慢性病患者的醫病關係與待診時間對醫療滿意度的影響

The Impact of Patient-physician Relationship and Waiting Time on Medical Satisfaction for Patients with Chronic Illness

中文摘要

本研究的目的是以門診慢性病患者為例來探討醫病關係和待診時間對慢性病(高血壓、糖尿病、高血脂症)患者醫療滿意度的相關性。

本研究使用之資料為行政院衛生署八十八年下半年及八十九年度「影響慢性病患醫療服務滿意度之因素探討」科技研究發展計劃的調查資料。此計劃是在2000年六月到八月間分兩部分實施,第一部分是從台北市的醫學中心和區域醫院中各選取一所,第二部分從台北縣的各鄉鎮中選取兩所社區衛生所,分別與其內科和家庭醫學科合作所完成之「影響慢性病患醫療服務滿意度之因素探討」資料。

利用多變項分析中之變異數分析(ANOVA)及Scheffe test來比較醫學中心、區域醫院及社區衛生所的平均待診時間的平均值,標準差,F值,以及兩兩比較平均待診時間有否呈統計上顯著的差異。利用t-test比較家庭醫學科和內科平均待診時間的平均值,標準差和t值,看有否呈統計上顯著的差異。利用簡單及複迴歸來分析獨立變項(實際待診時間及醫病關係)對於依變項(待診滿意度及整體滿意度),在沒有加入醫病關係和加入醫病關係這個獨立變項之後,對於慢性病患者各種滿意度之影響。

研究結果顯示,待診時間越長,慢性病患者的整體滿意度越低。在各種類別的醫療滿意度之中,不管在哪個層級的醫療機構就診,都是對待診時間的滿意度最低;不論有否加入醫病關係這個自變項,在醫學中心、區域醫院變化不明顯,但在社區衛生所呈統計上顯著的差異。無論在何種層級的醫療機構,醫病關係影響慢性病患者的各種類別的醫療滿意度都很大,尤以醫學中心最甚,但是在社區衛生所,醫病關係對於待診時間的滿意度卻看不出有任何的影響。慢性病患者無論在何種層級的醫療機構就診,待診時間的影響以社區衛生所最大, 除了待診時間的滿意度受到影響,同時也影響到對相關醫療人員的滿意度,當然也就影響到整體滿意度。同科不同層級的醫療機構,待診時間和醫病關係影響不同,是因到不同層級的醫療機構就診時慢性病患者對於不同層級的醫療機構有不一樣的期待。

在比較醫學中心,區域醫院和社區衛生所的平均待診時間,發現醫學中心、社區衛生所之間呈統計上顯著的差異。區域醫院與社區衛生所呈統計上顯著的差異,但醫學中心與區域醫院沒有呈統計上顯著的差異。社區衛生所比醫學中心及區域醫院的待診時間都短。但是特別要一提的是區域醫院的內科,其平均的待診時間竟然操超過一個小時(69.18分鐘),那是因為預約的病人大約只佔百分之五十,另一個原因是沒有限號,因此病人數通常都超過一百。醫學中心的內科預約的病

人大約佔百分之八十到九十，而且限號到約六十五號。
如果我們將醫學中心或區域醫院合稱非衛生所；將醫療過程、相關醫療人員的服務、醫療機構設備的滿意度合稱非醫師醫療滿意度；將醫療層級 (非衛生所、衛生所)、待診時間、醫病關係作爲自變項；對醫師滿意度、待診滿意度、非醫師醫療滿意度做複迴歸分析。在非衛生所就診的慢性病患者對醫師滿意度高於衛生所，在對待診滿意度、非醫師醫療滿意度方面，衛生所高於非衛生所，達統計上顯著的差異。待診時間越長，待診時間滿意度越低。醫病關係中，對醫師、待診及非醫師醫療滿意度都有統計上顯著的差異，醫病關係越好，上述的滿意度越高。

英文摘要
This study is intended to explore how the patient-physician relationship and the clinic visit waiting time influences medical satisfaction for patients with chronic illness (hypertension, diabetes mellitus and hyperlipidemia .
The data used in this study are based on the project, ”The Exploration of Factors which Affect the Satisfaction of The Chronic Ill Patient,”funded by Ministry of Health 1999-2000. There were two major sources of study information in this project. First part included one medical center and one regional hospital. Second part included two communities clinic, all recruited randomly from those in Taipei County. A total of 469 patients included 216 patients of internal medicine and 253 patients of family medicine were recruited in this project. Each study subject accepted personal interview based on questionnaire to collect study information during their clinic visit. We re-analyzed the original data. The means of continuous variables are compared with t-tests. Scheffe tests are also used to compare the differences between groups. Linear regression is also used to compute the relationship of three variables.
The major finding of this study showed that patients’ satisfaction decreased if the chronically ill had to wait for a longer time in clinic visit as compared with those who for shorter time. The differences are statistically significant among the patients at the medical center, and the regional hospital, but not the community clinic whether the factor of the patient-physician relationship is considered.
We also found that if the chronically ill had longer clinic waiting time at community clinic were more likely to have significantly worse satisfaction score as compared with those at the medical center and the regional hospital.
Furthermore, we also found the patient’s satisfaction was positively correlated with patient-physician relationship among the patients at the medical center and regional hospital but not at the community clinic. The chronically ill go to the same clinic at the different level of the medical facilities. But clinic visit waiting time and patient-physician relationship had the different influential power due to different expectation from the patients.

We redefine medical level as community clinic and non-community clinic. If we put medical center and regional hospital together as non-community. If we put the medical satisfaction of medical process, medical related stuff services, and medical facility together as non-physician medical satisfaction.
We use medical level, waiting time, and physician-patient relationship as independent variables. The satisfaction to the physician, to the waiting time, to the non-physician medical services as dependent variables. We found medical level as independent variable, the satisfaction to the physician as dependent variable. The non-community clinic is higher than the community clinic, but lower in the other events. The differences are statistically significant.
Patients’ satisfaction decreases if the chronic patients had to wait for a longer time. Patient-physician relationship influences the satisfaction to the physician, to the waiting time, to the non-physician medical service.
The finding of this study suggests that good patient-physician relationship is the most important factor to improve chronic patients’ satisfaction of the chronically care.
Key words: patient-physician relationship, the chronically ill, clinic visit waiting time, the chronically ill patient’s medical satisfaction.