Evaluation of patient’s satisfaction towards medical care provided at Civil Hospital, Palanpur: Assessed by direct approach exit interview method

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Abstract
Satisfaction means achieving one’s expectation regarding service or product. Patient’s satisfaction means fulfilling their expectations during medical care. Total 211 patient’s response towards medical care at civil hospital was assessed by direct approach exit interview method. Present study finds more than 60% responders were satisfied regards to reception and admission procedure. More than 70% were not happy with quality of food, cleanliness and rules of the hospital. Above 52% respondees disapproved behaviour of ward and sanitary attendents but 70% plus responders appreciated other health care workers in their soft skill. Over 60% responders expressed satisfaction in medical treatment and preventive education for disease they suffer. Satisfaction level was low for discharge protocol and time. Overall impression of the present study display satisfactory response towards services and quality of health care provided by the Civil Hospital. It identify a few shortfalls, which need to be attended for improving quality of health care services and to maintain acceptable standard of the hospital. Though survey evaluates quality of health care services of Civil hospital from patients’ point of view but, it facilitate identification of problem and may provide feedback to management for quality improvement towards maintaining standard of Hospital Services.

Keywords: Patient’s satisfaction, Medical care, Civil Hospital.

Introduction
Satisfaction means achieving one’s expectation regarding service or product. When Satisfaction regards to patient, it means fulfilling the expectation while regaining his health in clean environment under caring hands at reasonable cost. Though it looks simple but various factors are in between patient’s expectation and satisfaction.1 At time patient visit a busy, popular healthcare provider with some expectations and returns discontented because he feels that health care person has not listened and attended him by giving sufficient time, though he has received good medical treatment. Now and then patient may land up in highly reputed, busy hospital which charges high fees for its clean environment and caring staff but patient feel unhappy because hospital staff and environment stands low. On the other hand, it happens that patient reaches to low cost hospital like Govt hospital or benevolent health centre and feels satisfy. It may be because expectations from such centre are minimal.2 Thus satisfaction depends on expectations and can vary from person to person or from community or group.3

Corporate and private hospitals run on high fees and modern infrastructure having patient’s satisfaction as primary motto. As high expectation of service is a positive indicator of reputation in community. It is important in getting popularity, attracting customers and increasing business. On the other hand Government hospitals are running on low cost and people have a belief that, they are less concerned about consumer’s expectation and not apprehensive about satisfaction of their customer. Health Care providing team at government hospital feels that, due to free to almost negligible charges paid by patient; hospital finds constrain in providing quality treatment to match patient’s satisfaction. Also it is true that as patients pay less, their expectations from medical care at such centre is minimal. The present day competition and consumer law have changed medical care; even government hospitals are not spared. Health care providers have to change their approach towards patients comfort and quality care.4 Hence patients are benefite even at government set ups to meet their expectations.

In present study we evaluated patient’s satisfaction level at civil hospital, Palanpur by taking direct approach exit interview method to collect response.

Materials and Methods

Place of study
Civil hospital, Palanpur is situated at Banaskantha District of North Gujarat. It is old hospital established during the era of Nawab Tale Mohmad. Hospital receives patients from villages of North Gujarat and touching areas of Rajasthan. Hospital has 10 departments which provide Outpatient (OPD) consultations and inpatient services to patient visiting the hospital. On an average 70 inpatients and 400 OPD patients are utilizing hospital services per day.

Study design and Sampling
Present study is cross sectional and descriptive type, which follows random convenient sampling method. Study population includes indoor patients above 18 years of age of either gender. Patients below 18 years were considered minor and excluded from the study. All indoor patient of infective disease wards were also excluded from the study population.

By using statistical formula \( n = \frac{Z^2pq}{d^2} \), minimum sample size estimated5 was 211. Also this number was about 2 to 3% of total indoor patients admitted during six months of our study.
Pretested structured questionnaires\textsuperscript{5,6} were prepared keeping 3 points in focus viz. 1. Environment: Reception, restraints and Cleanliness in hospital. 2. Soft skill: Approach and behaviour of health care staff. 3. Quality: Medical treatment quality and education on patient’s illness while discharge.

Ethical clearance was obtained from hospital authority. Informed consent was acquired from each participant who volunteered for the study. Pretested questionnaire were given to each patient a day prior to their discharge from the hospital. Inputs were obtained on the day of their discharge. Specially trained staff nurse was allotted this work of data collection.

The participants were asked to respond by tick mark on any one of the four options (Excellent, Good, Average, or Poor). Average and Poor response together were considered ‘dissatisfied’ while Excellent and Good option were considered as ‘satisfied’ category.\textsuperscript{5}

Data obtained from 211 participants by direct approach on exit interview from questionnaire were analysed by MedCal online statistical software.

Result
In six months (i.e. October 2017 to March 2018) of our study period total 10,030 indoor patients were admitted to Civil Hospital, Palanpur. Among these patients 212 randomly selected patients volunteered to participate in our study giving written consent. This makes 2.11\% of indoor patients becoming participants. Out of 212 subjects 50.94\% were male and 49.06\% were female (M to F ratio - 1:04:1). Their age ranged between 18 to 82yrs. Mean age was 40.93yrs and median age was 36.5yrs.

Among total responders 67\% belongs to low income group whereas 33\% were from middle income group. Being a government hospital we could not find any high income group patient.

Duration of the stay ranged from 1 to 12 days. About 45.28\% responders stayed for 1-2days, 38.68\% responders stayed in hospital for 3-5days and 16.03\% responders stayed for more than 5days due to their major illness.

A1. Response to process of registration, reception and admission
As civil hospital, Palanpur, being old hospital Registration and admission protocol is in format and meticulously followed. From our study we observed that 59.70\% responders from Low Income group [LIG] were satisfied with the existing procedure of registration and admission at hospital whereas 40.30\% patients had complains about existing procedure. This dissatisfaction may be due to odd hour admissions keeping expectation of urgent services. In case of Middle Income group [MIG] 72.73\% responders were satisfied where as 27.27\% were unhappy. Overall 66.21\% responders were satisfied with present procedure of registration and admission.

A2. Ward and bed preparedness
Usually the patient’s cot and ward need to be prepared in anticipation of new admission at any given time. Regard to this 59.70\% responders from LIG were satisfied about readiness of ward where as 40.30\% were not happy. More number of MIG responders i.e. 64.64\% were happy but 36.36\% were having some complains.

A3. Quality of food and canteen services
Hygienic and quality food can add to early recovery of patient. Usually good hospitals take extra care for providing quality food but, our study reports high level of dissatisfaction among both LIG. It is presumed that, food provided at government hospital is of poor quality. Unhappy response expressed by 77.61\% patients of LIG and 90.91\% patients from MIG justifies the whispers. Similar results on food and service were also presented by Khosla JN(1969), Jain VC, Prasad BG (1969) Bhatia AK (1971).\textsuperscript{13-15}

A4. Rules and restraints in hospital
Regarding maintenance of discipline in the hospital like visiting hours, restriction on number of attenders and visitors meeting patient, permission for outside food etc., both the groups were having almost equal level of dissatisfaction. 58.21\% LIG were dissatisfied due to strict rule or favours; among MIG 51.52\% responders were not happy. Main dissatisfaction comes from ward boys and cleaning staff as they apply rules as per their handiness. Also a practice favouritism was reported.

Table 1: Demographic distribution of patients

|               | n=212 | No of patients | Percentage |
|---------------|-------|----------------|------------|
| Male          | 108   |                | 50.94      |
| Female        | 104   |                | 49.06      |
| Age range     |       |                |            |
| 18 to 82 yrs  | 18    |                |            |
| Mean age      | 40.93 |                |            |
| Median age    | 36.5  |                |            |
| Low income group [LIG] | 142 |                | 66.98      |
| Middle income group [MIG] | 70  |                | 33.01      |
| Duration of stay in hospital | |               |            |
| 1 to 2 days   | 96    |                | 45.28      |
| 3 to 5 days   | 82    |                | 38.68      |
| More than 5 days | 34   |                | 16.03      |
Table 2: Response to reception restraints and cleanliness in hospital

| S.No | Service parameter                          | % Satisfied | % Unsatisfied |
|------|-------------------------------------------|-------------|---------------|
|      |                                           | LIG         | MIG           | LIG | MIG |
| A1   | Process of reception & Admission          | 59.70       | 72.73         | 40.30 | 27.27 |
| A2   | Ward and bed preparedness                 | 59.70       | 64.64         | 40.30 | 36.36 |
| A3   | Quality of food and canteen services      | 22.39       | 9.09          | 77.61 | 90.91 |
| A4   | Rules and Restraints in hospital          | 47.79       | 48.48         | 58.21 | 51.52 |
| A5   | Cleanliness in hospital                   | 23.88       | 15.15         | 76.72 | 84.85 |

Table 3: Overall response to reception restraints and cleanliness in hospital

| Service parameter               | % Satisfied | % Unsatisfied |
|---------------------------------|-------------|---------------|
| A1 Reception admission          | 64          | 36            |
| A2 Ward and bed preparedness    | 61          | 39            |
| A3 Quality food and canteen service | 18          | 82            |
| A4 Rule restraints               | 44          | 56            |
| A5 Cleanliness in hospital      | 21          | 79            |

Evaluation of Soft skill: Approach and behaviour of health care staff

Table 4: Response to approach and behaviour of health care staff

| S.No | Service parameter                        | % Satisfied | % Unsatisfied |
|------|------------------------------------------|-------------|---------------|
|      |                                          | LIG         | MIG           | LIG | MIG |
| B1   | Nursing service and care at hospital     | 77.61       | 78.79         | 22.39 | 21.21 |
| B2   | Cooperation and behaviour of health care provider (doctors and nurse) at hospital | 76.12       | 69.70         | 23.88 | 30.30 |
| B3   | Behaviour of ward and sanitary attendants | 52.24       | 48.48         | 47.76 | 51.52 |
| B4   | Experience with diagnostic services      | 65.67       | 69.70         | 34.33 | 30.30 |

B1. Nursing service and care at hospital: Among 200 participants 78.78% expressed complete satisfaction for caring nature of nurses and their services to the patients. Only 21.22% patients were not happy with the nursing staff. This dissatisfaction may have come from chronically ill patients who seek repeated, constant and immediate attention.

B2. Cooperation and behaviours of health care providers (Doctor and Nurse)
It has been noted that fast recovery of patient depends on cordial relation of health care provider during patient stay in hospital. In our study 76.12% from LIG responders and 69.70% from MIG patients expressed contentness with the behaviour of doctors and nursing staff. Our results regarding health care provider’s behaviour were similar to Sodhani PR et al (2010).9

B3. Experience with diagnostic services
Good and timely diagnostic support is a back bone of effective treatment. Paramedical staff involved in diagnostic services have important role in generating investigation reports and supporting the clinicians. In our present study we observed 69.69% responders were happy with diagnostic services and the paramedic staff.

B4. Behaviour of ward and sanitary attendants
Regarding behaviour of ward and sanitary attendant’s services for patients our observations are in parallel to a common findings in many general hospitals10,13 we recorded high level of dissatisfaction among both income group responders. Overall about 52.24% responders were dissatisfied of services and behaviours of ward and sanitary attendants with patient in the hospital.

Table 5: Overall response to approach and behaviour of health care staff

| Service parameter                        | % Satisfied | % Unsatisfied |
|------------------------------------------|-------------|---------------|
| B1. Nursing service                      | 78          | 22            |
| B2. Behaviour of Doctors & Nursing staff | 74          | 26            |
| B3. Behaviour of ward and Sanitary attendants | 47.76       | 52.24         |
| B4. Experience with diagnostic services  | 67          | 33            |

Table 6: Response to quality of medical treatment and preventive education given on patient’s illness before discharge.
Quality of Medical care and treatment at hospital

Overall 58.21% responders from LIG and 66.67% from MIG have expressed their satisfaction about the appropriate and rational treatment given at present general hospital by treating doctors. Overall 62% respondent’s satisfaction in present study disproves the belief that medical treatment at general hospital is of substandard quality.11

Preventive advice and education about illness by doctors and nursing staff:12

Patient feel satisfied if they are attended and listened to their complains. They are happy when information about treatment and other detail of illness is shared and discussed with them by doctor or health care worker. In our study 63.64% MIG and 59.70% LIG responders were satisfied by the approach of doctor and other paramedics. They were also happy to receive the guidance given by doctors and nurses regarding preventive aspects of the disease they suffer. Once again total 61% responder’s satisfaction disproved the common belief that doctors and nurses at government hospital are arrogant and uncaring.

Experience of cooperation at the time of discharge

Overall 37% responders were happy at the time of discharge. Whereas 63.64% among MIG and 62.69% from LIG responders expressed dissatisfaction towards the protocol and time taken for discharge. There are multiple reasons which caused dissatisfaction. One of the commonest is, patient wishes to reach home as early as possible after listening of discharge. They don’t want any delay occurring between discharge and actual leaving the hospital. Time consumed to complete discharge procedure may be the cause of unrest.

Table 7: Overall response to quality of medical treatment and preventive education given on patient’s illness before discharge

| S.No | Table 7 | % Satisfied | % Unsatisfied |
|------|---------|-------------|---------------|
| C1   | Medical care and treatment at hospital | 62 | 38 |
| C2   | Preventive education about illness | 61 | 39 |
| C3   | Experience at discharge | 37 | 63 |

Discussion

There are various factors which count for patient’s satisfaction from health care setup. Normally this depends on the expectations of patient from health care provider. Patient’s main expectation is getting cured from illness and re-joining their routine work without spending much time and money.16

In India, there is general perception that, health service provided at government centre is of poor quality. But with the change in legal policy of health care sector, there is drastic change in practices due to which patient’s anticipations from health care provider has increased. Though there are number of factors need to be taken care to achieve patient’s satisfaction, Major factors which need to be attended at all the health care centre are (1) Neat and clean hospital surrounding with friendly rules (2) Good, realistic and cordial relations adapted by health care workers (3) Time bound simple, smooth, informative and cooperative protocol for discharge.

Overall observation emerged from our present study indicates patients were satisfied and happy with the medical care and treatment provided by Civil Hospital, Palanpur. Our observations of dissatisfaction regarding behaviour of ward attendants, cleanliness of ward and hospital premises, quality of food provided in government hospitals were correlating with other study conducted in India.13-15

Conclusion

Present direct approach, exit interview study shows satisfactory response towards services and quality of health care provided by the Civil Hospital, Palanpur. Also this study identify a few shortfalls, which need to be attended for improving quality of health care services and to maintain acceptable standard of the hospital.

Message

Present direct approach exit interview method of assessment of health care services of Civil hospital from patients’ response facilitate identification of problem and help health care provider to generate ideas in solving these problems. The survey may provide feedback for quality improvement towards maintaining standard of Hospital Services.

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