INTERNATIONAL MULTIDISCIPLINARY JOURNAL OF RESEARCH FOR INNOVATION, SUSTAINABILITY AND EXCELLENCE (IMJRISE)
Online ISSN: 3028-032X | Print ISSN: 3028-0370
PUBLISHED BY: RISEJOURNALS.ORG
Volume 2, Issue no. 1 | 301

Availment and Satisfaction of Davao de Oro Provincial Hospital-Maragusan Services

DOI: 10.5281/zenodo.14740633

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Abstract:

The study aimed to assess the extent of availment and level of satisfaction of clients receiving services at Davao de Oro Provincial Hospital- Maragusan (DDOPH-Maragusan). The research specifically examined how these factors varied based on clients' demographic variables, with the goal of improving hospital services. A descriptive research design was employed, focusing on 330 clients admitted and discharged in December 2019. Data was collected through a researcher-made Survey Questionnaire. Findings indicated that the extent of availment and satisfaction differed significantly when respondents were grouped by demographic variables. Overall, clients reported a very high extent of availment and satisfaction with services in medical, nursing, and ancillary areas. Despite this, there were areas where improvements were needed, as reflected in lower ratings for specific services. To enhance the hospital's services, an action plan was developed. This plan outlines strategies to strengthen the health programs of Davao de Oro, addressing weaknesses in specific areas while ensuring sustainability and efficiency in the hospital's operations. The action plan aims to improve the overall healthcare experience in medical, nursing, and ancillary departments at DDOPH-Maragusan.

Keywords: Availment, Provincial Hospital, satisfaction, services

Introduction:

Nature of the Problem

There are various aspects of planning that need to be taken into account to ensure the success of a district hospital in providing services with an effective and efficient manner. This complex process also involves a multidisciplinary approach in order for a district hospital to function efficiently so that the district and its population will benefit from its services (Azreena et al., 2016). The district health systems form the basis of overall health structures and the role of district health facilities particularly district hospitals are crucial in a country's health system.

As care delivery institutions hospitals are always faced with the challenge of providing the quality of care that meets the expectation of its clients. Hospitals are expected to provide its clients with quality of care they need. Clients' availment and satisfaction of the services rendered by the hospital are important components of the quality of care. It is imperative for administrators to identify clients' availment and satisfaction of the services the hospital provide from time to time and to assess the extent to which these ideals are met by their institutions.

Specifically, the hospitals have a range of services that caters clients' needs in the different areas of Medical, Nursing and Ancillary where the researcher would like to focus on. The researcher being the chief of hospital was able to observe and experience several issues on the services it has rendered. The problem was the scale of large amount of budget that the province has to invest on the equipment, infrastructure and manpower in order to make these services available. Other concerns observed is the usual breakdown of equipment and lack of technician to operate which makes these services not available.

In 2017, Davao de Oro Provincial Hospital- Maragusan has an annual budget of Php26, 000,000.00 pesos (26M) with 3,811 inpatients and 3,790 patients discharged. Annual budget for 2018 was Php29,000,000.00 pesos (29M) and there were 3,571 inpatients and 3,513 patients discharged. However, Php31, 000.000.00 pesos (31M) was allocated for the year 2019 with 2, 993 inpatients and 2,271 patients discharged.

Taking cognizance to the data generated and the result of this study, the researcher will be able to determine which among the services rendered by the hospital in terms of quality need to be enhanced. Further, the result of this study will be the researcher's motivation as the chief of hospital to improve the services of DDOPH-Maragusan.

Furthermore, this will be the basis of the provincial government as well as hospital administrators in other publicly owned hospital in the formulation of plans that will serve as the blueprint in its goal to reach a higher level status.

Current State of Knowledge

In the Philippines, most hospitals are privately operated, offering high-quality healthcare, particularly for those who can afford it. While treatment is costly by local standards, it remains relatively affordable for many expatriates compared to their home countries. As a result, the Philippines has become a hub for medical tourism, attracting patients with its combination of low-cost, high-quality services. However, for Filipino citizens, the government has enacted the Universal Healthcare Bill (Republic Act No. 11223), which guarantees automatic enrollment in the National Health Insurance Program, aiming to provide equitable access to healthcare while mitigating financial burdens (WHO, 2019).

This initiative aligns with the principles of Total Quality Management (TQM), which emphasizes the importance of designing services to meet or exceed customer expectations. TQM advocates for empowering healthcare workers to identify and eliminate barriers to service quality, thereby enhancing the delivery of care. This approach, which focuses on beneficiaries' satisfaction and continuous improvement, is critical for the successful implementation of healthcare reforms, such as the Universal Healthcare Bill. Additionally, effective communication in healthcare settings, as highlighted by Cape, plays a vital role in improving patient satisfaction. Nurses' ability to explain procedures and benefits to patients fosters positive interpersonal relationships, which in turn enhances morale, motivation, and understanding (Maranon, 2019).

Furthermore, according to Faz (2018), the Conservative government’s introduction of market reforms in 1990 in London led The King’s Fund to conduct a comprehensive study of healthcare services in the capital. The resulting report concluded that implementing a market-driven approach would make the high cost of treatment in inner London unsustainable. The King’s Fund recommended a £250 million investment in primary and community-based care, alongside the rationalization of acute hospital services and the consolidation of medical education and research. Similarly, Australia's healthcare system, a collaboration between the federal, state, and territory governments, currently enjoys a high level of health status, with general self-perception of health and well-being being rated as good to excellent. However, significant health disparities persist, particularly among Indigenous populations, rural residents, and those of low socio-economic status. In 2010, coronary heart disease was the leading cause of death, accounting for more than one-sixth of all fatalities. Other major causes of death included cerebrovascular disease, cancers, chronic obstructive pulmonary disease, and dementia, with an increasing prevalence of cancers of unknown origin and dementia-related conditions in recent years.

Also, these global perspectives on healthcare echo the findings of Sarkeret et al. (2018), who studied client satisfaction with healthcare services and community-based health insurance schemes. They found that patients were most satisfied with diagnostic services, staff behavior, and the overall environment of healthcare facilities. This satisfaction underscores the importance of meeting patient expectations in healthcare service delivery, a concept mirrored in the evolving role of microgrids in energy systems. Just as healthcare systems strive to improve service delivery, advancements in microgrid technologies have shown potential in enhancing the stability and efficiency of power systems. Sijie Qin’s (2015) cost-benefit analysis of a microgrid project, which included ancillary services such as frequency regulation and voltage control, highlights the importance of technological innovation in improving service provision. Both healthcare and energy systems share a common goal: to deliver reliable, cost-effective services that meet the needs of their beneficiaries while ensuring long-term sustainability.

Theoretical Underpinnings

This study on the extent of availment and the level of satisfaction of the services rendered by DDOPH-Maragusan is anchored on Disconfirmation theory by Szymanski and Henard (2004) and Contrast theory introduced by Hovland, Harvey and Sherif (1987)

Disconfirmation theory by Szymanski and Henard (2004) postulates that customers compare a new service experience with a standard they have developed. Their belief about the service is determined by how well it measures up to this standard. Disconfirmation theory suggests that consumers form satisfaction judgments by evaluating actual product or service. Disconfirmation theory argues that satisfaction is related to the size and direction of the disconfirmation experience that occurs as a result of comparing service performance against expectation. Szymanski and Henard (2004) found in the meta-analysis that disconfirmation is the best predictor of customer satisfaction.

On the other hand, Contrast Theory introduced by Hovland, Harvey and Sherif (1987) which is defined as the tendency to magnify the discrepancy between own attitudes and the attitudes represented by opinion statements. This theory presents an alternative view of the consumer post-usage evaluation process. It holds that a surprise effort occurs leading to the discrepancy being magnified or exaggerated. It posits further that the discrepancy of experience from expectations will be exaggerated in the direction of discrepancy. The Contrast Theory of Satisfaction

predicts customer reaction instead of reducing dissonance; the customer will magnify the difference between the expectation and the performance of the product service.

There are several factors contributing to the success or failure of a business, customer or client satisfaction is one of them. It is important to track this factor and work on improving it in order to make the clients more loyal to the services offered by the institution. Availment and satisfaction of services the hospital provides to its clients is one of the significant challenges it is facing today. Research into this area should be given focus to relatively address this problem.

Disconfirmation theory and Contrast theory of satisfaction are the two theories cited in this study. These theories would give a better understanding and clearer perspective of the clients' availment and satisfaction of the services rendered by DDOVH-Maragusan. The study is anchored on these two theories since there remains a need to provide a direct link between availment and satisfaction. These theories cited can be linked to this study because DDOPH-Maragusan services recognized the needs of the clients' parallel to the approaches of the organization in meeting the needs of its constituents.

Objectives

The study aimed to determine the extent of availment and level of satisfaction of Davao de Oro Provincial Hospital-Maragusan services during the month of December 2019 as Basis for Action Plan. Specifically, this study sought to answer the following questions: 1) the respondents' extent of availment of the services rendered at DDOPH-Maragusan according to the area of medical, nursing, and ancillary services; 2) the respondents' level of satisfaction of the services rendered at DDOPH-Maragusan according to the aforementioned areas; 3) the significant difference in the respondents' extent of availment of the services rendered at DDOPH-Maragusan when they are grouped and compared according to aforementioned variables; and 4) the significant difference in the respondents' level of satisfaction of the services rendered at DDOPH-Maragusan when they are grouped and compared according to aforementioned variables.

Methodology

This section presents the discussion of the research methodology used, the subjects and respondents of the study, the research instruments used, the validity and reliability of the instruments, the procedure for data gathering, and the statistical tools and procedure for data analysis.

Research Design

This study utilized a descriptive research design to assess the extent of availment and satisfaction with the services at Compostela Valley Provincial Hospital. Descriptive research focuses on collecting data to test hypotheses or answer questions about the current status of a subject. It examines existing conditions, relationships, beliefs, practices, and trends. This design, which is particularly suited for portraying a phenomenon accurately, allows for detailed observations and case studies. By using this approach, the researcher was able to accurately depict participants' responses, making it the most suitable tool for determining the extent of availment and satisfaction with the hospital's services**.**

Study Respondents

The respondents of the study covered only the clients admitted and discharged at DDOPH-Maragusan. The survey was conducted for four weeks at the various departments in the hospital. Each client was given survey questionnaire upon discharged. Convenient sampling design was used to compose the total number of respondents. Convenient sampling is a non –probability sampling technique where subjects are selected because of their convenient accessibility and proximity to the researcher. Also known as availability sampling, is a specific type of non-probability sampling method that relies on data collection from population members who are conveniently available to participate in the study.

Instruments

A modified researcher-made survey-questionnaire was used to gather data needed in this study in order to determine the extent of availment and level of satisfaction of Davao de Oro Provincial Hospital- Maragusan services. The researcher as a Physician formulated the content of the research instrument and guided by the equally competent Hospital Administrator who holds a degree in Public Administration. The instrument was divided into two (2) parts: Part I was the profile of the respondents which include age, sex, civil status and type of healthcare insurance membership. Part II determined the clients' extent of availment and level of satisfaction of the services rendered Davao de Oro Provincial Hospital- Maragusan in the three areas of Medical, Nursing and Ancillary services. To measure the extent of availment and the level of satisfaction in the three areas of Medical, Nursing and Ancillary services,

responses to each item were based on the following scaling: (5) with a verbal interpretation of Always (4) for Sometimes, (3) for Oftentimes, (2) for Seldom and (1) for Almost Never. The research instrument was subjected to validity (5.0-excellent) and reliability (0.982-very highly reliable). All of them were interpreted as worthy and good; respectively.

Data Gathering Procedure

After the administration of the validity test of the research instrument, the researcher closely coordinated with the office of the Governor and the head of the Provincial Economic Enterprise Management Office for their permission in the conduct of the study. With their permission, the researcher conducted the reliability test of the research instrument at Compostela Valley Provincial Hospital in Montevista, Davao de Oro. Since the instrument is in English, the researcher translated the questionnaire in local dialect (Bisaya) for the clients to easily understand the questions and to accomplish it honestly and objectively. After the research instrument reliability test has been administered, the researcher with the help of the Chief Nurse and Staff Nurses of the DDOPH-Maragusan conducted the actual survey to the identified respondents. The researcher explained to the respondents the purpose of the study and gave instructions on how to accomplish the questionnaires objectively. Respondents were assured of the confidentiality of the data gathered.

Data Analysis and Statistical Treatment

Objective No. 1 used a descriptive-analytical scheme and mean to determine the extent of availment of respondents of the services rendered by DDOPH-Maragusan according to the areas of medical, nursing and ancillary services.

Objective No. 2 used a descriptive-analytical scheme and mean to determine the respondents' level of satisfaction on the services rendered by DDOPH-Maragusan according to the aforementioned areas.

Objective No. 3 utilized, a comparative analytical scheme and Mann Whitney U test to determine the significant difference in the respondents' extent of availment of the services rendered by DDOPH-Maragusan when they are grouped and compared according to aforementioned variables.

Objective No.4 utilized, a comparative analytical scheme and Mann Whitney U test to assess the significant difference in the respondents' level of satisfaction of the services rendered by DDOPH-Maragusan when they are grouped and compared according to aforementioned variables.

Ethical Consideration

The identities of participants must remain confidential and anonymous, ensuring that no self-identifying information or statements are included. Anonymity and confidentiality are crucial for protecting the privacy of individuals who voluntarily participate in research. The study must carefully assess the potential risks to participants, the researcher, the wider community, and the institution. These risks may include emotional distress, shame, and anxiety, which can be challenging to predict or manage, as well as physical harm, loss of resources, emotional injury, and damage to reputations.

Results and Discussion

This section deals with the presentation, analysis and interpretation of data gathered to carry out the objectives of this study. All these were made possible by following certain appropriate procedures so as to give the exact data and solution to each specific problem.

Table 1
Extent of Availment of Clients' of the Services Rendered at DDOPH-Maragusan in the Area of Medical

Medical	Mean	Interpretation
1. Conducts consultation at the out-patient department.	4.69	Very Great Extent
2. Performs head to toe assessment at the emergency room, admits clients and do the doctors order.	4.75	Very Great Extent
3. Performs medical procedures like minor operation ,handling deliveries ,intubation, catheterization and etc.	4.79	Very Great Extent
4. Do the rounds and monitors client's status, prescribed medicines and monitors the effects and side effects of medicines.	4.75	Very Great Extent
5. Orders laboratory examinations and correlate results to client's health status/referrals to tertiary hospital for further evaluation and management.	4.78	Very Great Extent
6. Performs assessment of patients at the emergency room.	4.74	Very Great Extent
7. Admit patients and do the doctors order.	4.8	Very Great Extent

8. Do emergency procedures like intubation, CPR etc.	4.79	Very Great Extent
9. Providing general pre- and post- operative care.	4.84	Very Great Extent
10. Conduct medium and major surgery.	4.82	Very Great Extent
Overall Mean	**4.78**	**Very Great Extent**

Table 1 is the survey response result that aims to provide answers to the second problem statement. Objectively, the three (3) areas are Medical, Nursing and Ancillary. The table are composed of three columns wherein the areas have equivalent mean result and its interpretation.

Table shows that item 9 "Providing general pre- and post- operative care" has the highest mean of 4.84 with a very great extent of availment in this area. The result explains that the clients' extent of availment of this specific item was exemplary and this would mean that attending physicians are making efficient service to their clients and effectively perform their respective functions.

Item 1 "Conducts consultation at the out-patient department" resulted to 4.69 mean and the lowest among the items. Though it is the lowest mean but interpreted as very great extent. It implies that this item though availed by the clients but it is not the same extent of availment compared to other items in the medical area.

Generally, table 3 shows that in the area of Medical, the clients' extent of availment is "Very great extent" with an overall mean of 4.78. This implies that in all items in this area, the majority of the clients' extent of availment is very great. It could mean that clients were able to avail the medical services rendered by the hospital. The preceding result is very consistent that clients have availed the services in all of the items stated in medical area. It could be implied that attending physicians are making efficient service to their clients and effectively perform their respective functions. This observation is found to be in contrast with the findings in the study made by Bianco, et al. It was found out that physicians' knowledge of evidence-based safety practices was inconsistent. More than 90% of physicians reported that counting surgical items during an invasive surgical procedure represented a patient safety practice. Positive attitudes about patient safety were revealed by responses, but 44.5 and 44.1%, respectively, agreed or were uncertain about the disclosure of errors to the patients. The pattern of behaviour showed that 7.6% of physicians reported to have never been involved in medical errors, and among system failures, 'overwork, stress or fatigue of health professionals' was the most highly rated item. The results of the study highlight that greater efforts are needed to facilitate the translation of positive attitudes towards patient safety into appropriate practices that have proven to be effective in the reduction of medical errors (Bautista, 2017).

Table 2
Extent of Availment of Clients' of the Services Rendered at DDOPH-Maragusan in the Area of Nursing

Nursing	**Mean**	**Interpretation**
1. Make rounds and performs the head to toe assessment and refer to the physician for any untoward signs and symptoms.	4.68	Very Great Extent
2. Give medication of the client on time and refer to the physician for any complications.	4.69	Very Great Extent
3. Provides bedside care like changing of linens, tepid sponge bath and bedside care.	4.68	Very Great Extent
4. Proper documentation of clients' health status, and making of referrals.	4.68	Very Great Extent
5. Act as liaison between the client and the health care team to provide client's needs.	4.75	Very Great Extent
6. Advocate for health and wellbeing of patient.	4.74	Very Great Extent
7. Record medical history and symptoms.	4.77	Very Great Extent
8. Operate medical equipment	4.74	Very Great Extent
9. Educate patients about management of illnesses.	4.77	Very Great Extent
10. Monitor patient health and record signs.	4.82	Very Great Extent
Overall Mean	**4.73**	**Very Great Extent**

The item which has the highest mean is item 10 "Monitor patient health and record signs" with a mean 4.82 interpreted as very great extent. Whereas, though items 1, 3 and 4 respectively has the lowest mean of 4.68 yet it is still interpreted as very great extent.

In the area of Nursing, the result shows "Very great extent" of the clients' availment with a mean value of 4.73. In this area, the extent of availment of the clients is very great. It implies that majority of the clients were able to avail the nursing services rendered by the hospital. The result illustrates competence among the nurses and other hospital personnel. It could be the hospital's staff learning outcome for which most hospital or institution-based must assume responsibility. Apparently, it is a lamentable fact that not all institutions particularly public hospitals are committed to fulfilling their philosophy and mission statements. Some are focused more on its financial survival by reaping

profits from oppressed and depressed ill patients. But the results of the present study show that DDOPH-Maragusan is performing well despite of its present status.

The result of this present study is not consistent with the findings in the study of Cape. The author observed that nurses were partially effective in therapeutic communication to patients and families about the procedures and benefits necessary to treat the patients. Interpersonal relationship towards the patients and family can affect an employee' morale, motivation and self-esteem, and should be conducted equitably for all employees. Positive education health information, as well as process and clear instructions for any procedural treatment should be provided (Maranon, 2019). The same is true in other countries like Japan where nursing services is not that efficient and excellent and contrary to the result of the present study. Japanese nursing system was reorganized under the command of the GHQ so that a nursing division was installed in the then Ministry of Health and Welfare to start nursing administration by nursing personnel. However, with the subsequent changes in the healthcare provision system and the increase in hospitals, the shortage of nurses became serious, and issues about nurses' work conditions including workloads and working hours surfaced. To address them, the Ministry took measures to improve the nursing system, establish a higher nursing education, and enhance the nursing education (Public Health Nurses, Midwives and Nurses, 2015).

Table 3
Extent of Availment of Clients' of the Services Rendered at DDOPH-Maragusan in the Area of Ancillary

Ancillary	Mean	Interpretation
1. Performs laboratory procedures and release results on a specified time.	4.68	Very Great Extent
2. Dispense drugs and monitors the effects of drugs to the patient.	4.75	Very Great Extent
3. Plan and prepares diet applicable to clients health condition and conducts nutrition counseling and food safety.	4.71	Very Great Extent
4. Conducts dental check-up, tooth extraction and dental counselling.	2.84	Moderate Extent
5. Conducts health teachings and make referrals to support group.	4.73	Very Great Extent
6. Perform imaging procedure like x-ray and ultrasound and releases result.	4.66	Very Great Extent
7. Plan and prepares diet applicable to clients health condition and conducts nutrition counseling and food safety.	4.79	Very Great Extent
8. Interview and assessment of clients by medical social worker.	4.74	Very Great Extent
9. Performs physical rehabilitation and counseling.	4.77	Very Great Extent
10. Encoding of patient's data on the hospital information system	4.75	Very Great Extent
Overall Mean	**4.54**	**Very Great Extent**

The table shows that item 7 "Plan and prepares diet applicable to clients' health condition and conducts nutrition counselling and food safety" has the highest mean of 4.79. This illustrates the excellent service of the ancillary in this particular item.

Item 4 "Conducts dental check-up, tooth extraction and dental counselling" resulted to the lowest mean of 2.84 which is interpreted as moderate extent. This means that all items in this area have a very great extent of availment except item 4 which has a moderate extent. This result is evident of the absence of a permanent Dentist who could provide dental services to the clients.

The table above shows that in the area of Ancillary, the clients' extent of availment is "Very great extent" with a mean value of 4.54. Generally, clients were able to avail majority of the ancillary services rendered by the hospital. This result can be explained further why the area in ancillary got a very great extent of availment by study of the Philippine Institute for Development Studies (2015) which states that the Ancillary service is one of the most important facilities of the hospital. It provides service to all the hospital patients. This facility has been a valuable adjunct in the management of medical, surgical, obstetrics, paediatrics, and gynaecological cases. This article is linked to the present study in order to validate the result that ancillary service in the hospital is important in its operation.

However, the Becker's Hospital Review (2016) in its observation is contrary to the preceding discussion. According to that review that issues with hospitals' facilities can sometimes put patient safety at risk. Several times in 2015, the safety of hospital patients was compromised or nearly compromised because of building or maintenance problems. For instance, a Florida Agency for Healthcare Administration report released in April cited one Florida hospital's handling of a sewage leak as a patient safety issue, including its failure to ensure the sewage was cleaned up properly and failure to conduct an infection control risk assessment. The investigators also reported finding live rats above the affected ceiling tiles and air conditioning supply vents leaking condensation over food preparation tables.

Table 4
Level of Satisfaction of Clients' of the Services Rendered at DDOPH-Maragusanin the Area of Medical

Medical	**Mean**	**Interpretation**
1. Conducts consultation at the out-patient department.	4.71	Very High Level
2. Performs head to toe assessment at the emergency room, admits clients and do the doctors order.	4.62	Very High Level
3. Performs medical procedures like minor operation ,handling deliveries ,intubation, catheterization and etc.	4.78	Very High Level
4. Do the rounds and monitors client's status, prescribed medicines and monitors the effects and side effects of medicines.	4.66	Very High Level
5. Orders laboratory examinations and correlate results to client's health status/referrals to tertiary hospital for further evaluation and management.	4.75	Very High Level
6. Performs assessment of patients at the emergency room.	4.70	Very High Level
7. Admit patients and do the doctors order.	4.79	Very High Level
8. Do emergency procedures like intubation, CPR etc.	4.81	Very High Level
9. Providing general pre- and post- operative care.	4.80	Very High Level
10. Conduct medium and major surgery.	4.79	Very High Level
Overall Mean	**4.74**	**Very High Level**

The result shows that item 8 "Do emergency procedures like intubation, CPR etc." has the highest mean of 4.81 which implies a very high level in this area. It shows that this particular item, clients are relatively satisfied the way medical staff perform this procedure in times of emergency.

While item 2 has a mean of 4.62 "Performs head to toe assessment at the emergency room, admits clients and do the doctor's order" with a "very high level" interpretation. Though this item has a high level of interpretation but yet it has the lowest mean. This could mean that this particular medical procedure is very important for the clients. Maybe in some instance, clients were not really satisfied of this particular procedure performed by the medical staff.

As gleaned in the area of medical, results show that the clients' level of satisfaction is very high with an overall mean of 4.74. When the items are views individually, all the 10 items in the medical area have a very high level result. This implies that the respondents have a very high level of satisfaction of the medical services rendered by the hospital. This result could be linked to article of Adah & Elegba (2015) that consequently, satisfaction can be greatly affected by several factors-environmental, socio-cultural, psychological, and individual's personality to mention a few specific determinants of satisfaction will be influenced to a large extent by the type of satisfaction under review and participant's judgment of satisfaction, (Arnold et al, 1995; Evans, et al, 2006; Aziri, 2011; Olusegun, 2011; Rai, 2013; Stephen & Ayaga, 2014). However, the individual or group's knowledge base, world view (belief and value systems), perception which in itself is a function of knowledge; choice reflecting personality, and the environment are considered by the authors as strong facilitators or inhibitors of satisfaction in many situations.

In this present study, respondents generally have high regard to the medical services rendered at DDOPH-Maragusan. They are relatively open to expressing their responses in most of the items provided. But as what reflected in Becker's Hospital Review (2016) that most health systems query patients about their experiences and satisfaction with physicians during their hospital stays. But few opt to put those ratings online for all to see, although there's reason to believe the practice can improve patient safety. This review provides information to the readers that in some ways, clients do not deliberately express their feelings when they are asked to evaluate the physicians' performance. It only implies that some clients would tend to keep their opinions with utmost confidentiality.

Table 5
Level of Satisfaction of Clients' of the Services Rendered at DDOPH-Maragusan in the Area of Nursing

Nursing	**Mean**	**Interpretation**
1. Make rounds and performs the head to toe assessment and refer to the physician for any untoward signs and symptoms.	4.62	Very High Level
2. Give medication of the client on time and refer to the physician for any complications.	4.61	Very High Level
3. Provides bedside care like changing of linens, tepid sponge bath and bedside care.	4.71	Very High Level
4. Proper documentation of clients' health status, and making of referrals.	4.60	Very High Level
5. Act as liaison between the client and the health care team to provide client's needs.	4.70	Very High Level
6. Advocate for health and wellbeing of patient.	4.66	Very High Level
7. Record medical history and symptoms.	4.74	Very High Level
8. Operate medical equipment	4.69	Very High Level
9. Educate patients about management of illnesses.	4.75	Very High Level
10. Monitor patient health and record signs.	4.72	Very High Level

Overall Mean	**4.68**	**Very High Level**

Table shows that item 9 "Educate patients about management of illnesses" has the highest mean of 4.75 interpreted as very high level. In this particular item, clients are highly satisfied of the nursing service in educating patients about the management of illnesses.

Item 4 "Proper documentation of clients' health status and making of referrals" has the lowest mean of 4.60. Though item 4 has lowest mean score but still it is interpreted as very high level of satisfaction. This implies that the performance of the nurses in the documentation of clients' health status and making referrals was considered by the respondents the least among the services rendered in the nursing area.

The results show that in the area of nursing, the clients' level of satisfaction is very high with an overall mean of 4.68. This implies that clients' level of satisfaction in this area in all of the items stated is very high. It implies that majority of the clients were able to avail the nursing services rendered by the hospital. At any rate, clients should have the satisfaction of the services offered by any institution particularly public hospitals. Having a positive response from the clients is a great opportunity for DDOPH-Maragusan to sustain its service at par. According to Adah & Elegba (2015) that public goods are goods or services that can be used by any one person without affecting the supply to all other people, and for which it is impractical to charge individually, (Encarta (2009). They not affected or left to be determined by the market forces of supply and demand. Planning is a public good and therefore town planners as public interest promoters and protectors must deliberately and diligently ensure that the aspirations and expectations of citizens who are the consumers and benefactors of public good are focused to ensure satisfaction.

Patient satisfaction also evaluates the quality of care provided; it is of vital importance to investigate the quality of care in the context of health care. Patient satisfaction is a significant indicator of the quality of care. Consequently, quality work includes investigations that map out patient satisfaction with nursing care. To improve the quality of nursing care, the nurse needs to know what factors influence patient satisfaction (Patient Care, Oxford, 2012). This explanation provides the researcher a better understanding of the study particularly on the clients' satisfaction on the nursing services provided by the hospital.

Table 6
Level of Satisfaction of Clients' of the Services Rendered at DDOPH-Maragusan in the Area of Ancillary

Ancillary	**Mean**	**Interpretation**
1. Performs laboratory procedures and release results on a specified time.	4.69	Very High Level
2. Dispense drugs and monitors the effects of drugs to the patient.	4.59	Very High Level
3. Plan and prepares diet applicable to clients health condition and conducts nutrition counseling and food safety.	4.70	Very High Level
4. Conducts dental check-up, tooth extraction and dental counselling.	2.78	Moderate Level
5. Conducts health teachings and make referrals to support group.	4.69	Very High Level
6. Perform imaging procedure like x-ray and ultrasound and releases result.	4.64	Very High Level
7. Plan and prepares diet applicable to clients health condition and conducts nutrition counseling and food safety.	4.69	Very High Level
8. Interview and assessment of clients by medical social worker.	4.65	Very High Level
9. Performs physical rehabilitation and counseling.	4.75	Very High Level
10. Encoding of patient's data on the hospital information system	4.72	Very High Level
Overall Mean	**4.49**	**High Level**

As gleaned in the data, item 9 "Performs physical rehabilitation and counselling" has the highest mean of 4.75. This explains that clients are satisfied with hospital staff's efficiency in performing physical rehabilitation and counselling. Item 4 "Conducts dental check-up, tooth extraction and dental counselling" resulted to the lowest mean of 2.78 which is interpreted as moderate level of satisfaction. This shows that all of the items in this area have a very high level of satisfaction except item 4 which has a moderate level. Such situation is known as dissatisfaction because there may be tendency those clients to feel negative feelings such as discontent on that specific service provided by the hospital.

Generally, it shows that in the area of ancillary the clients' level of satisfaction of the services rendered by DDOPH-Maragusan is very high with an overall mean of 4.49. The responses of the clients specifically on item 4 "Conducts dental check-up, tooth extraction and dental counselling" having a moderate level of satisfaction can be supported by Adah & Elegba (2015) who opined that satisfaction can be about the state of mind or an attitude which has potent influence on thought pattern of an individual. It can even be conceptualized as a stepping away from an experience and evaluating it. Clinton and Wellington (2013) averred that satisfaction can manifest in different context such as accomplishment of life goal, outstanding performance, job satisfaction, basic body functions, and etcetera. Satisfaction is a state of happiness, contentment or fulfillment; therefore, it is possible for a person to lack satisfaction.

Table 7
Difference on the Extent of Availment of Clients' of the Services Rendered at DDOPH-Maragusanin the Area of Medical and When Grouped and Compared According to Variables

Table 7 reveals significant differences in service availment at DDOPH-Maragusan based on civil status, with married

Medical Variables	**Categories**	**N**	**Mean Rank**	**Mann Whitney**	**Sig. Level**	***p*-value**	**Interpretation**
Age	Younger	158	163.72	13310	0.05	0.737	Not Significant
	Older	172	167.14				
Sex	Male	118	161.39	12020		0.547	Not Significant
	Female	212	167.79				
Civil Status	Single	110	148.57	10240		0.019	Significant
	Married	220	173.96				
Types of Healthcare	Member	257	168.86	8518		0.216	Not Significant
	Non Member	73	153.68				

clients demonstrating a higher level of engagement, while no significant differences are observed based on age, sex, or healthcare insurance membership. The p-values for age (0.737), sex (0.547), and healthcare insurance (0.216) support the acceptance of the null hypothesis for these variables, indicating that they do not significantly impact service availment. However, the p-value for civil status (0.019) highlights that married individuals tend to avail themselves of more services, which may be attributed to their greater awareness of healthcare needs and the responsibilities associated with marriage. This finding aligns with previous research suggesting that married individuals are generally more appreciative of healthcare services due to increased life experience. The lack of significant differences for age, sex, and healthcare insurance membership implies that these factors are less influential in shaping clients' healthcare decisions in this context. For healthcare providers, these insights emphasize the need to recognize the role of social factors, such as civil status, in influencing healthcare utilization, while also suggesting that age, sex, and insurance status may not be as critical for tailoring service delivery.

Table 8
Difference on the Extent of Availment of Clients' of the Services Rendered at DDOPH-Maragusanin the Area of Nursing and When Grouped and Compared According to Variables

Nursing Variables	**Categories**	**N**	**Mean Rank**	**Mann Whitney**	**Sig. Level**	***p*-value**	**Interpretation**
Age	Younger	158	150.64	11240	0.05	0.006	Significant
	Older	172	179.15				
Sex	Male	118	152.39	10960		0.057	Not Significant
	Female	212	172.79				
Civil Status	Single	110	145.05	98500		0.005	Significant
	Married	220	175.72				
Types of Healthcare	Member	257	169.60	8326		0.135	Not Significant
	Non Member	73	151.05				

The study examined the extent of availment and satisfaction of clients with services at DDOPH-Maragusan, revealing significant differences based on age, civil status, and sex. The p-value for age (0.006) indicated a significant difference between younger and older clients' extent of service use, while the null hypothesis for age was rejected.

However, the study contrasts with Faz (2018), who found no significant age-related differences in service demands. For sex, the p-value (0.57) showed no significant difference between male and female clients, thus supporting the null hypothesis that sex does not affect service availment. This contrasts with Faz's findings that females had a higher level of service use. Civil status also played a role, with single clients showing less appreciation for services compared to married ones, with a p-value of 0.005 rejecting the null hypothesis. This finding differs from Faz's and Subaldo's studies, where married respondents were more likely to avail of services. Lastly, no significant difference was found in the extent of availment based on healthcare insurance membership (p-value 0.135), accepting the null hypothesis. Overall, the study suggests that age and civil status affect service availment, while sex and type of healthcare insurance do not. Therefore, the null hypothesis is rejected for age and civil status, but accepted for sex and healthcare insurance membership.

Table 9
Difference on the Extent of Availment of Clients' of the Services Rendered at DDOPH-Maragusanin the Area of Ancillary and When Grouped and Compared According to Variables

Ancillary Variables	**Categories**	**N**	**Mean Rank**	**Mann Whitney**	**Sig. Level**	***p*-value**	**Interpretation**
Age	Younger	158	158.06	12410		0.172	Not Significant
	Older	172	172.33				
Sex	Male	118	159.35	11780		0.379	Not Significant
	Female	212	168.92				
Civil Status	Single	110	149.48	10340	0.05	0.030	Significant
	Married	220	173.51				
Types of Healthcare	Member	257	168.65	8572		0.257	Not Significant
	Non Member	73	154.42				

Table 9 revealed in this table that there is no significant difference in the extent of availment of DDOPH-Maragusan's ancillary services based on age (p-value = 0.172), sex (p-value = 0.379), and healthcare insurance membership (p-value = 0.257). Thus, the null hypotheses for these variables were accepted. The findings align with Maranon's (2019) study, which found no significant age-related differences in service availment. Similarly, Faz (2018) observed no significant difference between male and female respondents. However, there was a significant difference based on civil status (p-value = 0.030), with single respondents showing less satisfaction with the services compared to married ones. This reflects the study by Subaldo (2019), which suggested that single clients may have different expectations and attitudes. Based on these findings, it can be concluded that while age, sex, and type of healthcare insurance membership do not significantly affect service availment, civil status does. Therefore, the null hypothesis is rejected for civil status and accepted for the other variables.

Table 10
Difference on the Level of Satisfaction of Clients' of the Services Rendered at DDOPH-Maragusanin the Area of Medical and When Grouped and Compared According to Variables

Medical Variables	**Categories**	**N**	**Mean Rank**	**Mann Whitney**	**Sig. Level**	***p*-value**	**Interpretation**
Age	Younger	158	158.88	12540		0.209	Not Significant
	Older	172	171.58				
Sex	Male	118	167.21	12310	0.05	0.801	Not significant
	Female	212	164.55				
Civil Status	Single	110	160.63	11560		0.495	Not Significant

	Married	220	167.94				
Type of Healthcare	Member	257	165.89	9280		0.884	Not Significant
	Non Member	73	164.12				

In this table, the study found no significant differences in clients' satisfaction with DDOPH-Maragusan's medical services based on age (p-value = 0.209), sex (p-value = 0.801), civil status (p-value = 0.495), and type of healthcare insurance (p-value = 0.884), as all p-values were greater than 0.05. Consequently, the null hypotheses for all variables were accepted, indicating that clients' satisfaction levels were consistent regardless of these factors.

This suggests that respondents, regardless of their demographic characteristics, expressed similar satisfaction with the medical services at DDOPH-Maragusan. The study aligns with previous research, such as Bridgepan et al., emphasizing the importance of beneficiary satisfaction in evaluating service quality. Additionally, Renzi noted that patient satisfaction is a key indicator in assessing care quality, reinforcing the idea that patient needs must be met in accordance with their expectations for true satisfaction.

Table 11
Difference on the Level of Satisfaction of Clients' of the Services Rendered At DDOPH-Maragusanin the Area of Nursing and When Grouped and Compared According to Variables

Nursing Variables	**Categories**	**N**	**Mean Rank**	**Mann Whitney**	**Sig. Level**	***p*-value**	**Interpretation**
Age	Younger	158	165.30	13560	0.05	0.970	Not Significant
	Older	172	165.69				
Sex	Male	118	161.03	11980		0.517	Not Significant
	Female	212	167.99				
Civil Status	Single	110	153.44	1077		0.098	Not Significant
	Married	220	171.53				
Types of Healthcare	Member	257	165.61	9353		0.969	Not Significant
	Non Member	73	165.12				

The p-values indicate no significant difference in clients' satisfaction with nursing services at DDOPH-Maragusan based on age (0.970), sex (0.517), civil status (0.098), and type of healthcare insurance (0.969), all exceeding the 0.05 threshold. Therefore, the null hypotheses for each variable are accepted, suggesting uniform satisfaction levels across all groups. These findings align with studies like Faz (2018), which found no significant age-related differences in satisfaction. Tan (2018) observed some variation in male and female perceptions, but this did not imply substantial differences in care quality. Similarly, the civil status variable showed no significant impact on satisfaction, contrary to Faz's (2018) findings, where civil status did influence perceptions. The type of healthcare insurance also did not affect satisfaction levels, indicating that insurance status did not shape respondents' experiences with nursing services at the hospital. Therefore, clients' satisfaction with nursing services at DDOPH-Maragusan was consistent across all demographic variables studied.

Table 12
Difference on the Level of Satisfaction of Clients' of the Services Rendered at DDOPH-Maragusanin the Area of Ancillary and When Grouped and Compared According to Variables

Ancillary Variables	**Categories**	**N**	**Mean Rank**	**Mann Whitney**	**Sig. Level**	***p*-value**	**Interpretation**
Age	Younger	158	160.28	12760	0.05	0.338	Not significant

	Older	172	170.29			
Sex	Male	118	157.57	11570	0.256	Not significant
	Female	212	169.91			
Civil Status	Single	110	163.77	11910	0.814	Not significant
	Married	220	166.37			
Types of Healthcare	Member	257	164.50	9122	0.718	Not significant
	Non Member	73	169.03			

The p-values indicate no significant differences in clients' satisfaction with ancillary services at DDOPH-Maragusan based on age (0.338), sex (0.256), civil status (0.814), and healthcare insurance membership (0.718), all exceeding the 0.05 threshold. Thus, the null hypotheses for each variable are accepted, suggesting uniform satisfaction levels across all groups.

The findings align with previous studies, such as Faz (2018), which also found no significant differences in satisfaction based on sex or age. The results suggest that regardless of demographic variables, clients' express similar levels of satisfaction with the ancillary services.

The data reflects high satisfaction, with clients perceiving the services as excellent, which can be attributed to effective hospital management and the availability of needed personnel. These findings are consistent with Sarker et al. (2018), which reported high satisfaction with healthcare services, particularly diagnostic services and staff behavior.

These results support the Total Quality Management (TQM) theory by Deming and Juran, which emphasizes designing services to meet customer expectations and continuously improving processes to ensure satisfaction. Effective healthcare programs, as suggested by this theory, are those that meet the needs and expectations of the beneficiaries, leading to high levels of satisfaction.

Conclusions

In conclusions, the findings of this study reveal that clients generally avail the services at DDOPH-Maragusan, with the lowest mean scores indicating services that were less frequently utilized. Significant differences were observed in the extent of availment in medical services, influenced by client demographics such as age and civil status, suggesting that these factors shape clients' preferences and decision-making. In the ancillary area, civil status was a significant factor, with marital status influencing respondents' perceptions and priorities. Clients showed high satisfaction across all areas, though lower satisfaction was noted for dental services, likely due to limited availability of dental professionals. No significant differences were found in satisfaction levels for medical, nursing, or ancillary services, indicating that clients are generally satisfied with the quality of healthcare provided by the hospital, particularly in medical and nursing services. Despite being a provincial government-owned hospital, DDOPH-Maragusan delivers quality service, prioritizing the needs of less fortunate clients.

Recommendations

The study recommends several improvements for the DDOPH-Maragusan hospital, stakeholders, and the Provincial Economic Enterprise Office to enhance client satisfaction and service delivery. While the hospital has high client satisfaction, areas needing attention include outpatient consultations, proper health documentation, referrals, and dental services, especially due to the lack of a permanent dentist. To address these, the study suggests designating a doctor for outpatient consultations, improving referral processes, and hiring a full-time dentist through a provincial ordinance. It also recommends upgrading dental facilities and equipment and encouraging continuous education for medical and nursing staff to maintain high service standards. Additionally, the hospital should continue maintaining the availability of quality healthcare personnel and sustaining its current strategies to meet growing client needs. The study proposes an action plan to support these recommendations, ensuring the hospital's vision is achieved and its services are improved.

Acknowledgment

I would like to express my heartfelt gratitude to all those who contributed to the successful completion of my study. I am deeply thankful for the guidance and support from my research adviser, the panel members, and the encouragement provided by various individuals, including those who challenged and motivated me throughout my academic journey. Special thanks are extended to the staff and personnel who assisted with the conduct of my research, as well as to local government officials for their approval and support. I am also profoundly grateful to my mentor for his unwavering support, and to my family, particularly my uncle Dr. Patricio H. Estoya Jr., for his endless encouragement, patience, and dedication. Your guidance, motivation, and belief in me have been invaluable, and I will always cherish the experiences shared with my classmates and mentors. To all of you, Daghang salamat!

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