

Research Article

# A Study of Satisfaction among Patients visiting Outpatient Department at a Tertiary Care Centre in Delhi

Mukesh Kumar<sup>1</sup>, Anupam Sahu<sup>2</sup>, Sanjeev Kumar Singh<sup>2</sup>, Samar Chatterjee<sup>2</sup>

<sup>1</sup>FHO, Bathinda (Pb), India.

<sup>2</sup>Base Hospital Delhi Cantt, Delhi, India.

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### Corresponding Author:

Mukesh Kumar, FHO, Bathinda (Pb), India.

### E-mail Id:

goswami.r.mukesh@gmail.com

### Orcid Id:

<https://orcid.org/0000-0002-8533-4936>

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## A B S T R A C T

**Background:** Healthcare facilities at any point comprises different stakeholders and various mechanisms which require constant monitoring and feedback for smooth functioning and improvement in services. Feedback from patients is an important aspect and qualitative feedback is often left out. Hence a study was carried out to find patient satisfaction at a tertiary care hospital.

**Method:** A cross-sectional study was conducted with a pre-designed bilingual questionnaire with a validated scale for measuring patients' satisfaction among consenting individuals and caretakers of minor patients visiting OPD of a tertiary care hospital during Jun-Jul 2021.

**Results:** Study participants were predominantly females with a mean age of  $43 \pm 14.23$  years. The majority of study participants were found to be satisfied with "all but one parameter" of the scale for the facilities available at the hospital. Only for the overall cleanliness of the toilets, majority of them were not found to be satisfied. Patients who were asked for follow-up were found to be significantly associated with being overall satisfied with the attending doctor ( $p < 0.05$ ).

**Conclusion:** Patient satisfaction is an important aspect of healthcare, which is often not considered among other parameters. Healthcare facilities, especially tertiary care hospitals need to assess this component of patient care regularly to improve the quality of services being delivered.

**Keywords:** Patient Satisfaction, Healthcare, Tertiary Care Hospital

## Introduction

Delivery of healthcare facilities at any point is a combination of various processes involving different stakeholders and a series of complex mechanisms. Both service providers and recipients constitute an important aspect of healthcare delivery systems. Mere consultation with a health care

practitioner does not complete the process of healthcare delivery; there are other aspects as well which need to be fulfilled both by service providers which include doctors, nursing officers, nursing attendants, pharmacists, and other technical and non-technical staff. Equal participation of patients who are recipients of service is also important

if one wants to make the delivery of healthcare facilities complete.<sup>1</sup>

A patient, coming to a healthcare facility comes with great expectations to get cured of suffering and to get that in the best possible way. To fulfil these expectations, the health staff needs to work as a team at all levels. The doctor here acts as a leader of this health team where he/ she not only manages and performs his/ her duties but also works to manage the rest of the staff in the team in order to fulfil the expectation of the beneficiary coming to the health facility.

It is mostly easier and as important to evaluate the satisfaction level among patients towards healthcare services as evaluation of the quality of the medical services and other facilities themselves. Though many industries have been reliant on feedback provided by consumers and their satisfaction to guide their path forward for a long time, healthcare has been lagging in this regard, i.e., the involvement of its consumers - the patients, in this case, have been left out. Patient satisfaction can be an important marker of the quality of services being provided and it has an important effect on their compliance with treatment and follow-up.<sup>2,3</sup>

At various healthcare facilities, it's been seen that different measures are used to assess the services delivered by the facility. These measures are mostly quantitative measuring patient load, bed occupancy, bed utilisation, recovery rate, and mortality rate among others. Rarely do we come across any measure which uses the perception of patients, who are beneficiaries here, to measure the services. Ways in which different services can be measured not only quantitatively but also regarding the quality of service being given are highly needed. Also, there should be feedback from all stakeholders involved in this process.

Studies have shown that healthcare utilisation is affected by the patient's perception of the quality of services being provided.<sup>4</sup> While the measure of a patient's satisfaction gives an insight into how much service standards have been met, perception of quality delves into specific aspects of service quality. Patient satisfaction is an important indicator of primary health care service delivery and performance.<sup>5</sup> For early identification of potential problems and continuous improvement in the delivery of services, it is essential to measure this as an outcome indicator.

To cater to such a large variety of clientele poses a great task for the management and treating doctors of any tertiary care hospital. This is the reason for having a measure of satisfaction with this varied clientele being served to effectively manage all the services and to provide the best possible care to all persons in need.

Conducting a survey for patient satisfaction also demonstrates the care and intent of the healthcare provider

towards the patients and increases trust and loyalty in the providers.<sup>6</sup> Though patient satisfaction is as important as patient care in any hospital, not many studies have explored the idea and factors associated with it. Hence a study was planned to analyse the satisfaction among patients availing of outpatient services at a tertiary care hospital in Delhi and to study the factors associated with patient satisfaction.

## Materials and Method

The study was conducted at the outpatient department of a tertiary care hospital in Delhi. It was a cross-sectional study conducted over a period of 02 months from Jun-Jul 2021. Among patients visiting the outpatient department, those above 18 years of age and the caretakers of those below 18 years attending OPD were included in the study. Severely ill patients requiring admission and patients requiring referral to the higher centre were excluded from the study.

Being a cross-sectional study, the sample size was calculated using the formula,  $N = 4PQ/L^2$ , taking P as the prevalence of satisfaction among patients availing OPD services, which was taken as 84% from the study conducted by Verma M et al.<sup>7</sup> Allowable error was taken as 5% of absolute error. The sample size was calculated to be 215. A final sample size of 240 was taken after considering the non-response rate.

Approximately 3000 patients visit the OPD of the hospital every day and 40-50 patients are attended by each medical officer in the OPD. Randomly an OPD room was selected daily and 05 patients visiting that consultation room were considered for the study. Considering systematic random sampling, data were collected from each 10th patient.

A predesigned, semi-structured bilingual questionnaire having two parts was used for data collection. One part had socio-demographic information about the study participants and the second part had the North India Outpatient Department Satisfaction Scale. The mode of data collection was the interview technique.

Permission to conduct the study was obtained from the head of the hospital prior to the start of the study. Each participant was informed in detail about the objective of the study and details of the questionnaire were also explained to them. Consent was obtained from each participant of the study.

The data collected were exported to a Microsoft Office Excel spreadsheet and analysis was done using SPSS version 21. Descriptive analysis was done using mean and SD deviation of various variables and tests like t-test and chi-square test were used for the analysis of quantitative and qualitative variables respectively.

## Result

The study was conducted at a tertiary care hospital in Delhi among 240 patients or their caregivers visiting the outpatient department of the hospital.

### Sociodemographic Profile

The majority of study participants were females (58.8%) while 41.2% were male. The mean age of the study participants was found to be 43 ± 14.23 years. More than one-third (36.1%) of them belonged to the age group of 31-45 years followed by a similar number (32.8%) of them belonging to the age group of 46-60 years. The majority of study participants (51.6%) were graduate and above and many study participants (81.5%) belonged to nuclear families. An equal number of study participants (45.8% each) had either 03 to 04 members or more than 04 members in their families and only 8.4% of them had only 02 members in their families.

### Health Facility Visit

Majority (57.1%) of the study participants were visiting the health facility for the first time while 42.9% of them were coming for their follow-up visit. Many of them (89.9%) were prescribed medicine on their current visit while 10.1% of them did not get any prescription for medicines. More than one-third (39.1%) of the participants were advised tests for their ailments while a majority of them (60.9%) were not prescribed any test. Among those who were prescribed tests, 88.2% stated that their investigations were done on the same day. The majority (61.8%) of study participants were asked to come for follow-up by the healthcare practitioner at the facility while 38.2% of them were not given any such advice. Almost three-fourths (71.6%) of them told that they were prescribed tests previously and 28.4% negated the same. Among those who were prescribed tests

on their previous visits, 84.9% got the tests conducted while 12.3% of them did not get the tests done. Rest chose not to give the status of the tests on their previous visit.

All study participants were assessed for their satisfaction with various facilities available at the hospital using the NIODSS scale, a 17-point scale assessing the satisfaction level of patients and/ or caregivers visiting the hospital. The majority of study participants were found to be satisfied with “all but one parameter” of the scale for the facilities available at the hospital. Only for the condition of toilets, 49.6% of the study participants were found to be satisfied. Almost all of them were found to be satisfied with the parameters like access to the healthcare facility, location of the facility, if the doctor gave adequate time, if the doctor listened carefully, and the friendly nature of the doctor (97.5%, 98.75%, 96.6%, 96.2%, and 97% respectively). Most of the study participants were satisfied with less waiting time for seeing a doctor, sitting space in the waiting area, facilities of lights and fans in the waiting area, availability of medicines at the pharmacy, explanation of dosage by the pharmacist, time taken by the pharmacist to dispense medicines, and overall cleanliness of the hospital (85.7%, 82.4%, 87.4%, 88.7%, 88.2%, 81.5%, and 81.5% respectively). More than three-fourths of the study participants were satisfied with the status of queues at the reception and the provision of a separate queue for females and senior citizens (79.8% and 78.1% respectively). A little more than two-thirds (69.3%) of them were satisfied with the availability of drinking water at the OPD of the hospital (Table 1).

**Table 1. Distribution of Study Participants according to Results of NIODSS**

S. No.	Variable	Median Score	Satisfaction Level	
			Satisfied n (%)	Not satisfied n (%)
1.	Hospital access	1.00	232 (97.5)	06 (2.5)
2.	Hospital at a convenient location	1.00	235 (98.75)	03 (1.25)
3.	Queue at reception	2.00	190 (79.8)	48 (20.2)
4.	Separate queue for ladies/ old age	2.00	186 (78.1)	52 (21.9)
5.	Less wait for doctor	2.00	204 (85.7)	34 (14.3)
6.	Sitting space waiting area	2.00	196 (82.4)	42 (17.6)
7.	Fans & light in waiting area	1.00	208 (87.4)	30 (12.6)
8.	Adequate time given by doctor	1.00	230 (96.6)	08 (3.4)
9.	Friendly nature of doctor	1.00	231 (97.0)	07 (3.0)
10.	Dosage advised by doctor	1.00	223 (93.7)	15 (6.3)
11.	Careful listening by doctor	1.00	229 (96.2)	09 (3.8)
12.	Availability of medicine at pharmacy	2.00	211 (88.7)	27 (11.3)
13.	Dosage explained by pharmacist	2.00	210 (88.2)	28 (11.8)
14.	Time taken by pharmacist	2.00	194 (81.5)	44 (18.5)
15.	Availability of drinking water	2.00	165 (69.3)	73 (30.7)
16.	Cleanliness of toilet (n = 237)	3.00	118 (49.6)	119 (50.0)
17.	Overall cleanliness of hospital	1.00	194 (81.5)	44 (18.5)

**Table 2. Distribution of Study Participants according to Factors associated with Overall Satisfaction with Attending Doctor (N = 238)**

S. No.	Factor		Overall Satisfaction with Attending Doctor		P Value
			Satisfied n (%)	Not satisfied n (%)	
1.	Gender	Male	72 (73.5)	26 (26.5)	0.603
		Female	107 (76.4)	33 (23.6)	
2.	New or follow-up case	New	102 (75.0)	34 (25.0)	0.931
		Follow-up	77 (75.5)	25 (24.5)	
3.	Was prescribed medicine on this visit	Yes	159 (74.3)	55 (25.7)	0.331
		No	20 (83.3)	04 (16.7)	
4.	Was advised tests on this visit	Yes	70 (75.3)	23 (24.7)	0.987
		No	109 (75.2)	36 (24.8)	
5.	Was asked for follow-up during this visit	Yes	104 (70.7)	43 (29.3)	< 0.05
		No	75 (82.4)	16 (17.6)	

**Table 3. Distribution of Study Participants according to Factors associated with Overall Satisfaction with Amenities at the Healthcare Facility (N = 238)**

S. No.	Factor		Overall Satisfaction with Amenities at the Healthcare Facility		P Value
			Satisfied n (%)	Not satisfied n (%)	
1.	Gender	Male	35 (35.7)	63 (64.3)	0.097
		Female	36 (25.7)	104 (74.3)	
2.	New or follow-up case	New	40 (29.4)	96 (70.6)	0.870
		Follow-up	31 (30.4)	71 (69.6)	
3.	Was prescribed medicine on this visit	Yes	62 (29.0)	152 (71.0)	0.387
		No	09 (37.5)	15 (62.5)	
4.	Was advised tests on this visit	Yes	26 (28.0)	67 (72.0)	0.613
		No	45 (31.0)	100 (69.0)	
5.	Was asked for follow-up during this visit	Yes	40 (27.2)	107 (72.8)	0.261
		No	31 (34.1)	60 (65.9)	

### Overall Satisfaction and Associated Factors

Overall satisfaction of the study participants was assessed for their response to variables related to the doctor attending them and various amenities available for patients at the healthcare facility. Various associated factors were explored with these variables of satisfaction.

Gender, being a new case, getting medicines prescribed on the current visit and not being advised tests on the current visit were found to be non-significantly associated with being overall satisfied with the attending doctor. Asking patients for follow-up was found to be significantly associated with their being overall satisfied with the attending doctor ( $p < 0.05$ ) (Table 2).

Gender, being a new case, being prescribed medicine on the current visit, not being prescribed test on the current

visit, and being asked for follow-up were found to be non-significantly associated with overall satisfaction with amenities at a healthcare facility (Table 3).

### Discussion

Patient satisfaction is an important aspect of healthcare. The range of clientele visiting a tertiary care hospital makes it furthermore important to quantify the satisfaction level with the facilities being availed.

In the present study, the majority of study participants were females (58.8%) and 41.2% of them were male. Similar results were reported by Munir AK and Halim AK<sup>8</sup> but the results differed from the study by Rao MV et al.<sup>9</sup> where study participants were predominantly male. The mean age of the study participants was found to be  $43 \pm 14.23$  years. More than one-third (36.1%) of them belonged

to 31-45 years of age. Similar results were reported by Mohd A and Chakravarty A<sup>10</sup> in their study. This refers to the profile of clientele generally visiting any tertiary care hospital. Almost half of the study participants (51.6%) were graduate and above and a large number (81.5%) of them were from nuclear families. These findings differed from those obtained in a study by George J et al.<sup>11</sup> where many participants were educated up to a secondary level.

Being a quantitative subjective measure, it is not always easy to assess the satisfaction level of clientele with the available services. Many services directly or indirectly related to patient care may be used to look for the level of satisfaction amongst the patients visiting the healthcare facility. In the present study also, many parameters were involved to get an idea of the satisfaction level of patients. Overall, the majority of the study participants were found to be satisfied with all parameters of the scale for the facilities available at the hospital, except for the cleanliness of toilets. Similar results were given by Garg N et al.<sup>12</sup> in their study but differed from that of the study by George J et al.<sup>11</sup> where the majority were satisfied with all parameters.

Almost all study participants of the present study were found to be satisfied with the accessibility of the healthcare facility, how the treating doctor dealt with them, waiting time to see a doctor, facilities available in the OPD waiting area, medicine availability and behaviour of pharmacist. They were also found to be satisfied with the facilities at reception. These results differed from the study by Mohd A and Chakravarty A,<sup>10</sup> where patients were not satisfied with the facilities available in the waiting area and at the reception, but they were satisfied with the behaviour of the doctor, pharmacist, and availability of medicines. Such results depict the courteousness and professionalism of healthcare workers across tertiary care hospitals and point out the need to investigate infrastructural aspects in healthcare facilities.

Patients who were asked for follow-up were significantly associated with being overall satisfied with the attending doctor ( $p < 0.05$ ), showing the importance of follow-up calls for better management of patients.

The present study tries to explore different aspects related to patient satisfaction and a few factors which need to specifically be addressed for better management and satisfaction of clientele visiting any tertiary care hospital.

## Conclusion

A patient visiting any healthcare facility, specifically an outpatient department, primarily seeks a cure for his/her ailment in a way that is least troubling. Providing facilities that guide patients through all stations of healthcare and help them smoothly sail through the experience of visiting

a healthcare facility to achieve better health should be of paramount importance for every healthcare worker.

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