A STUDY ON FACTORS AFFECTING PATIENT EXPERIENCE: A TOOL TO EVALUATE AND IMPROVE HOSPITAL CARE

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

Parushni Satsangi

Under the Supervision and Guidance of

Tripti Bisawa

2023

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DECLARATION BY STUDENT

I hereby declare that this dissertation titled **a study on factors affecting patient experience: a tool to evaluate and improve hospital care** is the Bonafede 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 Information derived from the published or unpublished work of others has been duly acknowledged in the text.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)

Parushni Satsangi

02-06-2023

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30- May- 2023

TO WHOMSOEVER IT MAY CONCERN

This certificate is awarded to **Ms. Parushni Satsangi** in recognition of having successfully completed her Internship in the department of **General Administration (Operations)** and **Human Resources** from **06th March,2023 – 30th May,2023** at **Fortis Hospital, Greater Noida.**

She comes across as a committed, sincere & diligent person who has a strong drive & zeal for learning. We wish her all the best in her future endeavours.

For Fortis Hospitals Limited

FORTIS HOSPITAL GREATER NOIDA

Authorized Signatory
Human Resources

CERTIFICATE

This is to certify that dissertation titled **a study on factors affecting patient experience: a tool to evaluate and improve hospital care** is a record of the research work undertaken by Parushni Satsangi in partial fulfillment 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 his/her approach to the research study has been sincere, scientific, and analytical.

Faculty Guide
IIHMR University, Jaipur

02-06-2023

School Dean
IIHMR University, Jaipur

02-06-2023

ABSTRACT

Objective:

The objective of the study is to assess patient satisfaction in Fortis Hospital, Greater Noida, Uttar Pradesh for the time-period of 3 months. The study assesses the patient's experience during the hospital visit or hospital stay. Analyze what are the factors affecting patient experience. Find out what are the major sectors of the hospital which are the strengths and opportunities for improvement in the hospital. The study also provides solutions for the areas of improvement in hospital.

Methodology:

Mixed Method Design was employed for the investigation. A mixed methods research design integrates quantitative and qualitative procedures in a single study, enabling the gathering, analysis, and integration of numerical and narrative data. The study consists of all patients who came during the period of three months. Convenience sampling technique is used for collecting data. Individuals or elements who were readily available and willing to engage in the study are included without using a random selection technique. This sampling strategy is practical and efficient because it allowed us to collect data of 577 patients over the span of three months. Out o f 577 patients 213 patients in IPD and rest 364 patients in OPD, who were willing to give feedback, filled the pre-defined hospital feedback form with questions covering all sectors of the hospital in in-patient and out-patient department. The feedback was taken on the 5-point Likert scale. Personal interviews were also conducted of the patients.

Result:

The result shows that most of the patients were satisfied with the hospital services with overall satisfaction percentage of 74% in IPD and 73% in OPD approximately. Patients were most satisfied with the consultation and communication with the doctors and nurses, with the satisfaction rate of approximately 76% and 77% respectively, which shows that doctors and nurses are equally delivering the services to patients. There were few areas of improvement such as billing department, discharge and admissions, these sectors had lesser amount of satisfaction rate than others as these sectors have approximately 72%, 70%, 68% satisfaction rate.

Conclusion:

The hospital values patient satisfaction and is giving proper training to employees and working on improving the services more. This patient satisfaction study's findings emphasise the significance of compassionate staff interactions, good communication, and a welcoming physical environment in determining patient experiences and overall happiness in a hospital facility. The research findings emphasise the need of better parking space and reducing admission a discharge time, patient participation in healthcare choices, and a warm and well-kept physical environment. Healthcare organisations may improve the patient experience, increase patient loyalty, and ultimately raise patient satisfaction by addressing these elements and promoting a patient-centred approach. Long-term maintenance and enhancement of patient satisfaction depend on ongoing evaluation, feedback gathering, and improvement activities.

Key words:

Patient satisfaction, Patient experience, In-patient department, Out-patient department,

Satisfaction percentage, communication, nurses, doctors.

ACKNOWLEDGEMENT

I would like to express my gratitude to all those who have contributed to the completion in this project.

I would like to thank my family and friends, faculty members, my colleagues who really showered constructive feedback and suggestions without which this study would not have been in present form.

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Thank you

Parushni Satsangi

MBA, 2nd year

Hospital Management

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Abbreviations

Abbreviation	Full form
OPD	Out-Patient Department
IPD	In-Patient Department
	Net Promoter Score

CHAPTER – 1

INTRODUCTION

Hospitals play a crucial role in providing healthcare services to patients. The relationship between hospitals and patients is based on the principle of providing medical care and support to those in need. Hospitals serve as the primary institutions where patients receive medical care. They have a wide range of healthcare professionals, including doctors, nurses, specialists, and technicians, who work together to diagnose, treat, and manage various medical conditions. They provide medical care, diagnostic services, and treatment options to people, including those in rural areas. Hospitals are also essential for providing immediate medical attention and emergency care. They have dedicated emergency departments equipped with facilities to handle critical situations, trauma cases, and life-threatening conditions. Prompt and effective emergency care in hospitals can save lives and ensure timely interventions. Hospitals in India have advanced diagnostic tools, medical equipment, and skilled healthcare professionals who specialize in diagnosing and treating various diseases. There are several Public Health Initiatives where hospitals play a critical role, such as immunization campaigns, disease surveillance, and preventive healthcare programs. They contribute to disease prevention, control, and management by conducting health screenings, promoting vaccinations, and educating the public about health-related issues.

There are various reasons why patients should be of utmost priority and how patient satisfaction helps the hospital to grow:

- Purpose of Existence: Hospitals exist primarily to serve patients and address their healthcare needs. Patients are the central focus of hospital activities and services. The entire healthcare system, including doctors, nurses, and other healthcare professionals, provides quality care and improves patients' health outcomes.
- Patient-Centered Care: Patient-centered care is a fundamental principle in modern healthcare. Hospitals prioritize meeting the individual needs, preferences, and values of each patient. They strive to involve patients in decision-making, respect their autonomy, and deliver care that aligns with their unique circumstances. By focusing on patients, hospitals can provide personalized and tailored healthcare experiences.

- Quality Healthcare: Patients are essential stakeholders in ensuring the delivery of quality healthcare. Their experiences, feedback, and outcomes serve as valuable indicators of the effectiveness and efficiency of hospital services. Hospitals continuously work to improve patient satisfaction, safety, and outcomes by listening to patient feedback, implementing quality improvement initiatives, and enhancing care delivery processes.
- Research and Innovation: Patients are integral to medical research and innovation. Hospitals conduct clinical trials, studies, and research projects to advance medical knowledge and develop new treatments. Patients who participate in these initiatives contribute to the progress of medicine and help improve future healthcare options for others.

Patients are the heart of hospitals, and their importance cannot be overstated. Hospitals exist to provide effective, patient-centered care, promote well-being, and improve health outcomes. By prioritizing patients' needs, values, and experiences, hospitals can enhance the quality of care and ensure a positive healthcare journey for every patient.

1.1 Purpose of research

The goal of investigating patient experience is to learn more about how well healthcare services are provided from the patients' point of view. It entails comprehending patients' opinions, tastes, requirements, and satisfaction with their healthcare experiences.

One of the most crucial factors in the planning, management, and research for the expansion of a hospital is patient satisfaction. It is very important to analyze the patient experience and check how they find the facilities of the hospital and what all factors they think should be upgraded or changed to increase the satisfaction of the patients which in turn increase the footfall of the patient which will eventually help the hospital reputation and revenue to grow.

- Patient experience research aids in the promotion of patient-centered care, which emphasizes delivering healthcare that is respectful, accommodating, and geared towards unique preferences and values. It enables healthcare professionals to better communicate with and engage patients by understanding their viewpoints and including them in decision-making.

- Finding care gaps: Researching patient experience can be used to locate gaps in the provision of medical services. It offers information about areas where patients might be having issues, like lengthy waits, poor communication, or a lack of information. By filling these gaps, access, effectiveness, and patient happiness can all be increased.
- Benchmarking and accountability: Information about patient experiences enables comparisons and benchmarking across various healthcare settings. It creates accountability among healthcare professionals, spotlights best practices, and aids in the identification of variances in the quality of service. This data can be utilized for public reporting, accreditation, and motivating activities for quality improvement.

1.2 Research Question

What factors contribute to patients' experiences during their hospital stay, and how do these experiences compare to standard ratios and metrics? What are the good factors and areas for improvement in the hospital's patient experience, and what solutions can be developed to enhance the overall patient experience?

1.3 Objectives of the study

- To assess patient experience during hospital-stay.
- To analyse factors effecting patient experience.
- To deduce the strengths and opportunities for improvements in hospital.
- To provide solutions for the areas of improvement in hospital.

1.4 Implication of Research

- The quality of care in the hospital would be improved and insights into potential area of improvement would be provided.
- Improvement in understanding patients' perspectives and needs, leading to more personalized and patient-centred care.
- Healthcare providers and organizations would be more accountable for providing high-quality care.
- There would be a competitive advantage for the organization as they would differentiate themselves from competitors and attract and retain patients.
- The deviations if any would be highlighted from the standard ratios and metrics.

1.5 Hospital / Company Profile

Hospital name: Fortis Hospital, Greater Noida, Uttar Pradesh

Private hospital chain Fortis Healthcare Limited (FHL) is based in India and is an international organisation which was founded in 1996. The first Fortis hospital was established in Mohali, Punjab, where Fortis began operating its healthcare facilities. Later, the hospital network acquired the Escorts Group's healthcare division, bolstering its presence across the nation. One of the chain's principal operational centres was the Escorts Heart and Research Centre in Okhla, Delhi. The headquarters and flagship hospital of Fortis Healthcare is the Fortis Memorial Research Institute (FMRI) hospital in Gurgaon, which has all the necessary amenities. It was ranked as the world's 23rd smartest hospital for 2021. Additionally, Newsweek ranked FMRI as the 22nd top hospital in the nation for the year 2022.

By acquiring a 31.1% stake in the business, Malaysia's IHH Healthcare became the majority shareholder of Fortis Healthcare Ltd. In a meeting held in Mohali, Fortis Healthcare also named four IHH Healthcare employees to its board of directors. The allocation of over 230 million shares through a preferential issue to Northern TK Venture Pte Ltd, a fully owned indirect subsidiary of IHH Healthcare, was approved by the board at a price of Rs.170 per share with a face value of Rs.10.

One of the biggest healthcare organisations in the nation, it has 400 diagnostic centres (including joint ventures), 4,300 operational beds, and 27 healthcare facilities. India, the United Arab Emirates (UAE), Nepal, and Sri Lanka all have Fortis locations. Both the BSE Ltd. and the National Stock Exchange (NSE) of India list the company. To strengthen its culture of first-rate patient care and exceptional clinical performance, it draws strength from its cooperation with worldwide major and parent company - IHH. Fortis has 23,000 employees (including SRL) that share its goal of creating the most reputable healthcare network in the world. From clinics to quaternary care institutions and a wide range of ancillary services, Fortis provides a full range of integrated healthcare services.

Vision - To create a world-class integrated healthcare delivery system in India, entailing the finest medical skills combined with compassionate patient care.

Mission - To be a globally respected healthcare organisation known for Clinical Excellence and Distinctive Patient Care.

CHAPTER – 2

REVIEW OF LITERATURE

- Kumar S, Haque A, Tehrani H (2012) We out a study with the intention of reporting on inpatient satisfaction at an Indian private tertiary care hospital. The sociodemographic characteristics, health-seeking behaviour, and degree of satisfaction with various areas of healthcare of the 102 participants were all collected. To gauge the degree of satisfaction, a five-item Likert scale was employed. Stata version 9 was used to analyse the data. Proportions were computed for discrete data, while averages with standard deviations were obtained for continuous variables. All the participants were from upper-middle or upper socioeconomic levels, and they all lived in urban areas. High levels of overall satisfaction (93%) were indicated by participants, along with high levels of satisfaction with doctors' interpersonal skills (95%) and nursing care (93%), general services (94%), and pharmacies (88.1%).
- Kaur R, Kant S, Sharma N et al (2022) studied on patient satisfaction which indicates the effectiveness and quality of healthcare. In today's world, healthcare services have grown more patient-centred, with patients considered as active customers. Measuring patient happiness has evolved into an objective criterion for determining the efficacy of these services. Patient feedback improves the responsiveness of healthcare services to patient expectations. To measure satisfaction, we performed a cross-sectional survey of 200 OPD participants at a secondary-care hospital. The replies were recorded using a 5-point Likert scale. The most prevalent responses for overall satisfaction with OPD services were "good" or "very good," with a mean (SD) score of 3.8 (0.77). Most patients were pleased with amenities such as drinking water and restrooms along with physicians' consultation time. Patients were dissatisfied with the registration process and the behaviour of other hospital personnel. This emphasises the significance of reorientation training in communication and interpersonal skills for all levels of healthcare personnel.
- (3) did a study to evaluate patient satisfaction with nurse care and treatment in the emergency department. During February to March 2017, a cross-sectional descriptive survey was conducted on 150 randomly selected patients hospitalised for more than 24 hours in three emergency department units (Medical emergency, surgical emergency, and trauma emergency). As a data collecting instrument, a

patient satisfaction questionnaire with 20 items relating to the admission procedure, physical environment, current therapy, and discharge information was employed. For data gathering, subjects were interviewed. Overall, more participants were happy with the admission procedure, doctor examination, and explanation of disease status, but dissatisfied with services such as extended wait times, communication, and clinical treatment in the emergency room.

- Madasu Mallika Rao, Udaya Shankar, Madasu Bhaskara Rao et al (2023) reviewed an article which addresses the conceptual foundations of current patient experience research as well as patient experience assessment. It aims to establish if the patient experience, which centres on how individuals engage with healthcare services, is the new benchmark. The patient experience is not fully understood by stakeholders in the healthcare business, which is a new standard in the industry. Few hospitals understand the distinction between customer satisfaction and customer experience. As a result, they neglect the necessity that hospitals provide a positive patient experience as a best practise. The patient experience is prioritised. It is focused on fulfilling the hospital's objectives and goals, which will lead to financial success and improve the institution's reputation.
- (4) conducted a study, primary care services at all levels of the public health care system were evaluated for patient satisfaction. The study was a cross-sectional investigation carried out in three Indian states. Patients who used the main facilities reported higher levels of satisfaction in the areas of technical, communication, safety and cleanliness, and pricing of services. The cleanliness of the unit and staff behaviour showed the biggest variations. In Kerala, there was a significant inverse relationship between age and education level and patient satisfaction. According to the survey, primary care institutions in the three states report higher levels of satisfaction than secondary and tertiary level facilities.
- (5). The study was carried out in a recently opened tertiary care facility in an area of Haryana, a state in northern India. Patients with OPD and IPD who were seeking care were chosen and questioned at random. When a child patient was present, their parents or other adult carers were questioned about their visit to the hospital. The research comprised patients (18 years old) who had solely used OPD/IPD services from the study hospital and had given their agreement to

participate. Parents' permission and agreement were acquired for patients who were under the age of 18. Exit interviews with visitors to the OPD or IPD were done utilising a semi-structured interview schedule. The services offered by the institute are generally acceptable, which is inspiring.

- (6) The report gives a thorough evaluation of the satisfaction of patients receiving healthcare at various Departments and describes the experience of a sample of patients at the University Polyclinic in Messina, Italy. Using data from a specific survey, a dataset with more than 350 observations was created. Radar charts were used to compare and contrast the carefully chosen regressors. Next, a logistic model's estimate was done. The findings indicated the important elements for patient satisfaction, which depend on both the ambulatory setting where care is delivered and the assessment of care quality. The accessibility of parking spaces, the cleanliness of the buildings, and the opinion of the doctors were additional critical elements in predicting a greater level of satisfaction.
- (7). This study examines the relationship between patient characteristics and satisfaction with nursing care and associated hospital services at the National Hospital of Sri Lanka (NHSL). The majority of respondents, according to the study, were men (61%), between the ages of 35 and 64 (70%), with GCE (O/L) or higher degrees (61%), and with a history of hospitalisation (66%). This study is the first to use a validated questionnaire at the NHSL to describe patient satisfaction with nursing care and related supportive services. The study identified areas of unhappiness, identified patient characteristics that indicate satisfaction, and concluded that comfort, cleanliness, sanitary facilities in wards, and the giving of general and tailored instructions may all help to enhance quality. The nursing staff should be aware of the traits and expectations of the patients.
- (8) The purpose of this study was to look at relationships between health care user personality, care satisfaction, and complaint desire. The participants in this study were Danish men between the ages of 45 and 70 (N=6,756; 30% response rate). Hypothetical vignettes were used to illustrate various healthcare options. Participants assessed their happiness and want to complain on a five-point Likert scale while supposing they received the treatment depicted in the vignettes. According to the research, patients who are less satisfied with their treatment and who are more inclined to complain tend to have low agreeableness and high neuroticism ratings. However, regardless of personality, the desire to complain is

responsive to changes in patient engagement, highlighting the need of inclusive healthcare communication. Due to the study's focus on prostate cancer, only men were involved.

- (9). Due to patients' propensity to respond to postexperience questions with positive, socially acceptable, and consistent responses, previous attempts to ascertain the level of patient satisfaction with clinical encounters have been unsuccessful. 121 patients at a gynaecologic clinic completed a brand-new questionnaire that evaluated anticipation with a pre-test of the same six questions and fulfilment with a post-test of the same six items. Out of a total of 804 replies, 197 showed more satisfaction with aspects of treatment, whereas 167 expressed lower satisfaction—a substantially wider range than previously documented. To improve the use of this test in service evaluation, modifications are recommended.
- (Berwick, 2009) conducted a study to find what patient centric mean and found that "Patient-centeredness" is a dimension of health care quality, not just because of its connection with other desired aims, like safety and effectiveness. Its proper incorporation into new health care designs will involve some radical, unfamiliar, and disruptive shifts in control and power, out of the hands of those who give care and into the hands of those who receive it. Such a consumerist view of the quality of care, itself, has important differences from the more classical, professionally dominated definitions of "quality." New designs, like the so-called medical home, should incorporate that change.
- (Cleary, 2016) conducted a study on evolving concepts of patient-centred care and noted that patient satisfaction was a key indicator of health care quality, and in the 1970s and 1980s a great deal of research explored the determinants of patient satisfaction. Subsequently, attention shifted toward assessing care experiences, and there is now a large body of evidence related to the reliability and validity of survey-based assessments of care. As the use of such surveys has increased, so too have concerns about the validity and uses of such surveys. Thus, rather than detract from general quality improvement efforts, making changes that facilitate patient-centred care may lead to broader improvements. There is good reason to be optimistic that our health care system will increasingly be "patient centred."

CHAPTER – 3

METHEDOLOGY

It refers to the overall strategy and organised plan that are being used to carry out the study and address the research questions or objectives. It includes both the broad framework guiding the investigation and the procedures, methods, and strategies used to gather and analyse data. The methodology provides a detailed description of how the research was conducted; the following describes the study's research methodology:

3.1 Study Setting

The study was conducted in Fortis Hospital, Greater Noida, Uttar Pradesh. It is a new branch of fortis launched in year 2022 full bed occupancy of 200+ beds. The hospital provides specialized care in areas such as Cardiology, Orthopaedics, Gastroenterology, Neurology, Oncology, Urology, Paediatrics, Obstetrics and Gynaecology, and more.

3.2 Study Population

All patients of Fortis Hospital, Greater Noida, Uttar Pradesh.

3.3 Duration of the Study:

3 months (February,2023 – April,2023)

3.4 Hypothesis used in the study:

$H_{0:}$ Hospital services growth is independent on patient satisfaction study.

$H_{1:}$ Hospital services growth is dependent on patient satisfaction study.

3.5 Research Design

Mixed Method Design was employed for the investigation. A mixed methods research design integrates quantitative and qualitative procedures in a single study, enabling the gathering, analysis, and integration of numerical and narrative data. By integrating the two techniques, one can study many points of view, develop a better understanding of complex phenomena, and gain a more thorough understanding of the research problem.

This study design contributes to a patient experience study by offering a thorough grasp of patient views, capturing contextual insights, increasing the validity of findings through triangulation, and uncovering patterns and reasons for patient experiences.

3.6 Research Approaches:

Mixed method approach is used to conduct the study. Quantitative data is collected through the feedback forms, and qualitative data is collected through personal interview and observation.

For collecting data related to patient satisfaction when conducting personal interview, it is essential to opt for ways on how to communicate with them. Following are such ways used for communicating with the patients during the personal interview.

DISC profile - The DISC profile is an extremely useful tool for improving patient communication. Knowing a patient's DISC profile allows you to modify your communication style to better meet their preferences and requirements. This customised approach strengthens the patient's relationship by making them feel understood and respected. Understanding a patient's DISC profile also helps you to adjust nonverbal clues like as body language and eye contact to establish a comfortable and trusting atmosphere. Furthermore, tensions and stress may arise during patient interactions, and knowing DISC profiles can assist in coping with such circumstances.

The AIDET Way – AIDET way is a communication strategy which is being used while communicating with the patients. Each AIDET component is critical in developing effective communication with patients. It is an acronym that stands for Acknowledge, Introduce, Duration, Explanation, and Thank You. This simple act of gratitude increases patient satisfaction and creates a great impression. Overall, healthcare providers may increase patient communication, create trust, and improve overall patient experiences by adopting the AIDET Way.

The LEAP Way - The LEAP method is a patient-centred communication paradigm used in healthcare settings to improve patient experience and outcomes. LEAP is an abbreviation that stands for Listen, Empathise, Address, and Plan. Healthcare professionals can improve patient happiness and confidence by including people into their care.

3.7 Sample Size:

Number of samples: 577

Inclusion criteria:

- OPD and IPD patients of Fortis Hospital, Greater Noida

- Patients who are willing to give feedback.

Exclusion criteria:

- Only need hospital diagnostic services patients of Fortis Hospital, Greater Noida
- Patients who were experiencing grief due to any said reason.
- Patients who were not willing to give their feedbacks.

3.8 Sampling Technique:

Convenience Sampling Technique

Convenience sampling is a non-probability sampling strategy in which participants are chosen because they are easily accessible and close to the researcher or research location. Individuals or elements who are readily available and willing to engage in the study are included in the study without using a random selection technique. This sampling strategy is practical and efficient because it allowed us to collect data of 577 patients over the span of three months. Out of 577 patients 213 patients in IPD and rest 364 patients in OPD, who are willing to give feedback.

3.9 Data Collection Procedure:

3.9.1 Primary data:

- Feedback Forms – Out-Patient and In-Patient Department
    - A pre-defined feedback form approved by Head of Department and Human Resource Head was circulated.
    - The form starts with patients entering their identification details as patients.
    - Set of questions divided into 11 sections that cover all the sectors of services given to patients.
    - Few sections are optional for the patients to fill as those sections may not be applicable to the patients, as they may not have needed those services.
- Personal Interview –
    - If any patient had a bad experience with the hospital services, the patient was interviewed personally to resolve the issue and maintain the records of their concerns.

- Observation –
    - Observation mode was used to overlook the actions being taken to resolve patient problems and check if any communication gap between the staff and the patients.

3.9.2 Secondary data:

Secondary data is used for literature review, discussion. Types of secondary data used are:

- Journals
- Articles
- Research papers
- Internet

3.10 Classification of data:

The feedback form is divided into two broad categories namely In-patient feedback form for the patients who were admitted in the hospital and Out-patient feedback form for the patients who only visited the hospital for consultation with the doctor. The feedback forms were divided into different sectors asking the patients about their experiences.

In-Patient feedback form classification –

- Applicable for all fields –
    - Overall experience
    - Admission experience
    - Doctor experience
    - Nursing experience
    - Food & beverages quality
    - Accommodation experience
    - Discharge experience
- If-Applicable fields –
    - Emergency experience
    - Operation Theatre experience
    - ICU Experience
    - Attendant's experience

Out-Patient feedback form classification –

- Overall experience
- Appointment experience
- Billing experience
- Doctor experience
- Laboratory experience
- Radiology and diagnostic experience
- Pharmacy
- Other facilities (parking, security etc.)
- Hospital experience

3.11 Method of calculation:

Average analysis –

Data obtained is in the form of feedback given as rating between 1-5. The average is taken of the different sectors and of 3 different months by using the following formula:

- **average = {Sum of responses} ÷ {Total number of responses}**

After calculating the average, the result is converted into percentage according to the 5-pointer feedback scale by using formula:

- **Percentage = (Average/5) *100**

Net Promoter Score –

The net promoter score is calculated to analyse and check the number of patients who are highly satisfied and have the potential to give the positive feedback as word of mouth to people. The following formula is used to calculate net promoter score:

- **(Sum of number of high rating respondents/Total number of respondents) *100.** and then **subtracting it with the low rating feedback to calculate actual score**.

3.12 Report Writing:

Six chapters made up the report. The introduction is covered in the first chapter. The review of the literature is the subject of the second chapter. The approach is covered in the third chapter. The fourth chapter, titled "Results," covers the analysis and interpretation. The study's comments and recommendations are included in the fifth chapter. The conclusion is found in the sixth chapter.

3.13 Operational Definitions

Operational definitions provide crucial terms and variables in a study precise, comprehensible meanings. The operational definitions listed below might be applied to research on patient experience:

- Patient Experience (PX): The general impression, emotions, and level of pleasure that patients have about their contacts with healthcare professionals, facilities, and services while seeking medical attention.
- Communication: Healthcare practitioners and patients communicate verbal and nonverbal information through communication, which includes the clarity, efficacy, and responsiveness of the transaction.
- Staff Attitude: The attitude that healthcare workers exhibit towards patients in terms of demeanour, behaviour, and interpersonal skills; it includes traits like professionalism, empathetic understanding, and friendliness.
- Wait Time: The amount of time patients must wait for different parts of their medical treatment, such as appointments, consultations, diagnostic procedures, and the distribution of medicines.
- Regarding technical proficiency, adherence to clinical recommendations, patient safety, and the efficacy of treatment, quality of care refers to how well healthcare services meet or surpass patient expectations.
- Patient-Centeredness: The extent to which healthcare services are customised to match the unique requirements, preferences, and values of patients; includes shared decision-making, respect for patient autonomy, and patient engagement in their treatment.
- To provide smooth transitions, efficient follow-up, and the integration of treatment, continuity of care refers to the coordination and continuity of healthcare services offered to patients throughout time and in various venues.
- Facilities and Amenities: A healthcare facility's physical surroundings and amenities, such as its cleanliness, comfort, accessibility, and availability of supported services.
- Net Promoter Score: The score is calculated by using the data given by patients in to form of feedback during the hospital visit or hospital visit. The score that comes in the form of percentage explains whether the patients are satisfied enough to give positive response outside hospital or does hospital need to improve more.

3.14 Limitations of study:

The study on patient satisfaction was done in the specific time frame and there were various limitations, which are as follows:

- As a new setup of Fortis Hospitals, patient footfall was not enough.
- All the "Leave against medical advice" patients were excluded from the study.
- All the patients who experienced grief were excluded from the study.
- Patients who only came the diagnostic services of the hospital are not included in the study.
- The study is limited to one hospital only. The study only assesses the knowledge, attitude, and perception of patients of Fortis Hospital, Greater Noida only.

3.15 Ethical considerations:

- The study was completed in Fortis hospital, Greater Noida. Informed consent was received from the director of the hospital, Mr. Gaurav Anand and the project was conducted under the supervision of patient experience head Ms. Jyoti. The feedback form was pre-defined and was approved by all the higher authorities and by HR head.
- The confidentiality of the patient's personal information was maintained.
- All the patients were asked for the consent for filling the feedback form before providing them and asking them the fill the form.
- The report is written with utmost care of data secrecy and confidentiality.

CHAPTER - 4

RESULTS

For the analysis on the study of patient satisfaction, all the patients of Fortis Hospital, Greater Noida were taken in account, and they were given the feedback forms. The in-patients were given asked the forms to fill when they were again well and before the discharge. The out-patients are asked to fill the feedback forms post consultation when the patient is about to leave the hospital facility. The study was conducted with the pre-defined strategy of the hospital. The data for the month of February is take from the database and data of March and April is taken live during the dissertation period.

Total In-patient department feedbacks filled – 213.

Total Out-patient department feedback filled – 364.

4.1 Monthly Assessment of Responses:

February IPD response analysis:

Average of the feedbacks from the patients of in-patient department in month of February with respect to the factors as Overall experience during the stay in the Fortis hospital, and other factors such as their experience during the admission process and discharge process, and other factors like the quality of food and accommodation and lastly and most important the experience with the doctors and nurses in the satisfaction percentage is shown below:

Feedback Sectors	Satisfaction Percentage
Overall Experience	75.86%
Emergency (If applicable)	76.20%
Admission	74.45%
Doctor	77.05%
Nursing Experience	78.62%
Food & Beverage	76.34%
Accommodation	77.50%
Operation Theatre (If applicable)	78.22%
ICU (If applicable)	78.55%
Discharge Experience	72.01%
Attendants experience (Family & Friends)	74.74%

Table 4.1

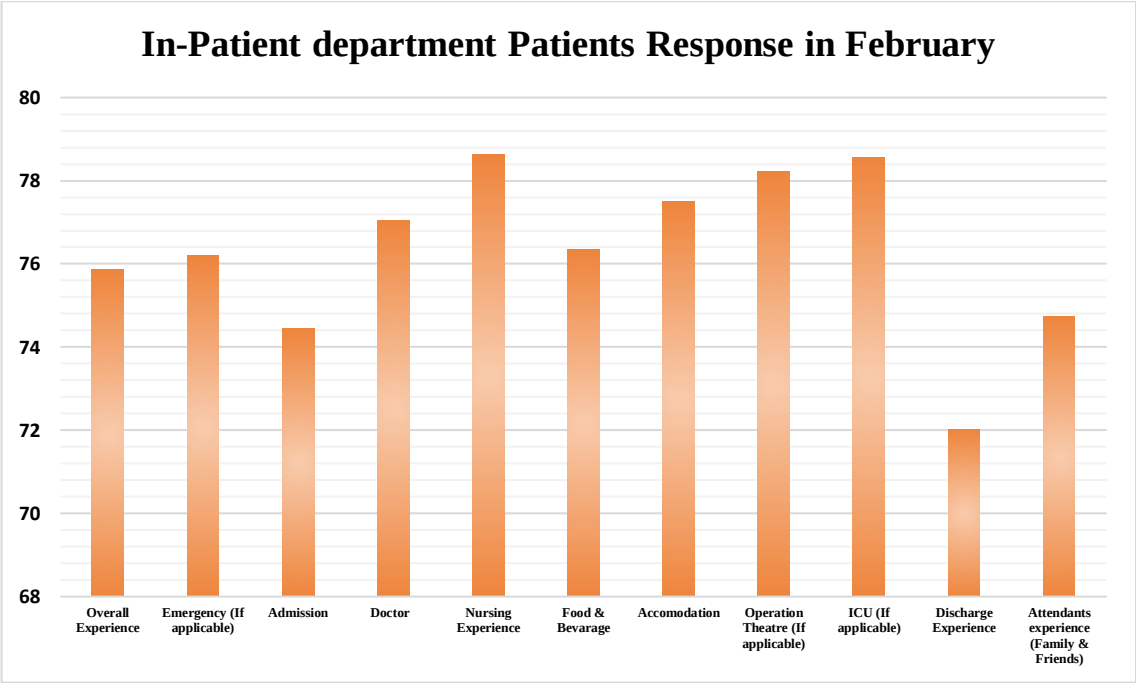

Figure 4.1

- From the above graph we can see that approximately 76% of patients are satisfied with the overall services of the hospital.
- From the personal interview and the data shown above it was noticed that the turn around time for the admission was rather slow and the discharge process was also being affected hence approximately 74% and only 72% satisfaction rate is there respectively.

February OPD response analysis:

The average percentage satisfaction rate of the patients who came for the consultation in outpatient department is shown in the table below:

Feedback Sectors	Satisfaction Percentage
Overall Experience	74.48
Appointment Experience	75.22
Billing Experience	74.45
Doctor Consult	75.54
Laboratory Services	74.48
Radiology & Diagnostic Services	74.13
Pharmacy	71.18
Other Services	74.10
Hospital Experience	75.24

Table 4.2

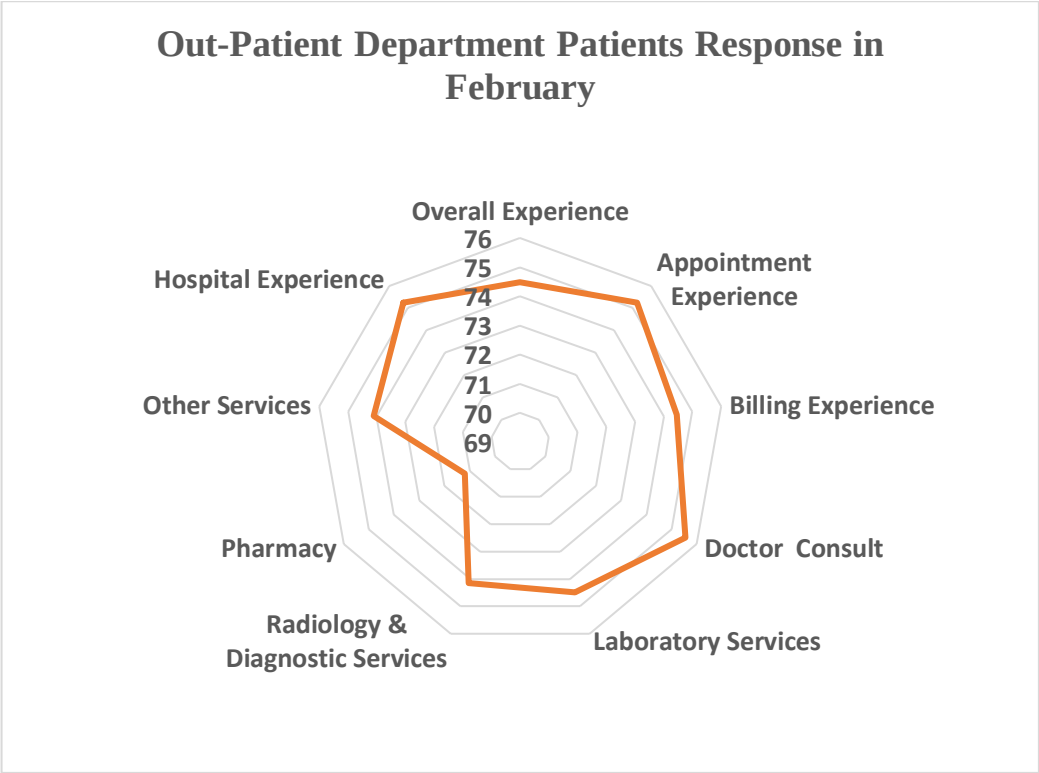

Figure 4.2

- From the above graph we can see that only 71% of people are satisfied with the OPD pharmacy of the hospital.
- For all other factors on an average 85% of patients were satisfied with the services provided by the hospital.

March IPD response analysis:

The average percentage satisfaction rate of the patients who came for the admission in hospital is shown in the table below:

Feedback Sectors	Satisfaction Percentage
Overall Experience	71.15
Emergency (If applicable)	73.05
Admission	67.61
Doctor	75.63
Nursing Experience	75.65
Food & Beverage	69.75
Accommodation	73.82
Operation Theatre (If applicable)	75.43
ICU (If applicable)	72.47
Discharge Experience	64.37
Attendants experience (Family & Friends)	69.42

Table 4.3

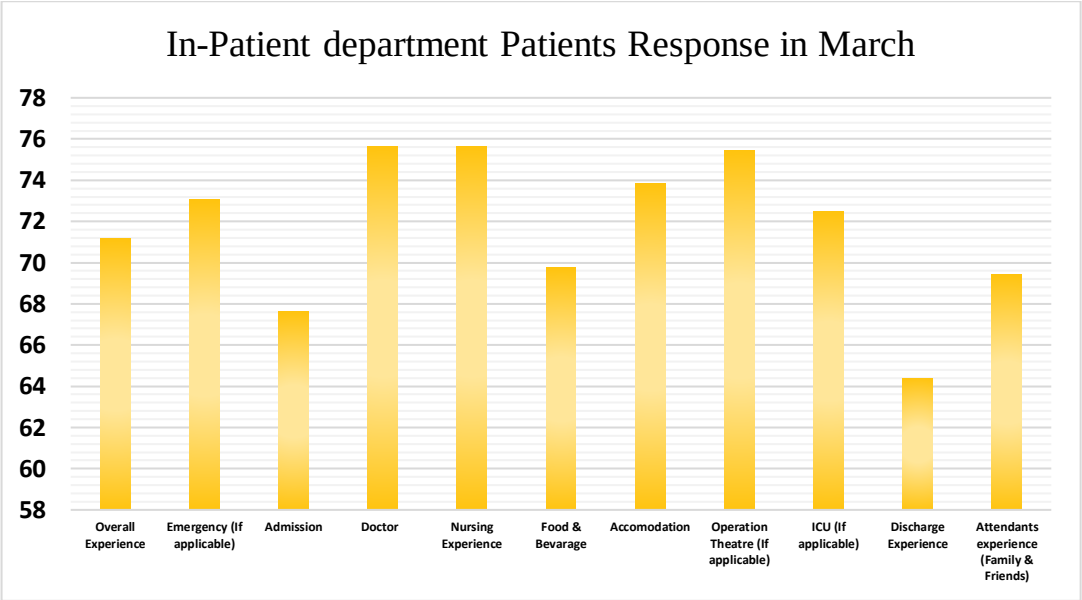

Figure 4.3

- Only 68% and 64% patients approximately are satisfied with the admission and discharge process respectively.
- The quality of food and the experience of attendants of patient's experience is comparatively low than other factors, which is approximately 70% and 69% respectively.
- Patients are highly satisfied with the conduct and communication with the doctors and nurses, which is approximately 76% of patients.

March OPD response analysis:

In the table below the satisfaction percentage is shown of the patients who came for the doctor visit and diagnostic services:

Feedback Sectors	Satisfaction Percentage
Overall Experience	72.78
Appointment Experience	73.66
Billing Experience	71.39
Doctor Consult	75.35
Laboratory Services	71.87
Radiology & Diagnostic Services	73.21
Pharmacy	70.50
Other Services	71.93
Hospital Experience	74.50

Table 4.4

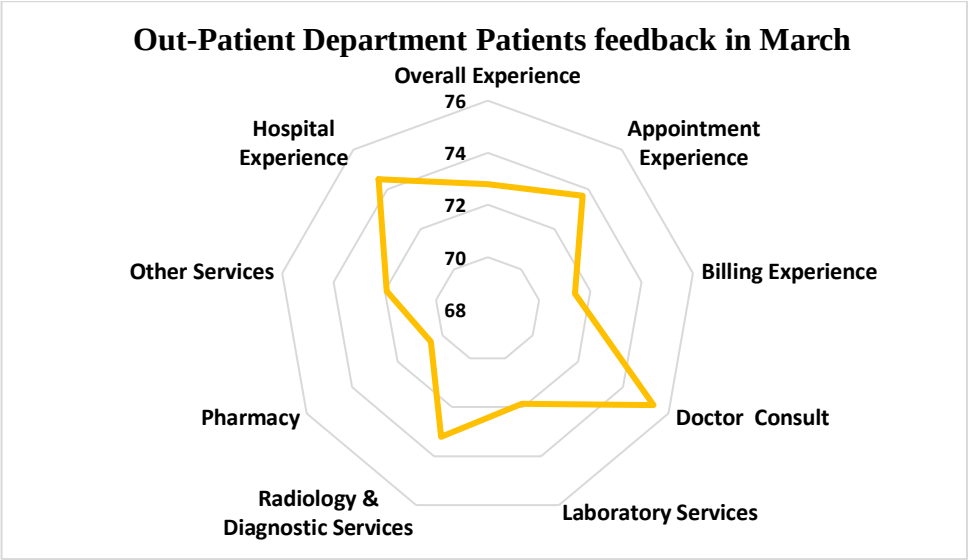

Figure 4.4

From the graph shown above:

- Highly satisfactory sector is the consultation with the doctors which is approximately 76%.
- Followed by the hospital experience which include post care and other factors which is approximately 75%.
- The lowest satisfaction rates this month was with OPD pharmacy which is approximately 68% followed by the billing experience which is approximately 70%.

April IPD response analysis:

The patients who were admitted in the hospital and given their feedbacks, their average satisfaction percentage is calculated, and the resultant data is shown below:

Feedback Sectors	Satisfaction Percentage
Overall Experience	73.76
Emergency (If applicable)	74.37
Admission	70.23
Doctor	76.64
Nursing Experience	76.58
Food & Beverage	72.82
Accommodation	76.40
Operation Theatre (If applicable)	76.06
ICU (If applicable)	75.23
Discharge Experience	69.30
Attendants experience (Family & Friends)	72.30

Table 4.5

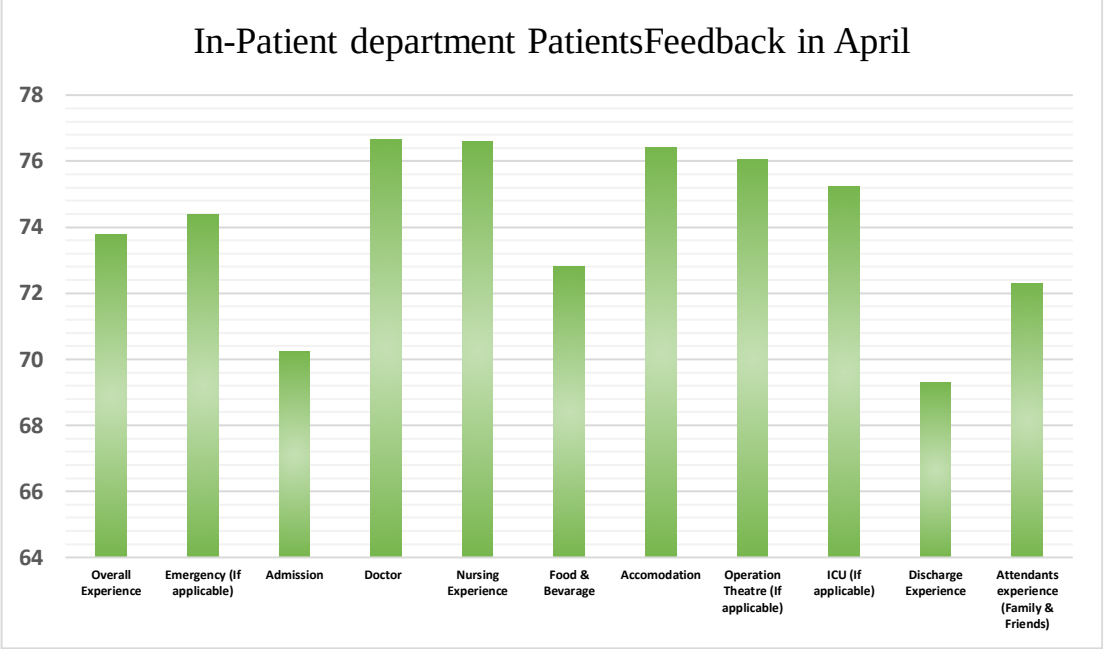

Figure 4.5

From the data shown above:

- The discharge and admission process shows the lowest satisfaction rate with approximately 65% and 70% respectively.
- Highest satisfaction rate is for the doctors and nursing department consultation and communication which is approximately 77%.
- There has been a low satisfaction rate for the quality and variety of food and the experience of the attendants of the patients which is approximately 72% and 73% respectively.

April OPD response analysis:

The average satisfaction percentage of patients who came to the hospital for consultation and diagnostic services is listed below:

Feedback Sectors	Satisfaction Percentage
Overall Experience	73.38
Appointment Experience	73.50
Billing Experience	71.06
Doctor Consult	75.23
Laboratory Services	72.56
Radiology & Diagnostic Services	73.78
Pharmacy	70.57

Other Services	73.00
Hospital Experience	74.48

Table 4.6

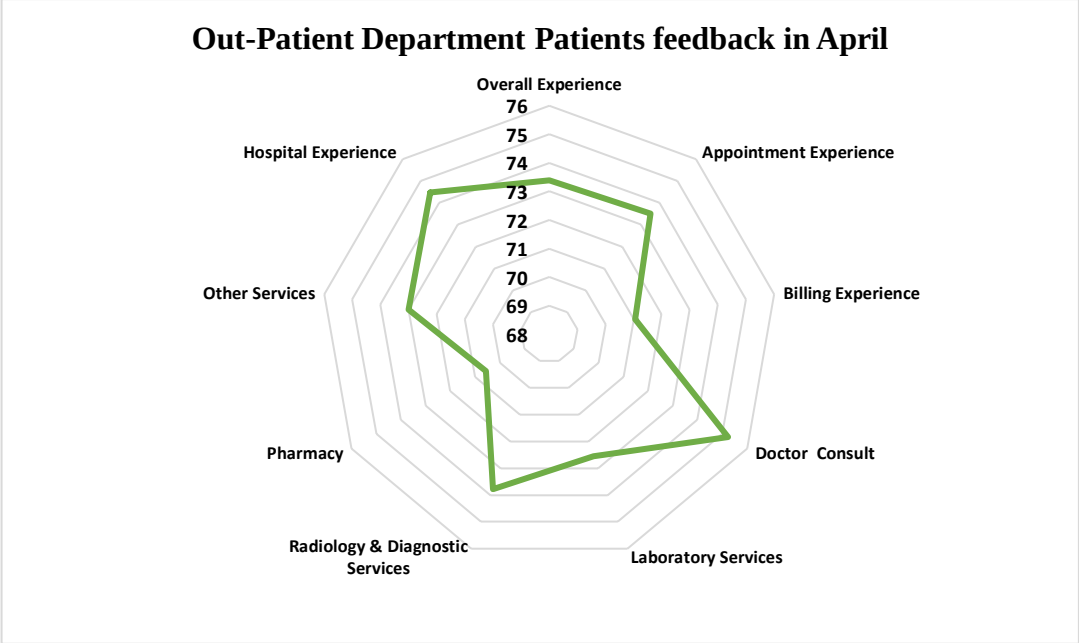

Figure 4.6

From the data above:

- The consultation with the doctors is the highly satisfied factor with the average satisfaction rate of approximately 76%.
- The lowest satisfaction rate is with the pharmacy and the billing sector which is approximately 71% and 70% respectively.

4.2 Aggregate Responses:

IPD Aggregate response analysis:

The data of three months is taken and has been combined to find an aggregate satisfaction rate of the patients who were admitted in the hospital and used the facilities of the hospital. This data will have the clear picture of the how much are the patients are satisfied with the hospital services as the data would also be divided into various sectors which are important for the analysis.

Feedback Sectors	Aggregate Satisfaction Percentage (three months)
Overall Experience	73.59
Emergency (If applicable)	74.54

Admission	70.76
Doctor	76.44
Nursing Experience	76.95
Food & Beverage	72.97
Accommodation	75.90
Operation Theatre (If applicable)	76.57
ICU (If applicable)	75.42
Discharge Experience	68.56
Attendants experience (Family & Friends)	72.15

Table 4.7

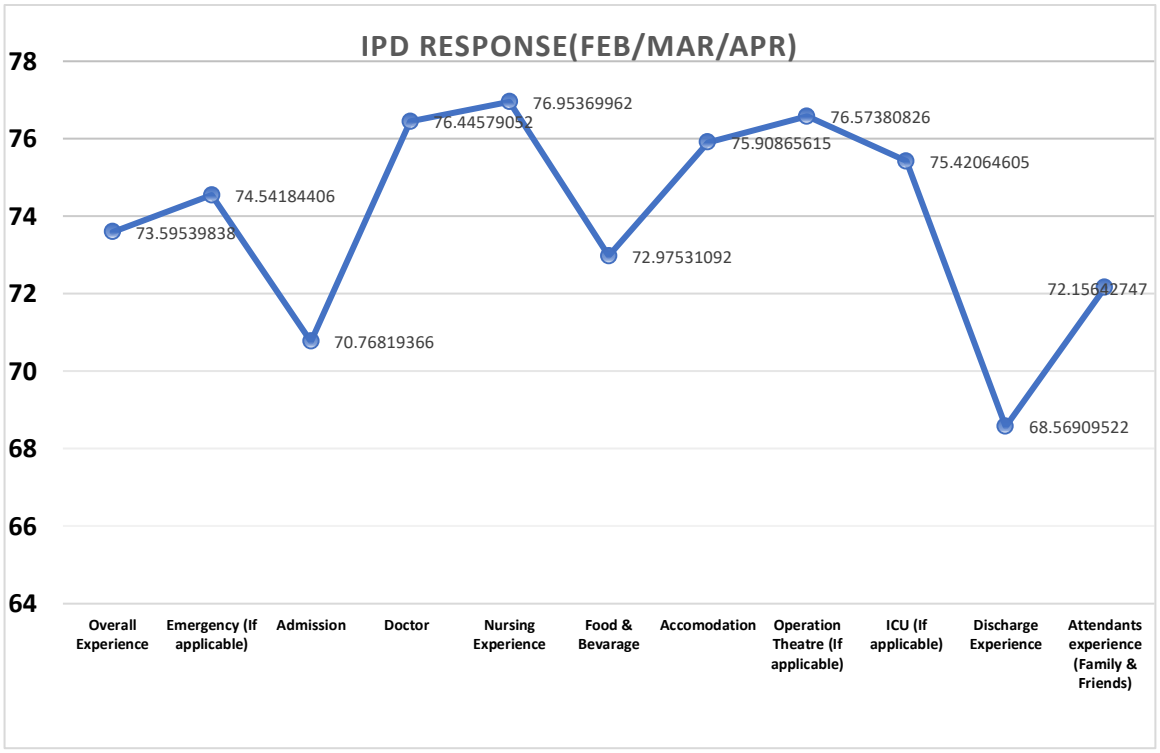

Figure 4.7

From the data above we can see that:

- Patients has generally been dissatisfied with the discharge turnaround time as comparatively the average percentage of experience of patients during the time of discharge is less which is 68% approximately.
- Patients generally also face problem while getting admitted in the hospital as the second most not satisfactory response is being calculated in the admission sector which is 70% approximately.
- Patients have also shown some percentage of dissatisfaction with the food variety and quality as on an average only 72% approximate rating is being given to the food and beverages department of the hospital.

- On contrary to that, patients are highly satisfied with the most important sector in the hospital, which is the doctors and the nurses, as the patients have given them the highest rating with the satisfaction rate of 76% and 77% respectively.

OPD Aggregate response analysis:

The data of three months is taken and has been combined to find an aggregate satisfaction rate of the patients who came in the hospital for the consultation with the doctor and used the facilities of the hospital. This data will have the clear picture of the how much are the patients are satisfied with the hospital services as the data would also be divided into various sectors which are important for the analysis.

Feedback Sectors	Aggregate Satisfaction Percentage (Three months)
Overall Experience	73.55
Appointment Experience	74.13
Billing Experience	72.30
Doctor Consult	75.37
Laboratory Services	72.97
Radiology & Diagnostic Services	73.71
Pharmacy	70.75
Other Services	73.01
Hospital Experience	74.74

Table 4.8

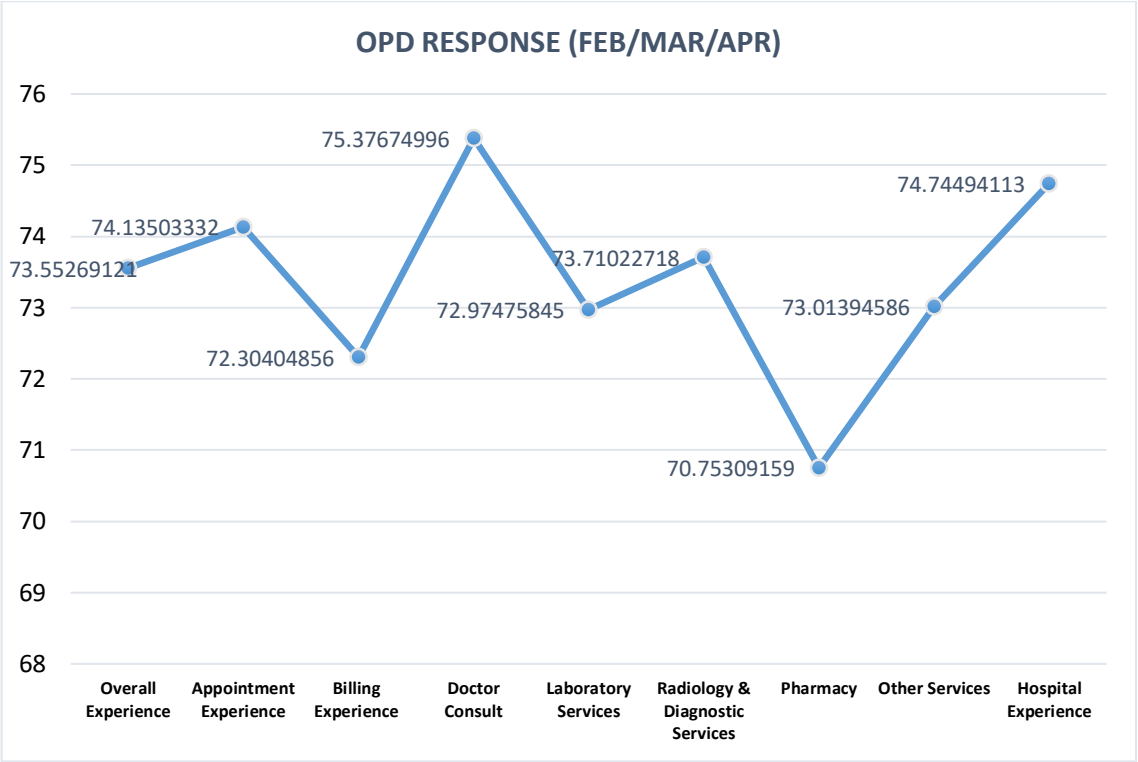

Figure 4.8

The data above shows that:

- Patients are comparatively not very satisfied with the services provided by the OPD Pharmacy as compared to other services here only 70% patients approximately are satisfied.
- On an average patient has also shown a bit of dissatisfaction with the billing experience with approximately 72% satisfaction rate.
- Patients are highly satisfied with the consultation with he doctors as satisfaction rate is approximately 76%.
- Patients also felt satisfied with the hospital experiences related to the post discharge care and follow up and other services as the satisfaction rate is approximately 75%.

4.3 Net Promoter Score:

The threshold for the highest rating is decided by the concerned authorities and approved by the heads for calculating the same. In Fortis Hospital, Greater Noida, the patients who gave an overall rating of 10 or 9 out of 10 are considered for the calculation of NPS.

IPD Net Promotor Score calculation: (From February2023-April 2023)

NPS SCORE	NUMBER OF RESPONDENTS
10	139
9	41
8	18
7	10
6	2
5	0
4	0
3	1
2	0
1	2
0	0
Total respondents	**213**

Table 4.9

	Promoters (10,9)	**Detracted 0-6)**	**NPS score:**
No. of respondents	180	5	**82.16%**
Percentage	84.51%	2.35%	

Table 4.10

OPD Net Promotor Score calculation: (From February2023-April 2023)

NPS SCORE	NUMBER OF RESPONDENTS
10	238
9	64
8	37
7	7
6	4
5	2
4	1
3	0
2	0
1	3
0	8
Total respondents	**364**

Table 4.11

	Promoters (10,9)	**Detracted 0-6)**	**NPS score:**
No. of respondents	302	18	**78.02%**
Percentage	82.97%	4.95%	

Table 4.12

- The aggregate Net Promotor Score from the In-Patient Department of the hospital is **82.16%**
- The aggregate Net Promotor Score from the Out-Patient Department of the hospital is **78.02%**
- The score also directly helps in looking at the bigger picture of how much a satisfied patient help in the growth of the hospital services and help in further improvement of the services.
- The score for both the departments is high which indicates that a sizable majority of the surveyed patients are inclined to promote the medical services to others. This suggests a favourable opinion and level of satisfaction with the treatment and services offered. It is regarded as an exceptional rating and exhibits a high degree of patient advocacy and dedication.

CHAPTER – 5

DISCUSSION

To run any hospital smoothly it is very important that the doctors and nurses are experienced and dedicated to their responsibilities. The doctors and nurses are the backbone of any hospital. In this study it is analysed that thew communication with the doctors and nurses and the consultation given to the patients is appropriate as patients were highly satisfied with the consultation given by the doctor and the services provided by the nurses. For a nurse it is important that they take the responsibility to make the patient feel comfortable in the environment of the hospital and help patient to explain their problems without feeling any hesitation and the nurses of the hospital are attending the patients with utmost care.

As analysed in the study and noticed in the personal Interview, patients were facing a problem with the parking space. Parking availability is a crucial component of healthcare facility design that has a big impact on patient satisfaction. Patient satisfaction might suffer because of delays in medical service, annoyance, and worry caused by inadequate parking. On the other hand, having enough of parking may improve patient satisfaction and lower stress, saving patients and their families time and effort.

- Healthcare facilities should place a high priority on parking space availability to guarantee that there is enough space for patients and their families. Healthcare institutions should provide appropriate drop-off and parking places for patients with mobility challenges. These areas should be accessible. To guarantee that everyone has access to sufficient parking, healthcare providers should also consider the parking demands of employees, guests, and patients.

For better patient outcomes and satisfaction, the wait time for discharge must be decreased. Here are some strategies healthcare practitioners can use to shorten the delay for discharge:

- Locate discharge process bottlenecks: Healthcare providers should locate any bottlenecks or delays in the discharge procedure. Due to administrative work, a staffing shortage, or other factors, these sectors may exist. Healthcare professionals can use techniques to simplify the procedure and shorten wait times after they have been recognised.

- Healthcare professionals can make the inter departmental communication stronger so that there is reduced wait time while making the full patient summary by attaching all the required diagnostic information and reports. As it is mostly seen that reports from radiology department generally come late as all the reports are sent to doctors digitally.
- Healthcare professionals may prepare for patient discharge by making a strategy in advance. This may entail planning out the discharge procedures in advance, making sure the patient has access to the medicines and supplies they need, and working with the other healthcare professionals engaged in the patient's care.
- Involve patients and families: To make sure that they are aware and ready for release, healthcare practitioners can involve patients and families in the discharge process. This may entail informing them about medicines and follow-up treatment as well as including them in the process of making healthcare decisions.

In medical settings, admission time has a significant impact on patient satisfaction. Patients favour timely admission procedures that reduce wait times and delays. Healthcare organisations can employ several initiatives to increase patient satisfaction in this regard:

- The admissions process can be streamlined by using electronic or online registration systems, which also reduce paperwork and human data entry.
- During times of high admission volume, process and staffing are optimised to guarantee that there are enough employees on hand to manage admissions quickly.
- Having open lines of communication with patients regarding admission requirements, needed paperwork, and anticipated wait periods helps control expectations and reduce anxiety.
- Patients can efficiently and autonomously execute admission-related chores by investigating cutting-edge technology like self-check-in kiosks or smartphone applications.

The availability of medications, competence and patient counselling, safety and quality assurance priorities, and a focus on effective workflow and communication make a successful OPD pharmacy crucial for patient satisfaction. The OPD pharmacy may be made more patient-friendly by implementing the following strategies:

- By placing the pharmacy within the medical centre, you may improve accessibility and convenience for patients by lowering the number of times they must go to outside pharmacies.

- Utilise effective supply chain management techniques and keep your inventory well-stocked to guarantee drug availability.
- By using experienced chemists who can give drug advice, dose directions, and patient counselling, you can provide expertise and support.
- By following stringent guidelines for the handling, storage, and distribution of drugs, put safety and quality assurance first.
- To reduce wait times and enable seamless cooperation with healthcare professionals, streamline pharmacy process and communication.
- Provide patient education programmes, such as counselling sessions and instructional materials, to help patients manage their drugs well.
- To increase efficiency and accuracy, integrate technological solutions such automated dispensing equipment and electronic prescription management systems.

Good quality food and simultaneously providing the variety in food for the patients in the hospital is crucial. The good quality food provides the nutrients that are required for the patient for their fast recovery. Varity in the food that are also rich in nutrients can give the patients a phycological satisfaction, which will also help in the benefit of patients.

In the study it has been observed that the patients have been constantly not very satisfied with the food provided by the hospital. The different ways to improve the food is as follows:

- Assess the patients' needs to learn about their preferences, cultural backgrounds, dietary demands, and nutritional requirements.
- Develop a meal that is broad and balanced by working with specialists like nutritionists and chefs.
- To create a menu that suits patients' likes and preferences, get feedback from them through surveys, focus groups, or taste testing sessions.
- Review the menu often depending on customer feedback, eating habits, and nutrient content.
- To increase freshness and promote sustainability, choose regional and seasonal foods.
- Ensure patients have flexibility and customization choices, letting them choose the ingredients, the cooking style, or the quantity amounts.
- To increase variety and appeal, staff workers should be trained to create and serve a greater choice of foods.

CHAPTER – 6

CONCLUSION

From the study we concluded that:

- During the time-period of three months, it is observed and analysed that satisfaction level and communication and comfort level of the admitted patients with the doctors as well as nurses is very high. In the analysis it is deduced that Doctors to Nurse satisfaction Ratio is approximately same, that is approximately 76%, which indicated that hospital's doctors as well as nurses are given proper training and they are responsible towards their duties.
- It can also be concluded that admitted patients are not very satisfied with the admission and discharge procedure as they face many problems during the process. The satisfaction rate is comparatively low than other sectors which is approximately 70% and 68% respectively.
- Patients who visited hospital for the consultation with the doctors were very satisfied with the consultation as the satisfaction rate is high with the approximate percentage of 75%.
- It came to notice with the observation and analysed data that patients were not satisfied with services in the OPD Pharmacy as the satisfaction percentage is approximately 70%, which is comparatively lower than other. It also came to notice that as the hospital is a new setup therefore the pharmacy is still improving.
- Based on the study, analysis, and personal interviews there are a few suggestions to increase the patient satisfaction rate which will also help the hospital to grow:
    - Maintain the turnaround time of the admission and discharge process by managing the third-party assistance team properly to fasten the discharge time.
    - Manage the parking facility as the hospital is on the highway and have the valet parking system to help the patient.
    - Increase the variety in the food while maintaining the nutritional value which will help in the betterment in the health of the patient and give the patient a little bit of happiness.

To conclude further, the hospital has a good patient experience rate but need to improve a few sectors to maintain and improve the satisfaction rate.

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