

Original Article



Assessment of Factors and Level of Patient Satisfaction in Out-patient Department of a Private Hospital

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Abstract

Background: Measurement of patient satisfaction in the outpatient department (OPD) of a hospital can be used to evaluate and redesign the process of caregiving and to improve the quality of services. Sometimes study findings depend on the setting.

Objectives: a) To identify the factors associated with the patient's experience, and satisfaction about health care services of Out-patient department(OPD) of Khwaja Yunus Ali Medical College Hospital receives multidisciplinary health services. b) To measure the satisfaction level regarding doctors, health assistance, and other auxiliary staff working in OPD to help patients.

Materials and Methods: A cross-sectional study was conducted among 914 patients of age ranging from 1 to 80 years selected randomly from OPD between January 2021 and May 2021. A self-designed semi-structured questionnaire was developed to assess patients' satisfaction with health care services. Statistical analysis was done by online computer software.

Results: Overall 92.23 % of the patients were satisfied with the behaviour of the doctors and 75.93 % were satisfied with the services of other staff, and the remaining 7.77% were unsatisfied with doctors' behaviour and 24 % with other staff services respectively.

Conclusions: The percentages of unsatisfied patients were deficient. Various deficiencies should always be covered by the hospital administration that will turn into a good result of improvement in the hospital services for more satisfaction of the patients.

Key words: Health Care Services, Outpatient Services, Quality Services.

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Introduction

Patient satisfaction is the extent to which patients are happy with their health care. In other words, it has been defined as the degree of agreement between a patient's expectations of an ideal care and his/her perception of the real care he received.¹ A proper understanding of the factors responsible for patient satisfaction would result in implementation according to the requirements of the patients, as perceived by patients and health care providers.² Day- by day the level of competition in the health sector is increasing regarding patient service. That's why patient satisfaction has become an important measurement for

monitoring healthcare performance. Furthermore, resource constraints and organizational dysfunction can prevent clinical staff from providing the care they and their patients desire. In the evaluation of health care quality, patient satisfaction is a performance indicator measured in a self-report study and a specific type of customer satisfaction metric. There are circumstances in which patient satisfaction is not a valid indicator of health care quality even though it is often used as such. Many studies still need to identify a relationship between patient satisfaction and healthcare quality.^{3,4} The quality assurance and accreditation process in most countries requires that the service

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satisfaction of patients be measured regularly.⁵ As a result, patient feedback is important to identify problems from health services that need to be resolved to improve patient satisfaction.⁶ Asking a patient directly for what they received regarding the health service and treatment is an important step for improving the quality of service.⁷ Various studies conducted patient satisfaction in the outpatient department and found different results, such as, one survey found 22% and another survey found a 57% satisfaction level.^{8,9} Out-patient satisfaction survey has been routinely assessed in many hospitals, but this is the first time an assessment survey done in our hospital which will continue regularly. To alleviate those obstacles by health care providers, improvement of patient satisfaction is mandatorily.¹⁰

Objectives

To identify the factors associated with experience, perception, and satisfaction about health care services of patients receiving multidisciplinary health services at Out-patient department(OPD) of Khwaja Yunus Ali Medical College Hospital and to measure the intensity of the relationship between patient satisfaction and health care services.

Materials and Methods

This cross-sectional study was conducted between January 2021 and May 2021 at Khwaja Yunus Ali Medical College Hospital, Enayetpur, Sirajganj a teaching hospital located midway between Dhaka, the capital city of Bangladesh and Rajshahi Division. This hospital is a centre for undergraduate and postgraduate medical teaching of tertiary health care, employing 300 professionals. The hospital has 24 departments and provides outpatient consultations and inpatient services. It receives patients from all over the country.

Patients were from mixed occupational backgrounds such as cultivators, traders, service classes, students etc. Cases were chosen by random selection of OPD. We conducted face-to face interviews with closed-ended structured questions. The validated instrument consisted of 22 items developed in our institute and approved by the management committee which assessed medical and service aspects of care. A semi-structured questionnaire was designed which comprised 22 items to items to measure socioeconomic status, types of treatment provided, patient's rating competence of physician, the competence of health care providers, the ability to make a proper diagnosis, and satisfaction with health care provider's behaviour. It also contained questions on the socio-demographic characteristics of the respondents. A total of 914 patients were interviewed. Inclusion criteria were those patients who came to OPD seeking consultation: For patients who could not understand questions or were severely ill, the questions were asked to the patient's attendants. All individuals were interviewed by interviewers who had proper training on how to ask questions to ill patients giving their identity to them. Patients were asked questions in OPD without the presence of any hospital staff. Patients responded regarding their level of satisfaction with doctors and staff behaviour and service as very satisfied, satisfied, unsatisfied and very unsatisfied. Patients were also asked if they had any specific suggestions regarding the services of the hospital. During the survey, doctors and other healthcare providers were

kept unaware of the survey to avoid bias in their behavior with the patients. To maintain complete confidentiality no names were recorded on the questionnaire. Prior approval of the concerned authority was obtained before the beginning of the survey and permission was taken from the concerned authority. Statistical analysis: Descriptive statistics were used on the socio-demographic data, and Statistical differences in the behaviour of doctors and other staff were calculated.

Results

A total of 914 patients attending the OPD were included in the study. Age ranged from 1 year to 80 years, mean age of 40.1 years. Out of the total, 58 % of the study population comprised males and 41.90 % were female. The highest number of patients (71.88 %) belonged to the middle class, 22.36 % belonged to the lower middle class, 34.19 % belonged to the poor, 1.44 % belonged to the destitute and 16.13% belonged to the rich. The difference between characteristics are shown in Table I. Regarding the types of treatment patients received, 90% of patients received medical treatment and 9.85% received medical and surgical treatment. When asked about who suggested coming to this hospital, 45.41% said that they came on their own will, 25.27% said that they came by the suggestion of their family members, 22.76 % told that the paramedic suggested coming here. Maximum patients came to get service from this hospital at their own ($p < 0.0001$), which indicates the standard service level of this hospital. When assessing the patient's satisfaction regarding physicians' competence, 85.6 % gave a positive answer and 14.33 % gave a negative answer when asked whether the patient's physicians are good enough for diagnosis, 90.70 % replied 'yes' and 9.30 % replied 'no' are shown in Table II. When asking the respondents about doctors regarding competence for proper treatment, 91.69 % gave a positive answer and 8.32 % gave a negative answer. When the patients regarding the ability of doctors for proper diagnosis 71.44 % replied positively and 28.56% replied negatively shown in Table II. The respondents were asked whether they would recommend their friends or family members to avail of this medical care facility, 99.12% said they would recommend it, and 0.88 % said they would not recommend to come here to avail medical care facilities as shown in table II. Regarding satisfaction with doctor behavior, 69.26 % said very satisfied, 22.98 % were satisfied, 4.16 % were unsatisfied, and 3.61 % said very unsatisfied. Regarding services of hospital staff, 36.76% said very satisfied, 39.17 % were satisfied, 12.69 % unsatisfied, and 11.38 % were very unsatisfied as shown in Table III. To assess the overall satisfaction, grades: very satisfied, satisfied, and unsatisfied were pooled across and if we take very satisfaction and satisfaction together, it showed that a high proportion of respondents were satisfied (95.18%) with the behaviour of the doctors, while only 4.72% was unsatisfied. A very high proportion of patients were satisfied with the services of OPD. If we take very satisfied and satisfied together as satisfied, a high number of patients (92.24%) were satisfied with doctors' behaviour, and only 7.77% were unsatisfied. If we see very satisfied and satisfied together for services of staff 75.93% were satisfied. Unsatisfied and very unsatisfied together were 24% shown in Table III. Patient satisfaction regarding quality services is shown in Table III. Statistical differences of various variables are shown in Table IV.

Table I: Socio-economic and demographic characteristics.

Variable	Data	Frequency
Total patient	914	
Gender	Male	531 (58%)
	Female	383 (41.90%)
Age (yrs)	Average	40.5 yrs
	Range	1 - 80 yrs
Economic status	Poor	214 (34.19%)
	Destitute	9 (1.44%)
	Lower middle class	140 (22.36%)
	Middle class	450 (71.88%)
	Rich	101 (16.13%)

Table II: Awareness of OPD services

Indicators	frequency (n=) (%)	Yes vs No (difference)	p - value
Do you think KYAMCH doctors are competent ?	yes 783(85.6%) No 131(14.33%)	significant	p<0.0001
Do you think KYAMCH doctors are good enough for diagnosis ?	yes 829(90.70%) No 85 (9.30%)	significant	p<0.0001
Do you think KYAMCH doctors are competent for proper treatment ?	yes 838 (91.69%)	significant	p<0.0001
Do you think			

Table III: Patient satisfaction regarding quality of services available at OPD

Indicators	Frequency	p - value
Types of hospitals they prefer		
KYAMCH (K)	715(78.23%)	p<0.0001 (K vs GH)
Govt. hospital (G.H)	109(11.93%)	
Private clinic	64 (7%)	
Others	26 (2.84%)	
How do patients rate our services with other hospital		
Equal (E)	196 (21.44%)	p<0.0001 (B vs
Better (B)	536(58.64 %)	
Worse	182 (19. 91 %)	
Satisfaction level with doctors behaviour		
Very satisfied (V.S)	633(69.26%)	p<0.0001 (V.S. vs U.S)
Satisfied (S)	210(22.98%)	
Unsatisfied (U.S.)	38(4.16%)	
Very unsatisfied (V.U.S)	33(3.61%)	
Satisfaction level with staff services		
Very satisfied (V.S)	336(36.76%)	p<0.0001 (V.S. vs U.S)
Satisfied (S)	358(39.17%)	
Unsatisfied (U.S.)	116(12.69%)	
Very unsatisfied (V.U.S)	104 (11.38 %)	

Table IV: Statistical difference of various variables.

Variableslevel	Difference	Chi square	Significant
Male vs female	16.1 %	23.06	p<0.0001
Middle vs Poor	37.69 %	85.53 %	p<0.0001
Poor vs rich	18.06 %	10.97	p=0.0009

Discussion

To measure the patient's satisfaction level in a hospital is very difficult. It is measured for various reasons. But 2 reasons are very important; one is to evaluate health care services from the patient's point of view, and the second one is to, identify problems to get ideas towards resolving the problems. If we compare the patients according to economic status, a significant number of middle-class patients (71.88%) came to this hospital to get hospital services as compared with the rich (16.13%), poor (34.19%), lower middle class (22.36%) and destitute patients (1.44%) ($p < 0.0001$). When comparing the number of poor patients with the number of rich patients, there was a significant increase in the number of poor patients coming to get hospital services ($p < 0.0001$). It proves that poor patients who don't have enough money for treatment purposes, came to this hospital having good faith regarding the treatment of diseases and good services. When comparing the number of middle-class patients with the rich patients, there were significant, having more middle-class patients as compared with the rich patients ($p < 0.0001$). Middle-class family comes to this hospital in good faith for treatment purposes. Regarding the competency of the physicians, 85.6% said "yes" in comparison with 44.33% who said that physicians are not competent. Here a significant number of patients said "yes" ($p < 0.0001$). Regarding disease diagnosis by physicians, a significant number of patients (90.70%) said that physicians are good enough, in comparison with patients (9.30%) who do not agree with others ($p < 0.0001$). Regarding the competency of the physicians for proper treatment of diseases, a significant number of patients (91.69%) agreed with the competency of physicians than those of not agree, (8.32%) ($p < 0.0001$). When the patients were asked whether they would recommend their friends to come in this hospital for treatment purposes, 99.12% said that they would recommend their friends, which is significantly different from those who would not recommend their friends to come in this hospital ($p < 0.0001$). When patients were asked whether they preferred this hospital or other hospitals such as government hospitals, private clinics or any other hospitals, a significant number of patients (78.23%) preferred this hospital ($p < 0.0001$). This result indicates that KYAMCH services and physician's competency are good for patients. Regarding the rating of this hospital by patients, 58.64% of patients express their feelings better than other hospitals, which is better than those of their expression telling equal or worse ($p < 0.0001$). Surveying the level of physicians' behaviour, 69.26% of patients expressed their opinion telling very satisfied with the behaviour of physicians, which is more significant than that of other satisfaction levels such as satisfied (22.98%), unsatisfied (4.16%), very unsatisfied (3.61%). Regarding the service level of other staff, very satisfied (36.76%) and satisfied levels (39.17%) were significantly higher than that of unsatisfied (12.69%) and very unsatisfied (11.38%) ($p < 0.0001$). If we consider the survey score regarding physicians and staff behaviour, OPD services were favourable for patients in all respects. But more in-door and outdoor surveys should be done more extensively for further opinion. Despite good patient satisfaction levels, a small but by no means significant, portion of patients were unsatisfied with the health services, as patients expressed. This unsatisfied portion of patients with the services indicates that hospital administration needs to undertake more steps for further service

improvement. In another study around 89.1% of patients were fully satisfied and the remaining 10.9% were dissatisfied with the treatment given by the doctor as they did a cross-sectional study with 450 patients. In a separate study more than 85% of patients felt happy with the behaviour of doctors and Nurses towards them, they did the study with 151 OPD patients. In a study, 69.26% and 22.98% were very satisfied and satisfied respectively. The remaining 4.16% and 3.61% were unsatisfied, and very unsatisfied respectively. These data were different due to different study designs.^{11,12}

The satisfaction level was 72% in an Indian study which is lower than that of our study and Bhattacharya et al study (88%), but higher than that of Mahapatra et al (63%).¹³⁻¹⁵ In addition, different methodology and timing of a study could explain some of the differences. That's why comparing our study findings with the previous study was different. Despite this, different hospitals introduce a variety in the range of quality improvement initiatives that address different aspects of care.¹⁶

There is a widespread dissatisfaction among patients in Bangladesh Government and private hospitals, and clinics. Because many of the patients have to pay money to different service providers in the name of gifts/tips which is a significant factor in patient dissatisfaction.¹⁷ several limitations were present in this study. First, we used a close-ended questionnaire. So, We could not collect the free opinions of the patients who participated. Second, we did not assess other OPD facilities, such as canteen facilities, Pharmacy, and toilet facilities. Third, we did not assess according to the different diseases as the patients suffered separately. Fourth, we did not assess patients of different departments such as Oncology, Urology, Cardiology, Gyne OBS etc separately. Therefore, all those factors should be considered in interpreting this study.

Conclusion

Satisfying factors such as the behaviour of doctors and staff and the way they treat their diseases were identified. Hospital Authorities and healthcare providers will get valuable information to meet needs and preferences of patients receiving health care services. Although a total of 92% of the surveyed patients are satisfied with some specific aspect of services given in OPD, a total of 8% patients were unsatisfied. Therefore, periodic patient satisfaction surveys should be institutionalized in this facility to provide continuous quality improvement. The authors believed that this study had some limitations. Patient interviews one-to-one, may provide a deeper understanding of hospital services than the self-administered Structured questionnaire.

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