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Strategic Thinking And Patient Waiting Time In Teaching Hospitals In Ogun State, Nigeria

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Abstract: ***The study investigates strategic thinking and patient waiting time in teaching hospitals in Ogun state, Nigeria. A survey research design was adopted. The population was 339 medical doctors of the two teaching hospitals in Ogun State, Nigeria, that is, Babcock University Teaching Hospital Ilishan-Remo and Olabisi Onabanjo University Teaching Hospital. Total enumeration method was adopted and a multiple regression analysis was used to test the hypothesis. The result showed that only intent focus had positive and significant effect(β = 0.205, t = 2.231, p< 0.05) on patient waiting time in the teaching hospitals in Ogun State; while systems perspective had negative but significant effect (β = -0.400, t = -3.401, p< 0.05), intelligent opportunism (β = 0.139, t = 0.933, p> 0.05) and thinking in time (β = 0.058, t = 0.374, p> 0.05) had positive and insignificant effect on patient waiting time in teaching hospitals in Ogun State, Nigeria. The study concluded that strategic thinking has effect on patient waiting time. Therefore, hospital management should improve on their systems perspective and their intent focus to reduce long patient waiting time in the teaching hospitals in Ogun State, Nigeria.***

Keywords: Dynamic capability theory, Patient waiting time, Strategic thinking, Teaching hospital performance

I. INTRODUCTION

Patient waiting time which is the amount of time patients seeking care at healthcare units spend before being attended for consultation and treatment is known as one of the key measures of a responsive health system (Ogadi & Mezie-Okoye, 2017). According to Sun et al (2017), a health care system should be planned in such a way that waiting time for patients should be short either for appointment or consultation. According to Nguyen, Tran, Vo, Anh, Doan and Nguyen (2020), the waiting time of out-patients differs from country to country. While the waiting time ranged from 41 minutes in Malaysia to 60 minutes in America, the waiting time in Nigeria is between 90 – 180 minutes (Ahmad, Khairatul & Farnaze, 2017; Oche & Adamu, 2013). Patients are always wary of spending long hours in health facilities (Sun et al., 2017) and as such they are discouraged from visiting hospitals when the need arises which leads to health challenges for the nation (Oche & Adamu, 2013).

Strategic thinking is very important in any hospital setting whether at the primary, secondary or tertiary level (Hamdam, 2017). However, despite the belief that strategic thinking should be imbibed by organizations to enhance the ability to harness efforts and improve performance, managers still shy from adopting the use (Goldman, Scott & Follman, 2015). This is no less the case even in the healthcare sector as Dionisio (2017) buttressed that the importance of the role of strategic thinking cannot be overemphasized due to organizations' need to find and adopt the right strategy.

Various scholars have focused on the relationship between strategic thinking and innovative behavior, strategic thinking and transformational leadership, strategic thinking styles and enhancement of competitive capabilities, strategic thinking and entrepreneurial cognition, strategic thinking and accounting (Aaltola, 2019; Al-Hawary & Hadad, 2016; Dutta, 2015; Gross, 2017; Kazmi, Naaranoja & Kytölä, 2016). However, less attention in the literature reviewed has been given to strategic thinking and patient waiting time in hospital

settings. Strategic thinking has also been described as a process through which a manager learns how to apply teamwork, critical thinking and continuous improvement in running an organization but it has not been implemented in relation to reducing patient waiting time in the health care sector which is one of the most crucial sector in a country (Kiaei, Hatam, Moraveji, Moradi, Ahmadzadeh & Ghanavati, 2016). Obulor and Eke (2016) explained the use of queuing theory in modelling patients' consultation with the doctor, the waiting time, pharmacy attendance, emergency room attention, operation room, registration and filing of patients' information but the queuing model seems difficult to implement due to the large population of patients attending hospitals in Nigeria. Also, the scholars stated that despite the appointment method which is designed to reduce patient waiting time, improve work efficiency and other hospital management services so as to implement an efficient queuing system for work efficiency and patients' satisfaction, there is still long queues in most of the health facilities. The objective of this study therefore, is to evaluate the effect of strategic thinking on patient waiting time in the teaching hospitals in Ogun State, Nigeria.

II. LITERATURE REVIEW AND HYPOTHESIS DEVELOPMENT

STRATEGIC THINKING

Strategic thinking is a systematic perspective which analyzes and synthesizes knowledge, assessing competitive landscape, and generating most suitable option to achieve future goals (Dhir & Dhir, 2020). In a simple way, Bryson (2018) stated that strategic thinking is all about strategic planning and management of knowledge, which managers can use to build up business strategies with a higher probability for success and to achieve a better competitive advantage for their organization hence, strategic thinking requires diverse knowledge sharing and integration, insight and organizational awareness (Dhir & Dhir, 2020). Also, Olaniyi and Lucas (2016) improved on the definition by adding a newer dimension to it by stating that strategic thinking is seen as the "generation and application of distinctive business ideas and opportunities intended to create competitive advantage for a firm or business".

Strategic thinking is also a combination involving creativity, strategic planning, as well as operational planning (Salamzadeh, Nejati & Heidaripourafshar, 2015). Alatailat, Elrehail and Emeagwali (2018) affirmed that to improve organizational performance, an important element of strategic thinking such as organizational culture must be considered, while Goldman (2015) stated that strategic thinking requires development of thinking concepts, thinking styles, thinking techniques and thinking skills.

Carey, Malbon, Carey, Joyce, Crammond and Carey (2015) stated that "systems science is a broad class of analytical approaches that uncover the behavior of complex systems" with methodologies which are thought to enable researchers and decision makers to examine system components, the dynamic relationships between them at multiple levels and from cell to society. According to Alomaria (2020), strategic thinking is based on the establishment of a systems perspective and strategic thinkers have a mental model of the complete end-to-end arrangement of quality creation.

Intent focus is about an organization defeating competition and winning the market and for an organization to win, it should possess certain capability that others do not have or cannot easily and promptly imitate and to realize such strategic intent focus, some level of activities (strategic action) and behavior is required (Odita & Bello, 2015). Intent expresses future-oriented behavior; consequently it is reflected in the mission, vision and objective of the organization since the mission and vision statement are the important explanations of an organization strategic view (Candemir & Zalluhoglu, 2013). According to Jyothimon (2014), intent focus should lead to an end and that end is the mission of the organization which shows what the organization would ultimately like to become. According to Odita and Bello (2015), intent focus consists of organizational mission, organization and organizational objectives as its dimensions.

According to Haycock (2012), intelligent opportunism is about adopting a flexible approach to strategy in order to take advantage of emerging strategies and new opportunities and by being intelligently opportunistic, entrepreneurial leaders can influence strategic decision making. Intelligent opportunism is about the adoption of a flexible method to making decision so as to take advantage of new opportunities as they emerge (Pattinson, 2016).

Thinking in time forms the expected opportunities and threats facing the organization and offers measures to promote optimal outputs (Maroofi & Karami 2015). Strategic thinking has to be able to connect the past, present and future hence, thinking in time is about being able to constantly see the connectedness of the past, present and future as this understanding enables the strategists to be mindful of what needs to be done and what can be done (Norzailan, Md-Yusof & Othman, 2016). The futurist seek to challenge assumptions and create transformative spaces that can support new types of thinking which can lead to more effective policies and actions (Haghdoost, Pourhosseini, Emami, Dehnavieh, Barfeh & Mehrolhassani, 2017). The concept of thinking in time deals with the ability of a strategist to identify a superior course of action, especially one that is markedly different from the status quo, and foresees its consequences (Gavetti & Menon, 2016).

PATIENT WAITING TIME

Oche and Adamu (2013) stated that long waiting time is common in both developed and developing countries. The scholars attested to the fact that the amount of time a patient waits to be seen is one factor which affects utilization of healthcare services. Hospitals everywhere have been looking for ways to overcome the challenge of long waiting times (Almomani & AlSarheed, 2016). Patient waiting time is considered as a crucial parameter in the assessment of healthcare quality and patients' satisfaction towards healthcare services (Tran, Nguyen, Nong & Tran, 2017). Oche and Adamu (2013) stated that the three most common factors

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leading to long waiting time are high patient load, few doctors, and record clerks. Queuing theory has been explored as a model for work environment, productivity, and patients waiting time (Obulor & Eke, 2016). The scholars asserted that appointment system is used to reduce patient waiting time, improve work efficiency and other hospital management tool thereby implementing an efficient queuing system for work efficiency and patients' satisfaction. More so, the application of lean principles, tools and techniques provides hospital managers with an evidence-based management approach to resolving problems and improving quality indicators in key focus areas, such as patient waiting times (Naidoo & Mahomed, 2016). Oche and Adamu (2013) affirmed that failure to incorporate consumer driven features into the design of wait experience could lead to patient and provider dissatisfaction as extended waiting time negatively affects patients perception and also has a negative impact on a patient's perception of health services and sometimes increases the feeling of ill-health in patients (Lot, Sarantopoulos, Min, Perales, Boin, & Ataide, 2018). Waiting time also relates to the stress on the part of the workers because of work overload and decreased quality of work. (Naidoo & Mahomed, 2016).

According to Osundina and Opeke (2017), there will always be long queues before seeing a health worker because of the high doctor-patient ratio which is common in many health care centres across Nigeria due to the shortage of medical officers and other health care providers. Consequently, with the rapid growth in population and corresponding increase in health and medical needs, demand for health facilities has far outstripped the rate of expansion of health facilities (Owoseni, Gbadamosi, Ijabadeniyi, & Adekunle, 2016). Therefore, the amount of time a patient waits to be seen is one factor which affects utilization of healthcare services (Oche & Adamu, 2013).

STRATEGIC THINKING AND PATIENT WAITING TIME

Carey et al. (2015) revealed that systems perspective in health services depicts a great deal of approaches that can aid health service delivery for which curbing of long waiting time in hospitals is paramount. The study also revealed that the full range of systems methodologies is yet to be explored by the health sector practitioners and researchers alike to lead to a desired change in the running and management of hospitals despite the complexities of the sector. This is in line with the study by Hall et al. (2015) who asserted that systems perspective literatures are particularly useful because it summarizes the methods used to study the relationships between health care professionals and health care outcomes, for instance, patient waiting time, patient-provider interactions and patient satisfaction with care in general. The study of Owolabi, Adenekan, Nssein and Durojaiye (2018) revealed that performance expectancy is one of the factors that influence the intent of medical doctors to use the health information technologies that aid in facilitating health services delivery by cutting down on patient long waiting time in the hospitals which strengthened the findings of Carey et al. (2015) and Hall et al. (2015). Buttressing on efficiency in order to boost performance, Osundina and Opeke (2017) affirmed that since waiting time which is considered a measurable parameter for checking the efficiency of the hospitals and its professionals for improved service delivery, there is the need for hospital management to act on the challenges of human resources, logistics and other internal processes that can reduce waiting times and ensure an effective health care management system. More so, Xie and Or (2017) asserted that the result of their study showed that actual waiting time was negatively associated with patient satisfaction. Contrarily, Elkomy and Cookson (2020) argues that waiting time is not a good measure of performance in the health sector as the reduction in waiting time can affect the quality of health adversely.

In view of the findings of previous studies, the following hypothesis is hereby formulated:

H01: Strategic thinking has no significant effect on patient waiting time in teaching hospitals in Ogun State, Nigeria.

THEORETICAL FRAMEWORK

The dynamic capability theory which emerged from the RBV is nonetheless a response to the static nature of RBV in a dynamic environment. Hence, the theory focuses on the need for firms to possess knowledge, skill, and abilities (KSA) to survive and thrive in a changing environment (Galvin, Rice& Liao, 2014). According to Teece (2014), dynamic capability represents a firm's ability to integrate, build, and reconfigure internal and external competencies to address the fast-changing or dynamic environment. Nair, Rustambekov, McShane and Fainshmidt (2014) asserted that the theory framework's emergence as the new standard in the field of strategic management is due to its rising significance in the explanation of competitive advantage better when compared with the RBV (Cordes-Berszinn, 2013). Hence, its capabilities are those that enable organizations to instinctively respond to changing business environment either within its industry or macro-environment (Karimi & Walter, 2015). In addition, Agbim, Zever and Oriarewo (2014) stated that there is the need for organizations to augment their ability to exploit new resources and at the same time their ability to renew existing capabilities and resources. This will make the organizations always ready to react to changing market conditions, hence promoting a competitive advantage in the market (Ogunkoya, Hassan & Shobayo, 2014).

Within the context of this study, the DCT accentuated its relevance to this study as it revealed its strength to explain how a firm can cope within a dynamic environment such as in a hospital setting and sustain superior performance.

III. METHODOLOGY

The study adopted the survey research design. This design is consistent with the design of other authors such as Asikhia, Makinde, Akinlabi and Omagu (2021); Arokodare, Asikhia and Makinde (2020). The study population included the 339 Registrars, Senior Registrars and Consultants of Babcock University Teaching Hospital and Olabisi Onabanjo University Teaching Hospital in Ogun State. These categories

of workers were considered because they are considered knowledgeable and involved in making strategic decisions. Total enumeration method was adopted for the study because the population was not too large. Primary source of data was used through the use of adapted questionnaire. Multiple regression analysis was used to test the hypothesis.

The questionnaire was validated and the reliability was established. The Cronbach's alpha ranged from 0.877 to 0.915 which is more than the 0.7 recommended. The questionnaire was divided into three sections which captured the demographic, the independent and the dependent variables. A modified Likert-type scale was used to gather responses from the respondents.

The dependent variable is patient waiting time (PWT) while the independent variable is strategic thinking which is being measured using systems perspective (SP), intent focus (IF), intelligent opportunism (IO) and thinking in time (TIT). The model for the study is denoted thus:

$Y = f(x1, x2, x3, x4)$

$Y = \alpha 0 + \beta 1x1 + \beta 2x2 + \beta 3x3 + \beta 4x4 + \mu i$

$PWT = \alpha 0 + \beta 1SP + \beta 2IF + \beta 3IO + \beta 4TIT + \mu i$ --------(1)

IV. RESULT AND DISCUSSION

The hypothesis was tested using a multiple regression analysis.

Variables	*B*	*T*	*Sig*	R^2	*Adj.* R^2	Anova Sig (*P*)	*F(df)*	Std. Error of the Estimate
(Constant)	28.584	14.660	.000	0.050	0.038	0.003	4.123 (4, 313)	5.261
Intent Focus	.205	2.231	.026					
Intelligent Opportunism	.139	.933	.351					
Thinking Intime	.058	.374	.709					
System Perspective	-.400	-3.401	.001					

a. Dependent Variable: Patient Waiting Time.
b. Predictors: (Constant), Intent Focus, Intelligent Opportunism, Thinking In time, System Perspective

Source: Researcher's Field Results (2021)

Table 1: Summary of Multiple Regression Results of the Effect of Strategic Thinking on Patient Waiting Time in the Teaching Hospitals in Ogun State, Nigeria

The analysis in Table 1 presents the results of multiple regression analysis on the effect of Strategic thinking dimensions (systems perspective, intent focus, intelligent opportunism and thinking in time) on patient waiting time in teaching hospitals in Ogun State, Nigeria. The coefficient of multiple determination adjusted R2 is 0.038 ($F(4, 313) = 4.123$, $p < 0.05$) indicates that Strategic thinking dimensions explained 3.8% of the changes in patient waiting time in teaching hospitals in Ogun State, Nigeria while the remaining 96.2% could be attributed to other factors not included in this model. Also, the F-statistics (df = 4, 313) indicates that the overall model is significant in predicting the effect of Strategic thinking dimensions (systems perspective, intent focus, intelligent opportunism and thinking in time) on patient waiting time.

This implies that strategic thinking dimensions have a significant effect on patient waiting time in teaching hospitals in Ogun State, Nigeria.

Table 1 also presents the results of individual variable in multiple regression analysis. Based on the results of the analysis, Intent Focus ($\beta = 0.205$, $t = 2.231$, $p < 0.05$) had a positive and significant effect on patient waiting time in teaching hospitals in Ogun State, Nigeria. The result further shows that System Perspective ($\beta = -0.400$, $t = -3.401$, $p < 0.05$) has a negative and significant effect on patient waiting time in teaching hospitals in Ogun State, Nigeria. Furthermore, the result shows that intelligent opportunism ($\beta = 0.139$, $t = 0.933$, $p > 0.05$), and thinking in time ($\beta = 0.058$, $t = 0.374$, $p > 0.05$) had positive and insignificant effect on patient waiting time in teaching hospitals in Ogun State, Nigeria. The result inferred that out of all the dimensions of Strategic thinking, both intent focus and system perspective have significant effect on patient waiting time in teaching hospitals in Ogun State, Nigeria.

The multiple regression model is expressed thus:

$PWT = 28.584 + 0.205IF - 0.400SP$ …….. Eq. (1)

Where: PWT = Patient waiting time

IN = Intent focus

SP = System Perspective

The regression model above showed that holding intent focus and system perspective to a constant zero, patient waiting time would be 28.584. This means that without intent focus and system perspective, patient waiting time would be positive at 28.584. The model also showed that when intent focus is improved by one unit, patient waiting time would increase by 0.205. This indicates that an increase in intent focus would lead to subsequent increase in patient waiting time in teaching hospitals in Ogun State, Nigeria. However, a unit change in system perspective would reduce patient waiting time by 0.400. The results of the analysis indicate that to reduce patient waiting time, teaching hospitals in Ogun State, Nigeria should improve their system perspective, and improve on their intent focus. Therefore, due to the fact that the model is significant in predicting effect of strategic thinking dimensions on patient waiting time in teaching hospitals in Ogun State, Nigeria (Adj. $R2 = 0.038$, $F(4, 313) = 4.123$, $p < 0.05$), the null hypothesis (H01) which states that strategic thinking dimensions (systems perspective, intent focus, intelligent opportunism and thinking in time) do not significantly affect patient waiting time in the teaching hospitals in Ogun State, Nigeria was rejected.

The findings indicated that Strategic thinking dimensions (systems perspective, intent focus, intelligent opportunism and thinking in time) have significant effect on patient waiting time in the teaching hospitals in Ogun State, Nigeria. The result supports the study of Uko and Ayatse (2014); Hutzschenreuter, Kleindienst, Grone and Verbeke, (2014) that adoption of systems perspective improves patient waiting time. It also aligns with the study of Slater and Narver (2000); Wanjiru and George (2015) that systems perspective has significant effect on the patient waiting time with results pointing to positive relationship. The findings further assert that certain systems perspective enhances firm performance thus improving patient waiting time. The study also aligns with the findings of Hall et al. (2015); Owolabi, et al. (2018), Osundina and Opeke (2017) that found that strategic thinking can be used to cut down on waiting time.

The study also supports the Dynamic Capability Theory since the theory posits that sustaining performance rests on the ability of the organization to leverage and reconfigure its existing competencies and assets in ways that are valuable to the customer. It also helps to identity factors that impact performance (Teece, 2014).

V. CONCLUSION AND MANAGERIAL IMPLICATIONS

The study concluded that strategic thinking affects patient waiting time in the hospitals. If the management can adopt and implement strategic thinking, the waiting time would be reduced. In line with the finding of the study, it is recommended that the use of strategic thinking should be encouraged at the hospitals. This would help the management to plan and schedule operations, identify areas of challenges that needs adjustment and organize the scheduling of appointments and the actions to be taken by different units of the hospital so that patients can also be sure of adequate and timely attention when hospitals are visited.

It is also seen that the use of strategic thinking is relatively new in the hospital settings, other studies can consider other variables of hospital performance to expand the knowledge of the topic especially in Nigeria. The selection of the hospitals can be expanded and other workers in the hospitals can also be sampled.

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