

WOLKITE UNIVERSITY
COLLEGE MEDICINE AND HEALTH SCIENCE
DEPARTMENT OF PUBLIC HEALTH

PATIENTS' SATISFACTION AND ASSOCIATED FACTORS TOWARDS HEALTH CARE SERVICES AT AGENA PIRMARY HOSPITAL GURAGHE ZONE,CENTERAL ETHIOPIA, 2025.

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WOLKITE, ETHIOPIA

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ABSTRACT

Background: Currently,patient satisfaction is a major concern in the health care system of Ethiopia. As the expectation of patients increase over time, the quality of the service has to keep on improving to maintain or increase level of satisfaction.

Objective: To assess levels of patients satisfaction and associated factor with overall health services rendered at Agena primary Hospital Gurage Zone,Central Ethiopia,2025.

Methods: cross sectional descriptive study was conducted among 288 participants at Agena primary Hospital from December 22,2025 to January 7,2025. systematic random sampling technique was used to selected the sampled subjects. All patients' visit at Agena Primary Hospital in this period was included in study. Standardized and structured questionnaire via face to face interview technique was collected,edited,tailed on master sheet, coded and entered into statistical software SPSS version 25 and result was presented by appropriate table and graphs. Finally descriptive statistics was done and summarized accordingly. Odds ratio with 95% confidence intervals (CI) was compute to identify factors associated with health care serves.Variables that have P-value <0.25 in bi-variable logistic regression was entered into the multi-variable logistic regression and P-value<0.05 was considered as significant independent predictors of level of patients satisfaction on health care services.

Result: In this study 288 participants were included with response rate of 98.6%. The overall satisfaction of patients was 68.3%. multiple logistic regression showed that availability of all drug in hospital (AOR 4.214,95%CI;1.06,16.802).and being farmer in occupational status (AOR 4.381,95%;1,02,18,847) were significantly associated with the level patient satisfaction towards health service provided.

Conclusion and Recommendation : In general, the overall satisfaction level of patients with the health care services provided at Agena primary hospital, Gurage zone was 68.3%. Availability of drugs and supplies and occupation of participants were positive and significant predictors of level of patient satisfaction.To solve the problem of scarcity of drugs and supplies the hospital need to understand the extent of the problem and plan to look for different mechanisms to the adequate stock of essential drugs and supplies.

Key Words: Health service, patient satisfaction, primary hospital

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TABLE CONTENTS

ABSTRACT ---------- i
ACKNOWLEDGEMENTS ---------- ii
LIST OF TABLE ----------v
LIST OF FIGURES ----------v
CHAPTER 1:INTRODUCTION ----------1
1.1 Background ----------1
1.2. Statements of the problem ----------2
1.3 Significance of the study ----------4
CHAPTER- TWO: LITERATURE REVIEW ----------5
2.1 Literature review ----------5
2.1.1 Patient satisfaction towards health care services ----------5
2.2.2 factor associated with patient satisfaction ----------5
2.2.3 Conceptual framework ----------8
CHAPTER –THREE :OBJECTIVE ----------9
3.1 General Objectives ----------9
3.2 Specific Objectives ----------9
CHAPTER - FOUR:METHODS AND MATERIALS ----------9
4.1. Study area: ----------9
4.2. Study period: ---------- 10
4.3. Study design: ---------- 10
4.4 Populations: ---------- 10
4.5.Eligibility criteria ---------- 10
4.5.1 Inclusion criteria ---------- 10
4.5.2 Exclusion criteria ---------- 11
4.6. Sample size determination ---------- 11
4.7. Sampling Method. ---------- 11
4.8. Data collection tool ---------- 12
4.9. Study variables ---------- 12
4.10. Operational definitions ---------- 13
4.11. Data processing and analysis. ---------- 14

4.12. Data quality assurance ---------- **14**
4.13. Ethical consideration. ---------- **15**
4.14 Dissemination Of Result ---------- **15**
CHAPTER FIVE:RESULT AND ANALYISIS ---------- **15**
5.1.Socio-demographic characteristics of the patient. ---------- **15**
5.2 Institutional aspects and pattern of visit of respondent ---------- **18**
5.3 Level of patient's satisfaction Related characteristics ---------- **20**
5.4. Overall level of patient satisfaction in the Agena primary hospital Gurage Zone. --- **21**
5.5. Factors associated with level of patients satisfaction ---------- **22**
CHAPTER SIX:DISCUSSION ---------- **25**
CHAPTER SEVEN: CONCULSION AND RECOMMENDATION
.....28
7.1 Conclusion ---------- **28**
7.2 Recommendation ---------- **28**
References ---------- **29**
Questionnaire ---------- **31**

LIST OF TABLE

Table 1: The socio-demographic characteristics of respondents at Agena Primary Hospital,Central Ethiopia, January, 2025. ---------- 16

Table 2: Institutional aspects and patterns of visit among patients health services provided at Agena primary hospital Central Ethiopia, January, 2025.---------- 18

Table 3 : Level of satisfaction of patients with the different components of health care services at Agena Primary Hospital,Central Ethiopia, January, 2025. ---------- 20

Table 4: Bi-variate and Multi- variate analysis showing factors associated with patients satisfaction at Agena primary hospital ,central Ethiopia , January, 2025.---------- 22

LIST OF FIGURES

figure 1:Shows conceptual frame work to assess level of patients satisfaction and associated factor towards health care services in Agena primary hospital Central Ethiopia,2025.----------8

Figure 2:Level of patient satisfaction at Agena primary hospital , Central Ethiopia, January,2025 . ---------- 22

ACRONYMS

S.N	Acronyms	Full words
1	CI	Confidence Interval
2	DE	Data Collector
3	DEC	Data Entry Clerk
4	OPD	Out Patient Department
5	PI	Principal Investigator
6	SPSS	Statistical Package For The Social Science
7	WHO	World Health Organization

CHAPTER 1:INTRODUCTION

1.1 Background

Patient satisfaction is defined as the patient's judgment on the quality of care in all aspects, particularly concerning the interpersonal process. Based on Andrea Eisenberg, 2020 patient satisfaction defined as a measure of how happy a patient is with their healthcare(1, 2). It is related to technical and interpersonal behavior, partnership building, immediate and positive nonverbal behavior, more social observation, courtesy, consideration, clear communication and information provision, respectful treatment, frequency of contact, length of consultation, service availability, and waiting time(3, 4). Measuring patient satisfaction has become an integral part of hospital/clinic management strategies across the globe. Moreover, the quality assurance and accreditation process in most countries requires that the satisfaction of patients be measured on regular bases((5).

The factors that increase patient satisfaction are those that influence what patients expect of a service as well as those that influence the experience of the service.
Factors that influence what patients expect of a service are: word of mouth-experience, especially negative ones, are easily shared among communities. This is might influence the expectation a patient, Past experience- how a previous encounter with a hospital was experienced, External influences-such as media and Personal needs- although there are common things patients require feeling satisfied some patients might home special need such as religions, dietary requirements(5).
Factors that influence what patients experienced the services are: Competence, credibility, security, communication, and understanding of the patient, Assurance-ability of the service provides to be knowledgeable and to inspire confidence and trust, Responsiveness- willingness to assist patients, Reliability-the ability to accountable perform the service offered, Tangibles- the quality of equipment and of the physical surroundings and Access- the cost and time for patients to use a service as well as hospital hours(5).

1.2. Statements of the problem

Patient satisfaction is considered as one of the desired out comes of health care and it is directly related with utilization of health services. Asking patients what they think about the care and treatment they have received is an important step towards improving the quality of care, and to ensuring that local health service are meeting patients' needs. A useful way of doing this by carrying out survey of patients who have used health services(6)

In world there is general argument that hospitals especially Public sector hospitals perform poorly. A recent study in Bangladesh found that most powerful predictor for client satisfaction with health services was provider behavior, especially respects and politeness. Furthermore reduction in waiting time was more important to clients than prolongation of consultation time(7).The study in the Eastern India Hospital showed the overall of patient satisfaction level with the health services provided was 60.5%,the level of patient satisfaction was good(8),
Another study in the Hanoi, Vietnam the overall patient satisfaction at one polyclinic was 53.5% (95% CI: 1.9-6.2)(9).

In Africa there is general argument that hospitals especially Public sector hospitals perform poorly. Other ousters have noted that in sufficient staffing and lack of supplies may impede the efficient delivery of health care to patients (10, 11). Therefore, in low and middle income countries alike, if services are available at all they are often at low quality many poor people by pass the closest public facility to go to more costly private facilities or choose better quality at more distant public facilities(12).This therefore indicates that health care systems in financing, efficiency, equality and quality and are poorly prepared to meet these challenges(13).
Another study in the Uganda hospital showed that 77.9%,[95% CI(0.729-0.822),] of the respondents expressed their satisfactions with services deliveries. 22.15,[95% CI ,0.178- 0.2717)] were dissatisfied(14).

In Ethiopia the backward socioeconomic development resulting in one of the lowest standard of Living, poor environmental conditions and low level of social services has been the major causes for a poor environmental conditions and low level of social services has been the major causes for a poor health status of the people. This situation has been aggravated in recent years by the high population growth and repeated natural disasters and civil wars together with the Lack or inadequate infra-structures(15, 16) .

A study on outpatient performance of a public referral hospital in Addis Ababa showed 47.8% satisfaction rate(17) .

Another study in Jimma Medical center showed the overall of patient satisfaction level with the health service provided was 79 (27.8%) . the overall satisfaction level of the patient was low(18).

Another study in worabe comprehensive specialized hospital 50.2% were satisfied with the laboratory services(19).

Another study in Gurage zone selected Primary Hospital showed the overall of patient satisfaction level with the health service provided at the outpatient department of the primary hospitals was 66.5%(20) .

Studies have shown that satisfied patients are more likely to utilize health services, comply with medical treatment, and continue with health care providers(21, 22). Satisfaction is related to more partnership building, more social conversation, and courtesy, clear communication and information, respectful treatment, length of consultation, cleanliness of facility, drug availability and waiting time(23, 24).

Measurement of patient satisfaction involves multi-dimensional aspects of patients' opinion on health care identifying problems in health care, and evaluation of health care(25-28)(25,26,27,28). Furthermore, patient satisfaction studies allow service users' voice to be heard and affirm the importance of their experience for improved health care planning(29).

Donabadian, arguably the leading theorist in the area of quality assurance, has emphasized that: patient satisfaction is of fundamental importance as a measure of the quality of care because it gives information on the provider's success at meeting those

patient values and expectations, which are matters on which the patient is the ultimate authority(29).

Care assessed to be high quality according to clinical, economic or other provider-defined criteria is far from ideal if as a result of that care the patient is unhappy or dissatisfied. There is, then, a sound rationale for making the organization and delivery of health care responsive to consumer opinion. Thus interest in the patient's point of view is increasing and consumer satisfaction being adopted as a standard component of evaluative research(30).

In prior years when hospitals were symbols of humanitarian efforts for community welfare, accountability for performance was of little concern. Today however, people are increasingly concerned about hospital's performance because:-1) Hospitals use an increasing proportion of scarce community resources. 2) There are increasing questions about quality and effectiveness(19). There is increasing evidence that appropriately addressing consumer's health care lead to improved health care out comes. Expectations about quality of care are linked to perceptions of care and patients satisfaction with services and perceived quality tend to influence utilization of services as well as practitioner's recommendations(31).

1.3 Significance of the study

The study would have an important input in assessing the level of patients' satisfaction and associated factory on out patient as well as in patient health care services and provide a recommendation on an improved health service delivery that will be help full to fill research knowledge gaps which ultimately contributes to enhance quality of patient services in the hospital and improve the level of patients' satisfaction. The study enhance the capacity to look for possible alternative solutions to health service delivery in collaboration with hospitals. It also contribute to increase in the knowledge and awareness of the problem area by concerned bodies including the hospital staffs. It would also service as a stepping stone on which further studies can build.

CHAPTER- TWO: LITERATURE REVIEW

2.1 Literature review

2.1.1 Patient satisfaction towards health care services

Patient satisfaction measures have developed tremendous attractions in the sector of health care delivery services for the purpose of ascertaining the quality of health care services in general and nursing care in particular. Several authors, in the contemporary health care literature, have indicated that even though patient satisfaction is probably the most difficult to measure among other components in the quality of health care services in general , its importance in determining quality of care cannot be set aside(32). They are also becoming increasingly critical of the quality of service they experience(33) . To improve hospitals performance, there needs to be partnerships including communication between patients, the community, the health care professionals and health service managers. These kinds of partnership assist health service managers in their effort to improve the performance of health facility.

Patients the only reason for hospital existence need services which are reasonably accessible and easily available at all times. Out patient departments must commence treatment and have test and examination result made available properly (34).

2.2.2 factor associated with patient satisfaction

The quality of physician- patient relationships and interactions are themselves important in influencing health outcomes. Clean explanation of procedures by physicians and decision making partnership by patients has been shown to positively influence clinical out comes .More over the attitude and behavior of health professionals are known to have an important influence on patient care and quality of care(35).

A recent study in Bangladesh found that most powerful predictor for client satisfaction with health services was provider behavior, especially respects and politeness. Furthermore reduction in waiting time was more important to clients than prolongation of consultation time(7).

Another study in Singapore hospitals showed that out of the total 300 respondents, 30(11.09%) rated the service quality very good, 122(48.14%) rated service quality good 70(31.0%) rated the service quality fair, 18(7.1%) rated the service quality poor and 4 (1.6%) rated the service quality very poor.
The important finding in sequence were;doctors should thoroughly explain conditions to patients,should possess a wide spectrum of knowledge and Doctors/staffs should be friendly and courteous (13).

In Africa there is general argument that hospitals especially Public sector hospitals perform poorly. Other ousters have noted that in sufficient staffing and lack of supplies may impede the efficient delivery of health care to patients(10, 11). Therefore, in low and middle income countries alike, if services are available at all they are often at low quality. many poor people by pass the closest public facility to go to more costly private facilities or choose better quality at more distant public facilities(12).This therefore indicates that health care systems in financing, efficiency, equality and quality and are poorly prepared to meet these challenges(13).

Study in Mozambique on satisfaction with the out patient health care service showed 55% satisfaction rate and failure to receive prescribed medication was found to be the most common complaint associated with lower satisfaction rates(36) .

A study in Kenya, reported that drug availability in health facility had a positive impact on demand for services. Another study in the Tororo district also concluded that the availability of drugs in the rural health facilities brought satisfaction not only to the users, but also to the providers(36).
In Ethiopia the backward socioeconomic development resulting in one of the lowest standard of Living, poor environmental conditions and low level of social services has been the major causes for a poor environmental conditions and low level of social services has been the major causes for a poor health status of the people. This

situation has been aggravated in recent years by the high population growth and repeated natural disasters and civil wars together with the Lack or inadequate infra-structures(15, 16) .

A study on outpatient performance of a teaching hospital in Gondor town showed 22.0% satisfaction rate(37). Another study on satisfaction on patient services in hospitals of Amhara region showed that long waiting hours during registration, Visiting of Doctors after registration, laboratory procedures and re-visiting of the Doctor for evaluation with laboratory results and obtaining drugs from the hospitals' pharmacies were associated with dissatisfaction(37).

Another study in Tigray zonal hospitals found that the client satisfaction level with the out patient departments in the zonal hospitals was 43.6%. Satisfaction was rated highest with country and respect by the health workers with 93.8% satisfaction rate. Dissatisfaction was rated highest by respondents with the lack of drugs and supplies in the hospitals pharmacies with 64.9% reporting dissatisfaction(38).

In a survey undertaken in private clinics in Addis Ababa high rates of satisfaction (64-99%) were found in all aspects of medical care except affordability of service changes(39).

A study in Jimma Hospital OPD revealed that on the average it took 9 hours and 13 minutes for a patient to finish the whole round before living home, out of which 49.6% was spent waiting for services. The laboratory and X-ray departments accounted for 60.1% of the total time spent(40). Another study in Jimma Hospital showed 57.1% level of satisfaction without patient health service. The most frequently faced problems affecting utilization leading to dissatisfaction were failure to obtain prescribed medications from the hospital pharmacy, long waiting time preceding consultation and difficulty to locate different section easily(41). Therefore factors related to quality in relation to clients satisfaction like waiting time in registration, examination rooms, laboratory procedures and availability of drugs and supplies in the hospital pharmacy, courtesy of the health professionals and provision of information by the health professionals are some of the factors that affect the satisfaction of clients. Having adequate information about these factors in hospitals is

relevant in order to provide recommendations to improve the health service delivery and result in a better client satisfaction

As it can be inferred from the above litterateurs almost all of the studies were done in out patient departments. This study will be conducted to access and determine the perceived level of patients' satisfaction with the overall provision of health service in Agena Primary Hospital.

2.2.3 Conceptual framework

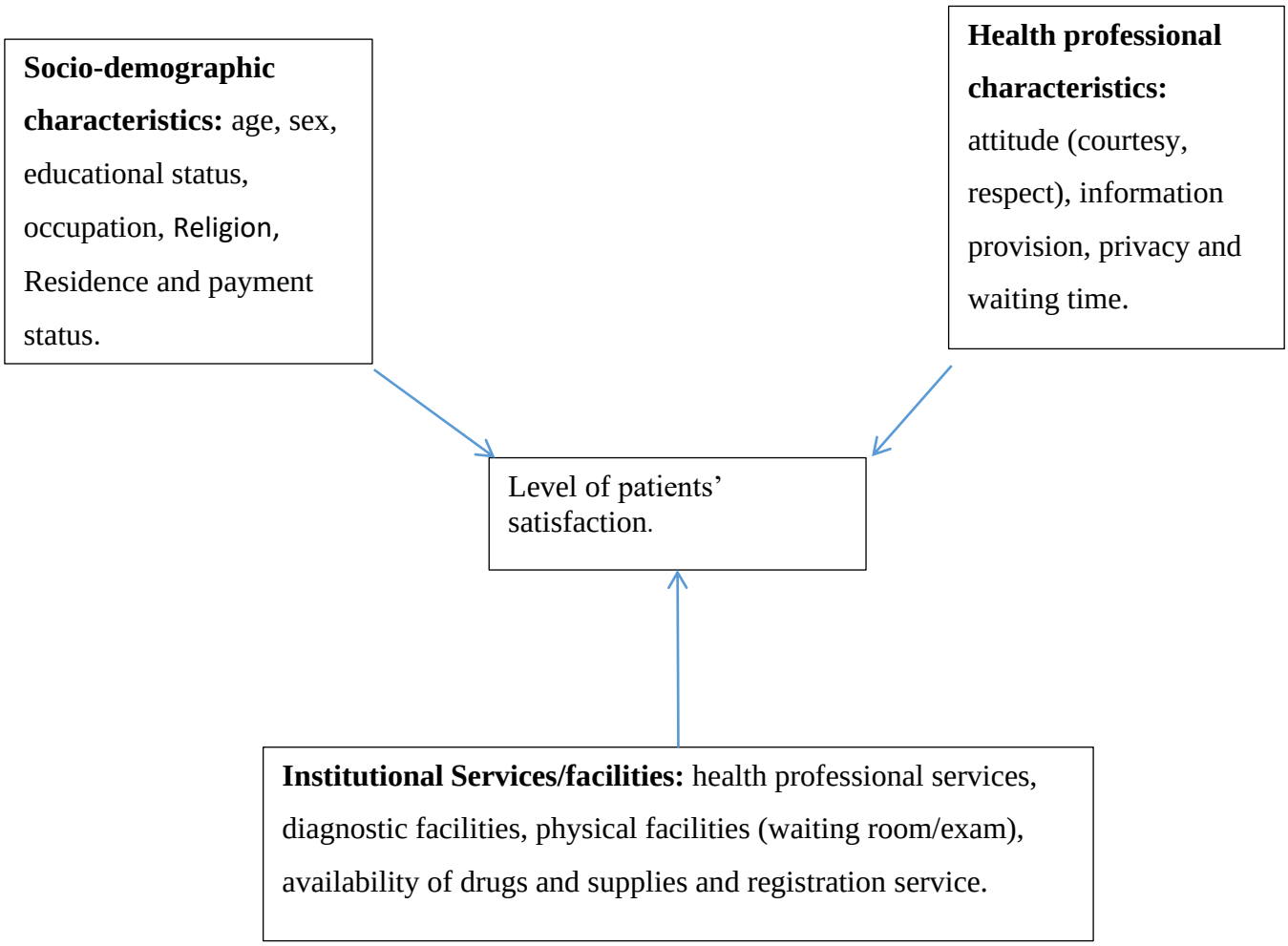


figure 1:Shows conceptual frame work to assess level of patients satisfaction and associated factor towards health care services in Agena primary hospital Central Ethiopia,2025.

CHAPTER –THREE :OBJECTIVE

3.1 General Objectives

To assess level of patients' satisfaction and associated factor towards health services deliveries at Agena primary Hospital ,Gurage Zone,Central Ethiopia, 2025.

3.2 Specific Objectives

- To determine the level of patients satisfaction towards health services deliveries at Agena primary Hospital,Gurage Zone,Central Ethiopia, 2025.
- To determine factors affecting the level of patients' Satisfaction at Agena primary Hospital ,Gurage Zone,Central Ethiopia, 2025.

CHAPTER - FOUR:METHODS AND MATERIALS

4.1. Study area:

The study was conducted in Agena primary hospital. This hospital is one of the public hospital in the country, found in Agena town administration Ezha Woreda Gurage Zone, Central Ethiopia. It is about 32km from Wolkite University and It is about 181km from Addis Ababa, It serves around 9 kebeles.

Annually it serves about 19641 people, The hospital has currently been delivering its health care services in the medical, minor surgery,gynecology and pediatrics wards through a total of 45 beds, has also OPD,for each department except Surgery,as well as Eye care clinic ,chronic illness,TB clinics. Have also Laboratory units,pharmacy units ,though a total of 48 medical personnel's;whom 6 General Practitioner,5 BSc Nurses,10 are clinical Nurses ,5 BSc Midwifes,2 are clinical Midwifes,1 masters lab technicians , 3 are degree lab technicians,3 are diploma lab technicians,1 Degree pharmacy,3 are diploma pharmacy,3 Health extension,4 Public health officer,1 Environmental health,1 Biomedical engineering and with 38 sportive staff ,total it

have 86 workers.the information was taken from Medical director of Agena primary hospital.

4.2. Study period:

A study was conducted from December 22 ,2024 to January 7 ,2025.

4.3. Study design:

Institutional based cross-sectional study design was employed to assess the levels of patients' satisfaction and associated factor with health services rendered at Agena primary Hospital.

4.4 Populations:

4.4.1. Source population

The source of population for this study was all patients visit in Agena Primary hospital in the study period.

4.4.2. Study population:

The study population was all sampled patients visiting in Agena primary hospital during data collection period .

4.5.Eligibility criteria

4.5.1 Inclusion criteria

All adult patients admitted for more than 24 hour at Agena primary hospital during the study period were included in the study.all out patients age 18 years above and conscious,coherent and oriented to time,person and place.

4.5.2 Exclusion criteria

-Very seriously ill patients who do not have some body to accompany them because difficulty of interviewing such cases.
-Those who were forced to visit for diagnostic purpose was excluded from the study.

4.6. Sample size determination

The sample size was determined by using single population proportion formula considering the following assumptions; using the prevalence of 47.8 % from a similar study done in Addis Ababa Public Hospital in Ethiopia (17). The confidence interval is 95 %, the margin of error is 5 %, and 10 % is the non-respondent rate.

$n_0 = z^2 p(1-p)/d^2$

Where, n_0=required minimum sample size

z=z-score value corresponding to a given level of confidence (1.96)

p= single population proportion (0.478)

w=allowable margins of error (0.05)

$n_0 = 1.96^2\ 0.478\ (1-0.478)/0.05$

$n_0 = 383$

The total no of population seen at the Agena primary hospital during the study period is 826 ,which is less than 10,000 so we use reduction formula

$n = n_0/(1+n_0/N)$

n=383/(1+383/826)

n=262, add non respondent rate 10% so n=288

n=288

4.7. Sampling Method.

Sample size was determined proportionately from each department and selection was performed randomly using systematic random sampling technique, The size of the department was determined by reviewing the annual document of each department for

the number of patients visiting them selection of the patient was systematic random sampling technique.

Sample was selected by using systematic sampling methods and sampling interval calculated as

k=N/n

K=826/288

Where k=sampling interval

N=total No population seen at hospital at study period

n=sample size

k=3

Every 3rd patient was selected just at the exit of the OPD of the hospital after receiving the health service in the OPD. Patient in every other bed was selected for in patient clients. Interviewing was conducted by first screening them before starting the actual interviewing.

4.8. Data collection tool

Standardized and structured questionnaire was developed for face to face interview. The questionnaire was designed to obtain information on socio demographic characteristics of respondents and their satisfaction level with the different components of the Hospital's services which included the availability of drugs and supplies, information provision by the health workers, waiting time to get the health services, courtesies and respect of the health workers, and cleanness of different parts of the hospital.

4.9. Study variables

4.9.1 Dependent variables

Level of patient satisfaction

4.9.2. Independent variables

- **Socio-demographic characteristics:** age, sex, educational status, occupation, Residence and payment status
- **Health professional characteristics:** attitude (courtesy, respect), information provision, privacy and waiting time.
- **Institutional Services/facilities:** health professional services, diagnostic facilities, physical facilities (waiting room/exam),availability of drugs and supplies and registration service.

4.10. Operational definitions

Outpatient department:-part of a hospital where different clients get different services as an out patient. It is the first step of getting the hospital's service

.**Inpatient:** patient who gets medical care being admitted to health care unit.

Outpatient: patient who gets medical care being not admitted to health care unit

Patient waiting time: The interval between departure from the proceeding out patient satisfaction and receiving services at the next out patient station(42)

Outpatient station:- The different part of out patient department registration satisfaction, weighing station, examination room, Laboratory and dispensary, etc...

Consultation time:- the time spent discussing health matter with physician.

Very satisfaction :- Above one expectation.

Satisfaction:- Just one expectation.

Neutral:- Free from both.

Dissatisfaction:-Below one expectation

Very dissatisfaction:- Fail to meet ones expectation usually leading to disappointment.

Satisfied:- Participants having a score above (≥) the mean on each of the target dimensions was satisfied(19)..

Dissatisfied:- Participants having a score below the mean on each of the target dimensions were dissatisfied(19).

Assessment: is the process by which the characteristics and needs of client. Groups or situations are evaluated or determined so that they can be addressed. The assessment from the basis of a plan for service or actions(42).

Service: any activity undertaken to meet the social needs

Quality: user based quality is defend as fitness for use which means the consumers perception of quality .It is also defined as meeting the desires and expectations of customers(42) .

Client/ customer/ consumer: An individual who purchases or users a good or service.

Customer's satisfaction: Meeting the perceived needs and the expectations of the clients in relation to factors related to the health care provider and amenity

4.11. Data processing and analysis.

SPSS version 25.0 statistical package was used for data management .The principal investigator was perform data entry and cleaning.10% of questionnaire are also be cross checked with the already entered data to maintain its validity, the result was presented by appropriate table and graphs. Finally descriptive statistics was done and summarize accordingly.Odds ratio with 95% confidence intervals (CI) was compute to identify factors associated with health care serves.Variables that have P-value <0.25 in bi-variable logistic regression was entered into the multi-variable logistic regression and P-value <0.05 was considered as significant independent predictors of level of patients satisfaction on health care services.

4.12. Data quality assurance

The quality of data was insured through training of data collectors, close supervision and immediate feed back reviewing each of completed questionnaires daily. Daily information exchange was a means used to correct problems during the course of data collection, consent for the survey was obtained and confidentiality was assured to

improve the quality of data .Data consistency and completeness was checked through out the data collection ,data entry and analysis.

4.13. Ethical consideration.

The ethical approval and clearance for the study before data collection was obtained from Wolkite university college of medicine and Health science department of public Health -An official letter from the college was obtained to the hospital and verbal consent from the Medical director, Maternal and Head nurse was obtained too – informed consent was also obtained from the patients after explaining the purpose of the study to them. To ensure privacy and confidentiality the exit interview was conducted for out patient study where questions and answers cannot be overheard. They was also informed that the information obtained from them would not be disclosed to the third person /body Name and other identifying information was not used in the study.

4.14 Dissemination Of Result

The study result was elaborated ,compiled and submitted to Department of Public health, college of medicine and health science, Wolkite University. Finally we was disseminated and recommend based on result to many concerned body governmental and non -governmental organization especially Zonal health department, woreda health offices, and related health facility manages beneficiaries.

CHAPTER FIVE:RESULT AND ANALYISIS

5.1.Socio-demographic characteristics of the patient.

Among the total sample size (n=288) 284 patients were completed the questionnaire which makes the total response rate of 98.6%.More than half respondent 147(51.8%)

are male and more than half of respondent 105(37%) were between the ages of 18 and 34 and 207(72.9%) of respondents were are Married. Most of study participants are Gurage 218(76.8%) in ethnicity and 127(44.7%) of respondents were are orthodox in religions. most of study participants level of education was 7-12 Grade 110(38.7%) and 67(23.6) of respondents were are farmer in occupation status. (Table 1)

Table 1: The socio-demographic characteristics of respondents at Agena Primary Hospital,Central Ethiopia January, 2025.

Category	Characteristics	Frequency (N)	Percentage(%)
Sex	Male	147	51.8
	Female	137	48.2
	Total	284	100.0
Age	18-34	105	37.0
	35-49	99	34.9
	50-64	46	16.2
	>65	34	12
	Total	284	100
Marital status	Single	55	19.4
	Married	207	72.9
	Divorced	14	4.9
	Windowed	8	2.8
	Total	284	100
Educational status	Illiterate	76	26.8
	1-6 grade	41	14.4
	7-12 grade	110	38.7
	Diploma &Above	57	20.1

Occupational status	Total	284	100
	Government Employee	55	19.4
	Merchant	65	22.9
	Farmer	67	23.6
	House wife	58	20.4
	Student	20	7
	Daily lab	19	6.7
	Total	284	100
Residence	Urban	135	47.5
	Rural	149	52.5
	Total	284	100
Religion	Muslim	107	37.7
	Orthodox	127	44.7
	Protestant	39	13.7
	Others	11	3.9
	Total	284	100
Ethnicity	Gurage	218	76.8
	Oromo	13	4.6
	Amhara	24	8.5
	Hadiya	10	3.5
	Others	19	6.7
	Total	284	100
Payment Status	Paying	133	46.8
	Free	151	53.2
	Total	284	100

5.2 Institutional aspects and pattern of visit of respondent

Among total respondents, 251(88.4%) respondents were are visits for illness. 153(53.8%) of study participants reported that they found only some of the prescribed drugs from the hospital pharmacy. For 229(80.6%) participants their received was < 1 hours. 211(74.3%) of study participants reported that they are gated laboratory test services. (Table 2)

Table 2: Institutional aspects and patterns of visit among patients health services provided at Agena primary hospital Central Ethiopia January ,2025.

Variable	Category	Frequency (N)	Percent (%)
Reason of visit	Illness	251	88.4
	Others	33	11.6
	Total	284	100
Number of visit within the last 24 months	One times	78	27.5
	Two times	91	32
	Three times	24	8.5
	Four time and above	69	24.3
	Never visit	22	7.7
	Total	284	100
Waiting time to see physician	<1 hours	229	80.6
	1-2 hours	46	16.2
	>2hours	9	3.2
	Total	284	100
How long take you to get health services	<1hours	230	81
	1-2 hours	44	15.5

	2-6hours	7	2.5
	>6hours	3	1.1
	Total	284	100
Laboratory test ordered	yes	211	74.3
	No	73	25.7
	Total	284	100
How long did you wait	<1hours	180	63.4
	1-2hours	23	8.1
	>2hours	8	2.8
	Total	211	100
Drug ordered to you	yes	255	89.8
	No	29	10.2
	Total	284	100
You able to get in hospital	Yes all	84	29.6
	Some only	153	53.9
	None of them	18	6.3
	Total	255	100
Knowledge about your illness	Yes	226	79.6
	No	58	20.4
	Total	284	100
Do you feel schedule time in health facility convenient for you	Yes	252	88.7
	No	32	11.3
	Total	284	100
Registration process was done timely	yes	261	91.9
	no	23	8.1
	total	284	100

Does privacy of consultation room appropriate	yes	248	87.3
	no	36	12.7
	Total	284	100

5.3 Level of patient's satisfaction Related characteristics

From the total respondents 138(48.5%) were satisfied with the payments for the exam, drug and others services; while 18(6.3%) of them were very dissatisfied. Majorities 168(59%) were satisfied with the time spent waiting to be seen by health worker, to get health services and get back; While 10(3.5%) of them were very dissatisfied and majorities 82(28.9%) were very satisfied with courtesy and respect that get from health worker as shown in table 3. Overall level of patient satisfaction score with health care service provided in Agena primary hospitals was 68.3%.(Table3)

Table 3 : Level of satisfaction of patients with the different components of health care services at Agena Primary Hospital,Central Ethiopia, January, 2025.

Characteristics	V. Sat N (%)	Sat. N (%)	Neut. N (%)	Dissat. N (%)	V.dissat.N (%)
Payments for the exam & Drug	15(5.3)	138(48.6)	52(18.3)	61(21.5)	18(6.3)
Time spent to see a Health worker	16(5.6)	168(59.2)	61(21.5)	29(10.2)	10(3.5)
Courtesy and respect	82(28.9)	107(37.7)	41(14.4)	40(14.1)	14(4.9)
Access to Water, Latrine & Hand	15(5.3)	132(46.5)	46(16.2)	76(26.9)	15(5.3)

Washing Facilities					
Cleanness of waiting area	46(16.2)	145(51.1)	33(11.6)	46(16.2)	14(4.9)
Confidentiality	35(12.3)	161(56.7)	36(12.7)	34(12)	18(6.3)
Information of services	30(10.6)	150(52.8)	49(17.3)	40(14.1)	15(5.3)
To assure privacy	42(14.8)	137(48.2)	48(16.9)	41(14.4)	16(5.6)
How satisfied with the availability of drugs and supplies	31(10.9)	129(45.4)	32(11.3)	75(26.4)	17(6)
Way questions & queries dealt by staff	19(6.7)	166(58.5)	48(16.9)	40(14.1)	11(3.9)
Overall level of satisfaction	47(16.5)	139(48.9)	46(16.2)	40(14.1)	12(4.2)

5.4. Overall level of patient satisfaction in the Agena primary hospital Gurage Zone.

From the study participants 68.3% are satisfied; while 31.7% are Dissatisfied.



Figure 2:Level of patient satisfaction at Agena primary hospital , Central Ethiopia, January, 2025 G.C

5.5. Factors associated with level of patients satisfaction

Bi-variate logistic regression was conducted between socio-demographic and patterns of visit variables .those variables with P <0.25 at bi-variate analysis were included in multiple logistic regressions. According to the outcomes of multivariate analysis patients who able get drug was among significant predictors of level of patients satisfaction.Accordingly,patient who getting all drug in hospital were 4.21 times more satisfied than those who never get any in hospital (AOR 4.214,95%CI;1.057,16.802). Patients who farmer were 4.38 times satisfied compared to those who daily lab (AOR 4.381,95%;1,02,18,847).(Table 4)

Table 4: Bi-variate and Multi- variate analysis showing factors associated with patients satisfaction at Agena primary hospital ,central Ethiopia , January,2025.

Variable	Categories	Level of patient satisfaction	Crude odd ration(COR)	Adjusted odd ration(AOD)	P value

		Dissatisfied N(%)	Satisfied N(%)			
Age	18-34	35(33.3)	70(66.7)	0.52(0.21,1.31)	0.944(0.18,4.943)	0.945
	35-49	31(31.3)	68(68.7)	0.569(0.224,1.446)	0.924(0.224,3.81)	0.913
	50-64	17(37)	29(63)	0.442(0.159,1.232)	0.559(0.146,2.14)	0.396
	>65	7(20.6)	27(79.4)	1	1	0.000
Educational status	Illiterate	19(25)	57(75)	1.07(0.488,2.35)	0.841(0.171,4.144)	0.831
	1-6 grade	14(34.1)	27(65.9)	0.689(0.287,1.65)	1.442(0.277,7.518)	0.664
	7-12 grade	42(38.2)	68(61.8)	0.578(0.286,1.1.67)	0.581(0.133,2.543)	0.471
	Diploma &Above	15(26.3)	42(73.7)	1	1	0.000
Occupational status	Government Employee	17(30.9)	38(69.1)	2.012(0.692,5.846)	3.135(0.481,20.421)	0.232
	Merchant	27(41.5)	38(58.5)	1.267(0.454,3.537)	1.644(0.44,6.095)	0.457
	Farmer	15(22.4)	52(77.6)	3.12(1.072,9.079)	4.381(1,018,18,847)	**0.047**
	House wife	19(32.8)	39(67.2)	1.847(0.644,5.302)	3.6(0.827,15.671)	0.88
	Student	3(15)	17(85)	5.1(1.113,23.372	6.344(1.015,39.66)	**0.048**
	Daily lab	9(47.40	10(52.6)	1	1	0.000
Ethnicity	Gurage	58(26.6)	160(73.4)	3.065(1.186,7.920)	2.054(0.518,8.140	0,306
	Oromo	5(38.5)	8(61.5)	1.778(0.423,7.467)	1.5672(0,243,10.166)	0.635

	Amhara	14(58.3)	10(41.7)	0.2794(0.236,2.667)	0.592(0.104,3.378)	0.555
	Hadiya	3(30)	7(70)	2.593(0.511,13.165)	2.29(0.257,17.645)	0.484
	others	10(52.6)	9(47.4)	1	1	0.000
Payment Status	Paying	54(40.6)	79(59.4)	0.458(0.275,0.762)	0.708(0.319,1.567)	0.394
	Free	36(23.8)	105(76.2)	1	1	0.00
How long did you wait	<1hours	57(31.7)	123(68.3)	2.158(0.521,8.937)	3.6(0.658,19.685)	0.140
	1-2hours	8(34.8)	15(65.2)	1.875(0.367,9.57)	2.197(0.444,19.877)	0.262
	>2hours	4(50)	4(50)	1	1	0.000
Drug ordered to you	yes	78(30.6)	177(69.4)	1.6(0.730,3.514)	1.233(0,245,6.193)	0.799
	No	12(41.4)	17(58.6)	1	1	0.00
Were able you get drug	Yes all	15(17.9)	69(82.1)	7.229(2.41,21.714)	4.214(1.057,16.802)	**0.042**
	Some only	52(34)	101(66)	3.052(1.117,8.338)	1.799(0.491,6.592)	0.376
	None of them	11(61.1)	7(38.9)	1	1	0.00
Schedule time convenient	Yes	70(27.8)	182(72.2)	4.333(2.013,9.33)	1.709(0.512,5.711)	0.384
	No	20(62.5)	12(37.5)	1	1	0.00
Does privacy of consultation room appropriate	Yes	75(30.2)	173(69.8)	1.648(0.805,3.371)	1,137(0.471,2.747)	0.775
	No	15(41.7)	21(58.3)	1	1	0.00

CHAPTER SIX:DISCUSSION

The current study conducted in the level of patient satisfaction Agena primary hospitals of Guraghe zone showed that the overall satisfaction score of the patients with services provided was 68.3%. This overall satisfaction level report is low compared to the report of the studies conducted in Hospital of Wollega Oromia region and Assendabo and Jimma Town and Teaching Hospital of Isfahan which showed 91%, 85.7% and 86% respectively overall satisfaction (43-45) . but the findings is comparable with studies conducted in Health centers in central Ethiopia which reported overall patient satisfaction level of 62.6% (18)[18]. This difference might be previously listed hospitals were established prior to hospitals of covered by the study and are well equipped both in human resource and other facilities. Study in Mozambique on satisfaction with the out patient health care service showed 55% satisfaction rate and failure to receive prescribed medication was found to be the most common complaint associated with lower satisfaction rates ,which is lower than this study(36). Another study in the Uganda hospital showed that 77.9% of the respondents expressed their satisfactions with services deliveries,While 22.15 were dissatisfied,which also higher than this study(14).. A study in Kenya, reported that drug availability in health facility had a positive impact on demand for services. Another study in the Tororo district also concluded that the availability of drugs in the rural health facilities brought satisfaction not only to the users, but also to the providers(46)(36). Similar study was conducted in tertiary hospital in north central Nigeria showed that 71.4% of the respondents expressed their satisfaction with services deliveries while the remaining were dissatisfied ,which is also higher than this study(47).

According to the result of the above study the availability drugs and supplies and Occupation of the participants are found to be an important predictor of patient satisfaction. The availability of drugs and supplies in the hospitals negatively affected

patient satisfaction in this study.Concerning the availability of drugs and supplies,45.4% of respondents were satisfied with the availability of drugs and supplies. Another study in Tigray zonal hospitals found that the client satisfaction level with the out patient departments in the zonal hospitals was 43.6%.Concerning the availability of drugs and supplies, 64.9% of respondents were dissatisfied with the availability of drugs and supplies in the hospital pharmacy ,then the above study is less dissatisfied rate. Another study in Jimma Medical center showed the overall of patient satisfaction level with the health service provided was 27.8%(18). Another study in worabe comprehensive specialized hospital 50.2% were satisfied with the laboratory services(19). Another study in Gurage zone selected Primary Hospital showed the overall of patient satisfaction level with the health service provided at the outpatient department of the primary hospitals was 66.5% (20). This overall satisfaction level report is high compared to the report of the studies conducted in Jimma, Worabe and Gurage Zone selected hospital. A study on outpatient performance of a teaching hospital in Gondor town showed 22.0% satisfaction rate (37), which is also lower than this study. Another study on satisfaction on patient services in hospitals of Amhara region showed that long waiting hours during registration, Visiting of Doctors after registration, laboratory procedures and re-visiting of the Doctor for evaluation with laboratory results and obtaining drugs from the hospitals' pharmacies were associated with dissatisfaction(37).

Another study in Tigray zonal hospitals found that the client satisfaction level with the out patient departments in the zonal hospitals was 43.6%,which is also lower than this study. A study on outpatient performance of a public referral hospital in Addis Ababa showed 47.8% satisfaction rate(17), which is also lower than this study.The results illustrated that variables availability of drugs and supplies were significantly associated with a level of patient satisfaction.Availability of drugs and supplies was one of the variables that significantly affected level of patient satisfaction. patient who getting all drug in hospital were 4.21 times more satisfied than those who never get any in hospital. This finding was the same as the report finding conducted in Jimma medical center and Tororo respectively(18, 36). This might be due to patients are more likely to positive experience when the receive timely treatments, which is made possible by having the necessary medication and medical supplies on hand. Any shortage or delay can lead to dissatisfaction and a sense of neglect. Also occupation

status was one of the variables that significantly affected level of patient satisfaction. Patients who farmer were 4.38 times satisfied compared to those who daily lab.This might be due to Daily laborers often have irregular working hours and limited free time. This can affect the ability Ito access health care services leading to frustration and lower satisfaction. And also daily laborers may have a lower and unstable income, which could lead to concerns about the cost of healthcare services.

Strength and limitation

A standardized and valid questionnaire was used, and the study included new variables that did not address different literature views. The cross-sectional nature of the study design does not confirm a definitive cause-and-effect relationship. The study did not address the qualitative section.

CHAPTER SEVEN: CONCULSION AND RECOMMENDATION

7.1 Conclusion

In general, the overall satisfaction level of patients with the health care services provided at Agena primary hospital, Gurage zone was 68.3%. Availability of drugs and supplies and occupation of participants were positive and significant predictors of level of patient satisfaction.

7.2 Recommendation

Based on the above conclusion the following recommendations are forwarded:To solve the problem of scarcity of drugs and supplies the Agena primary hospital need to understand the extent of the problem and plan to look for different mechanisms to the adequate stock of essential drugs and supplies. And also zonal heath office should be assess patient satisfaction regularly conducted in very quarter. It will be helpful in keeping knowing the gap of the service that provide for improving the quality of the services and patient outcome.

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Questionnaire

Consent Form

Greeting: How do you do?

Dear respondent My name is.....I am fourth year public health graduate class, students at Wolkite University Faculty of medical and health science in the department of public health. I am conducting a research to assess Patients' satisfaction and associated factors towards health care services deliveries at A gena primary hospital. The aim of the study is to generate evidence on quality of service and factors influencing service delivery based on patients' perspective. The study will have a benefit in the effort to improve the quality of service by stakeholders and can influence decision makers' would like to reassure you that there is no any risk to you for participating in the data collection and your confidentiality will be maintained as your name is not required in the questionnaire. You have also the right for participation or non participation of the data collection process.

PART ONE SOCIO-DEMOGRAPJIC CHARACTERSICS

1.1. Sex : 1 Male 2. Female

1.2. Age (in years) 1. 18-34 3. 50-64
2.35-49 4.≥ 65

1.3. Marital status: 1. Single 3. Divorced
2. Married 4. Widowed

1.4. Educational status
1. Illiterate 3. Grade 7-12
2. Grade 1-6 4. Diploma and above

1.5. Occupation 1. Gov. t employee 4. House wife
2. Merchant 5. student
3. Farmer 6. Daily Lab

1.6. Residence 1. Urban 2. Rural

1.7. Religion:- 1. Muslim 3. protestant
2. Orthodox d. Others

1.8. Ethnicity. 1.Gurage 3. Amhara 5.Others

2. Oromo 4. Hadiya

1.9. Payment status: 1. paying 2. free

PART-TWO: QUESTIONS ON INSTITUTIONAL ASPECTS AND PATTERNS OF VISIT AMONG PATIENTS

2.1.Reason for visit; 1.Illness 2.Others.

2.2. Number of Visit within the last 24 months

1.never visit 2.One time 3.Two times 4.Three times 5.Four time or more

2.3. How long did you wait be for seeing a physician ?

1. <1hour 2. 1-2 hours 3. >2hours

2.4. How long (minutes, hours) does it normally take you to get the health service ?

1. <1hor 2. 1-2 hours 3. 2-6 hour 4. >6hours

2.5. Were any laboratory ordered to you?

1. Yes 2. No

2,6. If yes (above question No5), how long did you wait to give lab specimen?

1. <1hrs 2.1-2 hrs 3. >2 hrs

2.7.Were drug and supplies ordered to you?

1. Yes 2. No

2.8. If yes (Question No 15), were you able to get them all in the hospital pharmacy?

1. Yes all 2. some only 3. None of them

2.9. At the time of your discharge did you feel that you had enough knowledge about your illness to taken care of your self at home?

1. yes 2. no

2.10. Did you feel that the schedule hours at the health facility was convenient for you?

1. Yes 2. No

2.11 .After seeing a Doctor how long does it take you to be attended by a Nurse other staff for injection, dressing...?

1. <1hour 2. 1-2hours 3 . >2 hours

2.12.Do you thing registration process was done timely?

1.yes 2. no

2.13.Does privacy of consultation room appropriate ?

1.yes 2.no

2.14. Do you understand the interviewed Language during the you get health care services ?

1.yes 2. no

2.15. Does a physician told you your cause of illness ?

1.yes 2.no

2.16. Does a physician told you how to prevent re-occurrence of your illness ?

1.yes 2. no

PART-THREE: QUESTIONS ON RESPONDENTS OF LEVEL OF SATISFACTION

3.1.How much are you satisfied with the payments for the exam ,drug other services ?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.2. How much are you satisfied with the time spent waiting to be seen by the health worker, to get health services and get back?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.3. How satisfied are you with the courtesy and respect of the Doctor /Nurse during your visit?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.4. How satisfied are you with the access to water ,latrine and hand washing facility ?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.5.How satisfied are you with Overall cleanliness and comfort of the waiting area, examination room and the compound?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.6.How satisfied are you with the measures taken to assure confidentially about your health problem?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.7. How much are you satisfied with the information of the service of the hospital?(eg. in locating the rooms, for registration, exam rooms, Lab and drug dispensing

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.8. How much are you satisfied by the way Doctor examined you, measures taken to assure your privacy during your examination?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied
5. very dissatisfied

3.9.How satisfied are you with the availability of drugs and supplies in the Hospital pharmacy?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied

5. very dissatisfied

3.10 . How satisfied are you with the way your questions and queries were dealt by the staffs at the hospital?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied

5. very dissatisfied

3.11.How do you rate your Overall level of satisfaction regarding the delivery of the health service you received?

1. very satisfied 2. satisfied 3 Neutral 4. dissatisfied

5. very dissatisfied

Interview's Name_____

Signature_____

Date of interview_____