STUDY ON PATIENT SATISFACTION FROM IN-PATIENT SERVICES IN A SINGLE SPECIALITY HOSPITAL SETTING

Dissertation Submitted to

The IIHMR University, Jaipur

for the partial fulfilment for the award of the degree of

Master of Business Administration (MBA)

in

Hospital and Health Management

By

Ingle Rachana Raju

Under the Supervision and Guidance of

Dr Tripti Bisawa

2024

cloudnine

NABH

CERTIFICATE

This is to certify that **Dr. Ingle Rachana Raju** in partial fulfillment of the requirements for the award of the degree of MBA (Hospital and Health Management) from the IIHMR University, Jaipur has successfully completed her internship at Kids India Clinic Limited (Cloudnine Group of Hospitals Bengaluru), Unit (Electronic City) from 01/04/2024 to 30/06/2024

Place: Bengaluru
Date: 30/06/2024

Preceptor of Organization
Mr. Amit Kumar Singh
(Business Head)

CLOUDNINE HOSPITAL
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DECLARATION

I hereby declare that this dissertation titled "**A Study on patient satisfaction from in-patient services in a single speciality hospital setting**" is the bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

(Signature) Ingle

Name of Student: Ingle Rachana Raju

Date: 06/07/24

IIHMR UNIVERSITY

CERTIFICATE BY FACULTY GUIDE

This is to certify that dissertation titled "**A Study on patient satisfaction from in-patient services in a single specialty hospital setting**" is a record of the research work undertaken by **Dr. Ingle Rachana Raju** in partial fulfilment of the requirements for the award of the degree of MBA (Hospital and Health Management from the IIHMR University, Jaipur under my guidance and supervision and her approach to the research study has been sincere, scientific, and analytical.

Dr. Tripti Bisawa
Faculty Guide IIHMR University, Jaipur
Date: 06/07/2024

Dr. Sanjay Gupta
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Date: 06/07/2024

ACKNOWLEDGEMENT

I take the opportunity to thank IIHMR UNIVERSITY, JAIPUR AND CLOUDNINE GROUP OF HOSPITALS, BENGALURU (UNIT-ELECTRONIC CITY) for giving me this opportunity for the dissertation along with giving me the preference to choose my topic of interest to work on and upgrade my knowledge about it.

I express my heartfelt gratitude towards **Mr. P.R. Sodani Sir**, Placement Cell and Academics, IIHMR University Jaipur for this valuable opportunity. I would also like to extend my gratitude to my faculty guide, **Dr. Tripti Bisawa Mam**, for her constant cooperation and guidance throughout the study. Without her unwavering support, it would not have been possible to complete this study. I sincerely acknowledge **Mr. Amit Singh (Business Head),** Cloudnine Hospital, for giving me his part of share for the opportunity. I would like to thank him for his guidance and support for the project throughout the dissertation duration in the hospital. Also, a vote of thanks to **Mr. Rajendra Nayak (OP manager)** for his cooperative support for the project. Their valuable time, knowledge and patience is more than precious for this learning experience. All the mentors have been more important in the pursuit and provided me with the best guidance.

I am also grateful to all my friends & family members, who have directly or indirectly given me their kind cooperation and encouragement. I admit that cooperation and morality are keywords to success.

Bengaluru
Date

With regards,
Dr. Ingle Rachana

ABSTRACT

This study was conducted in a single specialty hospital setup, Cloudnine Group of Hospitals, Bengaluru, Unit (Electronic city) from 1st April 2024 to 30th June 2024. This report presents the result of a patient satisfaction survey undertaken to assess the level of satisfaction among patients.

The main purpose of the study is to assess the factors influencing patient satisfaction and provide suitable recommendations to improve the process and make the entire process more efficient and patient centric.

The sample size of the study is 400 patients. Out of which 100 patients were taken for admission process 50 patients were taken for discharge process and total 200 patients were taken for the on floor or during stay process and 50 patients were tracked for TAT scan analysis. So therefore, the study parameters include admission process, the patients admitted on the floors and the discharge procedure as well as analysis of Scan TAT.

The main key areas in which the study was conducted were the ground floor ,2nd floor, 3rd floor, 4th floor of the hospital.

The key collection tools were feedback forms made by me and some questions provided by the quality dept of the hospital and analysis is done through MS excel and other tools like Value Stream Mapping, Cause and effect model.

By doing analysis of all the 3 processes, it is found that patients are highly satisfied with doctor's care, nursing care, and satisfied with housekeeping services but the main concern area is the dietary services and improvement is needed in overall dietary services of the hospital. Patients have found the food quality poor, less variety in the food items as well as not much satisfied with the dietician as well. These issues have dramatically affected the satisfaction rate.

Issues and suggestions were given for all the parameters to implement for improvement and make the process smooth, patient centric and less time-consuming.

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ABBREVATIONS

1. BMW – Bio-medical Waste
2. CRE – Customer Relation Executive
3. CT – Completion Time
4. EP – Early Pregnancy Scan
5. GRE – Guest Relation Executive
6. IPD – In-patient Department
7. NRs – New Registrations
8. NS – Nursing Superintendent
9. OPD – Outpatient Department
10. WT – Waiting Time

CHAPTER 1 – INTRODUCTION

Patient satisfaction is a subjective thing. It is all about what a patient expects from a hospital service for his betterment and comfort in his entire healthcare journey. If the hospital meets the demands and expectations of the patients, it leads to the high satisfaction rate among the patients and it builds level of trust in their minds whereas if the hospital fails to meet the expectation of the patients in their service it leads to dissatisfaction and is downgrading for the hospital or healthcare unit image in the market. If the level of satisfaction is higher than directly it levels up the hospital's business thereby it achieves financial excellence. It also builds the hospital's image in the market with existing customers through word of mouth. The survey aimed to evaluate several aspects of the patient's experience, such as quality care, communication with healthcare personnel, facility cleanliness, waiting times, and overall satisfaction regarding admission and discharge process.

Patient satisfaction is of the utmost importance and cannot be ignored. It is an important indicator of the quality of care provided by the healthcare providers and influences patient loyalty, engagement, and overall healthcare results. This project was done so that we can identify areas for improvement and adopt initiatives to improve the overall patient experience by knowing patients' opinions and experiences.

Patient satisfaction is an important part of healthcare delivery in hospitals. It refers to a patient's overall experience and level of satisfaction with the care they receive throughout their hospital stay. High levels of patient satisfaction are indicative of high-quality healthcare services, which can lead to improved outcomes, adherence to treatment programs, and patient loyalty.

The following are some of the aspects that influence patient satisfaction in hospitals:

- Communication: It is crucial that healthcare providers and patients communicate effectively and clearly. Patients enjoy it when their healthcare team listens to their concerns, explains procedures and treatments in simple language, and keeps them updated on their condition and progress.

- Empathy and respect: Patients appreciate doctors and nurses that display understanding, compassion, and respect. Patient satisfaction can be considerably influenced by a caring approach, understanding their emotions, and involving them in decision-making.
- Responsiveness: A favorable patient experience is enhanced by prompt replies to patient demands and concerns, such as timely pain management, aid with daily tasks, and information requests.
- Quality of care: Patients expect to obtain high-quality medical treatment. Accurate diagnoses, effective and evidence-based therapies, skillful medical procedures, and thorough follow-up care are all part of this.
- Physical and mental comfort: Physical comfort should be prioritized in hospitals by providing clean and comfortable facilities, effective pain management, timely bedding, noise reduction measures and appealing surroundings. And by giving utmost physical comfort, there follows the mental comfort as well.

CHAPTER 2 – REVIEW OF LITERATURE

Table 2.1 Review of Literature

Title of the study	Author's name &year	Learnings
Patient Satisfaction with Inpatient Care: A Study from a Private Hospital in Mumbai	Patel A, Patel V, D'Souza A (2016)	Investigated how service quality dimensions and hospital amenities impact patient satisfaction in a private hospital setting in Mumbai.
Patient Satisfaction with Hospital Services: A Study from Delhi, India	Sharma R, Kaur R, Saini M, Kumar A (2017)	Identified factors such as communication with healthcare providers, waiting times, and cleanliness as crucial determinants of patient satisfaction in urban hospital settings in Delhi.
Determinants of Patient Satisfaction in a Multispecialty Hospital in Kolkata	Mukherjee A, Ray S, Ray P (2018)	Explored the role of healthcare service quality, perceived value for money, and patient demographics in determining satisfaction levels among inpatients.
Assessment of Patient Satisfaction in a Cardiac Specialty Hospital: A Study from	Kumar S, Rajan S, Venkataraman R (2018)	Investigated patient perceptions of cardiac care quality, communication with cardiologists, and

Chennai		post-operative recovery experiences.
Patient Satisfaction with Ophthalmology Services: A Study from a Specialized Eye Hospital in Delhi	Sharma R, Gupta N, Singh P (2018)	Explored satisfaction drivers in ophthalmology, such as preoperative counselling, surgical outcomes, and postoperative follow-up care.
Assessment of Patient Satisfaction in a Gastroenterology Specialty Hospital: Perspectives from Kolkata	Mukherjee A, Banerjee S, Das S (2019)	Reviewed satisfaction levels among gastroenterology patients, emphasizing procedural clarity, gastroenterologist expertise, and post-procedure care.
Assessment of Patient Satisfaction in an ENT Specialty Hospital: A Study from Bangalore	Kumar S, Singh R, Prasad M (2019)	Reviewed satisfaction among ENT patients, focusing on diagnostic accuracy, treatment effectiveness, and communication with ENT specialists.
Patient Satisfaction with Orthopedic Inpatient Services: A Study from a Specialized Hospital in Bangalore	Reddy P, Rao S, Kumar A (2019)	Explored factors influencing satisfaction among orthopedic patients, including quality of surgical care, pain management, and rehabilitation services.

Patient Satisfaction with Neurology Inpatient Services: A Study from a Specialized Hospital in Hyderabad	Reddy K, Rao S, Reddy S (2020)	Examined satisfaction levels among neurology patients, focusing on diagnostic accuracy, treatment outcomes, and nursing care.
Patient Satisfaction with Urology Inpatient Services: A Study from a Specialized Hospital in Pune	Sharma M, Deshmukh S, Joshi A (2020)	Examined satisfaction factors in urology, including surgical outcomes, patient education on postoperative care, and staff responsiveness.

CHAPTER 3 – METHODOLOGY

3.1 AIM – To study the level of satisfaction of patients in hospital during admission process, On floor (during stay in hospital) in various wards and at the time of discharge.

3.2 OBJECTIVE –

- To assess/study the level of patient satisfaction.
- To examine patient satisfaction with special focus on interdepartmental communication of the hospital.
- To evaluate the factors affecting the patient's satisfaction.
- To identify the problems/causes of dissatisfaction, if any, and suggest recommendations to improve the services of the hospital system.

3.3 SCOPE-

3.3.1 Areas to be covered- Admission desk, inpatient wards (2nd and 3rd floor) Discharge desk (2nd floor).

3.3.1 Inclusion criteria- patients who have pre booked the bed and walk-in patients, Discharge patients (cash only), Long stay patients (more than 3 nights), TPA/ Insurance patients.

3.3.3 Exclusion criteria- Casualty patients, all the patients in the critical care units, operation theaters, OPD, Day care, Diagnostics, Day care patients.

3.3.4 Study setting – Inpatient department, Cloudnine Group of Hospitals (Electronic City), Bengaluru.

3.3.5 Type of study (Approach) – Qualitative Study

3.3.6 Population (sample) – IPD patients

3.3.7 Sampling method – Simple Random Sampling

3.3.8 Sample size – 400 (100 Admissions, 200 On floor, 50 Discharge, 50 Scan TAT

3.4 Study tools-

- Feedback forms, personal interviews with relatives and patients as well for the admission process, during stay facilities.
- Discharge process, value stream mapping.
- Application of fishbone/Cause and effect model, and time motion study for admission and discharge process.

The survey was meant to collect a representative sample of patients from various demographics to ensure a varied variety of viewpoints. To collect complete input, we used a validated questionnaire and a variety of data gathering methods, including on-spot surveys and in-person interviews.

3.4.1 Rating Parameter- Range was 1 to 5 naming, 1= Poor, 2= Average, 3= Good, 4= Very good and 5= Excellent.

3.5 Study period – 3 months (01/04/2024 – 30/06/2024)

- Admission data collection – (08/05/2023 – 24/05/2023)
- On floor patients' feedback – (25/05/2023 – 10/06/2023)
- Discharge process study – (12/06/2023 – 19/06/2023)

3.6 Data analysis plan – The software majorly used was Microsoft office which includes mainly – MS Excel, MS word, MS power point.

3.7 Limitations of the study- There were few limitations that I faced personally during the conduct of the study which are as follows-

- **Sampling bias** – Sample of patients who are not willing to participate including language barrier.

- **Social desirability bias** – Staff or their relatives may feel inclined to provide socially desirable responses rather than fully expressing their true experiences and concerns, staff not expressing any negative feedback about the hospital.

- **Limited scope of assessment** – Prebooked admission patients excluding emergency patients, patients of specific floors excluding ICU and OT and when we are not interviewing the patients, on public holidays, on Sundays and at Nighttime.

CHAPTER 4 – RESULTS

4.1 FOR ADMISSION PROCESS-
(INTERVIEW) 100 patients

There were 100 patients interviewed for the admission process. There were basically three types of patients involved in the admission process namely elective patients (bed booked) who had already booked the bed prior coming to the hospital, Patients who used to walk in on the same day and book the bed and casualty patients who used to come in the emergency ward and then if the consultant advises for stay to complete the treatment then they booked the bed.
Classification of the patients was done accordingly and interviewed them.

For Elective patients-
To elective patients we asked about their bed booking process and their communication with the CREs and GREs which is basically the customer care staff of the hospital.
Based on the questionnaire made for the interview process to understand the level of satisfaction about the bed booking, billing procedure, delivery packages explanations, here are some findings in the form of pie charts.

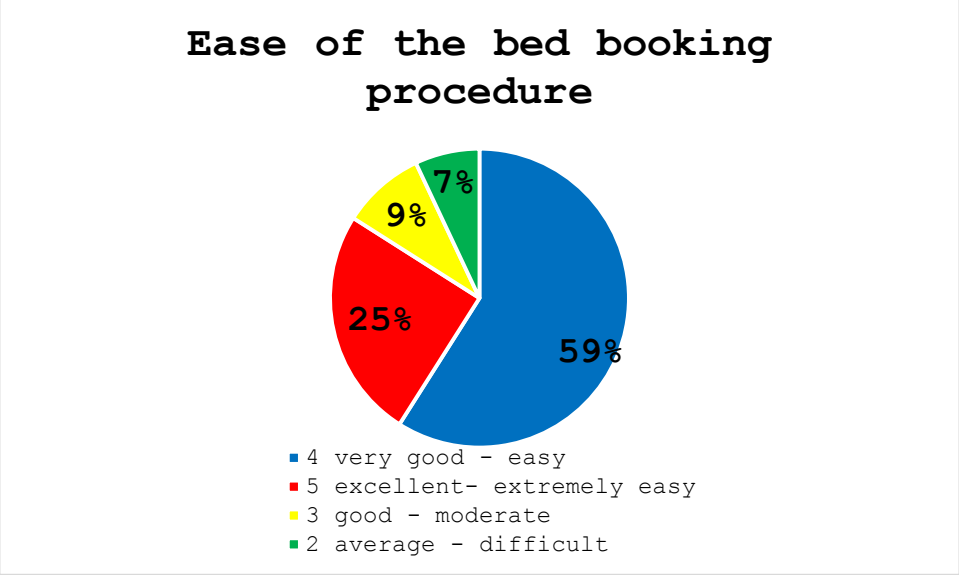

Fig. 4.1.1 Bed booking process response of the patients.

When asked about the ease of the bed booking procedure which generally occurred through the Cloudnine app or when the patient comes for the consultation, GREs/ CREs explain them and counsel them about the delivery packages and the benefits if they book a bed at the 1st trimester of their pregnancy. 59 percent of people rated it as very good; 25 percent rated it as excellent which shows good satisfaction among the patients.

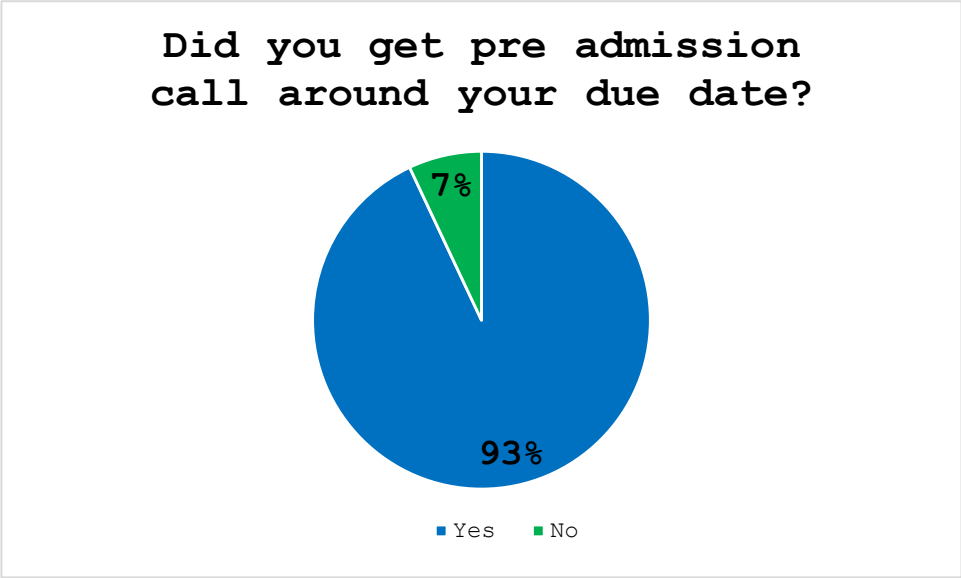

Fig. 4.1.2 Response from patients about the pre-admission instructions on call

CCEs from the hospital send reminder mails to the patients whose due date is near by and also for verbal communication they do the callings. It is for the patients to make them feel important and the hospital is all set to have their baby delivered without any hustle and chaos. So, when asked about the preadmission calls, 93 percent of people get the calls which shows a high level of satisfaction and delight among the patients.

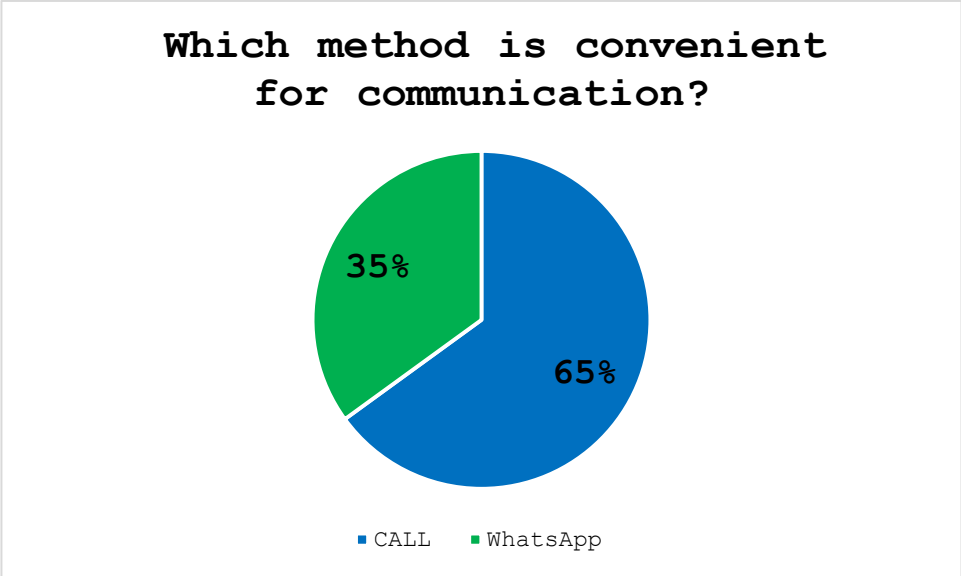

Fig. 4.1.3 Patients' response on the preferred mode of communication

When asked about the preferred mode of communication, 65 percent of patients voted for calls that is verbal communication and 35 percent for WhatsApp, there is no rating for emails, SMSs or other ways. It must be since verbal communication is clear and less time-consuming. In case of any important

information such as unavailability of doctors and any such inconvenience from the hospital side, it's better to have called and told them verbally.

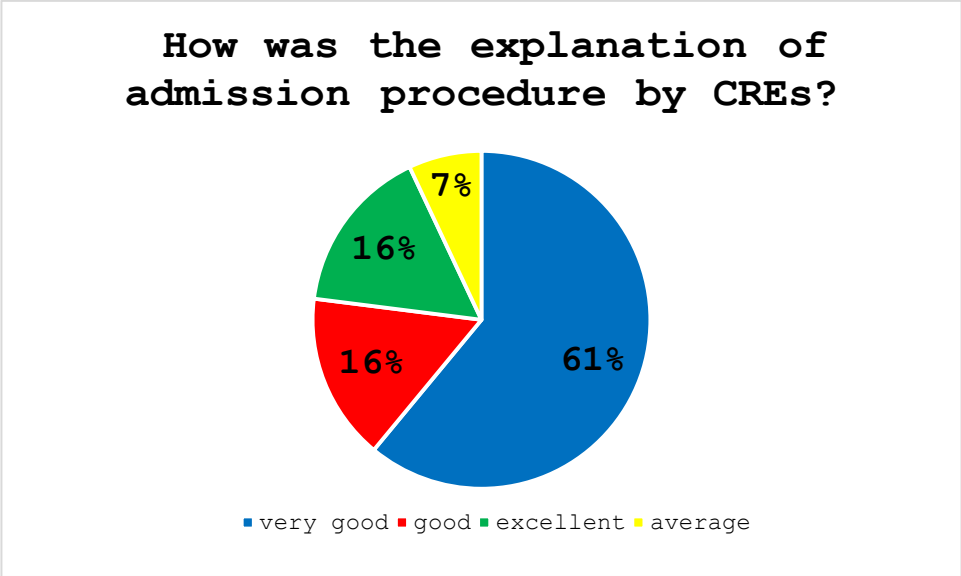

Fig.4.1.4 Response from the patients about the CRE's delivery package pitching.

When a patient comes for a consultation when if they are pregnant then CREs pitch the delivery package to them so that they can book the bed in advance. While doing so, there needs to be clear information about the packages, and they should solve every query of the patient. So, 61 percent of the patients rated it very good and only 16 percent rated it as excellent, hence there is a great scope for improvements and development of the communication skills for the CREs.

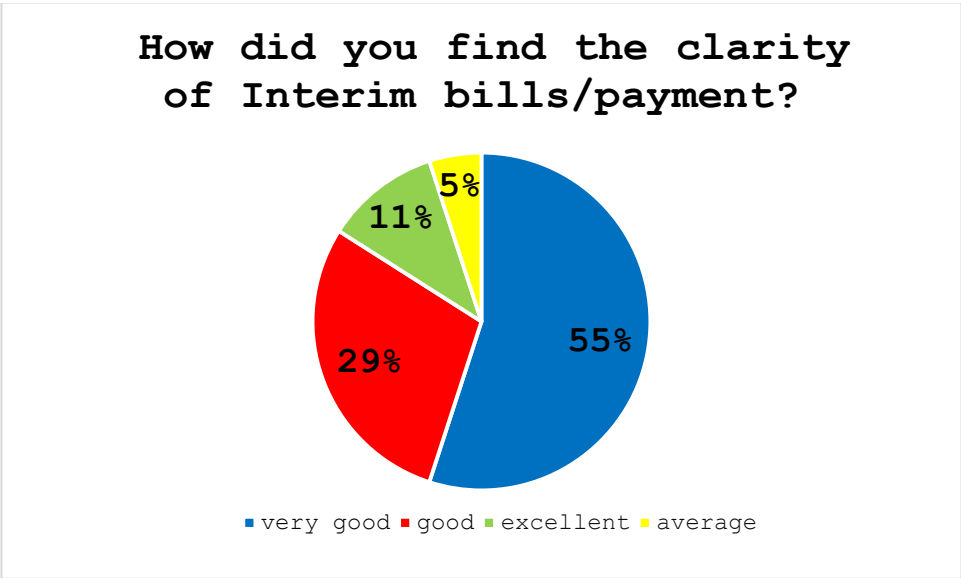

Fig. 4.1.5 Patients' response for the clarity of interim bills and payments

55 percent of people said they found the billing process very good and rated it as

4. But there still can be more clarity to be installed to improve the efficiency of the process and make it more effective.

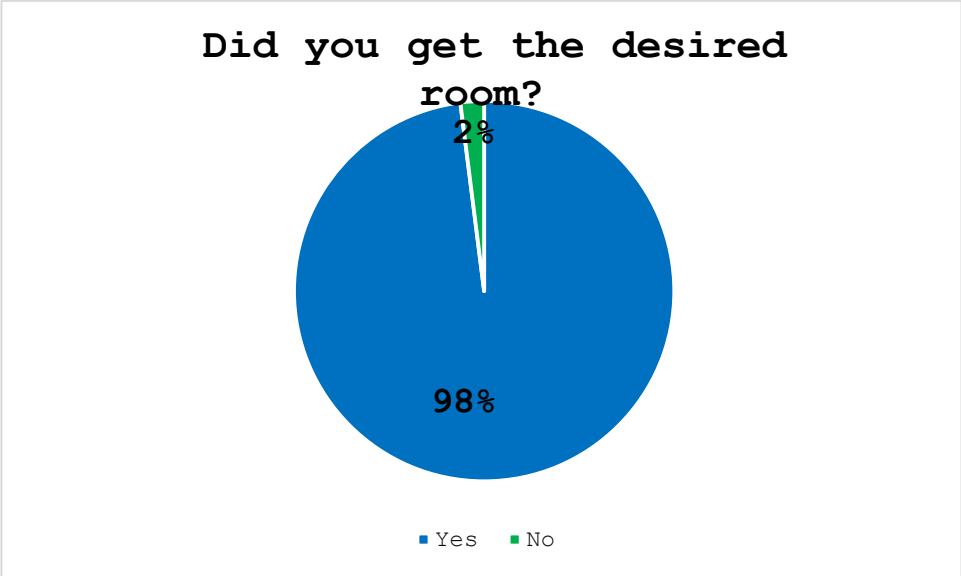

Fig. 4.1.6 Patients' response towards the allotment of desired room

The hospital provides 2 categories of rooms: signature room and deluxe room. While booking the bed people opt for the kind of room. In case of any inconvenience, desired beds are not available. But it happens rarely. So, 98 percent of people got the desired bed/ room. It delights the patients which is beyond satisfaction.

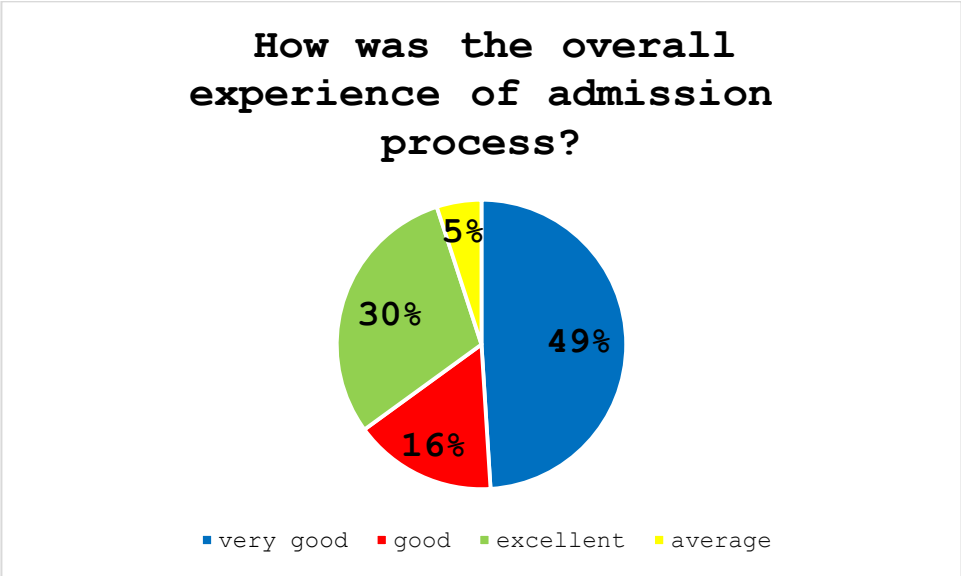

Fig.4.1.7 Patients' response towards the overall satisfaction of admission process.

From the point of arrival of the patient to the hospital till she gets the room, 49 percent of the patients rated the whole admission process as very good, 30 percent

rated as excellent, but no rating as poor which means there is high satisfaction for admission process among the patients.

4.2 FOR DURING STAY ON FLOOR PROCESS – (INTERVIEW) 200 patients

For in-patient, during stay interviews, all the patients of all the bed classes were considered to know each of their experiences with the hospital's facilities and amenities. Interview was taken after the patient has spent above 12 hours in the hospital so that they can provide better feedback on the process. Interviews of long-stay patients who are basically staying in the hospital for more than 3 days was also taken. Long stay patients are exposed to many difficulties and inconveniences than short stay patients. So, their set of problems are very vague and considerable and help to understand better where the exact improvement is needed.

To pinpoint each area and understand where the patients are facing most of the problems we did division of departments into following categories-

4.2.1 Doctor care
4.2.2 Nursing care
4.2.3 Housekeeping and infrastructure of the hospital
4.2.4 Dietary services

4.2.1 DOCTOR CARE

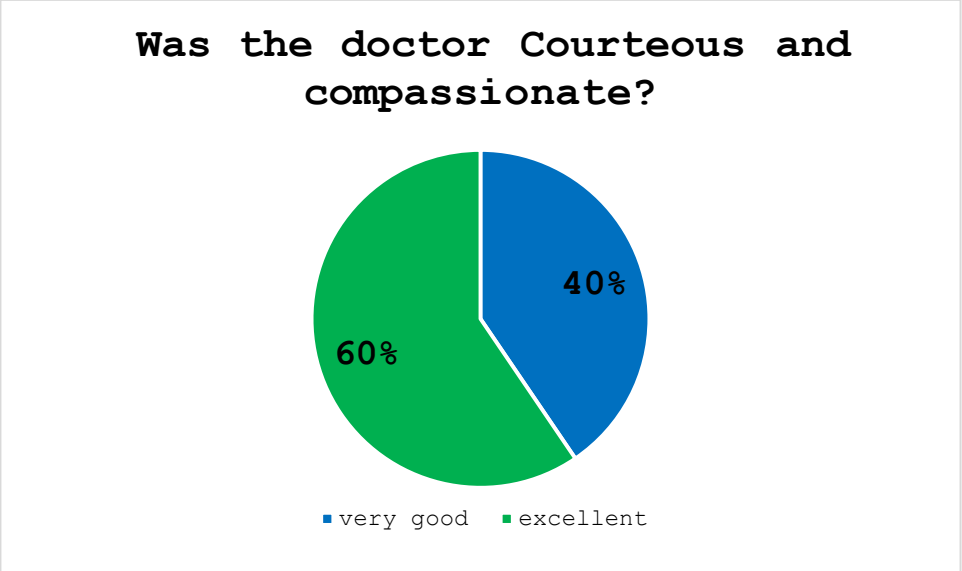

Fig.4.2.1.1 Patients' response to doctor's compassion and courteousness

Clinical care plays a very important role in patient care, to build the doctor-patient trust and increases patients' trust in the hospital. 60 percent of patients rated doctors care as excellent and 40 percent as very good which means patients are not

only satisfied with the doctors' behavior but also are extremely delighted.

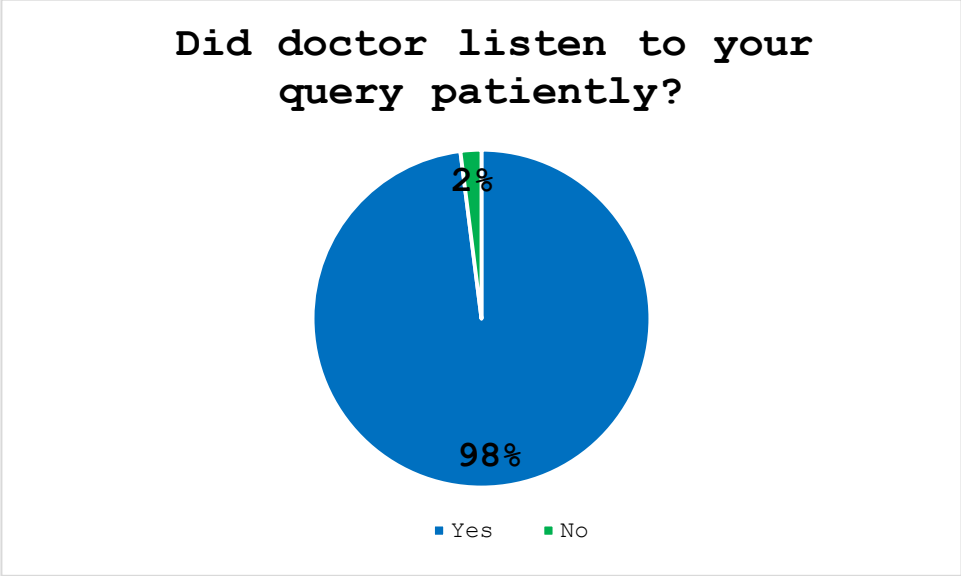

Fig.4.2.1.2 Patients' response to doctors listening their query.

If doctors listen to the patients even if their silly questions, they feel heard and important, and it helps to build good relationship with each other. 98 percent people feel that they are being given enough importance by the doctor.

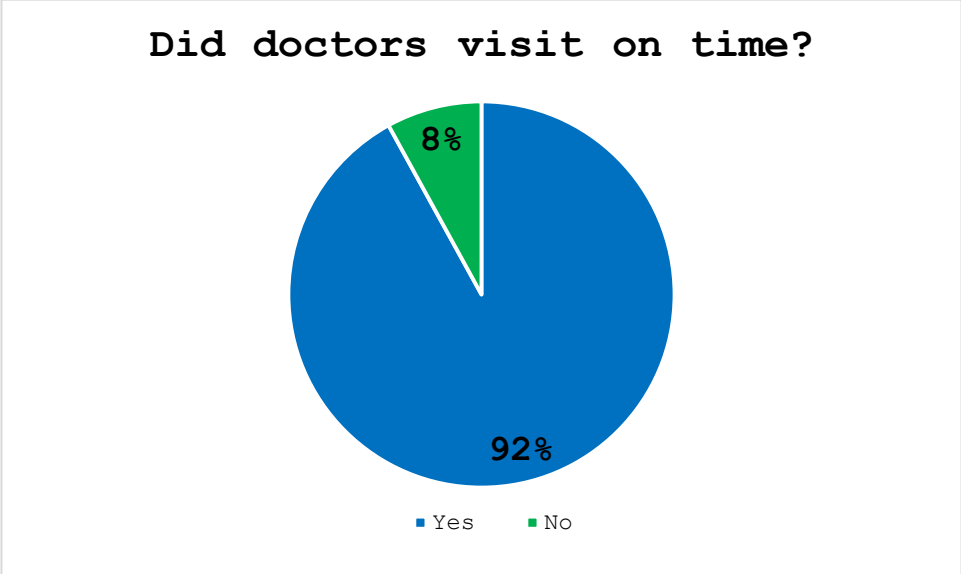

Fig.4.2.1.3 Patients response to the punctuality of the doctors

A doctor's punctuality plays a major aspect in the treatment of patients. The survey collected shows that doctors are quite punctual about their rounds.

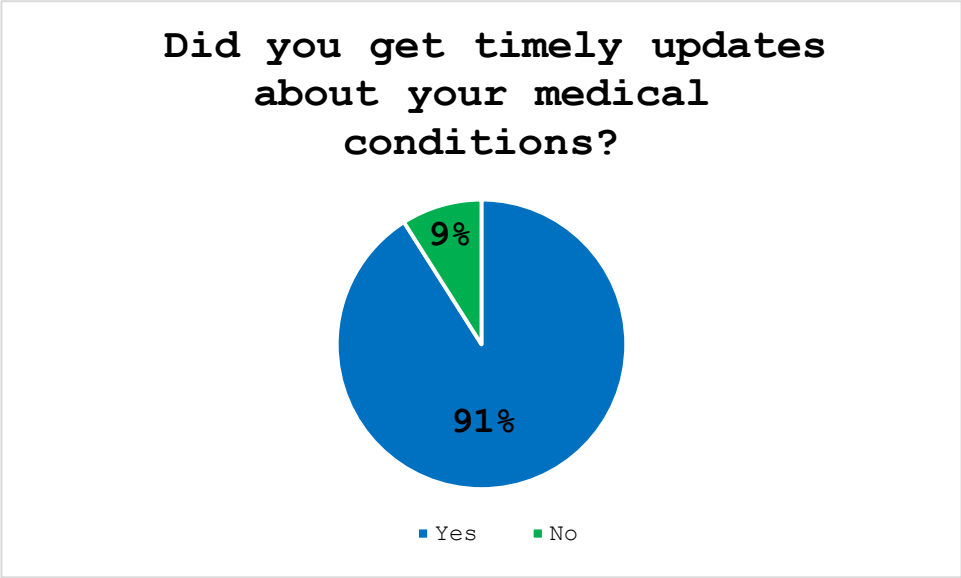

Fig. 4.2.1.4 Patients response to the updates in their medical conditions

Updating time to time about patients' medical conditions to the relatives and the patient themselves. It helps to know them better about their health and they can take appropriate measures. The 91 percent in the positive reaction of the patients shows that the patients are well informed about their medical conditions time to time.

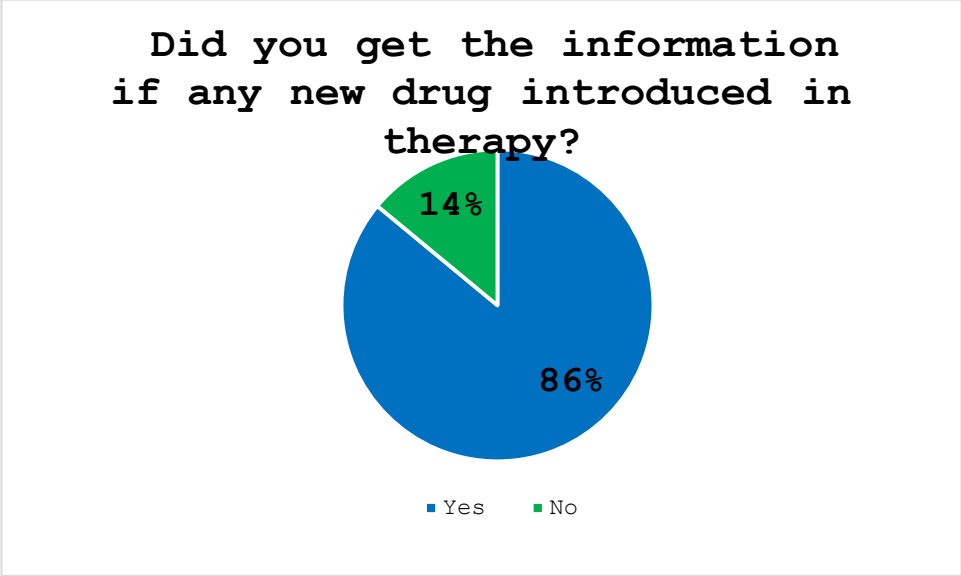

Fig. 4.2.1.5 Patients response to the introduction of new medications

It is the fundamental right of the patient to know about the medications she/he is being administered. And, to refuse the treatment if she wants to. 86 percent of the patients are informed about the new/change of any drugs in the therapy. Still need to have more efficiency in this process.

4.2.2 NURSING CARE

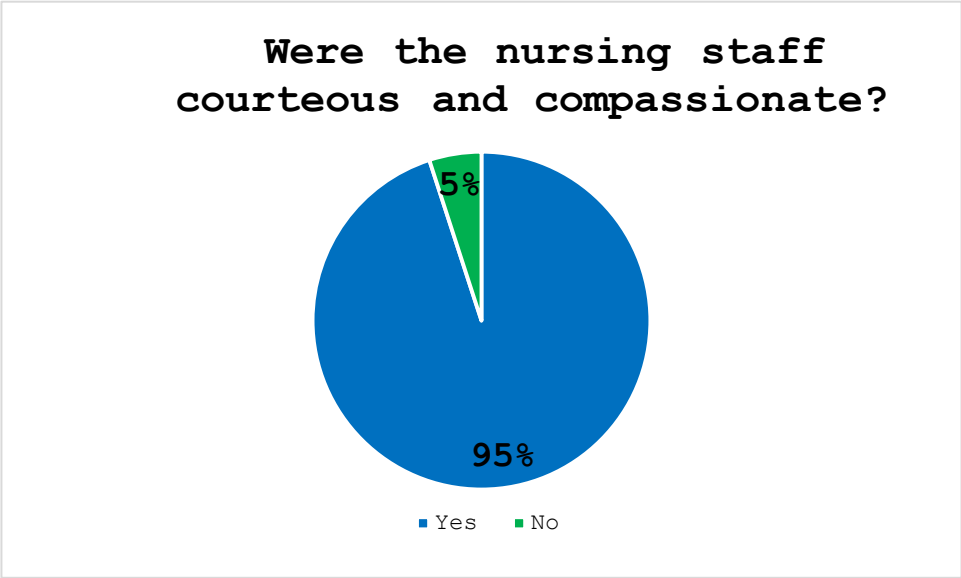

Fig. 4.2.2.1 Patients response to the nursing care and compassion

Nurses are supposed to be the backbone of the medical field, without them it is just impossible to have patient centric care. So, it is very important that nurses should be kind, compassionate and humble towards every patient they are treating. Patients' huge positive response towards nursing care indicates that cloud nine hospitals are offering great nursing care.

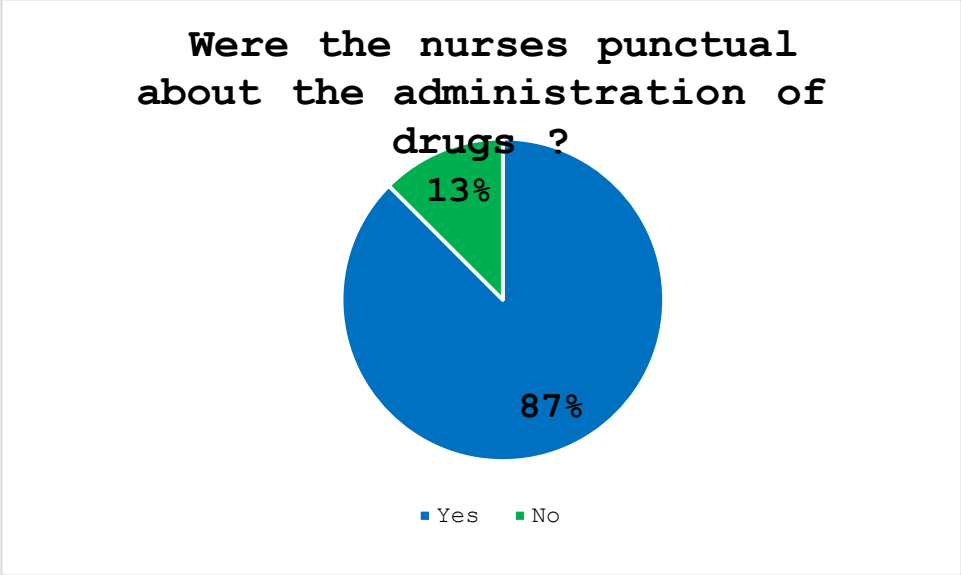

Fig. 4.2.2.2 Patients response to the nursing punctuality

It is essential to administer the medications at the proper time instructed by the doctors if not done so it becomes hazardous to the health of the patients. Measures are to be taken urgently to increase the efficiency of the nursing staff so

that they can be more punctual.

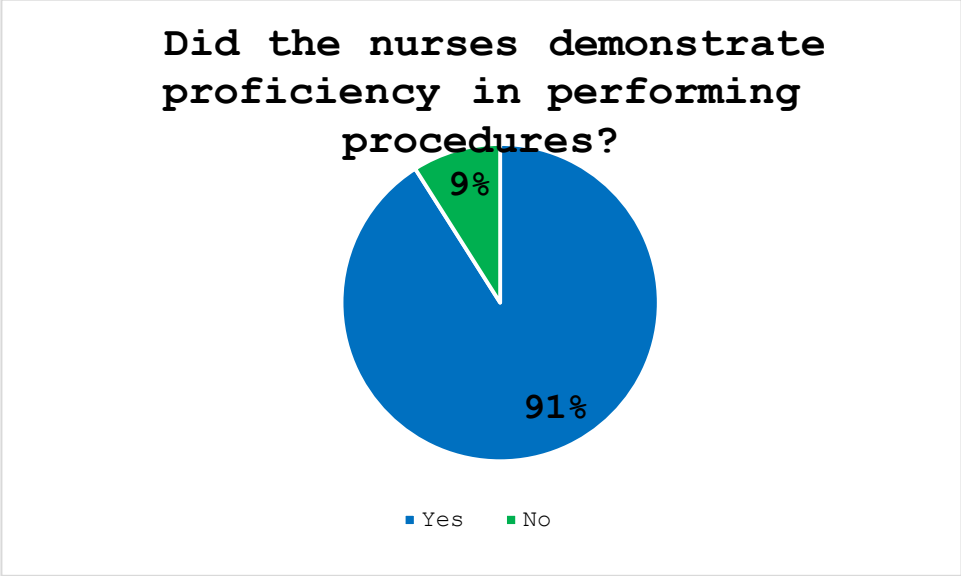

Fig. 4.2.2.3 Patients response towards the competency of the nursing staff

Nurses should be competent enough to handle emergencies even in the absence of doctors sometimes. So, they must possess all the knowledge about the minor procedures at least such as dressing, suturing etc. 91 percent of the patients feel that they got good nursing care in the hospital.

4.2.3 HOUSEKEEPING AND INFRASTRUCTURE OF THE HOSPITAL

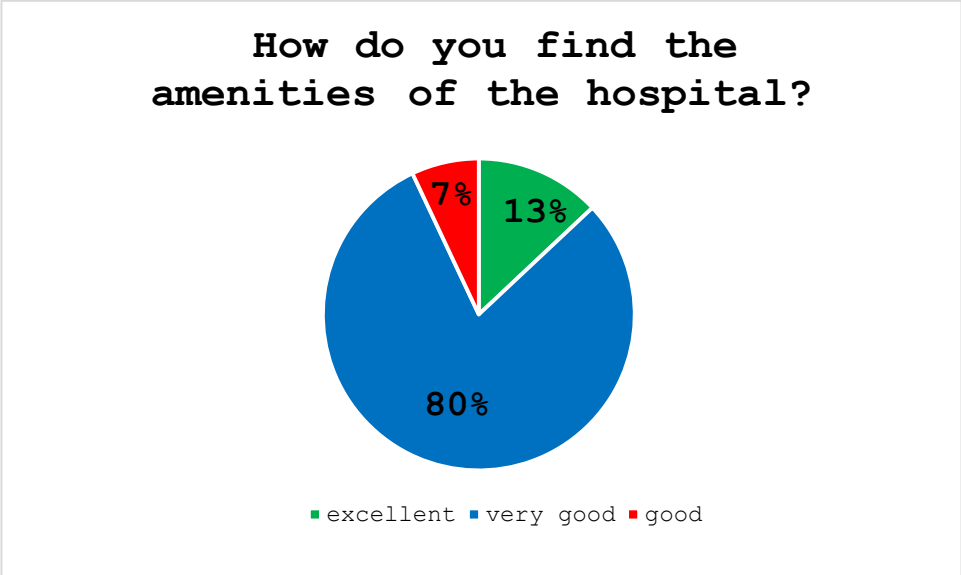

Fig. 4.2.3.1 Patients response to the amenities in the hospital

Amenities in the hospital play a vital role in patient satisfaction as it is important that they find it comfortable and cozy. Patients do deserve to get better amenities from the hospital according to the price that they are paying to the hospital.

Patients visiting cloud nine hospital are mostly upper-class people, so they want high quality facilities. According to their response, hospitals need to enhance the amenities more.

Fig.4.2.3.1. a Amenities and ambiance in the hospital

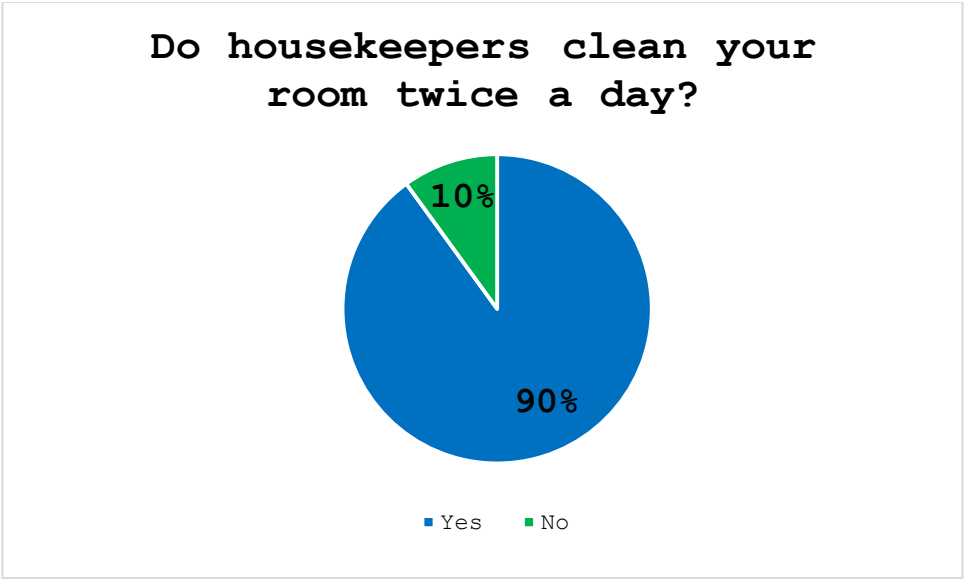

Fig.4.2.3.2 Patients response to the cleanliness in the rooms

Cleanliness creates the biggest impact on the patients and their relatives' minds. It is very important to keep the hospital's environment clean and tidy. It is the protocol of the hospital to get the rooms cleaned twice a day. And all the housekeeping staff follow it properly.

Fig.4.2.3.2. a Clean and spacious rooms

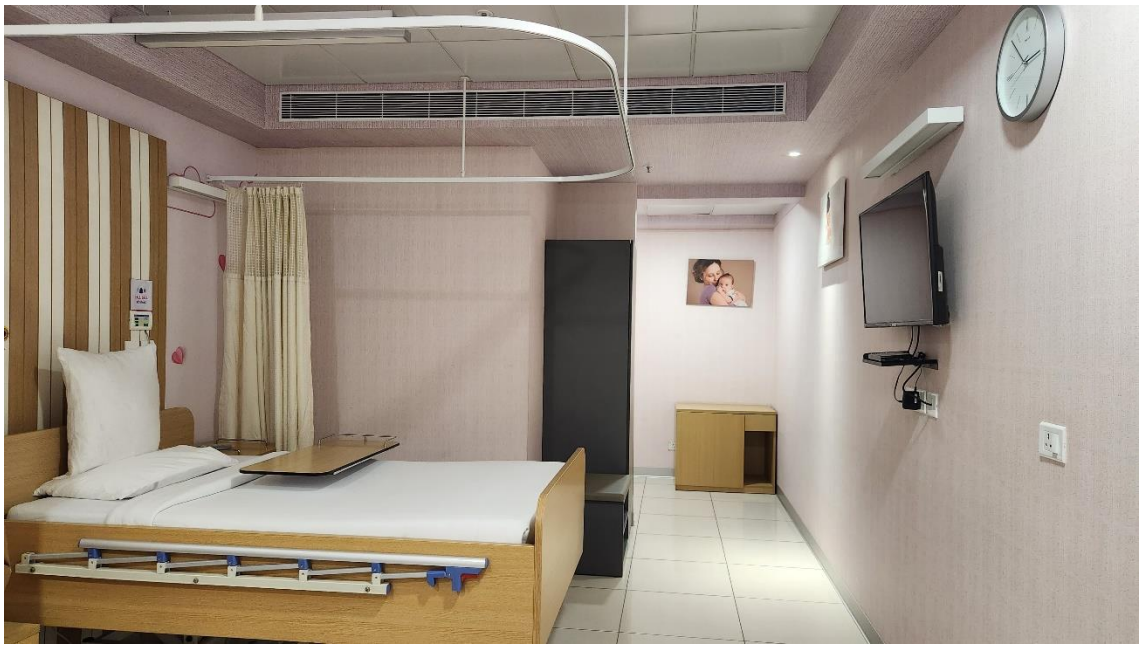

Fig.4.2.3.2. b Clean and spacious rooms

Fig.4.2.3.2. c Spacious corridor and good housekeeping services

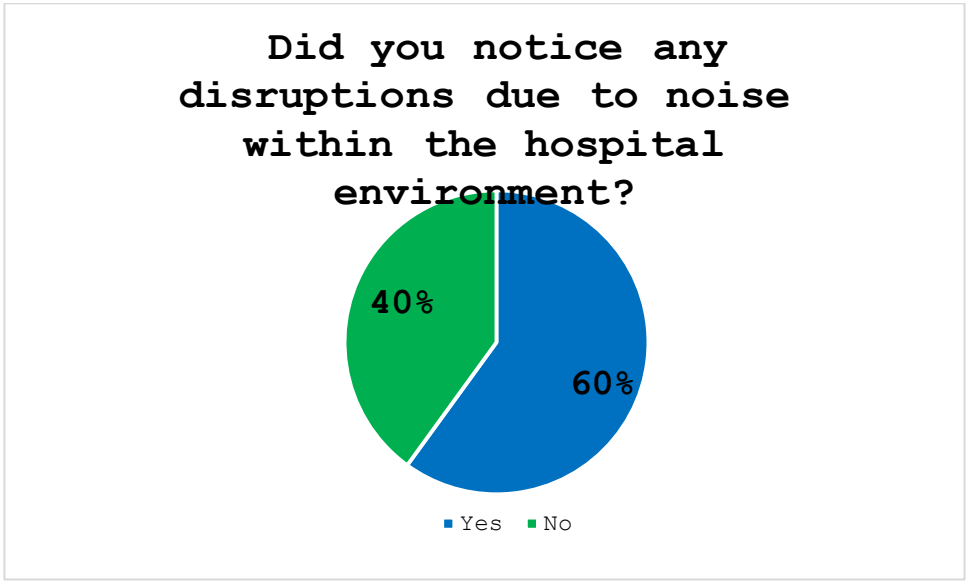

Fig. 4.2.3.3 Patients response towards the disturbance in the hospital

Cloudnine hospital (unit Electronic city) is in the main area where there is a lot of traffic and chaos. So sometimes there is a lot of noise in the area disturbing patients' peace, especially in the rooms that are road facing.

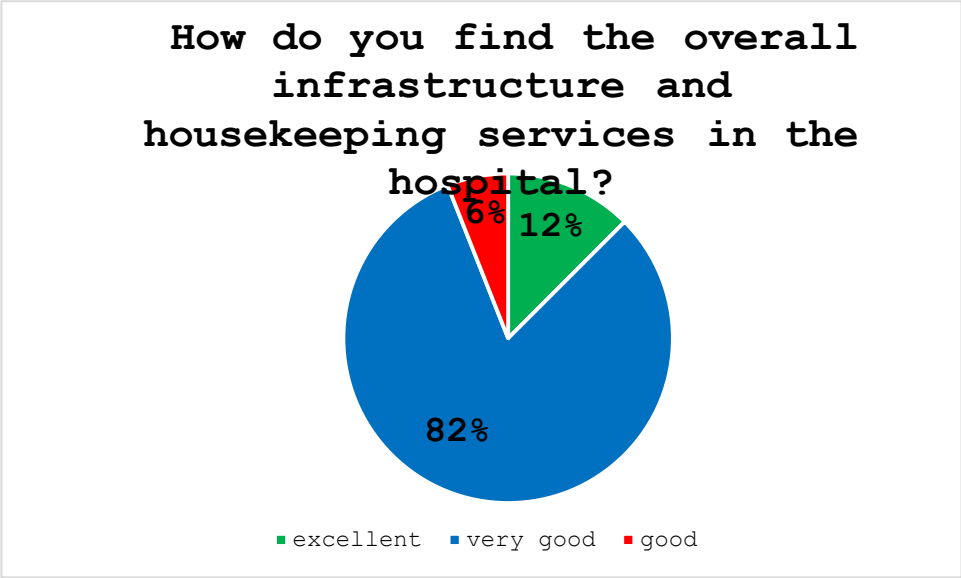

Fig. 4.2.3.4 Patients response to the overall infrastructure and housekeeping services

Patients' responses are quite positive towards the cleanliness and the amenities, and ambiance of the hospital. There is no average or poor rating for the same.

4.2.4 DIETARY SERVICES

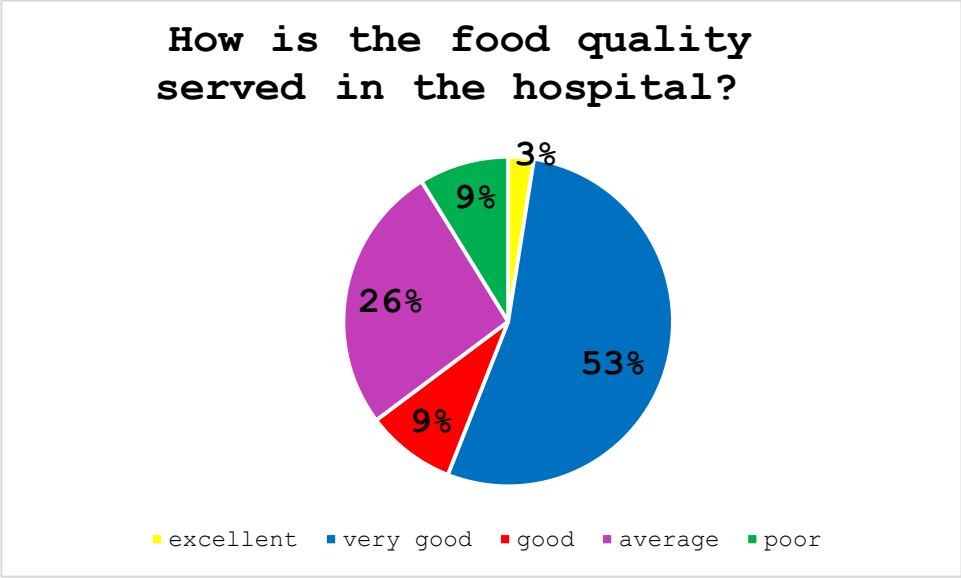

Fig. 4.2.4.1 Patients response to the quality of food served in the hospital

Dietary services play key importance in patient experience to give them proper nutrition during stay. Only 3 percent of the patients rated the quality of food as excellent. There are ratings such as average and poor also which might be because of the low quality of food that the hospital must be serving.

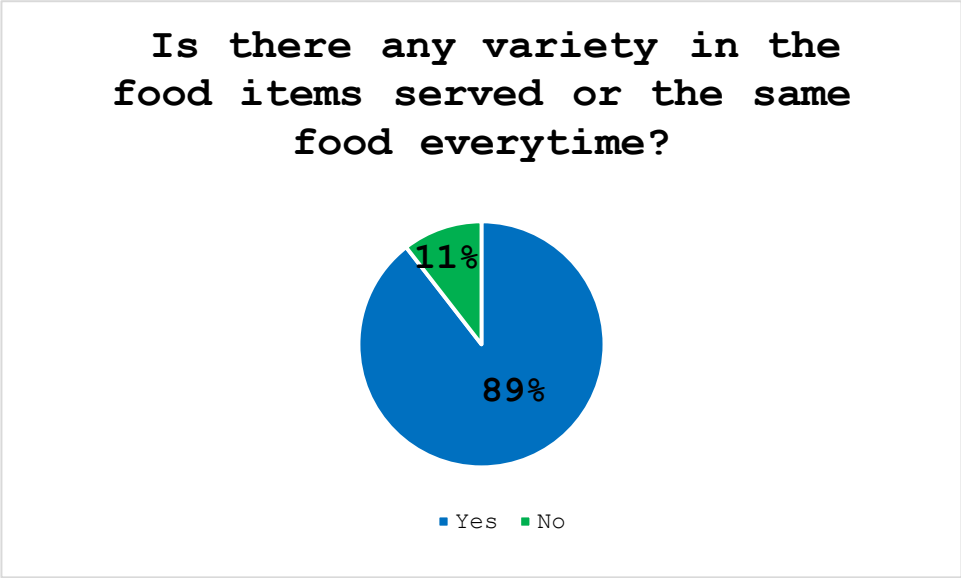

Fig. 4.2.4.2 Patients response to the variety of food items served

Not only patients but anybody can get bored if there is no variety of food items in their diet. Cloud nine is taking proper measures to ensure that the monotonous food is not being served in the diet.

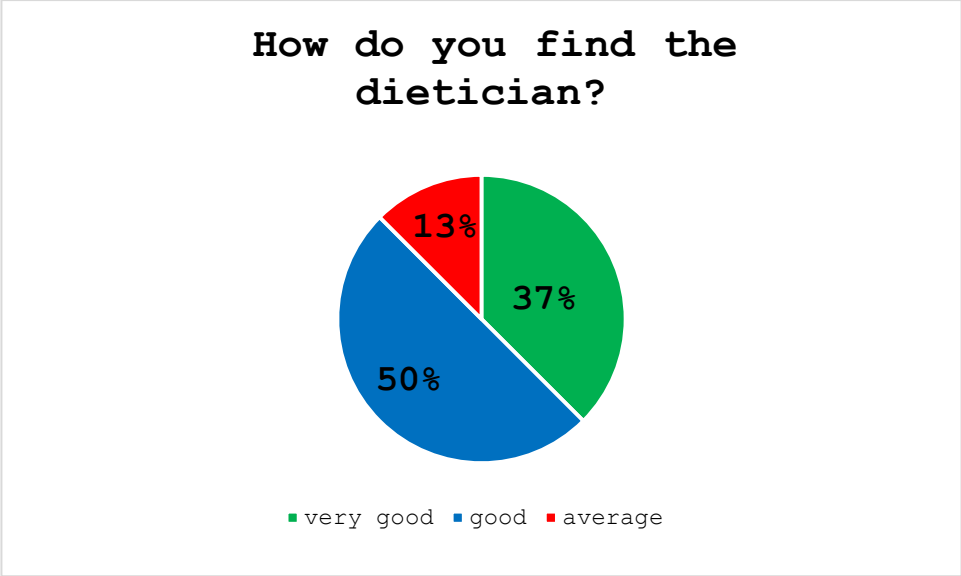

Fig. 4.2.4.3 Patients response to the Dietitian and their competency

Dietitians create customized meal plans for patients based on their medical condition, energy needs, and dietary limitations. Here it can be seen that dieticians must improve their competency to achieve greater patient satisfaction.

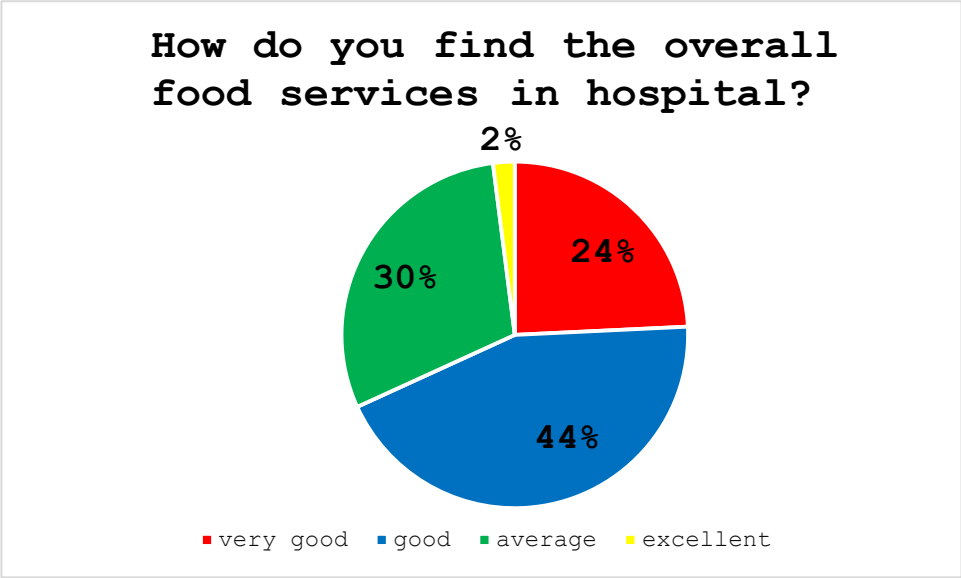

Fig 4.2.4.4 Patients response to the overall dietary services in the hospital.

The overall review of the dietary services is mixed. Very few people find it excellent, but the majority of people find it average and poor. This can be due to many reasons.

To find out the probable causes of poor dietary services, analysis is done using cause and effect model which is also known as the Fishbone diagram.

4.2.4.5 CAUSE AND EFFECT DIAGRAM (FISHBONE MODEL)

The cause-and-effect diagram plotted looking at the various factors that are affecting the **dietary services** in the hospital. The parameters are divided into 4 factors –

A) People
B) Process
C) Equipment
D) Materials

A) People –

1) Only one dietician is available

2) Under trained kitchen staff

B) Process –

1) Lack of std meal preparation procedures

2) Insufficient meal distribution logistics

C) Material –

1) Poor quality of ingredients affecting taste and quality

2) Limited options for specialized dietary need

D) Equipment –

1) Outdated kitchen equipment

2) Inadequate storage facility

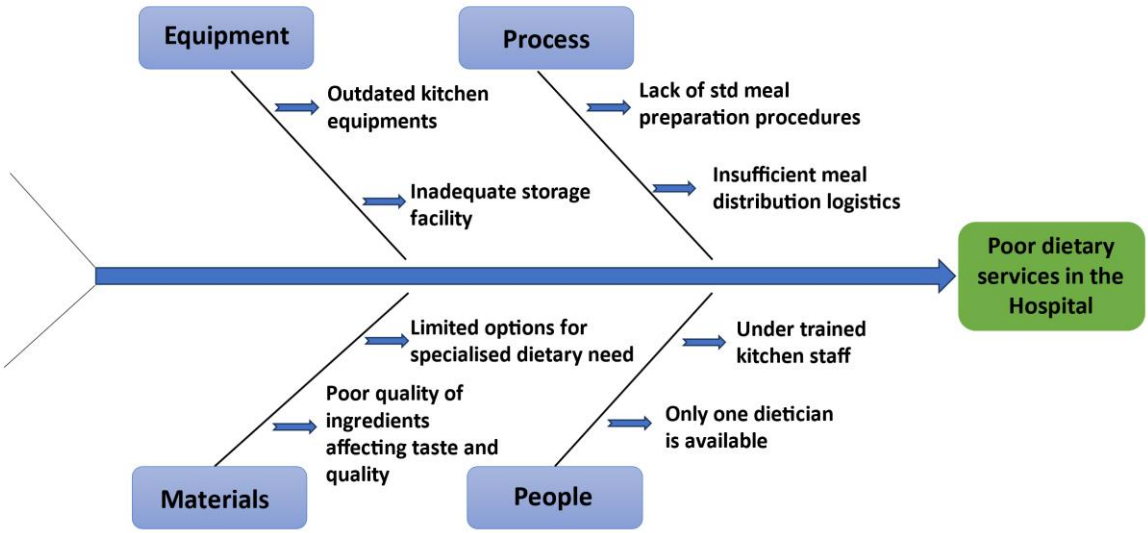

Fig. 4.2.4.5.1 Cause-and-effect model for poor dietary services in the hospital.

4.3 FOR DISCHARGE PROCESS - (INTERVIEW) 50 PATIENTS

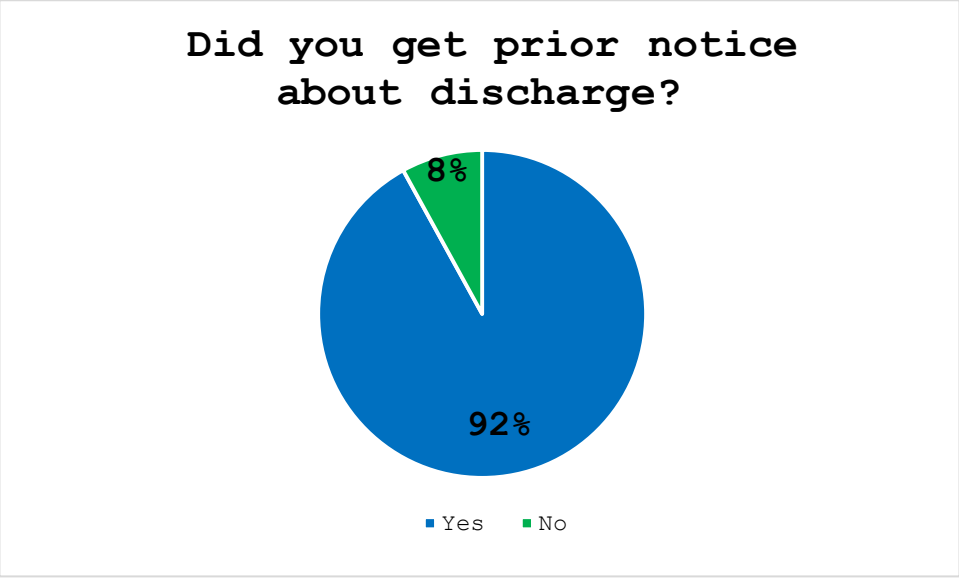

Fig. 4.3.1 Patients response to the prior notice of the discharge

Cloud nine hospital has a policy to keep patients for 3 days irrespective of their mode of delivery whether it is normal vaginal delivery or C-section. They keep their patients admitted for 3 days. But it is advised that the consulting doctor should inform a day prior to the relatives/ patient about their discharge so that they

can be ready. 92 percent of people got prior notice about the discharge process.

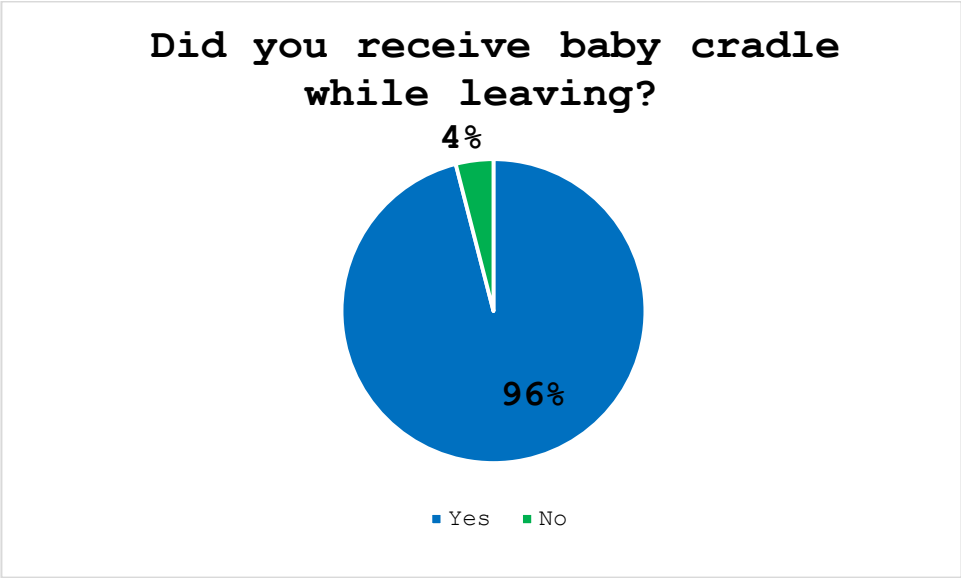

Fig. 4.3.2 Patients response to the gift receive during discharge

Cloudnine hospital has this nice gesture that they give parting gifts to their patients while having discharge. The baby cradle is given to every patient as a gift along with some baby products. 96 percent of the patients received that and that might be because of some technical reason.

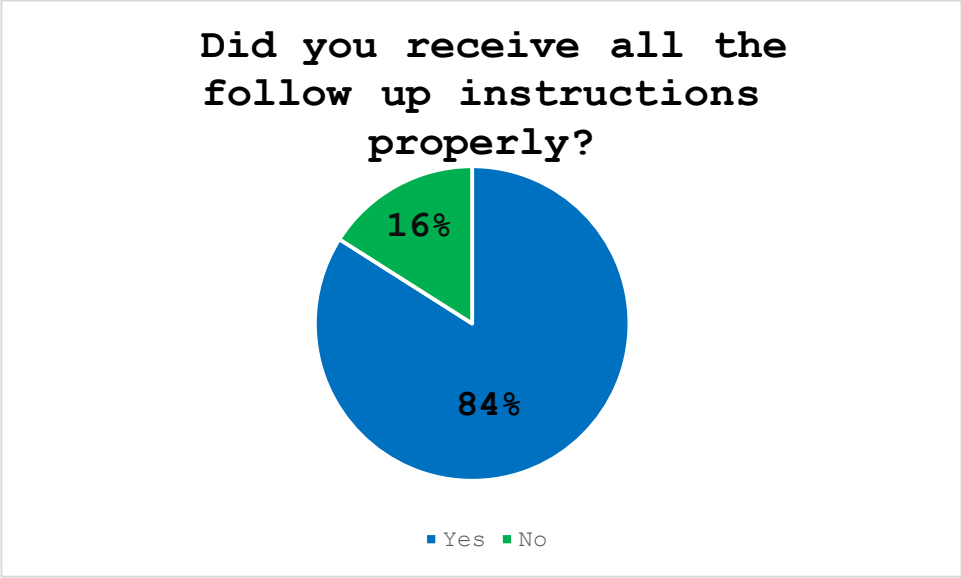

Fig.4.3.3 Patients response to the follow up instructions

Patients need to know about the follow up day and the instructions related to it so that they can book the appointment and come on time to avoid any medical problems. 16 percent of the patients didn't receive any follow up instructions which must be improved.

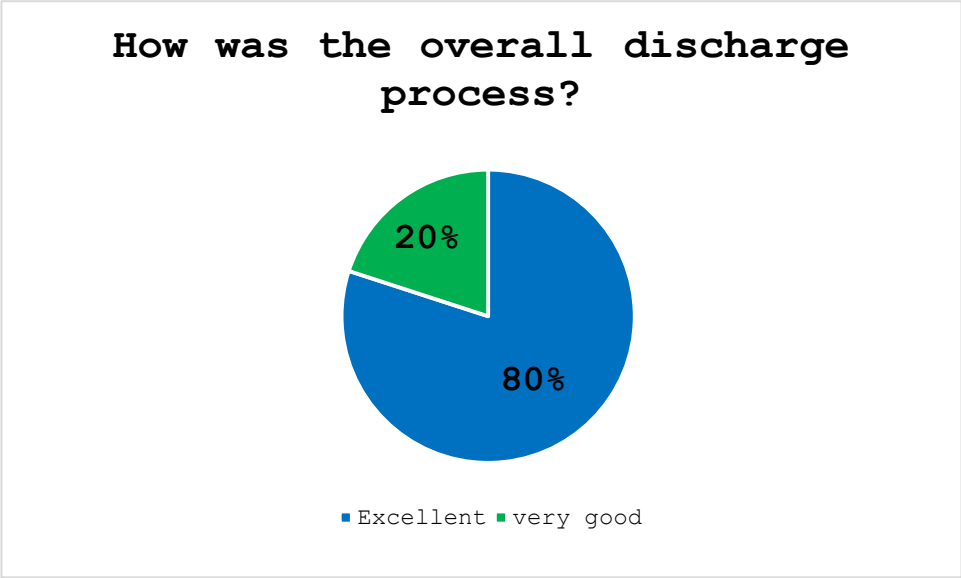

Fig.4.3.4 Patients response to the overall discharge process.

80 percent of the patients find the whole process excellent, which means they are beyond satisfied and delighted. No ratings as average, poor.

4.4 TIME MOTION STUDY FOR SCAN: TAT FOR SCAN (TURN AROUND TIME)

For mapping of the overall turnaround time of the entire scan process we a time motion study of the patients was done. The time of all the activities that patient goes through while doing the scan procedure which includes activities like patients' arrival at the hospital, check-in at the reception, check-in at the scan room, check-out from the scan room, billing done at the reception etc.

From the entire study we found that the main bottleneck areas where patient must wait a lot is the queue at the reception counter to check-in and payment procedure. So, the main key areas for improvement are the admission counters and payment procedures.

Also, staff efficiency is the matter as they take a long time to dispatch the reports at the reception counter.

It causes delays and the patient has to wait for a long time.

Completion time for every scan is predecided by the cloud nine management and that is 10 min.

But due to some technical reason such as equipment not working properly, computers are not working properly, LT app is not working etc. patients get delayed.

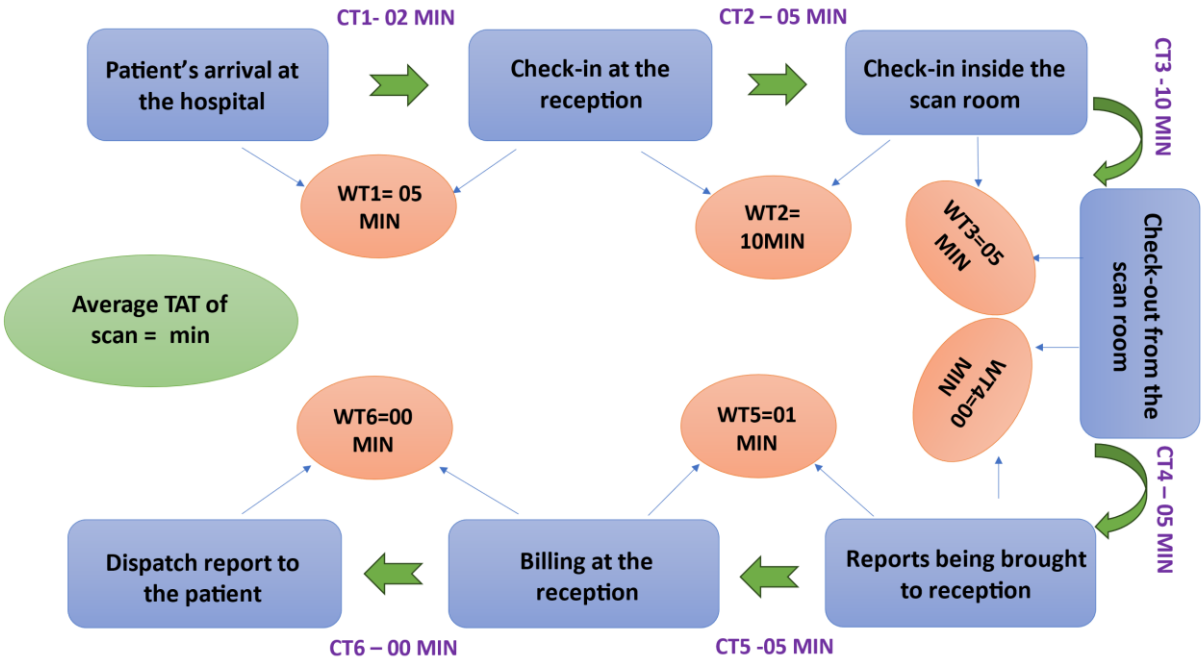

Fig. 4.4.1 Value stream mapping (time motion study) to calculate the TAT for scan.

4.5 MEASURES TAKEN BY HOSPITAL TO ENHANCE PATIENT SATISFACTION

Cloud nine hospital as a part of larger ecosystem understands its role towards the environment, so celebrates programs such as Environment Day.

It also leads to patient engagement and delight.

Also, every month the hospital celebrates a group baby shower for the patients who have booked the beds in advance. In the baby shower, some sessions are also done like

a) Lactation
b) Physiotherapy
c) Nutrition
d) Stem cells

Fig.4.5.1 Cloudnine hospital celebrating World Environment Day.

Fig. 4.5.2 Distribution of samplings to the patient

Fig. 4.5.3 Nutrition session in the group baby shower

Fig. 4.5.4 Lactation session in the group baby shower

4.5.5 Group Baby shower for the mothers to be

CHAPTER 5 – ISSUES AND RECOMMENDATIONS

ISSUES	RECOMMENDATIONS
Long time at the reception counter	Effective utilization of available manpower and streamline the process. Train the receptionist to allow only one person at the admission counter of each family.
Waiting for bed availability or undesirable allocation for non-booked patients	Bed availability status should be made available at the lobby area on digital screen
Customer care takes too long to pick up calls	Improve functioning or staff for bed booking process.
Lift waiting in the lobby area to go to an allocated room.	By increasing the list capacity and efficiency
Chaos at admission counter during peak times.	Make block-wise admission cubicles to avoid disturbance.
Food quality is not as good as it should be.	Strict monitoring regarding the quality of food and some variety should be added.
Outside food for the relatives in the hospital.	There should be provision of outside food for relatives only but not in the patient's room.
Bags are not provided by the hospital for keeping the documents, lab reports etc.	JUTE bags can be provided for better quality and longer durability.
Trolly bags are not allowed	With proper security checking, wheel/trolly bags should be allowed.
Lot of disturbance due to the traffic, vehicles in the rooms facing the roadside.	Acoustic foams/sheets to be installed on the walls of the rooms as well as on the walls of the corridor.

CHAPTER 6 – CONCLUSION

Quality Improvement: The findings of the study informed quality improvement initiatives within the hospital, helping to identify areas where enhancements in patient care and services are needed to improve satisfaction levels.

Staff Training: Insights from the study suggest developing targeted training programs for healthcare providers to improve communication skills and patient-centered care practices.

Resource Allocation: The study results influence resource allocation decisions within the hospital, guiding investments in areas such as staff training, facility improvements, and technology upgrades to enhance patient satisfaction.

Patient-Centered Care Initiatives: The study results serve as a catalyst for implementing patient-centered care initiatives aimed at aligning healthcare services with patient preferences, values, and needs.

Enhanced Reputation and Market Differentiation: Positive findings from the study can enhance the hospital's reputation and serve as a competitive advantage in the healthcare market. High patient satisfaction may attract more patients, improve patient retention rates, and contribute to positive word-of-mouth referrals, ultimately strengthening the hospital's position within the community and among healthcare consumers.

Financial Growth: Higher patient satisfaction scores may be associated with better financial performance, while lower satisfaction scores could result in financial penalties or decreased reimbursement rates. Therefore, investing in initiatives to improve patient satisfaction can have positive financial outcomes for the hospital.

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