Customer Satisfaction in Home Health Care Services

Descriptive Study

By

Maaz Iqbal

Dissertation submitted for the partial fulfillment of the

MBA Hospital and Health Management

Academic year, 2016-2018

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INSTITUTE OF HEALTH
MANAGEMENT RESEARCH
(WHO Collaborating Centre for District Health System Based on Primary Health Care)

IIHMR UNIVERSITY

TO WHOMSOEVERMAY CONCERN

This is to certify that **Mr. Maaz Iqbal** student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at **IIHMR University and CallHealth Services Pvt Ltd from 7-Feb 2018 to 7 May -2018.**

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

The Internship is in fulfillment of the course requirements.

I wish him all success in all his future endeavors.

Dr(Col) Ashok Kaushik
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CallHealth
Everything about health

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1-66/1/RI/08/8, 11th Floor,
Ramky Grandiose, Ramky Towers Complex,
Gachibowli, Hyderabad-500 032. Telangana, India.
CIN No: U85100TG2013PTC091009
Tel: 040 - 4141 5555
www.callhealth.com

Dated: **11th May 2018**
Place: **Hyderabad**

To Whomsoever It May Concern

This is to confirm that **Dr. Maaz Iqbal (Officer ID: 12099)** has been working with us as **Management Trainee** in our **Services Delivery** Business since **07th** of **March 2018** to **till date**.

He comes across as a committed, sincere and diligent person who has a strong drive and zeal for learning and we wish him all the success with continued service with us.

Note: This letter has been issued upon his request for college degree certification purpose and **not** valid for any other purpose.

For CallHealth Services Pvt. Ltd.,

R. Samson Peters,
Business Integrator – Talent Engagement
Human Resources

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled "Customer satisfaction survey for home health care services" Call health, Hyderabad" and submitted by Maaz Iqbal Enrollment No IIHMR-U/01/2016-18/0439 under the supervision of Dr. Sandesh Kumar Sharma for award of MBA in Hospital and Health Management of the University carried out during the period from 7th February 2018 to 7th May 2018 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.

Maaz

Signature

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ACKNOWLEDGEMENT

First of all I extend my profound gratitude to the almighty, which helped me to accomplish all my tasks well on time. I would like to extend my sincerest gratitude to all who contributed their valuable time and incomparable and everlasting support without which my study and learning would have been incomplete.

My special gratitude to all the health officers (phlebotomist, physiotherapists and care coordinator) of call health who took me along with them and helped me in carrying my survey in the best possible way. I am really thankful to all the pop (point of presence) managers and administrator who really helped and managed the field visits and provide all the necessary support and guidance.

Most importantly I would like to thank my mentor **Dr.Sandesh kumar Sharma** for his guidance and motivation throughout the study.

Table of content

Abbreviations

These are the abbreviations which are used in callhealth organization; they are meant to be used in the organization only and are not universal abbreviations.

MHO: mobile health officer
PHO: phlebotomist health officer
CCR: care coordinator
MFO: medical facilitation officer
HHO: home health officer
POP: point of presence
E CON: e-consultation
CCO: call centre officer
OMS: order management system
NFS: network file server
SEC: stakeholder experience centre
FMS: feedback management system
MDM: master data management
CHISS: callhealth integrated service system
IHS: Institutional health services
MRN: medical record number
SLA: service level agreement
MCC: mission command centre
ICF: internal customer facing
ECF: external customer facing
HIES: health information exchange service

Introduction

Call health is a home health care service that provides health care at the door step of the customer. The organization is carrying its services through
A) Contemporary/current medical technology
B) Knowledge
C) People

The mission of the organization is "To deliver dramatic improvements in services leveraging current knowledge information & medical technologies for integrated patient centric new age health care. The organization deals with three stakeholder's i.e.

a) Investors
b) Customers
c) Collaborators

And with one experience "Delight ". The core vale of the organization is to create value for stakeholder. The organization has 35 business altogether out of which three are delivery business fifteen service business and seventeen support business.

The organization operates from different location in the city which they called POP (point of presence), at present they have nine pops covering the entire city. At call health each employee is called as officer. There are three ways through which a patient/customer can book a service or three touch points are,

a) Mobile application
b) Website
c) Call centre

Call centre is the most common and frequently used by the customers for booking of a service. When a customer books a service depending upon the location the system automatically assigns that order to that particular pop for delivering the service. Now it's the pop administrator duty to assign the order to particular health officer depending on the type of service. When the officer log in through his mobile application he/she can see the assigned order. He/she able to see the patient details and location, at this point he can accept or reject the order .in case if an health officer rejects the order the order gets pop-up in the pop dashboard and the pop admin will again assign this order to some other health officer. The organization has 5consulting business i.e.

a) E consultation
b) E wellness
c) Emotional wellness
d) Family doctor
e) Second opinion

Whatever the services is provided by the organization are segregated under,

a)Transactional

b)Continuous

Transactional care are those that takes a maximum of 30 to 45 minutes for instance collecting blood sample ,wound dressing and IV injection. continuous care are those where a health officer is suppose to stay at patients place it includes nursing care for instance bed side attendant for geriatric patient, another is like a week physiotherapy .in case of transactional care the particular officer is assigned and he executes the service but in case of continuous care first an assessment is conducted by care coordinator (CCR) to ensure that the place is safe for the health officer to stay.

When comes to the satisfaction of customer from home health care services, we can define Satisfaction as fulfilment or gratification of a desire and in case of health care satisfaction can be defined as meeting of expectations of a patient/family members from the services provided by the organization or availed by the customer.

Patient satisfaction has become of paramount importance as mouth-to-mouth publicity and personal referral is the most common in our society, apart from these feedback and ratings given by the customers on the websites also play a crucial role in deciding to avail a service from a particular provider. While talking about health care services at home patient satisfaction depends upon a lot of factor such as booking an appointment, punctuality of health officer, execution of the service, receiving a quality service and the most important is behaviour of the health officer. These all above factors play a vital role in achieving the satisfaction level. If one of them is not fulfilled the satisfaction level cannot be achieved.

Therefore it is important to carry out a satisfaction survey to understand the performance of the officers and the organization. It improves communication with the customer and their family members in identifying the problem areas and thus improves the overall performance of the organization.

The survey is carried for the transactional services only.

Literature review

Patient satisfaction is an important and commonly used indicator for measuring the quality in health care. Patient satisfaction affects clinical outcomes, patient retention, and medical malpractice claims. It affects the timely, efficient, and patient-centered delivery of quality health care. Patient satisfaction is thus a proxy but a very effective indicator to measure the success of doctors and hospitals. This article discusses as to how to ensure patient satisfaction in dermatological practice.**(1)**

Patient satisfaction is an indicator of how well the patient is being treated at your medical practice. The "how well" refers not only to the quality of care but also to how happy a patient is with the treatment he or she received. It is a measure of care quality and gives healthcare providers valuable insights into various aspects of healthcare, including the effectiveness of their care and their level of understanding. Improving patient satisfaction has become one of the primary goals for a lot of healthcare providers. The reason is simple: patient satisfaction level is directly linked to key success metrics for hospitals and individual healthcare providers. Patient satisfaction impacts clinical outcomes, patient retention and reimbursement claims.
Thanks to the Internet and social media platforms, patients are now aware of the care quality that their providers are offering. Patients are setting new expectations for convenience, transparency and collaboration, and healthcare facilities are developing strategies to meet these new demands.**(4)**

A quasi experimental study conducted from May 1996 to October 1997 in a Home health department in the Sacramento, Calif, facility of a large health maintenance organization to evaluate the quality & patient satisfaction showed that more than 90% of the patient receiving home health care services agreed or strongly agreed that they appreciated the care provided at the remote visits, were confident in the assessment received, were comfortable discussing personal problems, believed they received an appropriate level of care, found the remote visit convenient, and appreciated receiving timely access to care.**(2)**

Patients randomized to in-home palliative care reported greater improvement in satisfaction with care at 30 and 90 days after enrollment ($P<.05$) and were more likely to die at home than those receiving usual care ($P<.001$). In addition, in-home palliative care subjects were less likely to visit the emergency department ($P=.01$) or be admitted to the hospital than those receiving usual care ($P<.001$), resulting in significantly lower costs of care for intervention patients ($P=.03$).**(3)**

A randomized controlled trial conducted in Department of Neurology at Huddinge Hospital in southwest Stockholm compared two groups , rehabilitation at home (n = 41) was compared to routine rehabilitation services (n = 40) for moderately disabled selected stroke patients. No statistical significant differences were found in patient outcome at 3 or 6 months, but a moderately positive effect in the home rehabilitation group was suggested.**(4)**

A study conducted to assess the reliability and validity of current measures of patient satisfaction in home health care concluded that home healthcare agencies need valid and reliable patient satisfaction scales. Frameworks of patient satisfaction are still in their early developmental stage. Only some of the variables related to patient satisfaction are explained by many frameworks.**(5)**

Critical areas of patient care that seem to negatively affect patient satisfaction included the inability to meet patient desire for increased visitation of medical team, medication administration, provision of medical equipment, and assistance with transportation needs to hospital.**(7)**

Satisfied patients will share their positive experience with five others, on average, and dissatisfied patients complain to nine (or more) other people. The Internet promotes rapid and wide dissemination of these opinions. This word-of mouth marketing is powerful, especially as consumers grow more savvy about their health care choices. There is evidence of a reciprocal relationship between patient satisfaction and continuity of care (which is associated with better patient outcomes). Conversely, dissatisfaction and complaints can mean not only loss of business/investment, but also increased risk of malpractice lawsuits.**(8)**

Patient satisfaction is reportedly a useful measure for providing a direct indicator of quality in healthcare and hence needs to be measured frequently so that a domesticated and localized health care plan could be developed. User satisfaction is a very important part of any clinical practice; therefore, it is imperative to consistently undertake surveys in the community to introduce better services. In this regard, patient satisfaction is an important issue both for evaluation and improvement of healthcare services. It reflects efforts to improve health outcomes and meet standards to make health services broadly acceptable.**(6)**

Objective:

1) To measure customer satisfaction with respect to different services provided by call health.
2) To suggest recommendations to improve the services.

Methodology

Type of study: Descriptive and cross sectional

Study duration: 10th march to 10th may

Sampling method: convenience sampling

Sample size: 200

Tool used: structured questionnaire

Respondents: customer and their family members

Sample area: Hyderabad

Method of data collection: primary and secondary method
Primary method (questionnaire & survey form)
Secondary method (articles & journals)

Data entry: manually

Data analysis procedure: Data will be analyzed both in SPSS and MS Excel.

DATA INTERPRETATION:

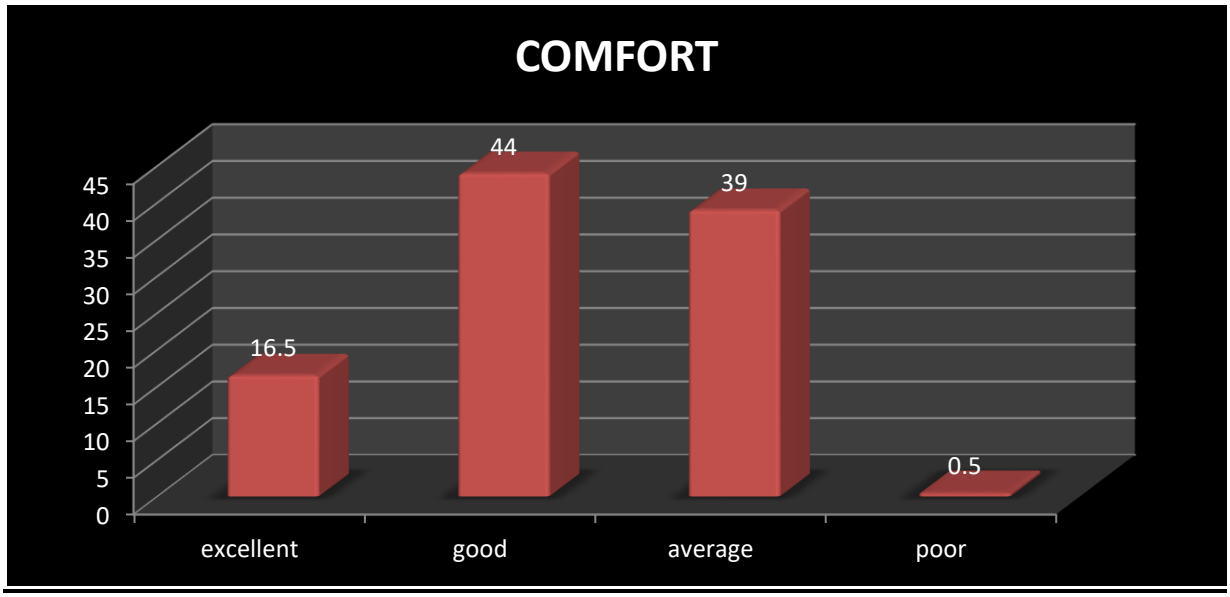

Fig:1 CUSTOMER COMFORT

Customers are quite comfortable availing health care services at home from callhealth.16.5 % customers felt excellent in availing health care services at home while 0.5% customers reported that they are not comfortable receiving health services at home.

Fig:2 BOOKING PROCEDURE

When comes to booking majority of the customers had a smooth booking experience apart from few 1.5% customer where their call got disconnected due to network issues and they have to call again and then book the services.

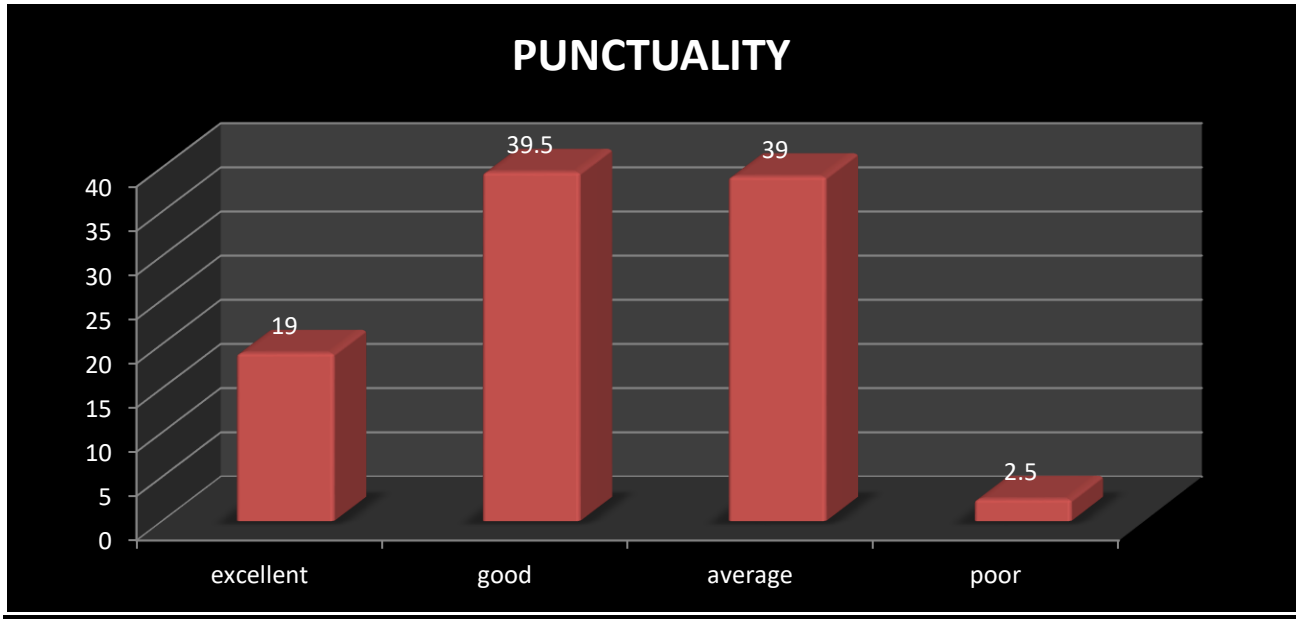

Fig3: PUNCTUALITY OF STAFF

Most of the officers reaches customer place well on time for executing the service but 2.5% customers reported that the staffs are not punctual and they did not come on the slotted time due to which they are not satisfied with their punctuality.

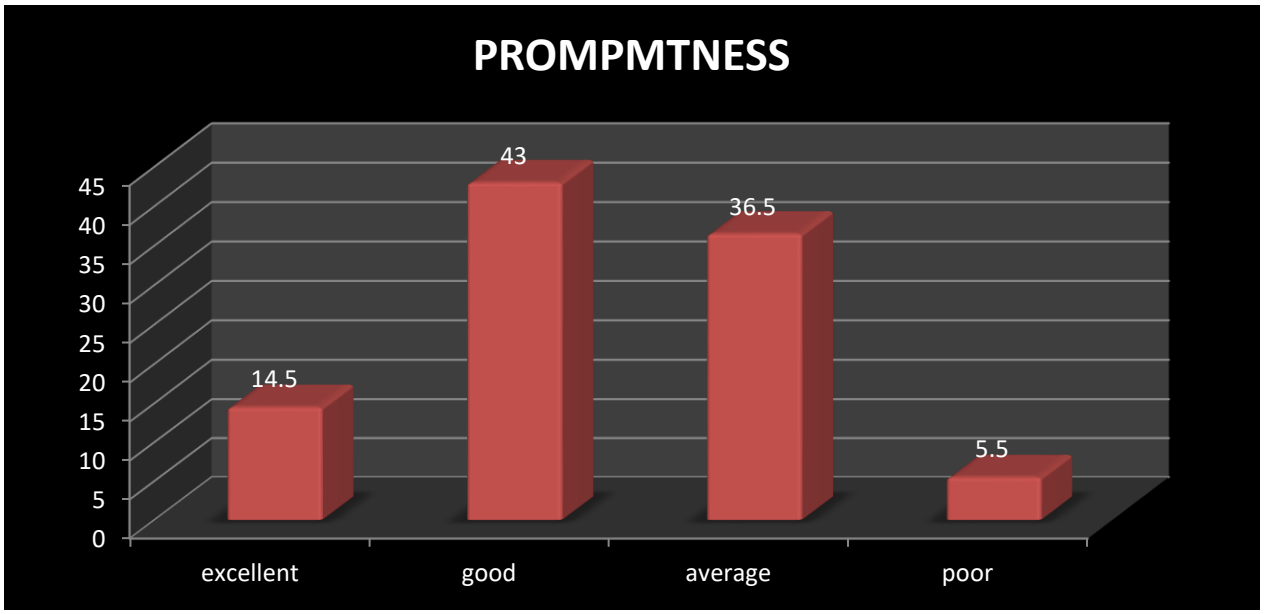

Fig:4 PROMPTNESS OF THE OFFICER

Most of the customers responded that the staffs are very prompt towards delivering the service, they call the customers well in advance, and they check for the prerequisites of the test as well where it is needed. 5.5 % of the customer responded that the staffs did not informed them prior to come and they were not aware of the prerequisites of the test due to which tests get rescheduled for the next day.

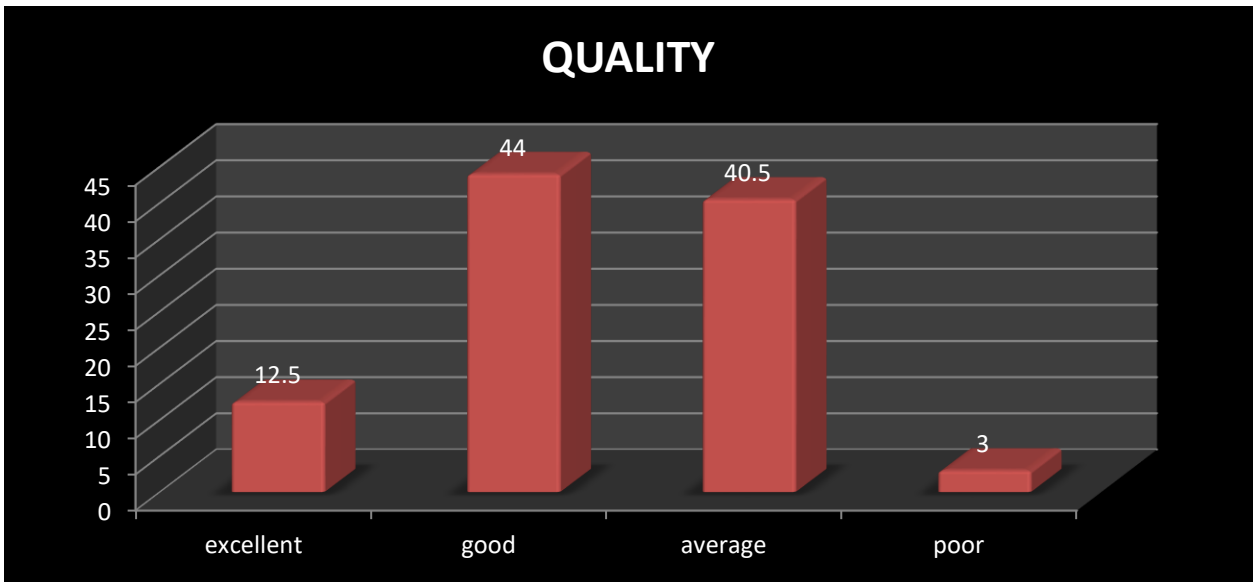

Fig:5 QUALITY OF THE SERVICE

Quality service is received by majority of the customers apart from 3% customers where they are not satisfied with the appearance of the health officers and the way they were keeping the vaccutainers and dumping the waste.

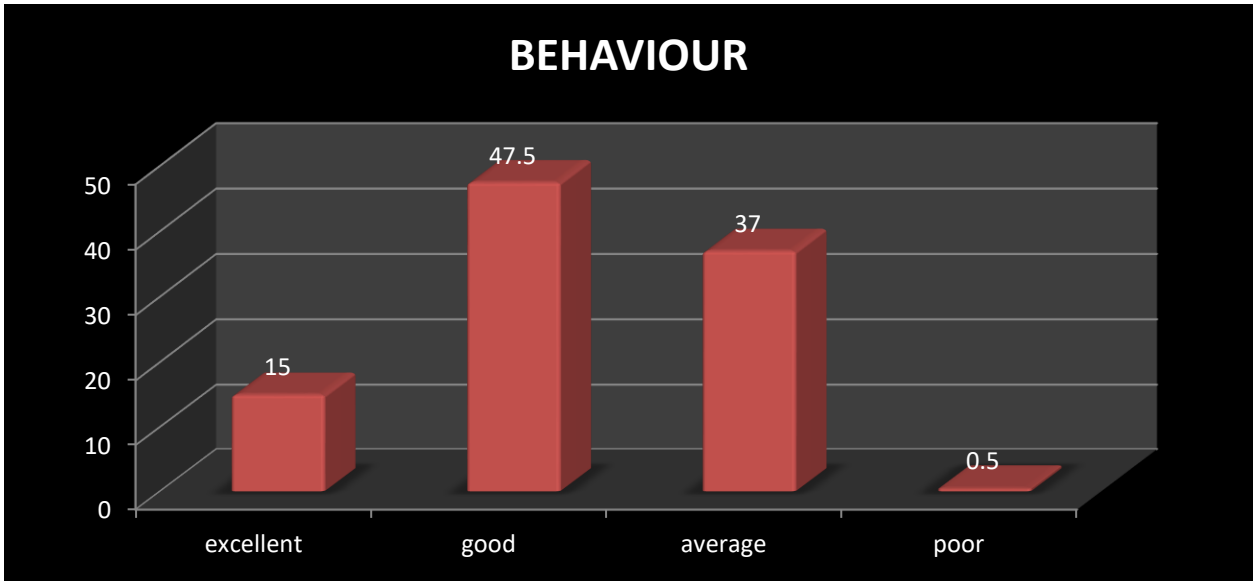

Fig:6 BEHAVIOUR OF STAFF

Behavior of the officers towards customer is appreciated by almost all the customers apart from few where they feel the officer should be more courteous and polite.

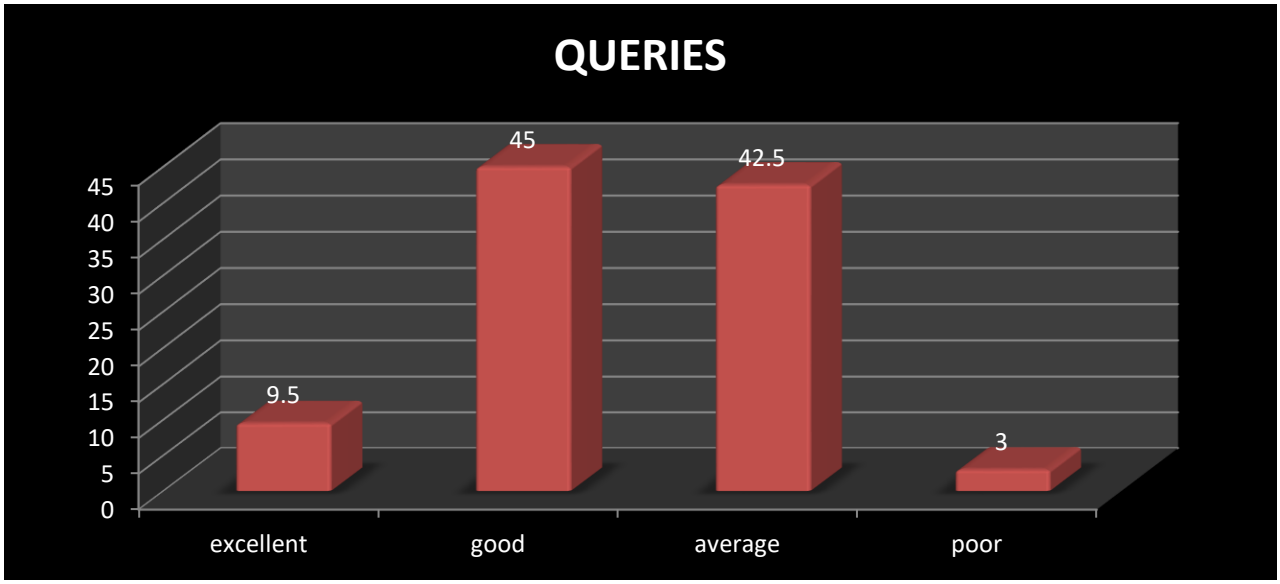

Fig:7 QUERIES

Most of the officers are able to clarify the queries being asked by the customers. The question being asked by most of the patients are like when they will get the result, where it will get tested, do they have to call again asking for report etc but 3% of the customers reported that the officer is not able to clarify their doubts so they will call to the customer care and confirm it.

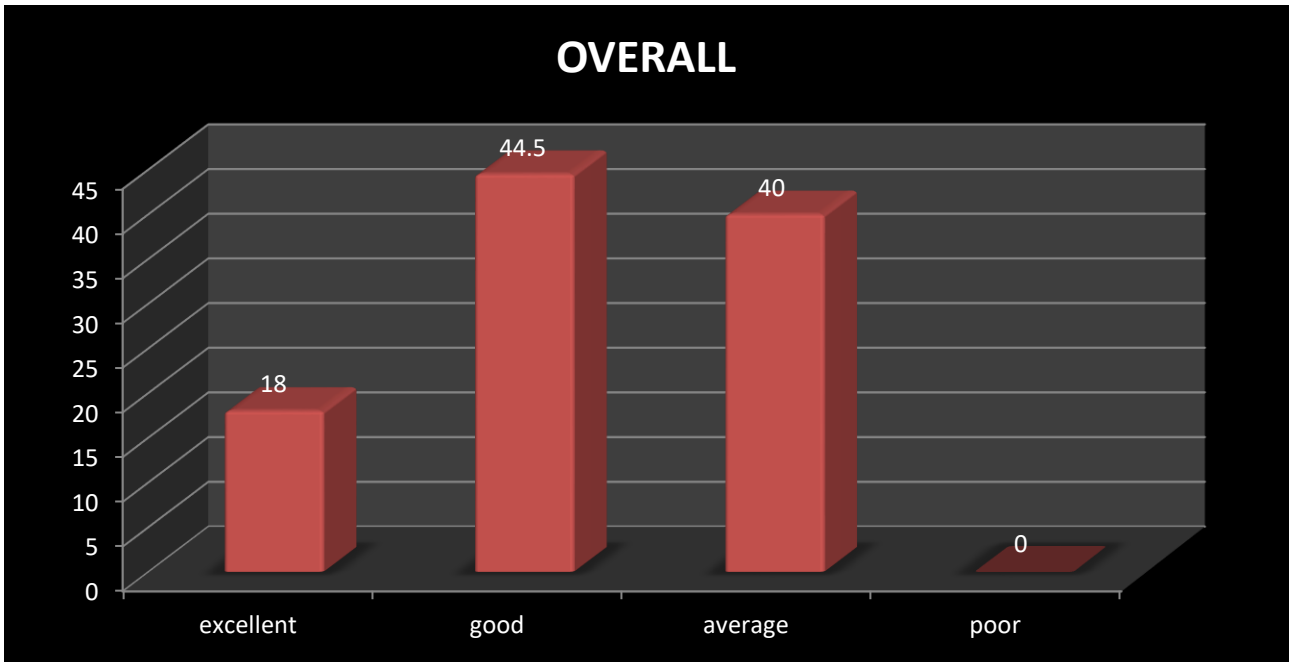

Fig:8 OVERALL

All the customers are quite satisfied with the services availed by them though few of them have issues in some of the questions being asked but on overall rating no customer gave a poor response .

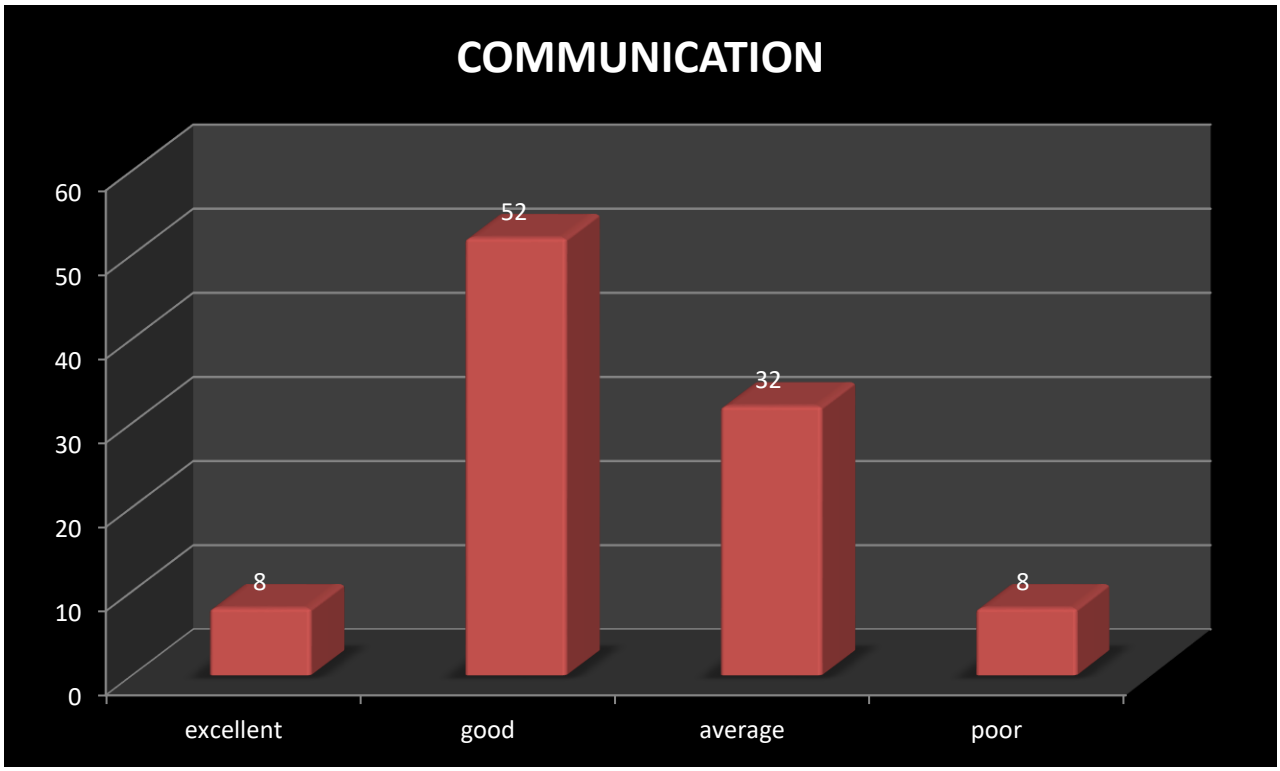

Fig:9 COMMUNICATION

Out of 200 samples, 25 cases are of e consultation where a health officer visits the customer pace and facilitate an e consultation with the doctor .In case of communication 8% of the customers are not happy with the interaction with the doctor, due to poor network connection they are not able to talk properly.

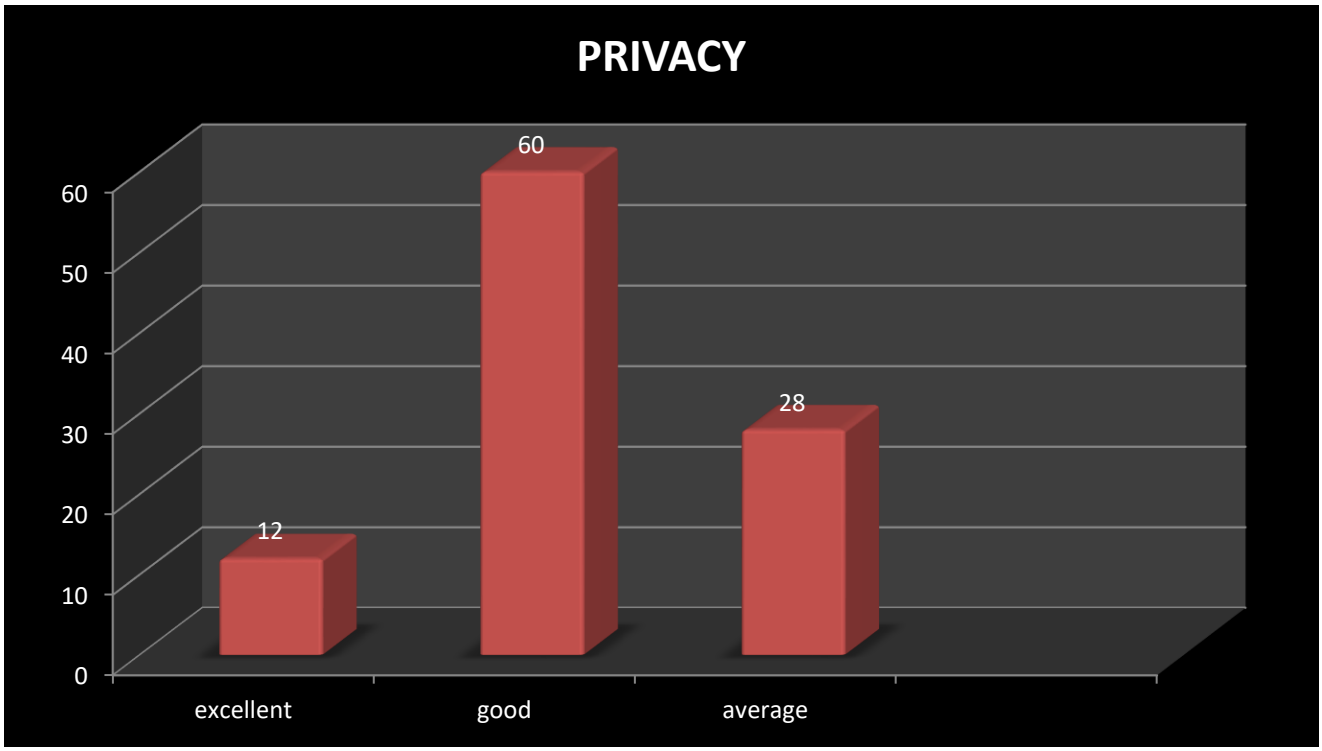

Fig:10 PRIVACY

All the customers who consulted through audio/video call are quite satisfied with the privacy.

SERVICE WISE SATISFACTION

CODES	
1	BAD
2	POOR
3	AVERAGE
4	GOOD
5	EXCELLENT

SERVICES * COMFORTABLE

Count		COMFORTABLE				
		2	3	4	5	Total
SERVICES	PHO	1	31	44	17	93
	MFO	0	15	12	7	34
	MHO	0	15	15	1	31
	PHYSIO	0	8	13	4	25
	CCR	0	7	4	6	17
Total		1	76	88	35	200

When it comes to service wise satisfaction, customers are comfortable availing all the different services of the organization, physiotherapy services at home provides customer the most comfort.

SERVICES * BOOKING

Count		BOOKING				
		2	3	4	5	Total
SERVICES	PHO	0	42	34	17	93
	MFO	0	11	15	8	34
	MHO	1	11	15	4	31
	PHYSIO	2	9	9	5	25
	CCR	0	10	5	2	17
Total		3	83	78	36	200

When it comes to booking two customers had a poor experience for booking a physiotherapy order, the reason for it is the physiotherapy orders are not provided directly but first an assessments takes place after that service starts. For rest of the services booking customers has a smooth booking experience.

SERVICES *PUNCTUALITY

Count		PUNCTUALITY				
		2	3	4	5	Total
SERVICES	PHO	1	37	35	20	93
	MFO	2	10	13	9	34
	MHO	0	14	12	5	31
	PHYSIO	0	12	8	5	25
	CCR	1	3	11	2	17
Total		4	76	79	41	200

When it comes to punctuality it has been observed that the majority of the health officers reach well on time to the customer place. But 2 of the customer reported poor about the facilitation officer as he reached to the respective diagnostic after the customer made to the place .so they were not satisfied with the punctuality of staff.

SERVICES * PROMPTNESS

Count		PROMPMTNESS					
		2	3	4	5	6	Total
SERVICES	PHO	4	31	38	20	0	93
	MFO	1	15	15	3	0	34
	MHO	0	12	14	5	0	31
	PHYSIO	0	9	13	3	0	25
	CCR	0	7	5	4	1	17
Total		5	74	85	35	1	200

When it comes to promptness 4 of the customer reported that the staffs are not prompt as discussed in the above graph of promptness, they reported that they were not informed about the pre requisites due to which the test got rescheduled for the next day.

SERVICES *QUALITY

Count		QUALITY				
		2	3	4	5	Total
SERVICES	PHO	1	39	37	16	93
	MFO	3	8	16	7	34
	MHO	1	12	10	8	31
	PHYSIO	1	10	11	3	25
	CCR	0	5	12	0	17
Total		6	74	86	34	200

Quality service is delivered by all the different health officers. In case of facilitation 3 people reported it poor in terms of waiting time, according to them they should not have to wait this much if they are availing the facilitation service.

SERVICES * BEHAVIOUR

Count		BEHAVIOUR			
		3	4	5	Total
SERVICES	PHO	28	43	22	93
	MFO	12	13	9	34
	MHO	5	18	8	31
	PHYSIO	7	14	4	25
	CCR	9	7	1	17
Total		61	95	44	200

Good behavior is received by the customers from the entire different health officer.

SERVICES * QUERIES

		QUERIES				
		2	3	4	5	Total
SERVICES	PHO	0	29	50	14	93
	MFO	2	17	10	5	34
	MHO	0	15	13	3	31
	PHYSIO	2	7	10	6	25
	CCR	0	9	6	2	17
Total		4	77	89	30	200

All the officers are able to clarify the doubts and questions being asked by the customer regarding their test and treatment. In case of facilitation and physiotherapy 2 customers reported that the officers are not able to clarify their doubts.

SERVICES * OVERALL

		OVERALL			
		3	4	5	Total
SERVICES	PHO	31	39	23	93
	MFO	16	14	4	34
	MHO	13	12	6	31
	PHYSIO	10	13	2	25
	CCR	6	9	2	17
Total		76	87	37	200

Overall experience with all the different officers reported good by the entire customer.

SEX WISE SATISFACTION

	Frequency	Percent	Valid Percent
FEMALE	85	41.46341	41.46341
MALE	115	56.09756	56.09756
Total	200	100	100

Males are more satisfied with services than female.

Results

- Majority of the patients and their family members are satisfied with the services they availed.
- Few of the customers got disappointed due to communication problem; they are not able to interact with the doctor properly during the e consultation.

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Gaps

- Communication problem (between pops)
- Network issue
- Professionalism

Discussion

As it has been observed from the survey that the majority of the customers are quite satisfied with the different health services they availed at their doors step. The above studies also reflects that the customers were quite satisfied availing the services at home and it hardly matters for them receiving it at home ,in fact one of the rehabilitation study shows the exact result for both the patients one of which received the treatment at a rehabilitation centre and the other at home.

Another fact is that more standard framework needs to be developed for satisfaction survey of home health care services. As quality is a continuous process and patient satisfaction is reportedly a useful measure for providing a direct indicator of quality in healthcare. It reflects efforts to improve health outcomes and meet standards to make health services broadly acceptable.

Recommendation

- Improve communication among all the different operating centers (POP)
- Resolving network issue(better internet connection to be provided to the health officers)
- The internet connection should be provided based on which area has better internet connectivity for a particular company (for eg. In one area airtel does not works good but Vodafone does).
- Training for field officers every 6 months.
- They should be encouraged to call the patients 45 minutes prior to reach their place and should inform them in advance about the prerequisites.
- The call centers people are also encouraged to inform the customer about the prerequisites of the test at the time of booking.

Conclusion:

It has been observed during the survey that majority of the patients are satisfied with the services they availed apart from few instances where the customers were not happy, like when a officer does not reaches on time, prerequisites of the test was not informed to the customer. One facilitation officer reaches after the customer reaches the place and many other small issues were there like clarifying the doubts and courtesy but overall the customers are quite satisfied availing health care services at home.
The officer needs to be trained in with respect to withdrawing blood sample, following BMW guidelines, grooming and politeness towards the customer. A periodic audit is must by the manager in charge.
As quality is continuous and a never ending process, and so is the purpose of this survey to measure the different aspect of services and to improve the overall quality of the service delivery. So the entire delivery of the services still needs attention and precision.

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Annexure

CUSTOMER SATISFACTION SURVEY

Order no.
Service:
Age:
Sex:

Mode of booking your order
a) Call centre
b) Website
c) Mobile app

1) How comfortable you are using our services.
a) Excellent
b) Good
c) Average
d) Poor
e) Bad

2) How did you like the booking procedure?
a) Excellent
b) Good
c) Average
d) Poor
e) Bad

3) Do the officer reaches on time.
a) Excellent
b) Good
c) Average
d) Poor
e) Bad

4) The promptness of service.
a) Excellent
b) Good
c) Average
d) Poor
e) Bad

5) The quality of care you received.
a) Excellent
b) Good
c) Average

d) Poor
e) Bad

6) Officers behavior
a) Excellent
b) Good
c) Average
d) Poor
e) Bad

7) Officers reply to all your queries.

a) Excellent
b) Good
c) Average
d) Poor
e) Bad

8) Overall how would you rate your experience?
a) Excellent
b) Good
c) Average
d) Poor
e) Bad

Note: question no.9 and 10 are exclusively for MHO where an e consultation takes place.

9) The communication with your physician.
a) Excellent
b) Good
c) Average
d) Poor
e) Bad

10) The privacy of consultation room.
a) Excellent
b) Good
c) Average
d) Poor
e) Bad