Inpatient Satisfaction: A Study of Tertiary Care Hospital

By

Pallavi Budhiraja

Dissertation submitted in partial fulfillment of the requirements of the degree

MBA Hospital and Health Management

Academic year, 2017-2019

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IIHMR UNIVERSITY

TO WHOM SO EVER IT MAY CONCERN

This is to certify that Miss. Pallavi Budhiraja student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at Wockhardt Hospital, Nasik from 04th Feb 2019 to 2rd May 2019.

The candidate has successfully carried out the study designated to her during internship training and her approach to the study has been sincere, scientific and analytical.
The internship is in fulfilment of the course requirements.

I wish her success in all her future endeavours.

Dr: Ashok Kaushik
Dean, Academics and Student Affairs
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WOCKHARDT HOSPITALS | LIFE WINS

02nd May 2019

TO WHOM SO EVER IT MAY CONCERN

This is to certify that **Ms. Pallavi Budhiraja** student of Indian Institute of Health Management Research University, Jaipur, pursuing her MBA in Hospital & Health Management, has successfully completed the project **"Inpatient Satisfaction - A study of Tertiary care Hospital"** as Management Trainee at our Hospital from 04th Feb 2019 to 02nd May 2019 (Including 4 night shifts).

She has completed training in following departments at Wockhardt Hospitals Ltd, Nasik.

1) Medical Administration, Outpatient, Diagnostics
2) Marketing
3) Billing / Call Centre
4) Housekeeping / Security
5) Materials / Pharmacy

During her aforesaid tenure, she has been found to be honest, regular and sincere.

For Wockhardt Hospitals Ltd.,

WOCKHARDT HOSPITALS NASHIK

Devendra M Gaidhani
Sr. Manager – Human Resources

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled '**Inpatient Satisfaction: A Study of Tertiary Care Hospital**' in Wockhardt Hospital, Nasik submitted by Pallavi Budhiraja Enrollment No. IIHMR-U/01/2017-19/0620 under the supervision of Dr. Seema Mehta for award of MBA in Hospital and Health Management in Health and Hospitals of the University carried out during the period from 04th Feb 2019 to 02nd May 2019 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.

Pallavi

Signature

Acknowledgement

First, I am extremely thankful to **Wockhardt hospital , Nashik** for providing me an opportunity to undergo my dissertation and flattering a part of the Unit. This opportunity has given me an extreme learning experience , a sight towards the managerial issues and a way to tackle those issues.

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WOCKHARDT HOSPITAL, NASHIK

Title: Inpatient Satisfaction : A Study of Tertiary care hospital

Author : Pallavi Budhiraja

ABSTRACT

Patients satisfaction is the important component of the healthcare industry and is difficult to measure the clinical and non – clinical factors affecting the satisfaction level of the patients. Satisfaction of the patients depends upon various factors such as interaction with the doctors and the nursing staff , availability of the staff , food services , courtesy shown by the staff , confidentiality maintained by the providers , counselling provided at the time of admission , explanation about the cost of treatment and the line of treatment , basic amenities provided.

Objective

The main objective of the study was to measure the level of satisfaction of the patients of a tertiary care hospital and to provide further recommendations.

Methodology

A descriptive cross-sectional study was conducted among the inpatient department with the inclusion criteria of patient having the length of stay of four days or more and the exclusion criteria of patient admitted in the ICU and not willing to participate. The data was collected from the 200 patients using purposive sampling through a structured questionnaire (Likert scale) , all the questions were close ended except one scale was on 1 to 5 using that parameters where 5 very good , 4 good , 3 average , 2 poor , 1 very poor.

Results

The satisfaction level of the patients in IPD towards the admission and billing process is 4.27 , doctors interaction 4.53 , nurses interaction 4.46 , diagnostics procedures 4.40 , housekeeping and cleanliness 4.17 , food services 4.33 and the basic amenities 4.35. The overall satisfaction level of the patients including all the parameters is 4.36 (87%).

Conclusion

The study states that most of the patients are satisfied with the services provided , satisfied with the visiting time of the doctor, time spent by the doctor, services provided by the nurse and the other staff, but the satisfaction level of the patient is not up to their expectation for that focus should be given to the discharge process, housekeeping people then the dietic services i.e. the study states that the In - patient area plays a crucial role and the feedback criteria help the management in improving the quality of care and in decision making

INPATIENT SATISFCATION : A STUDY ON TERTIARY CARE HOSPITAL

1.Introduction

In the health care industry, the word 'satisfaction' can be defined in numerous numbers of ways as it is the combination of past experience , expectation , understanding , social and emotional status of the person and plays a very major role as the outcome of the services solely depends on satisfaction i.e. the revenue.

Each time when the patient enters in the hospital comes with a different mindset which can be related with the cost , quality , availability , time , reputation. The main mindset of the patient while coming into the hospital is to get the best medical care get cured and can go back to their respective work back but despite getting only the best medical care there are thousands of other factors also that affects the satisfaction of the patient.

The major reason of expecting high level of satisfaction from the healthcare industry is the advanced technology which has made everything easier , accessible , accurate . Satisfaction depends upon the income groups of the people the people with low income group , illiterate they cannot be able to understand or defined satisfaction in the way in which a high-income group can . Moreover, the expectation level of the groups is totally different . people in the low-income group will get satisfied with whatever services they are receiving it can be either good or worst as for them that service is either free of cost or at less price even the factors that leads to satisfaction also differs between the two groups whereas on the other side the high-income group for them , they doesn't get satisfied till the time , they got the worth of the cost they are paying. Similarly, the categories can also be divided into the cash , credit of the government schemes.

The another parameter for the satisfaction is the cost also hospitals providing the services at low cost for them consumers will not expect much but on the other hand if the hospital is charging very high cost then the expectation level increases undoubtedly if the market has a very high expectation from the hospital than it indicates a positive sign for the organization to attract patients but if the market research states that the expectation level is low than the organization have to be more service focused.

The major challenge health care industry is facing is to market the service as marketing the goods is easy but market the services is the very difficult task , another challenge can be the source of information the patient/ consumer is receiving because the information received about the services can be vise versa .

In the recent past, studies on patient satisfaction gained popularity and usefulness as it provides the chance to health care providers and mangers to improve the services in the public health facilities.

Conducting patient satisfaction surveys in our practise can lead exceptional insight into how to improve quality, care and referral rates. When performed thoughtfully and with adequate follow up, the results of these surveys can immediately affect the way-out practise does business . Satisfied customers are essential to our practice's continued success, no matter our practise size, speciality or locations .

National Accreditation board for Hospitals and Healthcare providers (NABH) has set certain quality standards their main significance is to test the quality of services , in those one of the quality indicators is the patient satisfaction index which is used to track the satisfaction score of each patient , helps the quality team in setting benchmarks and the marketing team to advertise accordingly. The indicator PSI used to be measured on the basis doctors interaction , nurses interaction , dietician services, availability of reports , courtesy shown by the staff , ambience , hygiene waiting time , counselling at the time of admission , discharge process from this the marketing team also to know the source of the patient , weather is the patient is new or repeat. The factor new or old patient completely defines the image of the hospital in the market moreover the tracking is mostly done by the multispeciality hospital but only tracking the own consumers is not fare enough the team should have track on the competitors too to determine own strength and weaknesses and to position the organization in the market.

Satisfaction is a very mixed and critical concept and related with numerous numbers of factors like the life style, experience, social and economic values and society ethical and legal considerations. The Maslow theory in 1954 has given the factors associated with the satisfaction and motivation of the individual i.e. the phycological, physical, safety, self-esteemed.

In a country like India where the government focus is on generating varied number of policy and insurance schemes keeping in mind the economic level of the country for providing the quality care treatment to the population who cannot afford including the free consultation, free treatment, free medicines. The satisfaction level of the patients coming under the government is all satisfactory because for them whatever the services they are receiving is up to the mark as the service is free of cost for them but the satisfaction level and expectation is till that time only when they are unaware that getting that treatment is their right by the time they get to know the reality their expectation level becomes hundred times higher or uncontrollable.

Satisfaction / Expectation never remain stable at any point of time it will remain fluctuating , if the patient is satisfied at a point of time it doesn't mean that the satisfaction will remain constant . the tracking is to identify the dissatisfying factor which can eventually leads to the

legal problems, affects the growth of the organization. After providing immediate solution of the loopholes identifies regular monitoring is needed to identify the changes in performance whether it is related to the behaviour , process , time , availability because quality comes when all the departments are integrated with each other , collaboration reflects quality and quality reflects satisfaction.

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2.Review of literature

In this competitive modern era the demands of the consumers are rapidly changing and so the patient satisfaction also. Satisfactions can be assed in any department of the hospital whether it is in patient , outpatient. A study was carried out in the out-patient department of the teaching hospital to assess the behaviour of the staff , diagnostic and support services conclusion states that 80% of the patients are satisfied with the services provided and satisfaction is the end outcome of every procedure.(1)

Hospitals commit to provide the quality care to patients to asses that care , quality indicators are used and one of the indicators is the satisfaction index to measure the level of the satisfaction because it affects the patient loyalty , retention of staff , effectiveness , reputation , and revenue.(2)

A study was done to evaluate the patient satisfaction on certain aspects such as the counselling on taking medications , time taken for consultation , cost and the primary goal was to state that in the era of technology expectation and demands has taken hikes and is the right of every patient to demand the best possible care and is the responsibility of each member of the organization to satisfy their needs during their stay in the hospital and analysing those services on certain aspects will provide us the clear image of the areas to improve upon.(3)

A study among outpatient department was conducted to depict that there is always a need to measure the health care system , for that patient satisfaction serves as a tool to analyse and then provide suggestion to improve and that is to be done after receiving about the services provided and used. The feedback was generated through a structured a questionnaire on certain services example the waiting time , appointment time , among the randomly selected 200 patients and the result states that 90% of the patients are satisfied and area needs to be improved is the waiting time and the behaviour of the nursing staff and it also depicts the source of patient entering the hospital an awareness about the services among the patients. (4)

Patient Satisfaction is not an individual factor it corelates with other factors like the relationship of the services, patient satisfaction, employee satisfaction and hospital status in the market. Based on these factors a hypothesized model was studied which states that the performance of the hospital depends upon on the factors and the system as every individual in the hospital directly or indirectly depends on each other meanwhile there is diversion of the labour and everyone has the highly specialised work assigned to them therefore doctors and nurses cannot work separately. So, if the system must work smoothly, reaching its aim and objective for that there should be proper coordination between the departments because better employee satisfaction leads to better patient care which eventually results in the patient satisfaction than to hospital reputation. (5)

Study conducted by Khosla et al stated that the satisfaction also depend upon the income groups of the population so the study was divided into low and high income groups and the results stated that the in the low income groups relaxation in visiting, improved diet, better service by housekeeping staff, transport facilities after discharge , sympathetic behaviour.(factors affecting satisfaction) moreover in the high income group personal attention from doctors , sincere behaviours by class iv staff and physical factors (factors affecting satisfaction).(6)

Chopra et al carried out a study in which the participant role was observed using a flow chart which denote the factors leads to output of the services provided. In the report of the study conducted it was concluded that the hospital services provided can be a factor of dissatisfaction but to achieve the 100% satisfaction, best medical care has a very crucial role. (7)

Study conducted in the in-patient department of the hospital on eight quality dimensions to measure the level of satisfaction among the IPD patients , the dimensions were general satisfaction, technical quality, interpersonal manner, communication, financial aspects, time spent with doctors, accessibility and convenience, and hospital services. The survey was conducted among the 100 in patients including the high patient flow areas . Most of the respondents were male and belongs to the age group of 31-45 years. Findings depict that highest level of satisfaction was found for interpersonal manner (86.3%) followed by communication (85.4%), general satisfaction (79.3%), and technical quality (77.3%). Least level of satisfaction was found for financial aspects (61.6%), followed by hospital services (68%), accessibility and convenience (73.5%), and time spent with doctor (76.9%) (8)

In todays time there is no such difference between a hotel and hospital patient and the attendant coming to the hospital requires treatment beyond their expectation and this drastic change in the attitude and perception of people is due to the huge growth of the social media , technology and increase in alternatives . Another study was carried out on assessing the satisfaction through the feedback form. questionnaire used was on the parameters like the behaviour of the doctor, nurses, cleanliness. The findings of the study depict that most of the population was satisfied the problem area seen was the cleanliness, food services and the behaviour of the housekeeping staff. (9)

A cross sectional study was carried out in SKIMS hospital to measure the patient satisfaction among 400 patients to know the perception towards the behaviour of the staff , registration process and the other services provided. The results of the study states that the major reason of choosing the hospital is the skilled doctors , also satisfied with the rest of the services and regular monitoring should be there on regular basis to provide quality care and minor regular changes are required in the processes of the organization.(10)

Hospitals are equipped with high work force , leads to chances of error due to which there is decline in the index score. A study was conducted on five major patient centric areas in the hospital which states about the performance improvement strategy that included MD-RN partnerships, co-mentoring, and unit staff development and involvement in the problem-solving process. The findings of the study were a balanced improvement in satisfaction index in a time of six months . (11)

A study was conducted in the NKS hospital , Delhi to check the patient compliance against the recommended treatment so as to determine the patient satisfaction based on the clinical outcome the data was collected through a structures questionnaire including information about medical care services characteristics. The result suggests that the level of satisfaction differs with the different intervention, but majority of the patient were satisfied with the service provided. And it shows that measuring satisfaction in terms of patient experience towards the clinical care or the other services is serves as tool in decision making.(12)

3.Rationale of the study

Patient Satisfaction is an important parameter in measuring the effectiveness of the services delivered so the main rationale of the study is the determine scope of improvement in the services provided to compete in the competitive environment. Moreover, this study will give the decision makers an opportunity to improve the quality of care delivered by the hospital to the patients.

4.Aim: Inpatient Satisfaction :.A Study of Tertiary Care Hospital

5.Objectives

- To study the level of satisfaction of IPD patients
- To identify the areas with low satisfaction level
- To suggest measures for improvement of services leading to better patient satisfaction

6.Research Question

What is the level of satisfaction of IPD patient at Wockhardt Hospital?

7.Materials and Methods

7.1Study area – Inpatient department including all speciality (Neurology , Nephrology , Orthopaedics, Urology , General Surgery , Cardiac , Spine care) , Wockhardt Hospital.

7.2Study design – Descriptive Cross – sectional study

7.3Inclusion criteria – Patient admitted in IPD with length of stay of four days or more and including specialities.

7.4Exclusion criteria – Patient who were not willing to participate and ICU patients was excluded.

7.5Sample size –200 IPD Patient. (At the time of the study 663 patients were admitted and 10% of the population were taken whose length of stay were more than four days).

7.6Sampling technique – Non – probability convenient sampling.

8.Data collection procedure (tool) – The data was collected through a structured questionnaire in the in-patient department after taking oral consent from the patient. All the questions in the questionnaire were closed ended except one and Likert scale were used.(5 very good , 4 good , 3 average , 2 poor , 1 very poor).

8.1 Data collection technique – Personal Interview with the patients.

8.2 Data Analysis plan – The data gathered through questionnaire was analysed using MS Excel and findings were then tabulated in MS Word.

9.Items of the Questionnaire

Inpatient Satisfaction : A study of Tertiary Care Hospital was conducted among the 200 selected patients. The data was collected through the questionnaire from the patient admitted in the wards.
The questionnaire contains the questions about the admission and billing process , doctors interaction , nurses interaction , diagnostic services , housekeeping and cleanliness , food services and the other basic amenities provided. The questions were given the same scale from very good to very poor to maintain the uniformity among the questions. Below are the analysed results of the parameters in the form tables .

10.Analysis and Interpretation

The below table depicts the score received by the admission and billing process (4.27), doctor's interaction (4.54) , nursing care (4.48) , diagnostic (4.41) , housekeeping (4.18) , food services (4.36) , amenities provided (4.34). According to the analysed result the major dissatisfier is the housekeeping and cleanliness and the admission and the billing process. Although the overall satisfaction level is 4.37.

Overall Result	PSI	Percentage
Perception towards Admission and Billing process	4.27	85.4
Perception towards Doctors Interaction	4.54	90.7
Perception towards Nursing care	4.48	89.5
Perception towards Diagnostic	4.41	88.2
Perception towards Housekeeping and Cleanliness	4.18	83.6
Perception towards Food services	4.36	87.1
Perception towards Amenities provided	4.34	86.8
Overall rating	4.37	87.3

Table1: Overall Score of the various parameters of IPD

Discussing the various sub - dimensions of the inpatient department and the score obtained.

The below table depicts the various sub dimensions of the admission and the billing process and the score obtained .

Perception towards Admission and Billing process	PSI	Percentage
Counselling provided for admission	4.33	86.6
Time taken to complete the admission process	4.26	85.2
Time taken for discharge process	4.11	82.1
Courtesy and efficiency of the staff	4.33	86.6
Clarification about the cost of treatment	4.34	86.7
Overall rating	4.27	85.4

Table2: Perception towards the Admission and the Billing process.

There is a procedure of providing counselling to the patients at the time of admission regarding the documents required , surgery estimates , average length of stay of the patient according to the condition and the lumpsum bill amount. The dimension **counselling provided for admission** score 4.33 which states that around 86% of the patients are satisfied with the process and rest 14% are not. The reason for that 14% dissatisfier is lack of knowledge and trained staff.

The dimension **time taken to complete to admission process** score 4.26 which states that 85% of the patients are satisfies and the rest 15% are not. The reason for that 15% dissatisfier is the delay in the admission process and sending pre-authorisation letter to the insurance company and non – availability of the staff at the time of admission.

The third-dimension **time taken for discharge process** score the lowest 4.11 which states that around 82% of the patients are satisfied and rest 18% are not . The reason for that is the increase in a greater number of queries in the pre-authorisation form due to which the approval gets delayed , delay in preparing the discharge summary and late visiting hours of doctors.

The fourth dimension is the **courtesy and efficiency of the staff** which score 4.33 states the 86% of the patients are satisfied and the rest 14% are not satisfied. The reason for that is untrained staff at the billing counter.

The fifth dimension is the **clarification about the cost of treatment** which score 4.34 depicts that around 14% of the patients are not satisfied. The reason for that is not providing the correct cost estimates at the time of admission , the staff lacks the knowledge of making the estimates and not intimating the patients on regular basis about the increase in bill amount details are mentioned in the table no. 2.

The below table depicts the various sub dimensions of the doctors interaction and the score obtained.

Perception towards Doctors Interaction	PSI	Percentage
Explanation provided about the health condition and line of treatment	4.54	90.7
Care provided in terms time spent, question answered regular visit by the doctor	4.54	90.7
Confidentiality maintained by the doctor while examining and explaining the treatment	4.53	90.7
Follow up instruction provided by the doctor during discharge	4.53	90.7
Overall rating	4.57	90.7

Table3: Perception towards the Doctors Interaction

According to the NABH norms there are some standard operating procedures for the doctors while examining and interacting with the patients.

The dimensions explanation provided about the health condition and line of treatment , care provided in terms of time spent , question answered and regular visit by the doctor , confidentiality maintained by the doctor while examining and explaining the treatment and follow up instruction provided by the doctor during discharge**.** All the parameters score around 4.5 which states that 90% of the patients are satisfied although it is a good score but that 10 % also plays a crucial role . The reason for that 10% is few of the doctors are not providing adequate time while examining and there is no separate room for explaining the confidential information. Although the overall score is 4.57.

The below table depicts the various sub dimensions of the Nurses Interaction and the score obtained .

Perception towards Nurses Interaction	PSI	Percentage
Care provided in terms of response to the call answering questions and treatment provided	4.49	89.8
Courtesy shown by the nursing staff	4.46	89.1
Availability of the nursing staff	4.45	89.0
Confidentiality maintained by the nurses and medication provided on time	4.49	89.8
Follow up instruction provided by the nurses during discharge	4.49	89.7
Overall Index score	4.48	89.5

Table4: Perception towards the Nurses Interaction

There are some patient safety devices installed in the hospital for providing proper care and safety to the patients , one of them is the nurse call which is also necessary for the effective communication between the nurses and the patient. The dimension care provided in terms of response to the call bell , answering questions and treatment provided scores 4.49 which states that 89% of the patients are satisfied with the service and 11% are not. The reason for that some of the new recruited staff lacks the clinical knowledge and delay in response of the call bell.

Another dimension is the courtesy shown by the nursing staff scores 4.46 which depicts that around 10% of the patients are unsatisfied which is because of the rude behaviour of the staff.

The third dimension is the availability of the nursing staff scores 4.45 lowest among the others which depicts that around 88% of the patients are satisfied and rest of them are not because of the shortage of nursing staff in night.

The fourth dimension is the confidentiality maintained by the nursing staff scores 4.49 which states that around 11% of the patients are not satisfied because of the untrained staff and non-availability of separate counselling room of each floor.

The fifth dimension is the follow up instruction provided by the nursing staff at the time discharge which shows that majority of the patients are satisfied with the instruction provide but few of them (11%) are not. Although the overall satisfaction score is 4.48.

The below table depicts the various sub dimensions of the diagnostic procedures and the score obtained .

Perception towards Diagnostic	PSI	Percentage
Explanation about the procedure by the technician	**4.45**	**88.9**
Courtesy shown by the technician	**4.45**	**89.0**
Timeliness of the procedure	**4.47**	**89.3**
Time taken for Emergency procedures	**4.34**	**86.8**
Availability of reports on time	**4.34**	**86.8**
Overall rating	**4.41**	**88.2**

Table5: Perception towards the Diagnostic Procedures

There is a procedure of describing about the benefit and use of the procedure before the test going to be performed. The dimension explanation about the procedure by the technician score 4.45 which demonstrate that the level of satisfaction among the patient is 88% , decrease in that 12% is due to the newly recruited untrained staff.

The dimensions Courtesy shown by the technician while performing the procedure and timeliness of the procedure depicts that the satisfaction level of the patients is around 4.45 i:e 89%.

Time taken for emergency procedure and availability of report on time scores the lowest among all the dimensions i:e 4.34.

The below table depicts the various sub dimensions of the housekeeping and cleanliness and the score obtained .

Perception towards housekeeping and cleanliness	Rating	Percentage
Cleanliness of the rooms and toilets	**4.16**	**83**
Cleanliness of the linen provided (clothes, bedsheets, pillow cover, blanket)	**4.17**	**83.4**
Courtesy shown by the housekeeping staff	**4.20**	**83.9**
Availability of the staff	**4.19**	**83.8**
Overall rating	**4.18**	**83.6**

Table6: Perception towards the Housekeeping and cleanliness

Perception towards housekeeping and cleanliness consist of various sub dimensions i:e cleanliness of the rooms and the toilets , cleanliness of the linen provided , courtesy shown by the housekeeping staff , availability of the staff as the table depicts that the 83% of the patients are satisfied with the services and rest 17% are not satisfied reason being the irresponsible and untrained staff, rude behaviour of the housekeeping staff , some of them also complaint about the shortage of staff for transporting the patient at the time of discharge and availability of pests and rodents in one or two wards.

The below table depicts the various sub dimensions of the food services and the score obtained .

Perception towards Food services	PSI	Percentage
Timeliness of the food services	**4.33**	**86.6**
Taste of the food provided	**4.38**	**87.6**
Overall rating	**4.33**	**86.4**

Table7: Perception towards the food services

The above table depicts the dimensions of the food services i:e timeliness of the food services and taste of the food provided , as the data shows that the satisfaction level of the patients is 86% , the reason of not receiving the 100% satisfaction level is that few of the patients were having complaint related to the timings of the food delivery , not providing the prescribed diet.

The below table depicts the various sub dimensions of the basic amenities provided and the score obtained.

Perception towards the amenities provided	PSI	Percentage
Air-conditioning, television, water facilities, parking facilities and ambience.	**4.32**	**86.3**
Services for the attendants	**4.37**	**87.3**
Overall rating	**4.34**	**86.8**

Table8: Perception towards the amenities provided

.

The observed data demonstrate that the almost majority of the patients are satisfied with the basic amenities provided by the hospital but few of them are not therefore around 14% and that is because of the issues related to the non-functioning of the air - conditioner , fans in the general ward. Attendants were also having complaints regarding the water facilities and visiting pass.

10.SUGGESTIONS

- **Admission and billing**

As per the hospital standard operating procedure there is criteria of providing prior discharge intimation , providing cost estimates , and sending pre auth asap for approval and completing the admission process with in 5-7 mins but as the findings depicts the customer care are not following the standard criteria for that separate customer care can be assigned for bed side discharge specially for cash patients , discharge summary must be prepared before 9 in the morning , regular training must be given to the billing staff to reduce the query in pre-auth letter , training should be provided on how to form the cost estimates for surgery and to make the staff more effective (increase work speed).

- **Nurses**

Although majority of the patients are satisfied with the nursing staff but around 10% were not. In the night duty more, number of nurses staff is required and regular training to the staff to upgrade the clinical knowledge as few of them lacks.

- **Doctors**

Majority of the patients as 90% of the patients were satisfied with the doctors interaction but that 10% is the major dissatisfier. To reduce that , there should be separate counselling room on each floor to maintain the confidentiality and training should be provided to the new generation doctors (RMO) for the soft skills.

- **Housekeeping**

There were many complaints from patients side related to housekeeping because this is the major dissatisfier and as cleanliness is necessary to reduce the chances of hospital acquired infections. Pest control should be done thrice a week and according to the season , separate staff must be assigned to clinical and non-clinical department to reduce the chances of cross infection and this will make the staff available when the patient requires , regular training should be given on the cleaning process as per SOPs and surprise audit should be conducted by the housekeeping supervisor to check the cleanliness of the linen and the toilets and there must a SOP for the non-clinical staff to get the hospital clean before 9:30(before the operational work begins.) Moreover, there were complaints about the rude behaviour of the housekeeping staff for that regular training provided to them related to attending the customer and to make them understand their role and responsibilities.

- **Dietic**

There were few complaints related to the delay in the lunch , evening tea and hotness of the food provided . Surprise audit should be conducted by the food and beverages head to check the delivery time of the food and a checklist should be there to note the time of the delivery and regular monitoring is required.

- **Maintenance**

Some of the AC and fans of few wards were not working properly. Frequent facility audit should be conducted by the maintenance department and daily rounds with the MDTR team.

11.Conclusion

Hospital provide varied number of services to the patient, they ensure to provide the quality of services to everyone without any discrimination, as they know that the major revenue comes from patient's side and they are one to create an image of the brand in others mind i.e. the mouth to mouth marketing for this satisfaction of the patient towards the services provided is necessary and to measure that a quality indicator is there in hospital which is also mandatory from the NABH to measure i.e. the satisfaction index . The study demonstrates that majority of the patients are satisfied with the services provided, satisfied with the visiting time of the doctor, time spent by the doctor, services provided by the nurse and the other staff, but the satisfaction level of the patient is not up the expectation , for that recommendations have been given. The study was carried out in the Inpatient department through a structured questionnaire among the 200 patients . It is worthwhile to note that there is a need for improvement in the inpatient department and focus should be given to the discharge process, housekeeping people then the dietic services i.e. the study states that the In - patient area plays a crucial role and the feedback criteria help the management in improving the quality of care , decision making and setting benchmarks .

12.ANNEXURES

PATIENT SATISFACTION FEEDBACK FORM (IPD)

Patient Name:

Gender: Male /Female

Consultant Name:

Location:

Kindly rate the following services that you have availed, If not kindly skip to the next question.

SCALE: 5-very good 4-good 3-fair 2-poor 1-very poor

1.Perception towards Admission and Billing process

Counselling provided for admission

5 4 3 2 1

Time taken to complete the admission process

5 4 3 2 1

Time taken for discharge process

5 4 3 2 1

Courtesy and efficiency of the staff

5 4 3 2 1

Clarification about the cost of treatment

5 4 3 2 1

2.Perception towards Doctors interaction

Explanation provided about the health condition& line of treatment and answering questions

5 4 3 2 1

Care provided in terms of time spent, question answered, regular visit by the doctor

5 4 3 2 1

Confidentiality maintained by the doctor while examining and explaining the treatment

5 4 3 2 1

Follow up instruction provided by the doctor during discharge

5 4 3 2 1

3.Perception towards Nursing care

Care provided in terms of response to the call bell answering questions and treatment provided

5 4 3 2 1

Courtesy shown by the nursing staff

5 4 3 2 1

Availability of the nursing staff

5 4 3 2 1

Confidentiality maintained by the nurse's and medication provided on time

5 4 3 2 1

Follow up instruction provided by the nurses during discharge

5 4 3 2 1

4.Perception towards Diagnostic

Explanation about the procedure by the technician

5 4 3 2 1

Courtesy shown by the technician

5 4 3 2 1

Timeliness of the procedure

5 4 3 2 1

Time taken for Emergency procedures

5 4 3 2 1

Availability of reports on time

5 4 3 2 1

5.Perception towards housekeeping and cleanliness

Cleanliness of the rooms and toilets

5 4 3 2 1

Cleanliness of the linen provided (clothes, bedsheets, pillow cover, blanket)

5 4 3 2 1

Courtesy shown by the housekeeping staff

5 4 3 2 1

Availability of the staff

5 4 3 2 1

6.Perception towards Food services

Timeliness of the food services

5 4 3 2 1

Taste of the food provided

5 4 3 2 1

7.Perception towards the amenities provided

Air-conditioning, television, water facilities, parking facilities, ambience

5 4 3 2 1

Services for the attendants

5 4 3 2 1

8.Would you recommend Wockhardt hospital to others?

Yes/No

9. Please tell us what would like the best about the care you received .

_____

Thank You for your feedback

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