

To Study Patient Satisfaction of the Indoor Patient in
Gastroenterology and Outdoor Patient in Dialysis Department

By

Rochita Sharma

*Dissertation submitted in partial fulfillment of the requirements of the degree
MBA Hospital and Health Management*

Academic year, 2017-2019



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TO WHOMSOEVER MAY CONCERN

This is to certify that Dr. Rochita Sharma, student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at Medanta the Medicity Hospital, Gurugram from 11th February to 10th May 2019.

The Candidate has successfully carried out the study assigned to her during internship training and her approach to the study has been sincere, scientific and analytical.

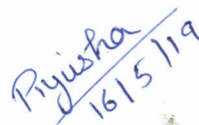
The Internship is in fulfillment of the course requirements.

I wish her all success in all her future endeavors.



Dr. Ashok Kaushik
Dean, Academics and Student Affairs
The IIHMR University, Jaipur

16 May 2019



Dr. Piyusha Majumdar
Assistant Professor
The IIHMR University, Jaipur

Date: 11.05.2019

INTERNSHIP COMPLETION CERTIFICATE

This is to certify that **Ms. Rochita Sharma** student of **IIHMR University, Jaipur (Haryana)**, has completed her 3 months internship with **Global Health Private Ltd. (GHPL) Medanta – The Medicity Hospital** Sec-38, Gurgaon - 122001 (Haryana), from 11th Feb' 2019 to 10th May'2019 in the department of **Quality**.

She has completed following projects during her internship:

Project Title: Patient satisfaction

- Indoor patient in Gastroenterology.
- Outdoor patient in dialysis department.

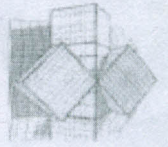
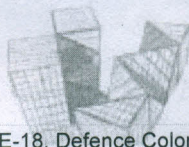
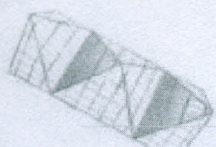
We wish her all the best for her future endeavors.

For **GLOBAL HEALTH PVT LTD**

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ANJU VERMA

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CERTIFICATE BY SCHOLAR

This is to certify that all ethical issues have been considered while collecting data for my dissertation titled **To Study Patient Satisfaction of Indoor Patient Gastroenterology and Outdoor Patient in Dialysis Departments** and submitted by Dr. Rochita Sharma Enrolment No 0652 under the supervision of **Dr. Piyusha Majumdar** for award of MBA in Hospital and Health Management in Health and Hospitals of the University carried out during the period from 3/02/2019 to 4/05/2019 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.



Signature of Student

ABSTRACT

Title: To study patient satisfaction of the indoor patients in gastroenterology and outdoor patients in dialysis departments

Background: Health care quality is a global issue. The health care industry is undergoing a rapid transformation to meet the ever-increasing needs and demands of its patient population. Quality of health services was traditionally based on professional practice standards, however over the last decade; patient's perception about healthcare has been predominantly accepted as an important indicator for measuring quality of health care and a critical component of performance improvement and clinical effectiveness. Patient satisfaction and quality of service is a multidimensional aspect. To improve quality of health services it is most important to obtain feedback from the consumer, In every aspect satisfaction depends mostly on the expectation. So, to measure quality of services in a hospital it is important to measure patients or patient party's expectation and perception and find out their knowledge to evaluate quality of services.

Objectives:

- To study the level of patient satisfaction at the hospital
- To study the different factors affecting patient satisfaction
- To suggest measure for improvement of services leading to better patient satisfaction.

Method: Descriptive cross sectional study was carried out over a period of three months at Medanta the Medicity, Gurugram. The data collection tool used was a pretested structured questionnaire and face to face interviews with the patients were carried out to know the overall satisfaction level of the patients visiting IPD and OPD of Medanta hospital.

Conclusion: The patients were satisfied with the services like admission process, accommodation, quality of care provided by doctors and nurses, comfort and privacy but seemed to be bit unsatisfied with the discharge process and food and beverage department. Also, the average score of overall patient satisfaction was seen more in opd dialysis than in ipd gastroenterology department.

Key Words: IPD,OPD,patient satisfaction

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I would also like to acknowledge Dr. Piyusha Majumdar, my guide from IIHMR University, Jaipur. I am gratefully indebted to her for her very valuable comments and guidance on this project.

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Finally, I would like to thank my friends who have always supported, encouraged and believed in me, in all my endeavors.

Dr Rochita Sharma

MBA-HM (2017-2019)

Roll No: 0652

TABLE OF CONTENTS

TOPICS	PAGE NO.
1. INTRODUCTION 1.1 Aim of the study 1.2 Objective of the study 1.3 Implication of the study 1.4 Outline of the study 1.5 Limitation of the study	7-8
2. REVIEW OF LITERATURE	9-11
3. METHODOLOGY	12-13
4. OBSERVATIONS	14-18
5. ANALYSIS	19-24
6. RECOMMENDATIONS	25
7. CONCLUSION	25
8. REFERENCES	26-27
9. ANNEXURE	28-30

LIST OF FIGURES

Fig 1	Overall satisfaction in IPD (gastroenterology)
Fig 2	Front office/ help desk (gastroenterology)
Fig 3	Accommodation and facilities for attendant (gastroenterology)
Fig 4	Medical and nursing process (gastroenterology)
Fig 5	Discharge process (gastroenterology)
Fig 6	Other facilities (gastroenterology)
Fig 7	Front office /help desk (dialysis)
Fig 8	Medical and nursing process (dialysis)
Fig 9	other facilities and overall satisfaction (dialysis)
Fig 10	Overall satisfaction in opd and ipd

PROJECT TITLE: TO STUDY PATIENT SATISFACTION OF THE INDOOR PATIENTS IN GASTROENTEROLOGY AND OUTDOOR PATIENTS IN DIALYSIS DEPARTMENTS AT MEDANTA THE MEDICITY, GURUGRAM

1. INTRODUCTION

Health care quality is a global issue. The health care industry is undergoing a rapid transformation to meet the ever-increasing needs and demands of its patient population. Hospitals are shifting from viewing patients as uneducated and with little health care choice, to recognizing that the educated consumer has many services demands and health care choices available. Respect for patient's needs and wishes, is central to any humane health care system. Quality of health services was traditionally based on professional practice standards, however over the last decade; patient's perception about healthcare has been predominantly accepted as an important indicator for measuring quality of health care and a critical component of performance improvement and clinical effectiveness.

Patient satisfaction and quality of service is a multidimensional aspect. To improve quality of health services it is most important to obtain feedback from the consumer. In every aspect satisfaction depends mostly on the expectation. So, to measure quality of services in a hospital it is important to measure patients or patient party's expectation and perception and find out their knowledge to evaluate quality of services.

Patient satisfaction has been defined as the degree of congruency between a patient's expectations of ideal care and his /her perception of the real care he receives. It is a multidimensional aspect, represents a vital key marker for the quality of health care delivery.

Various dimensions of patient experience have been identified, ranging from admission to discharge services, as well as from medical care to interpersonal communication. Well recognized criteria include responsiveness, communication, attitude, clinical skill, comforting skill, amenities, food services, etc. It has also been reported that the interpersonal and technical skills of health care provider are two unique dimensions involved in patient assessment of hospital care. Better appreciation of the factors pertaining to client experience would result in implementation of custom-made programs according to the requirements of the patients, as perceived by patients and service providers. Following increased levels of competition and the emphasis on consumerism, patient experience has become an important measurement for monitoring health care performance of health plans.

Patient is the best judge since (s)he accurately assesses and provides inputs which can help in the overall improvement of quality health care provision through the rectification of the system weaknesses by the concerned authorities.

1.1 AIM OF STUDY:

The aim is to study the level of patient satisfaction to understand the emerging needs of the patient in terms of quality health care and to identify strategies that may help in increasing patient satisfaction scores and sustain patient loyalty on a long-term basis.

1.2 OBJECTIVES: -

- To study the level of patient satisfaction at the IPD gastroenterology and OPD dialysis departments.
- To study the different factors affecting patient satisfaction
- To suggest measure for improvement of services leading to better patient satisfaction

1.3 IMPLICATIONS OF THE STUDY

The study would help us reveal: -

- Degree of patient satisfaction with different services in ipd and opd
- Overall satisfaction level of the patients with the services at the hospital
- Patient will get a better quality of health care services

1.4 Outline of the study

Many previous studies have developed and applied patient satisfaction as a quality improvement tool for health care providers. Thus, patient satisfaction is an important issue both for evaluation and improvement of healthcare services, this study consists of a set of questions that have been circulated to respondents in the hospital and face to face interview was carried out. The questions probe various attributes of patients' satisfaction of services in the hospital.

Ethics had been taken into consideration by taking an informed consent from the respondents before answering the questionnaire. The respondents were assured that the participation in the study was completely voluntary and they were free to withdraw. The respondents were also informed that the data collected would be shared with the guide allotted for the study and that the study was being conducted for academic purposes only.

1.5 Limitations of the study

The study was for a limited time period of about three months and the study could only cover patients who could read and write in English and Hindi

2. REVIEW OF LITERATURE

- **Long-term patient satisfaction of gastrointestinal endoscopic procedures**

Konstantinos Triantafyllou, Paraskevas Gkolfakis, Maria Triantafyllou, Xhoela Ndini, Anastasia Melissaratou, Giannis-Aimant Moustafa, Eleni Xanthopoulou, Georgios Tziatzios, Georgia Vlachonikolou, Vasilios Papadopoulos, Evdoxos Pantelakis, Chrysoula Malli, and George D. Dimitriadis

This study assessed patient satisfaction in a Greek Academic endoscopy facility, Consecutive outpatient filled a satisfaction questionnaire right after their endoscopy Overall patient satisfaction was measured by their willingness to repeat endoscopy in our facility and to further recommend it. Participant satisfaction regarding pre-procedural, procedural and post-procedural issues was measured using a five-step Likert scale in 19 items with 4 and 5 scores indicating favourable responses. Pareto analysis was used to determine service issues requiring improvement.

Over six months, 501 patients participated (89.4% and 87.8% response rate at D3 and M3 assessments, respectively). More than 97% of the participants would repeat the procedure in our facility and would recommend our endoscopy service, at all three assessments. Pareto analysis identified waiting time until the appointment and on the day of the examination, discomfort during and after the endoscopy, time to obtain the pathology report and overall management of the patient problems as the issues requiring improvement. No predictor of high satisfaction score has been identified. No serious late adverse events were reported

Despite the overall high levels of patient satisfaction, management of patient discomfort and organizational issues need improvement.

- **Patient satisfaction with in-center hemodialysis care: an international survey**

Suetonia C Palmer, Giorgia de Berardis, Jonathan C Craig, Allison Tong, Marcello

This study was done to evaluate patient experiences of specific aspects of haemodialysis care across haemodialysis clinics within a single provider in Europe and South America in which total 2145 (78.1%) adults responded to the questionnaire. Fewer than half (46.5% (95% CI 44.5% to 48.6%)) rated their overall care as excellent. Global perceptions of care were uninfluenced by most respondent characteristics except age and depressive symptoms; older respondents were less critical of their care (adjusted OR for excellent rating 1.44 (1.01 to 2.04)) and those with depressive symptoms were less satisfied (0.56 (0.44 to 0.71)). Aspects of care that respondents most frequently ranked as excellent were staff attention to dialysis vascular access (54% (52% to 56%)); caring of nurses (53% (51% to 55%)); staff responsiveness to pain or discomfort (51% (49% to 53%)); caring, helpfulness and sensitivity of dialysis staff (50% (48% to 52%)); and ease of reaching dialysis staff by telephone (48% (46% to 50%)). The aspects of care least frequently ranked as excellent were information provided when choosing a dialysis modality (23% (21% to

25%)), ease of seeing a social worker (28% (24% to 32%)), information provided about dialysis (34% (32% to 36%)), accuracy of information from nephrologist (eg, about prognosis or likelihood of a kidney transplant; 37% (35% to 39%)) and accuracy of nephrologists' instructions (39% (36% to 41%)). Haemodialysis patients are least satisfied with the complex aspects of care. Patients' expectations for accurate information, prognosis, the likelihood of kidney transplantation and their options when choosing dialysis treatment need to be considered when planning healthcare research and practices.

- **Evaluation of Patient Satisfaction and Experience of Care for Medicare Beneficiaries with End-Stage Renal Disease (ESRD): Impact of the ESRD Prospective Payment System (PPS) and ESRD Quality Incentive Program (QIP)**

This report describes research that Acumen, along with our partner, Westat, conducted for the Centers for Medicare & Medicaid Services (CMS). The project assessed the impact of a new payment system and new quality incentives on Medicare beneficiaries with end-stage renal disease (ESRD). Under the ESRD Prospective Payment System (PPS), implemented in 2011, a service provider or a renal dialysis facility receives a bundled payment for a patient's renal dialysis services. The ESRD Quality Incentive Program (QIP), implemented in 2012, was designed to ensure that service providers and renal dialysis facilities would meet or exceed performance and quality targets. Both the PPS and QIP were established in accord with the Medicare Improvements for Patients and Providers Act of 2008. The research that Acumen and Westat conducted was designed to assess beneficiary experiences and satisfaction, including unintended consequences, following ESRD PPS/QIP implementation.

- **A study of patient satisfaction towards out patient department services (opd) of a hospital and research centre using exit interview**

Madhavi Mankar¹, Deepa Velankar², Sumedha Joshi³, Aasawari Nalgundwar⁴

This study was conducted in a Hospital and Research Centre in Navi Mumbai area through exit Interview. Data were collected using structured questionnaire during period January 2010 to March 2010. Results: Out of the 508 patients interviewed for the study, 228 (44.9%) were males and 280 (55.1%) were females. Majority of the patients (44.3%) belonged to the age group 21-40 yrs, followed by 20.47% in the age group 41-60 yrs. There were only 60 (11.8%) patients who were more than 60 yrs of age. When enquired regarding examination conducted by different staff members, 260 patients (51.2%) were examined by Junior doctors and 144 (28.3%) were examined by Senior doctors. 84 patients (16.5%) were examined by Residents. thus it was seen that more than half the patients were examined by Junior doctors. More than half the patients rated the following determinants as good: waiting time in the hospital (55.1%), privacy in the hospital (59.1%) and time given by doctors (59.1%). However Information

Education and Communication (IEC) by the doctors was rated at 37%. The problems perceived by patients were as follows: dirty toilets and un-cleanliness was perceived by 29.9% of patients, while 33.9% said that they were not examined by senior doctors, 19.7% complained that medicines were not available at a subsidized rate while 11.8% said that x-ray and Ct scan were not available sometimes. It was seen that the satisfaction level of the patients with the services delivered by the hospital was good on most of the parameters. Some difficulties were faced by the patients in respect of availability of medicines at subsidized rates, delay in radiology or pathology reports and availability of senior doctors.

- **A study on patient satisfaction in out patient department of secondary care hospital of Bhopal**

Shelaj Joshi, Mahesh Kumar Joshi

This study was done in outpatient department of Jaiprakash Hospital of Bhopal over a period of two months. The research instrument for a data collection was a structured questionnaire for assessing the patient satisfaction. The experience and accessibility were categorized into good and poor while satisfaction into high and low using best criteria. Statistical analysis: Convenience sampling done for selection of patients registered in Medicine OPD. The patients had the highest level of experience from medicine department OPD about helpfulness of nurses, about light and ventilation inside the OPD and about the good communication from the pharmacist. The poor experience was from the number of doctors in OPD and about the diagnostic place. As far as accessibility is concerned, 66% of patients had good accessibility towards medicine OPD while remaining 34% had poor accessibility towards Medicine OPD. Maximum number of respondents had very good experience while just small number of respondents had poor experience and majority of the patients had good accessibility regarding waiting time, service process and working hours.

- **Evaluation of level of satisfaction among indoor patients attending in a tertiary care hospital of Rajnandgaon**

Nirmal Verma¹, Nitin Kamble^{2*}, Dhiraj Bhawnani², Kiran Makade², Monika Dengani², Tarun Kaushik²

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.

3. METHODOLOGY:

STUDY AREA – In patient in gastroenterology and outpatient in dialysis departments in Medanta the medicity hospital

STUDY DESIGN – Descriptive Cross sectional

STUDY PERIOD- 11th February- 10th May 2019.

STUDY POPULATION – Patients admitted in the In-patient gastroenterology Department and outdoor patient coming in dialysis department

SAMPLE SIZE –200 patients from IPD and OPD (taking 95% as confidence interval)

SAMPLING METHOD – Non-probability convenience sampling

DATA COLLECTION – Observation and Interview method

DATA ANALYSIS – Using Microsoft Excel.

PARAMETERS ASSESSED FOR IPD–

1. Help desk/Registration/front office.
2. Accommodation
3. Facilities for attendants
4. Medical and nursing process
5. Discharge process
6. Other Facilities like:
 - Waiting area
 - Parking and security
7. Overall behavior

PARAMETERS ASSESSED FOR OPD–

1. Help desk/registration / front office
2. Medical/nursing/technician process
3. Other facilities:

- Waiting area
- Pharmacy department
- Billing department
- Parking and security

4. Overall behavior

NATURE OF DATA: - Quantitative data collected through survey questionnaire technique.

SCALE OF RATING RESPONSES

- 4 = Very Good
- 3 = Good
- 2 = Average
- 1 = Poor
- 0 = No Response

TYPE OF DATA: -

1. Collected through direct observations.
2. Interacting with the patients or the attendants of the patients in IPD gastroenterology and OPD dialysis departments of hospital.
3. Information obtained through Hospital records.
4. Information gathered through internet.

STUDY TECHNIQUE USED: -

Questionnaire technique was used including both open ended and closed-ended questions.

STUDY TOOLS USED: -

- 1- Feedback forms
- 2- Discharge Report

4. **OBSERVATION 's: -**

In Patient Department

S. NO.	HELP DESK	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	Please rate the ease with which you could contact the hospital	92	8	0	0	0	100	3.92
2	How well did we respond to your queries.	64	35	1	0	0	100	3.63
3	How was your admission process	81	18	1	0	0	100	3.8
4	Please rate the efficiency and warmth of front office team.	43	55	2	0	0	100	3.56

S. NO.	ACCOMODATION	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	How comfortable was your accommodation	80	19	1	0	0	100	3.79
2	The quality of cleanliness and efficiency of housekeeping department	9	88	3	0	0	100	3.06
3	Quality of food and efficiency of food and beverage team	7	57	31	4	0	100	2.65

S. NO.	MEDICAL AND NURSING PROCESS	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	How would you rate the quality of information and education provided by the doctor/surgeon?	95	5	0	0	0	100	3.95
2	How would you rate the communication skill of the staff?	5	93	2	0	0	100	3.03
3	How would you rate the quality of care provided by the doctor ?	88	12	0	0	0	100	3.88
4	How would you rate the quality of care provided by the nursing staff?	30	51	19	0	0	100	3.11
5	Overall, how well did the staff protect your dignity and privacy and ensure your comfort?	71	29	0	0	0	100	3.71

S. NO.	FACILITIES FOR ATTENDANT	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	Guidance and information on patient movement during procedure.	65	35	0	0	0	100	3.65
2	Food options for attendants	4	95	1	0	0	100	3.03

S. NO.	OTHER	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	Pharmacy	50	33	17	0	0	100	3.33
2	billing	16	84	0	0	0	100	3.16
3	Parking and security	73	27	0	0	0	100	3.73

S. NO.	DISCHARGE PROCESS	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	Please rate the overall discharge process	80	18	0	0	0	100	2.81
2	Efficiency of billing desk	17	80	3	0	0	100	3.14
3	Response to any query	7	90	3	0	0	100	3.04

S. NO.	OVERALL EXPERIENCE IN GASTROENTEROLOGY DEPARTMENT	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	Overall level of service	17	83	0	0	0	100	3.17

OBSERVATION IN OPD DIALYSIS DEPARTMENT

S. NO.	HELP DESK	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	How would you rate the receiving guidance to reach dialysis department?	60	40	0	0	0	100	3.6
2	How well did we respond your queries?	56	41	3	0	0	100	3.53

S. NO.	MEDICAL AND NURSING PROCESS	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	How would you rate the communication skill of the staff?	41	46	13	0	0	100	3.28
2	How would you rate the education provided to you by nurse/technician taking care of you?	27	70	3	0	0	100	3.24
3	Overall, how well did the staff protect your dignity and privacy and ensure your comfort?	52	46	2	0	0	100	3.5

S. NO.	OTHER FACILITIES	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	How was the quality of cleanliness and efficiency of housekeeping department?	52	29	19	0	0	100	3.33
2	How was the quality of food and efficiency of food and beverage team?	5	73	21	1	0	100	2.82
3	Billing department	27	73	0	0	0	100	3.27
4	Parking and security	44	56	0	0	0	100	3.41

S. NO.	OVERALL EXPERIENCE IN DIALYSIS DEPARTMENT	SCALE & NO. OF RESPONSES						Average
		4	3	2	1	0	Total	
1	Overall level of service	43	57	0	0	0	100	3.43

FINDING THROUGH OPEN ENDED QUESTIONS:

The concerns for the various departments were found to be as follows:

1. F & B DEPARTMENT: -

- (i) There was complaint of delay in delivering food to the patients.
- (ii) There was communication gap between the dietetics and the F & B department and also with assigned nursing staff due to which inappropriate food was served to the patients.
- (iii) Quality and quantity of food being compromised.

2. NURSING DEPARTMENT: -

- (i) Many times, there was complaint of delay in nurse call-bell response.
- (ii) Communication problem between the nurse and the patients.

3. HOUSEKEEPING DEPARTMENT

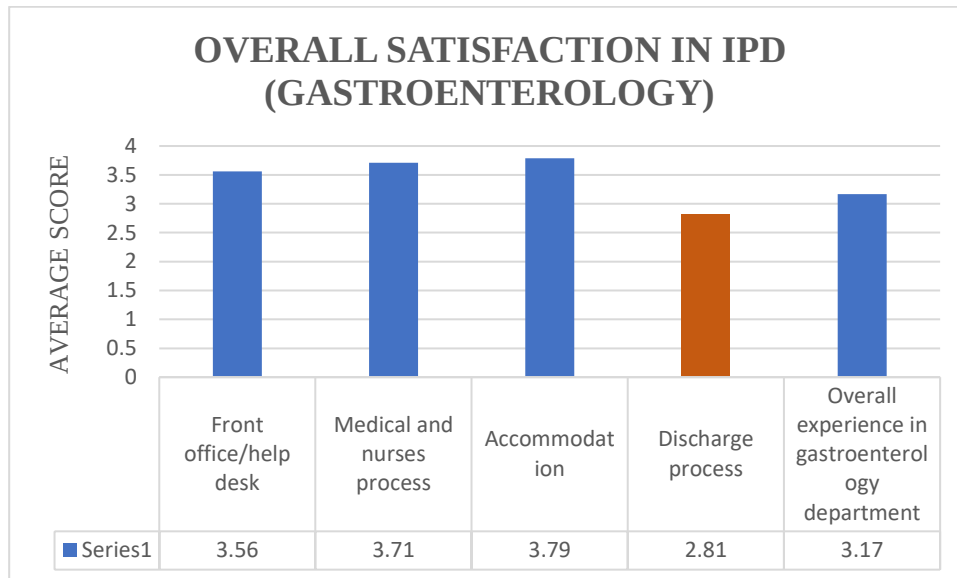
- (i) complaint of appropriate size of hospital uniform and slippers.
- (ii) The cleanliness of the washroom was a major issue for many patients.
- (iv) Some patients were dissatisfied because of the absence of towel, soap, dental kit in their rooms.

4. MAINTENANCE DEPARTMENT

The complaints like missing of TV remote, tv signal issue, weak Wi-Fi connection were made.

5. ANALYSIS:

Fig 1: Overall satisfaction in IPD (GASTROENTEROLOGY)

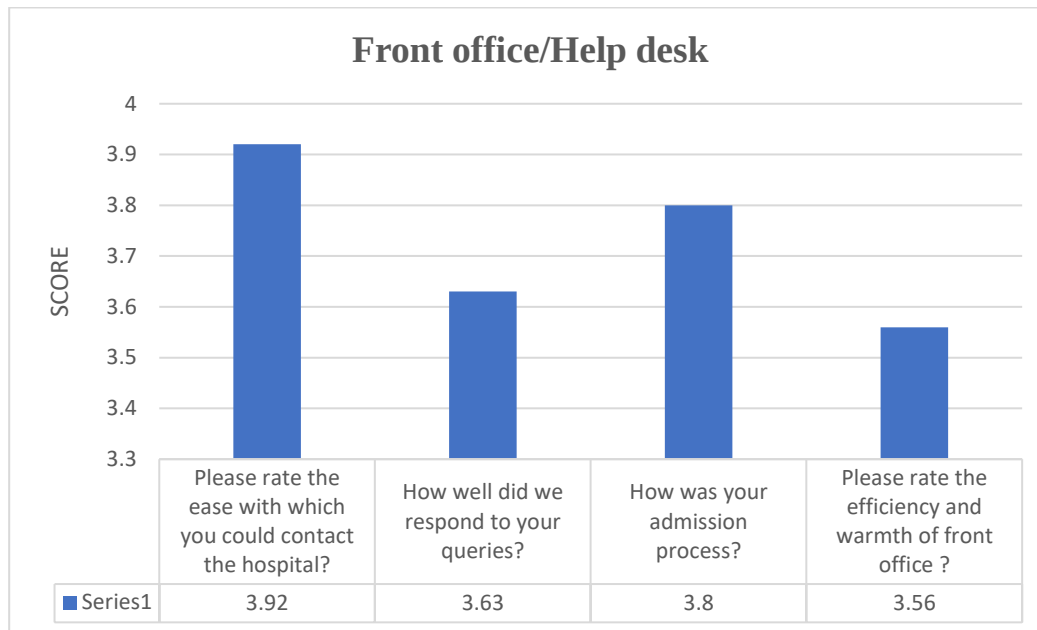


total sample size (n) : 100

Satisfaction level is seen highest in accommodation with average score of 3.79 whereas discharge process got least score of 2.81

In specific areas of IPD gastroenterology are as follows:

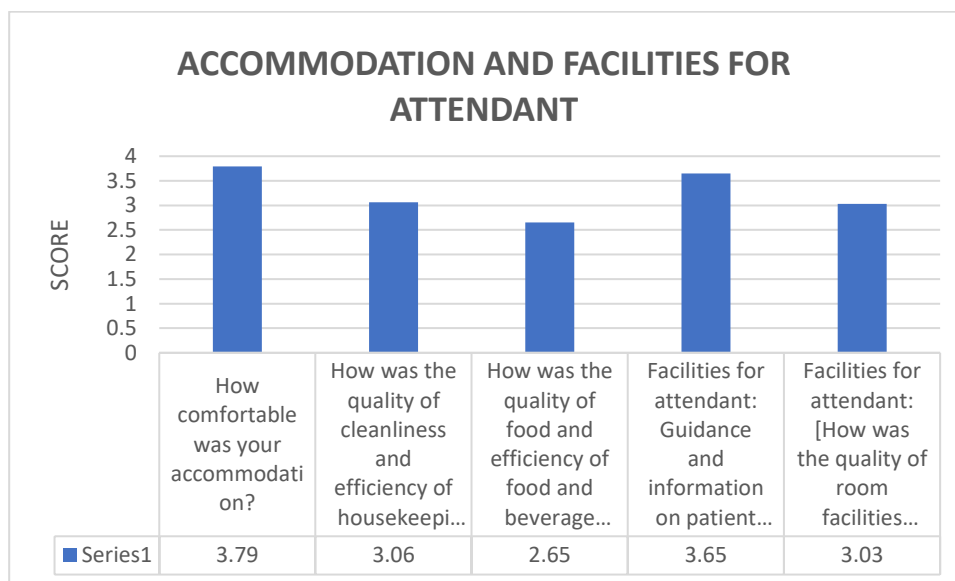
Fig 2: front office/ help desk



total sample size (n): 100

This graph shows that patients are highly satisfied with the efficiency and warmth of front office department and the admission process with score of 3.56 and 3.8 respectively

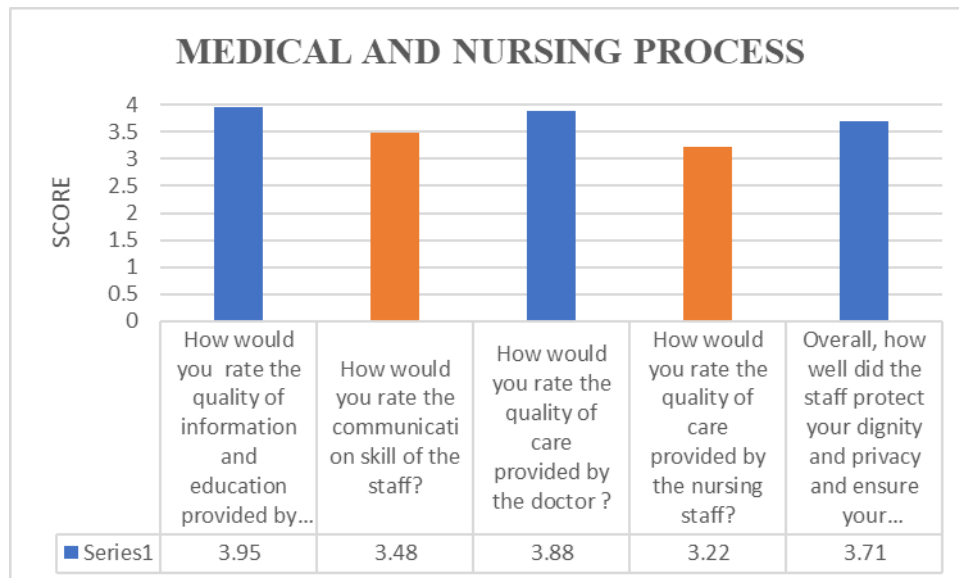
Fig 3: Accommodation and facilities for attendant



Total sample size (n) : 100

This graph shows that patients are satisfied with the accommodation with score of 3.72 but seemed bit unhappy with the quality of food and efficiency of food and beverage department with score of 2.56

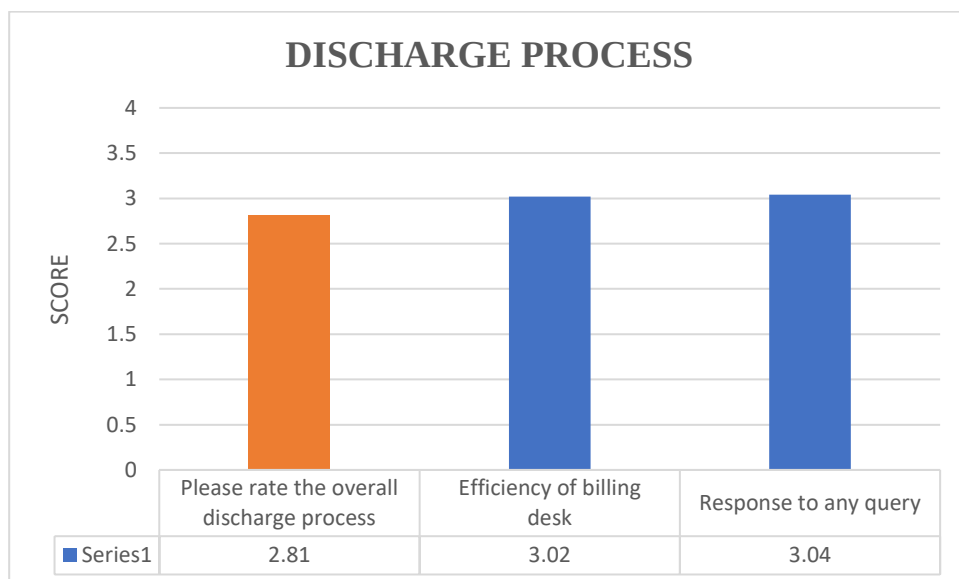
Fig 4: Medical and nursing process



Total sample size (n) : 100

This graph shows that patient are highly satisfied with the quality of care provided by doctors with score of 3.88 whereas bit unhappy with communication skill of staff and quality of care provided by nursing staff with score of 3.03 and 3.11 respectively

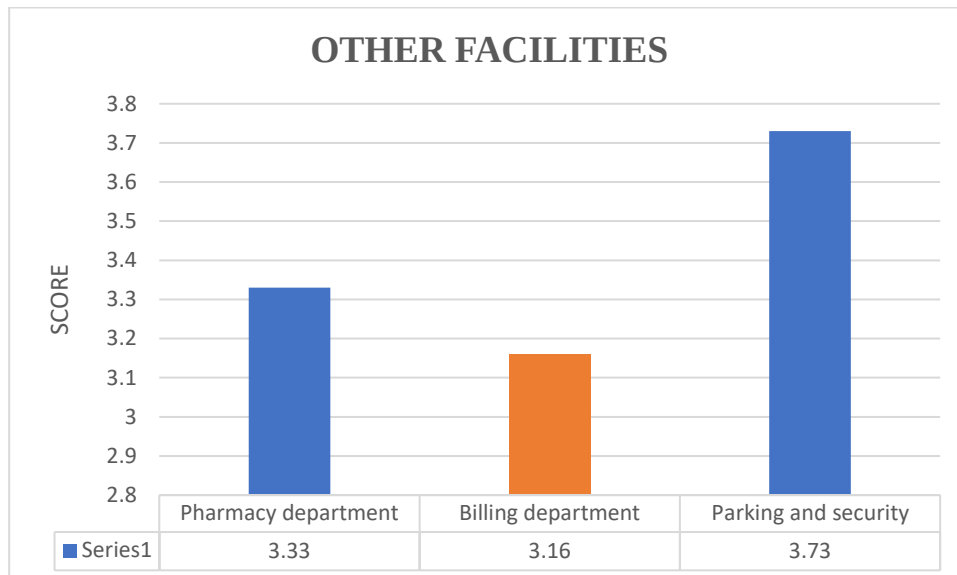
Fig 5: Discharge process



Total sample size (n) : 100

This graph shows that patients are not satisfied with the discharge process with constant complaints of delay in discharge

Fig 6:other facilities

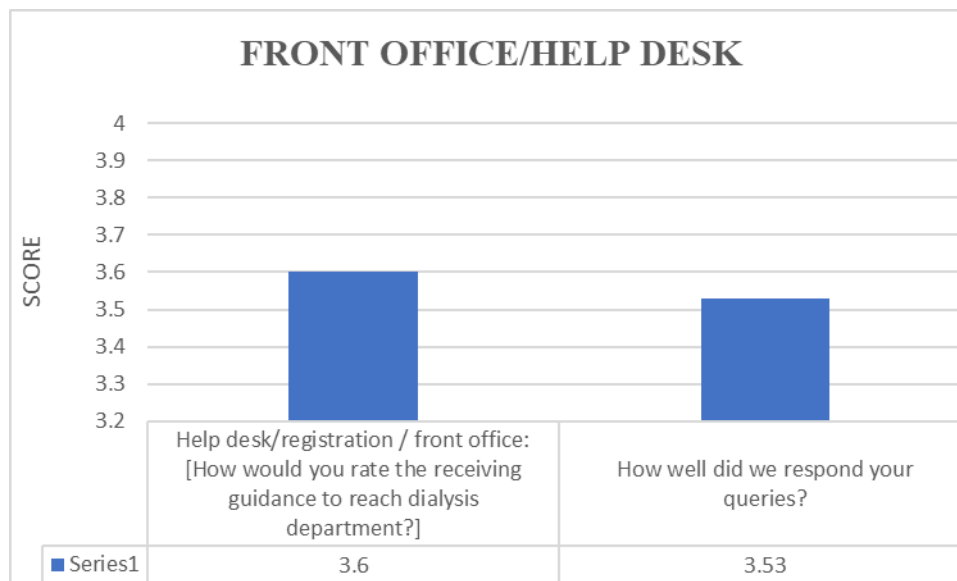


Total sample size (n) : 100

This graph shows that patients are bit unhappy with the billing department with the least score of 3.16

Analysis of OPD Dialysis:

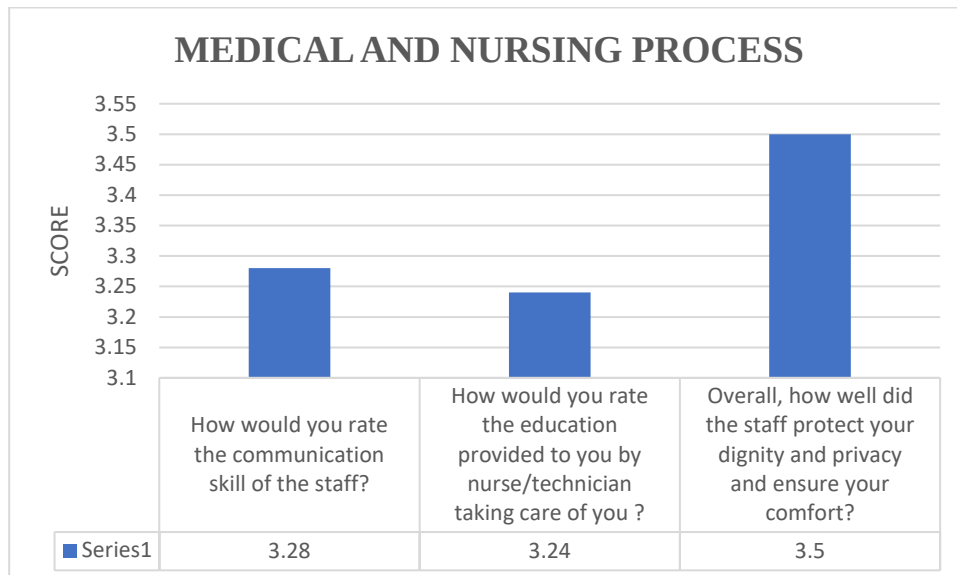
Fig 7:front office/help desk



Total sample size (n) : 100

This graph shows that patients are satisfied with the front office department with score of 3.6

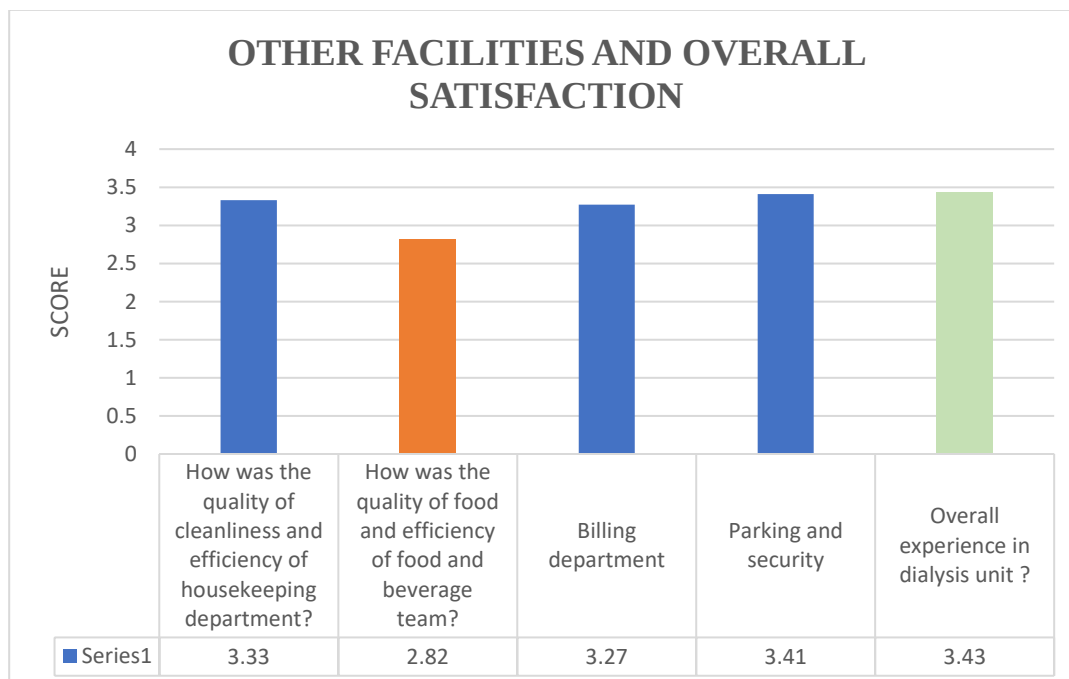
Fig 8: Medical and nursing process



Total sample size (n) : 100

This graph shows that the patients are highly satisfied with the privacy and comfort with score of 3.5

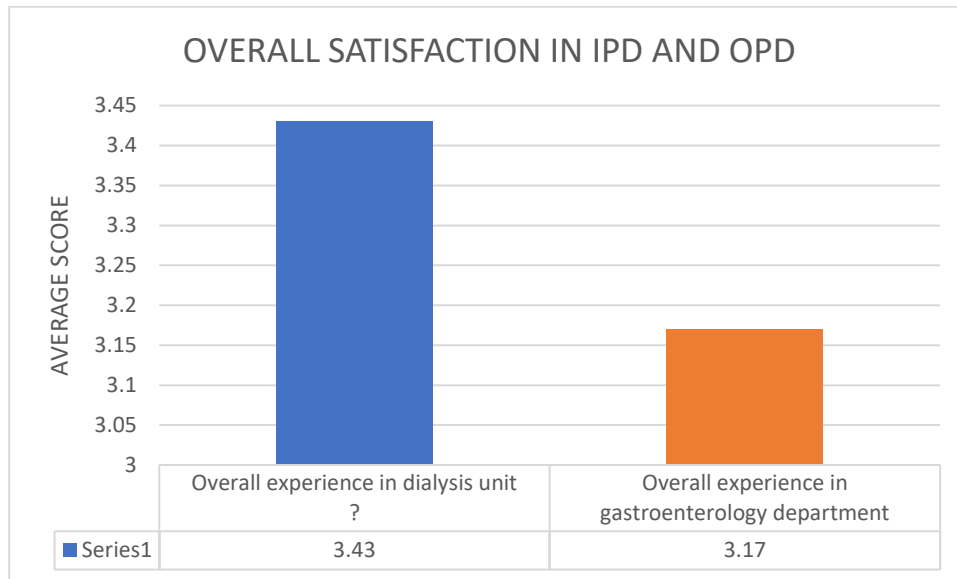
Fig 9: other facilities and overall satisfaction



Total sample size (n) : 100

This graph shows that the patients are satisfied with the overall experience in dialysis unit with score of 3.43 but was bit unhappy with the quality of food with score of 2.82

Fig 10: Overall satisfaction in ipd and opd



Total sample size (n): 200

This graphs shows that patient satisfaction is more in opd dialysis with average score of 3.43 as compare to ipd gastroenterology department.

6. RECOMMENDATIONS: -

1. Discharge process has many complaints of delay it can be less time consuming by planning discharge one day prior so that draft of discharge summary can be prepared, extra medications can be returned timely, can also be achieved by completion of morning doctors' rounds and confirming the discharge timely
2. Food and beverage department has also received many complaints in various aspects like quality of taste, delay in delivery, not cooked properly, not much options etc. it can be improved by taking rounds of every patient by dietician and discussing their diet and providing available options.
3. Nurses complaints regarding the late response to call bell and with some communication problems can be reduced by providing refresh training of promptness from staff towards the patient concern
4. Hospital environment can be improved by reducing level of disturbances and noises at nursing stations
5. Quality of room facility can be improved by maintaining a roster which shows at what time the toiletries were kept and cleaning of room is done
6. Regular patients in dialysis department were not bit unhappy with new staff as they used to compare them with old staff so the new staff should provide refresh training to handle the patients

7. CONCLUSION: -

From the project report it can be concluded that the Medanta hospital has succeeded in creating a culture where rendering quality patient services is its main strategic goal. The organization has put in its concentrated efforts to pay attention to the patient's need or privacy, compassion and information related to his or her hospital visit. The quality department works in the area of problem identification and problem-solving ensuring the patient to be the integral part of this hospital thereby enhancing patient experience and sustaining patient loyalty on the long-term basis.

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9. ANNEXURE:

Questionnaire (IPD)

	Excellent	Good	Average	Poor	No Response
[A.] <u>Help desk/front office</u>					
1. Please rate the ease with which you could contact the hospital.	☐	☐	☐	☐	☐
2. How did we respond to your queries.	☐	☐	☐	☐	☐
4. How was your admission process.	☐	☐	☐	☐	☐
5. Please rate the efficiency and warmth of front office team.	☐	☐	☐	☐	☐
[B.] <u>Accommodation</u>					
1. How comfortable was your accommodation.	☐	☐	☐	☐	☐
2. How was the quality of cleanliness and efficiency of housekeeping department?	☐	☐	☐	☐	☐
3. How was the quality of food and efficiency of food and beverage team	☐	☐	☐	☐	☐
{please mention any specific problem}					
[C.] <u>Facilities for attendants</u>					
1. Quality of in room facilities.	☐	☐	☐	☐	☐
2. Guidance and information on patient movement during procedures.	☐	☐	☐	☐	☐
[D.] <u>Medical and Nursing Process</u>					
1. how would you rate the quality of information and education provided by the	☐	☐	☐	☐	☐

doctor/surgeon?

2.How would you rate the communication

☐	☐	☐	☐	☐
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skill of the staff?.

3.How would you rate the quality of care

☐	☐	☐	☐	☐
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provided by the doctor?

4. How would you rate the quality of care

☐	☐	☐	☐	☐
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provided by the nursing staff?

5.Overall, how well did the staff protect your

☐	☐	☐	☐	☐
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dignity and privacy and ensure your comfort?

[E.] Discharge Process

1. Please rate the overall discharge process.

☐	☐	☐	☐	☐
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2. Efficiency of billing desk.

☐	☐	☐	☐	☐
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3. Response to any query.

☐	☐	☐	☐	☐
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[F.] Other Facilities

Please rate the quality of:

1. Pharmacy department.

☐	☐	☐	☐	☐
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

2. Billing department

☐	☐	☐	☐	☐
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

3. Parking and security.

☐	☐	☐	☐	☐
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[G.] overall behavior in gastroenterology

☐	☐	☐	☐	☐
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[H.] Others comments

[I.] Personal Detail

Name -

Admitting Doctor -

UHD no. -

Contact no. -

Email -

Sign. –

Questionnaire (OPD)

	Excellent	Good	Average	Poor	No Response
[A.] <u>Help desk/front office</u>					
1. How would you rate the receiving guidance to reach dialysis department.	☐	☐	☐	☐	☐
2. How well did we respond your queries?	☐	☐	☐	☐	☐
[B.] <u>Medical and Nursing Process</u>					
1. How would you rate the communication skill of the staff?	☐	☐	☐	☐	☐
2. How would you rate the education provided to you by nurse/technician taking care of you?	☐	☐	☐	☐	☐
3. Overall, how well did the staff protect your dignity and privacy and ensure your comfort?	☐	☐	☐	☐	☐
[C.] <u>Other Facilities</u>					
1. How was the quality of cleanliness and efficiency of housekeeping department?	☐	☐	☐	☐	☐
2. How was the quality of food and efficiency of food and beverage team?	☐	☐	☐	☐	☐
3. Billing department.	☐	☐	☐	☐	☐
4. Parking and security	☐	☐	☐	☐	☐
[D.] Overall satisfaction in OPD dialysis department?					
	☐	☐	☐	☐	☐

[E] Personal Detail

Name -

Admitting Doctor -

UHD no. -

Contact no. -

Email -

Sign. –

