SERVICOM Index Report

The People’s Right To Be Served Right

Evaluation of Federal Medical Centre, Gombe

General Out Patient Department

Federal Ministry of Health

26th October, 2007

SERVICOM
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1.0 Introduction

This is a report on the findings of a SERVICOM Compliance Evaluation of Federal Medical Centre (FMC), Gombe, General Out Patients Department (GOPD) conducted on Friday 26th October, 2007. Compliance has been measured against the SERVICOM Index, a yardstick for measuring the quality of service as delivered by Government through its various Ministries, Departments, Parastatals and Agencies.

The SERVICOM Index is predicated on the facts that:

- The ultimate purpose of governance is to serve citizens;
- Citizens have the right to be served right;
- Service is well delivered only when citizens are satisfied; and
- The Federal Government is committed to the provisions of SERVICOM (Service Compact with All Nigerians) as a programme to improve service delivery throughout the country.

Customer satisfaction is the overriding consideration of service delivery. Extensive research, consultations and surveys have shown that customer satisfaction is broadly driven by several drivers, listed further below. A selection of service window of the FMC (GOPD), Gombe has been evaluated for each of these drivers through customer interviews, discussions with staff, discussions with partners, review of key documents and observations made at the service window. The overall Index score for FMC (GOPD) has been calculated as a weighted average of the scores evaluated for each driver. The weight of importance attached to each driver is as follows:

<table>
<thead>
<tr>
<th>Service Delivery</th>
<th>Timeliness</th>
<th>Information</th>
<th>Professionalism</th>
<th>Staff Attitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>30%</td>
<td>24%</td>
<td>18%</td>
<td>16%</td>
<td>12%</td>
</tr>
</tbody>
</table>
A more detailed methodology is provided in the Terms of Reference.

2.0 Acknowledgements

We acknowledge the co-operation of the following for their contributions in the course of the evaluation exercise.

<table>
<thead>
<tr>
<th>S/N</th>
<th>Name</th>
<th>Designation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Dr. Aliyu Usman</td>
<td>Medical Director, FMC, Gombe</td>
</tr>
<tr>
<td>2.</td>
<td>Dr. Massa Alfred</td>
<td>Nodal Officer, FMC, Gombe</td>
</tr>
<tr>
<td>3.</td>
<td>Dr. Tijjani M. Hina</td>
<td>Dept. Head, Clinical Services, FMC Gombe</td>
</tr>
<tr>
<td>4.</td>
<td>Dr. Suleman T. Sa’ad</td>
<td>HOD, Radiology, FMC, Gombe</td>
</tr>
<tr>
<td>5.</td>
<td>Alh. Aliyu Zakari</td>
<td>Complaints Desk Officer</td>
</tr>
<tr>
<td>6.</td>
<td>Mal. Haruna Abdulrashid</td>
<td>Charter Desk Officer</td>
</tr>
<tr>
<td>7.</td>
<td>Dr.</td>
<td>Head, GOPD, FMC, Gombe</td>
</tr>
</tbody>
</table>

3.0 Terms of Reference

The FMC (GOPD), Gombe was selected for SERVICOM compliance evaluation following a presidential directive that all government departments and agencies be evaluated for SERVICOM Index Compliance.

The mandate of the SERVICOM Compliance Evaluation team is to identify those areas or actions that can bring immediate or urgent improvement in services to citizens.

4.0 Methodology

Services are provided to citizens by the Federal Medical Centre (FMC), Gombe through various key Service Windows, some of which are:

- Anaesthesiology
The service windows of the FMC Gombe vary significantly. To get a good representation, we considered that we should inspect service window that:

- Has high volume of activities
- Is the first point of call for all patients

Therefore, the General Out Patient Department (GOPD) service window of
FMC, Gombe was selected for evaluation:

Evidence was gathered at the service window through customer interviews, discussions with staff, discussions with partners, review of key documents and general observations.

4.1 Other customers, staff or documents consulted
Given the particular nature of the services provided by FMC, Gombe (GOPD), we felt it is also important to evaluate further evidence by reviews of annual report, minutes of management meeting which includes Service Improvement Plans (SIPs), SCRAR, Customer Care Policy, Staff Hand Book, Partners, strategic plan of activities for the Centre, a service charter and observation

5.0 Findings

The findings presented in this section comprise both an Index score and observations on the Service Charter and on the quality of service delivery found at the service window. The table summarises the results of the evaluation of the service window. Based on these, we have calculated a composite score for FMC (GOPD), Gombe.

5.1 Charter Evaluation

5.1.1 Findings:

- The Charters (Integrated and GOPD) of FMC, Gombe do not conform with the SERVICOM checklist on Charter formulation and review
- The Charter of the FMC,(GOPD) Gombe does not contain introduction of the Department
- The Charter of the GOPD does not contain mission and vision statements of the GOPD
- The coordinates of the Nodal Officer/Complaints Desk Officer (office room number, telephone nos. are not reflected in the GOPD charter
• There is no indication of stakeholders’ participation in the Charters
• The time limits for response to and resolution of all complaints are not stated in the grievance redress mechanism section in both Integrated and the GOPD Charters
• There are no clear description of standards and performance monitoring of service provision and delivery in the Charters

5.1.2 Recommendations for improving Service Charter

• The Charters (Integrated and the GOPD) of FMC, Gombe should conform to the SERVICOM guidelines on Charter formulation to enable customers know their entitlements and obligations.
• The Charter of the FMC,(GOPD) Gombe should have an introduction of the Department
• The Charter of the GOPD should contain mission and vision statements with timeframe indicated
• The office room number of the Nodal Officer/Complaints Desk Officer should reflect in the GOPD charter for the information of the customer
• The indication stakeholders participation should be clearly stated in the Integrated Charter for them to understand their roles
• The time limits for response to and resolution of all complaints should be stated in the grievance redress mechanism section in both Integrated and the GOPD Charters for customer information and usage
• There should be clear description of standards and performance monitoring of service provision and delivery in the Charters in order to benchmark their services

5.2 Index score

The overall Index score for the FMC (GOPD) is: 1.9 out of 4 (47.5%)
### Overall Index score

<table>
<thead>
<tr>
<th>Category</th>
<th>Score for FMC (GOPD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Index score</td>
<td>1.9</td>
</tr>
<tr>
<td>Service Delivery</td>
<td>2.2</td>
</tr>
<tr>
<td>1 – Standards &amp; practices / performance</td>
<td>2.3</td>
</tr>
<tr>
<td>2 – Reception experience</td>
<td>3.0</td>
</tr>
<tr>
<td>3 – Complaints &amp; grievance redress</td>
<td>1.2</td>
</tr>
<tr>
<td>Timeliness</td>
<td>2.0</td>
</tr>
<tr>
<td>1 – Standards &amp; practice/performance</td>
<td>1.3</td>
</tr>
<tr>
<td>2 – Customer friendliness</td>
<td>2.7</td>
</tr>
<tr>
<td>Information</td>
<td>1.6</td>
</tr>
<tr>
<td>1 – Information</td>
<td>1.3</td>
</tr>
<tr>
<td>2 – Customer feedback</td>
<td>1.8</td>
</tr>
<tr>
<td>Professionalism</td>
<td>1.7</td>
</tr>
<tr>
<td>1 – Transparency</td>
<td>0.9</td>
</tr>
<tr>
<td>2 – Efficiency</td>
<td>2.6</td>
</tr>
<tr>
<td>Staff Attitude</td>
<td>2.0</td>
</tr>
</tbody>
</table>

### 6.0 Key findings

The following observations have been made on the quality of service delivery provided by FMC, Gombe which we feel need to be addressed as a matter of urgency:

**Driver 1 – Service Delivery**
Standards are not set for all main services provided by the hospital
Complaints procedure has no time limit for response and resolution
Complaint procedure does not include the names, office numbers and telephone numbers of Complaint Desk Officer and that of the Nodal Officer.

**Driver 2 – Timeliness**
- Standards set for initial waiting time to take services is too long (2 – 3 hours as stated in the GOPD Charter)
- Most staff do not explain delays beyond standard waiting times

**Driver 3 - Information**
- Information on standards are not widely available to customers and potential customers by a variety of means
- Costs and payment procedures are not displayed at all service windows for customer information

**Driver 4 - Professionalism**
- Appointment procedures are not clearly detailed at all service windows
- The organisation does not explain reasons for failures and delays
- Details of actions taken as a result of poor performance are not published
- All frontline staff do not wear name or appointment badges
- Not all offices and desks clearly indicate function and names of officer.

**Driver 5 – Staff Attitude**
- Not all staff received training on customer care and complaints handling
- The organization does not produce, publish and display customer care policy
6.1 Additional findings

The following additional observations were also made on the quality of services delivered, which may also need attention:

**Driver 2 – Timeliness**
- There is no system in place to monitor waiting times
- Standards for waiting times for any subsequent visits have not been set

**Driver 4 - Professionalism**
- An organisational chart is not displayed at all service outlets

**Driver 5 – Staff Attitude**
- There is no written guidance for staff on aspect of customer care

7.0 Recommendations

The following recommendations are provided in order to suggest actions that can be taken which could **directly** lead to improvements in service delivery. In this report, we are unable to comment on general constraints relating to physical or human resources, or structural and systemic issues, which may or may not lead to improvements in services.

The mandate of the SERVICOM Compliance Evaluation team is to identify those areas or actions that can bring immediate or urgent improvement in services to citizens. The question of how those actions might be best implemented is a management issue for the FMC, Gombe that should be addressed with the guidance of the Ministerial SERVICOM Unit by developing Service Improvement Plans.

7.1 Key recommendations
Driver 1 – Service Delivery

- Standards should be set for all main services provided by the hospital so that customers and potential customers alike would be in a position to know the quality of service the hospital offers/provides.
- Complaints procedure should have time limit for response and resolution so that customers do not wait for too long waiting for their complaints to be attended to.
- Complaint procedure should include the names, office numbers and telephone numbers of Complaint Desk Officer and the Nodal Officer so that customers would be able to know who, where and how to lodge their complaints when the need arises.

Driver 2 – Timeliness

- Standards set for initial waiting time to take services should not be too long for the convenience of customers.
- Staff should explain delays beyond standard waiting times for the dignity of the customers and to keep them informed of the causes for the delays.

Driver 3 - Information

- Information on standards should be widely available to customers and potential customers by a variety of means for the benefit of those who could not speak and understand English Language.
- Costs and payment procedures should be displayed at all service windows as this would prevent any hidden costs and ensures transparency.

Driver 4 - Professionalism

- Appointment procedures should be clearly detailed at all as this will ensure orderliness and de-congestion of customers while waiting to take services service windows.
The organisation should explain reasons for failures and delays in order to gain the confidence of the customers.

Details of actions taken as a result of poor performance should be published so that customers would know what action is taken about their complaints as well as to encourage them to lodge complaints when necessary.

All frontline staff should wear name/appointment badges for easy identification by customers and potential customers.

All offices and desks should clearly indicate function and names of officers in order to ensure easy access and identification of personnel.

**Driver 5 – Staff Attitude**

- Staff should be trained on customer care and complaints handling to promote customer sensitivity needs and to handle complaints at points of taking service.
- The organization should produce, publish and display customer care policy so that customers and staff alike are aware of how to treat customers.

**7.2 Additional Recommendations**

The following additional observations were also made on the quality of services delivered, which may also need attention:

**Driver 2 – Timeliness**

- There should be system in place to monitor waiting times so that customers are not delayed beyond set standards while waiting to see Doctors.
- Standards for waiting times for any subsequent visits should be set so that customers do not have to wait for too long.

**Driver 4 - Professionalism**
An organisational chart should be displayed at all service outlets so that customers could know the hierarchy of the hospital at a glance

**Driver 5 – Staff Attitude**

- There should be written guidance for staff on aspects of customer care in order to handle customers with sensitivity.