

Patient Waiting Time: It's Impact on Hospital Outpatient Department



Management

KEYWORDS: Out Patient Department, Time Interval, Sequential Movements.

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ABSTRACT

The Out Patient Department is critical process for any hospital. Short waiting times and a positive experience represent important drivers of patient satisfaction. Meanwhile, inefficient processes can result in lost revenues and poor community image, not to mention concern over patient safety. Since Out Patient Department (OPD) is frequently a patient's first experience with the hospital, improving the efficiencies is paramount to both customer satisfaction and hospital's bottom line. This study helps to know the unnecessary and delayed movements in the department so as that with this knowledge the management will be able to take adequate measures to improve the functioning of the department. The Research approach adopted in this study is Descriptive Study which helps to determine various sequential movements and time taken for each movement in the OPD through checklist. Outpatient department helps to identify and eliminate unnecessary movements and benchmark the time and thus to provide efficient and effective patient care in OPD.

Introduction:

Out Patient Department Services are one of the important aspect of Hospital Administration. OPD is the mirror of the hospital, which reflects the functioning of the hospital being the first point of contact between the patient and the hospital staff. OPD is visited by large section of community, the human relation skill/ Public relation functions are of utmost importance. OPD staff should be polite, cheerful, cooperative & efficient.

Patients visit the OPD for various purposes, like consultation, day care treatment; investigation, referral, admission and post discharge follow up not only for treatment but also for preventing and promoting services, the first impression of the hospital is formed from OPD and this is the area frequently visited by a majority of patients.

The OPD should be located on the ground floor, preferably with the separate entrance. The diagnostic services should be easily approachable from here. Reception, waiting area, Doctors chamber, examination room, minor O.T. and medical examination room should be easily accessible. systematic examination of methods of carrying on activities so as to improve the effective use of manpower and equipment and to set up standards of performance for the activities being performed and also the systematic recording and critical examination of the ways of doing things to make improvements one have to establish time standards for carrying out specified jobs and estimates how long a job should take and the manpower and equipment requirements for a given method.

It is believed that patient satisfaction can be enhanced and subsequent health behavior improved, if providers create an environment that dialogue between the health professional and the patient that enables them to identify the most important and relevant information to transmit to patients and families. It can be hypothesized that understanding and meeting patients need to know through communicating important information desired by the patient can produce more knowledgeable and competent patients who are in a better position to assist their own recovery from illness and manage their own health. While these factors may vary by diagnostic conditions and patient characteristics there is growing evidence that the impact of information may be helpful.

The advantages of study in hospital OPD are to improve the methods / procedures of various jobs .Out Patient Department should improve both Clinical and non-clinical facilities such as overall OPD layout that can decrease the overcrowding and delay in consultation, In hospitals this can also include reducing the efforts patients need for treatment as well as for their routine hospital checkup.

Research Methodology:

Research Approach:

The Research approach adopted in this study is Descriptive Method. This includes collection of data using observational checklist from patients visiting Out Patient department.

Collection of Data:

Primary Data: Observation method, Interview method.

Secondary Data: Internet, Articles, Hospital record, other sources.

Sample Size: and Sampling Technique: A sample of size 45 patients was included for the study.

Inclusion and Exclusion Criteria:

Data was collected from the Out- Patient Department during day shift (8.30 am – 5.30 pm). Data was mainly collected from the Patients who visited the Hospital OPD or Admitted in the ward through the OPD

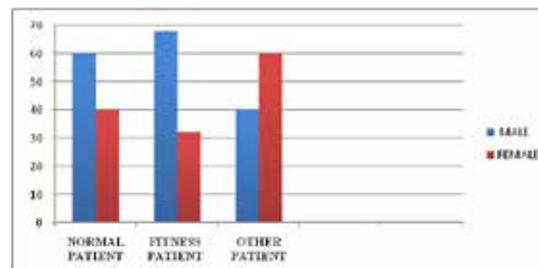
Method of Data Analysis:

Collected data was analyzed by frequencies, percentages, mean and standard deviation. The data was presented graphically as well as in tables.

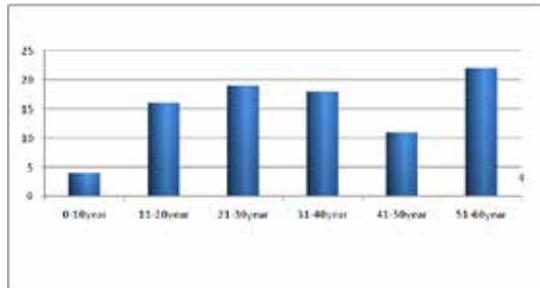
Result:

A Study on Reduced Waiting Time in the out Patient Department in a Selected Hospital, was under taken with the main objectives to determine the flow of patient and the average time spent in the OPD, to identify the factors those are responsible for high waiting time and to recommend appropriate suggestions to optimize the waiting time in OPD. Analysis of data was done through tables and graphs showing the Number of respondents and their respective percentage and percentage bar diagrams were used for the interpretation of the results.

DISTRIBUTION ACCORDING TO GENDER OF THE PATIENTS



The analysis shows that number of male patients was 64% and female patients were 36%, other patients are Children. The gender ratio was found to be more in male than female.

DISTRIBUTION ACCORDING TO AGE OF PATIENT

The analysis shows that 4% patient were of the age grouping 0-10year, 16%were the age group 21-30year,19%were the age group 31-40year, 18%were the age group in 41-50, 11%were the age group 51-60 and 22%were the age group of 60 year above.

Time Taken Between the Arrival of the Patient and Completion of Evaluation

	TIMETAKEN BETWEEN THE ARRIVAL OF THE PATIENT AND COMPLETION OF EVALUATION	MEAN MINUTES	STANDARD DEVIATION MINUTES
1	Time taken between patient arrival and registration and first contact with the nursing staff.	12.32	11.32
2	Time taken between the patients to physician.	13.35	10.35
3	Time taken by medical shop	15.20	13.05

1. Time Taken between Patient arrival and Registration:

Patient enters the hospital Fill the consent form: (name, age, address, mobile no. etc.) Receptionist makes a Patient file. (Patient Profile) Then gives Registration no. and Manual Registration no. to patient then file will be sent to the Concerned Nurse, nurse takes the Vital of Patient and prepares file, average time in this process 11 to 12 minutes.

2. Time taken between the patients to physician.

File comes to Physician system, computer/ manual. Then doctor read the patient summary checks/examines the patient, fills the data in patient file. This process average time is 14 minutes. Then file is sent to medical pharmacy.

The result shows that average no. of patients coming to OPD each day, the study shows that the waiting time spent by the patients in reception for registration is much less in case of maximum no. of patients compared to lesser no. of patients whose waiting time exceeded more than 30min. This represents the efficiency of the registration process in the OPD. Study depicts that the average waiting time spent in OPD for consultation is around 14 min which states that OPD of the hospital functions satisfactorily. The study shows that maximum no. of patients are satisfied with the punctuality of the staff in attending to their needs.

Discussion:

To maintain the quality and brand image the hospital is required

to streaming some of its process and standardized services. Today's Hospitals have been developed as one of the best health care Service providers especially in OPD the health care centers provide excellent modern facilities and has enormous potential to grow. In this study, a health care service quality measure was taken the functional relationships between the four service quality dimensions and patient satisfactions were tested in the subsequent stage.

A key finding of the analyses relates to the stability of the structural relationships between service quality dimensions and patient satisfaction. Patient satisfaction was largely determined not only by physician's concern and but also by non-physician care providers' concern and convenience, in past patients want to maintain respect and faith in their physician. But as the level of interaction increased with their physicians, patients gained more information and became more critical about the professional practices.

A similar tendency has been found in studies on how consumers evaluate the quality of products less waiting time before being examined by physician. Consumers evaluate products based on intrinsic and extrinsic dimensions. Intrinsic dimensions include tangible and core attributes directly related to quality, while extrinsic dimensions are image variables such as price, brand name etc. It has been found that as consumers become more educated and experienced, they tend to engage in comprehensive processing of all available dimensions, consumers are more likely to rely on extrinsic attributes for the product evaluation study indicated that auxiliary service quality dimensions such as "non-physicians care" and "convenience" were important for satisfaction Patients satisfaction influences patient retention rate and effectiveness of medical care.

Medical personnel need to be educated on how to make various aspects of care delivery convenient for patients and on the importance of the care process that exhibits staff concern and empathy for patient well being, particularly new patients. Nonetheless, the ultimate goal for patients is to restore or maintain their health. In many cases, patients may be able to judge how much they are helped by their physician to relieve pain and reduce functional limitations. Management must provide the facilities in OPD to avoid long waiting time; staffs should be increased in the depts. with large no. of patients. Registration counters should be increased because during the peak hours it may cause some discomfort for the patients which may result in the negative image of the hospital in the mind of the patients. Waiting area should be more spacious. Hospital should give separate outpatient feedback form, Hospital Pharmacy should be improved or separated for OPD Patients. Parking of vehicles should be free of cost for the patients and their attendees.

Conclusion:

Patients attending each hospital are responsible for spreading the good image of the hospital and therefore satisfaction of patients attending the hospital is equally important for hospital management. Various studies about outpatient services have elicited problems like- overcrowding, delay in consultation, proper behavior of the staff etc. The study reveals the average time spent by the patients and also expresses their view towards the hospital and hospital's services in undergoing various procedures. The study throws light on the various services provided by the hospital and the total time consumed on each activity.

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