



An Assessment of Patients' and Companions' Expectations of Prehospital Emergency Care.

1badi Mahdi Alaklabi, 2atif Fahad Alqahtani, 3mohammed Hamad Aldosari, 4naif Mabkhoot Aldosari, 5dhafer Mohammed Alshehri, 6yasir Marzouq Almutairi

1,2,4,5,6health Assistant.

3psychologist.

Abstract:

As the initial point of contact for patients, prehospital emergency care is an essential component of the healthcare system. It is crucial to giving emergency patients prompt attention. Patients' and their companions' expectations of these treatments, particularly in emergency situations, have the potential to significantly impact both the quality of services and their experience. Finding out what patients and their companions need and anticipate from prehospital emergency care is the goal of this study. Methods: A total of 1100 patients and their companions were chosen for this descriptive-cross-sectional investigation. After validity and reliability were established, telephone interviews were used to deliver a questionnaire on expectations of pre-hospital emergency services to facilitate data collecting. Descriptive and inferential statistics were used to understand the findings of the statistical analysis of the gathered data using SPSS21. The study's conclusion shows that patients and their companions especially female members have high expectations for pre-hospital emergency treatment. According to the study's findings, patients and their companions particularly women have high standards for pre-hospital emergency treatment. These expectations include having a medical practitioner in the ambulance, having qualified personnel, treating people with respect, and providing services quickly. These expectations and socioeconomic factors were found to be significantly correlated. These findings highlight how crucial it is to attend to patients' needs and expectations to improve the standard of emergency care. Increasing service delivery procedures and personnel competencies may boost patient and companion satisfaction.

Keywords: Emergency Care, Expectations, Prehospital emergency, Patients, Companions, An Assessment.

Introduction:

The significance of health and medical services for community health is generally recognized in today's culture. Pre-hospital emergency medical services (EMS) are essential to preserving public health since they are patients' initial point of contact with the healthcare system. Depending on the patient's health, the surroundings, and the local culture, patients and their



families have different expectations in emergency situations. In these situations, the public expects prehospital emergency services to do two things: first, react to occurrences as soon as feasible; and second, identify and handle unexpected issues. Prioritizing the needs and expectations of emergency patients and their families is critical since fulfilling these expectations is a key measure of the health system's efficacy (Huang et al., 2020).

Expectations of healthcare systems have increased because of knowledge growth and increased public awareness, especially in relation to the delivery of emergency medical services (EMS). To maximize the quality of emergency services and guarantee patient-centered treatment, it is critical to acknowledge the significance of patient expectations. In emergency situations, where prompt reactions are critical, this is especially important (Chapman, 2024).

It has been shown that patient experiences and treatment outcomes are significantly impacted by the evaluation of patient and companion expectations. Essentially, the public expects a quick response to emergency situations, and high wait times for emergency medical services are a major source of discontent (Ablard et al., 2023; Strandås , 2024).

Numerous factors, such as the type of illness, prior experience, and the patient's culture, affect the expectations of health systems. EMS workers' capacity to meet these demands may be hampered by a heavy workload or long mission durations. Nonetheless, community residents continually anticipate courteous and professional interactions from EMS staff. For people in need of emergency treatment, compassion for patients and their families is a fundamental goal in addition to quick medical interventions. Patients who have unrealistic or unfulfilled expectations may get frustrated and angry, which may lead to violence toward emergency staff (Ocak , 2019).

It has been shown that evaluating patients' needs and expectations improves staff-patient relationships, lessens stress for patients' families, and speeds up patient recovery. Patients' expectations of quality EMS must be identified and understood to offer patient-centered care that is customized to their needs and desires. A deeper understanding of patient expectations does not mean that patients make decisions about their own care on their own; rather, when healthcare providers come across unrealistic or conflicting expectations, they understand the patient's expectations, are better prepared to communicate with empathy, and work with patients to moderate and justify these expectations. Studies have shown that when medical issues develop, particularly in life-threatening circumstances, patients and their families want prompt, high-quality care as well as courteous and compassionate service (Smith , 2019; Ferreira, 2023).

Only a small number of research have addressed this topic globally, and a thorough assessment



of the literature found no studies that looked at patients' and their companions' expectations for EMS in Iran. The current study was motivated by the following research question considering this gap: "What are the expectations of patients and their companions from pre-hospital emergency services in Iran?" Thus, this study's goal is to determine and investigate patients' and their companions' requirements and expectations in pre-hospital emergency care.

Methods:

To Ensure transparent and comprehensive reporting, this study adhered to the STROBE statement. The study population consisted of patients and their companions who had used prehospital emergency services.

Data collecting tool: Based on a review of the literature, the Expectations Questionnaire was created to gauge patients' and their companions' expectations about prehospital emergency services.

Content and face validity were used to evaluate the instrument's validity. There were two sections to the questionnaire. Participants' sociodemographic data and past phone conversations with emergency personnel were gathered in the first section of the questionnaire. The frequency of these exchanges, the fundamental reason for each call, the services obtained from the communication center, and the operational advice given by the ambulance staff were all questioned in this section. **Twenty questions** made up the second segment, which was split into two categories: people's expectations of emergency workers and expectations of organizational facilities and reaction times. A 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree), was used to rate each item.

Analysis of statistics: SPSS version 21 was used to analyze the data. The characteristics and expectation scores of the participants were summarized using descriptive statistics (frequencies, percentages, mean, and standard deviation).

Challenges in emergency care:

Stakeholders may become dissatisfied and disappointed because of this circumstance. According to a review of the literature, the unexpected and dangerous nature of emergencies, rising public awareness, the variety of medical illnesses, and cultural influences are the causes of society's high expectations for prehospital emergency care. To lower, rationalize, or balance expectations by education and the presentation of facts to society and stakeholders, the idea of patient and caregiver expectations must be central to the prehospital health and emergency care system (Aung, 2018; Lakin, 2022).



One of the few studies on patients' and their companions' expectations of prehospital emergency services in the nation is this one. The findings demonstrated that women had considerably higher expectations than men. These results are in line with reports that women had higher expectations. In this sense, it demonstrated how society's high expectations of women have developed because of women's increased independence and education, as well as the effect of certain societal standards (Barrientos , 2018).

Expectations of patients and companions:

The average level of expectations varied significantly among age groups, marital status, income, and educational attainment in this study. In this sense, research has demonstrated that patients' expectations are impacted by family and community circumstances in addition to health system-related factors, and that people's expectations of interacting with the health system are shaped by their social standing and prior experiences. According to a study, when socioeconomic situations improve, more people demand the use of emergency services and want prompt diagnosis and treatment. Therefore, it is essential to try to create appropriate rules that balance the developing tendency with the demands and expectations of the public, particularly those of women, by considering the pertinent elements (Knor et al., 2020).

Patients and caregivers have high expectations about the safe transfer of patients to medical facilities. In this situation, it was deemed crucial to provide urgent care and safe treatment until patients reached medical facilities. According to Anu Venesoja's research, patients' perceptions of safety are greatly influenced by their technical, medical, and driving abilities. These results highlight the necessity for health officials to take societal requirements and expectations into account when training, hiring, and empowering prehospital emergency care staff since they indicate that patient expectations are in line with the nature and goals of emergency treatment (El-Haddad, 2020).

Respecting patients' values, acknowledged needs, beliefs, and dignity is crucial. High staff knowledge, confidentiality, and concise justifications of activities were among the other requirements in the current study. The elements of staff competence skills, knowledge, behavior, and attitude were highlighted in this context. The findings of this study are consistent with earlier studies that indicated patient expectations of preserving human dignity, delivering accurate care and necessary skills in a short amount of time, and providing explanations of actions made. To train moral and competent people in the system, it is imperative that this crucial issue be taken into consideration while hiring and training emergency professionals (García et al., 2018).



That reaction speed and organizational amenities:

The study's findings demonstrated that reaction speed and organizational amenities were associated with the greatest expectations of patients and caregivers. According to reports, time is a crucial component in providing EMS, which is in line with the current study's findings. Time-related indicators can be improved by expanding the number of emergency bases and ambulances as well as by offering staff ongoing training. As a result, it is crucial that health authorities work to meet community expectations and attain standard response times (Khani et al., 2024).

Patients and caregivers also had high expectations regarding the presence of a doctor nearby and sufficient ambulance equipment. Pre-hospital emergency services are provided by doctors at the patient's bedside in certain nations. Pre-hospital providers in Iran, however, consult the emergency physician virtually for direction or medical advice when making decisions. Physician participation in prehospital emergency care seems to be in line with patient requirements and expectations and could be advantageous in some circumstances (Najafi et al., 2024; Shakeri, 2019).

Prehospital emergency care:

One of the biggest issues in prehospital emergency care is the lack of facilities and equipment, which is in line with the results of this investigation. Although some prehospital emergency care systems use cutting-edge medical equipment for diagnosis and treatment, Iran's pre-hospital emergency system has evolved significantly since its founding, including changes to its ambulances and equipment. Nonetheless, given the nature of prehospital emergency care services, stakeholders have high expectations for the availability of adequate medical equipment, and the construction of the facilities and resources required for prehospital emergency ambulances appears to be crucial (Mobaraki , 2024; Sadeghi et al., 2016).

Recommendations:

Since this study was carried out in Tabriz, it cannot be applied to other areas. Due to the COVID-19 pandemic, which made it difficult to establish trust and reduced the likelihood of gathering information through in-person interactions, data were gathered through telephone interviews. Furthermore, the pandemic made it impossible to carry out a qualitative or mixed-methods study. The study did not include some subgroups, such as those who had not previously contacted the EMD and those who were unreachable at the time of the interview. Future studies should be conducted in both rural and urban locations. It should employ qualitative research techniques and in-person interviews. Different age groups and people who have never needed emergency services should also be included. The data will be more representative and richer because of these modifications.



Future Studies: Future research should aim to expand the scope of this study beyond Tabriz to include other regions, both urban and rural, to enhance generalizability. Qualitative or mixed-methods approaches should be employed, incorporating in-person interviews to foster trust and gather richer, more detailed data. It is also recommended to include diverse subgroups, such as individuals who have never contacted Emergency Medical Dispatch (EMD) services and those from different age groups, to obtain a more representative understanding of patients' and companions' expectations. These modifications will improve the comprehensiveness and applicability of the findings.

Conclusion:

Patients and their companions have high expectations for precise and prompt prehospital emergency care, according to this study. Participants recognized clear communication, ethical behavior, and staff competency as critical components of care. Additionally, they emphasized the significance of utilizing the proper medical equipment and, in certain situations, having a doctor in the ambulance. To better match emergency services with community requirements, our findings highlight the significance of putting patient expectations at the heart of EMS planning and bolstering facilities, human resources, and service delivery strategies. These findings highlight how crucial it is to attend to patients' needs and expectations to improve the standard of emergency care. Increasing service delivery procedures and personnel competencies may boost patient and companion satisfaction. Moreover, this study underscores the importance of continuous training for prehospital emergency staff to enhance their technical skills, communication abilities, and ethical practices. Incorporating patient and companion feedback into the planning and evaluation of emergency services can lead to more patient-centered care and better outcomes. Future improvements in prehospital emergency care should focus on optimizing response times, ensuring the availability of appropriate equipment, and strengthening coordination between emergency medical teams and healthcare facilities. By prioritizing the expectations and experiences of patients and their companions, EMS systems can not only improve satisfaction but also enhance trust, safety, and overall quality of care in emergency situations.

References:

1. Huang W, Wang T-B, He Y-D, Zhang H, Zhou X-H, Liu H, et al. Trends and characteristics in pre-hospital emergency care in Beijing from 2008 to 2017. *Chin Med J*. 2020;133(11):1268–75.



2. Ablard S, Miller E, Poulton S, Cantrell A, Booth A, Lee A, et al. Delivery of public health interventions by the ambulance sector: a scoping review. BMC Public Health. 2023;23(1):2082. 10.1186/s12889-023-16473-2.
3. Strandås M, Vizcaya-Moreno MF, Ingstad K, Sepp J, Linnik L, Vaismoradi M. An integrative systematic review of promoting patient safety within prehospital emergency medical services by paramedics: a role theory perspective. J Multidisciplinary Healthc. 2024;1385–400.
4. Ocak U, Avsarogullari L. Expectations and needs of relatives of critically ill patients in the emergency department. Hong Kong J Emerg Med. 2019;26(6):328–35.
5. Chapman J, Wakely M, Leonard K, Piwowarski E, Wegman MP. Great expectations: A multisite, randomized controlled open-label trial of a novel patient expectations communication tool. JACEP Open. 2024;5(4):e13229.
6. Smith E, Burkle F Jr, Gebbie K, Ford D, Bensimon C. A qualitative study of paramedic duty to treat during disaster response. Disaster Med Pub Health Prep. 2019;13(2):191–6.
7. Ferreira DC, Vieira I, Pedro MI, Caldas P, Varela M, editors. Patient satisfaction with healthcare services and the techniques used for its assessment: a systematic literature review and a bibliometric analysis. Healthcare; 2023: Mdpi. 10.3390/healthcare11050639
8. Aung KT. Experiences of the public on the services in emergency department: a qualitative study. Int J Care Scholars. 2018;1(2):1–4.
9. Lakin K, Kane S. Peoples' expectations of healthcare: a conceptual review and proposed analytical framework. Soc Sci Med. 2022;292:114636.
10. Barrientos C, Holmberg M. The care of patients assessed as not in need of emergency ambulance care—registered nurses' lived experiences. Int Emerg Nurs. 2018;38:10–4.
11. Knor J, Pekara J, Šeblová J, Peřan D, Cmorej P, Němcová J. Qualitative research of violent incidents toward young paramedics in the Czech Republic. Western J Emerg Med. 2020;21(2):463.
12. El-Haddad C, Hegazi I, Hu W. Understanding patient expectations of health care: a qualitative study. J Patient Experience. 2020;7(6):1724–31.
13. García-Alfranca F, Puig A, Galup C, Aguado H, Cerdá I, Guilabert M, et al. Patient satisfaction with pre-hospital emergency services. A qualitative study comparing professionals' and patients' views. Int J Environ Res Public Health. 2018;15(2):233.
14. Khani J, Gilani N, Dadashzadeh A, Rahmani A, Jabbarzadeh Tabrizi F, Gharajeh-Alamdari N. Relationship between public awareness and expectations of pre-hospital emergency medical services in Tabriz, Iran, in 2020. Archives Trauma Res. 2024;13(3):176–84.



15. Najafi J, Gilani N, Hassankhani H, Ghafourifard M, Dadashzadeh A, Zali M. The relationship between self-confidence and attitude of emergency medical technicians towards family presence during resuscitation. *Int J Emerg Med.* 2024;17(1):184.
16. Mobaraki O, Sami E. An analysis of the Spatial distribution of urban public services in the districts of Tabriz metropolis, Iran. *Sustainable Earth Rev.* 2024;4(1). 10.
17. Sadeghi-Hokmabadi E, Taheraghdam A, Hashemilar M, Rikhtegar R, Mehrvar K, Mehrara M, et al. Simple In-Hospital interventions to reduce Door-to-CT time in acute stroke. *Int J Vascular Med.* 2016;2016(1):1656212. 10.1155/2016/1656212
18. Shakeri K, Jafari M, Khankeh H, Seyedin H. History and structure of the fourth leading emergency medical service in the world; a review Article. *Archives Acad Emerg Med.* 2019;7(1):e17.