



## Patient Survey to Measure the Quality of Care Provided by Health care Providers in OPD of Tertiary Care Hospitals

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### ABSTRACT

*This study investigated a set of dimensions that contribute to effective hospital management and sequential hospital operations. The study established reliable and valid scales and dimensions that effect hospital effectiveness and identified the gap between the optimal and actual performance perceived by outpatient visit. The performance gap identified provides some idea about the areas to be brought under intensive interventions of administrative change.*

*The response of patients about their perception on quality of care in the hospital was collected by direct interview and the questionnaire method. The sample was selected by the random sampling method. It included 40 patients from OPD department with their proportionate representations to eliminate the biasness in the sample derived.*

*The outpatients have in general expressed their satisfaction as per as the conduct and the efficacy of the Professional as well as administrative interventions. The researchers finding is that the hospitals should focus on the systematic identification of the outpatient needs and to focus on the evaluation of the modifications imparted in the hospital departments.*

**Keywords:** Out Patient Department, outpatient visit, Patient satisfaction, quality of care

### INTRODUCTION:

The study will be carried out at different Hospitals of Jaipur, It is aimed mainly to get an insight into the working system of the various Out-Patient Department with Special Reference to Participation of Health Care Providers in Management of OPD in Tertiary care Private Public Hospitals. The level of staff, viz. junior or senior staff physicians, specialist or super specialist will also influence the range of services, viz preventive, diagnostic, therapeutic, follow-up, rehabilitative, scheduled and unscheduled.

Outpatient work is just as important and interesting as inpatient work. Many observers feel that the senior members of the medical staff should play a leading role in the OPD clinics which should not be left entirely to the junior clinicians. Clinics must be scheduled for regular hours, for a specific time and duration. A simple method to determine outpatient scheduling is the calculation of room hours needed to deal with the expected number of visits, or assume the expected number of visits to determine number of rooms and rooms hours, based on the "possible service time. Room hours mean the number of doctor's examination and consulting rooms available multiplied by the number of clinic hour's schedules. The OPD of a hospital is a bridge between hospital and community and is very important to plan the OPD with the idea of maximizing the utilisation and quick turnover, less waiting time for the patients as Queue Technique is one of the alternative. The concept of afternoon clinics and evening OPD for super specialities increases the efficiency of out-patient considerably.

The ward attendant, sweepers, peon and other staff should be in full uniform with name plate during duty hours. Doctor and Paramedical staff should also have aprons, mask, gloves for minor surgery. Patients complaint for a lack of co-operation between support line services and medical services. It is therefore imperative to have effective co- operation between the medical services and the support line services catering to the OPD requirements. The interpersonal skills of the medical personnel and availability of medicines have a large influence on patient satisfaction, Doctors behaviour followed by avail-

ability of medicine, hospital infrastructure, staff behaviour, medical information and hospital infrastructure play very important role in managing the Outpatient Department.

### METHODOLOGY

There are two types of data collection methods i.e., primary data collection method and secondary data collection method.

Both primary data and secondary data would be used for this study and primary data shall be collected from the respondents namely patients through interview schedule method using a questionnaire prepared on 3 point scale. Secondary data shall be collected from internet and various published sources.

Primary Data Source: a. Questionnaire

Secondary Data Source: a. Internet b. Published sources

For data collection, questionnaire for outpatient perception was prepared & distributed during the OPD hrs. That is from 9.00am to 1.00pm .A structural questionnaire in English was used. Interviews were conducted in the Hindi for the patients who were not able to read & answer the question.

SAMPLE TECHNIQUE: - Random Sampling.

TRAINING PERIOD : - July 2012.

SAMPLE SIZE : - 40 patients.

POPULATION : - OPD of Hospital in Jaipur

The questionnaire has two parts. Part one has personal background factors of the patient consisting of variables such as name, age, sex and address. Part two consisted of patient satisfaction.

### RESULT:

The acceptance of the outpatient department is an essential part of the health services as it was used by a section of the community who visited to OPD. The aim of this article has been to visualize the layout and facilities of the outpatient department as seen by the patient.

### Patient Experience at Entrance

Patient Familiarity with the surroundings of OPD is imperative for hospital staff, this is the first real point of contact with the hospital and is where documentation takes place, this should be conducted in the most supportive and friendly manner possible. Attitude of front office staff has immense amount of importance in hospital OPD, as shown in (Table-1) In this research it has been observed that 32 of 40 patients said that the attitude of staff working in front office is Good and only 08 patients are of the opinion that the staff attitude is average, not a single patient feels that the attitude is bad.

**Table-1**

S. No	Patient experience at entrance	Number
1	Good	32
2	Average	08
3	Bad	0
	Total	40

### Facility available in the Waiting Area

Outpatient department of hospitals consists of a large central hall but some Hospitals have central hall and small halls with seating arrangement near by the specialities clinics. The first impressions of the patient should be of comfort. Waiting halls are furnished, noise resistance and well decorated.

Facilities available in the OPD of Hospitals are seating arrangement, drinking water and other facilities like availability of Toilets. 47 out of 50 patients said that the facilities available including seating arrangements for waiting in the Outpatient area are adequate (Table-2), 39 patients respond good about drinking water facility, 01satisfactory and none as bad (Table-3). This reflects the distinction between satisfaction reports about care provided to Patients and satisfaction ratings, which capture a personal and hence subjective evaluation of the care that cannot be, revealed by direct observation.

**Table-2**

Facility available in the Waiting Area:		
S.No	Seating Arrangement	Number
1	Good	39
2	Satisfactory	01
3	Bad	00
	Total	40

**Table-3**

Facility available in the Waiting Area:		
S.No	Drinking water	Number
1	Good	39
2	Satisfactory	01
3	Bad	00
	Total	40

### Quality of Care Provided by Hospital:

Nowadays hospitals make sure that through prior appointment system, direct visit in some or even in emergency cases patients were seen by their doctor of choice. With this attitude and facilities the results are changing as shown in (Table -4) Attitude of Doctors was good to 24 patients, average to 6 and none of the patients said that the quality of care provided by hospital is bad. Regarding ancillary & auxiliary services (injection room, pharmacy, dressing room, minor OT, dispensary, laboratory collection center, outpatient radiology, health education) shown in (Table -5)37 patients say yes all these facilities should be made available only 03 say no to this because they don't have any idea about these services, Overall patients were satisfied with the Health Care Providers.

### REFERENCES

1. National Hospital Ambulatory Medical Care Survey: 2007 Outpatient Department Summary. Hing, Margaret J. Hall, Jill J. Ashman, Jianmin Xu, M.S. National Health S. National Health Statistics Reports n Number 28 n September 23, 2010 | 2. The impact of visit frequency on the relationship between service quality and outpatient satisfaction: a South Korean study Cho WH, Lee H, Kim C, Lee S, Choi KS. Health Serv Res. 2004 Feb;39(1):13-33 | 3. Patients' experiences and clinicians' ratings of the quality of outpatient teams in psychiatric care units in Norway Bjørngaard JH, Ruud T, Garratt A, Hatling T. Psychiatr Serv. 2007 Aug;58(8):1102-7 | 4. Quality of health care: patient satisfaction in a university hospital de Oliveira DF, Arieta CE, Temporini ER, Kara-José N. Arq Bras Oftalmol. 2006 Sep-Oct;69(5):731-6 | 5. Towards patient-centered health services in India—a scale to measure patient perceptions of quality Rao KD, Peters DH, Bandeen-Roche K. Int J Qual Health Care. 2006 Dec;18(6):414-21. Epub 2006 Sep 29 | 6. Walk-in clinics in Ontario. An atmosphere of tension Brown JB, Bouck LM, Østbye T, Barnsley JM, Mathews M, Ogilvie G. Can Fam Physician. 2002 Mar;48:531-6. | 7. Users' reports and evaluations of out-of-hours health care and the UK national quality requirements: a cross sectional study Campbell J, Roland M, Richards S, Dickens A, Greco M, Bower P. Br J Gen Pract. 2009 Jan;59(558):e8-15. | 8. Physician assistants and nurse practitioners in hospital outpatient departments, 1993-1994. McCaig LF, Hooker RS, Sekscenski ES, Woodwell DA. Public Health Rep. 1998 Jan-Feb;113(1):75-82. | 9. National Hospital Ambulatory Medical Care Survey: 2001 outpatient department summary. Hing E, Middleton K. Adv Data. 2003 Aug 5;(338):1-26. |

**Table-4**

S.No	Attitude of Health Care Providers	Number
1	Good	24
2	Average	6
3	Bad	00
	Total	40

**Table-5**

S.No	Attitude of Health Care Providers	Number
1	Yes	37
2	No	03
	Total	40

The efficiency of an outpatient department depends on the competence of its Health Care Providers [Doctors, Nurses and Paramedical Staff]. Their duty is to look after the patients needs and ensure that all necessary work should be done on time.

### DISCUSSION:

This study indicates that most of the patients interviewed were satisfied with the services they received at OPD, attitude of receptionist/ Front Office Staff including Health Care Providers is Satisfactory. An OPD is a place where non-emergent ambulatory medical care is provided under the supervision of a physician. The attitude of health care providers has its own impact, More the positive attitude more the patient is satisfied, patient satisfaction also depends on 'nursing care' because nurses are involved in almost every aspect of client's care in hospital.

Hospital is a place where continuous changes occur day in day out therefore, new innovation and new technique must be applied; patients' satisfaction must be the top priority for hospital management as OPD is the first interaction.

There is always a room for improvement everywhere specially in hospital. Regarding physical environment of waiting areas from Outpatients' perceptions, there is still room for improvement via customizing patients' specific characteristics and demands. In addition to evaluating various dimensions of the physical environment, we also examined the effects that outpatient socio-demographics and visiting backgrounds had on patient satisfaction with respect to the physical environment of waiting areas. Gender, age, visiting frequency, and visiting time were all related to patient satisfaction. Furthermore, these factors should be considered when redesigning more comfortable and customized medical care environments in the future.

While conducting this study, we found health services make providers more sensitive and alert to patient needs. Many instances in which patients were eager about the services they had received in the hope that some action would be taken. It is likely that the very act involving patients in evaluating their

### CONCLUSION:

The most important point of all is that hospital staff should never forget that they work to provide a service for sick people. All who come into contact with patients should treat them as human beings, not cases. This has been said so often in so many surveys and reports that it seems tedious to make the point again. Yet it remains true. Unless it is taken to heart by all, many of our new hospitals will be no better than our old despite improved surroundings.