PATIENT SATISFACTION THROUGH FEEDBACK QUESTIONNAIRE: A STUDY OF EHCC NETWORK HOSPITAL

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INDUSTRY SECTOR PROFILE

BRIEF HISTORY

Founded in 2013, EHCC is one of the most preferred hospitals not only in Jaipur but also nationally and internationally owing to the exclusive services and excellent medical outcomes delivered.

MISSION

To redefine healthcare by improving outcomes and experience of patients through cutting edge research and personalized clinical care including innovative, preventive, diagnostic, therapeutic and rehabilitation services.

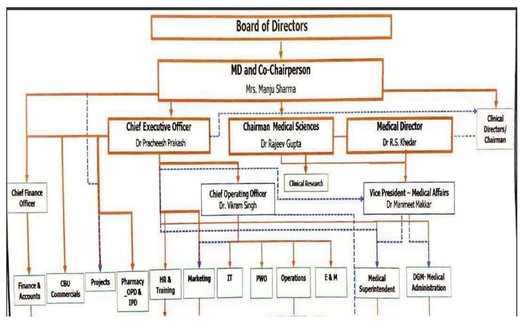
VISION

A centre of excellence in area of medicine with highest international standard at affordable cost for the community around the globe.

HOSPITAL INTRODUCTION

Eternal Hospital (A unit of Eternal Heart Care Centre and Research Institute) is a state-of-the-art tertiary care hospital in Jaipur city. This landmark Healthcare Institute is the result of the vision of Dr. Samin K. Sharma, world-renowned Interventional Cardiologist based at Mount Sinai Hospital, New York, USA.

ORGANIZATION STRUCTURE



LEARNING AND VALUE ADDITIONS

WHAT IS PATIENT SATISFACTION?

- Patient satisfaction is **the extent to which patients are happy with their healthcare, both inside and outside of the doctor's office**. A measure of care quality, patient satisfaction gives providers insights into various aspects of medicine, including the effectiveness of their care and their level of empathy.
- Patients are the foundation of our medical practice; it is obvious that they must be satisfied while in or out of the hospital.

THE NEW HEALTHCARE CUSTOMER

- Today's customer is more discerning and demanding.
- Has more access to information.
- A wider array of choice
- Wants to know the quality of care provided by the doctor and the hospital

OBSERVATIONS AND ANALYSIS

NET PROMOTER SCORE (NPS)

- NPS stands for Net Promoter Score which is a metric used in customer experience programs.
- NPS measures the loyalty of customers to an organization.
- NPS scores are measured with a single question survey and reported with a number from -100 to +100.

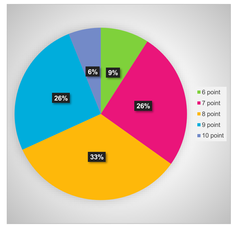
DETRACTERS	PASSIVES	PROMOTERS
Rate you from 0-6	Rate you from 7-8	Rate you from 9-10
Are not particularly satisfied by the organisation	Are receptive to competing offers from other organisations	Are loyal and highly committed to the Organisation.
Danger of spreading negative word of mouth	Are left out of the NPS calculation	Fuel viral growth through word of mouth

NPS ANALYSIS

NPS formula

Net Promoter Score = Promoters – Detractors
Sample Size = 66
Promoters = (17+4) = 21 (31.82%)
Passives = 39 (59.09 %)
Detractors = 6 (9.09%)

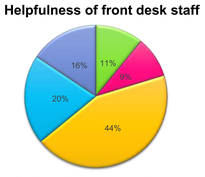
- NPS = P – D = 31.82% - 9.09% = 22.73
- Hence, 22.73% indicates that it is a good range to be in however, there is still room for progress.



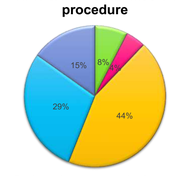
KEY PROBLEM AREAS

(a) Admission

Helpfulness of front desk staff



Time taken for admission procedure

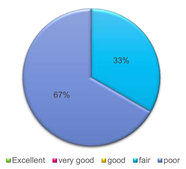


- ❖ Front-desk employees are responsible for a variety of tasks.
- ❖ Lack of queue management results in a throng of patients and a shortage of attendants.
- ❖ Patients are not receiving adequate financial counselling.
- ❖ Improper communication results in a time-consuming admissions process.
- ❖ Government approval for Empanelment cases is delayed, leading in late admittance.

SWOT AND TOWS ANALYSIS

EXTERNAL FACTORS \ INTERNAL FACTORS	STRENGTH	WEAKNESS
	• Compliance with government norms and policies through EHCC network. • Maintenance of cash patients in EHCC hospital • Improved quality of care at rungta • Good location eases accessibility • Enhancement of health quality by Ehcc staff.	• Poor implementation of SOP's. • Scarcity of trained manpower • Lack of high-end, upgraded medical equipment • Increased credit business results in a high outstanding balance. • Lack of inadequate infrastructure
OPPORTUNITIES • Hospital's expansion by increasing the no. Of empanelment cases. • Expansion and improvement in multispecialty care. • Bed expansion • Increase in the Scope of MRI Services	**SO STRATEGIES** 1. Strengthening the quality of sister hospital to attract more cash patients. 2. Since the EHCC has good revenue it can fund its sister company for increasing bed occupancy, no of OTs to generate more cash patients.	**WO STRATEGIES** 1. Improving infrastructure to overcome drawbacks in quality & manpower. 2. Generating more revenue by improving cash patients and utilizing it for enhancement of hospital.
THREATS • Expansion of other hospitals • Less stable • Changing policies by state govt. • Change in policy leading to high outstanding • Highly experienced personnel cannot be employed due to budgetary constraints.	**ST STRATEGIES** 1. Stability of network hospitals can be improved by maintaining quality care and adhering to the Quality control affiliation. 2. Network with EHCC should be utilized to season employees with high experience.	**WT STRATEGIES** 1. Quality team keeping a high end check on operating procedures so that the threat of un-stability could be minimized. 2. Generating attractive health policies or offers for cash patients.

(b) Cleanliness



Cleanliness of ICU/ Ward and lobby

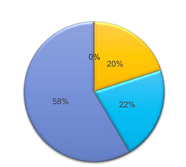
- Lack of GDA personnel
- Improper manpower management
- GDA personnel involved in other responsibilities
- Scarcity of resources
- Patient hygiene is neglected.

(c) Discharge

Time taken for discharge process

- Discharge plans are not predetermined.
- The discharge summary is not prepared in advance.
- As there is currently no RMO, doctors are required to prepare discharge summaries.
- As doctor's are occupied with surgeries and attending OPD patients , it is difficult for them to prepare discharge summary on time.
- Government approval for discharge of Empanelment cases is delayed.

(d) Others



Respect and concern towards patient safety and privacy

- Post-operative patients are not given appropriate coverups and gowns, jeopardizing their privacy.
- Due to a lack of female nursing personnel, male staff attends to patients.
- Patients' privacy is compromised since there are no curtains in the general ward.

USEFULLNESS

- ➢ Network with professionals in the field
- ➢ Gain confidence
- ➢ Gain valuable work experience
- ➢ Access to a variety of tasks and departments
- ➢ Learning technical skills like drafting costing sheets, creating discharge summary, managing hospital data.

CHALLENGES

- ➢ Adapting to organizational environment.
- ➢ Managing the hospital workforce.
- ➢ Understanding hospital norms & policies.
- ➢ Data collection
- ➢ Lack of technology asset.

SUGGESTIONS

- ➢ Weekly activities must be planned for the employees for them to communicate more effectively and work more efficiently.
- ➢ Awareness campaigns must be organized to promote patient hygiene and cleanliness.
- ➢ All ICU/Wards, lobbies, and washrooms must be cleaned and examined on a regular basis.
- ➢ Proper coverups must be provided to the patients and curtains must be drawn.
- ➢ No. of Female Nursing staff should be increased in order to attend female patients without invading their privacy.
- ➢ A discharge summary must be written a day in advance, and all investigations and reports must be completed on time.
- ➢ To minimize doctor multitasking and to shorten discharge time, RMOs must be appointed to provide discharge summaries.
- ➢ To avoid mismanagement, designated tasks should be assigned to designated employees, and staff must take responsibility for their work and accomplish it on time.