



RESEARCH ARTICLE

Patient Satisfaction Survey at a Tertiary Care Speciality Hospital

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ABSTRACT

Introduction: Patient satisfaction is one of the most important parameters of quality. The measurement of patient satisfaction is an important tool for research, administration, and planning. Client satisfaction is a crucial index for determining the quality services and the way in which they are provided by medical staff. The patient satisfaction is of paramount importance in ensuring better quality on the way to total quality management. Patient satisfaction survey are important from the view of improvement of quality of services and to attain the maximum satisfaction of the in-patients.

Aims and objectives: The aim of the study is to assess the level of satisfaction of in-patients at Tertiary care speciality hospital and to find out the causes for dissatisfaction. The objectives set were, to study the level of satisfaction of in-patients in private and General wards at Tertiary care speciality hospital and to find the causes for dissatisfaction, if any and suggest remedial measures.

Methodology: A questionnaire based study where views of inpatient were taken regarding various clinical and support services. The data were collected from different patient care areas over a period of 2 months, and analyzed to determine the biggest dissatisfying factors among the patients.

Observations: More than 88% of the patients have rated the services as Excellent/Good. The areas where the satisfaction level is low is the cleanliness specially in the toilets and the quality of food served to the patients. As far as clinical care is concerned 95% of the patients are satisfied with the level and expertise of professional care but suggested for development of soft skills in doctors and paramedics.

Conclusion: The study suggests that a majority of in-patients are highly satisfied with the services of the Hospital. The study recommends for the need to develop soft skills among Doctor and paramedics and to improve upon the level of cleanliness and quality of dietary services.

Keywords: Patient satisfaction, Soft skills, Cleanliness in toilets, Dietary services.

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INTRODUCTION

Patient satisfaction is one of the most important parameters of quality. The measurement of patient satisfaction is an important tool for research, administration, and planning.¹ Client satisfaction is a crucial index for determining the quality services and the way in which they are provided by medical staff. Satisfaction with the physicians, nurses, equipment, housekeeping, billing, and food services were the main determinants of overall satisfaction in hospitalized patients.² The patient satisfaction is of paramount importance in ensuring better quality on the way to total quality management, because the patient (customer) is the one who decides the quality, who accepts the goods/services, who makes the other to accept it, who decides your market strategies, who gives correct feedback about the performance of the hospital, and makes success the program of total quality management.³ Patient satisfactions is an indicator of how the patient has perceived the other qualitative aspects of care and can be used as a proxy measure of those aspects.⁴ Patient satisfaction is a pre-requisite for achieving the goals of healthcare as it influences the patient's decision to follow prescribed treatments and seek professional healthcare in the future. Patients are capable of assessing the quality of care, they receive as they pay attention to all components of care — the science of medicine, the art of care, and the amenities of care.⁵ Hospital satisfaction questionnaire asked respondents general questions relating to reception/administration, hospital cleanliness, signage, hospital food, etc.

Patient satisfaction survey are important from the view of improvement of quality of services and to attain the maximum satisfaction of the in-patients.

A cross-sectional study of satisfaction of in-patients in a Private Medical College Hospital in AP by Rajagopal Rao Kodali, P Sita Ramacharyulu⁶ showed that the satisfaction of in-patients expressed by majority was good followed by fair,

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bad, very good, and very bad. The satisfaction expressed was more with nursing services followed by doctors and billing and least with housekeeping.

The study recommends that the doctors and nurses should be motivated by conducting CME programs, seminars, and sensitization workshops periodically. Medical and nursing audits can be introduced to improve the quality of medical care and to reduce the cost to the patient. Housekeeping staff should be posted in all the wards round the clock in sufficient numbers and maintain the neatness of the wards by using disinfectants and their work should be supervised from time to time.

Examining the relationship between patient-centered care (PCC) and outcomes by Poochikian-Sarkissian S, Sidani S, Ferguson-Pare M, Doran D⁷ to examine the extent to which staff nurses provided PCC, as perceived by staff nurses and patients, and to explore the relationships between implementation of PCC and patient outcomes, confirms that implementation of PCC is expected to improve patient outcome by increasing patient self-care ability and improving satisfaction with care and quality of life.

A population-based survey using PPE-15: relationship of care aspects to patient satisfaction in Hong Kong. Wong EL, Leung MC, Cheung AW, Yam CH, Yeoh EK, Griffiths S, Source School of Public Health and Primary Care, the Chinese University of Hong Kong, HKSAR, Hong Kong, China. lywong@cuhk.edu.hk.⁸

The mean global satisfaction scores for public and private hospital care were 7.3/10 and 7.8/10, respectively. By adjusting patient demographics, the regression models show that 'want to be more involved in decision made about the care and treatment', 'respect for patient's dignity', 'patients' family have enough opportunity to talk to doctor' and 'tell about danger signals regarding illness/treatment after went home' are major determinants of the global satisfaction scores. Study concludes that communication, respect and patient engagement in provider-patient relationship are important in determining patient's satisfaction. Training and healthcare education curriculum could take this into account for ensuring the quality of PCC.

Patient experience of nursing quality in a teaching hospital in Saudi Arabia.

Al Momani M, Al Korashy H, Source Department of Nursing Administration and Education Department, King Saud University, Riyadh, Kingdom of Saudi Arabia.⁹

The findings of this study demonstrate negative experiences of patients with nursing care in dimensions of information, caring behavior, and nurse competency and technical care. Awareness of the importance of these dimensions of nursing care and ongoing support to investigate patients' perception periodically toward quality of nursing care are critical to success the philosophy of patient centered healthcare.

Another study done on patient satisfaction in Cyprus concludes that nurses should be made more sensitive and aware of the importance of patients' information and autonomy as well as their rights in general. Additionally, an effort should be made to improve hospitalization services and more specifically, food, where more dietary options should be given, as well as some measure taking for restricting the noise.¹⁰

Another study done to assess that factors affecting patient satisfaction in a Dental College in Tumkur City suggests that measures have to be undertaken in order to fulfill the void by placing signboards, explaining the treatment procedure/ or any delay to built a good rapport with the patient. But only targeting a reduction in complaints is not a sign of improvement. What is needed is an effective evaluation of the accessibility of procedures and proof of real action, to encourage and support complaints.¹¹

AIMS AND OBJECTIVES

Aims

To study the level of satisfaction of in-patients at Tertiary care speciality hospital and to find out the causes for dissatisfaction.

Objectives

1. To study the level of satisfaction of in-patients in private and general wards at Tertiary care speciality hospital.
2. To find the causes for dissatisfaction, if any and suggest remedial measures.

Methodology

Study area: Tertiary care speciality hospital, cardioneuro centre, eye hospital and cancer hospital.

Study population: The study population was the in-patients from different wards including general wards and the private wards.

Sample size: A sample size of 384 has been determined at 95% confidence level with 5% precision.¹²

Study design: Cross-sectional descriptive study.

Duration of study: Two months (January and February, 2013).

Tool: The Northwest Territories (NWT) Hospital satisfaction questionnaire used in hospital in Fort Smith, was used as it is a valid tested tool.¹³

Observations

Following are the major observations:

- About 25% of the patients are from Delhi, while remaining 75% are from other states (Tables 1 and 2).
- UP, Haryana and Bihar constitutes more than 50% of the patients coming to Tertiary care speciality hospital.

Table 1: Patient's response to the questionnaire

S. no.	Service provided	Excellent	Good	Satisfactory	Poor
1.	How respectful was the receptionist/administration?	21.5%	59.1%	19.3%	0%
2.	How clean was the hospital?				
	Wards	21.0 %	72.6%	5.4%	1.1%
	Toilets	8.6%	46.2%	40.9%	4.3%
	Linen	9.4%	60.7%	29.6%	0.5%
3.	How helpful were the signs/directions?	19.9%	62.4%	16.1%	1.6%
4.	How was the hospital food?	5.4%	57.5%	32.3%	4.8%
5.	How were the services of medical records persons you received (time taken in preparation of case file at the time of admission)?	14.0%	66.1%	19.9%	0%
6.	How helpful and prompt was the person sitting in billing section?	10.7%	64.0%	24.2%	1.1%
7.	How helpful were the MSSO/social guides?	19.9%	52.7%	25.3%	2.1%
	<i>Healthcare providers</i>				
	<i>Nurses</i>				
8.	What do you think about the care you received from the nurses?	52.1%	38.7%	8.6%	0.5%
9.	How respectful were the nurses?	25.8%	63.4%	10.7%	0
10.	How well did the nurses answer your questions?	17.2%	58.1%	24.7%	0
	<i>Doctors</i>				
11.	What do you think about the care you received from the doctors?	62.4%	33.3%	4.3%	0
12.	How respectful were the doctors?	20.4%	65.6%	14.0%	0
13.	How well did the doctors answer your questions?	16.7%	44.6%	37.1%	1.6%
	<i>Paramedical services</i>				
14.	What do you think about the care you received from the paramedical professional (for example, the lab technologist who drew your blood, the ECG Technician, Refractionist)?	7.5%	74.2%	17.2%	1.1%
15.	How well did the paramedical professional answer your questions?	7.5%	66.7%	25.8%	0%

Table 2: Patient's concurrence for treatment/procedure

S. no.	Concurrence for treatment/procedure	Yes	No
1.	Was your treatment/procedure clearly explained to you?	97.3%	2.7%
2.	Were you involved in decisions affecting your care?	97.8%	2.1%
3.	Were you kept informed about the care planned for you?	97.3%	2.7%

- Cancer hospital has 85% of the patients coming from outside Delhi, which reflects toward non-availability of cancer treatment facility in other parts of the country as well the quality of care being provided by cancer hospital.

Major reasons for coming to Tertiary care speciality hospital is the reputation of the Institute as well lack of facilities in local hospitals.

- More than 88% of the patients have rated the services as excellent/good.
- Less than 1% of the patients have rated the services as poor.

Common Feedbacks given by Patients

1. Better coordination among various clinical departments.
2. Improvement in the security system and installation of CCTV cameras, in various areas of the institute like emergency, outpatient department, etc.

3. Training of doctors/nurses and paramedical and other support staff in soft skill.
4. Requirement of TV/Music system in the wards.
5. Improvement in the quality of food.
6. Better maintenance and upkeep of the toilets.

CONCLUSION

1. Approximately 25% of the admitted patients are from Delhi and rest 75% are from other parts of the country (Table 3).
2. Out of the 75% more than 50% are from UP, Bihar and Haryana and other parts of the country contribute just 25% of the patients.
3. Major reasons for coming to Tertiary care speciality hospital is the reputation of the institute as well lack of facilities in local hospitals. This reflects toward the requirement of developing quality medical services in different parts of the country (Table 4).
4. The level of satisfaction among the in-patients at Tertiary care speciality hospital and various centers is quite high. More than 88% respondents have labeled the overall satisfaction as excellent/good (Table 5 and Graph 1).
5. More than 70% of the respondents have rated most of the parameters as good or excellent.
6. The two area where there is a felt requirement of improvement are:
 - Cleanliness of toilets

Table 3: Demographic distribution of the patients

Hospital area	Delhi	Haryana	Uttar Pradesh	Bihar	Rajasthan	Others
Main hospital	30%	13.5%	26.5%	11.9%	5%	12.7%
Cardioneuro centre	21.1%	17.8%	31.1%	15.6%	4.4%	10.0%
Eye hospital	33.3%	11.8%	24.7%	15.1%	5.9%	8.6%
Cancer hospital	15%	10%	30%	5.5%	4.5%	35%
Average	25%	13.3%	28.1%	12%	5%	16.6%

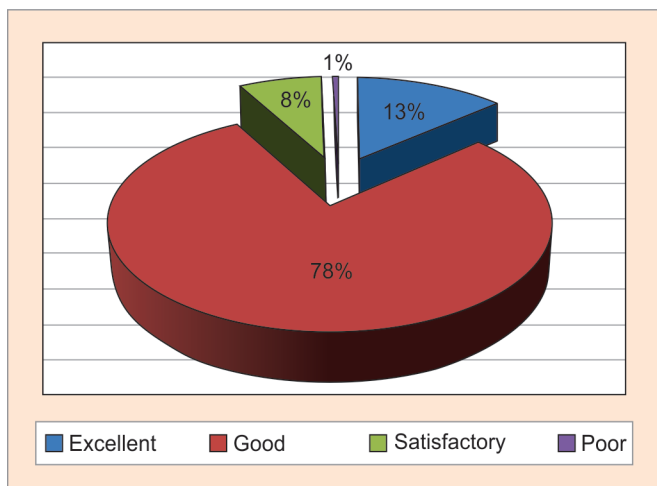
Table 4: Reason for coming to Tertiary Care Speciality Hospital

Hospital area	Lack of availability of facility in local hospital	Unable to afford treatment in local hospital	Reputation of Tertiary Care Speciality Hospital	Any other
Main hospital	33.46%	10.76%	48.84%	6.92%
Cardioneuro centre	32%	16.66%	34%	9%
Eye hospital*	50.54%	46.24%	69.35%	7.53%
Cancer hospital	35%	17.5%	40%	7.5%

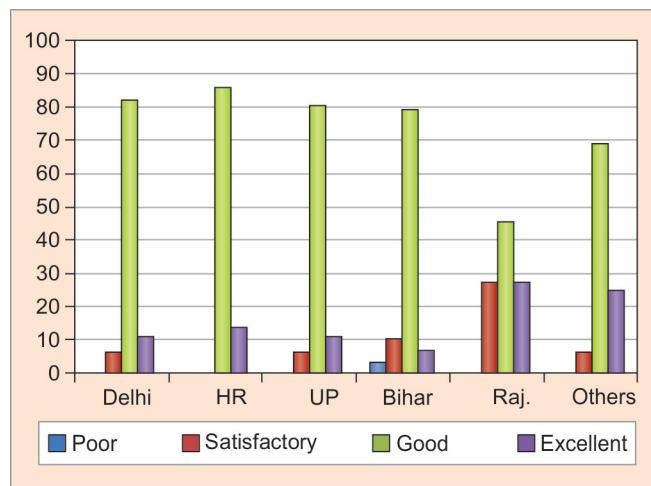
*Cumulative percentage is more than 100% as patients have more than one reason for coming to Tertiary Care Speciality Hospital

Table 5: Overall level of satisfaction

Hospital area	Excellent	Good	Satisfactory	Poor
Main hospital	26.92%	59.23%	13%	0.84%
Cardioneuro centre	8.9%	76.7%	14%	0.4%
Eye hospital	13.4%	78.49%	7.53%	0.54%
Cancer hospital	20%	70%	9.5%	0.5%
Average	17.3%	71.1%	10.9%	0.7%



Graph 1: Overall level of satisfaction



Graph 2: Level of satisfaction among patients from different states

- Dietary services
7. **Medical care:** Doctors—Approximately 95% of the respondents have labeled the care given by doctors as excellent/good and 85% have labeled that the doctors were respectful (excellent/good). While on the contrary 61% of the patients have labeled the responses of doctors as excellent/good for the queries of the patients, and remaining 39% have labeled it as satisfactory or poor. Similarly 24.73 and 25.81% of respondents have labeled the response as satisfactory or poor for nurses and paramedics respectively. These findings are in consonance

with the findings of the study A population-based survey using PPE-15: relationship of care aspects to patient satisfaction in Hong Kong Wong EL, et al (Table 1).

Patient satisfaction is an indicator of how the patient has perceived the other qualitative aspects of care and can be used as a proxy measure of those aspects. The study concludes that the overall level of satisfaction at Tertiary care speciality hospital and various Centres is quite high and encouraging, but there is always a scope of improvement. The level of satisfaction among patients from different states is quite high and almost same (Graph 2).

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