



# CHAPTER-07

## TO MEASURE THE LEVEL OF SATISFACTION IN THE IPD PATIENTS AND TO IDENTIFY AREAS WITH LOW SATISFACTION LEVELS

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**DOI: <https://doi.org/10.52458/9788197040856.2024.eb.ch-07>**

**Ch.Id:- IIHMR/GRF/EB/BPHHM/2024/Ch-07**

## **INTRODUCTION**

Patient satisfaction is one of the most important goals any hospital aspires to achieve". In today's competitive market of healthcare industries, it is important that healthcare managers should focus on achieving high levels of patient satisfaction in order to improve the quality-of-service delivery and maintains a continuous quality treatment in the hospital. Patient satisfaction reflects patients' involvement in the decision-making process and their role as partners in improving the quality of healthcare services and also increases the patient footfall. Patient satisfaction is a highly desirable outcome of clinical and non-clinical care in the hospital [1].

Satisfaction is a subjective concept for the patient, and the healthcare providers must accept its existence regardless of the validity of the patient's views. Discrepancy between patient expectation and the service received leads to decreased satisfaction among patients and their attendants. Therefore, healthcare managers need to characterize the factors influencing patient satisfaction in order to assess and improve the quality of the healthcare delivery system of the hospital. This study intends to assess the patient satisfaction of the IPD patients well as exploring any possible correlation with external factors [2].

## **RESEARCH OBJECTIVES**

1. To evaluate the degree of patient satisfaction within the In-Patient Department (IPD) at Apex Multi-specialty Hospital, Varanasi.
2. To identify specific areas within the IPD at Apex Multi-specialty Hospital, Varanasi, where satisfaction levels are comparatively lower.

## **RESEARCH METHODOLOGY**

The study was a cross-sectional descriptive study conducted at Apex Multispecialty Hospital, Varanasi, during the period from March 25, 2019, to April 25, 2019. The sample size consisted of 500 patients admitted to the In-Patient Department (IPD), and data were collected using a structured questionnaire with a Likert scale. On average, 8-9

questionnaires were filled out each day. Non-probability convenience sampling was employed for participant selection. Data analysis involved graphical representation of frequency distribution. Inclusion criteria encompassed patients aged 15 years and above, with a length of stay exceeding 2 days, a satisfactory level of consciousness, and a stable emotional state. Exclusion criteria included patients under 15 years of age and those with a length of stay less than 2 days.

## **RESULTS AND DISCUSSION**

The satisfaction levels of patients at Apex Multi-specialty Hospital in Varanasi were assessed across various categories. In terms of the overall hospital experience, 2% expressed being very dissatisfied, 17% somewhat dissatisfied, 35% neutral, 39% somewhat satisfied, and 7% very satisfied. Patients were notably content with doctors, with 91% being satisfied, distributed as follows: no one very dissatisfied, 1% somewhat dissatisfied, 7% neutral, 28% somewhat satisfied, and 65% very satisfied. Nursing care received positive feedback, as 0% were very dissatisfied or somewhat dissatisfied, 18% were neutral, 29% were somewhat satisfied, and 54% were very satisfied. Hospital staff behavior garnered responses of 1% very dissatisfied, 10% somewhat dissatisfied, 39% neutral, 48% somewhat satisfied, and 1% very satisfied. Room facilities satisfaction included 0% very dissatisfied, 2% somewhat dissatisfied, 29% neutral, 39% somewhat satisfied, and 29% very satisfied. Radiology services, pathology services, dietician consultation, hospital admission process, dietary services, discharge process, hospital cleanliness, and hospital infrastructure all showed varying levels of satisfaction.

## **CONCLUSION**

To enhance overall patient care and hospital operations, several recommendations are put forth. Firstly, it is suggested that doctors communicate and record the estimated treatment costs on the prescription sheets, promoting transparency in healthcare expenses. Timely updates regarding any delays should be provided to patients by the nursing staff, ensuring effective communication in case of scheduling changes. Continuous Medical Education sessions are advised for both

doctors and nursing staff to keep them updated on the latest medical practices.

Furthermore, there is a proposal to empower clinical staff to collaborate with patients' caregivers, fostering empathy and improving patient care. A culture of shared accountability is encouraged within the nursing team to ensure prompt responses to patient needs and a collective approach to healthcare. Soft skills training is recommended for all hospital staff members to enhance interpersonal communication.

## **REFERENCES**

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