Evaluation of In Patient Satisfaction of Government General Hospital

Internship Training
at
Government General Hospital,
Rajpipla, Narmada, Gujarat
8th Feb 2014 to 8th May 2014

By
Sourabh Jain

Under the guidance of
Dr. Vijay Pratap Raghuvanshi

Post Graduate Diploma in Hospital & Health Management
2012–14

IIHMR UNIVERSITY
Institute of Health Management Research
Jaipur
2014

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TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr.Sourabh Jain, student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from Institute of Health Management Research, Jaipur has undergone dissertation at Government General Hospital, Narmada, Gujarat from 8th February 2014 to 8th May 2014.

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

The Internship & Dissertation is in fulfilment of the course requirements.

I wish him all success in all his future endeavours

Dr. Ashok Kaushik
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Certificate of Completion of Internship/ Dissertation

The Certificate is awarded to

Dr. Sourabh Jain

In recognition of having successfully completed his Internship at

Government General Hospital, Rajpipla

And has successfully completed his Project on
Evaluation of In Patient Satisfaction of Government General Hospital

8th Feb 2014 to 8th May 2014

Government General Hospital, Rajpipla, Narmada, Gujarat

He comes across as a committed, sincere & diligent person who has a strong drive & zeal for learning

We wish him all the best for future endeavors

Date: 9th May 2014

Chief District Medical Officer
Cum Civil Surgeon

Chief District Medical Officer
Cum Civil Surgeon, General Hospital,
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CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled '**Evaluation of In Patient Satisfaction of Government General Hospital, Narmada, Gujarat'** submitted by Dr. Sourabh Jain Enrolment No. IIHMR/PGDHM/2012-14/17-1384 under the guidance of Prof. Vijay Pratap Raghuvanshi for award of Postgraduate Diploma in Hospital and Health Management of the Institute carried out during the period from 8th February 2014 to 8th May 2014 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:

Abstract:

The study was carried out in 81 bedded District hospital of Narmada District to assess the patient satisfaction. The primary data was collected with the help of bilingual (English & Gujarati) Questionnaire for patients (131) and Questionnaire for staff (20). The study reveals that majority of population that belongs from rural area (83 percent) most of them education level of either non formal (47 percent) or below secondary (26 percent). Earning of majority of admitted population (81 percent) is up to Rs. 5 Thousand only.

Out of total interviewed patient, 36 percent patients face difficult to find departments and problems with signage. 41 percent of patient agrees that there is unavailability of 24 hours laboratory facility and they have to go out for advance laboratory tests and USG examinations and CT scans, which will put extra burden on their expenditure.

60 percent agreed that doctor / medical officer does not give them sufficient time, 51 percent agreed that attitude of doctor towards them is not satisfactory, 66 percent are not satisfied with the number of rounds doctor took in 24 hour.

64 percent says that there are less in number of housekeeping staff in the hospital, 36 percent says that they face unavailability of wheelchair or trolley on right time and right place. 46 percent says that there are very less restrooms in the facility. 65 percent complains that the food is tasteless or unhygienic. Out of total patients 55 percent patients does not want to come this hospital again.

Improvement of signage, auditing for signage under 5S audit. Recruitment of Radiologist, Medical officers, Lab Technicians, Grade IV workers will resolve most of the problems, and rest of the problems will be resolved by construction of new premises.

Acknowledgement

I believe, nothing really can be accomplished alone. It's the direction, guidance, involvement, Support and prayers of more than one people around you those results into realization.

My Institute - **Institute of Health Management Research (IIHMR), Jaipur** deserves the foremost appreciation for providing me the opportunities to understand my capabilities. I would like to thank one and all in the IIHMR team for providing me a platform for my professional career as well as for helping me boosting up all my capabilities and making me confident enough to work for health care organisations. I would like to thank **Dr.S.D. Gupta** (Director IIHMR, Jaipur) and **Dr.Ashok kaushik** (Dean IIHMR, Jaipur) for their continuous support.

I acknowledge the tremendous contribution of my guide **Prof. Vijay Paratap Raghuvanshi** in completion of the project right from the word go.

I would like to render my sincere thanks to Govt. General Hospital, Narmada for providing me the opportunity to complete my dissertation.

I convey my deep and sincere thanks to **Dr. Sangita N Parikh** Chief District Medical Officer Cum Civil Surgeon, Narmada for giving me the opportunity to work under her guidance.

I extend my words of thanks to all the staff of General Hospital for always being so cooperative and facilitating me.

Dr. Sourabh Jain

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Abbreviations:

BMW	Bio Medical Waste
ENT	Ear Nose Throat
IPD	Inpatient department
LAB	Laboratory
OPD	Outpatient department
OT	Operation Theatre
GHMIS	Gujarat Health Management information System
DLIMS	Drug Logistics Information Management Software
NIC	National Informatics Centre
CHC	Community Health Centre
PHC	Primary Health Centre
NRC	Nutrition Rehabilitation Centre
PP	Post-Partum
ANC	Ante Natal Check-up
PNC	Post Natal Check-up
PM	Post Mortem
WHO	World Health Organization

List of Appendices

Part 1: Internship

1.1: Introduction of the Internship

I did my internship from Government General Hospital, Narmada for the period of three months from Feb 8 to May 8 2014.

The objective of the internship at General Hospital was to gather an exhaustive knowledge about the dimensions of a public healthcare delivery facility and apply the insights so gained to succeed in the same industry. The Dimensions of a public healthcare facility are to provide best possible cashless or most economic treatment to the patients with the help of limited resources (both human & non-human), strengthening the public healthcare delivery system by implementing various health programmes and schemes.
Public health system works on four basic pillars, Government programmes, information sharing, continuous training and innovations for improvement.

As an Assistant Hospital Administrator my roles and responsibilities included understanding the current ongoing Programmes in hospital and their monitoring and information sharing to higher authorities, GHMIS (Gujarat Health Management Information System), and other online portals e.g. e-Mamata, DLIMS, etc . The Clinical and Non Clinical Performance Indicators of the Health Facility.
Implementation of 5S programme for continuous quality improvement of each and every department of the hospital.
When we talk about maintenance of quality work in hospital, role of hospital administrators is very crucial because they can act as an individual who can work parallel to the system to monitor it and employ required changes whenever needed time to time.

1.2: Overview of Hospital:

Biggest district hospital at the border area of MP, Gujarat & Maharashtra. It is established on Feb 21st 1919 by his highness Maharaja Shri Vijay Singh now it is part of Ministry Of Health and Family Welfare, Govt. of Gujarat. It is a referral centre for 4 CHCs, 21 PHCs and 135 sub centres of Rajpipla**.**

Mission:

"To enhance the patients' quality of life by providing specialized medical treatment and preventative healthcare at free/ affordable cost".

Vision:

"To be the network of finest public healthcare institutions in Gujarat as well as in India, providing quality medical care services with the state of art technology with easy accessibility, affordability & equity to the people of Gujarat and beyond"

1.3: Services Available at Hospital:

- **24 Hours Emergency Department**
- **Blood Storage**
- **Laboratory**
- **Fully Equipped Operation Theatre**
- **PP Unit**
- **NRC Centre**
- **24 Hours X-Ray Facility**
- **24 Hours Ambulance Facility**
- **General Medicine Department**
- **General Surgery Department**
- **ENT Department**
- **Ophthalmic Department**
- **Dental Department**
- **Psychology and Counselling**
- **Obstetrics and Gynaecology**

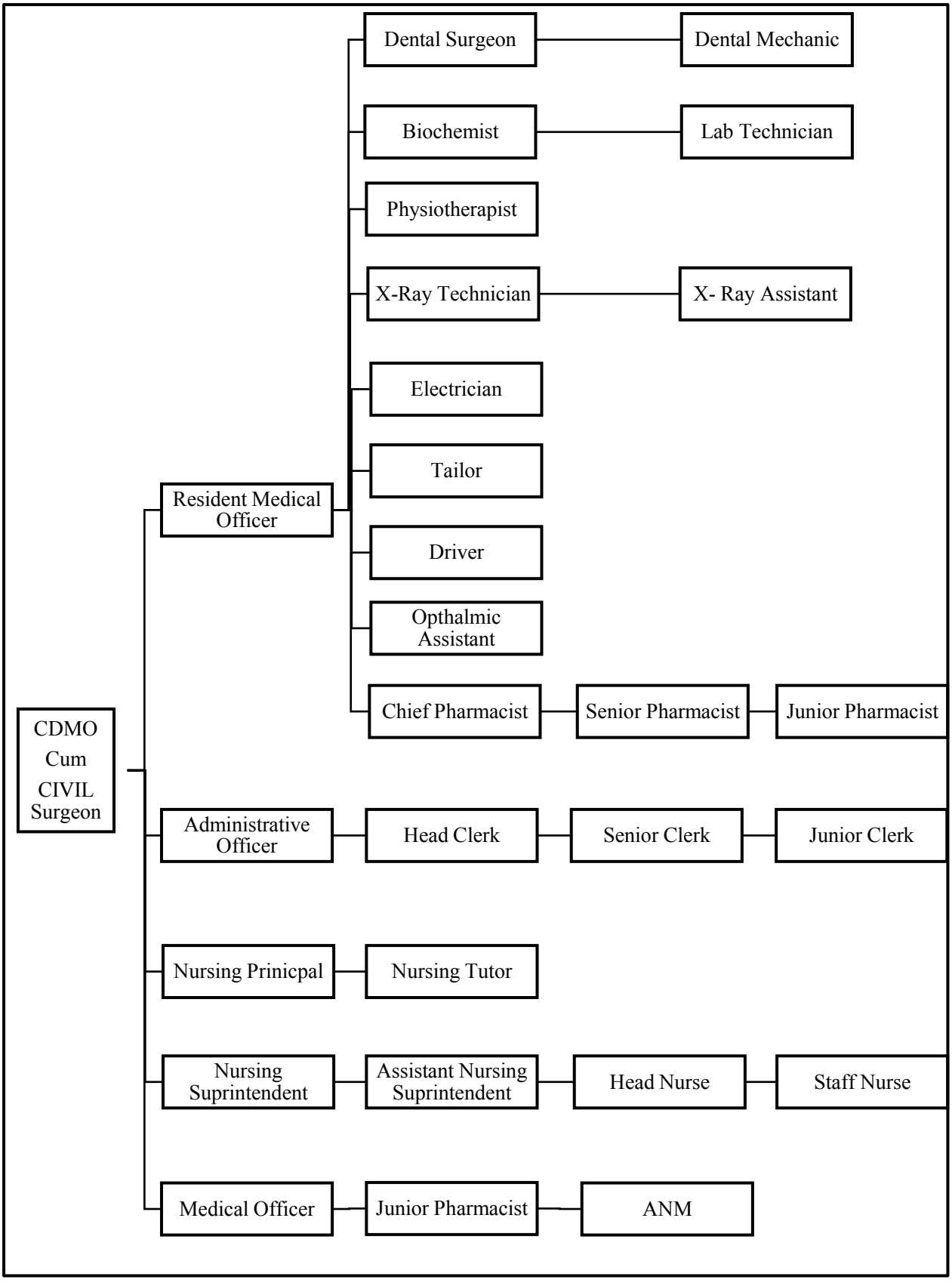
1.4: Facility Layout:

- **Ground Floor:**
  - **Main Building**
    - **Emergency Department**
    - **Radiology (X-Ray)**
    - **OPD**
    - **Registration**
    - **Laboratory**
    - **Pharmacy**
    - **Counselling Centre**
  - **Building 2**
    - **Blood Storage**
    - **Administration Department**
    - **Server Room**
    - **PP Unit**
- **First Floor**
  - **Surgical Ward (Male, Female)**
  - **Minor OT**
  - **OT Complex**
  - **Labour Room**
  - **Gynaec Ward**
- **Second Floor**
  - **Medical Ward (Male, Female)**
  - **Paediatrics Ward**
- **Third Floor**
  - **Medical Store**
  - **Meeting Hall**
  - **NRC Centre**

- **Medical Record Room**

- **Isolation Ward**
- **Physiotherapy Department**
- **Cold Storage**
- **PM Room**
- **BMW Collection Room**

1.5: Organizational Structure



1.6: Key Learning

1. **Understanding of functioning of various departments of a government facility, management of staff, maintenance etc.**

2. **HMIS and E- Portals**

   - **GHMIS: Gujarat Health Management Information System:**

     GHMIS is centralized Health management Information system which is practiced in each and every government health facility of Gujarat from small unit (PHC) to big unit (General Hospital, Medical Colleges). Practice of GHMIS is now an essential part to be always updated regarding any information about any health facility of Gujarat.

     It became operational from 2008

   - **DLIMS: Drug Logistics Information Management Software**:

     It is developed for Gujarat Medical Services Corporation Limited, Gujarat by NIC and it is operational since April 2008. DLIMS is not just another Inventory Software, but a Enterprise Resource Planning (ERP) system. Apart from leading the department into a 'Just-in-time Inventory', the MIS and compiled reports, it also organizes incoming transactions.

     The program was introduced to achieve accurate, precise, timely and transparent information about drugs and logistics. This program was also introduced at each and every government health facility of Gujarat

   - **e-Mamta: Mother and child tracking system:**

     Most maternal deaths could be prevented if women had access to appropriate health care during pregnancy, childbirth, and immediately afterwards.

   Reduction of Infant Mortality Rate (IMR) and Maternal Mortality Ratio (MMR) are the important public health challenges for India. As a major initiative in this regard, the Health and Family Welfare Department of the Government of Gujarat, has introduced a 'Mother & Child' name based tracing Information management system called "e-Mamta" in collaboration with National Rural Health Mission (NRHM) and National Informatics Centre (NIC). The system aims at registering individual pregnant women, individual children in the age group 0 to 6 and adolescents along

with their full details to ensure complete service delivery of Ante Natal Care (ANC), Child birth, Post Natal Care (PNC), Immunization, nutrition and adolescent services and to track the left outs of these services. The bilingual website with English and Gujarati interface is quick, easy to navigate and well presented. Health details of about 85 lakh families in the entire state comprising about 4.30 crore individuals covering more than 80 percent of the population have thus been entered so far in the software's database and system generated unique Health IDs have been provided to all.

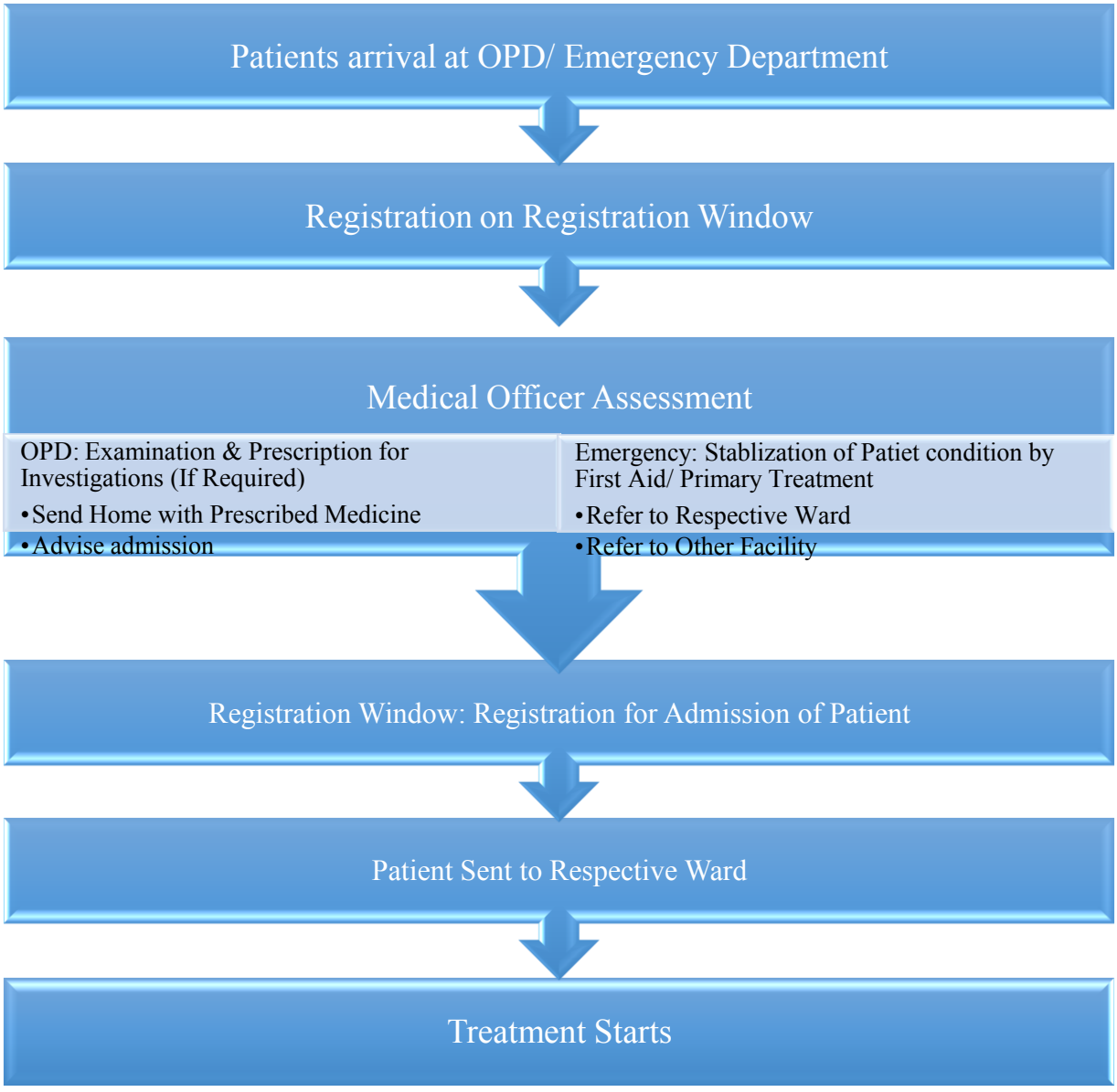
3. **Implementation of 5S in every department:** 5S is a tool for continuous quality improvement in each and every department to reduce waste and wasteful activities or process and to attain maximum output and outcome from them. This includes on the spot training and continuous training of all staff involved from higher level to lowest level on hierarchy.

   Brief description of 5S elements:

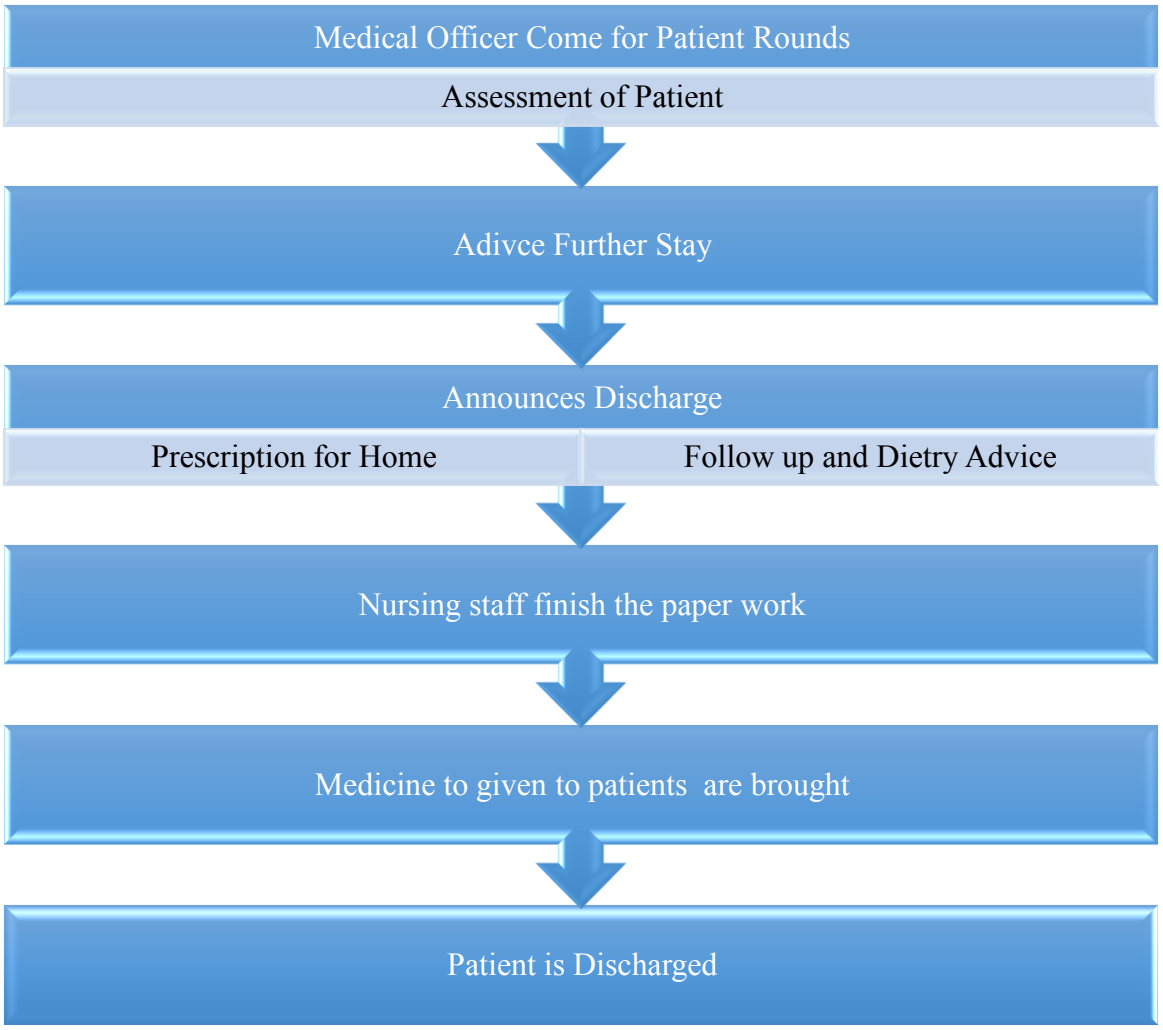
   - **Seiri (sort)**
     - Remove unnecessary items and dispose of them properly
     - Make work easy by eliminating obstacles
     - Provide no chance of being disturbed with unnecessary items
     - Prevent accumulation of unnecessary items
     - Evaluate the unnecessary items with regard to dept./cost/other factors.
   - **Seiton (straighten or streamline)**
     - Arrange necessary items in order so they can be easily picked for use
     - Prevent loss and waste of time
     - Make it easy to find and pick up necessary items
     - Ensure first-come-first-serve basis
     - Make work flow smooth and easy
     - Can also be translated as "set in order"
   - **Seiso (shine)**
     - Clean your workplace completely
     - Use cleaning as inspection
     - Prevent machinery and equipment deterioration
     - Keep workplace safe and easy to work
     - Can also be translated as "sweep"

- **Seiketsu (standardize)**
    - Maintain high standards of housekeeping and workplace organization at all times
    - Maintain cleanliness and orderliness
    - Maintain everything in order and according to its standard.
- **Shitsuke (sustain)**
    - To keep in working order
    - Also translates to "Self-Discipline" meaning to do without being told

Admission Process:



Discharge Process:



Part 2: Dissertation

2.1: Introduction of Study:

Definition:

In simple words patient satisfaction is an intangible reward, which can be achieved through efforts done by healthcare service provider & facility which exceeds up to patient's expectations.

Patients' satisfaction with an encounter with health care service is mainly dependent on the duration and efficiency of care, and how empathetic and communicative the health care providers are. It is favoured by a good doctor-patient relationship. Also, patients who are well-informed of the necessary procedures in a clinical encounter, and the time it is expected to take, are generally more satisfied even if there is a longer waiting time.

Influencing Factors:

- Literacy levels
- Intellectual and physical/sensory disability levels and difficulties with language proficiency & cultural diversity.
- Social elements
    - financial status,
    - educational status,
    - demographics (urban/rural),
    - Technology.

2.2: Importance of study:

Improving the quality of patient care in government hospitals is a vital and necessary activity to provide assessable health care facilities to those patients who cannot afford to spend much on health.

Patients report they receive less individual attention than ever before. They complain that doctors and nurses are too busy tending to the technical aspects of care to provide the much needed attention to patients' personal needs.

More recent developments in the medical environment have prompted the health care profession to recognize patients as valuable customers and ultimate beneficiary.

Patient satisfaction is as important as other clinical health measures and is a primary means of measuring the effectiveness of health care delivery. The current challenge is to improve health status community and this challenge has forced health care organizations to focus on patient satisfaction to improve utilization of government facilities instead of private hospitals and also to avoid unwanted financial burden to poor population. If you don't know what your strengths and weaknesses are, you can't compete effectively.

Most important reason to conduct patient satisfaction surveys

- They provide the ability to identify and resolve potential problems before they become serious.
- They can also be used to assess and measure specific initiatives or changes in service delivery.
- They can identify those operations and procedures that require better explanation to patients.
- Most importantly, they can increase patient loyalty by demonstrating you care about their perceptions and are looking for ways to improve.

2.3: Problem statement:

1. What are the causes for dissatisfaction of patients in government hospital?
2. What are the expectations of patients from Government Hospital?

2.4: Aim: To find out satisfaction level of patients and causes behind patient dissatisfaction in In Patient Department

2.5: Objective:

- To evaluate satisfaction level of patients
- To ascertain the cause behind patient dissatisfaction

2.7: Literature Review:

- **T Sreenivas and Nethi Suresh Babu, AN APPRAISAL OF QUALITY OF SERVICES IN URBAN HOSPITALS,** A hospital is an institution of health care providing treatment with specialized staff and equipment, but not always providing for long-term patient stay. Today hospitals are centres of professional health care provided by physicians and nurses. Hospitals are usually funded by the state, health organizations, health insurances or charities, including direct charitable donations. The important goals of hospitals are to deliver high quality health services and to respond to the needs of the patients. Patient satisfaction is one of the most sensitive indicators of the quality of their services. The concept of patient satisfaction has encouraged the adoption of marketing culture in service sector including health care services.

- According to a report by State Institute of Health and Family Welfare, Rajasthan, Jaipur, for a health care organization to be successful, monitoring customer's perceptions is a simple but important strategy to assess and improve their performance. Assessment of patient satisfaction is required to help improve health system performance and promote better governance of the hospital services. Although most patients are generally satisfied with their service experience, they may not be uniformly satisfied with all the aspects of care they receive

  Responses of In-patients:

  Interview was taken from those in-patients who were discharged after treatment or who had been admitted for at least 24hours. For Project Facilities easy accessibility (40.9%) and low expenses (44.8%) were the prime reasons cited by the in-patients.

Similar reasons were given for the Non Project Facilities also. Low expenses were the main reason given by respondents of Project Facilities across education, gender and income status (BPL-50.9%).More patients were able to locate the registration counter in Project Facilities (96.7%). Availability of staff at the registration counter has been reported almost 100% across region and various demographic characteristics (age, gender, caste, education and income) in Project Facilities. 53.4% of the in-patients of the Project Facilities rated the behaviour as "good", 25.5% as "fair" and 20.4% as "excellent". When compared with Non Project Facilities, almost similar percentage considered the behaviour to be "good". Moreover, human behaviour tends to get easily affected by a number of personal and environmental factors. Across region more in-patients from tribal and desert had considered the behaviour as "excellent".

- Another study by Raman Sharma, Meenakshi Sharma, R.K. Sharma "The patient satisfaction study in a multispecialty tertiary level hospital, PGIMER, Chandigarh, India" A cross sectional study was conducted to assess the patient satisfaction level visiting the hospital with the objectives to know the behaviour and clinical care by the clinicians and para-medical staff and in terms of amenities available

  It was found that average time spent by respondents for registration was 33.20 minutes. The overall satisfaction regarding the doctor-patient professional and behavioural communication was more than 80 per cent at almost all the levels of health care facilities. In total, 55 per cent of respondents opined that doctors have shown little interest to listen to their problem while 2/3 opined that doctors used medical and technical terms to explain their illness and its consequences. More than 70 per cent satisfaction level was observed with staff of laboratories and security personnel with their cooperation and sympathetic nature. More than 80.0 per cent were satisfied with basic amenities. Of these, 40.0 per cent were of the view that services were costlier than their affordability.

- A study done by Sharma, J. K.; Narang, Ritu says Patients' perception is significant as it impacts their 'health-seeking behaviour' including utilization of services, seeks involvement in issues directly related to them, enables the service provider to meet their expectations better, and provides relevant information to the policy makers to improve the quality.

The findings illustrated some interesting differences in user perception regarding service quality and how they varied between different healthcare centres and according to the demographic status of patients. It was observed that: • 'Healthcare delivery' and 'financial and physical access to care' significantly impacted the perception among men while among women it was 'healthcare delivery' and 'health personnel conduct and drug availability'. • With improved income and education, the expectations of the respondents also increased. It was not merely the financial and physical access that was important but the manner of delivery, the availability of various facilities and the interpersonal and diagnostic aspect of care as well that mattered to the people with enhanced economic earnings. • What was most astonishing was the finding that the overall quality of healthcare services is perceived to be higher in Primary Healthcare Centres than in Community Healthcare Centres (CHCs). Inadequate availability of doctors and medical equipment, poor clinical examination and poor quality of drugs were the important drawbacks reported at CHCs.

- Pawan Kumar Sharma, Shaik Iftikhar Ahmed, Manisha Bhatia, Health care services in Punjab: Findings of a patient satisfaction survey
  Both outdoor patients and indoor patients found the location of the hospitals accessible, diagnostic facilities in order, and quality of medical care satisfactory. There were, of course, some difficulties faced in respect of availability of medicines from within the hospitals, delay in obtaining the reports of diagnostic tests, and laxity in emergency cases. Many of the identified areas for quality improvement are related to the time factor and non-availability of medicines at the hospitals. The escalating costs involved in the purchase of medicines from the market emerged as a cause of worry for every patient.

- A study done by Mufti Samina, Qadri GJ, Tabish SA, Mufti Samiya, R Riyaz says, as focus has shifted from the healthcare providers to the healthcare consumers; patient satisfaction is being increasingly used worldwide for the assessment of quality of services provided by healthcare institutions. To understand patient satisfaction, "patient's perception" of care must first be understood. Of all the healthcare workers nurses spend maximum time with the patients. Therefore, the nurse is in a unique position to influence and promote effective consumer relationships. Though patient satisfaction surveys with nursing care are routinely conducted in the developed world to monitor and improve the quality of care, the same is not true for the developing world especially in the Indian subcontinent.

2.8: Methodology:

- **Study Design**
  - Descriptive Observational

- **Study Area**
  - In Patient Department of General Hospital, Narmada
  - **Sample Size:** Average monthly Admissions for year 2013-14 are 642 and sample size is 130
  - **Selection process:** Random selection of patients who are being discharged

- **Study Population**
  - Discharged patients

- **Data collection Techniques & Tools**
  - **Primary Data**: - Bilingual (English & Gujarati) Questionnaire was made on the basis of Likert scale
  - Questionnaire for patients: A uniform patterned questionnaire consisting of Likert scale will be used with score level of 1-5
    - Scoring pattern :- Scoring of each question be based on
    - 1 = Strongly Agree
    - 2 = Agree
    - 3 = Neutral
    - 4 = Disagree
    - 5 = Strongly Disagree
  - Other Vital Observations
  - **Secondary Data**: Review of various relevant literature for in patient satisfaction.

- **Data Management:**

  All data collected with the help of questionnaires is analyzed with the help of SPSS and Microsoft Excel

2.9: Findings at Various departments of Hospital

Socio-Economic Information of Sample Patients

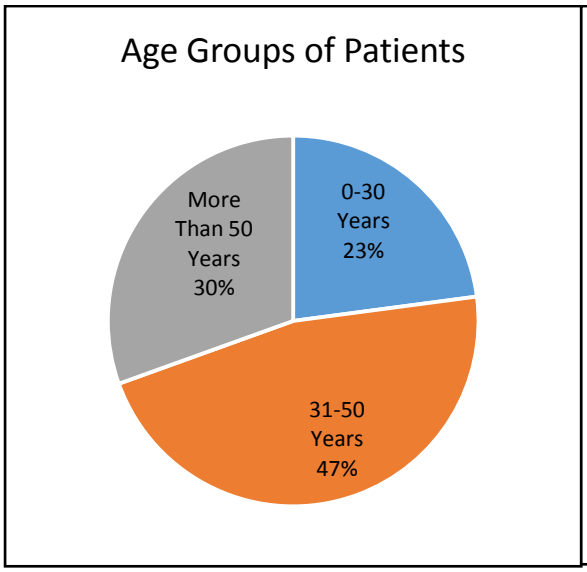


Figure 01: Age Group of Patients

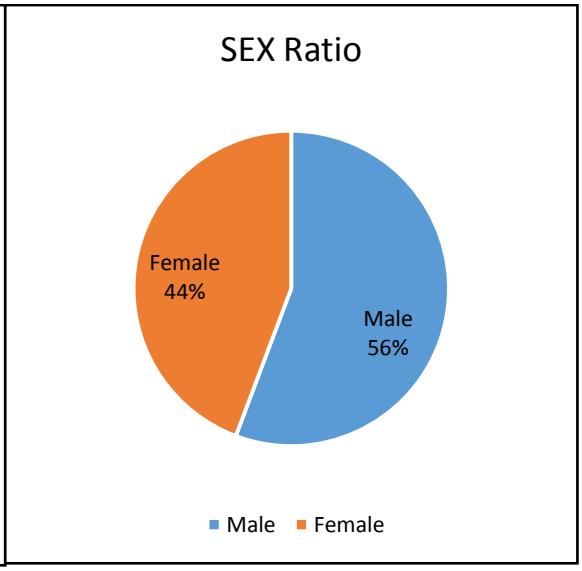


Figure 2: Sex Ratio of Patients

Majority of the admitted population belongs to Age group between 31-50 Years. Out of which 56 percent were male and 44 percent are female patient

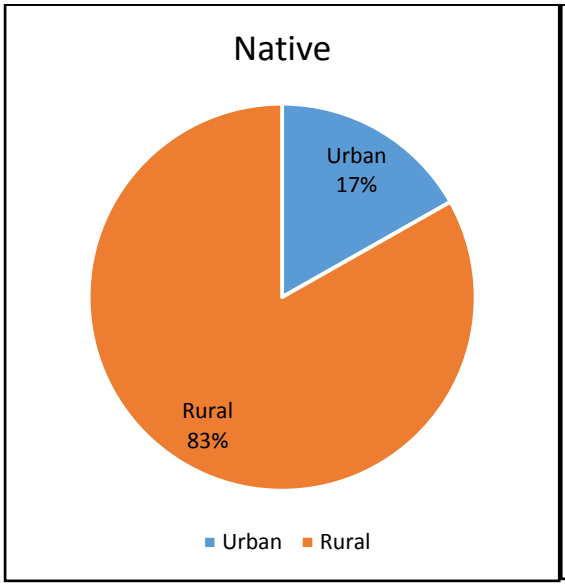


Figure 3: Native Place of Patients

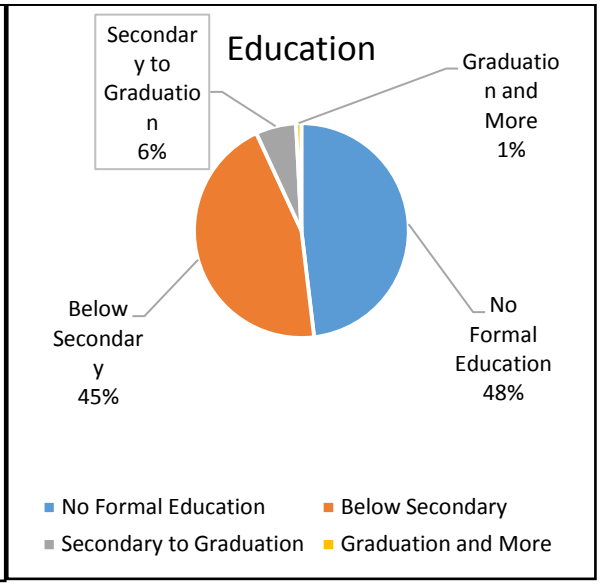


Figure 4: Education

Above figure 3 shows that majority of the admitted population belongs from the rural area i.e. 83 percent. Figure 4 shows that maximum patient has received no formal education.

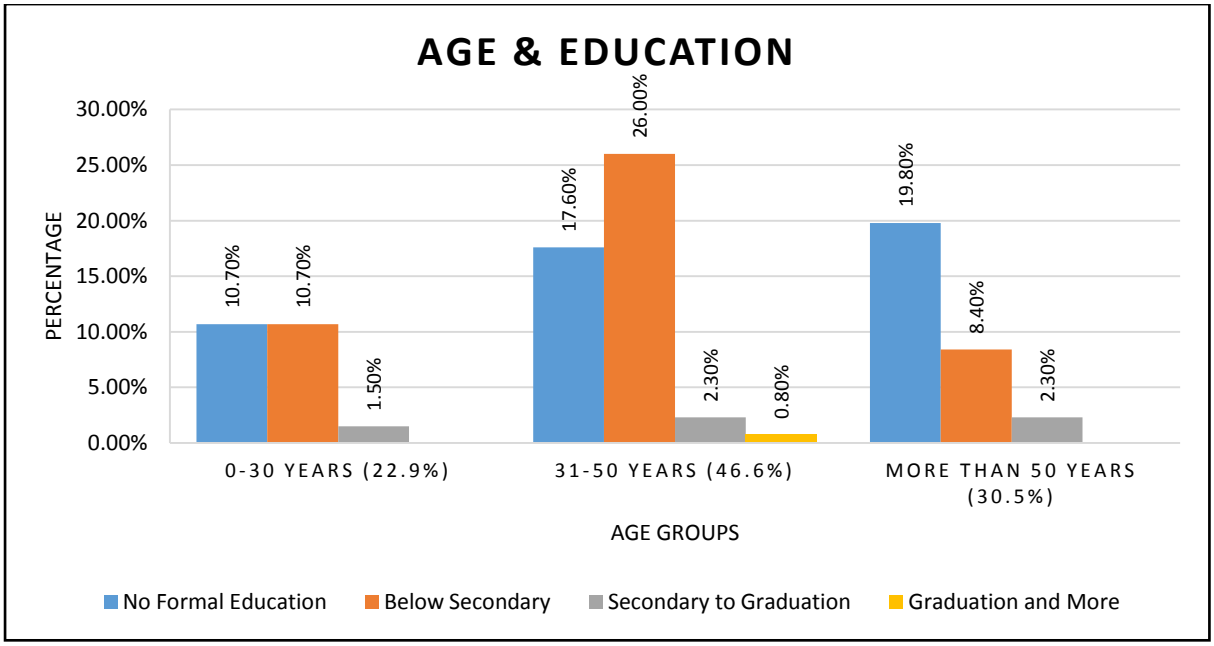


Figure 5: Age & Education

Above graph shows that majority of the admitted population are from age group of 31- 50 years (46.6 percent) out of them majority have education below secondary (26 percent)

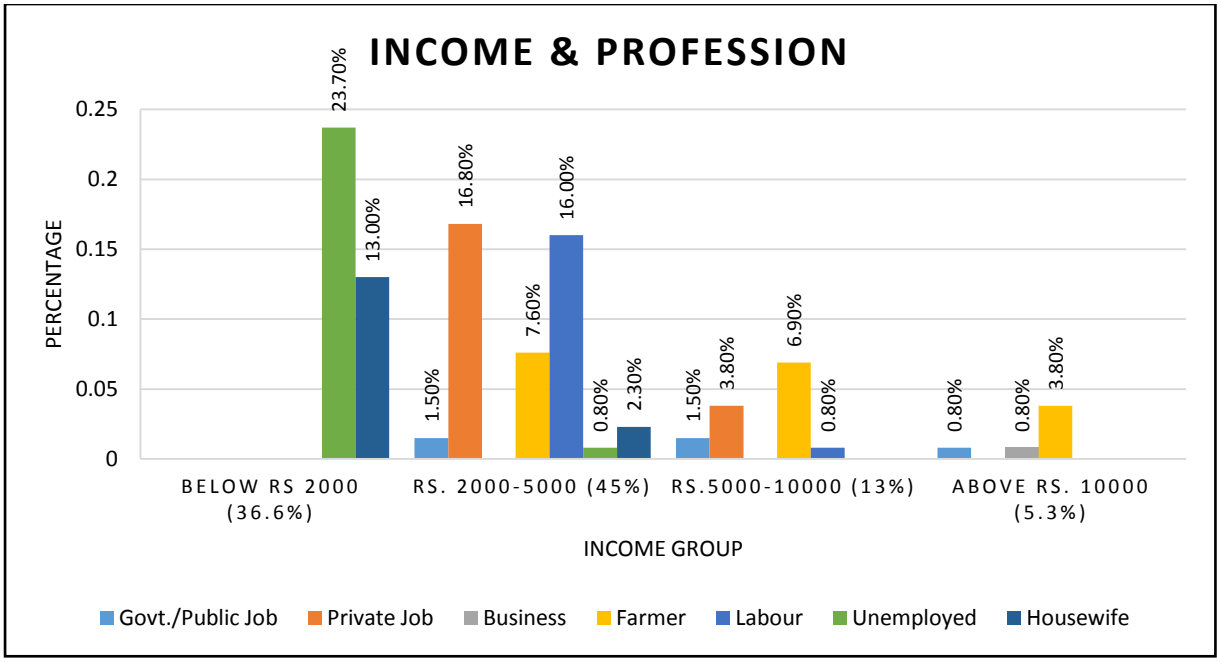


Figure 6: Income & Profession

Above graph shows that majority of admitted population (45 percent) earns between Rs. 2000- 5000 only. Second majority of population (36 percent) have monthly income of less than Rs. 2000 out of them 23.70 percent are unemployed.

Perceptions of the Patient towards Admission Procedure

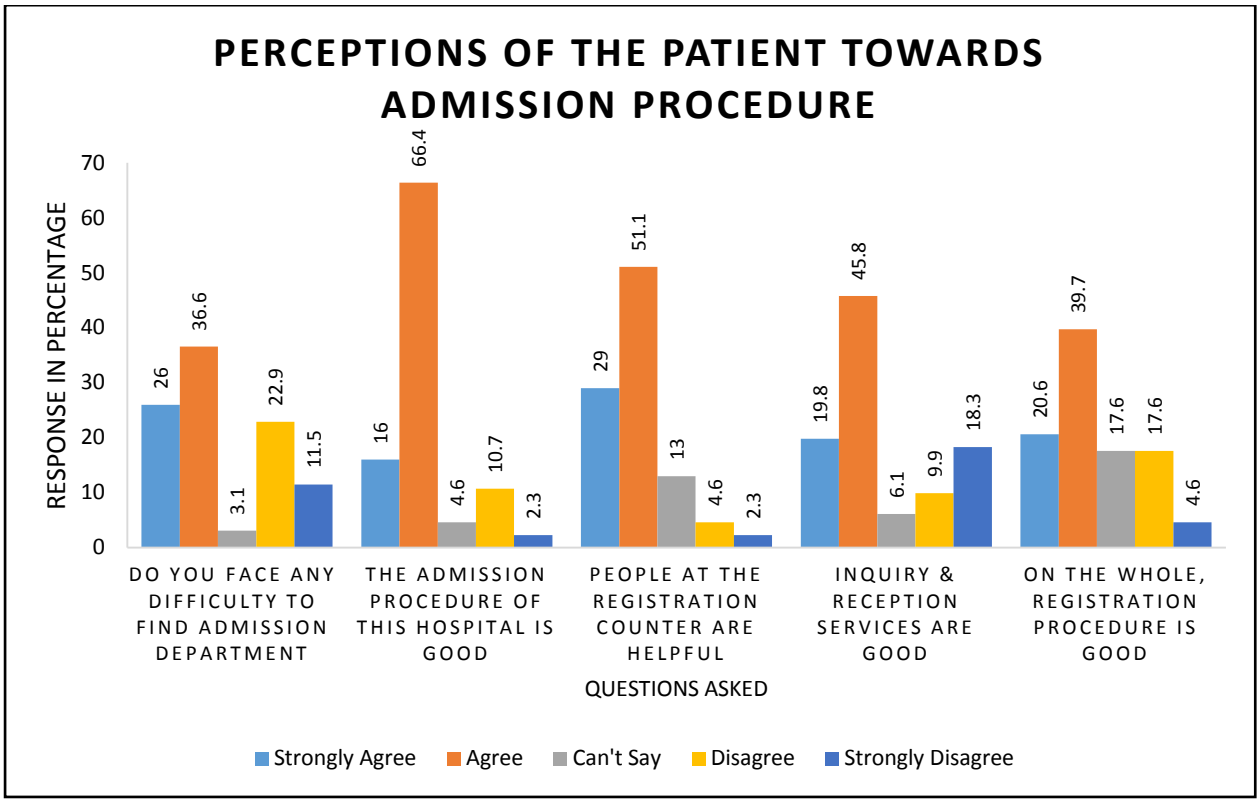


Figure 7: Perceptions of the Patient towards Admission Procedure

Above graph shows that over all admitted people perceive that admission procedure of the hospital is satisfactory although 62.6 percent agreed that they face difficulty to find Admission department & various departments of hospital.

Causes:

- Lack of proper signage at various areas of hospital
- Old building, so lack of symmetrical structure

Perception of the Patient towards Physical Facilities

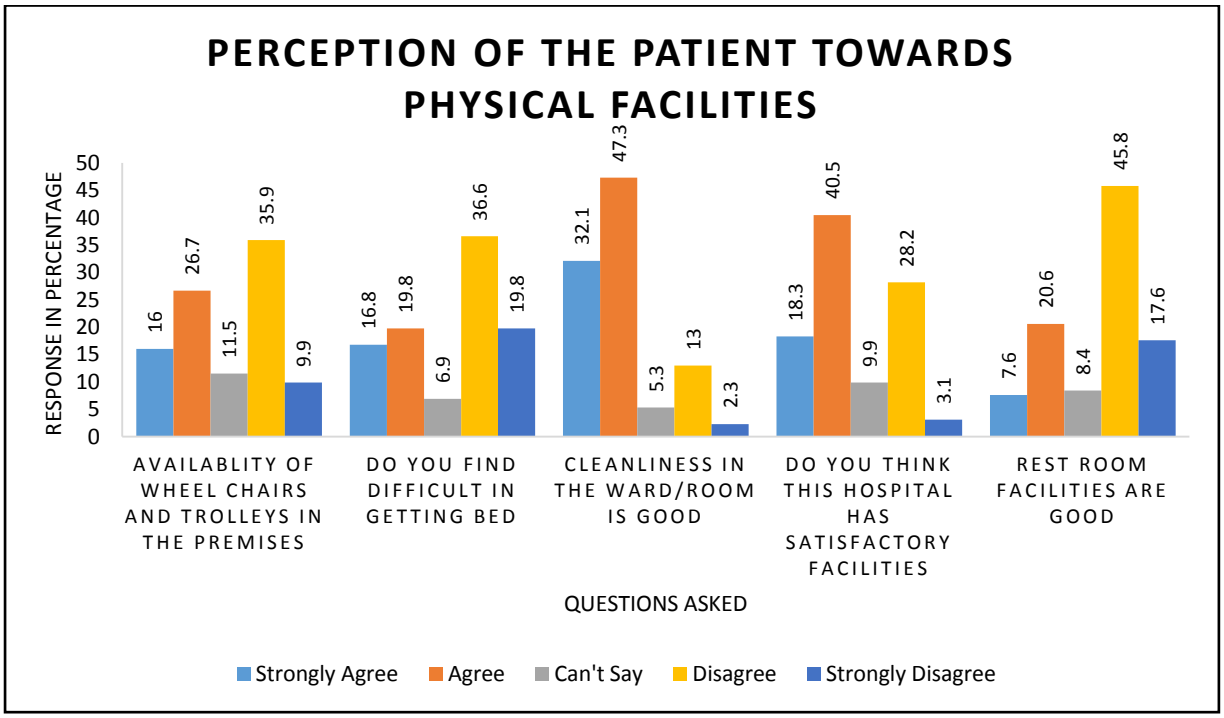


Figure 8: Perception of the patient towards Physical Facilities

Above graph shows that over all admitted patients perceive that from all physical facilities they are satisfied except the availability of wheel chair and trolleys on time (45.8 percent) & Restroom facilities (63.4 percent).

Causes:

- **For Wheel chair and trolley:**
  - **Lack of Housekeeping staff / Grade IV**: There is lack of housekeeping staff/ Grade IV staff, so because of this, patients/ attendants or hospital staff has to wait for them to finish their previous work
  - **Unorganized usage of wheelchairs and trolleys**: Once a wheel chair is picked from one spot for a patient, then that wheel chair or trolley will be left on that ward only, unless it should be returned to the respective ward once it is used.
- **For Restroom facilities:**
  - The hospital is functional in an almost 100 years old building which was used to be a house so there are very less restroom on each floor which both patient and staff has to share.

Perception of the Patient towards Diagnostic Services

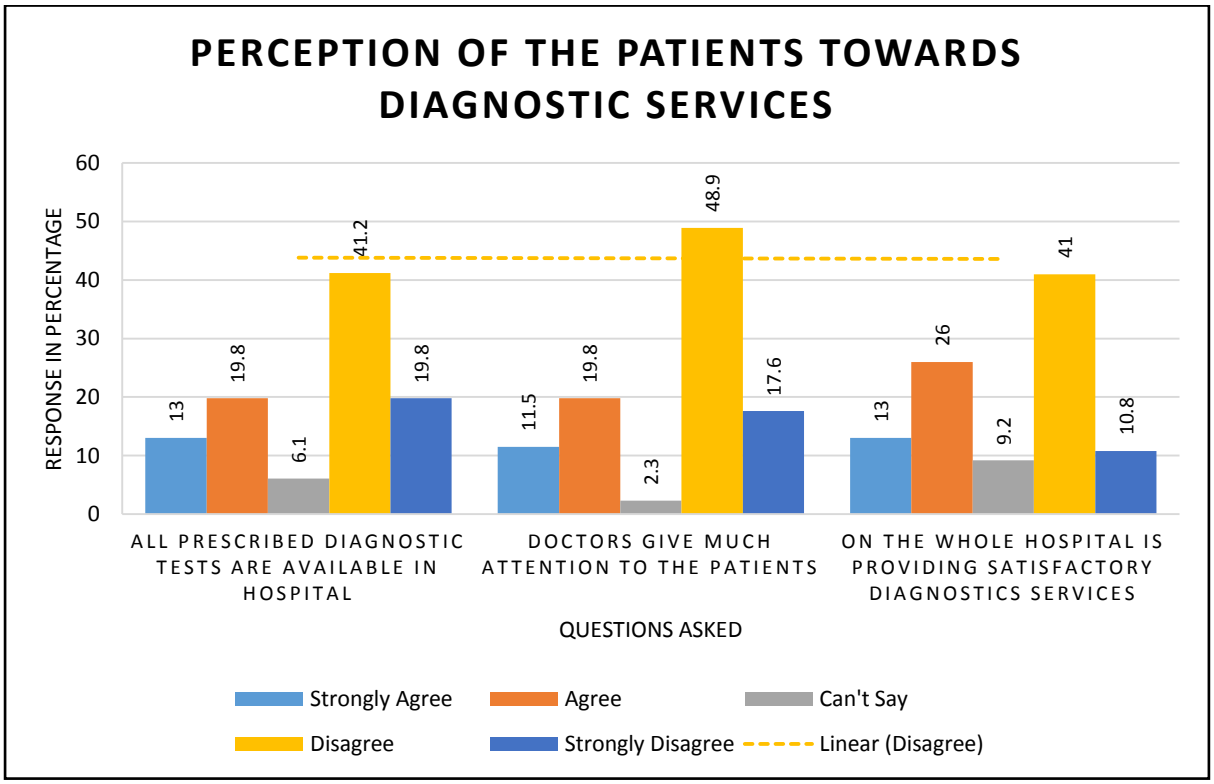


Figure 9: Perception of the patients towards diagnostic Services

Above graph show that all admitted patient perceives that all diagnostic facilities are not available in hospital (41.2 percent), doctors do not give much attention to the patients (48.9 percent) and overall hospital is providing not providing satisfactory services (51.8 percent)

Causes:

- **For Diagnostics:**
  - Only basic investigations (Biochemistry, Rapid car or Kit test), X-Ray facilities are available in hospital although this hospital is the only referral unit for the whole district.
  - Laboratory facility is not available 24 hours, it is open only in OPD timings.
  - **Vacant post of technical staff:** Due to vacant post of Radiologist, there is no facility for USG examination although the district hospital has its own USG machines (3)

Perceptions of the Patient towards Behaviour of the Staff

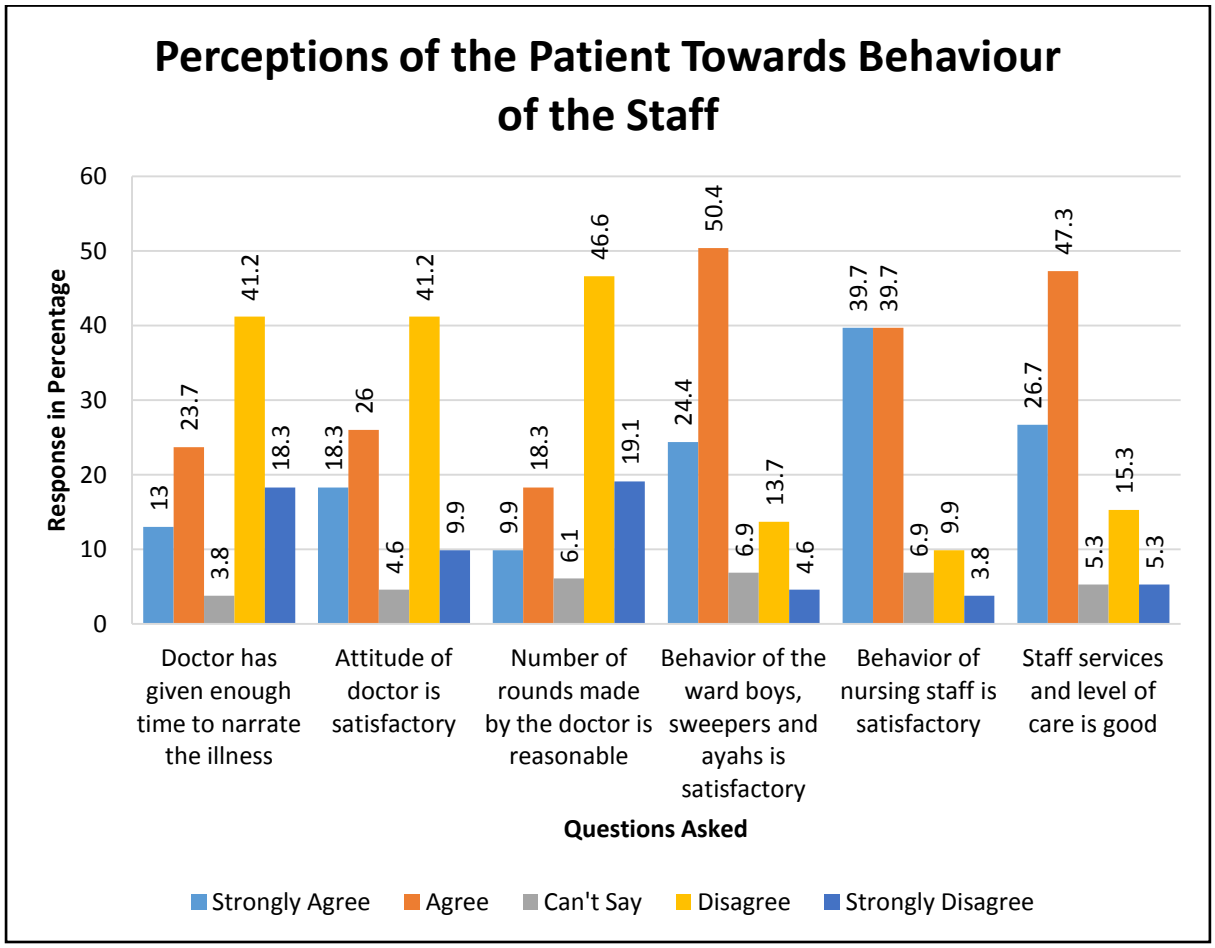


Figure 10: Perceptions of the Patient towards Behavior of the Staff

Above graph shows that over all admitted patients (41.2, 18.8) are dissatisfied because doctor does not give much time to narrate the illness, (41.2, 9.9 percent) says that the attitude of doctor towards them is not satisfactory & the number of rounds made by doctor (46.6,19.1 percent) are not sufficient enough.

Causes:

- Only three Medical Officer are available for all departments including emergency department over 24 hours period because of less count of Medical officer, they are able to give proper attention to patients who requires maximum attention and due to this they are unable to give proper attention to all patients equally.
- Most of the time when there are excess patients in emergency department, Medical officer have to skip rounds of stable patients.
- Majority of patients that get admitted to the hospitals are very less educated so after proper explanation of disease the patients are unable to understand their exact condition.

Perception of the Patient towards Cleanliness

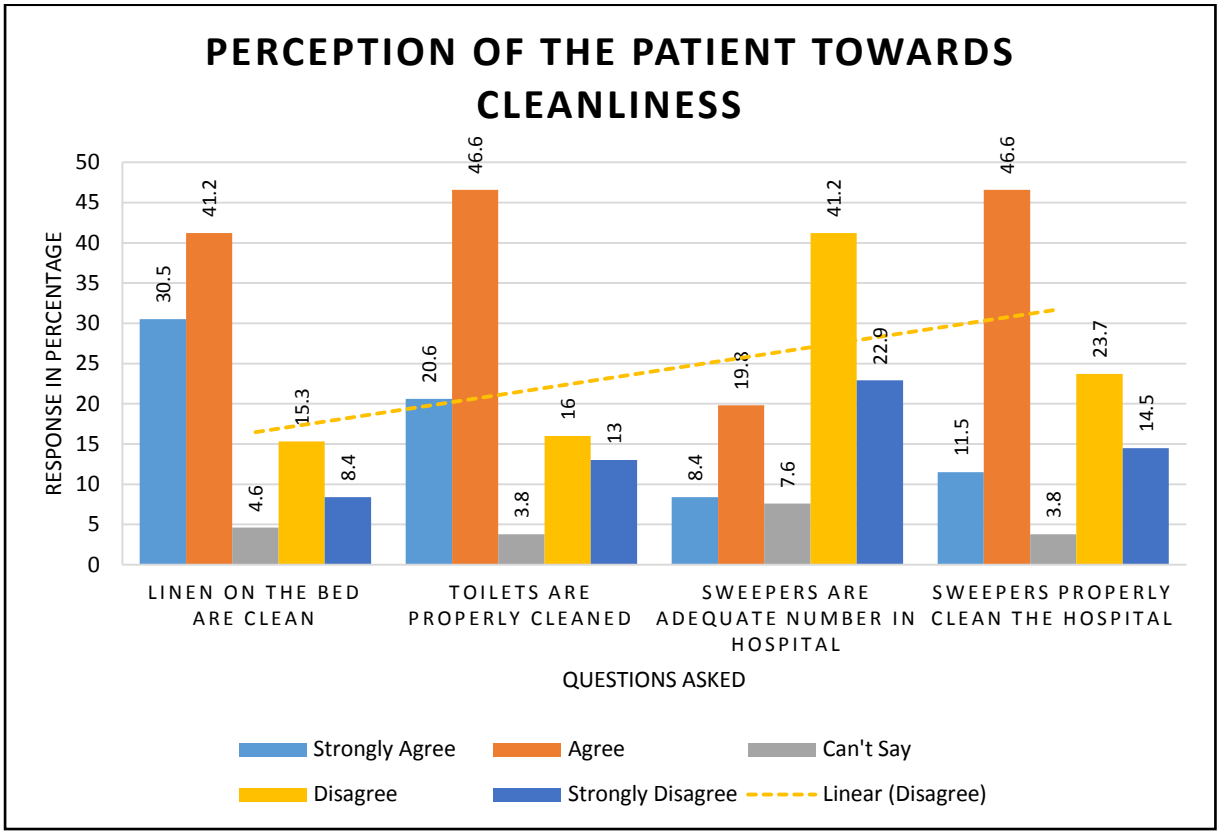


Figure 11: Perception of the Patient towards Cleanliness

Above graph shows that over all patients perceives that there is lack of sweepers (41.2 percent, 22.9 percent) in the hospital for proper cleaning of hospitals and timely availability.

Causes:

- There is only one male and one female housekeeping / Grade IV staff available for each shift and they have to work out both housekeeping work, and work of helper for various works.

Perception of the Patient towards Cleanliness

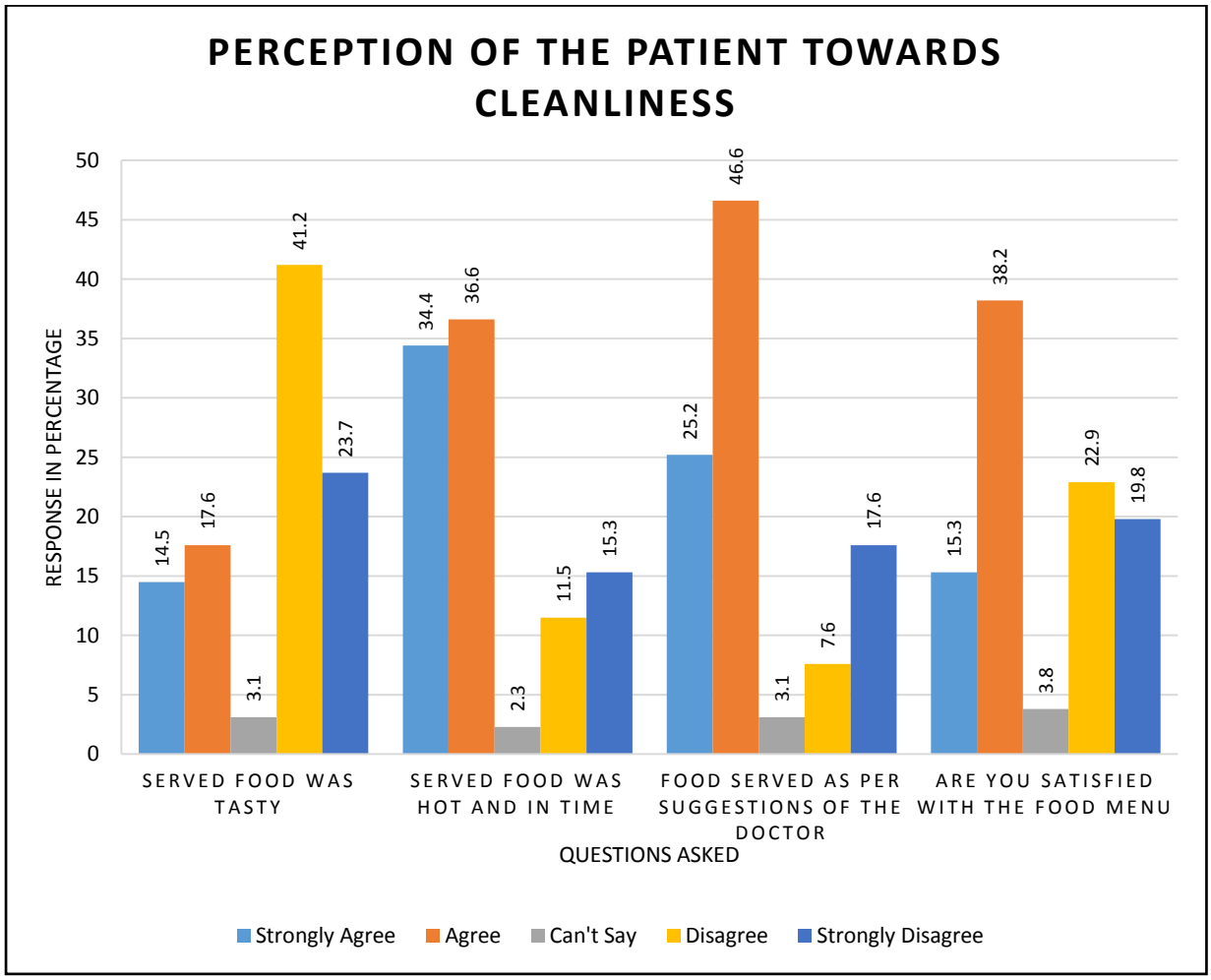


Figure 12: Perception of the Patient towards Cleanliness

Above graph shows that over all admitted patients perceives that served food was tasteless (41.2 percent, 23.7 percent)

Cause: repetition of same menu within week.

Perception of patients towards Discharge process

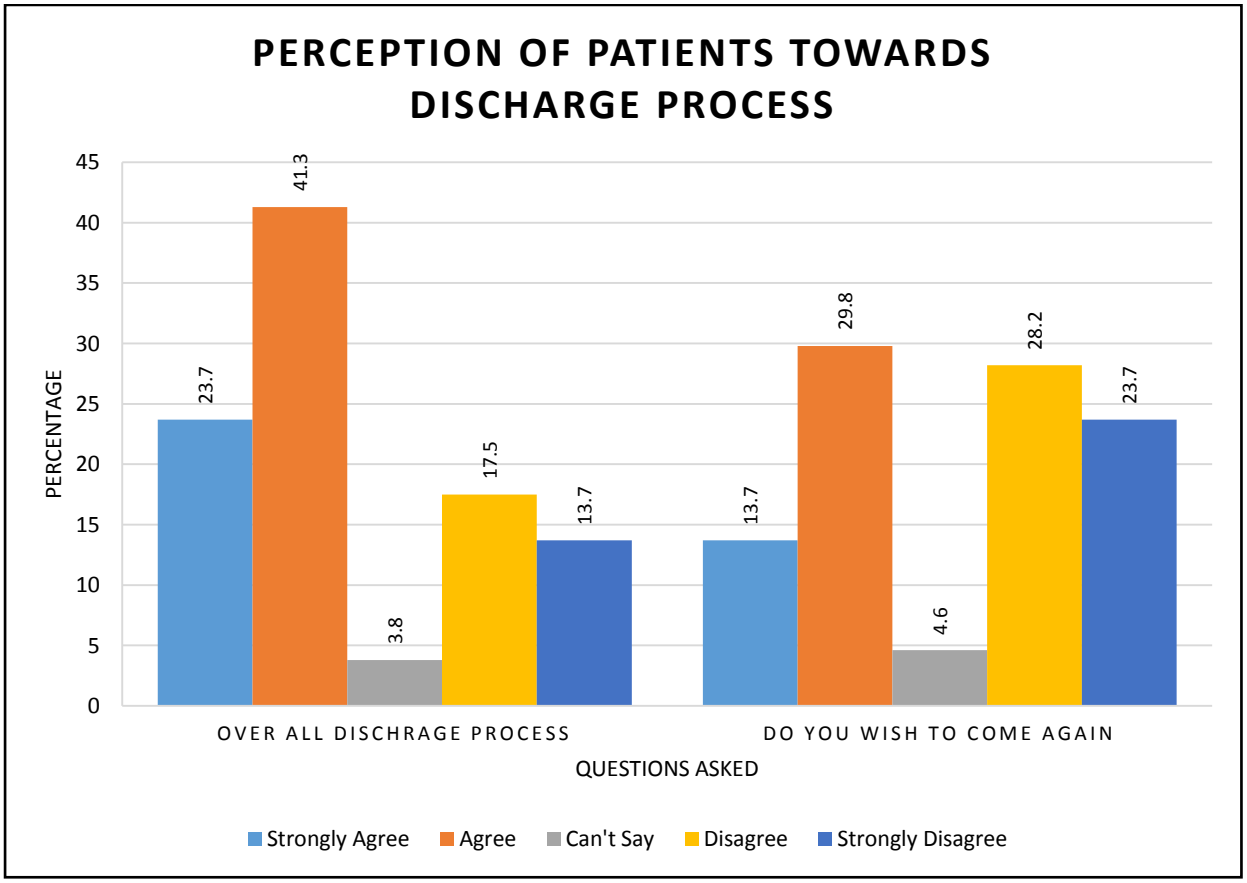


Figure 13: Perception of patients towards Discharge process

Above graph shows that over all admitted patients 55 percent of patients does not want to come again to the same hospital for treatment, but out of all 65 percent are satisfied with the discharge process

2.10: Problem Areas:

- Signage System: There are no or wrong signage at various places of hospital and because of which patients face difficulty to find various departments of hospital.
- Diagnostic Facilities: Unavailability of and advance laboratory tests, USG Examination, CT Scan facility are not available at district hospital (41.2 percent).
- Doctors/ Medical officer do not give much attention to the patients (48.9 percent)
- Doctors/ Medical officer does not give much time to narrate the illness. (60 percent)
- Doctors/ Medical officer do not take patient rounds timely and as guided. (65.7 percent).
- Patient complaints that the attitude of Doctors/ Medical officer towards them was not satisfactory (41.2, 9.9 percent).
- The availability of wheel chair and trolleys on time (35.9 percent)
- Very less Restroom facilities (45.8 percent).
- Lack of adequate count of sweepers (64.1 percent) in the hospital for proper cleaning of hospitals and timely availability.
- Complaint of repetition of same menu within a week

2.11: Comparative Analysis of Problem Questions replied by Patients & Staff

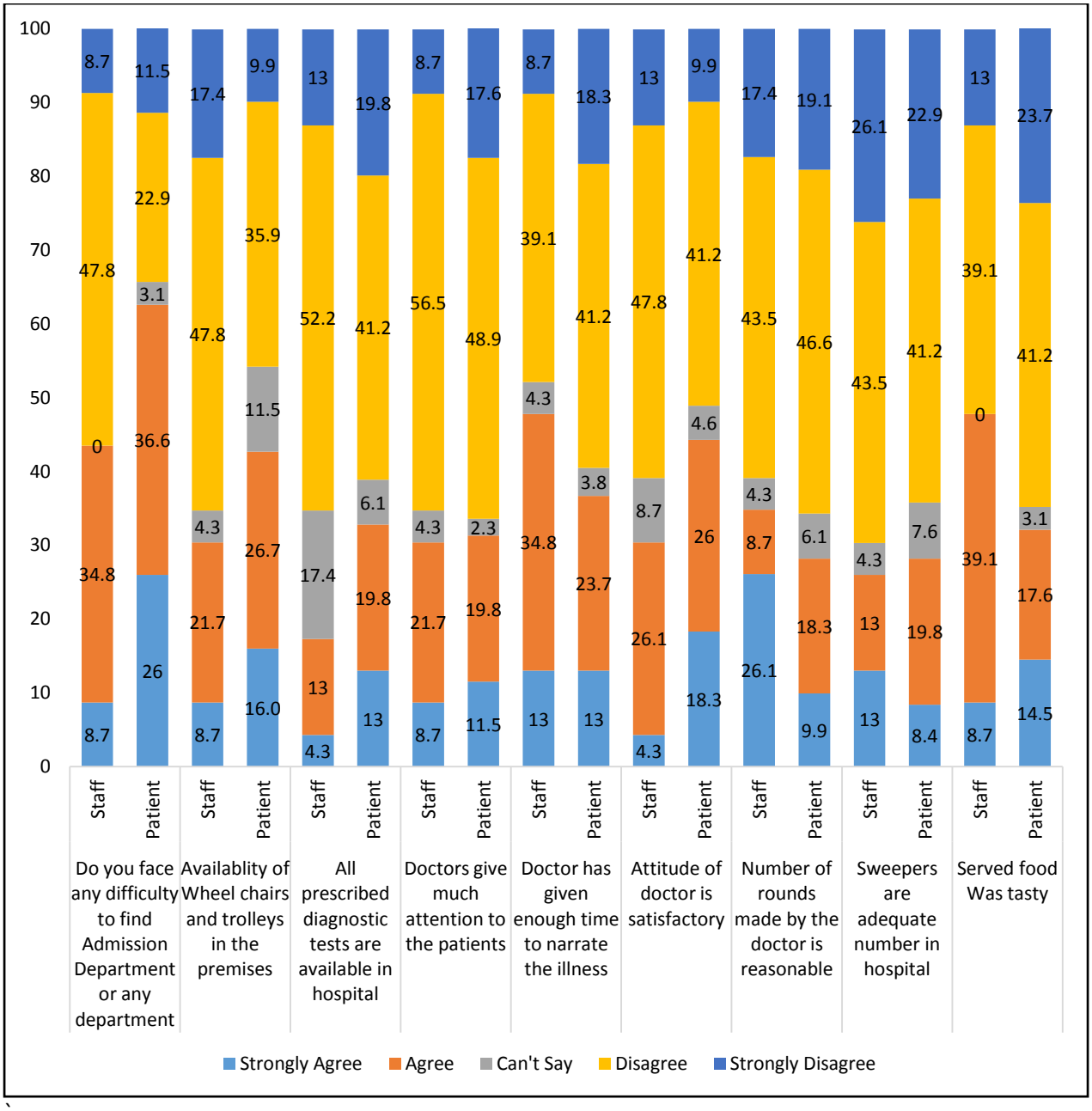


Figure 14: Comparative Analysis of Problem Questions replied by Patients & Staff

Above graph shows comparative analysis of problem questions and their replies according to perception of admitted patients and staff working around them.

Recommendations:

1. For Improvement of Signage System:

- Correction of signage and applying new signage in whole hospital premises wherever needed.
- Monthly checking for all signage: Monthly inspection of all hospital signage, so that whatever signage are missing or broken should be replaced without inconvenience.

2. For Diagnostic Facilities:

- Filling vacant post of Lab Technicians as soon as possible so that laboratory facilities can be available for 24 hours and 7 days a week.
- Pathologist will be directed through CDMO for starting advance lab test facilities and make efforts to start the procedure for making availability of Advance Lab Test. (E.g. Culture, Histopathology etc.)
- Demanding for CT scan Machine and Technician to Higher Authority and making them understand the requirement & urgency of CT Scan Machine.
- Filling vacant post of Radiologist so that patients don't have to go for USG examination outside the hospital and increase their out of pocket expenditure.

3. For problems related to doctor's attention, attitude and number of rounds taken by them:

- Filling the vacant post of Medical Officer/ Doctors (4) so that work load could be shared by them and doctors will be able to give much attention to each and every patient.
- Quarterly training should be conducted for Medical Officer/ Doctors to make them understand the importance of diagnosis explanation, importance of rounds, importance of patient's rights and the most important the importance of bonding and trust between patients and Doctors.

4. For restroom facilities:

- The hospital building is almost 100 years old, so it is facing structural problems for new construction but soon new hospital construction will be done and it will be commissioned and after that there will be no problems related to less count of restroom.

5. For adequate number of sweepers:

- It was recommended to hospital authorities that there is a problem with adequate number of Housekeeping staff/ Grade 4 staff and assurance was given that soon in new contract, number of housekeeping staff will be increased.

6. For food Menu:

- Formation of Mess committee can decide which raw food materials will be purchased and they can also timely surprise audit for the taste of food, hygienic status of kitchen, quality of food
- Matron has to check taste of food at least once a day
- Kitchen employees are instructed to improvise the food menu with the help of Matron (In charge), so that problem with taste of food will be rectified.

Conclusion:

Patients are the primary target customers to any healthcare delivery organization. Patient satisfaction is very important aspect for both public and private hospitals which was used to ignore from long time in public institutions.

Both patients and hospital staff agreed on some of the common issues which could lead to increase in the level of dissatisfaction among patients. The study concluded with results of lack of human resource from top to bottom (Radiologist, Gynaecologist, Medical officer, Lab Technicians Grade IV employees, Housekeeping Staff), Unavailability of facilities like 24 hour laboratory, very few in number of basic amenities like restroom because of old infrastructure were found.

Timely training of medical officers will make them understand patient's perspective of understanding the diagnosis and ease of care what they expect from a treating physician. Recruiting of suitable candidates for the vacant post will reduce workload on each and every individual and it will also give better outcome. Timely surveys will also help the actual situation of hospital facilities and hospital staff and will lead to find innovative ways to resolve confronting issues.

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Annexure:

Annexure 1: Questionnaire for Patient:

PLEASE TICK ☑ for correct answer

NAME:…… **REG. NO**…….. **DATE**……

AGE: 0-30 Years ☐ 31-50 years ☐ Above 50 years ☐

SEX:…….. **NATIVE:** Rural ☐ Urban ☐

ADDRESS…… **VILLAGE**…… **DISTRICT**……

EDUCATION: No formal Education ☐ Below X ☐

X class to Degree, ☐ Above Degree ☐

PROFESSION: Govt./Public Sector ☐ Private Sector ☐

Business ☐ Agricultural Labour ☐ Unemployed ☐

MONTHLY INCOME: Below Rs.2000 ☐ Rs.2001-5000 ☐

Rs.5001-10000 ☐ Above Rs. 10000 ☐

PLEASE TICK ☑ ONLY FOR ONE ANSWER FROM OPTION 1-5

S.No.	Questions	1	2	3	4	5
		Strongly agree	**Agree**	**Can't Say**	**Disagree**	**Strongly disagree**
1	Do you face any difficulty to find Admission Department or any department	☐	☐	☐	☐	☐
2	The admission procedure of this hospital is good	☐	☐	☐	☐	☐
3	People at the registration counter are helpful	☐	☐	☐	☐	☐
4	Do you find delay for admission	☐	☐	☐	☐	☐

5	Inquiry & Reception services are good	☐	☐	☐	☐	☐
6	On the whole, registration procedure is good	☐	☐	☐	☐	☐
7	Wheel chairs and trolleys in the premises are giving satisfactory services	☐	☐	☐	☐	☐
8	Do you find difficult in getting bed	☐	☐	☐	☐	☐
9	Cleanliness in the ward/room is good	☐	☐	☐	☐	☐
10	Do you think this hospital is comfortable	☐	☐	☐	☐	☐
11	Restroom facilities are good	☐	☐	☐	☐	☐
12	All prescribed diagnostic tests are available in hospital	☐	☐	☐	☐	☐
13	Doctors give much attention to the patients	☐	☐	☐	☐	☐
14	On the whole hospital is providing satisfactory services	☐	☐	☐	☐	☐
15	Doctor has given enough time to narrate the illness	☐	☐	☐	☐	☐
16	Attitude of doctor is satisfactory	☐	☐	☐	☐	☐
17	Number of rounds made by the doctor is reasonable	☐	☐	☐	☐	☐

18	Behaviour of the wad boys, sweepers and ayahs is satisfactory	☐	☐	☐	☐	☐
19	Behaviour of nursing staff is satisfactory	☐	☐	☐	☐	☐
20	Staff services and level of care is good	☐	☐	☐	☐	☐
21	Linen is clean in the hospital	☐	☐	☐	☐	☐
22	Restroom are properly cleaned	☐	☐	☐	☐	☐
23	Sweepers are adequate number in hospital	☐	☐	☐	☐	☐
24	Sweepers properly clean the hospital	☐	☐	☐	☐	☐
25	Served food was tasty and hygienic	☐	☐	☐	☐	☐
26	Served food was hot and in time	☐	☐	☐	☐	☐
27	Food served as per suggestions of the doctor	☐	☐	☐	☐	☐
28	Are you satisfied with the food menu	☐	☐	☐	☐	☐

29. Did someone filled this form for you if yes then explain relation? …….....

30. Do you Prefer to come here next time?.....

Any Comments:

…….....……

Phone No:☏……

Signature……....

Annexure 2: Gujarati Questionnaire for Patients

કૃપા કરીને સાચા જવાબ માટે ☑ નિશાની કરો

નામ:……રજી.નં…….. તારીખ ……

ઉંમર: 0-30 વર્ષ ☐ 31-50 વર્ષ ☐ Above 50વર્ષ ☐

જાતી:……..વતન:પછાત ☐ શહેરી ☐

સરનામું……ગામ:…… જિલ્લો……

અભ્યાસ: નિરક્ષર ☐ મેટ્રીકસ ની નીચે ☐ મેટ્રીક્સથી સ્નાતક સુધી, ☐ અનુસ્નાતક ☐

ધંધો: સરકારી ☐ ખાનગી ☐ વેપાર ☐ ખેતી ☐ બેકાર ☐

મહેરબાની કરી ☑ ની નિશાની વિકલ્પ ૧-૫ માંથી ફક્ત એક જ વિકલ્પ પર કરવી

અ. નં..	પ્રશ્ન	૧	૨	૩	૪	૫
		પુરેપુરા સહમત	સહમત	કહી શકતા નથી	અસહમત	પુરેપુરા અસહમત
૧	કોઈ વિભાગ શોધવા માટે તમને કોઈ મુશ્કેલી થાય છે	☐	☐	☐	☐	☐
૨	હોસ્પિટલમા દાખલ કરવાની રીત સારી છે	☐	☐	☐	☐	☐
3	કેશબારી પરના કર્મચારીઓ સારી રીતે મદદરુપ થાય છે.	☐	☐	☐	☐	☐
૪	દાખલ થવા માટે સમય લાગે છે	☐	☐	☐	☐	☐
૫	પુછપરછ અને રીશેપ્શનની સેવા સારી છે	☐	☐	☐	☐	☐

૬	રજીસ્ટ્રેશનની બધી જ પ્રક્રીયા સારી છે	☐	☐	☐	☐	☐
૭	વ્હીલચેર અને ટ્રોલીની સંતોષકારક સુવિધા મળે છે	☐	☐	☐	☐	☐
૮	પલંગ મેળવવામાં માટે મુશ્કેલી થાય છે	☐	☐	☐	☐	☐
૯	વોર્ડ/રૂમની સાફ-સફાઇ સારી છે	☐	☐	☐	☐	☐
૧૦	તમને લાગે છે આ હોસ્પિટલ તમારા માટે અનુકુળ છે	☐	☐	☐	☐	☐
૧૧	જાજરૂની સુવિધા સારી છે	☐	☐	☐	☐	☐
૧૨	દરેક પ્રકારના રોગની ચકાસણીની સુવિધા હોસ્પિટલમા ઉપલબ્ધ છે	☐	☐	☐	☐	☐
૧૩	ડોકટર દરેક દર્દીની પુરતી કાળજી રાખે છે	☐	☐	☐	☐	☐
૧૪	હોસ્પિટલમા દરેક પ્રકારની સુવિધા સંતોષકારક પુરી પાડવામા આવે છે	☐	☐	☐	☐	☐
૧૫	માંદગી દુર કરવામા ડોકટર પુરતો સમય ફાળવે છે	☐	☐	☐	☐	☐
૧૬	ડોકટરોની વર્તણુંક સારી છે	☐	☐	☐	☐	☐
૧૭	ડોકટરો દ્વારા યોગ્ય સમયે મુલાકાત લેવામાં આવે છે	☐	☐	☐	☐	☐
૧૮	વોર્ડબોય, સ્વીપર અને આયાબેન ની વર્તણુંક સારી છે	☐	☐	☐	☐	☐
૧૯	નર્સિંગ સ્ટાફનો દર્દી પ્રત્યેનો વ્યવહાર સારો છે	☐	☐	☐	☐	☐
૨૦	સ્ટાફની સેવાઓ અને કામગીરીની ગુંણવત્તા	☐	☐	☐	☐	☐

	સારી છે					
૨૧	હોસ્પિટલ ખાતે બેડ શીટ (ગાદલાં,ચાદર) ચોખ્ખા રાખવામા આવે છે	☐	☐	☐	☐	☐
૨૨	જાજરૂની ચોકસાઈ સારી છે	☐	☐	☐	☐	☐
૨૩	સ્વીપરોની સંખ્યા હોસ્પિટલમા પુરતી છે	☐	☐	☐	☐	☐
૨૪	સ્વીપરો હોસ્પિટલને પુરતી ચોખ્ખી રાખે છે	☐	☐	☐	☐	☐
૨૫	દર્દીને આપવામા આવતુ ભોજન સ્વાદિષ્ટ અને ગુંણવત્તા સભર હોય છે	☐	☐	☐	☐	☐
૨૬	દર્દીને તાજુ અને સમયસર ભોજન આપવામા આવે છે	☐	☐	☐	☐	☐
૨૭	ડોકટરના માર્ગદર્શન પ્રમાણેનુ ખોરાક આપવામા આવે છે	☐	☐	☐	☐	☐
૨૮	ખોરાકની યાદીથી તમે ખુશ છો	☐	☐	☐	☐	☐

૨૯. કોઈ વ્યક્તિએ તમારા માટે આ ફોર્મ ભર્યું છે? જો હા હોય તો કૃપા કરીને એની માહીતી

દર્શાવો…….....

૩૦. તમે બીજી વાર હોસ્પિટલમા આવવાનુ પસંદ

કરશો?.....

નોંધ: …….....

ફોન.નં:☏…… સહીં…….....

Annexure 3: Questionnaire for Staff

PLEASE TICK ☑ for correct answer

NAME:……. **DEPARTMENT:…….**

SEX:……

AGE: 0-30 Years ☐ 31-50 years ☐ Above 50 years

☐ **NATIVE:** Rural ☐ Urban ☐

ADDRESS…… **VILLAGE**……

DISTRICT……

EDUCATION: No formal Education ☐ Below X ☐

X class to Degree, ☐ Above Degree ☐

ASSIGNED POST: …….

MONTHLY INCOME: Below Rs.2000 ☐ Rs.2001-5000

PLEASE TICK ☑ ONLY FOR ONE ANSWER FROM OPTION 1-5

S.No.	Questions	1	2	3	4	5
		Strongly agree	Agree	Can't Say	Disagree	Strongly disagree
1	Signage system of hospital is good	☐	☐	☐	☐	☐
2	The admission procedure of this hospital is good	☐	☐	☐	☐	☐
3	People at the registration counter are helpful	☐	☐	☐	☐	☐
4	Reception services are good	☐	☐	☐	☐	☐
5	Wheel chairs and trolleys are always at place and easy to find	☐	☐	☐	☐	☐
6	Cleanliness in the ward/room is good	☐	☐	☐	☐	☐

7	Do you think this hospital is comfortable to work	☐	☐	☐	☐	☐
8	Restroom facilities are good	☐	☐	☐	☐	☐
9	All prescribed diagnostic tests are available in hospital	☐	☐	☐	☐	☐
10	Doctors give much attention to the patients	☐	☐	☐	☐	☐
11	On the whole hospital is providing satisfactory services	☐	☐	☐	☐	☐
12	Doctor has given enough time to narrate the illness	☐	☐	☐	☐	☐
13	Attitude of doctor is satisfactory	☐	☐	☐	☐	☐
14	Number of rounds made by the doctor is reasonable	☐	☐	☐	☐	☐
15	Behavior of the wad boys, sweepers and ayahs is satisfactory	☐	☐	☐	☐	☐
16	Behavior of nursing staff is satisfactory	☐	☐	☐	☐	☐
17	Staff services and level of care is good	☐	☐	☐	☐	☐
18	Linen is clean in the hospital	☐	☐	☐	☐	☐
19	Restroom are properly cleaned	☐	☐	☐	☐	☐

20	Sweepers are adequate number in hospital	☐	☐	☐	☐	☐
21	Sweepers properly clean the hospital	☐	☐	☐	☐	☐
22	Served food is tasty and hygienic	☐	☐	☐	☐	☐
23	Served food is hot and in time	☐	☐	☐	☐	☐
24	Food served as per suggestions of the doctor	☐	☐	☐	☐	☐
25.	Salary is always provided on time.	☐	☐	☐	☐	☐

25. Did someone filled this form for you if yes then explain who? …….....

26. If you or your family member get sick then you will come to this hospital explain your answer in few word weather yes or no?

.....……

……

Any Suggestions:

…….....

……

……

…..……..

Phone No:☏……Signature……....

Annexure 4: Gujarati Questionnaire for Staff (કર્મચારીઓ માટેની પ્રશ્નોત્તરી)

કૃપા કરીને સાચા જવાબ માટે ☑ નિશાની કરો

નામ:.....વિભાગ:.....જાતિ:.....

ઉંમર:0-30 વર્ષ ☐ 31-50 વર્ષ ☐ 50 વર્ષ થી ઉપર ☐ વતન:પછાત ☐ શહેરી ☐

સરનામું.....ગામ..... જીલ્લો.....

અભ્યાસ:નિરક્ષર ☐ મેટ્રીકસ સુધી ☐

મેટ્રીક્સથી સ્નાતક સુધી, ☐ અનુસ્નાતક ☐

હોદ્દો: .....

માસીક આવક રૂ.૨૦૦૦/- કરતાં ઓછી ☐ રૂ.૨૦૦૧-૫૦૦૦ ☐

રૂ.૫૦૦૧-૧૦૦૦૦ ☐ રૂ.૧૦૦૦૦/- કરતાં વધારે ☐

કૃપા કરીને ૧ થી ૫ માંથી ફક્ત કોઈ એક સાચા વિકલ્પ પર ☑ નિશાની કરો.

અ.. નં.	પ્રશ્ન	૧	૨	૩	૪	૫
		પુરેપુરા સહમત	સહમત	કહી શકતા નથી	અસહમત	પુરેપુરા અસહમત
૧	હોસ્પિટલની નિર્દેશક સેવાઓ સારી છે.	☐	☐	☐	☐	☐
૨	દર્દીને દાખલ કરવાની રીત સારી છે	☐	☐	☐	☐	☐
૩	કેશબારી પરના કર્મચારીઓ સારી રીતે મદદરુપ થાય છે.	☐	☐	☐	☐	☐
૪	પુછપરછ વિભાગની કામગીરી સારી છે	☐	☐	☐	☐	☐

૫	વ્હીલ ચેર અને ટ્રોલી સરળતા થી મળી રહે એવી જગ્યાએ રાખેલ હોય છે	☐	☐	☐	☐	☐
૬	વોર્ડ/રૂમ ની ચોકસાઈ સારી છે	☐	☐	☐	☐	☐
૭	તમને લાગે છે કે અત્રેની હોસ્પિટલમા કામ કરવુ અનુકુળ છે	☐	☐	☐	☐	☐
૮	જાજરૂની સુવિધા સારી છે	☐	☐	☐	☐	☐
૯	દરેક પ્રકારના રોગના ચકાસણીની સુવિધા હોસ્પિટલમા ઉપલબ્ધ છે	☐	☐	☐	☐	☐
૧૦	ડોકટર દરેક દર્દીની પુરતી કાળજી રાખે છે	☐	☐	☐	☐	☐
૧૧	હોસ્પિટલમા દરેક પ્રકારની સુવિધા સંતોષકારક પુરી પાડવામા આવે છે	☐	☐	☐	☐	☐
૧૨	માંદગી દુર કરવામા દાકતર પુરતો સમય ફાળવે છે	☐	☐	☐	☐	☐
૧૩	ડોકટરો નુ વર્તન સારુ છે	☐	☐	☐	☐	☐
૧૪	ડોકટરો દ્વારા યોગ્ય સમયે મુલાકાત લેવામાં આવે છે	☐	☐	☐	☐	☐
૧૫	વોર્ડબોય, સ્વીપર અને આયાબેન ની વર્તણુંક સારી છે	☐	☐	☐	☐	☐
૧૬	નર્સિંગ સ્ટાફનો દર્દીપ્રત્યેનો વ્યવહાર સારો છે	☐	☐	☐	☐	☐
૧૭	સ્ટાફની સેવાઓ અને કામગીરીની ગુંણવત્તા સારી છે	☐	☐	☐	☐	☐
૧૮	હોસ્પિટલ ખાતે બેડ શીટ (ગાદલાં,ચાદર) ચોખ્ખા રાખવામા આવે છે	☐	☐	☐	☐	☐
૧૯	જાજરૂની ચોકસાઈ સારી છે	☐	☐	☐	☐	☐

૨૦	સ્વીપરોની સંખ્યા હોસ્પિટલમા પુરતી છે	☐	☐	☐	☐	☐
૨૧	સ્વીપરો હોસ્પિટલને પુરતા પ્રમાણમા ચોખ્ખી રાખે છે	☐	☐	☐	☐	☐
૨૨	દર્દીને આપવામા આવતુ ભોજન સ્વાદિષ્ટા અને ગુંણવત્તા સભર હોય છે	☐	☐	☐	☐	☐
૨૩	દર્દીને તાજુ અને સમયસર ભોજન આપવામા આવે છે	☐	☐	☐	☐	☐
૨૪	ડોકટરના માર્ગશન પ્રમાણેનો ખોરાક આપવામા આવે છે	☐	☐	☐	☐	☐
૨૫	કર્મચારીઓનો પગાર હંમેશા સમયસર થાય છે.	☐	☐	☐	☐	☐

૨૬. કોઈ વ્યક્તિએ તમારા માટે આ ફોર્મ ભર્યુ છે? જો હા હોય તો કુપા કરીને એની માહીતી દર્શાવો …….....

૨૭. જો તમે અથવા તમારા કુટુંબના કોઈ પણ સભ્ય બીમાર થયા અને હોસ્પિટલમા સારવાર લીધી તો તે વિશે તમારૂ મંતવ્ય રજુ કરો._____

……..

માર્ગ દર્શન:

…….....

ફોન.નં:☏……સંહી……....