# **Scholars Journal of Applied Medical Sciences (SJAMS)**

Sch. J. App. Med. Sci., 2014; 2(5D):1746-1750

©Scholars Academic and Scientific Publisher

(An International Publisher for Academic and Scientific Resources) www.saspublishers.com **DOI:** 10.36347/sjams.2014.v02i05.051

ISSN 2320-6691 (Online) ISSN 2347-954X (Print)

# Research Article

# An Assessment of Patients Satisfaction with Services Obtained From a Primary Urban Health Centre, Bareilly (UP)

Jai Prakash Singh<sup>1</sup>\*, Peeyush Kariwal<sup>2</sup>, Dharmendra Kumar Singh<sup>3</sup>

<sup>1,3</sup>Assistant Professor, <sup>2</sup>Associate Professor, Dept. of community medicine, SRMS IMS, Bareilly (UP), India

# \*Corresponding author

Dr. JP Singh

Email: jpaliw al0001@g mail.com

**Abstract:** Patient satisfaction is a key determinant of quality of care. It is also a parameter for assessing the quality of patient care services. Aims & objective of the study was to know bio-social characteristics and to measure the satisfaction level of patients attending the OPD at Urban Health Training Centre (UHTC) attached to Department of Community Medicine, SRMS Institute of Medical Sciences, Bareilly. It was a cross sectional study carried out among patients who attended the OPD at UHTC from February 2014 to April 2014. Study subjects were selected by a systematic random sampling method and interviewed using a pre-tested & semi-structured interview schedule. Data entry and analysis were done using the Epi- info statistical software. A total of 292 OPD patients were included in the study. Majority of them were satisfied with the facilities & services available at health centre. Patients were more satisfied with behavior of Class III & Class IV workers (89.7 %) as compared to the behavior of doctors (78.4%). It was found to be statistically highly significant (p<0.001). Statistically significant relation was also seen between gender and satisfaction level with doctor's behavior. In conclusion, the health care delivered at this centre can be improved by monitoring the delivery of quality care on an ongoing basis and continually making small changes so as to improve the individual processes. **Keywords:** OPD patients, Patient satisfaction, Behavior of doctors & class III & IV workers

## INTRODUCTION

Health care scenario is fast changing all over the world [1]. Patient satisfaction is one of the established parameter to measure success of the services that is provided in the hospitals [2]. There are high expectations and demands from consumers because of improved socioeconomic status and easy accessibility to medical care [3]. Successful monitoring of customer's perception has become a simple but important strategy [4, 5].

A patient who is in distress is the ultimate consumer of the hospital, expecting comfort, care and cure from hospital. Patients have certain expectations prior to visit. A patient may become either satisfied or dissatisfied after coming to the hospital and experiencing the facilities [6]. Human satisfaction is a complex concept that is related to a number of factors including lifestyle, past experiences, future expectations and the value of both individual and society [1].

Keeping this background in mind the present study was undertaken in Out Patient Department of an urban health centre to assess the quality of care provided in terms of patient's satisfaction with the following objectives:

- To know the bio social characteristics of patients attending Out Patient Department (OPD) of urban health centre, Rampur Garden, Bareilly.
- To find out the satisfaction level of patients attending OPD

## MATERIALS AND METHODS

An observational cross sectional study was performed at Urban Health Training Centre (UHTC), Rampur Garden, which was the field practice area of Department of Community Medicine, SRMS Institute of Medical Sciences, Bareilly (UP). Taking the prevalence of patient satisfaction to be 60% with 6% absolute error and 10% non-response, the sample size came to be 292. Among the patients attending UHTC from February to April, 2014, every third patient who met the inclusion criteria was interviewed till the sample size was met.

Data was collected by systematic consecutive sampling technique. A patient attending the OPD and having age above 18 years was included in the study. Informed verbal consent was taken from each patient and they were ensured about the confidentiality.

A predesigned and pretested schedule was used for data collection. Some statements regarding services of

physical facilities, behavior of doctor and class III & IV workers were enquired from the patients. They were asked to give ratings to these statements. Likert's 5 points rating scale was used. The rating was done as following-5= Excellent, 4= Good, 3= Average, 2=Poor, 1= Very poor.

Data was tabulated in Microsoft Excel 2010 spread sheet & analyzed by appropriate statistical methods in SPSS 16 software. Discrete data was analyzed using Pearson's Chi-square test for normal distribution, values<0.05 were considered significant.

#### **Inclusion criteria**

A "new" or "referred" patients of age more than 18 years, attending the OPD of the respective health care facility.

## **Exclusion criteria**

Patient working in the health care facility and patients with serious physical or mental pathologies and psychosis, and follow-up patients attending the OPD of the respective health care facility were excluded from the study.

## Definition of Outdoor Patients (OPD)

In this study, OPD is defined as the urban centre where patients received diagnosis and treatment services but did not stay overnight.

#### **RESULTS**

A total of 292 respondents attending the outdoor departments were included in the study. Majority of the study population comprised of females (60.6%), 40-60 years old (44.9%), un-employed (35.6%), illiterate (30.5%), lower socioeconomic status (51.7%) and joint type of family (61.3%) (Table 1).

Table 2 shows that patients were more satisfied with behavior of Class III & Class IV workers (89.7 %) as compared to the behavior of doctors (78.4%). It was found to be statistically highly significant (p<0.001). Better behavior & skills among Class III & Class IV workers may be the reason for present study finding.

Table 3 shows that most of the total patients (89.0%) were satisfied with cleanliness while only 43 (14.7%) were dissatisfied with overall health facilities.

Table 4 shows that major Source of information about UHTC OPD was through old patients, friends/relatives and hospital staffs (35.6%, 28.4% & 21.2% respectively) and major mode of transport from home to health centre through auto rickshaw (45.2%). Majority of subjects told that, it is a type / Kind of trust health centre (75.3%). Most of the patients (78.4%) told that waiting period less than 30 minutes b/w arrival at OPD and attended by doctor was 229 (78.4%) and major source of medicine at UHTC was free medicine 207 (70.9%).

Table 1: Bio-social characteristics of the study subjects (n=292)

Sl. No.	В	io-social characters	Total	Percentage
		Less than 20 yrs	26	8.9
1	Age	20-40 yrs	101	34.6
1		40-60 yrs	131	44.9
		More than 60 yrs	34	11.6
2	Corr	Male	115	39.4
2	Sex	Female	177	60.6
		Professional	12	4.1
		Semi-professional	14	4.8
		Clerk/farmer/shop owner	34	11.6
3	Occupation	Skilled	18	6.2
		Semi-skilled	36	12.3
		Un-skilled	74	25.3
		Un-employed	104	35.6
	Education	Post graduate	11	3.8
		Graduate	24	8.2
		Intermediate	31	10.6
4		High school	27	9.2
		Junior High school	40	13.7
		Primary school	70	24.0
		Illiterate	89	30.5
	Ses	Upper	8	2.7
		Upper Middle	18	6.2
5		Lower Middle	38	13.0
		Upper Lower	77	26.4
		Lower	151	51.7
	Type of Family	Nuclear family	85	29.1
6		Joint family	179	61.3
		3 Generation family	28	9.6

Table 2: Satisfaction of the patients regarding behavior of hospital staff (n=292)

	•	Patient over all rating					
Behavior of hospital staffs	Satisfied				Dissatisfied		
behavior of nospital statis	Excellent	Good	Average	Total (%)	Poor	Very poor	Total (%)
Doctors	112	80	37	229(78.4%)	49	14	63(21.6%)
Class III & IV staffs	168	72	22	262(89.7%)	24	6	30(10.3%)

 $x^2 = 13.93$  p= 0.0001

Table 3: Satisfaction of the patient regarding health facilities & cleanliness in the hospital (n=292)

			Pa	tient over all r	ating						
A speet of eare		Sa	atisfied		Dissatisfied						
Aspect of care	Excellent	Good	Average	Total (%)	Poor	Very poor	Total (%)				
Overall health facilities	160	54	35	249(85.3%)	39	4	43(14.7%)				
Cleanliness at urban health centre	146	98	16	260(89.0%)	26	6	32(11.0%)				

Table 4: Reasons for selecting the facility

14	Responses		
Reasons For Availing The Services			Percentage
	Media(News paper/Radio/TV)	32	10.9
	Hospital staff	62	21.2
Source of information about UHTC OPD	Friends/Relatives	83	28.4
	Old patients	104	35.6
	Others	11	3.8
	Government	29	9.9
T / W: d - f b 14b	Private	39	13.3
Type / Kind of health centre	Charitable	4	1.4
	Trust	220	75.3
	Own vehicle	53	18.1
Mada af turn on at form have to be alth	Auto rickshaw	132	45.2
Mode of transport from home to health	Hospital bus	5	1.7
centre	Govt. roadways bus	3	1.0
	Others	99	33.9
	Less than ½ hour	229	78.4
Waiting period b/w arrival at OPD and	½ - 1 hour	41	14.0
attended by doctor	1 -2 hour	20	6.8
	More than 2 hour	2	0.7
	Free medicine in UHTC	207	70.9
	Paid medicine in UHTC	11	3.8
Source of medicine	Outside from UHTC	14	4.8
Source of medicine	Free + paid medicine at UHTC	8	2.7
	Free medicine at UHTC + other medicines	52	17.8
	from outside		

Table 5: Satisfaction of patients regarding quality of services availability at the urban health training centre

	Responses		
Quality of Services	Number (n=292)	Percentage	
Satisfaction with availability of drinking water	Yes	259	88.7
Satisfaction with availability of drinking water	No	33	11.3
Satisfaction with cost of treatment	Yes	282	96.6
Satisfaction with cost of treatment	No	10	3.4
C-4:-f4:	Yes	229	78.4
Satisfaction with given treatment	No	63	21.6
Would you like to visit health centre again	Yes	239	81.8
would you like to visit health centre again	No	53	18.2
Would very motivate to very friends/moletives to visit this health centre	Yes	232	79.5
Would you motivate to your friends/relatives to visit this health centre	No	60	20.5
Are you every shout any honeficial scheme of CDMC IMC	Yes	225	77.1
Are you aware about any beneficial scheme of SRMS IMS	No	67	22.9
Are you ever heard about Janhit Chikitsa Yojna / Samudayik Swasthya	Yes	203	69.5
Yojna / AHSAS programme of SRMS IMS	No	89	30.5

259 (88.7%) patients were satisfied with availability of drinking water in the health centre. The availability of RO purified water and study was carried out during autumn season, may be the reason for better availability of water. Most of the patients were satisfied with cost (96.6%) & given treatment (78.4%), may be due to free medicine distribution and better cure rate at UHTC.

More than 34 patients were agree with visit to health centre again, motivation to their friends/relatives to visit this health centre and aware about beneficial schemes of SRMS IMS, while nearly 70.0% patients were agree with ever heard about Janhit Chikitsa Yojna / Samudayik Swasthya Yojna / AHSAS programme of SRMS IMS (Table 5).

#### DISCUSSION

Quality care is one of the central dimensions of public health. Good quality care needs to be delivered at the earliest and at the proper time which is a basic right of consumers. In recent years it has become clear that quality care can be measured easily. Quality care can be divided by measurement into Structure, Process and Outcome. Structure refers to basic infrastructure and the overall facility and Process means the way the care is delivered and Outcome points to final result. Health care must guarantee quality care along with safety which is pivotal to quality care [7-10]. In this particular study, the most of the patients interviewed were satisfied with the services at this UHTC, Bareilly, India. This is consistent with many studies done elsewhere [11-14].

In this study, patients were more satisfied with behavior of class III &IV staffs (87.8%), while Arpita Bhattacharya *et al.* [4] reported 98.2% patients were satisfied with behavior of doctors which is contrast with the present study.

In present study, 89.0% patients said that they were satisfied with cleanliness of health centre. In a similar study by Anjum Javed *et al.* [15] 90.5% patients were satisfied with cleanliness of hospital. In another study done by Sodani *et al.* [16] also found 65% satisfied patients with respect to cleanliness. The better cleanliness could be due to sufficient & trained class III& class IV employee.

Overall level of patient's satisfaction regarding health centre services was found to be satisfactory (85.3%). In a study conducted in Srinagar Waseem Qureshi *et al.* [17] reported only 6.7% patients were poorly satisfied with hospital services which was just half to our finding (14.7%).

The education level of the respondents was very poor as most of them were either illiterate (30.5%) or primary passed (24.0%). A study done by Sodani *et al.* [16] showed that 39% of respondents were illiterate or

primary passed (18%), which is comparable with our findings.

About 229(78.4%) patients had to wait less than ½ and hour for consulting doctors, while Ranjeeta Kumari et al. [18] found 22.55% patient waited less than ½ an hour. Another study conducted by Prasanna KS et al. [19] showed that 20% patient waited less than 30 minutes. Present study showed that majority of the patients were waited less than ½ hours, this could be due to better time management of working at the health centre.

A large majority of respondents 259(88.7%) felt that the drinking water facility available at UHTC for patients was better, which is more close finding (92.8%) of Rasheed N *et al.* [20]. This may be due to availability of reverse osmosis water purifier system facility at UHTC.

#### **CONCLUSION**

Assessing satisfaction of patients is simple and cost effective way for evaluation of health centre services. The findings of the present study carried out for assessing satisfaction of outdoor patients attended in UHTC reveals that patients were more satisfied with class III & class IV workers than behavior of doctors, and it was found statistically significant. Most of the patients were satisfied regarding cleanliness 260 (89.0%) in the OPD area and health centre campus. More than 3/4th subjects during the study period were satisfied with facilities & services available at the centre. Majority of the females 146 (63.8%) were satisfied and males 32 (50.8%) were dissatisfied with the behavior of doctors and this difference was found significant (p<0.05).

## REFERENCES

- 1. Verma A, Sarma RK; Evaluation of the exit proformas in use at special wards of public sector tertiary care center. Journal of Academy of Hospital Administration, 2000; 12(1): 2000-01 2000-06.
- Sreenivas T, Prasad G; Patient satisfaction—A comparative study. Journal of Academy of Hospital Administration, 2003; 15(2): (2003-07 2003-12).
- 3. Kumar R; Medical documentation-Patient satisfaction document. Journal of Academy of Hospital Administration, 2003; 15(1): (2003-01-2003-06)
- Bhattacharya A, Menon P, Koushal, Rao KLN; Study of patient satisfaction in a Tertiary referral hospital. Journal of Academy of Hospital Administration, 2003; 15(1): (2003-01-2003-06)
- Brijender S, Sarma RK, Sharma DK, Singh V, Sanjay D; Assessment of hospital services by consumers: A study from NDDTC, AIIMS, Ghaziabad. Medico Legal Update, 2005; 5(1): (2005-01 -2005-03).

- 6. Kulkarni MV, Dasgupta S, Deoke AR, Nayse; Study of satisfaction of patients admitted in a tertiary care hospital in Nagpur. National Journal of Community Medicine, 2011; 2(1): 37-39.
- Brennan TA; Incidence of adverse events and negligence in hospitalized patients. Results from the Harvad Medical Practice Society. N Engl J Med., 1991; 324: 370-376.
- 8. Sitzia J, Wood N; Patient satisfaction: a review of issues and concepts. Social Sciences and Medicine 1997; 45(12): 1829-1843.
- Bates DW; The safety and quality care. Harrison's principles of Internal Medicine. 17<sup>th</sup> edition, Volume 1, Fauci Braunwald, Kasper, Hauser, Longo, 2008
- 10. Aldana JM, Piechulk H, Al Sabir A; Client satisfaction & quality of health care in rural Bangladesh. Bulletin of the World Health Organization, 2001; 79(6): 512-517.
- 11. Sharma PK, Ahmad SI, Bhatia M; Health care services in Punjab: findings of a pt satisfaction survey. Social Change, 2008; 138(3): 458-477.
- 12. Afridi MI; Consumers satisfaction towards health care services, provided by the health centers at Salaya subdistrict Nashon Palthpm Province. Thesis paper for Master of Primary Care Managenment.
- 13. Rao KD, Peters DH, Rocche KB; Towards patient-centered health services in India- a scale to measure patient perceptions of quality. International Journal for Quality in Health Care, 2006; 18(6): 414-421.

- 14. Muhondwa EPY, Leshabari MT, Mangwangu M, Mbembati N, Ezekiel MJ; Patient satisfaction at the Muhimbili National hospital in Dares Eslam, Tanzania. East African Journal of Public Health, 2008; 5(2): 67-73.
- Javed A; Patient satisfaction towards outpatient department services in Pakistan institute of Medical sciences, Islamabad. Master of Primary Health Care Management Thesis: Mahidol University, 2005.
- Sodani PR, Kumar R, Srivastava J, Sharma L; Measuring patient satisfaction: A case study to improve quality of care at public health facilities. Indian J Community Med., 2010; 35(1): 52-56.
- 17. Qureshi W, Khan N, Naik A; A case study on patient satisfaction in SMHS hospital, Srinagar. JK Practitioner, 2005; 12(3): 154-155.
- Kumari R, Idris MZ, Bhushan V, Khanna A, Agarwal M, Singh SK; Study on patient satisfaction in the government allopathic health facilities of Lucknow District, India. Indian J Community Med., 2009; 34(1): 35-42.
- Prasanna KS, Bashith MA, Sucharitha S;
  Consumer satisfaction about hospital services: A study from the outpatient department of a private medical college hospital at Manglore. Indian J Community Med., 2009; 34(2): 156-159.
- Rasheed N, Arya S, Acharya A, Khandekar J; Client satisfaction and perceptions about quality of health care at primary health centre of Delhi, India. Indian Journal of Community Health, 2012; 24(3): 237-242.