

Assessment on the Process of a Particular Health Service Delivery in PGH: Basis for Proposed Re-Engineering Operation

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Abstract

The study provided an evaluation of health service delivery processes at the Philippine General Hospital (PGH) focusing on awareness, barriers, and satisfaction from both health service providers and patients. A descriptive-correlational design was used to collect data through survey instruments. The evaluation findings indicated that there was substantial awareness in areas of use of workflow and resources, but there were identified barriers including overcrowding, prolonged wait times, overworked providers, and underutilization of technology. Overall, the provision of health services was a comfortable level of efficiency and quality. The evaluation suggested an organizational re-engineering of PGH operations to improve patient flow, knowledge of operation, resource planning, and use of technology. Overall, this re-engineering would provide an improvement to not only PGH operations and health service delivery, but to patient satisfaction.

Keywords: Health Service Delivery; Efficiency; Patient Satisfaction; Philippine General Hospital; Technological Integration

1. Introduction

The Philippine General Hospital (PGH) is one of the primary public healthcare institutions in the country that services a large part of the country including indigents and other marginalized populations. The PGH is a tertiary-level hospital that provides a large array of medical services, from emergency services to very complex surgical procedures. Even with its existing reputation and importance to the national healthcare system, the PGH has significant operational gaps that include long waiting time for patients, insufficient medical equipment and limited supplies, ineffective workflows, and limited use of modern applications that further hampered the quality and timeliness of care delivery.

With an ongoing increase in demand for public healthcare institutions, there is a real necessity to evaluate and enhance service delivery systems under PGH. It is the institution's mandate to be as efficient as possible, provide patient satisfaction, and to ensure the delivery of quality healthcare. This is even more crucial given the new Universal Health Care Act (Republic Act No. 11223), which aims to provide equitable and accessible health services to all Filipinos. The need to advance PGH services according to national priorities comes down to establishing or re-evaluating service delivery processes associated with those priorities. Continuous evaluation and innovation in the delivery of healthcare will always be necessary to provide the best healthcare services and address ongoing demands.

This study seeks to evaluate a particular service process at PGH in order to identify any gaps,

inefficiencies, and areas for possible re-engineering. The study hopes to understand how aware stakeholders are, what challenges exist while providing the service and the level of patient satisfaction with the service. Ultimately, the study should give evidence-based recommendations for operational improvements. This descriptive-correlational research plans to develop structured surveys for each stakeholder group about their awareness, challenges, and satisfaction with the service. It is expected that the results will inform a proposed re-engineering plan to improve service delivery at PGH, improve patient outcomes, and contribute to a more efficient and responsive health service aligned with national health care goals.

2. Objectives of the Study

The purpose of this study is to assess the existing situation of a certain health service delivery at the Philippine General Hospital (PGH) in order to inform relevant recommendations for re-engineering that can improve its operational excellence. Specifically, it sets out to measure the level of awareness of the respondents, both health care providers and patients, with respect to resource allocation, work-flow design, incorporation of technology, and staff training. Moreover, it identifies the pervasive issues faced by service delivery; long waiting times for patients, ineffective work-flows, excessive workloads of staff, and inappropriate use of technology, and evaluates the measured level of patient satisfaction with efficiency, timeliness, high quality, and productivity. Finally, the research intends to analyze the relationship amongst the respondents' awareness of hospital processes, the issues they face, and their satisfaction with a view toward developing prudent recommendations to improve health care delivery at PGH.

3. Materials and Methods

3.1 Research Design

The research employed a descriptive-correlational model that studied of the structure, processes, and challenges of health service delivery at the Philippine General Hospital (PGH). The use of this design allowed the researcher to describe current service conditions and determine the relational connections of variables which were influenced by awareness, challenges, and satisfaction. The design allowed the researcher to quantify themes and identify correlation patterns between responses of healthcare workers to patients. To summarize, the descriptive-correlational design was appropriate as a tool for measuring operational inefficiencies so that factors that influence patient satisfaction could be established.

3.2 Sampling Technique

The study used a random sampling method to gather data on a variety of healthcare workers and patients located at the different departments of PGH. This technique provided a representative sample of PGH's patient population, ultimately yielding a balanced view of the service delivery process. The random sampling approach mitigated against selection bias and improved the consistency of the outcomes. The prospective sampling method involved obtaining both members of staff and patients' perspectives and therefore produced rich, relevant, comprehensive information on the accounts of PGH's operations.

3.3 Research Instruments

The primary data collection tool was a structured survey questionnaire created by the researcher. The purpose of the questionnaire was to determine respondents' awareness of hospital processes,

perceived barriers, and satisfaction levels. The questionnaire had sections on resource allocation, workflow, technology, and service outcomes. Experts validated the instrument to ensure it was understood correctly, in a reliable manner, and it was administered to healthcare providers and patients following the informed consent process.

3.4 Data Analysis

The data from the questionnaires was analyzed using descriptive statistics as well as regression analysis. Descriptive statistics summarized the demographic profiles and response trends while regression analysis identified the relationships between awareness, challenges and satisfaction. This analytical technique provided a way to identify significant patterns later that could result in operational opportunities for improvement. The statistical treatment provided evidence with which to support to subsequently proposed re-engineering strategies.

3.5 Ethical Considerations

The study adhered to ethical considerations by obtaining informed consent from all participants before collecting data. The respondents were informed that their anonymity and confidentiality would be protected and that participation was entirely voluntary. Ethical clearance was applicable to the extent that it was deemed to protect the rights and welfare of participants at all stages of the research process. These behaviours were designed to provide integrity in the study and to build trust between the researcher and respondents.

4. Results and Discussions

The findings from this study indicate that respondents were generally well-informed about health service delivery processes at PGH, with a composite mean score of 4.12 indicating agreement, with the highest scores being for resource allocation and re-designing workflows. With regard to awareness of human resource allocation, the mean score was 4.20, and awareness of technology integration had a mean score of 4.05. While the respondents claimed to be well-informed, they still indicated major challenges. Long waiting time for patients had the highest mean challenge score of 4.35, and staff workload had a mean of 4.22 which represents major operational bottlenecks. Generally, in the satisfaction of lifestyle, respondents' efficiency scored 4.01, timeliness scored 3.95, quality scored 4.10, and productivity scored 4.03, which represents at best moderate levels of satisfaction.

Regression analysis revealed that process awareness influenced satisfaction considerably ($p < 0.05$), suggesting that those respondents who were more aware of processes felt that higher quality was delivered in the services. In addition, problems like long patient waiting times and inefficient workflow design had a significant negative influence on satisfaction ($p < 0.05$). These findings imply that PGH is in critical need of improvement of internal systems, with patient flow and deployment of staff being particularly important operational areas that require remediation. Enhancing gaps in provision by way of restructuring, such as redesigning workflow processes and expanding the use of digitalism, can enhance service delivery quality, increase satisfaction levels, and support adherence to the Universal Health Care Act's objective of providing efficient care, in a timely and equitable manner.

5. Conclusion

The research has determined that while PGH employees and patients appear to have a high degree of

knowledge and awareness of health service delivery processes there are significant operational challenges, the biggest challenges being extended wait times, employee burden, and unutilized technology. These challenges still have a negative impact on patient satisfaction levels, despite receiving moderate evaluations with regard to efficiency, timeliness, and quality. Statistical analysis found that awareness improves satisfaction, whereas challenges lower satisfaction, therefore, we recommend the implementation of re-engineering activities based on workflow optimization, integration of technology, and improved resource utilization. These types of reforms will improve the PGH service delivery process, conform to the Universal Health Care Act, and patient care outcomes will be improved.

Considering the conclusions, the following recommendations are suggested:

6. Recommendation

- **Optimize Patient Workflow and Scheduling Systems** - PGH can reduce lengthy wait periods by implementing an improved scheduling and triage for patients, possibly through digital queue management systems and real-time patient updates. Scheduling systems can inform patients of available appointment times and automatically remind patients when they should report to the facility. A planned patient flow and reduced congestion will help to enhance the patients' experiences, decrease waiting times, and ensure care is delivered in various timeframes. Scheduling systems can be tailored to highlight urgent cases while maintaining daily capacity. PGH should regularly examine bottlenecks through workflow audits to ensure delays are appropriately managed and that the patient flow is safe and efficient.
- **Enhance Technology Utilization Across Departments** - PGH should advance its application of technology in health service delivery and should consider broader use of EHRs, automated referrals, and even diagnostic systems that can be used by clinical staff. Staff should be trained on these systems on an ongoing basis to ensure full usage of these tools. The use of technology can reduce duplication of work, prevent mistakes, and enhance calls from one department to another. In addition, if administrative tasks like billing, reporting, and tracking patients are digitized these tasks will consume significantly less time and facilitate transportation. Investing in modern, interoperable systems can therefore promote more timely and accurate service delivery and enhance the patient experience.
- **Address Staffing Challenges Through Strategic Human Resource Planning** - The hospital should assess the number of staff members it has working at peak time, and redistribute staff based on busiest areas. PGH should look at hiring additional staff, or set up a pool of flexible, and on-call professionals. Cross training staff to be able to work in several roles, will help create adaptability, and reduce excessive work. Workforce planning has to be matched with continuous assessments of service loads, and service volumes to reach an acceptable patient to staff ratio. Work condition improvements and offering wellness programs can help to minimize staff burnout and improve retention.
- **Implement Continuous Staff Training and Development** - Staff competency is critical to providing quality care. Creating quarterly training programs to improve knowledge of the most current medical practices, patient-centered focused care, workflow systems and technology usage through various learning modules, the use of in-person sessions and eLearning, and also improving softer skills such as working with others and communication. Providing better professional development, PGH will maintain a workforce that is competent, flexible and prepared to respond to the complex nature of delivering healthcare services.

- **Strengthen Feedback Mechanisms from Patients and Staff** - Implementing regular and structured feedback mechanisms will aid PGH in monitoring service delivery quality and recognizing reoccurring issues. Mechanisms for feedback should include surveys, suggestion boxes, and focus group discussions with staff and patients. By analysing feedback, this will enable the hospital to develop priorities to strengthen areas of service delivery requiring improvement and to measure progress over time. The open communication process also supports transparency, trust, and accountability. Ensuring timely and appropriate response by the hospital demonstrates adaptability of service delivery with an evolving range of stakeholder needs and expectations.
- **Upgrade Medical Equipment and Resource Allocation Systems** - Conducting an inventory audit by PGH to locate medical equipment that may be outdated, lacking or faulty will be vital. Proper procurement and maintenance planning is essential to guarantee diagnostic and treatment equipment will always be accessible and functional. An even distribution of resources among departments will eliminate service delays and ultimately meaningful positively impact clinical outcomes. While manual resource allocation is effective, implementing a digital resource management system can better assist in resource allocation; avoid outages and complete timely service delivery. Accessible and maintained equipment means more efficiency and ultimately higher patient satisfaction.

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