SATISFACTION LEVEL OF PATIENTS IN OUT-PATIENT DEPARTMENT AT A GENERAL HOSPITAL, HARYANA

Dr. Satpal Singh¹ Dr. Vikas Kumar²

¹Assistant Professor, Department of Management Studies, D.C.R.U.S.T. Murthal, Sonepat
²Masters of Hospital Administration, D.C.R.U.S.T. Murthal, Sonepat

ABSTRACT

Various dimensions of patient satisfaction have been identified, from medical care to interpersonal communication. Well-recognized criteria include responsiveness, communication, attitude, clinical skill, comforting skill, amenities, food services, etc. It has also been reported that the interpersonal and technical skills of health care provider are two unique dimensions involved in patient assessment of hospital care. Patient satisfaction with the healthcare services largely determines their compliance with the treatment and thus contributes to the positive influence on health. This study was therefore undertaken with the aim to find out the level of patient satisfaction related to different parameters.

METHODS

Factors influencing patients level of satisfaction in Out Patient Department were identified using questionnaire survey in Maharaja Aggarsain General Hospital, Hisar.

CONCLUSION

Mean response of male were 2.73±0.53, female were 2.73±0.55 and overall mean response was 2.73±0.57 regarding hospital structure which shows that there is good level of patient satisfaction while Mean response of male were 2.029±0.86, female mean response 2.312±0.95 and overall mean response was 2.176±0.93. This shows that there is fair level of satisfaction according to hospital process.

Mean response on hospital performance of male were 2.46±0.77, mean response of female were 2.607±0.73 and total mean response was 2.537±0.76. This shows that there is good level of patient satisfaction according to hospital performance.
INTRODUCTION

Patient satisfaction is multifaceted and a very challenging outcome to define. Patient expectations of care and attitudes greatly contribute to satisfaction; other psychosocial factors, including pain and depression, are also known to contribute to patient satisfaction scores. Historically, physicians, especially surgeons, have focused on surgical technique and objective outcomes as measures of “patient satisfaction,” while patients place great value on the surgeon-patient interaction.

Patient satisfaction has been an important issue for health care managers. Many previous studies have developed and applied patient satisfaction as a quality improvement tool for health care providers. Following increased levels of competition and the emphasis on consumerism, patient satisfaction has become an important measurement for monitoring health care performance of health plans. This measurement has developed along with a new feature: the patient's perspective of quality of care.

NEED OF STUDY

Satisfaction is achieved when the patient/client’s perception of the quality of care and services that they receive in healthcare setting has been positive, satisfying, and meets their expectations. For the purpose of this project it is important to recognize that patient/clients range from people who are in receipt of ongoing care, personal assistance services and other community delivered supports to people admitted to hospital on a once off or episodic basis. The opinions of the family, and advocates should also be considered. It also has been described as a particularly passive form of establishing consumer’s views (McIvor, 1992). Some literature however suggests that a link between satisfaction and fulfillment of patient/client expectations is not necessarily the case, since it is possible that the patient/client’s evaluation of a service may be largely independent of actual care received (Williams, 1994).

Satisfaction, like many other psychological concepts, is easy to understand but hard to define. The concept of satisfaction overlaps with similar themes such as happiness, contentment, and quality of life. Satisfaction is not some pre-existing phenomenon waiting to be measured, but a judgment people form over time as they reflect on their experience. Meredith and Wood (1995) have described patient satisfaction as ‘emergent and fluid’.

The meetings of patient/client expectations are assumed to play a role in the process by which an outcome can be said to be satisfactory or unsatisfactory. Expectations are an important influence on the patient/client’s overall measurement of satisfaction with a health care experience. Patient/client satisfaction is influenced by the degree to which care fulfils expectation (Mahon, 1996).

A simple and practical definition of satisfaction would be the degree to which desired goals have been achieved. Patient /Client satisfaction is an attitude – a person’s general orientation towards a total experience of health care. Satisfaction comprises both cognitive and emotional facets and relates to previous experiences, expectations and social networks (Keegan et al, 2002).

REVIEW OF LITERATURE

Draper and Hill (1995) Surveys typically report high levels of overall satisfaction (rates that are similar across a broad range of industries), but often there is some disparity between the overall satisfaction ratings, and the same patients’ opinions of specific aspects of their care process.
As techniques to measure the quality of healthcare proliferate and improve, health professionals are beginning to accept that patient/clients and their families hold unique vantage points as expert witnesses of care.

Prior to conducting a patient satisfaction survey, it is vital that an organization be prepared and that they embrace a quality improvement culture. It has been shown that patient satisfaction is a measure of the quality of services being provided.

In a patient satisfaction survey can help to show patients that a healthcare organization is interested in quality and in making improvements. It demonstrates an organization’s commitment to its patients.

this patient satisfaction survey is the first of its kind for public hospitals in India. While the survey revealed depressing feedback, the motivation of APVVP top management to identify areas of concern and measure patient satisfaction is a step in the right direction. There would not be any scope to improve the services; unless such bold steps at measuring client satisfaction is pursued. We feel, repeating such studies at regular interval of say six months will be useful guide for managerial intervention.

In a study of PGIMER (2011), It was found that average time spent by respondents for registration was 33.20 minutes. The overall satisfaction regarding the doctor-patient professional and behavioral communication was more than 80 per cent at almost all the levels of health care facilities. In total, 55 per cent of respondents opined that doctors have shown little interest to listen to their problem while 2/3 opined that doctors used medical and technical terms to explain their illness and its consequences

The results reveal that patient satisfaction is a multidimensional construct comprised of four dimensions, namely: physical maintenance, physician care, nursing care and internal facilities. Among the four hypothesized models, only model 2 depicting the impact of dimensions on satisfaction showed a good fit while the other three models showed either average (model 4) or poor (models 1 and 3) fit. The analysis of the models indicates that all patient satisfaction dimensions positively and significantly contributes to patient satisfaction and which also act as an important mediating factor between the satisfaction dimensions and patient loyalty.

Patient satisfaction is deemed to be one of the important factors which determine the success of health care facility. The real challenge is not getting ready with mere requirements, but also delivers services ensuring good quality. Thus, there is a need to assess the health care systems regarding patient satisfaction as often as possible.

RESEARCH METHODOLOGY

AIMS AND OBJECTIVES

Aims

To assess the satisfaction of the patients who have utilized the OPD services provided by general hospital, Hisar and to identify factors related to patients satisfaction.

Objectives of Patient Satisfaction Survey

1. To study the level of patient satisfaction on hospital structure, at Maharaja Aggarsain General Hospital,Hisar.
2. To study the level of patient satisfaction on hospital process at Maharaja Aggarsain General Hospital,Hisar.
3. To measurement the level of patient satisfaction according to service provided by Maharaja Aggarsain General Hospital Hisar.
Researches Design of the Present Study

The present study is Descriptive study as it involves findings about “Patient satisfaction level at Maharaja Agrasen Government hospital, Hisar. The purpose of this study is to assess the satisfaction level of the patients coming at outpatient department and analyze the service gap of patient satisfaction.

Sample Design

The researcher has undertaken 100 samples of respondents which include patients coming at outpatient department irrespective of their age, gender, qualification and income and selected randomly from different departments of Government hospital, Hisar.

Inclusion Criteria

- The OPD patients of the Maharaja Aggarsain General hospital, hisar.
- Willing to provide answers to study interviewers.
- Patients who made at least 1 visit( including present visit)

Exclusion Criteria

- Patient cannot speak or listen.
- Patients were in severe pain.
- Patients have a mental problem.

Study Area

Maharaja Aggarsain General Hospital, Hisar was selected as the study site. It was the main hospital in hisar. The study was based on the patients who utilizing the general services at OPD.

Sampling Tools

Structured questionnaire will be used to gather information on socio-demographic characteristics, respondent’s satisfaction level about hospital services and service gap of patient’s suggestions.

Data Collection Method

After choosing the sample the next step in research program, is Data collection. The present study is based on two types of data:

- Primary data
- Secondary data
  - Primary data are collected by personal interview and 4 parts of questionnaire, which is to be filled by the patients coming at outpatient department of Government hospital, Hisar. Most of the questions are of multiple choices and close ended type based on four or five point scale and filled by using survey method.
  - Secondary data is collected from internet, journals and books.

Area of the Study

The present research study is carried out in OPD’s, reception area, pharmacy, and different areas of the outpatient department.

Tools of the Study

The data from present study is analyzed by different statistical methods like mean, standard deviation and standard error and t test. For this analysis SPSS and MS EXSCEL is used.
Study Period
This study is undertaken during the 6th semester of M.H.A.

Unit under Study
The present study is based on the patients response regarding services provided by the Maharaja Aggarsain General Hospital, Hisar.

Study Type
Descriptive study

DATA ANALYSIS AND INTERPRETATION

This study was conducted to determine the patient satisfaction with health care services at outpatient department (OPD) of Maharaja Aggarsain General Hospital, Hisar. 100 patients were interviewed at the outpatient department. Structured questionnaire were facilitated for data collection. The result was presented in tables as well as descriptive form.

**TABLE 1:** Shows the Level of Patient Satisfaction On The Basis of Hospital Structure According To Gender

<table>
<thead>
<tr>
<th>S.No</th>
<th>Statement</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Statement</td>
<td>Mean</td>
<td>S.D</td>
<td>S.E</td>
</tr>
<tr>
<td>1</td>
<td>HOSPITAL BUILDING</td>
<td>3.104</td>
<td>0.371</td>
<td>0.054</td>
</tr>
<tr>
<td>2</td>
<td>WAITING AREA</td>
<td>2.271</td>
<td>0.736</td>
<td>0.106</td>
</tr>
<tr>
<td>3</td>
<td>DRINKING WATER FACILITY</td>
<td>2.604</td>
<td>0.610</td>
<td>0.088</td>
</tr>
<tr>
<td>4</td>
<td>SIGNBOARD FACILITY</td>
<td>3.000</td>
<td>0.461</td>
<td>0.067</td>
</tr>
<tr>
<td>5</td>
<td>CLEANLINESS IN HOSPITAL</td>
<td>2.396</td>
<td>0.736</td>
<td>0.106</td>
</tr>
<tr>
<td>6</td>
<td>LIGHTENING AND VENTILATION</td>
<td>3.083</td>
<td>0.454</td>
<td>0.065</td>
</tr>
<tr>
<td>7</td>
<td>WASHROOMS FACILITY</td>
<td>2.457</td>
<td>0.690</td>
<td>0.102</td>
</tr>
<tr>
<td>8</td>
<td>CANTEEN FACILITY</td>
<td>2.842</td>
<td>0.495</td>
<td>0.080</td>
</tr>
<tr>
<td>9</td>
<td>LAB FACILITY</td>
<td>2.588</td>
<td>0.743</td>
<td>0.127</td>
</tr>
<tr>
<td>10</td>
<td>BLOOD BANK FACILITY</td>
<td>3.000</td>
<td>0.000</td>
<td>0.000</td>
</tr>
<tr>
<td></td>
<td><strong>OVERALL TOTAL</strong></td>
<td><strong>2.73</strong></td>
<td><strong>0.53</strong></td>
<td><strong>0.08</strong></td>
</tr>
</tbody>
</table>
The mean responses of samples by each question were shown in table 2.3. It includes questions about physical environment. It included clean and tidy, enough sitting chairs available in waiting area, availability of drinking water and clean toilet, clear signs and directions, and ventilation. Highest percentages of the patients were not satisfied with the cleanliness of the hospital. More than half patients had a fair attitude towards the washroom facility and waiting area. Mean response of male were 2.73±0.53, female were 2.73±0.55 and overall mean response was 2.73±0.57. This shows that there is a good level of patient satisfaction according to hospital structure.

**DATA – ANALYSIS OF QUESTIONNAIRE FOR HOSPITAL PROCESS**

**Table 2:** Shows the Level of Patients Satisfaction on The Basis of Hospital Process According To Gender

<table>
<thead>
<tr>
<th>S.No</th>
<th>Statement</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>QUEUE SYSTEM AT RECEPTION</td>
<td>1.92 ± .964</td>
<td>1.917</td>
<td>2.210 ± .964</td>
</tr>
<tr>
<td>2</td>
<td>WAITING PERIOD BEFORE BEING ATTENDED</td>
<td>1.73 ± .818</td>
<td>1.729</td>
<td>1.940 ± .818</td>
</tr>
<tr>
<td>3</td>
<td>TIME TAKEN FOR REPORTING</td>
<td>2.26 ± .795</td>
<td>2.263</td>
<td>2.224 ± .795</td>
</tr>
<tr>
<td>4</td>
<td>AVAILABILITY OF MEDICINES</td>
<td>2.21 ± .874</td>
<td>2.208</td>
<td>2.330 ± .874</td>
</tr>
<tr>
<td></td>
<td>Overall Total</td>
<td>2.029 ± .863</td>
<td>2.031</td>
<td>2.176 ± .863</td>
</tr>
</tbody>
</table>

The mean response of patient’s attitude towards hospital process by each question was shown in table. It includes questions on queue system for registration, waiting period, time taken for reporting and availability of prescribed medicine.

Mean response of male were 2.029±0.86, female mean response 2.312±0.95 and overall mean response was 2.176±0.93. This shows that there is a fair level of satisfaction according to hospital process.
TABLE 3: Shows the Level of Patients Satisfaction on The Basis of Hospital Performance According To Gender

<table>
<thead>
<tr>
<th>S.No</th>
<th>Statement</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean</td>
<td>S.D</td>
<td>S.E</td>
</tr>
<tr>
<td>1</td>
<td>COURTESY AND RESPECT GIVEN BY DOCTOR</td>
<td>2.92</td>
<td>.539</td>
<td>.078</td>
</tr>
<tr>
<td>2</td>
<td>WAY OF EXPLAINING TREATMENT BY DOCTORS</td>
<td>2.52</td>
<td>.875</td>
<td>.126</td>
</tr>
<tr>
<td>3</td>
<td>EXPLANATION OF PURPOSE AND SIDE-EFFECT OF MEDICINES</td>
<td>1.96</td>
<td>.967</td>
<td>.140</td>
</tr>
<tr>
<td>4</td>
<td>INTERPERSONAL SKILLS OF THE DOCTOR</td>
<td>2.77</td>
<td>.592</td>
<td>.085</td>
</tr>
<tr>
<td>5</td>
<td>COURTESY AND CONCERN BY NURSES</td>
<td>2.83</td>
<td>.737</td>
<td>.123</td>
</tr>
<tr>
<td>6</td>
<td>RESPONSIVENESS OF NURSES</td>
<td>2.58</td>
<td>.841</td>
<td>.140</td>
</tr>
<tr>
<td>7</td>
<td>COURTESY BY LAB PERSONAL</td>
<td>2.21</td>
<td>.927</td>
<td>.161</td>
</tr>
<tr>
<td>8</td>
<td>WAY HOSPITAL STAFF HELDED YOU</td>
<td>2.61</td>
<td>.745</td>
<td>.110</td>
</tr>
<tr>
<td>9</td>
<td>PRE INFORMATION ABOUT DIAGNOSTIC TESTS</td>
<td>1.91</td>
<td>.843</td>
<td>.147</td>
</tr>
<tr>
<td>10</td>
<td>RECOMMENDED TREATMENT AND FOLLOW-UP</td>
<td>2.10</td>
<td>.905</td>
<td>.131</td>
</tr>
<tr>
<td>11</td>
<td>WILLINGNESS TO LISTEN YOUR PROBLEMS</td>
<td>2.44</td>
<td>.769</td>
<td>.111</td>
</tr>
<tr>
<td>12</td>
<td>OVERALL EFFECTIVENESS OF THE TREATMENT</td>
<td>2.65</td>
<td>.601</td>
<td>.087</td>
</tr>
<tr>
<td></td>
<td>OVERALL TOTAL</td>
<td>2.46</td>
<td>.778</td>
<td>.120</td>
</tr>
</tbody>
</table>

In the description of table most of the patients had given good response to the hospital process which includes courtesy and respect by doctors, responsiveness of the nurses and laboratory staff and required explanation about diagnostic tests and treatment plan and at the last overall effectiveness of the treatment.

Mean response on hospital performance of male were 2.46±0.77, mean response of female were 2.607±0.73 and total mean response was 2.537±0.76. This shows that there is good level of patient satisfaction according to hospital performance.
TABLE 4: Shows overall Value of Level of Patients Satisfaction on The Basis of Hospital Structure, Hospital Process and Hospital Performance according to Gender

<table>
<thead>
<tr>
<th>STATEMENTS</th>
<th>MALE</th>
<th>FEMALE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>S.D</td>
<td>S.E</td>
</tr>
<tr>
<td>HOSPITAL STRUCTURE</td>
<td>2.73</td>
<td>0.53</td>
<td>0.08</td>
</tr>
<tr>
<td>HOSPITAL PROCESS</td>
<td>2.03</td>
<td>0.86</td>
<td>0.13</td>
</tr>
<tr>
<td>HOSPITAL PERFORMANCE</td>
<td>2.46</td>
<td>0.78</td>
<td>0.12</td>
</tr>
<tr>
<td>OVER ALL VALUES</td>
<td>2.41</td>
<td>0.72</td>
<td>0.11</td>
</tr>
</tbody>
</table>

In the description of table 4, the researcher included three aspects i.e. hospital structure, hospital process and hospital performance. During calculating the mean response the result of overall values of level of patient satisfaction according to gender category was males mean response was 2.41±0.72, females mean response was 2.55±0.75 and the total mean response was 2.48±0.75. This shows that overall there is fair level of patient satisfaction according to hospital structure, hospital process and hospital performance.

According to this table most of the patient had good response towards hospital building and female patients was more satisfied with hospital structure, process and performance than male patients.

CONCLUSION

- Most of the patients were revisits to the hospital for their treatment.
- Out of 100 sample size frequency of number of first hospital visit is 24%, 45% samples are for 1-2 visit, 29% are 3-5 visit and only 2% are for 10 or more visits.
- On the basis of gender there were 48% males and 52% females.
- Patients visiting hospital up to 16yrs age were 7%, patients of age group of 17 to 32 yrs was 38%, patients of age group of 33 to 50 yrs visiting hospital 34%, patients of age group of 51 and above was 21%.
- According to marital status of patients, single 11%, married 73%, divorced 3%, and widowed 13%.
- According the occupation of patients, 1% patient’s visiting hospital were government employees, 12% were working in private sector, 35% were self-employed, 21% were unemployed, 7% were students and 24% were employed in other professions.
- Patients up to Rs.50,000 annual income were 70%, Rs 50,000 to 1 lakhs were 22%, Rs 1 lakhs to 1.5 lakhs were 6%, Rs 1.5 lakhs to 2 lakhs were 1% and more than Rs 2 lakhs were 1%.
- 29% were illiterate, 57% were qualified up to 10th, 6% were qualified up to senior secondary, 4% were graduate and 4% comes under other categories.
- Mean response of male were 2.73±0.53, female were 2.73±0.55 and overall mean response was 2.73±0.57. This shows that there is good level of patient satisfaction according to hospital structure.
• Mean response of male were 2.029±0.86, female mean response 2.312±0.95 and overall mean response was 2.176±0.93. This shows that there is fair level of satisfaction according to hospital process.
• Mean response on hospital performance of male were 2.46±0.77, mean response of female were 2.607±0.73 and total mean response was 2.537± 0.76. This shows that there is good level of patient satisfaction according to hospital performance
• According to gender category was males mean response was 2.41±0.72, females mean response was 2.55±0.75 and the total mean response was 2.48±0.75.

RECOMMENDATIONS

• Improve the interpersonal manner, the way in which providers interact personally with patients.
• Technical quality of care by improving competence of providers and adherence to high standards of diagnosis and treatment.
• The government should consider proper health care financing scheme to provide equity with all patients.
• Physical environment should be improved.
• Accessibility /convenience should be arranged to receive proper medical care to minimize waiting time and ease of reaching providers.

BIBLIOGRAPHY