

Health Records Management Practices and Patients' Satisfaction in Selected University Medical Centres in South-West, Nigeria

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ABSTRACT

The idea of patients' satisfaction has gained momentum in the last two decades due to increasing awareness on the right of the patient to quality health care regardless of religion and socio-political affiliation. The current study ascertains the extent to which patients are satisfied with the health records management practices in the university medical centres. This research employed a descriptive survey design. The study was conducted among the 210 patients (staff and students) who were randomly selected from 235 who had visited the Medical Centres for at least 4 times and had interaction with the Health Information Management Practitioners. Data was collected with the aid of a self-developed questionnaire which was tested for validity and reliability using Cronbach's alpha test which yielded 0.83%. Data collected were analyzed using frequency counts and percentage distribution. Findings indicate that more than two-thirds (75.2%) perceived that their medical records files are well arranged. The results show that most of the medical centres were still making use of the traditional manual medical records-keeping (86.7%) while electronic records keeping accounted for only 13.4%. Also, (62.9%) of the respondents were dissatisfied with the overall level of service received while 62.9% of the respondents identified misfiling as a possible barrier militating against quick retrieval of patients' records. Above all, 90.5% of the respondents thought it necessary for the medical centre to keep patients' records electronically for easy storage and retrieval. The paper recommends that regular staff training should be conducted for effective service delivery and improve patient satisfaction.

Keywords: Health records management practices, Patients' satisfaction, University medical centre, Students, Staff, South-West, Nigeria.

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Highlights of this paper

- The article aims to ascertain the extent to which patients are satisfied with the health records management practices employed in the selected university medical centres.
- The paper identified inadequate health information management staff and a need for regular staff training for effective service delivery and improved patient satisfaction.
- The paper recommends the need for the use to introduce electronic health records system in the selected university medical centres.

1. INTRODUCTION

The health care centres in any country is established to provide the needed medical and health services for the benefits of the citizenry. The patients remain a major stakeholder in this space and they deserve the best possible care imaginable. However, in many resource constraints countries, patients' often protest against lack of satisfaction in the care rendered to them due to diverse barriers commonly experienced while in the health facilities to receive. The major issues include government failure to appreciate the centrality and the provision of basic health facilities, poor funding of the health sector and inadequate manpower to handle most of the services needed by the citizenry (Ojo & Owolabi, 2017). As such, patients experience a low level of satisfaction and many end up patronizing quacks and unprofessional care providers all over the place. Hence, the level of satisfaction with the care provided to the patients is critically important and needs to be investigated. Besides, the provision of good health records management system is key to improving patient satisfaction. In some settings, patients' satisfaction is synonymous with improving quality of care (Olomi, Mboya, & Monongi, 2017) and where there is poorly rendered, the vulnerable citizens' suffer the consequences (Homer, Nightingale, & Jobanputra, 2009). This article aims to present health records management practices and patients' satisfaction in selected university medical centres in South-West, Nigeria.

1.1. Statement of the Problem

Many public health facilities in Nigeria still experience poor health records management practices and this is mostly due to long-time neglect, inadequate funding, long waiting time at the health facilities and poor storage and retrieval of patients' health records. Thus, it cannot be overemphasized that more still needs to be done to ascertain the state of things at University Medical Centres. This study, therefore, seeks to ascertain the Health Records Management Practices and Patients' Satisfaction in selected Medical Centres in South-West, Nigeria to contribute to existing literature, theory and practice.

1.2. Objective of the Study

The focus of this paper is to determine Health Records Management Practices and Patients' Satisfaction in selected Medical Centres in South-West, Nigeria. The study-specific objectives are set to:

1. Assess the health records management practices in selected medical centres.
2. Ascertain patients' satisfaction with health information management practices in the selected medical centres.
3. Investigate the barriers militating against effective health information management practices in the selected university medical centres.

1.3. Research Questions

The following pertinent questions are formulated to guide this research:

1. What are the health records management practices in selected medical centres?

2. What is the level of patients' satisfaction with health information management practices in the selected medical centres?
3. What are the barriers militating against effective health information management practices in the selected medical centres?

2. METHOD

A descriptive survey design was employed in this study. The study was conducted among the 210 patients (staff and students) who were randomly selected among those who had visited the Medical Centres for at least 4 times and had interacted with health information management practitioners and were willing to participate in the study. A self-developed questionnaire which was subjected to face and content validity was administered to the 235 patients out of whom 210 completed the questionnaires which were retrieved for analysis. This represents an 89.4% response rate. The questionnaire was tested for validity and reliability using Cronbach's alpha test. The reliability test revealed a high level of inter-item consistencies. The test result of the Cronbach Alpha was 0.83 which made its inter-item consistencies very high and adequate for the study. Data collected were examined for completion, coded and analyzed using the descriptive statistics such as frequency counts and percentage distribution. Subsequently, computer-assisted statistical software of IBM-SPSS that is, Statistical Package for Social Sciences (SPSS) version 25 edition was used to analyze the data.

3. LITERATURE REVIEW

3.1. Health Records Management Practices

The importance of a good health records system has been identified as key to improving patients satisfaction (Kola, Shoewu, & Segun, 2013). In recent times, most hospitals records have been digitized or completely transformed into the electronic system (Ravindra, Chandra, & Dhenesh, 2016) and this has led to improved patients satisfaction with the care provided (Chikuni, 2006; Danso, 2015; Eke et al., 2014). The implications of electronic health records system include speedy service delivery, accurate records storage and retrieval as well as an overall reduction in patients' waiting time. Although achieving a holistic health service delivery is the responsibility of all who contribute to caring for patients. It must be emphasized that the health information management staff of the hospital has more roles to play in ensuring adequate health information system. After all, they are primarily trained to bridge this gap (Aragon & Gesell, 2015; Ferris et al., 1992; Ojo & Owolabi, 2017).

A good health information system can enhance quality care for patients through accurate and timely retrieval of patient health records. It also guarantees confidentiality, authenticity and adequate security of patients' health information. Complete patients' health records consist of such items as patient case notes, x-ray and laboratory reports, pathological specimens and preparations, patients' indexes and registers, pharmacy and drug records as well as nursing and ward records (Attah, 2017; Opele, 2017; Surydana, 2017). Besides, it is quite understandable that health records systems of hospitals differ from one setting to the other possibly due to environmental and other factors that may favour some hospitals more than the others. However, a hospital health records system should be kept to enhance patients' satisfaction (Kola et al., 2013). Also, good health records systems can be used during litigation in protecting the interests of the hospital, the patients and their relatives (Opele, Omole, & Adebayo, 2019). The records of patients' health information also accommodate clinical coding and disease classification which are used for research, planning and decision-making by stakeholders in the sector. In similar studies, Pyrene (2015); Luthuli and Kalusopa (2017) alluded to the significance of good health records systems for improving patients' satisfaction with the care provided to them. These authors, who highlighted the danger of poor health records

keeping in inpatient care, carried out a study on a framework to embed medical records management into the health care service delivery in the Limpopo province of South Africa. It discovered that poor record-keeping had been established as one of the causes of poor health service delivery in South Africa.

3.2. Patients' Satisfaction

Patient's satisfaction has been defined as the degree of congruency between a patient's expectations of ideal care and his /her perception of the real care he/she receives. The concept of patients' satisfaction has gained momentum in the last two decades because many now understand their rights to medical services and insist on those rights expecting to be thoroughly satisfied with the care rendered to them. Much attention within the healthcare industry is focused on patients' satisfaction with the quality of health care services (Eke et al., 2014; Ezegwui, Okoye, Aghaji, Okoye, & Oguego, 2014; Opele & Okunoye, 2019). Many authors have highlighted the significant relationship between good health care and patients' satisfaction (Baba, 2004; Cheng, Yang, & Chiang, 2003; Nguyen, 2002). The role of doctors and other clinical staff in sustaining good patients' satisfaction had also been published (Ahmad & Ud Din, 2010; Al-Eisa, Al-Mutar, Radwan, & Al-Terkit, 2005; Alghamdi, 2014; Ogunfowokan & Mora, 2012; Ogunnowo, Olufunlayo, & Sule, 2015; Opele, 2017; Woodring et al., 2004). Although the concept of patients' satisfaction is complex and diverse due to differences in culture, religion and social lives of people in different settings.

Literature has shown that patients' satisfaction can be linked to the application of electronic health records system which enhance positive clinical outcomes (Kazley, Diana, Ford, & Menachemi, 2012) and transform patients' clinical experience. The physicians and nurses, in particular, have a huge responsibility towards improving patients' satisfaction because the patient's spent substantial time with them while in the health facility for clinical attention (Gidwani et al., 2017). These authors suggested modifying physicians' activities to accommodate electronic health records system without sacrificing quality and standard of care. Al-Jafar (2013) citing Menachemi and Collum (2011) stressed the benefits of electronic health records system to include improving the quality of care and reducing medical errors as well as reducing financial and operational costs. Al-Jafar (2013) also highlighted the need for more attention on the part of the physician to improve patients' satisfaction. Patients' satisfaction with the use of computer in patient-physician interaction has also been reported in the literature (Lelievre & Schultz, 2010).

4. ANALYZING AND RESULTS

4.1. Respondents' Socio-Demographic Characteristics

Key characteristics examined included gender, age, marital status, religion and university.

Table 1 shows that the majority (56.2%) of the respondents were female while males accounted for 43.8%. Besides, the ages of the respondents range between less than 20 years and above 40years, majority (45.2%) of whom were between the ages of 21 and 25 followed by 26 to 30 which accounted for 25.7%, implying that the respondents were mostly young adults who were in their final-year levels or those in the postgraduate classes. Furthermore, for marital status, the table shows that the majority (72.4%) were single while 21.9% were married. 5.7% were widowed. With regard to their religious affiliations, majority (78.1%) were Christians while 19.0 % were Muslims and 1.9% were Traditionalists, and 1.0 % belong to other religions not specified. In the analysis of the distribution of respondents by university, the highest percentage (43.3%) were from Bowen University, closely followed by 30.5% from Redeemer's University, and 26.2% of the respondents were from Adeleke University.

Table-1. Socio-Demographic Characteristics (n = 210)

Parameter	Classification	Frequency	Percentage
Gender	Male	92	43.8
	Female	118	56.2
Age	<20	20	9.5
	21 – 25	95	45.2
	26 – 30	54	25.7
	31 – 35	38	38
	36 – 40	2	1.0
Marital Status	Greater than 40	1	0.5
	Single	152	72.4
Religion	Married	46	21.9
	Widowed	12	5.7
	Christian	164	78.1
	Muslim	40	19.0
Name of the University	Traditionalist	4	1.9
	Others	2	1.0
	Bowen University	91	43.3
	Redeemers University	64	30.5
	Adeleke University	55	26.2

Source: Field survey , 2019.

Table-2. Use of the University Medical Centre (n =210).

Parameter	Classification	Frequency	Percentage
Have you ever visited the Medical Centre?	No	76	36.2
	Yes	134	63.8
If yes, how often do you visit the Medical Centre?	Rarely	21	15.7
	Monthly	73	54.4
	Weekly	40	29.9

Source: Field survey , 2019.

Table 2 revealed that 36.2% of the respondents had never visited the Medical Centres in the selected universities while 63.8% had visited these facilities. However, the table revealed that less than one-fourth (15.7%) rarely visited the hospital. This was followed by weekly visits (29.9%) while monthly visits accounted for (54.4%).

4.2. Analysis of the Research Questions

Research question 1: What are the health records management practices in selected medical centre?

Table-3. Health records management practices in selected medical centres (n = 210).

Parameter	Classification	Frequency	Percentage
Do you perceive your medical records/files as being well arranged for easy retrieval?	Yes	158	75.2
	No	52	24.8
Do you think the officer' s attending to you have any formal records management training to manage students' and medical records in your institutions?	Yes	14	6.7
	No	34	16.2
	Don't know	162	77.1
How is your medical centre currently managing patients' records in relation to Storage Type?	Manually	182	86.7
	Electronically	18	13.4
Have you by chance seen any of your medical records being used by people outside your University?	Yes	18	8.6
	No	192	91.4
How long (in time) does it take you to be attended to in your Medical Centre?	About an hour	190	90.5
	1-2 hours	20	9.1

Source: Field survey , 2019.

Table 3 indicates that more than two-thirds (75.2%) perceived that their medical records/files were well-arranged for easy retrieval. However, the highest percentage (77.1%) do not know if the officers attending to them had any formal records management training to manage students and staff medical records in these institutions. With regard to storage type, the table revealed that the medical centres were still making use of the manual medical records-keeping (86.7%) while electronic records keeping only accounted for 13.4%, implying that the medical centres are just coming up with introducing electronic medical records management system. In addition, it is worrisome that 8.6% of the respondents lamented that they had seen some medical records of patients being used outside the hospital. With regard to patients' waiting time before they are attended to, the table shows that more than two-thirds(90.5%)said it took them barely an hour to be attended to while 9.1% said it took more than two hours to be attended to at the health records unit/department. The scenario reported here may be expected in a manually managed health records system where many people are queuing to receive medical services. Nonetheless, it is hoped that things will improve over time in these university medical centres.

Research question 2: What is the level of patients' satisfaction with health information management practices in the selected medical centres?

Table-4. Patients' satisfaction with health information management practices in the selected medical centres.

Parameter	Classification	Frequency	Percentage
Are you satisfied with the level of service you receive?	Yes	78	37.1
	No	132	62.9
Are you satisfied with the way your records are kept?	Yes	102	48.6
	No	108	51.4
Will you like to go back for treatment in your Medical Centre if there is an alternative?	Yes	62	29.5
	No	148	70.5

Source: Field survey , 2019.

Table 4 shows that majority (62.9%)of the respondents were dissatisfied with the overall level of service received at the selected university medical centres. Besides, 51.4% were also dissatisfied with the way their records ere being kept. As such, more than two-thirds insisted that they will not like to go back for treatment in their Medical Centre if they could find an alternative. This situation is highly pitiable and requires an improvement so that the purpose of establishing these facilities can be realized.

Research question 3: What are the barriers to effective health information management practices in the selected medical centres?

Table-5. Barriers to effective health information management practices in the selected medical centres.

Parameter	Classification	Frequency	Percentage
What might be the barrier in not retrieving a patients' record within a short time?	Misfiling	132	62.9
	Shortage of Staff	30	14.3
	Too many people to attend to	48	22.8
Do you think it is necessary for your medical centre to keep patients' records electronically?	Yes	190	90.5
	No	20	9.5

Source: Field survey , 2019.

Table 5 reveals that 62.9% of the respondents identified misfiling as a possible barrier to quick retrieval of patients' records. The second-highest barrier was shortage of staff (14.3%) while 22.8% of the respondents felt the

barrier was that there were too many people to attend to. Lastly, 90.5% of the respondents thought it necessary for the medical centre to keep patients' records electronically. Therefore, despite the identified barriers, most of the respondents felt that medical records could be effectively managed with the introduction of electronic storage.

4.3. Summary of Findings

Findings from the current study indicate that the health information services of the selected university medical centres need further improvement in the filing, storage and retrieval of patients' medical records. The study revealed that not many of the health information management officers were considered by patients' to have had formal records management training to manage students' and staff medical records in the respective university medical centres. Other critical issues discovered in this study have to do with patients' experiencing long delays while waiting to receive health information management services. These outcomes agree with some of the previous studies that have reported long patients' waiting time in the Medical Centres. Besides, this study revealed that patients' waiting time is mainly due to shortage of staff who are expected to discharge the services to the patients in the health care centres.

Concerning patients' satisfaction, this study reveals a low level of patients' satisfaction with the health information management services provided. The patients perceived health information management services to be below their expectations. Besides, it cannot be overemphasized that the long waiting time for service can reduce service satisfaction and impact negatively on the quality of health care service delivered to the patients. Also, readings have indicated that patients' satisfaction is sometimes judged using indices of quality care (Eke et al., 2014). The results of a study conducted on service quality, customer value and patient satisfaction in a Public Hospital in Bandung District, Indonesia, showed a significant influence of health service quality on patient satisfaction (Surydana, 2017). About the barriers militating against effective health information management practices in the selected medical centres, this study revealed that misfiling, shortage of staff and attending to too many patients at a time as well as overdependence on manual record-keeping constituted the barriers to effective health records management practices in the selected university medical centres. These findings agree with the findings of Attah (2017); Kazley et al. (2012) all of which have argued that electronic health records systems enhance the quality of care rendered to the patients.

5. CONCLUSIONS

The physicians, nurses and health information management officers are directly involved in patients' care at the outpatient departments of the medical centres. This study has shown that lack of cooperation among the team and absence of electronic health records systems are contributing to low patients' satisfaction in the selected medical centre thereby contributing to patients' long waiting time at the university health facilities. The outcome of this study thus suggests the need for suitable staff training to enable effective health information management practices and improved patients' satisfaction through improving patients' health workers relationship as indicated in the extant literature. However, the study also underscored a need for more qualified health information management staff for effective health records keeping thereby improving patients' satisfaction with the care rendered to them while in the hospital. The study concluded that above all, there is a need for proper filing and handling of patients' health records to avoid misfiling and loss of patients' case files which could lead to the long waiting time at the university medical centres.

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