Patients Perception about Home Health Care

Abdullah Helan Alanazi

Riyadh City, Saudi Arabia

I. The Problem

Introduction

Home health care (HHC) is that health services are provided to individuals and families in their places of residence in order to promote, maintain or restore health, or maximize the level of independence, while minimizing the effects of disability and illness, including terminal illness. Due to the steady increase in the prevalence of chronic diseases, aging population, and hospital costs, home health care has become an essential component of the healthcare system in developed countries. This has helped to reduce the length of hospital stay, increase the desire of patients and relatives to avoid prolonged expensive hospital care particularly at the end of the patient's life, decrease the risk of cross-infection, and preserve the identity, comfort, and satisfaction of the patient and his family.

In Saudi Arabia, ministry of health adopted implementation of The Home Medicine Program by virtue of ministerial decree No 25831 dated 3/4/1430 H. The program provides easy, good and home health services for patients who are in need for this service, as well as enhancing the contribution of families of the patients in following up their patients to recover in a way preserves their dignity.

The researcher in this study will figure out the aspects that affect the home health care service with regard to patients perception and the provision of service.

1.1 Statement of the problem

This study will investigate the behavior and the service provided by the staff of Home Health Care working in several hospitals in Riyadh City. It will take into consideration the satisfaction of patients from these employees and (why) also the underestimation and the causes of it .

1.2 Hypothesis

There is no relationship between patients satisfaction and the good quality provision of home health care.

1.3 Significance of the study

Theoretically :

To seek the causes of the unsatisfactory view of patients benefiting from home health care in Riyadh City . **Practically :**

This research will help to improve the home health care services and give some ideas to train services providers in a way that satisfy patients.

1.3 Study Objective:

This study objective is To describe the patients perception about home health care provided by various hospitals offering this service in Riyadh City.

1.4 Delimitations of the study

Spatial limitation : Homes benefiting from Home Health Services , Riyadh city.
Subjective limitation : The services, the behaviors of Home Health Care staff and the patients response.
Time limitation : From 1st of April 2013 until 20th of April 2013

1.5 Definitions

Home Health Care: the service provided for elderly and disabled people at their homes. Patients: elderly & disabled people.

II. Review of the literature

Various studies took into consideration the satisfaction of patients from Home Health Care services. Some of these studies considered the satisfaction from the point of view of patients and some studies considered employees point of view. The researcher will evaluate the studies from patients perception by evaluating two variables (Knowledge – Equipment). Among these studies are :

Liz Gill and Lesley White, The University of Sydney, Sydney, Australia (Jan 2010) found that In the healthcare sector, there is an urgent need for differentiation and standardization of the definitions and constructs for satisfaction and perceived health service quality and their adoption in all future health services research. The continued misuse and perpetuation of the inter-changeability of terminology not only compromises the worth of research, it inhibits the possibility of finding much needed answers as how best to conceive and measure health service quality from the patient's perspective. Further, based on the existing evidence that the patient satisfaction is an unpredictable construct, a focus entirely on perceived service quality, as the definitive construct, is justified; and given the extremely high intensity nature of the service delivery process in the health industry, it would seem that the continuation of the focus on patient satisfaction as a measure of service outcome and service quality is seriously flawed.

Ali M. Al-Hazmi and Nabil Y. Al-Kurashi, (2005) Department of Family & Community Medicine, College of Medicine, King Faisal University, Dammam, Saudi Arabia found that hospital and Primary Home Health Care administrators, as well as health care professionals, knew little about Home Health Care services. The sources of knowledge of administrators were medical journals, college studies, and hospital work, in that order, while for health care professionals, hospital experience was the main source of knowledge of those services.

The conclusions of the study are that policymakers in the Ministry of Health in Saudi Arabia need to implement measures to include Home Health Care concepts and skills in the education and training of health care professionals, promote the Home Health Care through media, on-the-job training, symposia, workshops, and short courses. Curriculum designers in medical schools should encourage the inclusion of some concepts and skills of home health care in the curriculum of medical, nursing, and health sciences schools as part of regular undergraduate studies, and incorporate training on home health care practice in post graduate programs.

As a conclusion, there is an important common factors shared between the two studies which held in different countries.

The first factor is considering the patient opinion when improving health services and there is a thick line between providing services and accepting them with satisfactory.

The second factor is health care providers should be very well educated, trained and have comprehensive knowledge about patients need and the service that they provide.

III. Study Procedures

3.1 Research Design:

The researcher used a descriptive method to describe the research problem because still it is not obvious that the staff of Home Health Care are not doing their job very will or the patients are complaining for more attention to their requirements, so the researcher thinks that describing the problem is the best way to solve it.

3.2 Study Population and Sampling:

The researcher studied the patients receiving Home Health Care in Riyadh city, Kingdom of Saudi Arabia .

3.2.1 Participants:

Participants in this study were patients who are elderly or disabled that receiving Home Health Care, Riyadh City, KSA. The patients were selected randomly.

3.2.2 Sampling procedures:

Participants were selected through a non-probability sample with a number of 50 patients.

3.3 Instrument:

3.3.1 Items: The instrument used in this study is an interview form. The interview form consisted of two sections (demographic, general and opinion information).

3.3.2 The scale: 5 points LIKERT scale as follows :

1=Very Satisfied 2= Satisfied 3= Not Sure

4= Disappointed 5= Very Disappointed

3.4 Validity and Reliability:

- **3.4.1 Validity:** the content validity increased through:
- a. Reviewing the relevant literature.

b. The interview form was examined for validity and reliability by bringing it to a qualified person such as professor who inspected the continent for validity and reliability.

3.4.2 Reliability: Cronbach's alpha (SPSS) was used to measure the internal consistency reliability of the interview form as follow:

Cronbach's Alpha	N of Items
.944	12

3.5 Data collection:

The researcher interviewed patients by himself. The interview time took about two weeks. Time to complete the interview form was about seven to fifteen minutes. The response rate was 100 %.

3.6 Statistical Treatment:

The data was analyzed using a universal descriptive statistics. The data was also analyzed using (SPSS) program, Version 19.

3.7 Study Limitation:

- 1- The researcher should have studied the non Saudi patient also and find out whether the have the same privileges.
- 2- The researcher should consider the Home Health Care Staff point of view.
- 3- The study would be more effective if used all over Kingdom of Saudi Arabia.

IV. Results

4.1 <u>Socio-demographic variables:</u>

After analysis of participants data, the following was found:

	Table 1 : Sex					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	male	24	48.0	48.0	48.0	
	female	26	52.0	52.0	100.0	
	Total	50	100.0	100.0		

Table 1 shows that 24 males participated in the research with a percentage of (48%) and 26 females participated with a percentage of (52%).

	Table 2 : Age							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	31-35	2	4.0	4.0	4.0			
	36-40	4	8.0	8.0	12.0			
	41-45	10	20.0	20.0	32.0			
	46-50	3	6.0	6.0	38.0			
	50 above	31	62.0	62.0	100.0			
	Total	50	100.0	100.0				

Table 2 shows that most of the participants were above 50 years old with a percentage of (62%).

Table 3 : Education	
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	Table 5 : Education						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	illiterate	13	26.0	26.0	26.0		
	intermediate	3	6.0	6.0	32.0		
	high school	24	48.0	48.0	80.0		
	diploma	5	10.0	10.0	90.0		
	graduate	4	8.0	8.0	98.0		
	postgraduate	1	2.0	2.0	100.0		
	Total	50	100.0	100.0			

Table 3 shows that (48%) of the participants were having an educational level of high school and (26%) were illiterate.

	Table 4 : Marital Status					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	married	46	92.0	92.0	92.0	
	unmarried	4	8.0	8.0	100.0	
	Total	50	100.0	100.0		

Table 4 shows that (92%) of the participants were married with a number of (46) patients.

	Table 5 : Income Level							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	dependent	3	6.0	6.0	6.0			
	unemployed	19	38.0	38.0	44.0			
	less than 5000 sr	22	44.0	44.0	88.0			
	5000-10000 sr	5	10.0	10.0	98.0			
	11000-20000 sr	1	2.0	2.0	100.0			
	Total	50	100.0	100.0				

Table 5 shows that (44%) of the participants were getting less than 5000 SR income and (38%) were unemployed.

4.2 The information :

What is the extent of your Satisfaction about the home Care center management

	TABLE 6	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	44	88.0	88.0	88.0
	satisfied	6	12.0	12.0	100.0
	Total	50	100.0	100.0	

What is the extent of your Satisfaction about

the care Provided by the staff to your Fears and worries						
Г	TABLE 7	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	very satisfied	45	90.0	90.0	90.0	
	satisfied	5	10.0	10.0	100.0	
	Total	50	100.0	100.0		

What is the extent of your tisfaction about the efficiency Of the staff

Satisfaction about the efficiency of the staff					
	TABLE 8	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	43	86.0	86.0	86.0
	satisfied	7	14.0	14.0	100.0
	Total	50	100.0	100.0	

What is the extent of your

	Satisfaction about the respect You have by the staff						
	TABLE 9	Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	very satisfied	41	82.0	82.0	82.0		
	satisfied	9	18.0	18.0	100.0		
	Total	50	100.0	100.0			

What is the extent of your

Satisfaction about the knowledge Of t	the staff with your health troubles

		Substaction about the	knowledge of the	stan white your nearth troe	10105
TAB	LE 10	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	39	78.0	78.0	78.0
	satisfied	11	22.0	22.0	100.0
	Total	50	100.0	100.0	

What is the extent of your

Satisfaction about the types of Services provided concerning Your healthcare

r	TABLE 11	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	44	88.0	88.0	88.0
	satisfied	6	12.0	12.0	100.0

	Satisf		hat is the extent of of Services provide	of your ided concerning Your heal	thcare
TAI	BLE 11	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	44	88.0	88.0	88.0
	satisfied	6	12.0	12.0	100.0
	Total	50	100.0	100.0	

What is the extent of your Satisfaction about your feeling Rest during providing healthcare To you

TA	BLE 12	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	42	84.0	84.0	84.0
	satisfied	8	16.0	16.0	100.0
	Total	50	100.0	100.0	

What is the extent of your

Satisfaction about your knowledge Person of contact during problem TABLE 13 Frequency Percent Valid Percent Cumulative Percent Valid very satisfied 42 84.0 84.0 84.0 satisfied 16.0 16.0 100.0 Tota 50 100.0 100.0

What is the extent of your Satisfaction about the capacity Of the home medicine staff To satisfy your needs

ТА	BLE 14	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	42	84.0	84.0	84.0
	satisfied	8	16.0	16.0	100.0
	Total	50	100.0	100.0	

What is the extent of your

Satisfaction about the response Of employees to your fears And worries

Т	TABLE 15	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	42	84.0	84.0	84.0
	satisfied	8	16.0	16.0	100.0
	Total	50	100.0	100.0	

What is the extent of your Satisfaction

	about	your ability To detern	nine the time of he	ome Visit in suitable time f	for you
TAB	SLE 16	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	41	82.0	82.0	82.0
	satisfied	9	18.0	18.0	100.0
	Total	50	100.0	100.0	

What is the extent of your

isfaction about the attendance Of the same	persons to provide healthcare	

	Sati	sfaction about the atte	ndance Of the sar	ne persons to provide healt	hcare
Т	TABLE 17	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	very satisfied	43	86.0	86.0	86.0
	satisfied	7	14.0	14.0	100.0
	Total	50	100.0	100.0	

Table 18 Descriptive Statistics

	Ν	Mean	Std. Deviation
Q1	5	0 1.12	.328
Q2	5	0 1.10	.303
Q3	5	0 1.14	.351
Q4	5	0 1.18	.388
Q5	5	0 1.22	
Q6	5	0 1.12	.328
Q7	5	0 1.16	.370
Q8	5	0 1.16	.370
Q9	5	0 1.16	.370
Q10	5	0 1.16	.370

Q11 Q12 Valid N (list wise)	50 50	$\begin{array}{c} 1.18\\ 1.14\end{array}$.388 .351
Valid N (list wise)	50		

Range:

1.00 - 1.80 Very Satisfied 1.80 - 2.60 Satisfied 2.60 - 3.40 Not Sure 3.40 - 4.20 Disappointed 4.20- 5.00 Very Disappointed

V. Discussion

There are a lot of studies that described patients satisfaction about health services provided to them in hospitals like Liz Gill & Lesley White (2010), which concentrated on the concept of satisfaction and its relationship with health staff and the provision of service. This study is completely different from the researcher study. The researcher concentrated on the patients (Elderly – Disabled) point of view because there are no available studies considered the same specific categories.

The researcher study sample consisted of 50 participants with a percentage of 48% males and 52% females. Most of them where above 50 years old with 62% which indicates that elderly people are the most benefited from home health care services. About 28% of the participants age were 36 - 45 which indicates that there might be a relationship between these patients disability and accidental causes. 48% of participants have minimum of high school and 26% where illiterate. The vast majority of the patients were married with 92% which gives a good indicator that even they are disable still they have a normal life. The concerning aspect of this study is that about 82% of the participants were either unemployed or they have less than 5000 SR income per month which gives a heavy load on the provision of services concerning equipments and finance.

The results of this study showed that more than 90% of the participants were very satisfied with the home health care services provided to them with a mean of 1.16 and a standard deviation of .370 which reflect good conception about the service.

The researcher in this study focused on the aspect of the staff knowledge in evaluating the patients perception about home health care. Thus, this study supported the study done by Ali Alhazmi & Nabil Alkurash (2005) which resulted in that there is a lack of knowledge from staff aspect in dealing with home health care. However, with the advanced information and considering the recommendations for such studies, the researcher found that there is a great percentage of satisfaction from patients regarding the staff knowledge aspect (education-training) and the services aspect (equipments- supplies).

VI. Recommendations

1. There should be a specific staff majored in long term health care.

- 2. There are some sicknesses that still not obviously considered like aging.
- 3. The researcher recommend studying the long term cases with ages from 30 to 40.

References

- [1]. A critical review of patient satisfaction, Liz Gill and Lesley White, 2010, Faculty of Pharmacy, The University of Sydney, Sydney, Australia.
- [2]. Health Care Professional' Knowledge on Home Health Care in AlKhubar & AlDammam, Ali Al-Hazmi, Nabil AlKurashi, 2005, Department of Family & Community Medicine, College of Medicine, King Faisal University, Dammam, Saudi Arabia.
- [3]. Home Medical Care, Ministry of Health Publication, 2011, Riyadh, Saudi Arabia.
- [4]. A walk of Hope, The national Charitable Foundation for Home Health Care, 14th edition 2011, Jeddah, Saudi Arabia.
- [5]. Home Health Care Guidance, Directorate of Health Affairs in Eastern Region, First Edition 2012, Khubar, Saudi Arabia.

Inter	Appind rviev		rm
Sex:	Male		Female
Age:	20-25⩽	s	26-30&more
	30-35⩽	s	36-40&more
	40-45&mo	re	46-50
	Above 50		
Education Level:		Illiterate	Intermediate
		High School	Diploma
		Graduated	Postgraduate
Marital Status:		Married	Unmarried
Income Level:		Dependant	Unemployed
		Less than 500	OSR
		5000SR - 100	OOSR
		11000SR - 20	000SR
		More Than 20	00050

(1) Information	Very Satisfied	Satisfied	Not Sure	Disappointed	Very Disappointed
What is the extent of your					
Satisfaction about the home					
Care center management					

(2)	Information	Very Satisfied	Satisfied	Not Sure	Disappointed	Very Disappointed
What is the ext	ent of your					
Satisfaction abo	out the care					
Provided by the	staff to your					
Fears and worri	es					

(3)	Information	Very Satisfied	Satisfied	Not Sure	Disappointed	Very Disappointed
What is the ext	tent of your					
Satisfaction abo	out the efficiency					
Of the staff						

(4) Information	Very Satisfied	Satisfied	Not Sure	Disappointed	Very Disappointed
What is the extent of your					
Satisfaction about the respect					
You have by the staff					

(5)	Information	Very Satisfied	Sa	atisfied	Not Sure	Disappointed	Very Disappointed
	extent of your						
Satisfaction a	about the						
knowledge							
Of the staff w	vith your health						
troubles							
(6)	Information	Very Satis	fied	Satisfied	Not Sur	e Disappointed	Very Disappointed
	extent of your						· · · · · · · · · · · · · · · · · · ·
	bout the types of						
Services prov	vided concerning						
Your healthca							
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(7)	Information	Very Satis	sned	Satisfied	Not Sure	e Disappointed	Very Disappointed
	extent of your						
	bout your feeling				1		
	roviding healthcare				1		
To you				1			
(8)	Information	Very Satisf	ied	Satisfied	Not Sure	Disappointed	Very Disappointed
What is the e							
	bout your knowledge						
Person of con	tact during problem						
(9)	Information	Very Sa	tisfied	Satisfie	d Not Sur	re Disappointed	Very Disappointed
What is the	extent of your						
Satisfaction							
	about the capacity						
	about the capacity medicine staff						
Of the home	about the capacity medicine staff						
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healthcare