Gordon S and Hamer P: Identifying physiotherapist and patient expectations in private practice physiotherapy. Physiotherapy Canada (in press) 2003b.
 5. Brown JB, Stewart M, McCracken E, McWhinney IR and Levenstein J: The Patient centred Clinical Method 2: Definition and Application Family Practice, 1986.
 6. Fulford KVM, Ersser S, and Hope: Essential Practice in Patient centred Care. Oxford Blackwell Science, 1996.
 7. Henbest RJ and Stewart M: Patient centredness in the Consultation 2: Does it really make a difference? Family Practice:1990 (7): 28 33.
 8. Jensen GM, Gwyer J, Shephard KF and Hack LM: Expert Practice in Physical Therapy. Physical Therapy 2000; (80): 28 43.
 9. Thornquist E: Three voices in a Norwegian living room: An encounter from physiotherapy practice. Medical Anthropology Quarterly 1997(11): 324 351.
 10. Gyllensten AL, Gard G, Salford E and Ekdahl C: Interaction between patient and physiotherapist: A Qualitative Study Reflecting the Physiotherapist's Perspective. Physiotherapy research International: 1999; (4): 89 109.
 11. May SJ: Patient Satisfaction with

Management of Back Pain. Part 2: An explorative, qualitative study into patient's satisfaction with physiotherapy. *Physiotherapy* 2001; (87): 10 20.

12. Potter M: *Australian Journal of Physiotherapy* 2003; 49(3): 195 202.

13. Stewart MA, Brown JB and Weston WWC): Patient centred interviewing 111: Five provocative questions about the patient centred approach. *Canadian Family Physician*: 1989; (35): 159 161.

14. Jarman F: Communication Problems: a patient's view. *Nursing Times* 1995; (91): 30 1.

15. Law M, Baptiste S and Mills J: Client centred Practice: what does it mean and does it make a difference? *Canadian Journal of Occupational Therapy* 1995; (62): 250 257.

Table 1: Frequency Distribution of Level of Satisfaction with Physiotherapy Care

LEVEL STATE ACTION% /INDICES	NS	FS	S	VS	ES	TOTAL
PRIVACY	0	11.76	31.37	15.68	41.17	100
INTEREST SHOWN	0	4	18	36	42	100
THE PAPIST CHARACTER	0	1.96	17.64	25.49	54.88	100
EXPLANATION OS TREATMENT	2	4	24	32	40	100
WILLINGNESS TO LISTEN	2.04	2.04	24.48	22.44	48.96	100
EXPLANATION OF PROBLEM	2	4	28	24	42	100
ANSWERS GIVEN	2.04	4.08	32.64	22.64	48.96	100
TIME SPENT	2	2	36	32	30	100
COST PER SESSION	12	10	32	20	26	100
THE ARAPIST SKILLS/ABILITY	0	3.92	23.52	23.52	49	100
ADVICES GIVEN	3.89	1.92	17.28	36.48	40.32	100
THE ARAPIST ABILITY TO PUT AT EASE	1.96	0	23.52	33.32	41.16	100
THERAST COURTESY/RESPECT	2	2	22	22	54	100
OVERALL CARE	2	2	22	26		48

NS - Not Satisfied
 FS- Fairly Satisfied
 S - Satisfied
 VS - Very Satisfied
 ES - Excellently Satisfied