

Original Research Article

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Evaluation of level of satisfaction among indoor patients attending in a tertiary care hospital of Rajnandgaon (C.G.), India

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ABSTRACT

Background: Patient expression is an important source of information in screening for problems and developing an effective plan of action for quality improvement in health care organizations. Assessing satisfaction has been mandatory for quality control of any hospital, which has resulted in an increasing number of projects devoted to the concept of satisfaction and determinant of patient satisfaction.

Methods: The present Cross sectional Observational Hospital based study was conducted in Government Medical College Hospital, Rajnandgaon (C.G.) India during April 2016 to September 2016. A sample of 200 patients was taken who were admitted in different Indoor Patients Department of Clinical departments. Patients were selected according to inclusion and exclusion criteria. The information from the patients on various aspects of patient's satisfaction like admission procedure, communication with staff, physical care, test and operation help availability, cleanliness, privacy related issues and overall satisfaction was obtained by interview with patients based on the semi structured questionnaire proforma.

Results: In the present study, among IPD patient Male: Female ratio was 3:2 approx. Helpfulness of person at registration desk was ranked very good by 93% subject. Wheelchair was available for most of the patients (95%) but its availability when needed was ranked very good by 76% patients only. Majority of patient were satisfied with the behavior of the lab technician (89%), availability of lab results on given time (81%).

Conclusions: This study shows that patients admitted in the various wards of hospital were satisfied with the quality of professional services by doctors, nursing and paramedical staff but problem lies with the availability of basic amenities. Overall present study shows that assessing satisfaction of patients is simple, easy and cost effective way for evaluating the hospital services.

Keywords: Hospital services, Patient satisfaction, Patient care, Quality of medical care

INTRODUCTION

Patient's satisfaction has gained increased attention over the past few years.¹ It is now a day's understood that patient's opinion should supplement the usual indicators of quality in health care.^{2,3} Patient expressions is an

important source of information in screening for problems and developing an effective plan of action for quality improvement in health care organizations.⁴ Assessing satisfaction has been mandatory for quality control of any hospital, which has resulted in an

increasing number of projects devoted to the concept of satisfaction and determinant of patient satisfaction.⁵⁻¹¹

Patient satisfaction surveys are used by hospital managers to improve the hospital environment, patient amenities, and facilities in a consumerism context. In contrast, little has been done to determine whether patient satisfaction assessment can lead to changes in patient care at the ward or department level. The efficacy of patient-based measured feedback to improve care provider skills and practices remains controversial.¹²⁻¹⁵

Government Medical College Hospital Rajnandgaon (C.G.) provides tertiary health care services. It is 600 bedded hospitals. This hospital came in existence from 2014-15 academic years with 100 MBBS admissions per year. The populations utilizing the services are from urban, rural and tribal areas.

In-patient satisfaction has not been assessed previously in this hospital. The study was planned with the aim to assess the indoor patient department (IPD) satisfaction level among patients and their use for quality control of hospital services.

METHODS

The present study was conducted in Government Medical College Hospital, Rajnandgaon (C.G.) India. A total of 200 patients were selected from different Indoor Patients Department of Clinical departments (Medicine, Surgery, Orthopedics, Obstetrics and Gynecology). Institutional ethics committee approved this study.

Period of study

From April 2016 to September 2016

Duration of study

06 months

Type of study design

Cross sectional Observational (Descriptive) Hospital based study

Mode of data collection

Interview

Type of interview

Through questionnaire one to one

Type of questionnaire

Semi structured

Study centre

Government Medical College Hospital (a tertiary care hospital) Rajnandgaon (C.G.).

Study subjects

Admitted Patients (Indoor Patients)

Inclusion criteria

Inclusion criteria were Indoor Patients admitted in hospital for <48 hrs duration; patients aged ≥18 yrs from all departments of IPD (except in pediatrics wards, where parents/attendants accompanying the patient were included).

Exclusion criteria

Exclusion criteria were critically ill patients; not willing to participate.

Sampling method

Simple random sampling

Sample size

Purposive sample of 200

A sample of 200 patients was taken who were admitted in different departments (Medicine, Surgery, Obstetrics and Gynecology, Orthopedics and Pediatrics) of the Government Medical College Hospital Rajnandgaon (C.G.), India. Patients were selected according to inclusion and exclusion criteria. Each patient was informed & consent has been taken. The information from the patients on various aspects of patient's satisfaction like admission procedure, communication with staff, physical care, test and operation help availability, cleanliness, privacy related issues and overall satisfaction was obtained by interview with patients based on the semi structured questionnaire proforma. To facilitate the understanding, questions were translated into local language that is Hindi and Chhattisgarhi.

The World Health Organization (WHO) has created a performance system to assess the patient responsiveness (patient satisfaction), but those measures were based on surveying public health experts (and not patients) which generally doesn't show the exact reality. So questionnaire are prepared from previously validated set of a 12 administered question and some more elaborative questions were asked.¹⁶

Collected data was compiled in MS EXCEL. Then it was analyzed using SPSS V 16.

RESULTS

In the present study, among IPD patient male:female ratio was 3:2 approx. 19% were illiterate and 63% of subjects were educated up to higher secondary level. The maximum subjects by occupation were unskilled worker (42%) followed by housewife (34%). Most of the subjects were having per capita income up to 5000 (86%). Duration of stay in IPD ward was 2-5 days among 79% of subject (Table 1).

Table 1: Socio demographic profile of study subjects.

| Socio demographic profile | No. | Percentage (%) |
|---|-----|----------------|
| Respondents | | |
| Attendants of the patient | 52 | 26.0 |
| Patients | 148 | 74.0 |
| Sex wise distribution | | |
| Female | 116 | 58.0 |
| Male | 84 | 42.0 |
| Educational status | | |
| Illiterate | 38 | 19.0 |
| Primary & middle | 78 | 39.0 |
| Matriculation | 20 | 10.0 |
| High. secondary | 48 | 24.0 |
| Graduate | 10 | 5.0 |
| Post graduate | 6 | 3.0 |
| Occupation | | |
| Housewife | 68 | 34.0 |
| Unskilled worker | 84 | 42.0 |
| Skilled worker | 28 | 14.0 |
| Student | 16 | 8.0 |
| Unemployed | 4 | 2.0 |
| Per capita income (in Rs. per month) | | |
| <2000 | 92 | 46.0 |
| 2000-5000 | 80 | 40.0 |
| 5000-10000 | 18 | 9.0 |
| >10000 | 10 | 5.0 |
| Sold any asset for hospital expenses | | |
| Yes | 00 | 00 |
| No | 200 | 100 |
| Duration of stay in the hospital | | |
| <2 days | 18 | 9.0 |
| 2-5 days | 158 | 79.0 |
| >5 days | 24 | 12.0 |

Mode of admission in majority IPD patients was through emergency. Helpfulness of person at registration desk was ranked very good by 93% subject. Wheelchair was available for most of the patients (95%) but its availability when needed was ranked very good by 76% patients only. Assistance of supportive staff was found to be very good by 76% patients. Wards were easily approachable for almost all the patients and sign boards in hospital were found to be adequate and helpful. The treatment was started within 10 minutes of the admission

in the ward in more than two third of patients (69%) (Table 2).

Table 2: Services available at the time of admission.

| Services available at admission | No. | Percentage (%) |
|---|-----|----------------|
| Mode of admission | | |
| Through emergency | 174 | 87.0 |
| Through outdoor | 26 | 13.0 |
| Helpfulness of person at registration desk | | |
| Very good | 186 | 93.0 |
| Good | 6 | 3.0 |
| Average | 4 | 2.0 |
| Excellent | 2 | 1.0 |
| Poor | 2 | 1.0 |
| Availability of wheel chair | | |
| Available | 188 | 94.0 |
| Not available | 12 | 6.0 |
| Availability of wheel chair when needed | | |
| Very good | 152 | 76.0 |
| Good | 30 | 15.0 |
| Average | 8 | 4.0 |
| Excellent | 8 | 4.0 |
| Poor | 2 | 1.0 |
| Immediate availability of support staff for assistance | | |
| Very good | 152 | 76.0 |
| Good | 30 | 15.0 |
| Average | 8 | 4.0 |
| Excellent | 8 | 4.0 |
| Poor | 2 | 1.0 |
| Ward locations | | |
| Approachable | 200 | 100.0 |
| Sign boards | | |
| Adequate and helpful | 190 | 95.0 |
| Inadequate | 10 | 5.0 |
| Time taken to start of treatment in the ward | | |
| Immediate | 64 | 32.0 |
| <10 minutes | 74 | 37.0 |
| 10-30 minutes | 40 | 20.0 |
| >30 minutes | 22 | 11.0 |

Patient satisfaction in relation to services by doctor was good in majority of patients (Table 3).

Majority of patient were satisfied with the behaviour of the lab technician (89%), Availability of lab results on given time (81%) (Table 4).

In present study, most of the patients were found satisfied with attention & care provided by nursing & paramedical staff. The majority of Patients (73%) were satisfied about cleanliness in wards. Only one third of patients reported regular change of bed sheets by nursing staff. Approach of paramedical staff was found good by 66% patients (Table 5).

Table 3: Perception regarding quality of professional services by doctor.

| Perception regarding quality of professional services by doctor | No. | Percentage (%) |
|---|-----|----------------|
| Time spent by the doctor with the patients | | |
| Adequate | 172 | 86.0 |
| Inadequate | 28 | 14.0 |
| Description of disease status by doctor | | |
| Satisfactory | 168 | 84.0 |
| Unsatisfactory | 32 | 16.0 |
| Communication skill of doctor | | |
| Good | 110 | 55.0 |
| Satisfactory | 72 | 36.0 |
| Unsatisfactory | 18 | 9.0 |
| Perception of efficiency of doctors in handling illness of patient | | |
| Good | 150 | 75.0 |
| Satisfactory | 28 | 14.0 |
| Unsatisfactory | 22 | 11.0 |
| Doctors discussed laboratory investigations with patients | | |
| Good | 28 | 14.0 |
| Satisfactory | 150 | 75.0 |
| Unsatisfactory | 22 | 11.0 |
| No. of visits of senior doctors | | |
| Adequate | 174 | 87.0 |
| Inadequate | 26 | 13.0 |

Table 4: Perception regarding quality of lab services.

| Perception regarding quality of lab services | No. | Percentage (%) |
|--|-----|----------------|
| Guided about location/room no. where investigations advised | | |
| Yes | 196 | 98.0 |
| No | 4 | 2.0 |
| Locations of labs | | |
| Easily approachable | 184 | 92.0 |
| Difficult to locate | 16 | 8.0 |
| Time to reach lab for investigation | | |
| <10 Minutes | 172 | 86.0 |
| 10-30 Minutes | 16 | 8.0 |
| >30 Minutes | 12 | 6.0 |
| Behavior of lab technician | | |
| Satisfactory | 178 | 89.0 |
| Good | 16 | 8.0 |
| Unsatisfactory | 6 | 3.0 |
| Availability of results of investigation | | |
| Available on time | 162 | 81.0 |
| Delayed | 38 | 19.0 |

The medicines and drinking water facility was available and adequate in 17% and 47% cases respectively. Availability of toilet facility indoor ward found adequate but their cleanliness was found unsatisfactory by majority

of patients. Availability of fans/lights in ward was adequate. Facility of parking found satisfactory as perceived by the majority of subjects. Quality of food provided by hospital was found satisfactory by majority. Only 42% patients were satisfied with time consuming in queue. Majority of subjects (87%) reported that retiring/waiting room for attendants/relatives was unavailable (Table 6).

Table 5: Perception regarding quality of services by nursing and paramedical staff.

| Perception regarding quality of services by nursing and paramedical staff | No. | Percentage (%) |
|---|-----|----------------|
| Attention and care by nursing staff | | |
| Satisfactory | 162 | 81.0 |
| Unsatisfactory | 38 | 19.0 |
| Providing prescribed medications in timely manner | | |
| No | 14 | 7.0 |
| Yes | 186 | 93.0 |
| Attention and care by paramedical staff | | |
| Satisfactory | 136 | 68.0 |
| Unsatisfactory | 64 | 32.0 |
| Cleanliness in wards | | |
| Satisfactory | 146 | 73.0 |
| Unsatisfactory | 54 | 27.0 |
| Regular change of bed sheet by the nursing staff | | |
| No | 132 | 66.0 |
| Yes | 68 | 34.0 |
| Approach of paramedical staff toward patient/attendant | | |
| Good | 132 | 66.0 |
| Satisfactory | 62 | 31.0 |
| Unsatisfactory | 6 | 3.0 |

DISCUSSION

Healthcare is fast becoming consumerist industry all over the world. Today, the patients are much more aware and informed about their diseases compared to most healthcare givers. It is, therefore, vital to know exactly what our patients expect from us as healthcare providers in order to practice according to the need of the day, in addition to ethically correct medicine.¹⁷⁻²¹

In the current study majority of the patients were satisfied with the services by the doctors which were up to our expectations as the GMC Hospital has sufficient medical staff. In a study by Kulkarni et al patients were more satisfied with behaviour of doctors (87.8%).²² Bhattacharya et al also reported 98.2% patients were satisfied with behaviour of doctors.²³ Most of the patients were satisfied with cleanliness in the wards. Few studies have findings similar of the present study. While the dissatisfaction level was at higher side when compared to present study.

Table 6: Satisfaction regarding availability of basic amenities.

| Amenities | No | Percentage (%) |
|---|-----|----------------|
| Availability of medicines | | |
| Available & adequate | 34 | 17.0 |
| Available but inadequate | 132 | 66.0 |
| Unavailable | 34 | 17.0 |
| Availability of drinking water | | |
| Available & adequate | 94 | 47.0 |
| Available but adequate | 76 | 38.0 |
| Unavailable | 30 | 15.0 |
| Availability of toilet in wards | | |
| Yes | 192 | 96.0 |
| No | 8 | 4.0 |
| Cleanliness of toilets | | |
| Good | 18 | 9.0 |
| Satisfactory | 24 | 12.0 |
| Unsatisfactory | 158 | 79.0 |
| Availability of fans/lights in wards | | |
| Yes | | |
| No | 184 | 92.0 |
| Convenience of parking | | |
| Satisfactory | 124 | 62.0 |
| Unsatisfactory | 76 | 38.0 |
| Meals available/provided in wards | | |
| Yes | 200 | 100 |
| No | 00 | 00 |
| Quality of food | | |
| Good | 28 | 14.0 |
| Satisfactory | 142 | 71.0 |
| Unsatisfactory | 30 | 15.0 |
| Availability of retiring/waiting room for relatives/attendants | | |
| Available and adequate | 16 | 8.0 |
| Available but inadequate | 10 | 5.0 |
| Unavailable | 174 | 87.0 |
| Satisfied with time consuming in queue for registration | | |
| Yes | 84 | 42.0 |
| No | 116 | 58.0 |

In the present study more than 57% patients were satisfied with the availability of drinking water in the premises which is nearly similar to the study done by R Kumari et al.²⁴ In the current study 96% patients were satisfied with availability of toilet facility in the ward whereas it was 65.3% as studied by Kumari et al.²⁴ In our study 79% patients were unsatisfied about the cleanliness of the toilet. Qureshi et al and Kulkarni et al reported that 12% & 18.96% patients respectively were dissatisfied with cleanliness in toilets.^{22,25} One reason may be that most of the patients using toilets were less educated and lack awareness about hygienic practices. In the study by Kumari et al it was found that the cleanliness of toilet

was (27.3%) which is higher than the finding of the present study.²⁴

CONCLUSION

This study shows that patients admitted in the various wards of hospital were satisfied with the quality of professional services by doctors, nursing and paramedical staff but problem lies with the availability of basic amenities. Dissatisfaction was found to be more regarding cleanliness in the toilets and the wards. Availability of bed sheets, drinking water, retiring room were some of the issues needing concern in IPD. Time consumed in queue was a major factor of dissatisfaction for IPD patients. Patients of IPD were unsatisfied with the inadequate availability of medicines. Overall present study shows that assessing satisfaction of patients is simple, easy and cost effective way for evaluating the hospital services. There is a need to address these identified lacunae to improve the quality of services provided to the needy patients.

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Conflict of interest: None declared

Ethical approval: The study was approved by the Institutional Ethics Committee

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