



PATIENT SATISFACTION WITH HEALTHCARE WORKERS IN PRIMARY CARE CENTERS IN AL-MAJMA'AH PROVINCE

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Abstract

This study aims to explore the satisfaction of patients with healthcare workers in primary care centers in Al-Majma'ah Province. The researcher used a descriptive methodology to understand the study's objectives, and the sample consisted of 244 patients who frequent primary healthcare centers in Al-Majma'ah Province. A questionnaire was used as a study tool for data collection, and SPSS statistical analysis software was employed to analyze the study data. The study found that the level of patient satisfaction (high) with the services provided by primary health centers in Al-Majma'ah Province, with a weighted average of (3.64) out of (5), which is considered high according to the statistical standard adopted in the current study, with a standard deviation of (0.69). The study also showed that the level of patient satisfaction (high) with the services provided by doctors in primary healthcare centers, with a weighted average of (3.64) out of (5), which is high according to the statistical standard adopted in the current study, with a standard deviation of (0.74). Similarly, the study indicated that the level of patient satisfaction (high) with the services provided by doctors in primary healthcare centers, with a weighted average of (3.65) out of (5), considered high according to the statistical standard adopted in the current study, with a standard deviation of (0.78). In light of these results, the study recommends the necessity of implementing instructions to increase the responsiveness of workers in primary healthcare centers to the requirements of the patients. Training workers in primary healthcare centers to meet the desires and requirements of the patients to achieve their satisfaction towards the provided services. Implementing a flexible and easy system for receiving complaints and suggestions from patients visiting the primary medical centers regarding the workers, and ensuring a quick response to these complaints and solving them.

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Introduction

Primary healthcare services are provided by doctors, nurses, and staff responsible for delivering primary healthcare services, working in health centers, outpatient clinics, and dispensaries. These services represent an entry to the health system where the doctor assesses the medical conditions of the patients to the extent that matches their skills and authority, or refers to those with higher skills or authority such as secondary care. In many cases, the doctor can handle the medical conditions that do not need a specialist, reducing the pressure on hospitals and emergency departments (Nasirat, 2012).

Primary healthcare is considered the cornerstone of the healthcare system and maintains physical, mental, and environmental health, and promotes human health. However, it has recently lost the confidence of patients despite the ministry's efforts to activate its roles through school health and raising awareness by providing its services outside its buildings to reach patients in their gathering places, aiming to enhance the preventive and health aspect for them (Qatash, et al., 2013).

In 1987, the Alma Ata International Conference was announced, bringing together health experts and world leaders to commit to health for all by the year 2000. The declaration of that conference agreed to establish global primary healthcare as a key to achieving health for all (World Health Organization). The World Conference on Primary Health Care in Astana, Kazakhstan, in October 2018, agreed on a new declaration that emphasizes the vital role of primary healthcare worldwide. The declaration aims to refocus efforts on primary healthcare to ensure that everyone, everywhere, can enjoy the highest possible level of health (Chokshi, 2018).

Healthcare and medical facilities of various types and levels, regardless of their location or the service they provide, strive to elevate the level of healthcare provided to the service beneficiary to reach the highest levels of excellence and superiority, a goal sought by both the service provider and the beneficiary (Sami, 2014).

Measuring customer satisfaction is one of the most prominent mechanisms for evaluation and monitoring, as it is a fundamental step in analyzing the strengths and weaknesses in performance and developing continuous work improvement and renewal ideas (Al-Ahmadi, 2000).

Patient satisfaction is an important element in the success of health institutions, especially in light of prevailing developments in all fields. An institution that does not keep pace with these developments will face several difficulties,

leading to the loss of its customers. Therefore, it is imperative for health institutions to continuously recognize their desires and satisfy them, and how they perceive what the institution offers in terms of products and services, and strive to improve the level of perception. Thus, evaluating customers' perceptions of the quality of health services has become necessary (Yahyawi and Bouhdid, 2014). Healthcare workers play a key role in the quality of health services provided in health centers, making it important to measure patient satisfaction with the services they offer.

Study Problem:

Primary healthcare centers are among the most critical medical institutions that the Ministry of Health seeks to focus on, develop, and improve the quality of their services. These centers are the first point of reception for patients and play an active role in the swift diagnosis and detection of diseases, working towards the prevention of diseases within the community through their preventative and therapeutic services. Patient satisfaction is considered one of the most important factors that evaluate the services provided to them. Hence, the problem of this study is identified as understanding the satisfaction of patients.

Study Importance:

1. Scientific Importance:

- Enriching those interested in hospital management by identifying the factors affecting patient satisfaction towards hospitals and their staff.
- Adding a new topic in the field of health management in general, and patient satisfaction with workers in primary healthcare centers, to university libraries and databases.

2. Practical Importance:

- Expected to aid in developing the health services provided at the center and be beneficial for the workers to improve their services and understand the opinions of the patients about them.
- The study will help in identifying the most important factors that concern patients and alert the workers in hospitals and primary healthcare centers about them.
- The study will contribute to improving the quality of healthcare provided to patients.

Study Objectives:

The study generally aims to understand the satisfaction of patients towards the medical

services provided to them by workers in primary healthcare centers in Al-Majma'ah Province.

It breaks down into the following specific objectives:

1. To understand patient satisfaction with the services provided by doctors in primary healthcare centers in Al-Majma'ah Province.
2. To understand patient satisfaction towards nursing services in primary healthcare centers in Al-Majma'ah Province.
3. To understand patient satisfaction with the services provided by reception staff in primary healthcare centers in Al-Majma'ah Province.
4. To understand patient satisfaction with the services provided by pharmacists in primary healthcare centers in Al-Majma'ah Province.

Study Questions:

The main question for this research is: What is the satisfaction of patients with the workers in primary healthcare centers in Al-Majma'ah Province? It breaks down into the following sub-questions:

1. What is the satisfaction of patients with the services provided by doctors in primary healthcare centers in Al-Majma'ah Province?
2. What is the satisfaction of patients towards nursing services in primary healthcare centers in Al-Majma'ah Province?
3. What is the satisfaction of patients with the services provided by reception staff in primary healthcare centers in Al-Majma'ah Province?
4. What is the satisfaction of patients with the services provided by pharmacists in primary healthcare centers in Al-Majma'ah Province?

Study Limits

The study limits are as follows:

1. Temporal Limits: The study was conducted in 2021.
2. Geographical Limits: Primary healthcare centers in Al Majma'ah Governorate in the Kingdom of Saudi Arabia.
3. Human Limits: The study was applied to a sample of clients of primary healthcare centers.
4. Subject Limits: Clients' satisfaction with the staff at primary healthcare centers (in Al Majma'ah Governorate).

Study Concepts:

1. Patient Satisfaction: Measures how much patients value the services they receive from primary healthcare providers. (Yahyawi and Bouhdid, 2014)
2. Health: Defined by the World Health Organization as a state of complete physical,

mental, and social well-being and not merely the absence of disease or infirmity.

3. Primary Healthcare: A set of actions and services, including preventative and therapeutic services and diagnostic care provided by health centers and clinics to all community members to raise the community's health level and prevent the spread of diseases. (Qatash, et al., 2013).

Literature Review

Through research on the topic of the study, the researcher was able to review many scientific studies and researches that discussed patient satisfaction towards healthcare workers in primary care centers both inside and outside the Kingdom of Saudi Arabia. Here is a presentation of the most important previous studies:

Al-Ali et al. (2018) aimed to understand the level of patient satisfaction with the health services provided by government hospitals on the Syrian coast, regarding treating physicians, nursing staff, and the level of service and organization. The research relied on a descriptive approach and survey method, where a questionnaire was used as the main source for data collection. The research population consisted of patients in government hospitals in Latakia and Tartus cities. The research found that patient satisfaction with treating physicians, nursing staff, service, and organization, and the quality of treatment provided, was of a medium level in government hospitals on the Syrian coast.

Seif (2013) measured the satisfaction of 340 patients referred to the central laboratory for laboratory analyses. It was concluded that patients prefer booking appointments by phone rather than in-person booking and returning for the appointment. They preferred having a set date and time for the appointment to avoid long waiting times before receiving the service. As for waiting areas, the majority preferred seating near the clinic and the availability of required analyses in their centers instead of the central laboratory and providing medication especially at the end of the year and dispensing for three months instead of one month because the same medication is usually prescribed again for the patient. The study highlighted a lack in health education for patients and the need for a better file management system due to the recurring loss of patient files at the centers.

Al-Yahya (2010) measured 300 visitors and showed that there is a disparity in population density between neighborhoods and the distribution of primary healthcare centers. It was found that two centers serve 44.3% of the

population, and six centers serve 55.6% of the population in Al-Khobar city. There was also a deficiency in some support departments and a high percentage of rented buildings (62%), leading to dissatisfaction with some of the services provided due to the difficulty of accessing services and benefiting from some departments inside rented buildings, and inadequacy in serving some patients due to the high number of visitors to centers over others due to population density and unfair distribution of services.

Al-Ahmadi (2009) aimed to identify the values of health service performance in the Kingdom of Saudi Arabia by measuring the relative efficiency of primary healthcare centers and government hospitals. The study followed a closed data approach through doctors, nursing workers, and auxiliary medical categories through the number of centers and visitors to the clinics, laboratory examinations, and radiographic imaging as outputs of the model. The study concluded that primary healthcare centers in the Kingdom's regions should be able to provide the same level of service with current inputs or increase their outputs. It also indicated that these hospitals could reduce their current inputs and provide the same level of services (outputs) or increase their services to beneficiaries using the same levels of inputs, as well as pointed out that a number of areas have complete relative government efficiency in terms of hospital efficiency (10 regions).

Bou Hamra and Al-Zeid (1999) targeted 2471 visitors and measured: overall satisfaction, satisfaction with the Kuwaiti doctor, satisfaction with the doctor of the opposite sex, service outcome, and clinic facilities. 70.6% of the sample expressed satisfaction with the services, and the youth were the most enthusiastic about accepting the Kuwaiti doctor and the provided services. In contrast, military personnel and citizens with lower incomes were the least satisfied with the health services compared to employees in other sectors and those with higher incomes.

Shi & etc (2013) aimed to understand the variances in access to and satisfaction with primary care among patients from different racial/ethnic groups and insurance coverage, in health centers and the nation in general. The data came from the 2009 Health Center Patient Survey and the 2009 Medical Expenditure Panel Survey. Study results included the usual source of care, the type of usual care source, satisfaction with provider's operating hours, and satisfaction with the comprehensive care provided. There were no

significant variances in healthcare access among patients from different racial/ethnic and insurance groups in health centers, unlike low-income patients across the country or the general U.S. population. There is a need for more focus on the uninsured, in health centers and other healthcare facilities nationwide, to enhance satisfaction with care among these patients.

Methodological Procedures

Study Method.

The researcher used the descriptive approach in the current study. The descriptive approach, as defined by Obeidat (2011), is a method that relies on studying reality and focuses on describing it accurately, expressing it both quantitatively and qualitatively.

The survey method involves studying public opinion regarding a scientific research problem or a specific issue so that the researcher can obtain public opinion on the issue addressed in the scientific research.

Study Population:

The population consists of all male and female patients who visit primary healthcare centers (in Al-Majma'ah Province) in the month of Jumada Al-Akhir in the year 1440 AH, totaling (3247) patients according to the health centers' records.

Study Sample:

The researcher selected a random sample from the study population consisting of (244) male and female patients.

Study Tool:

To achieve the study's objectives, the researcher constructed a specific tool for the study (a questionnaire) consisting of two parts. The first includes demographic characteristics of the patients who visit primary healthcare centers (in Al-Majma'ah Province). The second part includes axes that measure their satisfaction level with the services provided by those centers, based on theoretical literature and previous studies.

Validity and Reliability of the Study Tool:

First: Reliability of the questionnaire.

To verify the reliability indicator of the study tool, the researcher used Cronbach's Alpha (α) equation to ensure the stability of the questionnaire and its axes by applying it to a pilot sample of (41) patients from the same population. Table (1) shows the reliability coefficient values of the study tool.

Table No. (1) Cronbach's Alpha coefficient for measuring the reliability of the study tool.

Dimension Number	Dimension Name	Number phrases	Dimension Reliability
1	Patient Satisfaction with the Services Provided by the Doctor in Primary Healthcare Centers	9	0.88
2	Patient Satisfaction Towards Nursing Services	8	0.87
3	Patient Satisfaction with the Services Provided by the Reception Staff	5	0.86
4	Patient Satisfaction with the Services Provided by the Pharmacist	5	0.78
Overall Reliability of the Questionnaire		27	0.94

The data in the previous table show that the overall reliability coefficient for the dimensions of the study tool is very high, reaching (0.94) for the total questionnaire items. The highest value for Cronbach's alpha was for the dimension (patient satisfaction with the services provided by the doctor in primary healthcare centers), which reached (0.88), and the lowest value for Cronbach's alpha was for the dimension (patient satisfaction with the services provided by the pharmacist), which was (0.78). This confirms, as indicated by the study (Abdulqader, 2015), that these values are high and serve as an indicator of the questionnaire's stability.

Second: Content Validity.

Content validity was verified by presenting it to a committee of expert reviewers with expertise and specialization in the field (Dr. Talal Ayed Al-Ahmadi, Dr. Ahmed Ismail Jalal Ismail, Dr. Mohammed Shabib Saud Al-Nuaimi, Dr. Jaber Ayed Al-Asimi). They were asked to provide their opinion regarding (the relevance of the items to the questionnaire and its dimensions - their linguistic formulation, and the accuracy and clarity of the item formulations), where the tool

initially consisted of (32) items. Based on their suggestions and opinions, necessary modifications were made to the items, including rephrasing some items, deleting others, and moving some items to the appropriate dimension until the final version was agreed upon, consisting of (27) items distributed across four dimensions:

1. Patient satisfaction with the services provided by the doctor in primary healthcare centers.
2. Patient satisfaction towards the nursing services in primary healthcare centers.
3. Patient satisfaction with the services provided by the reception staff in primary healthcare centers.
4. Patient satisfaction with the services provided by the pharmacist in primary healthcare centers.

Third: Internal Consistency Validity.

To verify the internal consistency validity of the questionnaire, Pearson's correlation coefficient was calculated between the scores of each item from the four dimensions and the total score of the dimension to which the item belongs. The following table shows the correlation coefficients between each item of the first dimension and the total score for the dimension.

Table (2) Correlation coefficients between the score of each item and the total score for the first dimension

Dimension Items	Correlation Coefficient	Significance Value
1. The waiting time to see the doctor is appropriate.	0.544**	0.000
2. I had enough time with the doctor in the clinic.	0.787**	0.000
3. The doctor listens attentively to my health complaints.	0.873**	0.000
4. The doctor explains my medical condition in detail.	0.635**	0.000
5. The doctor answers my inquiries clearly.	0.855**	0.000
6. The doctor insists on requesting sufficient tests and analyses to understand the cause of my illness.	0.748**	0.000
7. The doctor discusses with me the available options for treating my condition: (treatment – referral – other tests).	0.764**	0.000
8. The doctor explains the prescribed medication from all required aspects, such as: the benefit of the treatment, how to take it, the number of times it should be used, and its side effects.	0.743**	0.000
9. The doctor records all the required information in the health file at every visit.	0.637**	0.000

** Correlation at a significance level of 0.01

From the results of the previous table, we find that all Pearson correlation coefficients between the items of the first dimension and the total score for the first dimension are statistically significant at a significance level of (0.01). The minimum correlation coefficient was (0.544), while the maximum was (0.873). Therefore, all items of the

first dimension are internally consistent with the dimension they belong to, indicating the internal consistency validity of the items of the first dimension.

Table (3) shows the correlation coefficients between each item of the second dimension and the total score for the dimension.

Table (3) Correlation coefficients between the score of each item and the total score for the second dimension

Dimension Items:	Correlation Coefficient	Significance Value
1. The nursing staff interacts with me in a kind manner.	0.745**	0.000
2. The nursing staff understands my health condition.	0.835**	0.000
3. The information provided by the nursing staff is clear.	0.770**	0.000
4. The nursing staff ensures the doctor's instructions are clear before starting any treatment steps.	0.755**	0.000
5. The nursing staff quickly deals with medical conditions.	0.753**	0.000
6. Vital signs of the patient are measured at every visit to the center: (temperature, blood pressure, respiration, pulse, weight).	0.550**	0.000
7. The nursing staff records all required information in the health file at every visit.	0.756**	0.000
8. There is regular follow-up by the nursing staff for certain necessary cases, such as: (children's vaccinations, chronic diseases, pregnancy and childbirth cases).	0.612**	0.000

** Correlation at a significance level of 0.01

From the results of the previous table, we find that all Pearson correlation coefficients between the items of the second dimension and the total score for the second dimension are statistically significant at a significance level of (0.01). The minimum correlation coefficient was (0.550), while the maximum was (0.835). Therefore, all

items of the second dimension are internally consistent with the dimension they belong to, indicating the internal consistency validity of the items of the second dimension.

Table (4) shows the correlation coefficients between each item of the third dimension and the total score for the dimension.

Table (4) Correlation coefficients between the score of each item and the total score for the third dimension

Dimension Items	Correlation Coefficient	Significance Value
1. The reception staff are always present at their workplace.	0.777**	0.000
2. During my visits to the health center, the reception staff are courteous.	0.871**	0.000
3. The medical file is brought out for every visit for me or any of my family members.	0.795**	0.000
4. The service is provided to me at the reception quickly.	0.862**	0.000
5. The reception staff provide me with sufficient information about my inquiries.	0.670**	0.000

** Correlation at a significance level of 0.01

From the results of the previous table, we find that all Pearson correlation coefficients between the items of the first dimension and the total score for the third dimension are statistically significant at a significance level of (0.01). The minimum correlation coefficient was (0.670), while the maximum was (0.871). Therefore, all items of the

third dimension are internally consistent with the dimension they belong to, indicating the internal consistency validity of the items of the third dimension.

Table (5) shows the correlation coefficients between each item of the fourth dimension and the total score for the dimension.

Table (5) Correlation coefficients between the score of each item and the total score for the fourth dimension

Dimension Items:	Correlation Coefficient	Significance Value
1. The pharmacist is constantly present in the pharmacy.	0.822**	0.000
2. The pharmacist greets me well.	0.727**	0.000
3. The pharmacist verifies my information, such as: (name, file number, age) every time.	0.782**	0.000
4. The pharmacist explains to me how to take the medication, the timings, and its side effects accurately and clearly.	0.740**	0.000
5. I consistently find the appropriate medications.	0.571**	0.000

** Correlation at a significance level of 0.01

From the results of the previous table, we find that all Pearson correlation coefficients between the items of the fourth dimension and the total score for the fourth dimension are statistically significant at a significance level of (0.01). The minimum correlation coefficient was (0.571), while the maximum was (0.822). Therefore, all items of the fourth dimension are internally consistent with the dimension they belong to, indicating the internal consistency validity of the items of the fourth dimension.

The results of reliability and validity in the previous tables show that the study tool is characterized by high reliability and validity indicators, allowing its use for the purposes of the current study.

Statistical Criterion:

The following grading was used to estimate the level of patient satisfaction with the medical services provided to them in primary healthcare centers with the following weights:

1. High level: The weighted average ranges (from 3.4 to 5).
2. Medium level: The weighted average ranges (from 2.6 to 3.39).
3. Low level: The weighted average ranges (from 1 to 2.59).

Statistical Procedures:

To confirm the psychometric properties of the study tool, the following were used:

1. Internal consistency: Through Pearson's coefficient to detect the correlation between the score of each item and the total score for the dimension it belongs to.
2. Reliability: Through Cronbach's alpha coefficient for the questionnaire as a whole and for each dimension separately.

To answer the main question, (mean, standard deviation, ranks) will be used for the medical services provided to them in primary healthcare centers in Al-Majma'ah Province in general.

To answer the sub-questions, (frequencies, percentages, ranks, mean, standard deviation) will be used for the medical services provided to them in primary healthcare centers in Al-Majma'ah Province for each dimension of the study.

Presentation and Discussion of Results

This chapter includes a presentation of the results derived from the statistical analysis using the study tool, which aimed to understand the level of patient satisfaction towards the workers in primary healthcare centers in Al-Majma'ah Province. Below is a tabular and graphical presentation of the distribution of the study participants according to their personal characteristics.

Table (6) Distribution of the study sample according to personal characteristics

Personal Characteristics		Frequency	Percentage
Gender	Male	76	31.1%
	Female	168	68.9%
Marital Status	Single	79	32.4%
	Married	159	65.2%
	Widowed	2	0.8%
	Divorced	4	1.6%
Family Income	Less than 5000	59	24.2%
	From 5000 to less than 10000	88	36.1%
	From 10000 to less than 15000	54	22.1%
	From 15000 to less than 20000	24	9.8%
	20,000 or more	19	7.8%

Age	Less than 20 years	16	6.6%
	From 20 to less than 30 years	85	34.8%
	From 30 to less than 40 years	110	45.1%
	From 40 to less than 50 years	28	11.5%
	From 50 to less than 60 years	5	2%
	60 years and over	0	0%
Educational Level	Elementary	3	1.2%
	Middle	6	2.5%
	High School	47	19.3%
	Bachelor's	177	72.5%
	Master's	10	4.1%
	Doctorate	1	0.4%

From the data in the previous table, it is evident that: Regarding the gender variable: The highest percentage of the sample were females at (68.9%), while males constituted (31.1%) of the total sample.

As for the marital status variable: The highest percentage of the sample were married at (65.2%), followed by singles at (32.4%), then divorced at (1.6%), and widows at (0.8%) of the total sample.

Regarding the family income variable: The highest percentage of the sample were those with an income (from 5000 to less than 10000) at 36.1%, followed by those with an income (less than 5000) at (24.2%), followed by those with an income (from 10000 to less than 15000) at (22.1%), followed by those with an income (from 15000 to less than 20000) at (9.8%), and finally, those with an income (20000 and above) at (7.8%) of the total sample.

Also, for the age variable: The highest percentage of the sample were those aged (from 30 to less than 40 years) at (45.1%), followed by those aged (from 20 to less than 30 years) at (34.8%), followed by those aged (from 40 to less than 50 years) at (11.5%), while those aged (less than 20

years) were at (6.6%), and those aged (60 years and above) had no participants in the total sample. Finally, for the education level variable: The highest percentage were bachelor's degree holders at (72.5%) of the total sample, followed by high school diploma holders at (19.3%), followed by master's degree holders at (4.1%), followed by middle school certificate holders at (2.5%), followed by elementary school certificate holders at (1.2%), and finally, Ph.D. holders at (0.4%).

Study Results.

First: The results related to the main question, which stated: What is the general level of patient satisfaction with the workers in primary healthcare centers in Al-Majma'ah Province?

To answer the main question, (mean, standard deviation, ranks) were used to estimate the sample responses on the study dimensions and the tool as a whole regarding their level of satisfaction with the workers in primary healthcare centers in Al-Majma'ah Province in general. As shown in the following table:

Table Number (7) General level of patient satisfaction with the workers in primary healthcare centers in Al-Majma'ah Province

Dimensions:	Weighted Average	Standard Deviation	Rank	Satisfaction Level
Level of patient satisfaction with the services provided by the doctor in primary healthcare centers.	3.64	0.74	3	High
Level of patient satisfaction towards nursing services in primary healthcare centers.	3.65	0.78	2	High
Level of patient satisfaction with the services provided by the reception staff in primary healthcare centers.	3.58	0.92	4	High
Level of patient satisfaction with the services provided by the pharmacist in primary healthcare centers.	3.68	0.79	1	High
Overall satisfaction	3.64	0.69	High	

The previous table shows that the level of patient satisfaction (high) with the services provided by primary healthcare centers in Al-Majma'ah Province, where the weighted average reached (3.64), which is a high value according to the statistical standard adopted in the current study, with a standard deviation of (0.69). The dimensions ranked as follows:

The first rank in satisfaction was for the dimension (level of patient satisfaction with the services provided by the pharmacist in primary healthcare centers) with an average of (3.68) and a standard deviation of (0.79).

In the second rank in satisfaction was for the dimension (level of patient satisfaction towards the nursing services in primary healthcare centers) with an average of (3.65) and a standard deviation of (0.78).

In the third rank in satisfaction was for the dimension (level of patient satisfaction with the services provided by the doctor in primary

healthcare centers) with an average of (3.64) and a standard deviation of (0.74).

And in the last rank was the dimension (level of patient satisfaction with the services provided by the reception staff in primary healthcare centers) with an average of (3.58) and a standard deviation of (0.92).

Second: The results related to the sub-questions:

1. What is the level of patient satisfaction with the services provided by the doctor in primary healthcare centers in Al-Majma'ah Province?

To answer this question, (frequencies, percentages, ranks, mean, standard deviation) were used to estimate the sample responses on the dimension of the level of patient satisfaction with the services provided by the doctor in primary healthcare centers. As shown in the following table:

Table Number (8) Level of patient satisfaction with the services provided by the doctor in primary healthcare centers

First Dimension	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Weighted Average	Standard Deviation	Rank	Satisfaction Level
	Frequency	Frequency	Frequency	Frequency	Frequency				
	Percentage	Percentage	Percentage	Percentage	Percentage				
1. The waiting time to see the doctor is appropriate.	15 6.1%	36 14.8%	62 25.4%	103 42.2%	28 11.5%	3.38	1.07	8	Medium
2. I took enough time with the doctor in the clinic.	5 2%	21 8.6%	24 9.8%	145 59.4%	49 20.1%	3.87	0.90	2	High
3. The doctor listens attentively to my health complaints.	4 1.6%	18 7.4%	32 13.1%	138 56.6%	52 21.3%	3.89	0.88	1	High
4. The doctor explains my medical condition in detail.	6 2.5%	29 11.9%	60 24.6%	111 45.5%	38 15.6%	3.60	0.97	6	High
5. The doctor clearly answers my inquiries.	5 2%	27 11.1%	33 13.5%	139 57%	40 16.4%	3.75	0.93	4	High
6. The doctor ensures to request sufficient tests and analyses to diagnose my illness.	9 3.7%	36 14.8%	52 21.3%	104 42.6%	43 17.6%	3.56	1.06	7	High
7. The doctor discusses with me the available treatment options: (treatment – referral – other tests).	5 2%	36 14.8%	37 15.2%	130 53.3%	36 14.8%	3.64	0.97	5	High
8. The doctor explains the prescribed medication in detail, including its benefits, how to take it, dosage frequency, and side effects.	19 7.8%	54 22.1%	38 15.6%	105 43%	28 11.5%	3.28	1.61	9	Medium
9. The doctor records all required information in the health file at every visit.	9 3.7%	14 5.7%	53 21.7%	110 45.1%	58 23.8%	3.80	0.99	3	High
The overall weighted average for the first dimension						3.64	0.74		High

The previous table shows that the level of patient satisfaction (high) with the services provided by the doctor in primary healthcare centers, where the weighted average reached (3.64), which is a high value according to the statistical standard adopted

in the current study, with a standard deviation of (0.74). The items according to the statistical standard adopted in the current study ranked as follows:

- First: Items (2-3-4-5-6-7-9) showed a high level of satisfaction, with their weighted averages ranging from (3.56 to 3.89) and standard deviation ranging from (1.06 to 0.88).
- Second: Items (1-8) showed a medium level of satisfaction, with their weighted averages ranging from (3.28 to 3.38) and standard deviation ranging from (1.61 to 1.07).
- Third: There were no items with a low level of satisfaction.

This result is interpreted as the doctor's attentive listening to the patients' health complaints, allowing adequate time with the doctor in the clinic, the doctor recording all required

information in the health file at every visit, and the doctor's effort to clearly answer the patients' inquiries.

2. What is the level of patient satisfaction towards the nursing services in primary healthcare centers in Al-Majma'ah Province?

To answer this question, (frequencies, percentages, ranks, mean, standard deviation) were used to estimate the sample responses on the dimension of the level of patient satisfaction towards the nursing services in primary healthcare centers. As shown in the following table:

Table Number (9) Level of patient satisfaction towards the nursing services in primary healthcare centers.

Second Dimension	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Weighted Average	Standard Deviation	Rank	Satisfaction Level
	Frequency	Frequency	Frequency	Frequency	Frequency				
	Percentage	Percentage	Percentage	Percentage	Percentage				
1.The nursing staff treats me in a kind manner.	11 4.5%	23 9.4%	44 18%	123 50.4%	43 17.6%	3.67	1.02	4	High
2.The nursing staff understands my health condition.	10 4.1%	25 10.2%	57 23.4%	118 48.4%	34 13.9%	3.58	0.99	5	High
3.The information provided by the nursing staff is clear.	9 3.7%	29 11.9%	61 25%	111 45.5%	34 13.9%	3.54	0.99	6	High
4.The nursing staff ensures the doctor's instructions are clear before starting any treatment steps.	7 2.9%	18 7.4%	50 20.5%	128 52.5%	41 16.8%	3.73	0.926	3	High
5.The nursing staff quickly deals with medical conditions.	14 5.7%	23 9.4%	56 23%	119 48.8%	32 13.1%	3.54	1.02	6	High
6.Vital signs of the patient are measured at every visit to the center: (temperature, blood pressure, respiration, pulse, weight).	10 4.1%	26 10.7%	37 15.2%	108 44.3%	63 25.8%	3.77	1.08	1	High
7.The nursing staff records all required information in the health file at every visit.	7 2.9%	17 7%	48 19.7%	127 52%	45 18.4%	3.76	0.93	2	High
8.There is regular follow-up by the nursing staff for certain necessary cases, such as: (children's vaccinations, chronic diseases, pregnancy and childbirth cases).	14 5.7%	30 12.3%	50 20.5%	101 41.4%	49 20.1%	3.58	1.11	5	High
The overall weighted average for the second dimension						3.65	0.78		High

The previous table shows that the level of patient satisfaction (high) with the services provided by the doctor in primary healthcare centers, where the weighted average reached (3.65), which is a high value according to the statistical standard adopted in the current study, with a standard deviation of (0.78). The items, according to the statistical standard adopted in the current study, ranked as follows:

- First: Items (1-2-3-4-5-6-7-8) showed a high level of satisfaction, with their weighted averages ranging from (3.54 to 3.77) and standard deviation ranging from (1.02 to 1.08).
- Second: There were no items with a medium level of satisfaction.
- Third: There were no items with a low level of satisfaction.

This result indicates the extent of patient satisfaction with nursing services, measured through temperature, blood pressure, respiration, pulse, weight checks at every visit to the center, the nursing staff's documentation of all required information in the health file at every visit, and ensuring the nursing staff follows the doctor's directions before starting therapeutic steps. The nursing staff's manner was described as gentle.

3. What is the level of patient satisfaction with the services provided by the reception staff in primary healthcare centers in Al-Majma'ah Province?

To answer this question, (frequencies, percentages, ranks, mean, standard deviation) were used to estimate the sample responses on the dimension of the level of patient satisfaction with the services provided by the reception staff in primary healthcare centers. As shown in the following table:

Table Number (10) Level of patient satisfaction with the services provided by the reception staff in primary healthcare centers.

Third Dimension	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Weighted Average	Standard Deviation	Rank	Satisfaction Level
	Frequency	Frequency	Frequency	Frequency	Frequency				
	Percentage	Percentage	Percentage	Percentage	Percentage				
1. Reception staff are always present at their workplace.	15	32	55	98	44	3.51	1.12	4	High
	6.1%	13.1%	22.5%	40.2%	18%				
2. During my visit to the health center, the reception staff are courteous.	14	31	51	110	38	3.52	1.08	3	High
	5.7%	12.7%	20.9%	45.1%	15.6%				
3. The medical file is brought out for every visit for me or any of my family members.	9	18	39	133	45	3.77	0.96	1	High
	3.7%	7.4%	16%	54.5%	18.4%				
4. The service is provided to me at the reception area quickly.	12	36	49	106	41	3.52	1.09	3	High
	4.9%	14.8%	20.1%	43.4%	16.8%				
5. The reception staff adequately answer the visitors' inquiries.	15	32	36	117	44	3.59	1.11	2	High
	6.1%	13.1%	14.8%	48%	18%				
The overall weighted average for the third dimension						3.58	0.92	High	

The previous table indicates that the level of patient satisfaction (high) with the services provided by the reception staff in primary healthcare centers, where the weighted average reached (3.58), which is a high value according to the statistical standard adopted in the current study, with a standard deviation of (0.92). The items, according to the statistical standard adopted in the current study, ranked as follows:

- First: Items (1-2-3-4-5) showed a high level of satisfaction, with their weighted averages

ranging from (3.51 to 3.77) and standard deviation ranging from (1.12 to 0.96).

- Second: There were no items with a medium level of satisfaction.
- Third: There were no items with a low level of satisfaction.

This result interprets the reception staff's effort in ensuring the medical file is brought in for every visit for myself or any family member, as well as adequately answering the inquiries of the patients, providing the service at the reception quickly, and

ensuring the reception staff are always present at their workplaces.

4. What is the level of patient satisfaction with the services provided by the pharmacist in primary healthcare centers in Al-Majma'ah Province?

To answer this question, (frequencies, percentages, ranks, mean, standard deviation) were used to estimate the sample responses on the level of patient satisfaction with the services provided by the pharmacist in primary healthcare centers. As shown in the following table:

Table Number (11) Level of patient satisfaction with the services provided by the pharmacist in primary healthcare centers.

Fourth Dimension	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Weighted Average	Standard Deviation	Rank	Satisfaction Level
	Frequency	Frequency	Frequency	Frequency	Frequency				
	Percentage	Percentage	Percentage	Percentage	Percentage				
1.The pharmacist is always present in the pharmacy.	10	16	34	125	59	3.85	0.99	1	High
	4.1%	6.6%	13.9%	51.2%	24.2%				
2.The pharmacist greets me well.	7	14	37	139	47	3.84	0.9	2	High
	2.9%	5.7%	15.2%	57%	19.3%				
3.The pharmacist verifies my information, such as: (name, file number, age) every time.	6	25	55	114	44	3.68	0.97	3	High
	2.5%	10.2%	22.5%	46.7%	18%				
4.The pharmacist explains how to take the medication, the timings, and its side effects accurately and clearly.	10	30	33	126	45	3.68	1.04	3	High
	4.1%	12.3%	13.5%	51.6%	18.4%				
5.I consistently find the appropriate medications.	19	44	45	107	29	3.34	1.14	4	Medium
	7.8%	18%	18.4%	43.9%	11.9%				
The overall weighted average for the fourth dimension						3.64	0.67	High	

The previous table indicates that the level of patient satisfaction (high) with the services provided by the pharmacist in primary healthcare centers, where the weighted average reached (3.64), which is a high value according to the statistical standard adopted in the current study, with a standard deviation of (0.67). The items, according to the statistical standard adopted in the current study, ranked as follows:

- First: Items (1-2-3-4) showed a high level of satisfaction, with their weighted averages ranging from (3.68 to 3.85) and standard deviation ranging from (1.44 to 0.99).
- Second: Item (5) showed a medium level of satisfaction, with an average of (3.34) and a standard deviation of (1.14), as well as items (1-8), which had their weighted averages ranging from (3.38 to 3.28) and standard deviation ranging from (1.61 to 1.07).
- Third: There were no items with a low level of satisfaction.

This result interprets the patients' satisfaction with the services provided by the pharmacist in primary healthcare centers. The pharmacist is consistently present in the pharmacy, welcomes the patients

well, and verifies my information, such as: (name, file number, age) every time. They pay attention to the method and timing of medication intake and the side effects accurately and clearly.

Study Results, Recommendations, and Suggestions.

First: Study Results

The study reached the following conclusions:

1. The study showed that the level of patient satisfaction (high) with the medical services provided by primary healthcare centers in Al-Majma'ah Province, where the weighted average was (3.64) out of (5), a high value according to the statistical standard adopted in the current study.
2. The first rank in satisfaction was for the dimension (level of patient satisfaction with the services provided by the pharmacist in primary healthcare centers) with an average of (3.68) out of (5), and a standard deviation of (0.79). This result interprets the patients' satisfaction with the services provided by the pharmacist in primary healthcare centers, where the pharmacist is always present in the pharmacy, and communicates with the patient in a

reassuring manner, along with a comprehensive explanation to the patient on how to take the medication, providing therapeutic advice to the patient, making them feel comfortable and satisfied. This aligns with the study by Al-Ali (2018), Al-Ahmari (2009), and Shi & etc (2013), which indicated a medium level of satisfaction among patients with pharmacists, differing from the results of the study by Al-Yahya (2010), which indicated patient dissatisfaction with hospital workers in general.

3. The second rank in satisfaction was for the dimension (level of patient satisfaction towards nursing services in primary healthcare centers) with an average of (3.65) out of (5), and a standard deviation of (0.78). This result reflects patient satisfaction with nursing services, measured through temperature, blood pressure, respiration, pulse, weight checks at every visit, documentation of all required information in the health file at every visit, and ensuring the nursing staff follows the doctor's directions before starting therapeutic steps. The nursing staff's manner was described as gentle.
4. The third rank in satisfaction was for the dimension (level of patient satisfaction with the services provided by the doctor in primary healthcare centers) with an average of (3.64) out of (5), and a standard deviation of (0.74). This result reflects the doctor's attentive listening to the patients' health complaints, providing adequate time with the doctor in the clinic, recording all required information in the health file at every visit, and clearly answering the patients' inquiries.

Second: Recommendations

The current study recommends the following:

1. The necessity of implementing instructions to increase the responsiveness of workers in primary healthcare centers to the requirements of the patients.
2. Training workers in primary healthcare centers to meet the desires and requirements of the patients to achieve their satisfaction.
3. Implementing a flexible and easy system for receiving complaints and suggestions from patients visiting primary healthcare centers, and ensuring a quick response to these complaints and resolving them.
4. Working on linking all primary healthcare centers with their pharmacies to ensure the quality and speed of service provided to patients and achieve their satisfaction.
5. Implementing a system to expedite the work of reception staff and increasing the number of

reception staff in primary healthcare centers to better and quicker meet the needs of the patients and ensure their satisfaction.

6. Establishing a mechanism for selecting human resources, including doctors, nurses, reception staff, and pharmacists for primary healthcare centers, with the necessary experience and skills that contribute to achieving patient satisfaction.
7. Continuing to provide these services and following quality methods in providing healthcare to maintain this level and progress to better levels.
8. Disseminating the results of the current study to all primary healthcare centers in the Ministry of Health for their benefit.

Third: Suggested Research

- Conducting more studies on patient satisfaction with healthcare services in the Kingdom.
- Conducting research that links patient satisfaction with the psychological aspect of healthcare providers and beneficiaries of healthcare services.

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