DISSERTATION

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TOPIC

Cost of Services, Quality of Services and Doctor – Patient Relationship aiding to Patient Satisfaction in the In-Patient Department

INTRODUCTION

- Lately, many hospitals especially those in the corporate sector, have begun to function like a service industry. The hospital industry has begun to employ HR professionals and management graduates. Third-party payers too have recognized that patient satisfaction is an important tool for the success of their organization and are regularly monitoring patient satisfaction levels among their customers.
- Patient satisfaction leads to customer (patient) loyalty.
- Improved patient retention
- They are less vulnerable to price wars. There is sufficient evidence to prove that organizations with high customer loyalty can command a higher price without losing their profit or market share.
- Increased staff morale with reduced staff turnover also leads to increased productivity
- Accreditation issues – it is now universally accepted that various accreditation agencies like International Organization for Standardization (ISO), National Accreditation Board for Hospitals (NABH), Joint Commission on Accreditation of Healthcare Organizations (JCAHO), etc., all focus on quality service issues.
- Increased personal and professional satisfaction -

RATIONALE

- Patient satisfaction is one of the established yardstick to measure success of the services being provided in the health facilities. But it is difficult to measure the satisfaction and gauge responsiveness of the health systems as not only the clinical but also the non-clinical outcomes of care do influence the patient satisfaction. Satisfaction is a psychological concept which is defined in different ways. The primary goal of the tertiary care hospital as a highest level of health care provision is to provide best possible health care to the patients.

- 21 % patients reported unavailability of drinking water, 43 % reported unavailability of toilets / hand washing facility in the wards. 62 % and 40 % were dissatisfied by the cleanliness in the toilets and wards respectively. Basic amenities and services at the hospital has a much scope of improvement in terms of availability of medicine, drinking water, toilets / hand washing facility in the wards, cleanliness in the toilets and wards, fans / lights in the wards, bed sheets. And, of course major bearing on Doctor-Patient relationship.

RESEARCH QUESTION

What are the factors influencing Patient satisfaction in hospitals in India ?

OBJECTIVES

- To study the factors that influence the patient satisfaction of admitted patients in In patient department of a Tertiary care corporate hospital.
- To study the expectations of the patients at various moments of truth in the In-patient Department
- To deduce the factors that improve patient satisfaction, to implement delight doctrine, under commit and over perform.

RESEARCH METHODOLOGY

Study design – Descriptive study

- **Data Collection**

Primary data

Primary data will be collected by Questionnaire and Personal interviews with the patients.

Secondary data

Reviews of the patient on the hospital's website and existing literature of the organization, the Quality Manual, Standard Operating Procedures, Departmental and Administrative Manuals will be the source of secondary data.

The previous surveys carried out in this context can also be a source of secondary data.

Also, the patients' feedback forms available with the hospital of the previous month will be taken into consideration

- **SAMPLING TECHNIQUE**

Simple Random sampling will be done

Sampling Size : 216

Sample size =

$$\frac{Z^2 * (p) * (1-p)}{c^2}$$

Where:

Z = Z value (e.g. 1.96 for 95% confidence level)
p = percentage picking a choice, expressed as decimal (.5 used for sample size needed)
c = confidence interval, expressed as decimal (e.g., .05 = ±5)

Non-response rate: 10% (19.6)

Inclusions – IPD Patients + Attendants

Exclusions – Pediatric patients
Emergency patients
Critical patients
Elderly patients

Study duration – Two months and twenty days

- ***Analysis Plan –***

Data Analysis

- Each parameter in the feedback form is analyzed with the help of likert scale
- Scores from 1 to 4 are given to each response.
- The Classification range is Standard (as per the hospital)
- Satisfactory 1
- Good 2
- Excellent 3
- Not Applicable 4
- The final analysis is done by calculating the effective percentage score so that the data become comparable
- 0 - 33 % Satisfactory
- 33% - 67% Good
- 67% -100% Excellent

- Survey questions will be open-ended
- Taking the feedback of patients admitted in IPD through the questionnaire already present in the system, the questionnaire is designed to incorporate feedback of patients on the following services/ moments of truth encountered by patients during their treatment in the hospital,
- Reception
- Emergency
- Pharmacy
- Billing and Cash
- Wards/ICU
- Diagnostics
- Safety
- After interacting with the study subjects (216 inpatients) , analysis would be done by taking out the average percentage of each row corresponding to the services mentioned at each stage and then basing the decision on the findings a report will be made with the bearings on the assumptions that will be made in percentages in congruence with the organization's vision.

STUDY FINDINGS

- Will improve the patient satisfaction
- Better marketing strategy will be developed using the results
- Will increase footfall
- Help hospital to improve its processes and implementation of standards

RESULT

JANUARY	SCORES	FEBRUARY	SCORES	COMBINED REMARKS
Reception	73.5%- Excellent	Reception	80%- Excellent	Sustainability in this department
Emergency	66%- Good	Emergency	91.25%- Excellent	Improvement noticed from Jan to Feb
Pharmacy	66.5%- Good	Pharmacy	82.5%- Excellent	Improvement noticed in performance
Billing & Cash	66.25%- Good	Billing & Cash	76.75%- Excellent	Improvement noticed in performance
Wards/ICU	72.83%- Excellent	Wards/ICU	85.33%- Excellent	Sustainability in performance
Diagnostics	69.2%- Excellent	Diagnostics	91.4%- Excellent	Sustainability in performance
Safety	72.25%- Excellent	Safety	76.25%- Excellent	Sustainability in performance

Root Cause Analysis of the Issues encountered at some areas

- Issues in Pharmacy and Cost

1. Non-availability of medicines at some occasions
2. Cost of treatment should be elaborately discussed with the patient
3. Treatment is expensive
4. No. of counters to be increased at pharmacy
5. Charges for food and breakfast for the attendants are very high

- Issues in Waiting area, Kitchen and Canteen

1. Non-availability of Chairs and Toilet facility in the waiting area
2. Quality of food and the menu being followed at dialysis is not proper.

- Issues in Emergency & Cash and Billing

1. In Emergency, the treatment is not started unless they don't receive payment from the family of the patient
2. Long time in the initiation of treatment in Emergency
3. Cash & Billing is too far from Emergency

- Issues in Housekeeping, Security & Dialysis

1. Housekeeping staff slow
2. Inadequacy of Security staff
3. Dialysis machine not working properly

- Issues with Doctor & Other related staff

1. Communication b/w doctor and family & behavior of Nurses and lack of communication during shift change

RECOMMENDATIONS

Administration

- The administration should consider to design and implement a marketing strategy to depict competitive pricing of the hospital.
- Adequate sitting arrangement with proper furniture (Chairs) and toilet facilities for the attendants should be made
- Display board for the initial payment for insurance holders and non insurance payers should be installed at the Emergency Department.
- Proper counseling of the hospital bills should be provided to the patients by the Billing and Cash staff.
- The form for "Doctor Patient Meeting Record" should be implemented across the hospital. The form is present in the medical quality folder.

Housekeeping

- The housekeeping staff's work should be regulated properly so as to avoid delays

Pharmacy

- Proper stock check should be done at all times as stock runs out and it creates discomfort for the attendant of the patient
- Effective utilization of pharmacists should be there.

Canteen

- Quality and Quantity of food should be checked periodically
- The Dietician should prepare the menu and quantity of food in consultation with the Consultants.

Kitchen Service

- The temperature of service of food should be monitored
- Random audits should be carried out to check the temperature at which food is being served to the patients

Nursing Staff

- Soft skills training should be provided to the nursing staff on a continuous basis
- Effective utilization of nursing staff should be there. The nurse patient ratio should be monitored as per the workload
- Empathy and Promptness should reflect in the nursing services.

Dialysis

- The dialysis machines should be regularly checked if they are functioning properly or not
- Repair and maintenance of hospital equipments should be routinely done and as and when required.

ICU

- The staff should practice silence at night as critical care area is such a place where absolute silence is required

Maintenance

- The maintenance department should regularly check for the fittings at various areas within the hospital like In toilets for source of water, AC cooling , bathroom fittings etc.
- Monitoring of the maintenance services should be routinely done with respect to the time elapsed between lodging of complaints and completion of repair work.

THANK YOU