



Summer training project presentation on :
**Patient Satisfaction In Outpatient
Department**

By : Lahari Saipriya (Roll no. 1124)
MBA (Hospital and Health management)

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INTRODUCTION

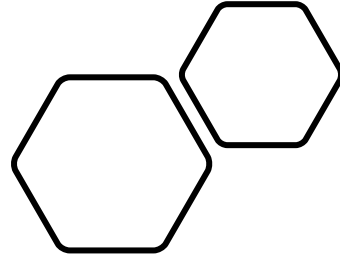
- Patient satisfaction may be a crucial and commonly used indicator for measuring the quality of health care.
- Patient satisfaction is vital and thus a proxy but an efficient indicator to measure the success of hospitals and doctors.

What is quality and why is it important ?

- Quality : Degree of excellence. When actual procedure is compared with the standard is quality.
- An understanding of quality improvement is therefore important for anyone who delivers or manages care, also as for people using care services and wondering how they could be improved.

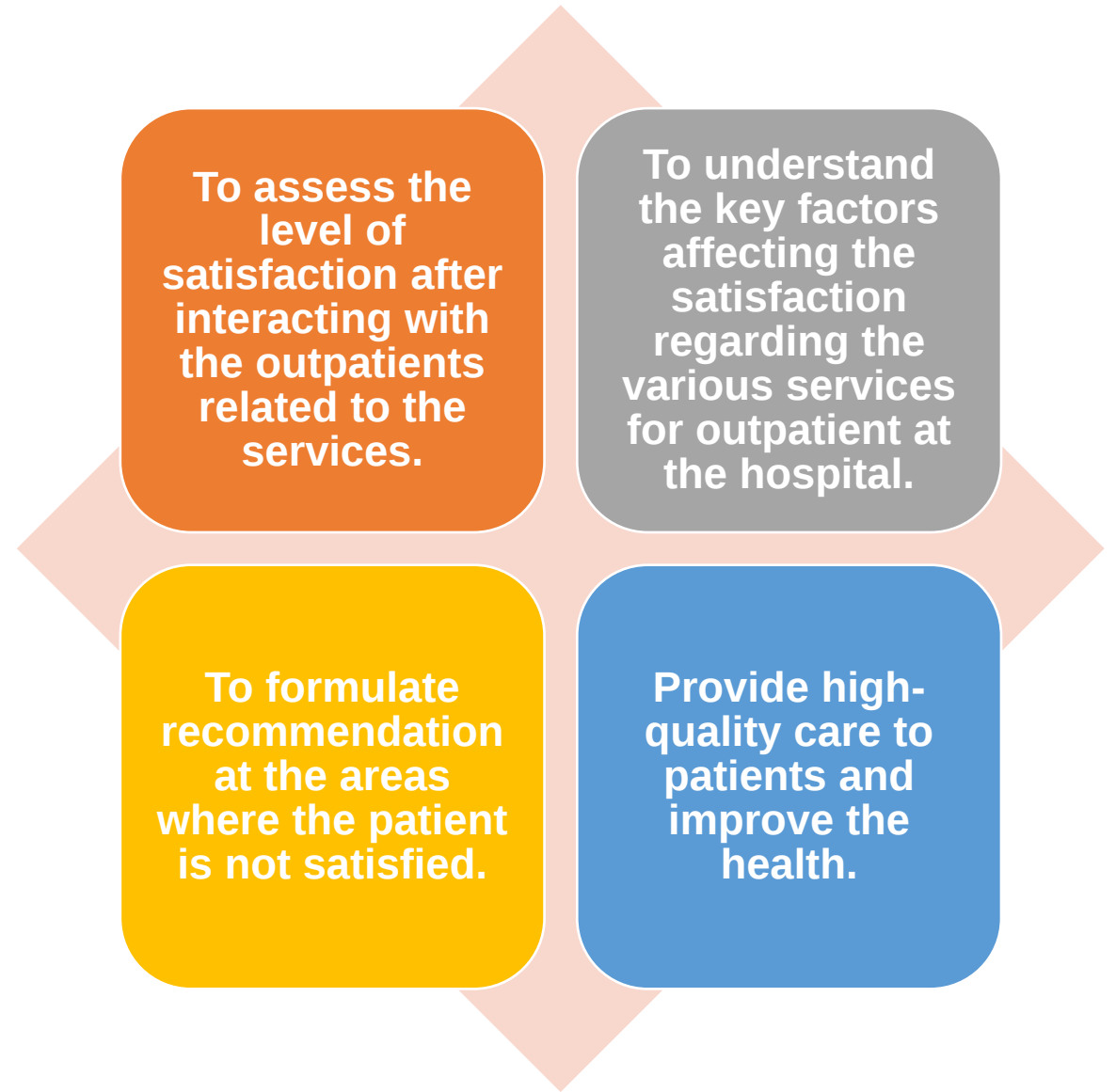


RESEARCH QUESTION



- What are managerial dysfunctions affecting the quality of healthcare services provided to the patient, leading to patient dissatisfaction?

OBJECTIVES



Sampling and Study Participants

- **Sample size** : 70 patients
- **Method** : Quantitative survey, Interview
- **Inclusion Criteria** : Patients above 18 years, Patients mentally fit to respond physically and mentally, patients coming for the first time and more than one time , patients going to diagnostics after meeting the consultants.
- **Exclusion Criteria** : Patients below 18 years of age, Patients above 65 years, serious condition patients, patients on wheelchair.





Data Collection Procedure :

Feedback form were given to the patients waiting at the waiting area in the outpatient block.

Patients who are not willing to fill the feedback were interviewed about the problems and delays.

Feedback form were also distributed to patients going to diagnostics after meeting the consultants were also.

Data collected after having the oral consent from the patient.

Analysis Plan :

Data collected was complied using MS excel.

Graphs were form on the scale of 1 to 5 satisfaction level of the services.

Level 1 was for excellent , level 2 for very good , level 3 for good , level 4 for fair , and level 5 for sad.

Percentage for satisfaction and dissatisfaction were calculated.

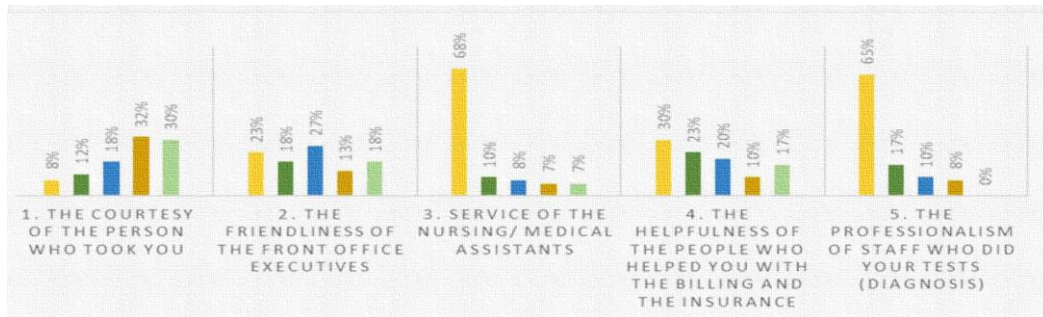
Pie charts were also formed based on yes/ no respondents.

All the charts were analysed and results collected



Results : Staff behavior

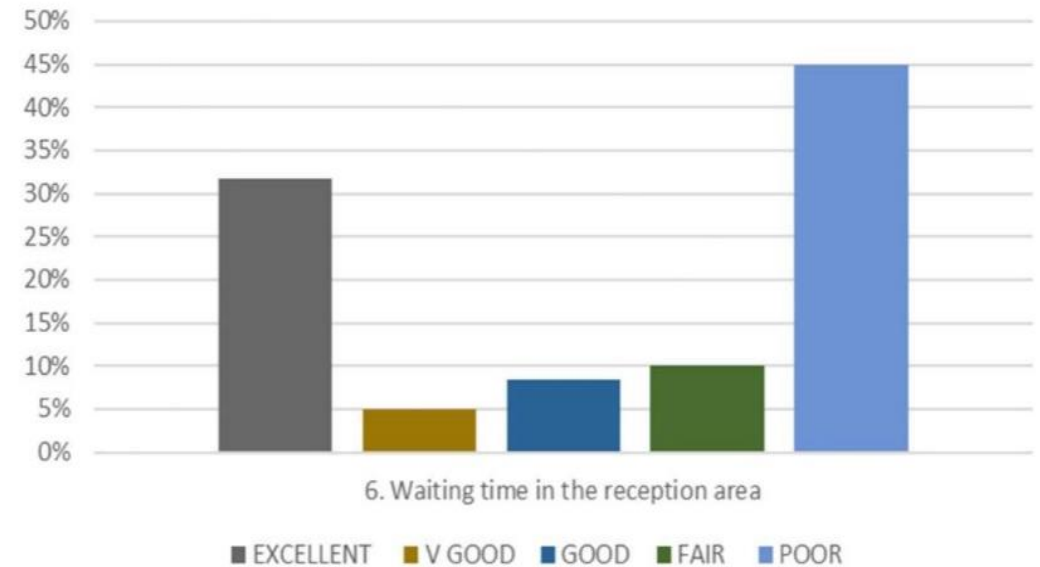
- Overall satisfaction of the people related to the staff behaviors was higher because of the diagnostics team.
- The major dissatisfaction is found when the staff is not successfully explaining the procedure.



STAFF BEHAVIOUR	Excellent	Very good	Good	Fair	Poor
1. The courtesy of the person who took you	8%	12%	18%	32%	30%
2. The friendliness of the front office executives	23%	18%	27%	13%	18%
3. Service of the nursing/ medical assistants	68%	10%	8%	7%	7%
4. The helpfulness of the people who helped you with the billing and the insurance	30%	23%	20%	10%	17%
5. The professionalism of staff who did your tests (diagnosis)	65%	17%	10%	8%	0%

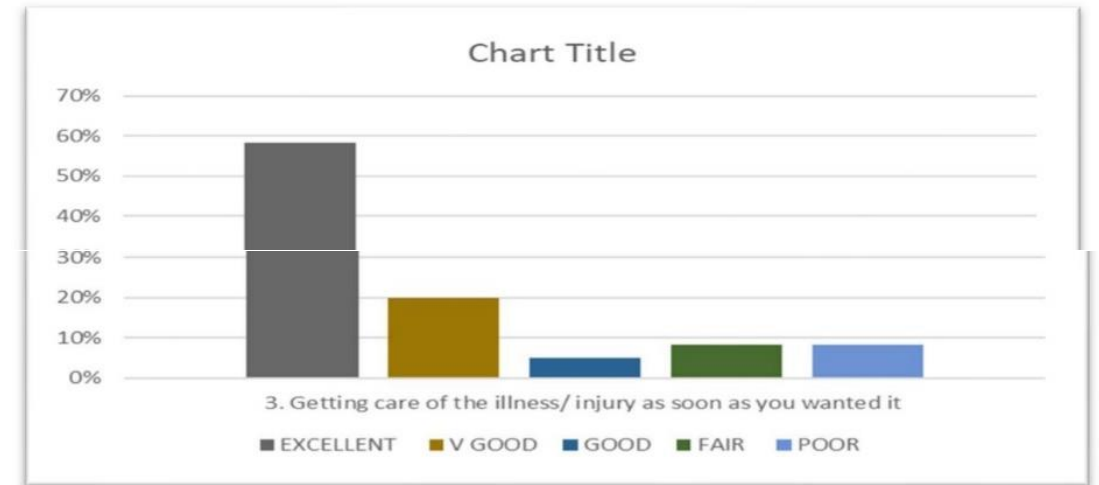
Results : Waiting time

- More than 50% patients are unhappy with the overall waiting time.
- All the waiting time covered here are calculated of overall process.
- That is from entry to exist covering all the aspects like : Billing waiting time, waiting time to meet the consultants and at last waiting time at the diagnostics.



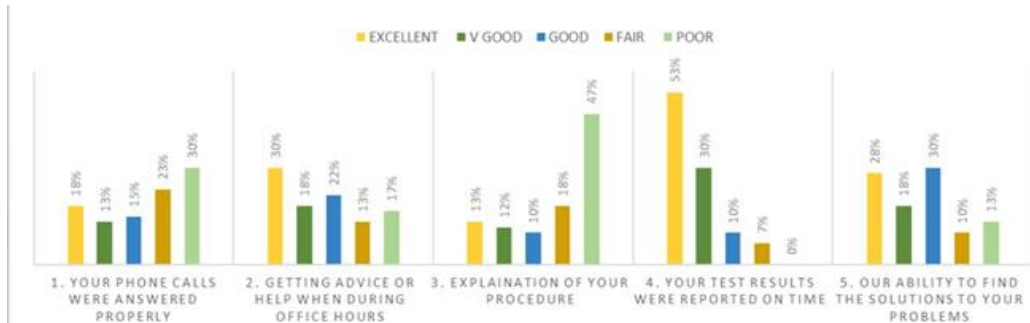
Results : Treatment

- Overall responses received regarding the treatment provided by the consultants were found to be really good.
- Most of the patients are happy with the interaction and understanding of the consultants.
- They were also satisfied with the amount of money spent and the results.
- They have agreed on the fact that the services at the hospital were affordable.



Results: Communication Services

- Major reason for dissatisfaction here is for not getting proper updates in the changes or the rescheduling.
- Patients are dissatisfied when they are coming all the way to the hospital and listens anything about delay.
- Maximum patients were sad because the procedure was not explained on call.



OUR COMMUNICATION WITH YOU	Excellent	Very good	Good	Fair	Poor
1. Your phone calls were answered properly	18%	13%	15%	23%	30%
2. Getting advice or help when during office hours	30%	18%	22%	13%	17%
3. Explanation of your procedure	13%	12%	10%	18%	47%
4. Your test results were reported on time	53%	30%	10%	7%	0%
5. Our ability to find the solutions to your problems	28%	18%	30%	10%	13%



Suggestions :

Needs to implement Performance Dashboard for better evaluation.

Regular training & skill building of staff can be done by calendar of training.

Allotment of in-charges can be refined with assigned task& responsibilities.

Gross function on regular frequency credit to be done for identifying gap & challenges.

Inter departmental meeting can be arranged for better co-ordination

Proposed model for scheduling :

Asking patients to
call to CRM before
coming

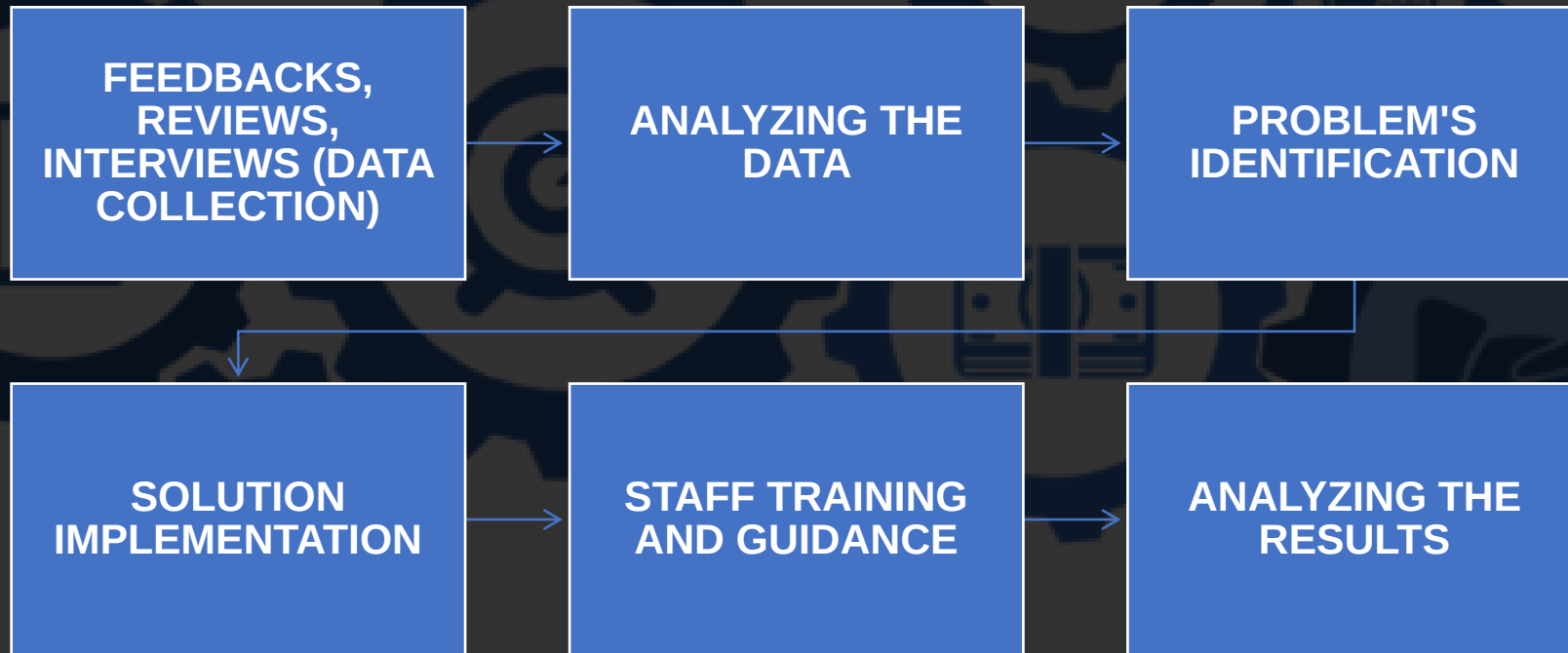
CRM managing the
record of the
patients supposed
to come

If the CRM is
noticed that this is
going to create
crowd

Front office
updating the CRM
about the doctors
and other aspects

Scheduling of the
time for patient
accordingly

Implementation plan :



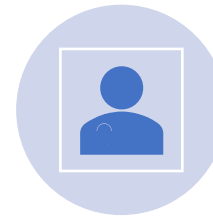
Conclusion :

- 85% patients are satisfied with the services related to doctors and nurses.
- 60% of patients were dissatisfied because of not getting the proper updates from the staff about the procedures and protocols if not asked.
- 28% of patients were dissatisfied because of the staff behaviour.
- 42% of patients were dissatisfied because of the waiting time at the reception.

Uses to Organization:



Unnecessary conflicts at the reception and waiting area can be avoided.



These issues created a bad image in other patients who are visiting for the first time. It is saving the patients to save the waiting time and coming according to the scheduled time.



If this is implemented, then patient satisfaction is also improved.



This will lead to avoid the unnecessary crowd at the reception area.



Especially at the covid time, one can manage to maintain the social distancing as well. Doctors will also not be overworked or stress if the patient appointment scheduling is handled properly.



Explaining the procedure will also happen properly because of this the diagnostic will also not get overcrowded.

My learnings

WEEK 1 AND 2

Pharmacy IP
Observation of problems
HIMS Software
Billing
Placing order
Medicines data Understanding
Pharmacy OP
Process Understanding
HIMS Software

WEEK 3 AND 4

OPD Front office
Waiting Time Reasons study
HIMS Software
New Registrations
Preregistered
Diagnostic Suggested

WEEK 5 AND 6

Vaccination
Billing
Coordination
Problem solving

WEEK 7

Emergency

WEEK 8

Patient Feedback collected
Interviewed patients
Problems Research

How this internship has helped me :

- How to work under pressure.
- Patient communication.
- Learn how to handle any conflicts.
- How and when to make the decision.
- Software exposure.
- Understood the expectations of the higher authority.
- Analyzing the problem and formulating the solution.
- Coordination.
- Anticipation of the risks involved.

*Thank
you*

