



## Study to Assess Outpatient Satisfaction Index in a Private Health Care Organization

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### ABSTRACT

**Background:** Patient's expression is an important source of information in screening for problems and developing an effective plan of action for quality improvement in health care organization. The aim of the study was to assess the level of patient satisfaction among patients, attending outpatient department of M.B Multi Speciality Hospitals, Visakhapatnam.

**Methodology:** Cross-sectional observational study was done among patients attending Outpatient Department of M.B Multi Speciality Hospitals during 1-4-22 to 30-6-22 using a Bilingual structured questionnaire. Data was collected and analysis was done.

**Results:** Sample size - 419 outpatients were evaluated. Overall patient satisfaction towards Outpatient services was above 90%. 410 patients opined that Physician care, careful listening and easy access of care were the major satisfaction indices contributing to 98%. Major dissatisfaction mentioned by outpatients was the waiting time at registration counter, waiting time for the consultant's appointment, delay in availability of laboratory reports.

**Conclusion:** The present study was an attempt to assess the level of satisfaction of Out Patient towards OPD services, Appropriate and ongoing data collection and analysis could help in optimizing utilization of outpatient services to achieve better outcomes

**Keywords:** Health care, Satisfaction, Outpatient Department and Questionnaire.

**Key Words:** Outpatient satisfaction index, healthcare, quality improvement project, MB Hospital



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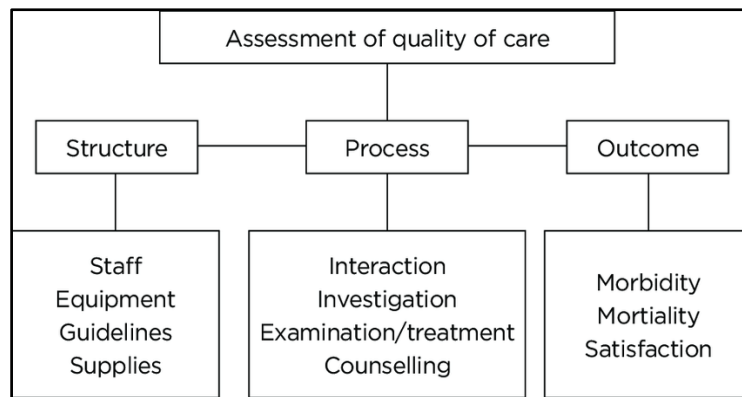
### INTRODUCTION

Quality of care is a dominant concept in quality assurance and quality improvement programs in the healthcare sector. The importance of quality in the healthcare sector has been recognized, but has been accelerated over the last 10 years through the development of quality insurance, quality improvement programs and patients' agendas [1, 4].

Health Care industries have seen recent movements towards continuous Quality improvement and this has gained momentum since 1990 and according to Donabedian's declaration for incorporating patient perception into quality assessment, health care organizations, thus incorporate patient centered care as a major constituent in the health care mission [2].

The assessment of quality should rely on a conceptual and operationalized definition of what the "quality of medical care" means. Most of the problems are present at fundamental level, for the quality of care is a remarkably difficult notion to define. Perhaps the best-known definition is that offered by Lee and Jones in the form of eight "articles of faith," some stated as attributes or properties of the process of care and others as goals or objectives of that process [3].

The Donabedian model for assessment of quality of care (Donabedian 1988)



Patient satisfaction is an important tool to measure health care quality as it offers information on the provider's success at meeting the expectations of most relevance to the client. Thus feedback from the patients is crucial, if deficiencies are to be identified, and improvements to be achieved for a timely, efficient and patient centered delivery of quality health care.

Over the past 20 years, patient satisfaction surveys have gained enormous attention as meaningful and essential sources of information for identifying deficiencies and developing an effective action plan for quality improvement in healthcare organizations [5].

Quality of health care is becoming a global issue which mandated a rapid transformation to meet the ever increasing needs and demands of population.

Recent practices in health system showed that health authorities are considering the patient as best judge who can accurately assess and provide valuable inputs to help in overall improvement of quality health care provision through rectification of system weaknesses and strengthening further.

Certain significant developments were undertaken:

- The establishment of corporate hospitals equipped with latest facilities.
- Advent of 3<sup>rd</sup> party payers increasing awareness among patients.
- Availability of information through internet and higher experience of patient care.
- Litigation for unsatisfying results.

With this background, this study was conducted to find out the level of patient satisfaction about Out Patient Department services in M.B Multi Speciality Hospitals, Visakhapatnam.

#### **AIM OF THE STUDY:**

To analyze the level of patient satisfaction among patients attending outpatient department of M.B Multi Speciality Hospitals, Visakhapatnam, a private Health Care organization in Andhra Pradesh State.

To assess level of satisfaction in relation to sociodemographic and healthcare characteristics.

#### **STUDY DESIGN:**

Cross-Sectional observational study conducted at M.B Multi Speciality Hospitals, Visakhapatnam, for a period of three months from 1-4-22 to 30-6-22.

Number of subjects sampled: 419

#### **MATERIALS & METHODS:**

All patients attending outpatient Department of M.B Multi Speciality Hospitals, Visakhapatnam from 1-4-22 to 30-6-22 were evaluated by a structured questionnaire, designed for the purpose, printed in English and Telugu.

The questionnaire is based on several parameters grouped in subgroups namely Front office, Housekeeping, Doctors, Nurses, Pharmacy etc. Quality Improvement tool is used PDCA (Plan Do Check Act).

The performance is graded on a three-grade scale for each parameter as very good – 3 points, good – 2 points and average – 1 point. The questionnaire was collected by the OPD executives and data was analyzed.

## RESULTS:

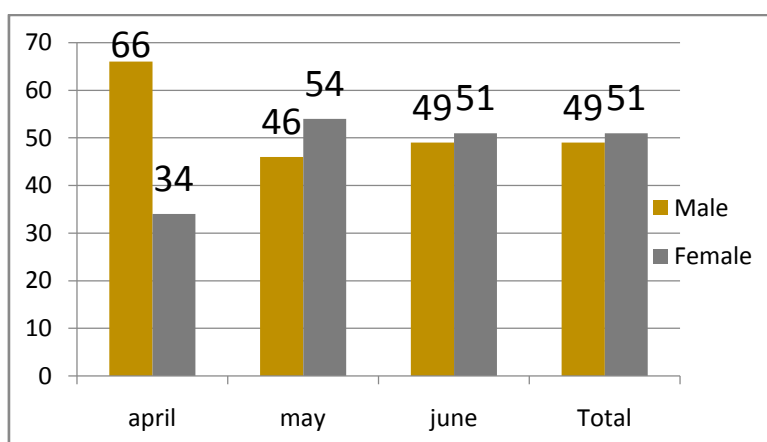
In the present study, a total of 1237 patients attended OPD of M.B Multispecialty Hospitals for 3 months between 1-4-22 to 30-6-22

### Demographic Data:

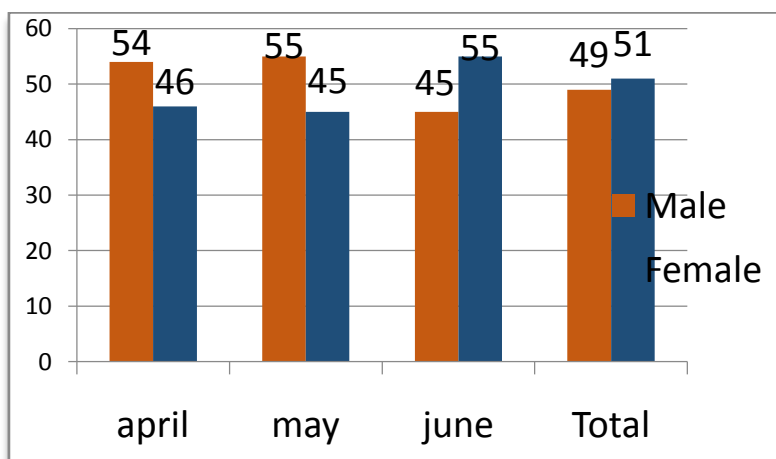
Out of the total OPD patients, 629 were newly registered patients and 608 were revisit patients. Out of the newly registered patients, 312 were male patients and 317 were female patients. Among the Revisit patients, 300 were male patients and 308 were female patients.

**Table 1: Demographic Data**

Month	New Registration Patients						Revisit Patients					
	Male	%	Female	%	Total	%	Male	%	Female	%	Total	%
April	33	66	17	34	50	100	38	54	32	46	70	100
May	99	46	115	54	214	100	107	55	89	45	196	100
June	180	49	185	51	365	100	155	45	187	55	342	100
Total	312	49	317	51	629	100	300	49	308	51	608	100

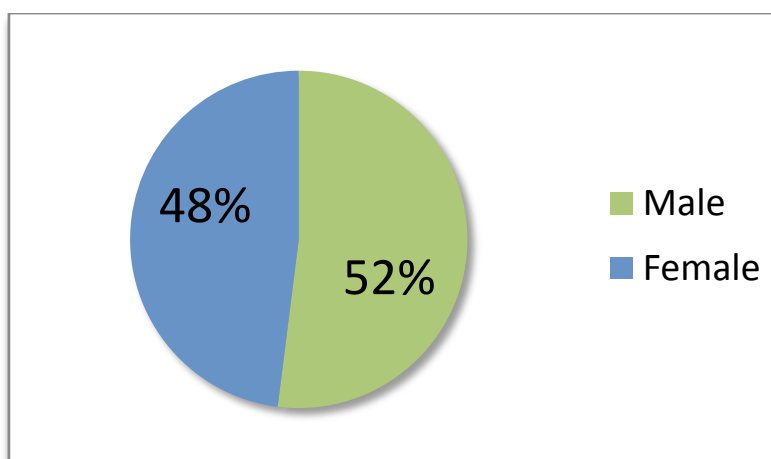


**Figure 1: New Registration Patients (%)**



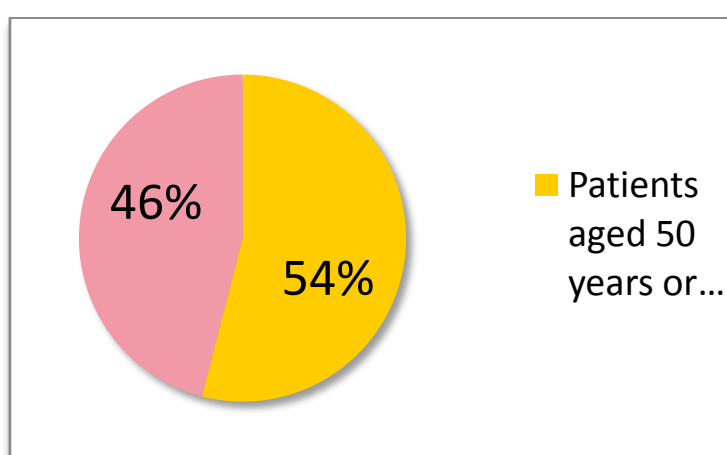
**Figure 2: Revisit Patients (%)**

The overall satisfaction index was 90%. Out of 419 sampled patients 218 were male patients and 201 were female patients. Male patients had a higher satisfaction 52% compared to females that is 48%



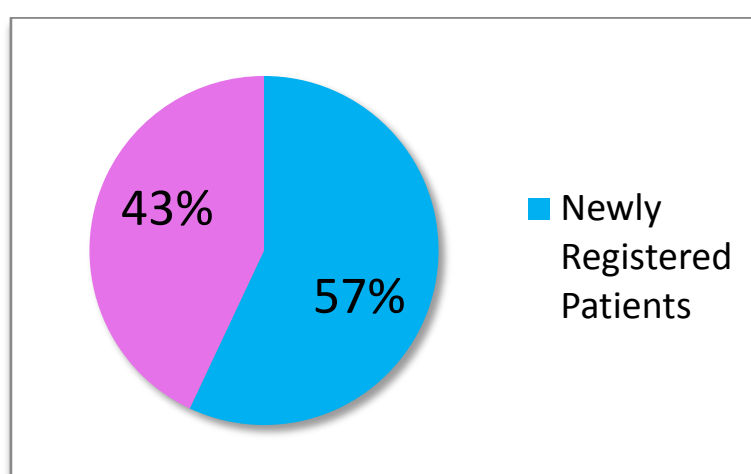
**Diagram 1: Gender wise distribution**

Patients aged 50 years or more perceived higher service satisfaction 54% as compared to patients below 50 years that is 46%



**Diagram 2: Age wise distribution**

Newly Registered patients had a higher satisfaction score of 57% in comparison to Re-visit patients which was 43%

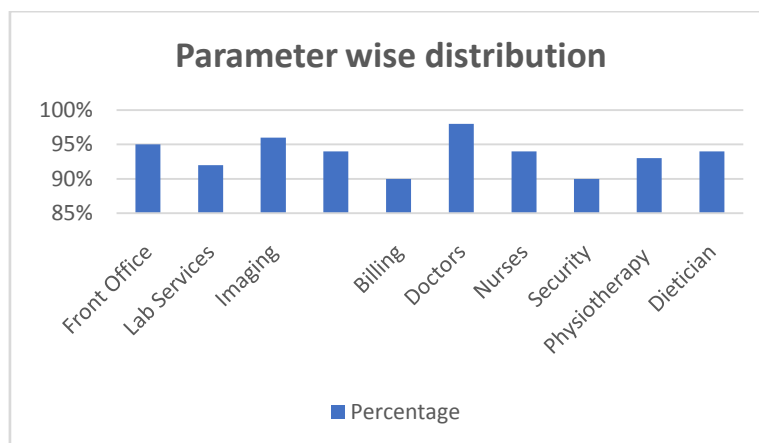


**Diagram 3: Patients Category wise distribution**

**Table 2: Parameter wise distribution**

Parameter	No of Patients Satisfied	Percentage
Front Office	398	95%
Lab Services	385	92%

Imaging	402	96%
House Keeping Services	393	94%
Billing	377	90%
Doctors	410	98%
Nurses	393	94%
Security	377	90%
Physiotherapy	389	93%
Dietician	393	94%



Physician care, careful listening and easy access of care were the major satisfaction indices with 98%. The major dissatisfaction in the study was related to the long waiting time at Registration counter, Consultant's appointment and availability of laboratory reports

Regarding the aspects of hospital environment, sanitation and amenities, score was moderate for patient satisfaction index.

Of the overall visits, newly registered patients and revisit patients were comparatively more in month of June.

## DISCUSSION

The present study shows 95% of the inpatients were satisfied with doctors to visit and 97% were satisfied with nurse's promptness in answering patients call. Regarding the overall cleanliness of the hospital, this study observed satisfaction level was found to be high with 80% which is consistent with the present study attributing to 94% [6].

In a study by Bhanu et al., the highest scores were found in communication domains which is an important component of good medical practice and sociodemographic variables showed no influential role in determining patient satisfaction scores [7].

In a study by Kishore et al., revealed that 79.9% of the patients were satisfied with the good healthcare services provided by the hospital. 6.5% patients were dissatisfied with the good healthcare services while 0.6% were strongly dissatisfied. They found insufficient healthcare facilities in this hospital. 5.2% patients were uncertain [8].

In 2011, Otani et al. surveyed 32 different large tertiary hospitals in the USA to identify the relationship of nursing care, physician care and physical environment to the overall patient satisfaction and the results showed that all attributes were statistically significant and positively related to overall satisfaction; however, nursing care was the most critical to increase overall patient satisfaction [9].

In the present study the patient satisfaction at the level of nursing care attributed to 94%. In the other hand, in 2002 Barr et al. examined the quality improvement activities in 13 tertiary care hospitals in response to public reports of patient satisfaction [10].

Correspondingly, a survey assessed patients' perception feedback in 50 hospitals in Massachusetts, which resulted in a wide range of successful improvement projects [11].

Studies done by Young *et al.* and Dullie *et al.* also found that demographic characteristics like age, race, and health status had a statistically significant effect on satisfaction scores [12, 13].

The reasons for dissatisfaction were long queue at registration counter, long waiting hour to consult doctor, difficult to get specialist services, and poor quality of facility in hospital area [14].

A study conducted in a general public hospital setting where patients seek acute and chronic care with high expectations of quality health services compared to what could unrealistically be met and resulted in an average general satisfaction [15].

In this study, patient satisfaction index are poor at billing and security services attributing to 90%. The reason could be long waiting hours at the billing counter and poor interaction by the security with the patients' attendants.

The next reason for poor patient satisfaction is long waiting time for few report generation at the laboratories. This attributed to 92% satisfaction index.

Overall patient satisfaction mainly depends upon good doctor patient interaction, nursing care, accessibility and convenience of the health care facility and avoiding delay in services at laboratories and billing systems.

## CONCLUSION

Patient's evaluation of care is a realistic tool to provide opportunity for improvement, enhance strategic decision-making meet patient's expectation.

From the analysis of above data, I conclude with the following recommendations to enhance the satisfaction level of outpatients

- 1) Patients are prioritized on the appointment basis
- 2) Patients are prioritized on the severity of the clinical condition and vulnerability
- 3) OPD executives are instructed to educate and inform patients via phone or by e-mail to follow the OPD timings to take the appointment for the follow-up visit to avoid any delay in consultation.
- 4) Introduction of color-coded system to improve and cut down the waiting time for consultation for out patients on priority basis.
- 5) Other value-added services such as Housekeeping, Pharmacy, and Laboratory etc are also informed to coordinate and communicate with OPD executive to improve their services
- 6) OPD nurses are informed to coordinate and communicate with the patients in an empathetic and courteous way
- 7) This process will be continued till the system is developed, until the waiting time is reduced.

It is concluded that most determinants of patient satisfaction were related to communication, empathy and caring from the hospital personnel. Thus, by analyzing patient outcome measures, it is possible to improve quality of services and make them more patients centered.

## REFERENCES

- 1) Raftopoulos V. A grounded theory for patients satisfaction with quality of hospital care.
- 2) Sofia et al. (2016). *BMC Health Services Research*. – DOI 10:1186/s12 913-016-1327-4
- 3) Kathryn, A., M., David A., C., Susan, M., G. (2004). The Role of Clinical and Process Quality in Achieving Patient Satisfaction in Hospitals, *Decision Sciences*, Vol: 35, NO.3, pp.349-369.
- 4) Lee RI, Jones LW. (1962). The Fundamentals of Good Medical Care: An outline of the fundamentals of good medical care and an estimate of the service required to supply the medical needs of the United States. Archon.
- 5) Rashid Al-Abri et al. (2014). OMAN MEDJ. (1) 3-7 DOI 10.5001/omj.2014.02
- 6) Dr. Saravanakumari Arumugham Dhanaraj, Dr. D. Thamarai Selvi, Dr. Ramasamy Rajesh Kumar, Dr. Sayan Paul. (2020). Assessment of patient satisfaction with inpatient services at secondary level setting. *Public Health Rev: Int J Public Health Res*. [Internet]. [Cited 2023Mar.19]; 7(6):58-5.
- 7) Gaur, Bhanu & Jahnavi, G. & Thatkar, Pandurang. (2020). Patient satisfaction about services obtained from a teaching hospital, Port Blair: A cross-sectional study. *Journal of Family Medicine and Primary Care*. 9. 93. 10.4103/jfmpc.jfmpc\_526\_19.
- 8) Kishore, Jugal. (2018). Experience and Satisfaction of Indoor Patients with Healthcare Delivery Services in a Tertiary Care Hospital of New Delhi. *International Journal of Healthcare Education & Medical Informatics*. 05. 1-5. 10.24321/2455.9199.201810.
- 9) Otani K, Herrmann PA, Kurz RS. (2011). Improving patient satisfaction in hospital care settings. *Health Services Management Research*. 24(4):163-9.
- 10) Mary D., Phil C. & Heather B. (2001). Seeking consumer views: what use are results of hospital patient satisfaction surveys? *International Journal for Quality in Health Care*, Vol.:13, NO.6, PP.463-468.
- 11) Rogers G.& Smith D. (1999) Reporting comparative results from hospital patient surveys. *International Journal Quality Health Care*, Vol, 11pp. 251–259.

- 12) Young GJ, Meterko M, Desai KR. (2000). Patient satisfaction with hospital care: effects of demographic and institutional characteristics. *Medical care*. 325-34.
- 13) Dullie L, Meland E, Mildestvedt T, Hetlevik O, Gjesdal S. (2018). Quality of primary care from patients' perspective: A cross sectional study of outpatients' experience in public health facilities in rural Malawi. *BMC Health Serv Res*. 18:872.
- 14) Marcinowicz L, Górska A, Chlabicz S. (2007). Causes of patients' dissatisfaction with family doctor care in the light of questionnaire surveys — Analysis of responses to open-ended questions. *Przegl Lek*. 64:559–62.
- 15) Kurubaran Ganasegeran et al (2015). *The Scientific World Journal*. vol. /Article ID 714754.