

# **THE DETERMINANTS OF SATISFACTION FOR QUALITY OF SERVICES OFFERED AT SELECTED TB DOTS UNITS IN AN URBAN SETTING IN THE PHILIPPINES**

## **SUMMARY**

The Directly Observed Treatment Short Course (DOTS) Units were established in the Philippines in the mid-1990's as a strategy towards tuberculosis control and eventual elimination. However, despite several years of collaborative effort between government and non-government agencies, the country's disease burden continues to be high. Subsequently, other control strategies emerged which included the participation of the private sector using a public-private mix framework, and the certification and monitoring system of DOTS Units to promote and ensure the quality of services. Nevertheless, since tuberculosis remains a significant nationwide public health concern up to this time, it is clear that more creative approaches need to be explored. Although the Department of Health, the Philippine Health Insurance Corporation and other donor agencies conduct performance evaluation of DOTS Units using their criteria, none focus specifically on the patients' perspective and needs with regards to the quality of the DOTS services provided to them. This study bridges that gap between performance measures utilized to monitor the quality of services based on donor or agency perspective, with that of what attributes or qualities are of actual value to their clients. This approach may close the gap between accomplishment and targets.

Qualitative methods were utilized for data collection, including in-depth interviews, focus group discussions, and self-administered questionnaires. Both DOTS staff (physicians and nurses) and their treatment partners were approached for participation in various phases of the study. Attributes perceived to be essential for effective and quality DOTS services were identified and ranked by participants in the small group discussions and in-depth interviews. Qualitative data generated were analyzed using categories, themes and contexts, and quantitative data were analyzed using descriptive statistics.

Responses from participants were grouped into three inductive categories, each encompassing several quality dimensions. A validation survey questionnaire was developed and disseminated to both private and government/public TB DOTS patients and treatment partners in order to determine whether or not the listed dimensions were indeed important attributes of an effective and efficient DOTS Unit providing quality service. A total of sixty two (62) retrieved questionnaires were eligible for analysis: twenty five (25) respondents were from government/public DOTS Units, and thirty seven (37) were from private facilities. After an analysis of all responses, it was found that of the initial thirteen quality dimensions, six quality dimensions were not considered as being significantly important; these were: (1) user fees are affordable, and provide for discounts if warranted; (2) the unit is clean, comfortable, orderly and organized; (3) the unit has a separate consultation room and receiving area; (4) the unit has access to diagnostic facilities (such as radiology and laboratory); (5) the unit has adequate office and basic medical equipment with access to toilet and wash facilities; and (6) unit is easily accessible and identifiable. These six dimensions were thus removed from a final list. Therefore, the final list of seven quality dimensions which were generally acceptable to both groups as important attributes were: (1) medicines are of good quality and are always available; (2) staff is adequate, efficient and well-trained; (3) efficient, effective and transparent program management; (4) staff is knowledgeable and passionate about work; (5) staff manifests positive and encouraging behaviour; (6) staff is appropriately

groomed and presentable; and (7) staff communicates well with others. These dimensions were included in a proposed Standard Patient Satisfaction Survey Questionnaire. In utilizing this questionnaire, it is hoped that evaluation and monitoring of TB DOTS Units will be enhanced, creating, not only a more effective and successful diagnostic and therapeutic environment, but one that is more patient-inclusive as well.