DISSERTATION

Under the guidance of:

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Presented by

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TOPIC

Quality of Services, at Inpatient Department Aiding Patient Satisfaction

INTRODUCTION

1. Lately, many hospitals especially those in the corporate sector, have began to function like a service industry. The hospital industry has begun to employ HR professionals and management graduates. Third party players have recognised that patients satisfaction is an important tool for the success for their organisation and are regularly monitoring patients satisfaction levels among their customers.

2. There is sufficient evidence to prove that organisations with higher customer loyalty can command a higher price without losing their profit or market share.

3. Accreditation issues- it is now universally accepted that various accreditation agencies like International Organisation for Standardisation (ISO) , National Accreditation Board for Hospitals (NABH), Joint Commission on accreditation of Healthcare organisations (JCAHO), etc, all focus on quality service issues.

Increased personal and professional satisfaction.

4. Increased staff morale with reduced staff turnover also. leads to increased productivity.

RATIONALE

Patient satisfaction is one of the established yardsticks to measure success of the services being provided in the health facilities. But it is difficult to measure the satisfaction and gause responsiveness of the health systems as not only the clinical but also the non clinical outcomes of care do influence the patient satisfaction. Satisfaction is a psychological concept which is defined in different ways. The primary goal of the tertiary Care Hospital as a highest level of Health Care provision is to provide the best possible Healthcare to the patients.

RESEARCH QUESTION

What are the factors influencing Patient satisfaction in hospitals?

OBJECTIVES

1. To examine the elements that affect the satisfaction levels of the patients admitted to the IPD of a corporate hospital at a tertiary level.

2. To analyse patients' prospects in IPD during critical conditions.

3. To determine the elements that contribute to patient pleasure with the goal of putting wonderful doctrine into practice by performing poorly and delivering too much.

Research Methodology

Design of study- Descriptive Study

Methods of Collection of Data-

Primary Data-
Interviews of patients will be one-on-one, along with surveys, which will be used to collect primary data.
Secondary Data-
Evaluation from patients posted on the hospital's website, along with current literature about the organisation, the Standard Operating Procedures, Quality Manual, and alongside Administrative and Departmental Manuals, will be acting as sources of secondary data.

Additionally, surveys conducted in the past may provide further secondary data.
Patient feedback forms from the hospital, from the prior month, will also be considered.

SAMPLING TECHNIQUES - Sample Random Sampling will be done

SAMPLING SIZE- 271

INCLUSIONS- Attendants + IPD Patients

EXCLUSIONS-

- Elderly patients
- Pediatric patients
- Critical patients
- Patients in the emergency

Duration of Study: Three Months

Analysis of Data -

1. A Likert scale is used to analyze each of the feedback form's parameters.
2. The scores of each response will range from 1 to 5.
3. The classification range is Standard (as per the hospital)

- Excellent – 5
- Very Good - 4
- Good - 3
- Average - 2
- Below Average - 1

4. To make the data comparable, the effective percentage score is determined in the final analysis.

- 10 Excellent - 85-100%
- 11. Very Good - 70-85%
- 12. Good - 55-70%
- 13. Average - 40-55%
- 14. Below Average - 0-40%

5. Open-ended survey questions will be there.

6. By utilizing the feedback from admitted patients to the inpatient department via the existing questionnaire in the system, the survey is crafted to include patient input on various services and critical moments experienced during their treatment at the hospital.

7. Reception

8. Emergency

9. Pharmacy

10. Billing and Cash

11. Wards/ ICU

12. Diagnostics

13. Safety

14. Following the interaction with the study participants (271 inpatients), an analysis will be conducted by calculating the percentage average for all rows related to the services indicated at each stage. Subsequently, a report will be prepared based on the conclusions drawn from these findings, with percentages aligned with the organization's vision.

KEY FINDINGS

1 There are challenges in the pharmacy due to inconsistent availability of medications and high treatment costs.

2 Issues with the waiting room include insufficient chairs and the kitchen and canteen's poor quality and amount of food.

3 Treatment at the emergency room is postponed until the patient or their family pays, which delays the commencement of care.

4 The cash and billing area is located too far from the emergency department.

5 There is insufficient communication during staff shift changes.

RESULT

Different Variables	Score (March)	Score (April)	Score (May)
Overall Hospital Visit	87%	86%	90%
Admission	66%	67.25%	67%
Doctor	88.5%	88.5%	87%
Nursing	76%	74.5%	73%
Food and Beverages	50.5%	49.5%	50%
Cleanliness	71.5%	72.5%	71.5%
discharge	55.5%	54%	54.5%
others	76%	83%	73%

RECOMMENDATION

Nursing Department

· Develop and implement standardized communication protocols for patient updates and shift handovers.
· Conduct regular training sessions for nursing staff on effective and comprehensive handover techniques.

Food and Beverage Services

· Explore mechanisms for more personalized feedback on food quantity and quality directly from patients.
· Review existing menus and food preparation processes to ensure optimal patient satisfaction regarding nutritional value and taste.

Cleanliness

· Conduct regular audits of washroom and ward cleanliness to identify and address specific areas of concern.

Diagnostics Department

· Implement additional staff training involved in sample collection to minimize inadequacies or clotting issues.
· Streamline the recall procedure for re-sampling to ensure quick patient notification and avoid inconvenience.

Housekeeping

· The housekeeping staff's work should be regulated properly so as to avoid delays

Admission Department

· Evaluate existing admission procedures to identify bottlenecks contributing to staff pressure.
· Provide targeted training to staff on maintaining a personalized and empathetic approach even under a high workload.

Thank You