

In Patient Customer Satisfaction Index Analysis

A dissertation submitted in partial fulfilment of the requirements for the award of

Post-Graduate Diploma in Health and Hospital Management

by

Dr. Surbhi Rishi (PT)



International Institute of Health Management Research

New Delhi – 110075

May, 2013

Certificate of Internship Completion

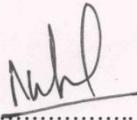
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TO WHOM IT MAY CONCERN

This is to certify that **Dr. Surbhi Rishi (PT)** has successfully completed her 3 months internship in **Asian Heart Institute & Research Centre, Mumbai** from **January 02, 2013 to April 25, 2013**. During her intern she has worked as Management Trainee in the Quality Control department under the guidance of dedicated team of professionals at Asian Heart Institute, Mumbai. During her tenure she has satisfactorily completed all the tasks assigned to her and has shown complete sincerity and professionalism throughout.

We wish her good luck for her future assignments.

For Asian Heart Institute



Mr Mukul Sharma

Sr. Manager – Human Resources



*Every heart
deserves the best*

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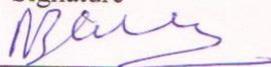
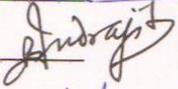
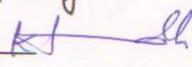
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17 May 2013

Certificate of Approval

The following dissertation titled "**In Patient Customer Satisfaction Index Analysis**" is hereby approved as a certified study in management carried out and presented in a manner satisfactory to warrant its acceptance as a prerequisite for the award of **Post- Graduate Diploma in Health and Hospital Management** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

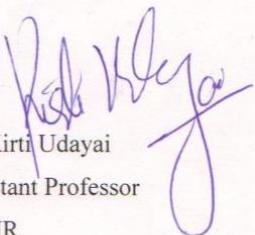
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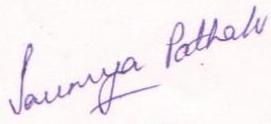
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This is to certify that **Dr. Surbhi Rishi (PT)**, a graduate student of Post – Graduate Diploma in Hospital and Health Management, has worked under our guidance and supervision. She is submitting this dissertation titled “**In Patient Customer Satisfaction Index analysis**” in partial fulfillment of the requirements for the award of the Post – Graduate Diploma in Hospital and Health Management.

This dissertation had the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.


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Assistant Professor
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Date: 17 May 2013


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Date: 25/4/13



FEEDBACK FORM

Name of the Student: *Sumthi Rishi*

Dissertation Organisation: *Asian Heart Institute*

Area of Dissertation: *Quality.*

Attendance: *100%.*

Objectives achieved: *Yes.*

Deliverables: ① Maintaining daily tracker of debts
② Customer satisfaction Index - analysis
③ Departmental audits.

Strengths: *Diligent*
① *Smart*
③ *Hard worker*

Suggestions for Improvement: - Needs to improve threshold to handle pressure ② working in challenging environments.
③ Adaptability ④ Flexibility

Signature of the Officer-in-Charge/ Organisation Mentor (Dissertation)

Date: ~~22~~ *23/4/13.*

Place: *Mumbai.*



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Dr. Surbhi Rishi (PT)

Abstract

The objective of the study was to find out the level of satisfaction among the admitted patients at AHIRC. Patient satisfaction depends up on many factors such as: Quality of clinical services provided, availability of basic amenities, behaviour of doctors and other health staff, cost of services, hospital infrastructure, physical comfort, emotional support, and respect for patient preferences. Mismatch between patient expectation and the service received is related to decreased satisfaction.

The methodology adopted was purposive sampling method and study design was cross sectional descriptive study. The sample size for the study was 817 IPD patients. The sampling universe was Asian Heart Institute & Research Centre, Bandra-Kurla Complex, Mumbai.

The key findings from the study were that the level of satisfaction regarding overall quality and consultant services was high. On the other hand, most of the patients were dissatisfied with the nurses' communication skills, billing services as the discharge process was delayed for some of them and also the dietary services were not satisfactory. The quality of food and the kitchen staff were rated low by most of the respondents. The other key finding was that the factor which influenced the most the choice of hospital was Dr. Ramakant Panda, the VCMD himself and the word of mouth followed by referral from other doctors.

It was found that the patients and families were lot satisfied with the services rendered by the medical and surgical team of the doctors including the physiotherapists. Also, the security staff had displayed disciplined yet professional behaviour throughout. The IPD facilities at AHIRC are one of the best among the well established hospitals in Mumbai. The cleanliness, hygiene and infection control practices followed at the facility is unmatched. The management needs to work on changing the outsourced kitchen & cafeteria services and round the year patient centred soft skills & communication training should be given to the clinical, paramedical and support staff of the hospital.

There should be strict monitoring and control mechanisms and such IPD customer satisfaction analysis must be conducted on a regular basis so as to find out and rectify the loopholes if any.

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List of Abbreviations

IPD	- In patient department
AHIRC	- Asian Heart Institute & Research Centre
ISO	- International standards for organizations
JCI	- Joint Commission International
NIAHO	- National Integrated Accreditation for Healthcare Organizations
CAB	- Coronary Artery Bypass
AKD	- Artificial Kidney Dialysis
PCA	- Patient care assistant
TPA	- Third Party Administrator
F & B	- Food and Beverages
OSAT	- Overall satisfaction
NR	- Not recorded
FM	- Fails to meet requirements
MM	- Minimally meets requirements
MR	- Meets requirements
ME	- Meets expectations
CE	- Clearly exceeds expectations
ICU	- Intensive care unit
DAMA	- Discharge against medical advice
DOR	- Discharge on request

CHAPTER –1

Introduction

INTRODUCTION

The IPD is defined as the hospital's department where the admitted patients undergo diagnoses and /or treatment and may stay overnight or even longer and may not stay overnight in few short daycare procedures. It is a hospital facility where urgent medical, surgical and critical care is provided. The In -patient department is the highest source of revenue generation other than any other department of the hospital as the patient stay there and also uses other resources of the hospital while admitted in the department. Also, satisfaction is an important issue in healthcare nowadays. Thereby, IPD must achieve patients' satisfaction by providing quality service [1]. Against a background of growing consumerism, satisfying patients has become a key task for all healthcare activities. Satisfaction in service provision is increasingly being used as a measure of health system performance. It manifests itself in the distribution, access and utilization of health services.¹

Patient satisfaction is one of the important goals of any health system, but it is difficult to measure the satisfaction and gauge responsiveness of health systems as not only the clinical but also the non-clinical outcomes of care do influence the customer satisfaction [2]. This study aims at addressing these issues.

The IPD service reflects the organization attitude towards its patients and shows the patients' impression of the hospital as healthcare publicity spreads through word of mouth. It is interestingly said that one dissatisfied patient might result in preventing 10 more patients from reaching the facility. Thus, measurement of patient's satisfaction with services provided by the concerned hospital is extremely important for any healthcare facility.

Patient satisfaction depends up on many factors such as: Quality of clinical services provided, availability of medicine, behavior of doctors and other health staff, cost of services, hospital infrastructure, physical comfort, emotional support, and respect for patient preferences. Mismatch between patient expectation and the service received is related to decreased satisfaction. Therefore, assessing patient perspectives gives them a voice, which can make public health services more responsive to people's needs and expectations. Patients constitute the direct clientele of a hospital [3]. To keep them satisfied has to be the basic aim of the healthcare facility. To satisfy patients is becoming tougher as these consumers have become conscious of their rights, knowledgeable about their disease and demanding for their needs.

The common tool to improve the quality of care provided by the different service providers in the IPD is to conduct a patient satisfaction survey by structuring a questionnaire which will cover all the services which are provided to the patient during their stay in the hospital [4].

This will clearly explore the variables affecting the satisfaction level and causes of dissatisfaction. Patients' satisfaction is the key component in choosing the hospital for receiving the services and recommending to others.

Patient Satisfaction Survey (PSS) results in improving the quality of services in the hospitals and healthcare facilities (inculcate quality culture among the staff) rather than using it as an audit tool in evaluating the performance of the staff or hospitals [6]. This study was carried out to investigate the

levels of customer satisfaction with the medical services offered at the AHIRC, Mumbai and to identify factors that affect customer satisfaction. The inpatient department of AHIRC caters to a patient population of roughly 65 patients daily. The IPD is located across four floors in the hospital namely second, third, fourth and fifth floors. Asian Heart Institute (AHI) has been set up with an aim to provide world-class cardiac care in India. It is situated at the Bandra-Kurla Complex (BKC), a mere 15-minute drive from the domestic and international airports. The hospital promises to provide quality cardiac care to patients at reasonable costs. The hospital has a Patient-centric design with stress on safety and comfort of Patients. All Patient areas have been designed to minimize the risk of infection. Internationally accredited with ISO 9001:2000, JCI & NIAHO, AHI reaffirms its commitment towards world class cardiac care by being the **India's Highest Accredited Hospital**.

ORGANIZATION PROFILE

The 132 bedded hospital was started in 2002 with the logo “Your heart is in safe Hands”. The hospital was started to set a benchmark in quality care, ethical practice, reasonable costs and training for those in the profession. Patients are not charged premium rates for the care they receive. In fact, the charges are reasonable and probably even 10-15 per cent cheaper compared to other hospitals.

It offers the full range of cardiology services from prevention to early disease detection to complex interventions. Since its inception AHI has treated over 1.4 lac patients. Over 15000 cardiac surgeries have been performed at AHI with the lowest surgical and overall mortality rates 0.26% and 0.8% respectively. Since August’11 Asian Vatikutti Institute of Robotic Surgery at AHI has performed 100+ robotic surgeries.

Mission

To operate as a world – class heart hospital, incorporating the latest technological advances and ethical practices to provide quality heart care at reasonable cost.

Vision

Globally preferred centre of excellence

Core Values

- Customer Satisfaction
- Highest Quality
- Culture of High Performance
- Integrity & Ethical Practices
- Innovation & Change

SPECIALITIES AVAILABLE AT AHIRC

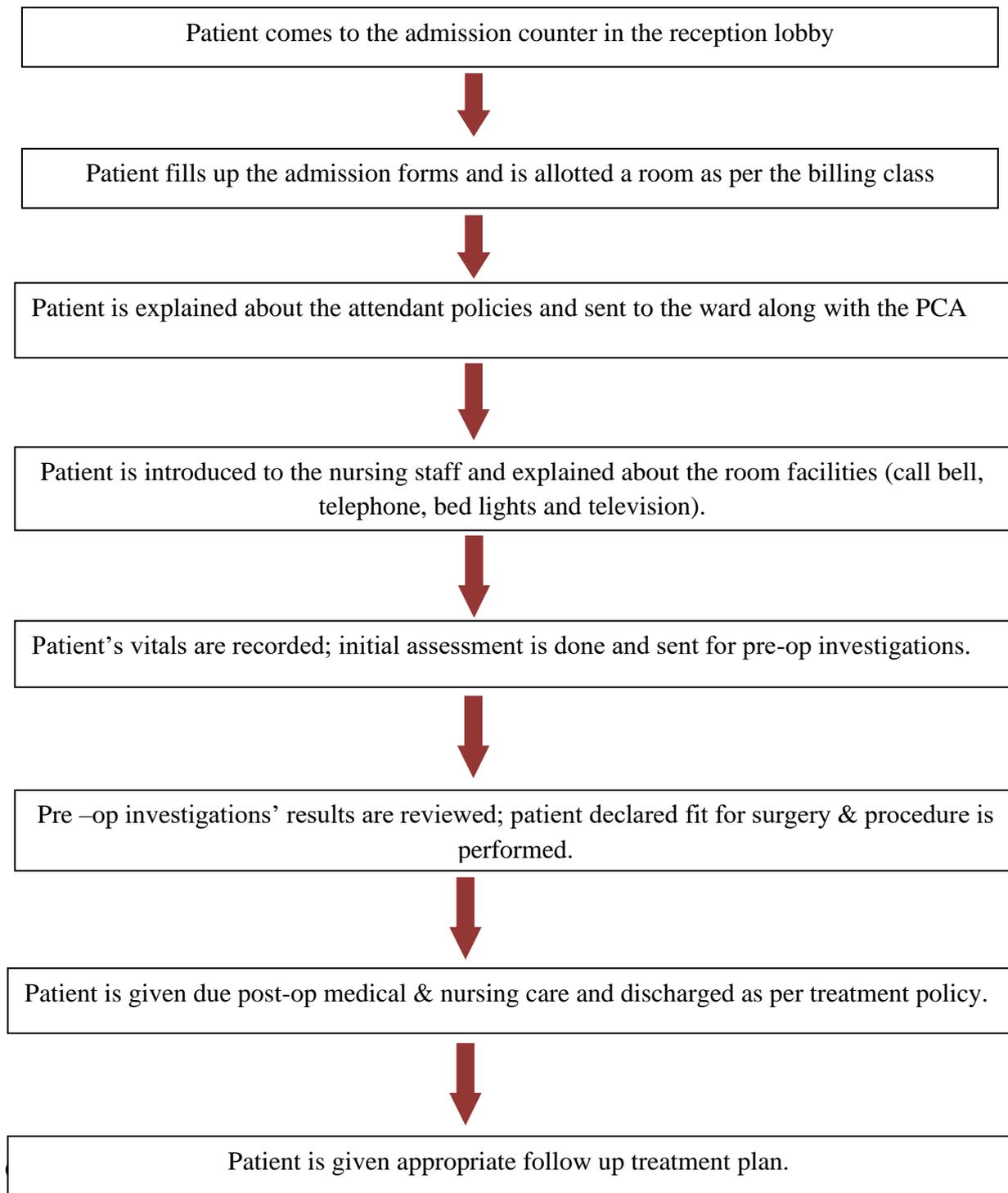
- Robot assisted surgery
- Cardiac surgery
- CAB Surgery

- Cardiology
- Children's heart centre
- Preventive cardiology & Rehabilitation
- Chest Pain Clinic
- Physiotherapy
- Executive Health check up
- Beyond Smiles dental clinic
- Laboratory Medicine and Blood Bank
- Radiology
- Nephrology & AKD unit
- Pulmonology
- Orthopedic spine & joints clinic
- Nutrition and dietetics
- Diabetology
- Hematology

Being a premier cardiac institute & having established itself as a Centre of Excellence. Asian Heart Institute is now expanding into the non cardiac division as well. On completion of the expansion the following services will be offered under the umbrella of 'Asian Hospitals & Healthcare'

- Asian Robotic & Minimal Invasive Surgery Institute
- Asian Orthopedic Surgery Institute
- Asian Cosmetic Surgery Institute
- Asian Transplant Surgery Institute

PROCESS FLOW



RATIONALE OF THE STUDY

IPD is the highest revenue generation department of any hospital. The primary goal of the tertiary care hospital is to provide best possible healthcare to the patients. Research performed by Andoleeb (1998) stressed how the public is inclined to pay more for care from quality institutions with which they were satisfied.

Studies have shown that satisfaction level is directly proportional to the expectations of the patients and its fulfilment. For a health care organization to maintain and improve its standards, constant monitoring of perceptions and expectations of the patients and their attendants is essential. Through this project an attempt has been made to find out the reasons behind the dissatisfaction of the admitted patients towards the hospital services in medical ward.

CHAPTER –2
Data & Methods

General objective:

To determine the level of satisfaction of the admitted patients pertaining to various departments in the Asian Heart Institute, Mumbai.

Specific objectives:

- To provide regular ongoing monitoring and reporting of patient satisfaction with specific areas of care
- To identify the parameters which influence patient satisfaction
- To determine the level of satisfaction related to consultant services, diagnostic tests, billing and nursing care.
- To determine the level of satisfaction regarding basic amenities
- To determine the level of satisfaction related to overall quality of care and value for money
- Identify and report on the patient perceived strengths and weaknesses of the health care service provided.

REVIEW OF LITERATURE

Study of Patients satisfaction and Hospital Care in Pakistan; Tayyaba Bashir, Akmal Shahzad et al conducted a case study at Madina Teaching Hospital, University of Faisalabad which provides free of cost medical treatment to the patients. The study explores how much the patients are satisfied with facilities given by the hospital as sample for the country. Quality care of patients means patients who have the opinion that they are satisfied with the health services. In this study impact of medicine given in time by the nurse, environment of hospital, and availability of food products supply, post-operative care facility and cleanliness has observed on patient satisfaction and quality of treatment.

Raman Sharma, Meenakshi Sharma (2011) conducted a patient satisfaction study in a multispecialty tertiary level hospital, PGIMER, Chandigarh that aims at addressing distribution, access and utilization of health services. This cross sectional study found that the overall satisfaction regarding the doctor-patient professional and behavioural communication was more than 80 per cent at almost all the levels of health care facilities. 55 per cent of respondents opined that doctors have shown little interest to listen to their problem while 2/3 opined that doctors used medical and technical terms to explain their illness and its consequences. More than 80.0 per cent were satisfied with basic amenities. Of these, 40.0 per cent were of the view that services were costlier than their affordability.

Patient satisfaction with hospital stay does not reflect quality of surgical care; Martin A. Markary found that the quality of what goes on in the operating room doesn't closely correlate with the patient's perception of the quality of his or her medical care. It also emphasizes that it is important for patient satisfaction to be tracked and transparent, but the quality of the actual care may be independent of that. It's misleading to say a patient satisfaction score says it all. Their research found that while the metric may be easy to apply, it doesn't appear to be a comprehensive measure of overall quality, particularly for procedure-based care like surgery. Makary says. "In any industry, if the employees feel good about their workplace, they are more likely to have satisfied customers.

Patient Satisfaction Surveys in Public Hospitals in India; Srilatha Sivalenka (1999-2000) conducted cross sectional studies, a total of 1179 respondents from 25 hospitals in June 1999 to

measure the level of satisfaction of the patients as an outcome of care in public hospitals, to identify the areas of satisfaction and dissatisfaction in public hospitals in Andhra Pradesh, India. : On the whole the Global satisfaction scores for all the three surveys were low. Specific to the subscales the most significant areas of dissatisfaction were financial aspects and interpersonal aspects of care. There were no major differences seen in satisfaction scores by age, gender, education, occupation or by socioeconomic status. Content analysis to the open ended question revealed that corruption appears to be very highly prevalent and was the top cause of dissatisfaction, other areas of concern were availability or supply of drugs, poor utilities like water supply, lights and fans etc., and poor maintenance of toilets and lack of cleanliness in the hospital.

A survey of customer satisfaction with the medical services offered at the Kenyatta national hospital cancer treatment centre; University of Nairobi investigated the levels of customer satisfaction with the medical services offered at the Kenyatta National Hospital Cancer Treatment Centre and to identify factors that affect customer satisfaction. The study adopted a survey design and primary data was collected by use of questionnaires. The findings of the study showed that the hospital environment, cost of medical services and the conduct of the hospital healthcare providers largely influence the level of customer satisfaction. The study concludes that medical service providers should act in integrity, being polite, friendly, offer personalized medical care and be interested with patient needs so as to positively influence customer satisfaction.

METHODOLOGY

Study design-

Research design: The research design adopted for the project is cross-sectional and descriptive in nature.

Sampling universe: Asian Heart Institute & Research Centre.

Study design: Cross sectional descriptive study

Sample size: 817 IPD patients of AHIRC

Sampling method: Purposive Sampling

Inclusion criteria-Patients discharged from the Medical Ward of the hospital

Sampling Tool: Questionnaire

Data collection: Primary data was collected using structured questionnaire with closed and open ended questions.

Study period: 11th January 2013 to 11th April 2013

Data analysis: The acquired data is analyzed using statistical methods like simple statistical methods and Microsoft Excel and presented with the help of bar graphs and pie charts.

CHAPTER –3
Results & Findings

Front Office

1. Admission process

Table 1. Convenience of admission process

Excellent	Good	Average	Poor	NR	Total
368	383	39	8	19	817
46.12%	47.99%	4.89%	1.00%	2.33%	798

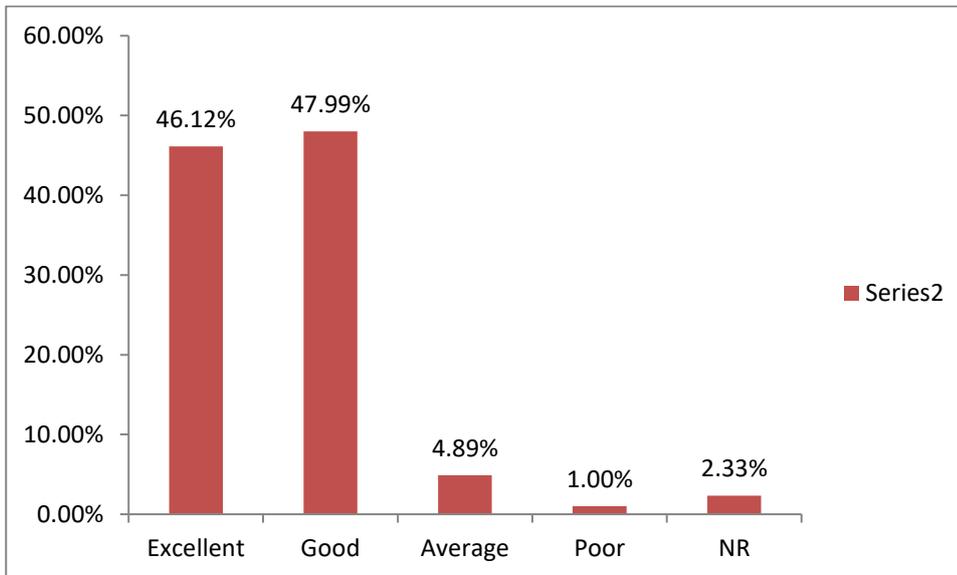


Fig. 1 48% of the respondents has rated the admission process good and 46% respondents rated the process excellent. Only 6% patients rated as average and poor.

2. Courtesy and helpfulness

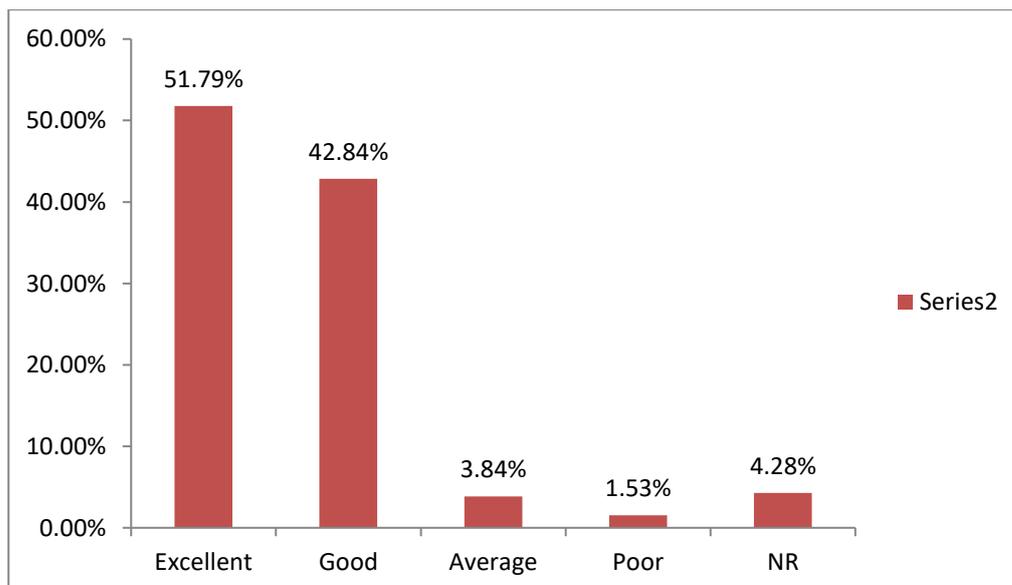


Fig. 2 Of all the patients 52% rated the behaviour of admission excellent, 43% rated good and percentage of people who did not find the staff behaviour up to mark is as minimal as 5%.

Diagnostics

1. Clarity of instructions

Table 2. Diagnostics' clarity of instructions

Excellent	Good	Average	Poor	NR	Total
294	363	21	8	131	817
42.86%	52.92%	3.06%	1.17%	16.03%	686

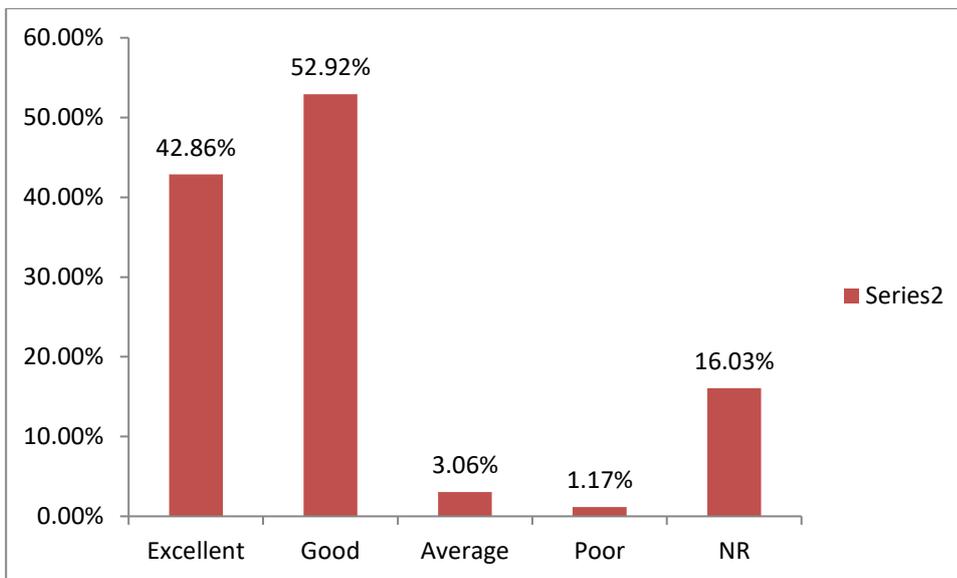


Fig. 3 More than 50% patients think that they are moderately satisfied with the clarity of instructions given prior to undergoing any diagnostics test. 43% patients are extremely satisfied and merely 4% are not satisfied. Of all the respondents 16% did not rate this parameter.

2. Courtesy and helpfulness

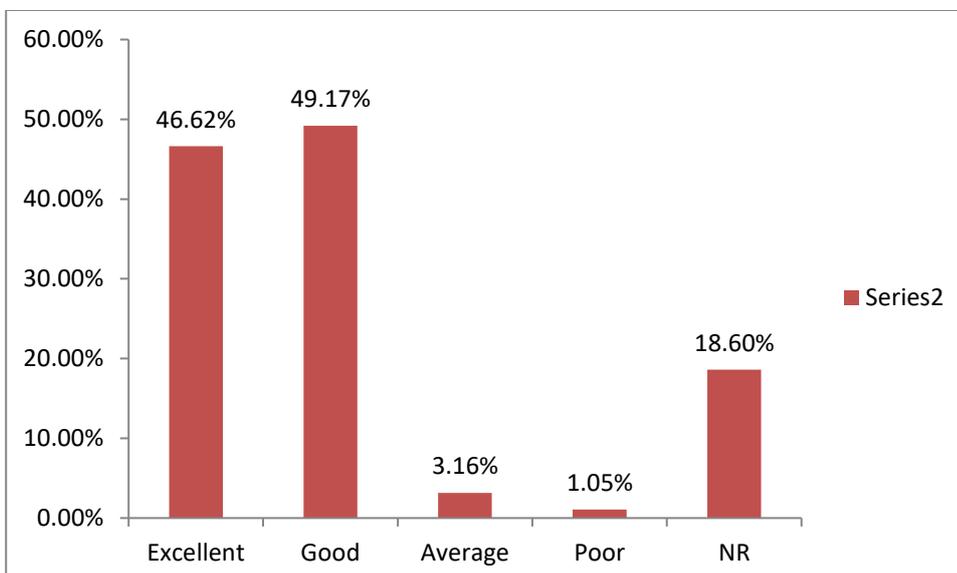


Fig. 4 96 % patients rated the behaviour of diagnostics department good and excellent. 4% rated average and below and 19% of the respondents did not rate this service at all.

Nursing

1. Care and attention

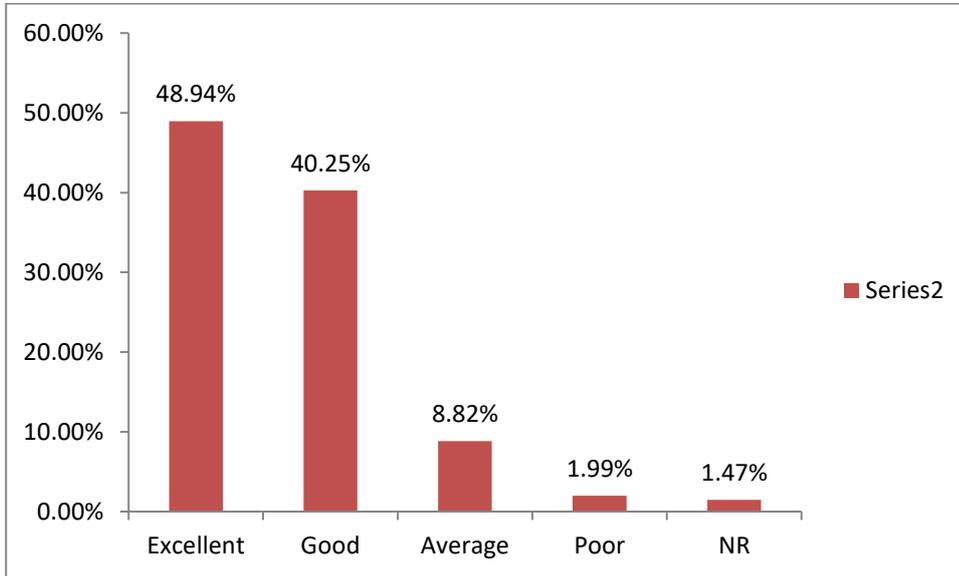


Fig. 5 49% and 40% patients feel that the nursing care attention is excellent and good respectively whereas nearly 11 % feel that the nursing care is not up to the mark.

2. Promptness of nursing care

Table 3. Nurses’ promptness of nursing care

Excellent	Good	Average	Poor	NR	Total
358	332	80	25	22	817
45.03%	41.76%	10.06%	3.14%	2.69%	795

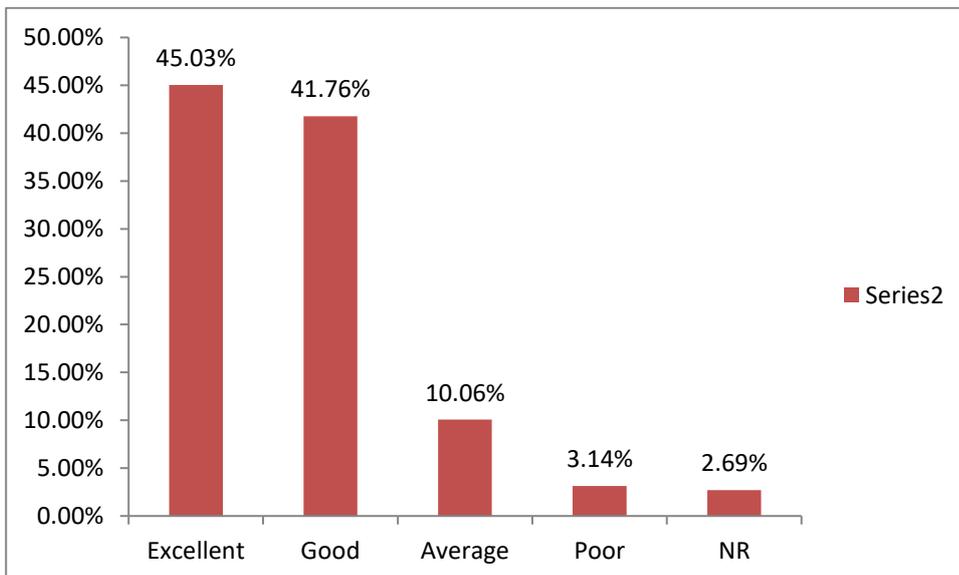


Fig. 6 87% patients rated the promptness of nursing care excellent and good whereas 13% patients rated it average and even below.

3. Professional care

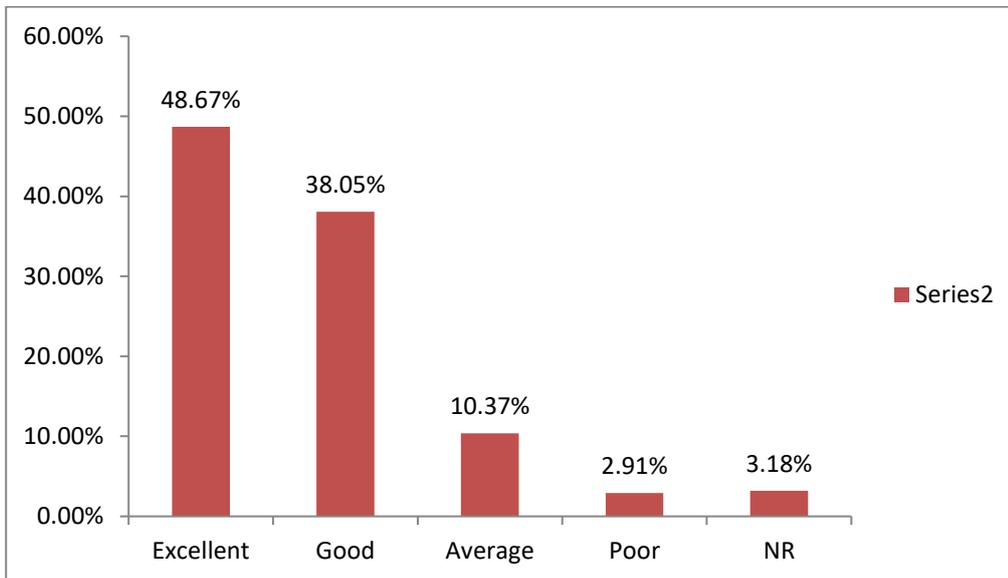


Fig. 7 Of all the patients 49% think that the nurses render care professionally, 38% have rated nurses good on this parameter but 13% do not think the same and they rated nurses average and poor.

4. Communication

Table 4. Nurses' communication

Excellent	Good	Average	Poor	NR	Total
322	304	124	43	24	817
40.61%	38.34%	15.64%	5.42%	2.94%	793

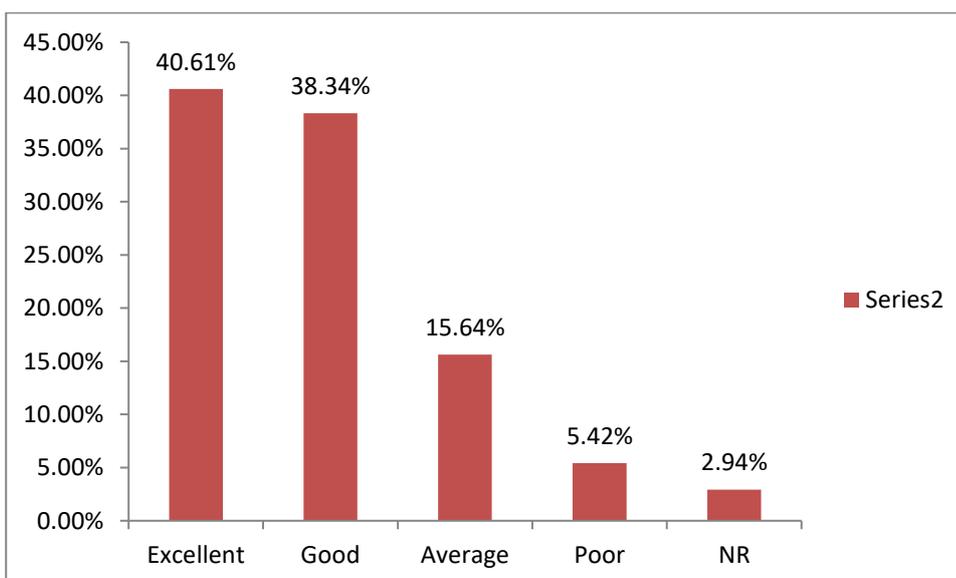


Fig. 8 79% respondents think that the nurses are able to communicate with the patients and relatives but 21% do not agree and think the nurses lack communication skills.

Physiotherapists

1. Care and attention

Table 5. Physiotherapists' care and attention

Excellent	Good	Average	Poor	NR	Total
276	195	16	7	323	817
55.87%	39.47%	3.24%	1.42%	39.53%	494

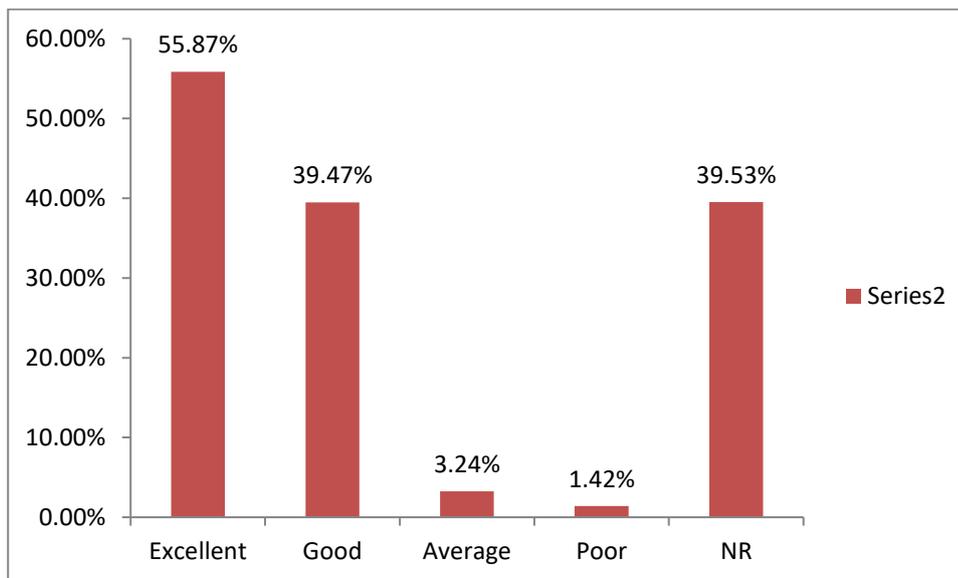


Fig. 9 Nearly 96% patients are satisfied with the physiotherapy services and of all respondents 40% did not rate the physiotherapists at all.

2. Gave me confidence in their skills

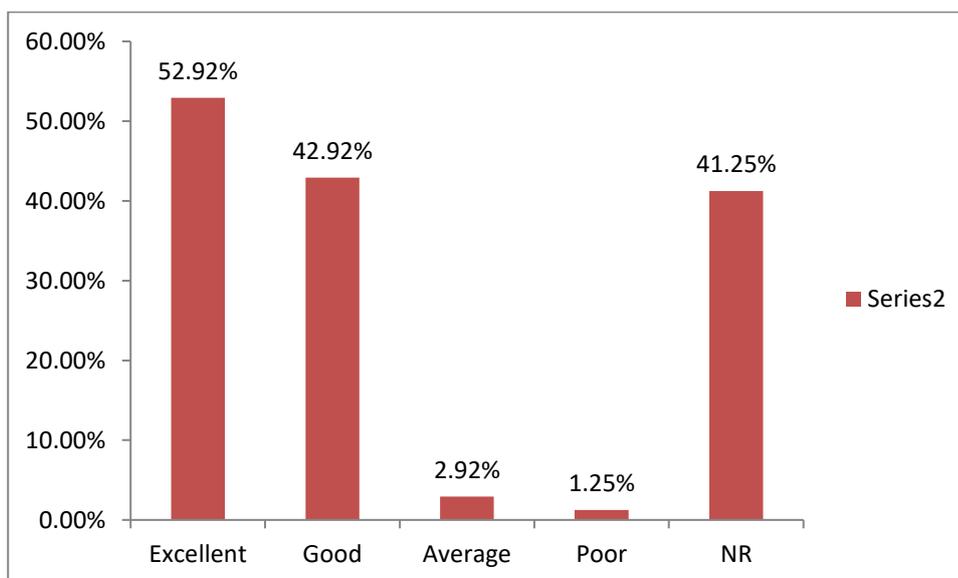


Fig. 10 Of all patients 53% and 43% rated physiotherapists excellent and good respectively on their skills and expertise. Nearly 41% respondents did not rate this parameter.

Doctors

1. Care and attention

Table 6. Doctors' care and attention

Excellent	Good	Average	Poor	NR	Total
507	256	24	11	19	817
63.53%	32.08%	3.01%	1.38%	2.33%	798

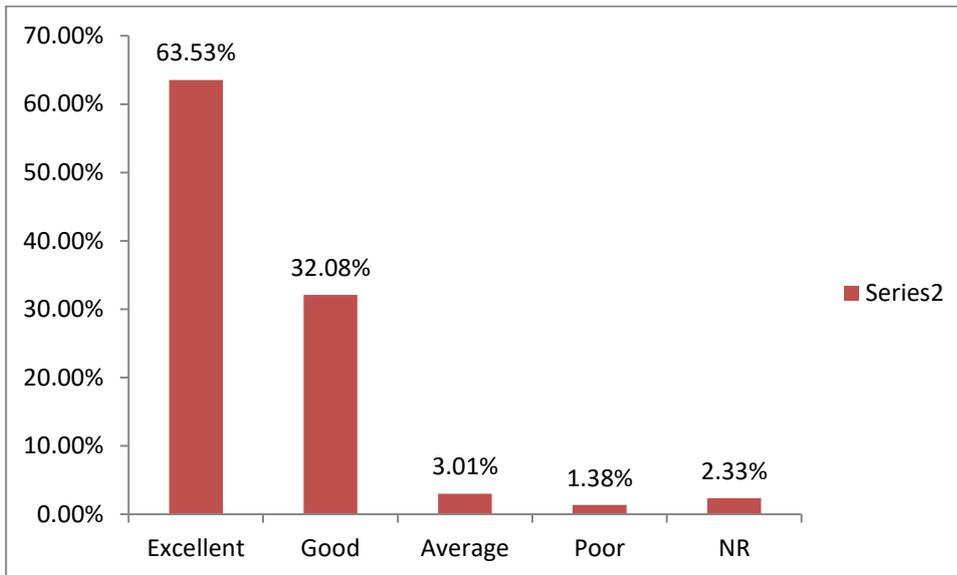


Fig. 11 More than 95% patients are satisfied with the care and attention rendered by the doctors. Only 4% did not find these services to be satisfactory.

2. Clarity provided regarding my treatment and condition

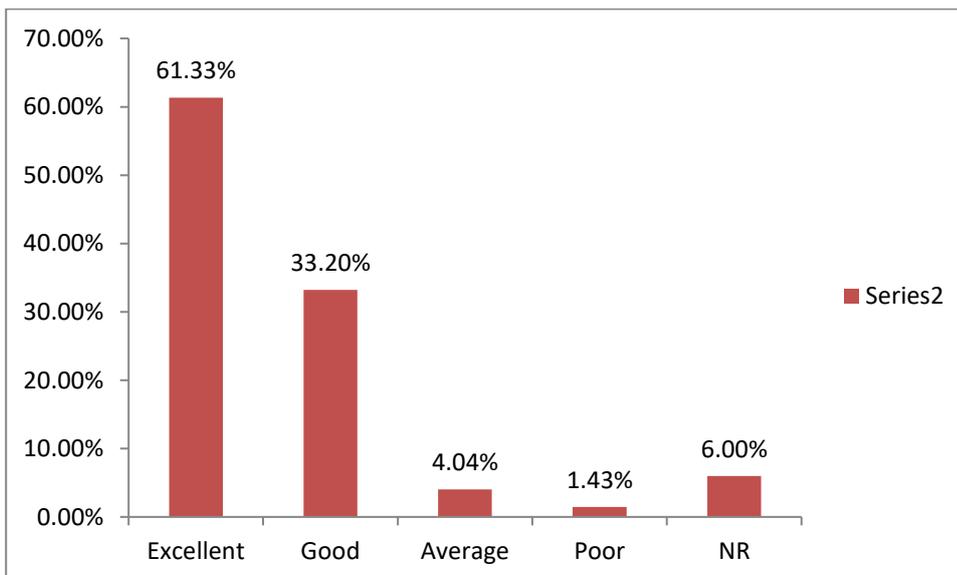


Fig. 12 61% and 33% patients rated excellent and good to the clarity provided regarding their treatment and condition. Merely 5% patients feel they are not clear with their clinical condition and treatment they undergo.

3. My involvement in the decisions made for my treatment

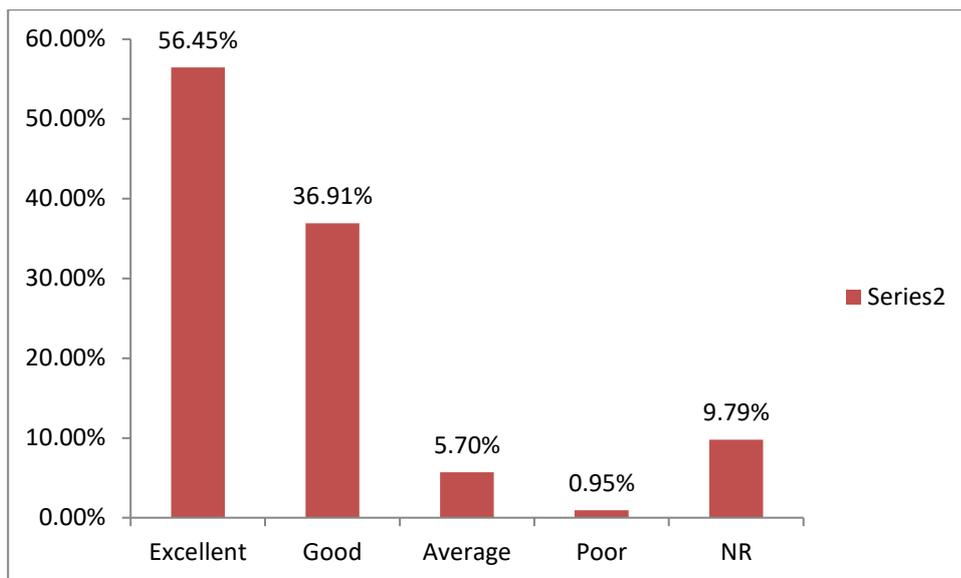


Fig. 13 93% patients feel they are actively involved in the decisions made for their treatment whereas 6% patients did not feel so. 10% patients did not respond to this question.

Billing

1. Billing counselling

Table 7. Billing counselling

Excellent	Good	Average	Poor	NR	Total
251	324	61	25	156	817
37.97%	49.02%	9.23%	3.78%	19.09%	661

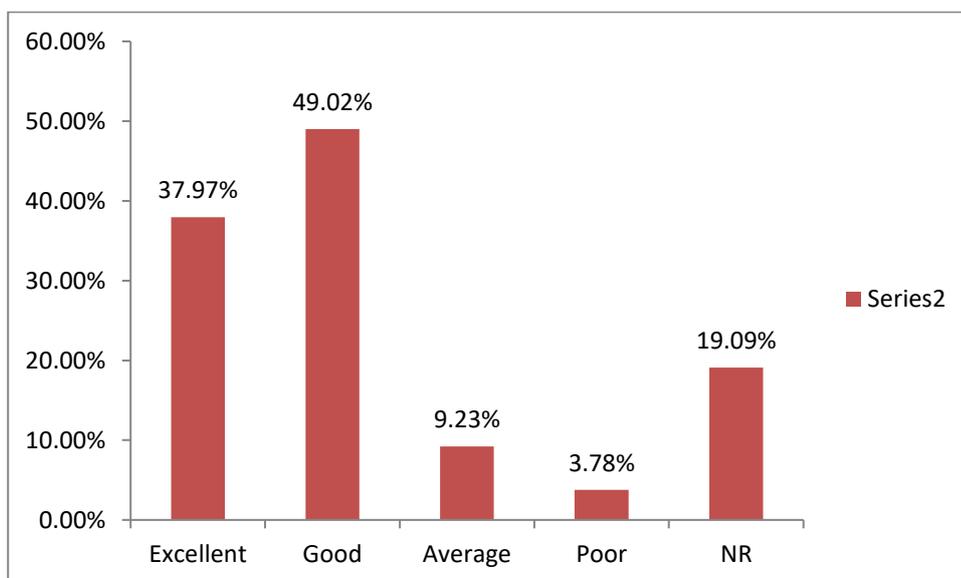


Fig. 14 49% and 38% patients rated billing department good and excellent in providing appropriate counselling regarding the bill and 13% patients do not agree. 19% respondents did rate this parameter.

2. Interim bills provided

Table 8. Provision of interim bills

Excellent	Good	Average	Poor	NR	Total
253	309	44	20	191	817
40.42%	49.36%	7.03%	3.19%	23.38%	626

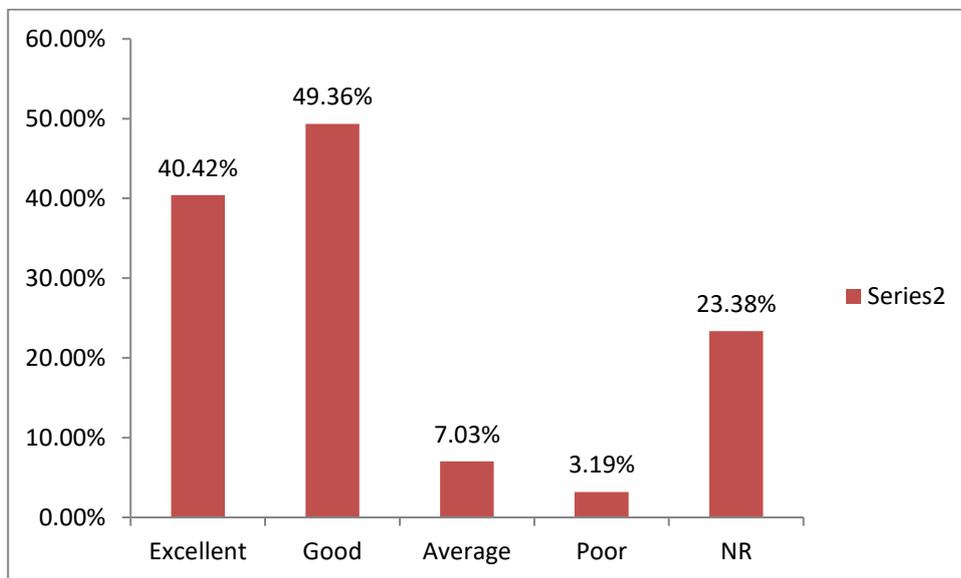


Fig. 15 Nearly 90% patients think they are satisfied and are provided with the interim bills but 7% patients do not feel so, although 23% respondents did not rate the department on the parameter.

3. Promptness in preparation of final bill

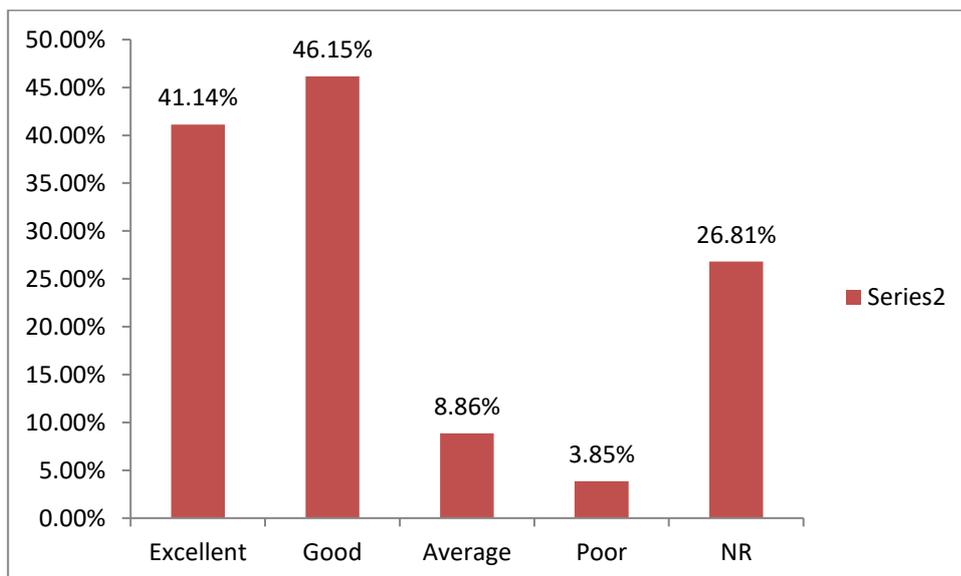


Fig.16 87% patients feel that billing department is prompt in preparing the final bills while only 13% disagree with the same. Of all, 27% respondents did not answer to this question.

4. Courtesy & helpfulness exhibited by TPA desk

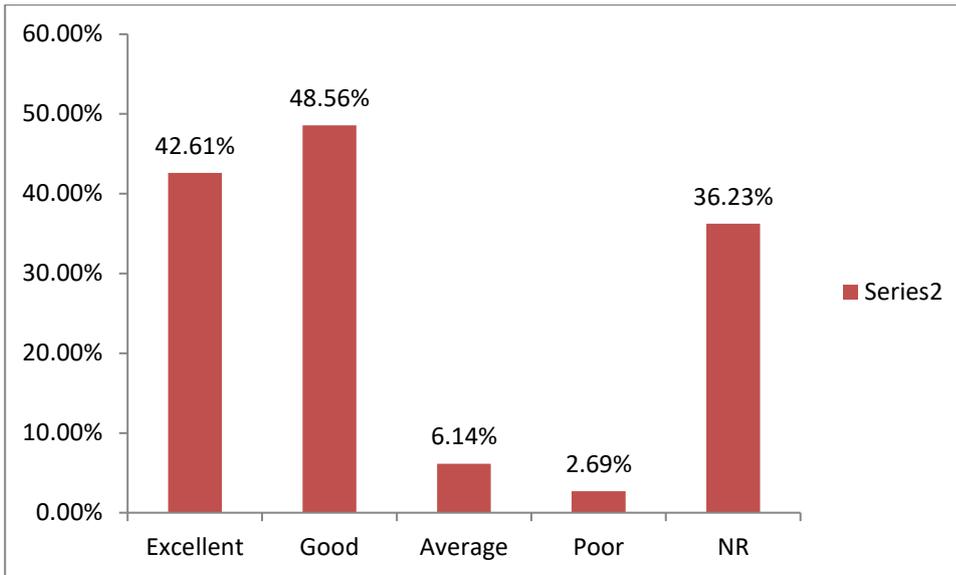


Fig. 17 91% patients rated the behaviour of TPA desk staff as good and excellent and a minimal percentage of patients rated it below average. 36% respondents did not rate this question.

Dietary services

1. Information and guidance provided regarding my diet

Table 9. Information & guidance provided by the dietician

Excellent	Good	Average	Poor	NR	Total
283	331	80	24	99	817
39.42%	46.10%	11.14%	3.34%	12.12%	718

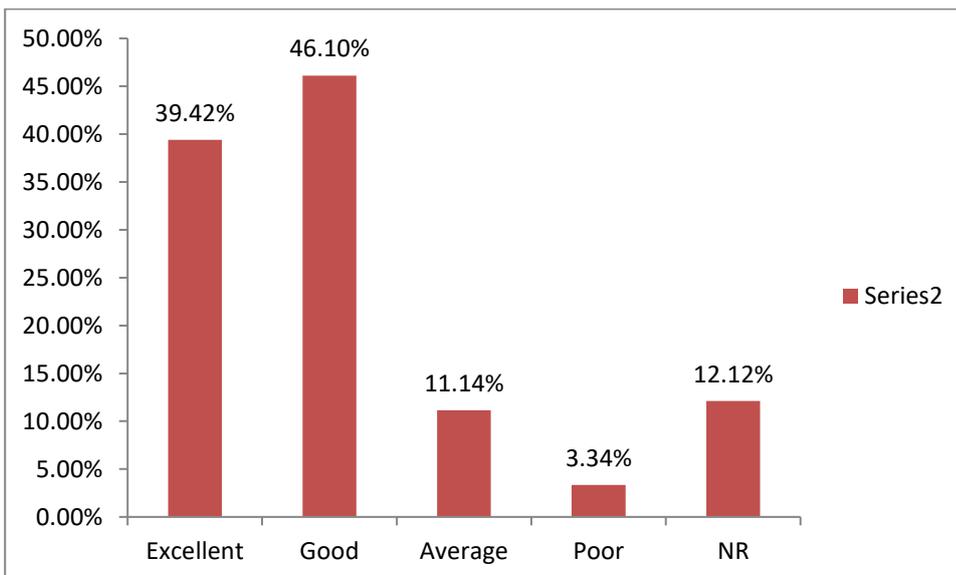


Fig. 18 85% patients rated dietician excellent and good on the diet counselling provided to them while 15% patients did not agree with this.

2. Quality of food

Table 10. Quality of food

Excellent	Good	Average	Poor	NR	Total
240	377	117	33	50	817
31.29%	49.15%	15.25%	4.30%	6.12%	767

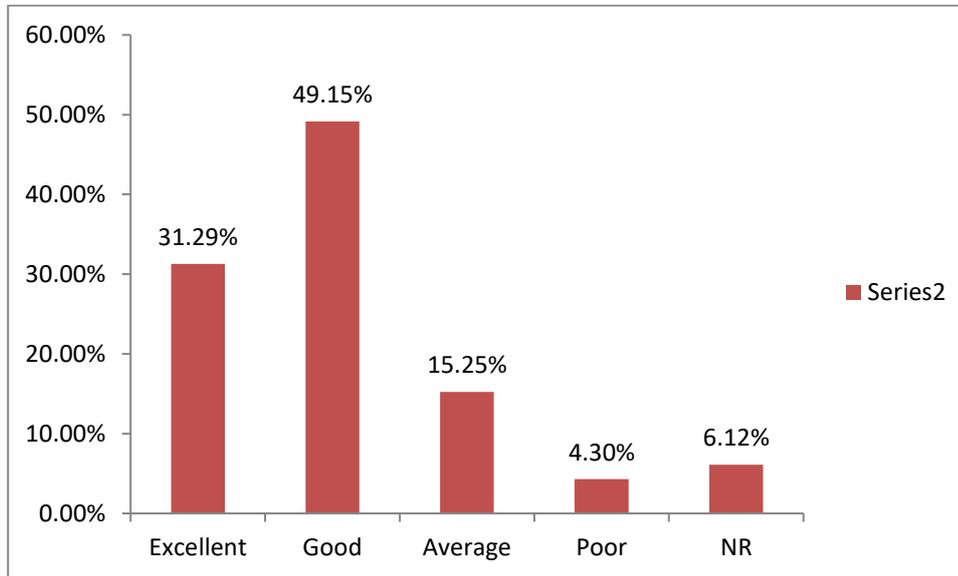


Fig. 19 80 % patients are satisfied with the quality food served in the hospital and rated it excellent and good. Around 20% patients are not happy with the food quality of which, 5% rated it below average.

3. Promptness of service

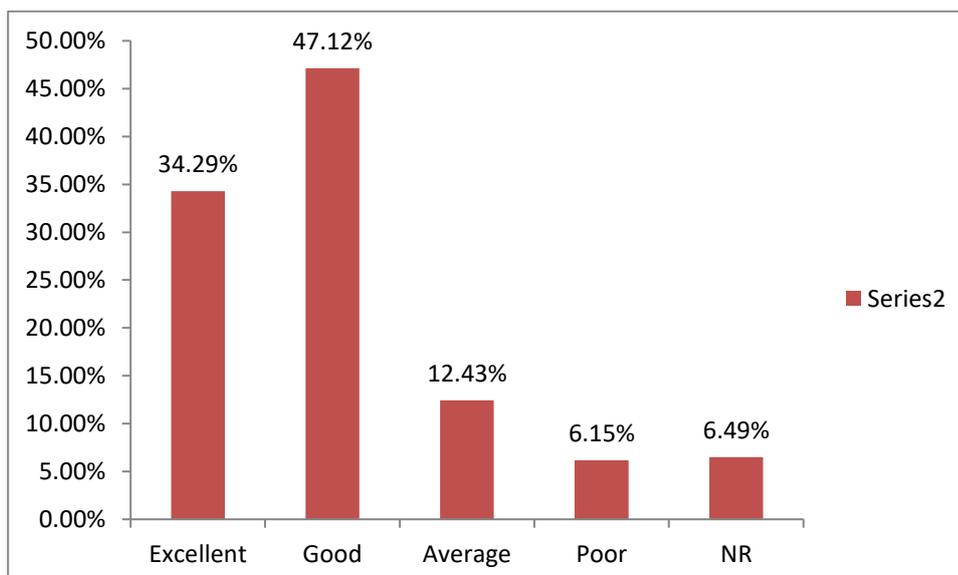


Fig. 20 47% and 34% patients have rated the cafeteria good and excellent on promptness of service and 18% rated the department average and below.

Housekeeping services

1. Regular cleaning of the room

Table 11. Regular cleaning

Excellent	Good	Average	Poor	NR	Total
407	339	39	6	26	817
51.45%	42.86%	4.93%	0.76%	3.18%	791

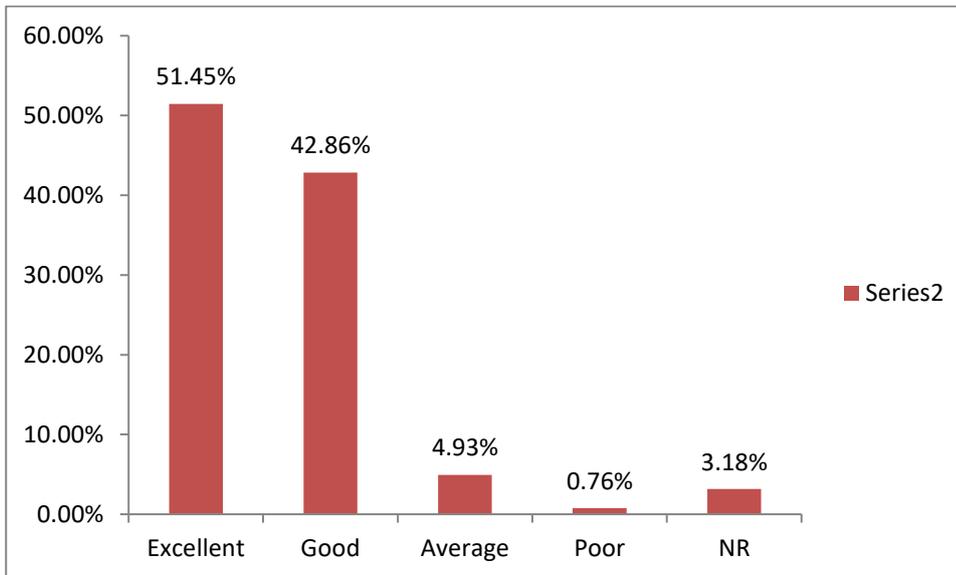


Fig. 21 Nearly 95% patients feel that the hospital rooms are cleaned regularly while 5% do not feel the same. Merely 3% patients did not comment on this.

2. Courtesy and helpfulness

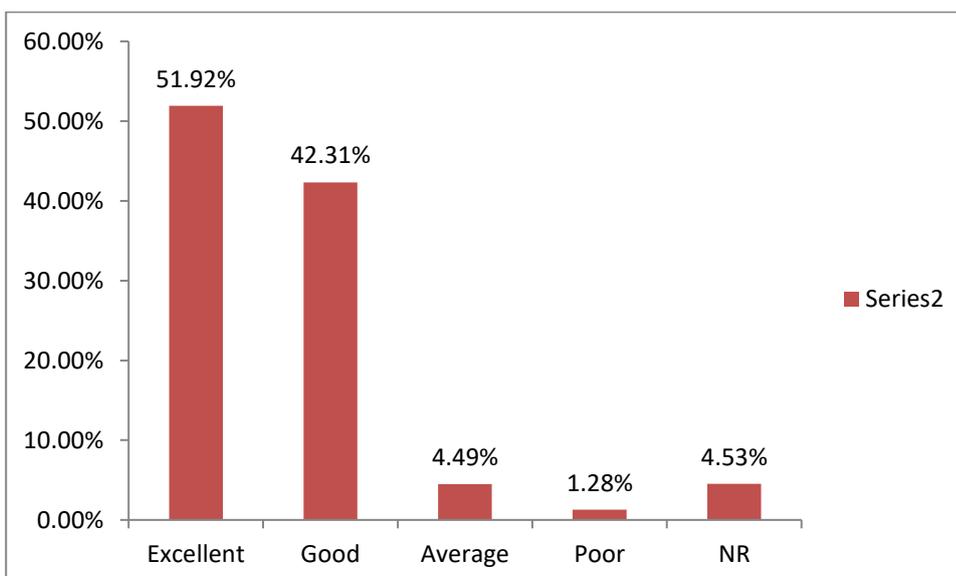


Fig. 22 94% patients are happy with the behaviour of housekeeping staff and rated them excellent and good. Around 6% patients did not agree and rated the staff average and poor on their behaviour.

3. Response time

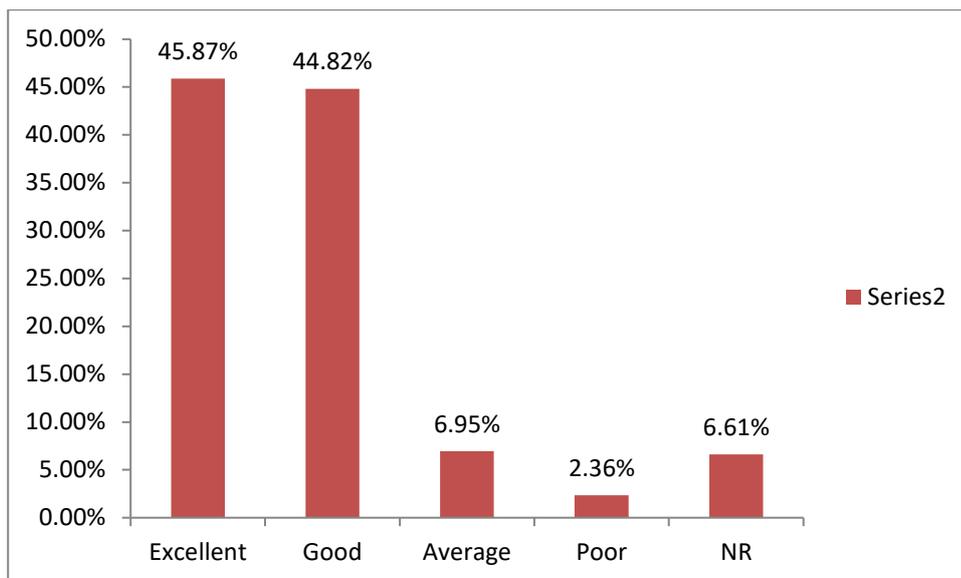


Fig. 23 Approximately 90% respondents feel that the staffs is prompt on responding and rated them excellent and good on their response time. Around 10% patients and relatives feel that the response time for housekeeping staff is quite high.

4. Were the security guards professional?

Table 12. Professional behaviour of security staff

Excellent	Good	Average	Poor	NR	Total
417	310	28	13	49	817
54.30%	40.36%	3.65%	1.69%	6.00%	768

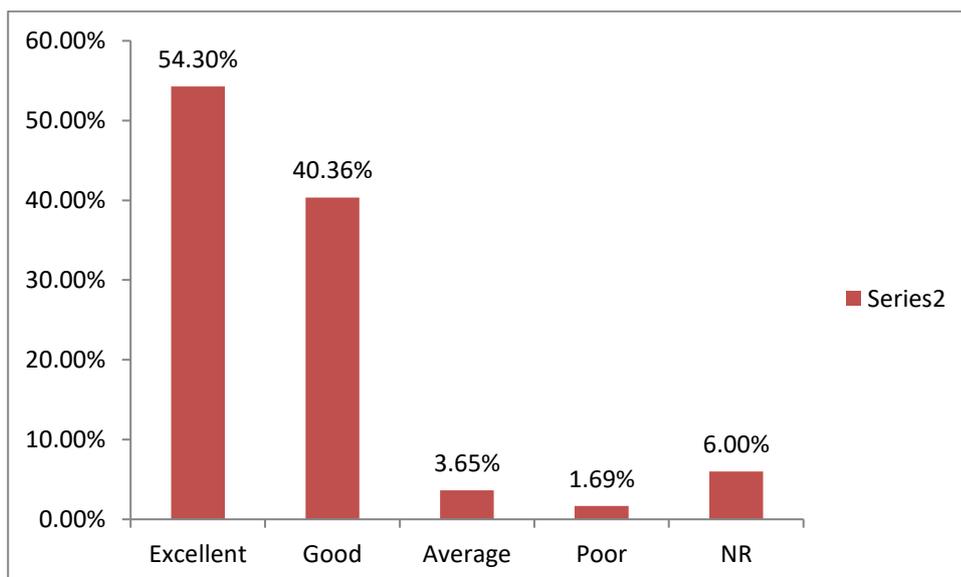


Fig. 24 54% and 41% patients have rated the security guards excellent and good on professionalism and discipline whereas 6 % patients do not feel the same.

Convenience of discharge process

Table 13. Convenience of discharge process

Excellent	Good	Average	Poor	NR	Total
238	322	61	22	174	817
37.01%	50.08%	9.49%	3.42%	21.30%	643

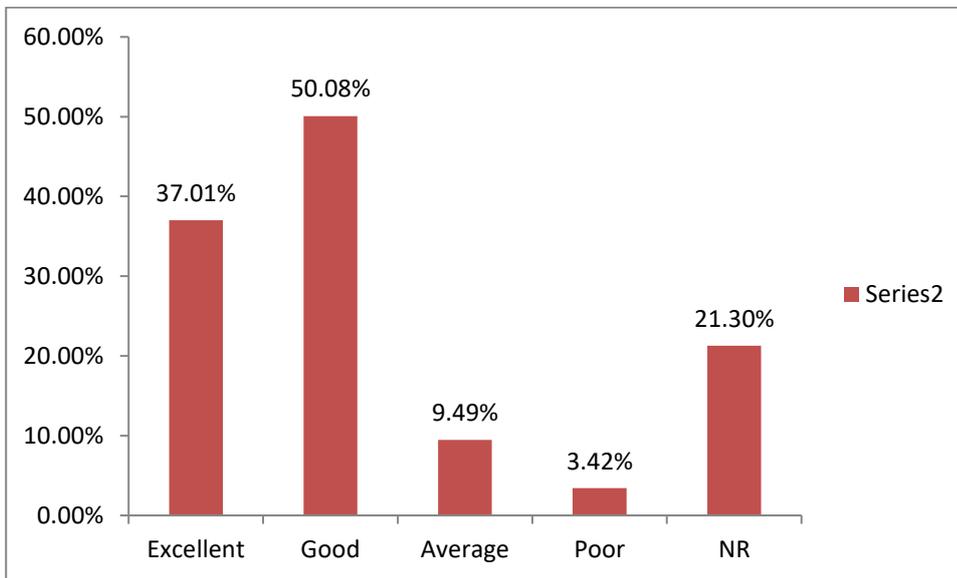


Fig. 25 37% and 50% patients have rated the discharge process excellent and good respectively whereas 13% patients feel that the discharge process is not at all convenient.

Overall experience at AHI

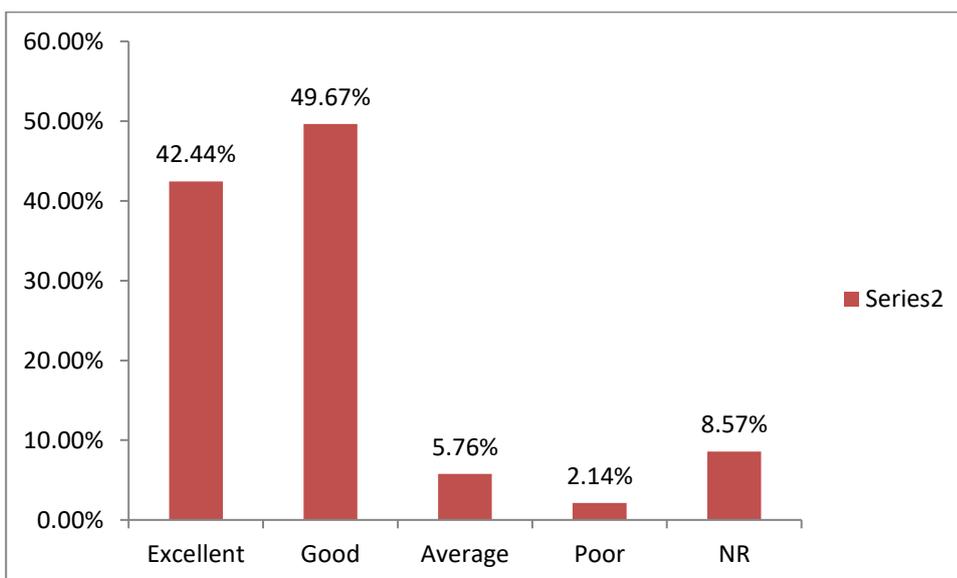


Fig. 26 The above graph shows that merely 6% of the patients rated the overall experience at AHI as average and below and more than 90% patients rated their experience as excellent and good.

Recommendation of the hospital to others

Table 14. Recommendation of hospital to others

Yes	No	NR	Total
693	44	80	817
94.03%	5.97%	9.79%	737

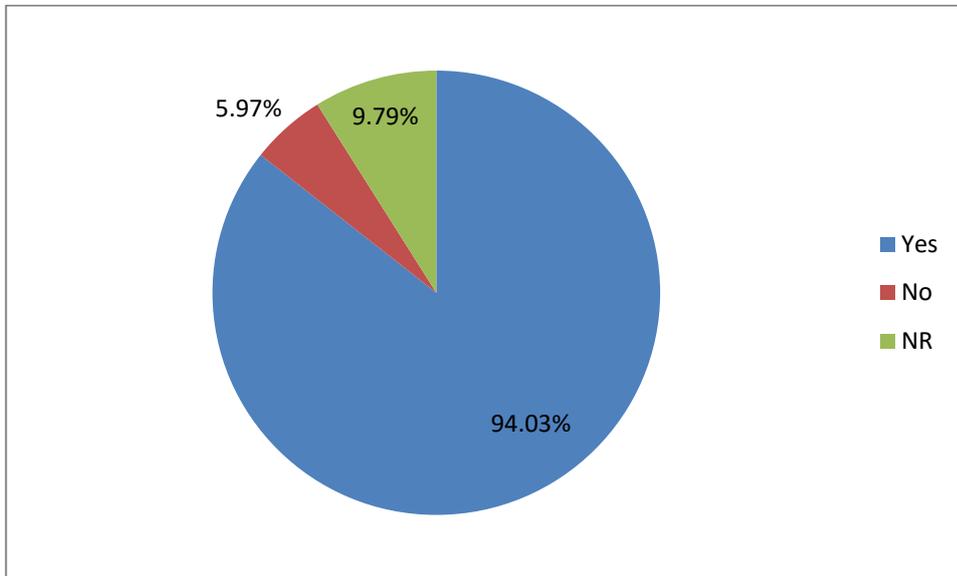


Fig. 27 Of all the respondents 94% opined that they would recommend AHI to others and only 5% did not feel so. 10% of the total patients did not respond to this question.

Statistical Index

Index	
< 82%	FM
82% - 86%	MM
87% - 91%	MR
92% - 96%	ME
>97%	CE

FM - Fails to meet requirements

MM - Minimally meets requirements

MR - Meets requirements

ME - Meets expectations

CE - Clearly exceeds expectations

Table 15. Findings on the statistical index:

DEPARTMENT	DELIVERABLE	RATING (on 4 point scale)	PERCENTAGE
Front Office	Convenience of the Admission process	3.39	85%
	Courtesy and Helpfulness	3.45	86%
Diagnostics	Clarity of Instructions	3.37	84%
	Courtesy & Helpfulness	3.41	85%
Nursing	Care and Attention	3.36	84%
	Promptness of nursing care	3.29	82%
	Professional care	3.32	83%
	Communication	3.14	79%
Physiotherapists	Care and Attention	3.5	87%
	Gave confidence in their skills	3.48	87%
Doctors	Care and Attention	3.58	89%
	Clarity regarding treatment and condition	3.54	89%
	Involvement in the treatment decisions	3.49	87%
Billing	Billing counselling	3.21	80%
	Interim bills	3.27	82%
	Promptness in final bill	3.25	81%
	Courtesy exhibited by TPA desk	3.31	83%
Dietetics	Information & guidance regarding diet	3.22	80%
F & B	Quality of food	3.07	77%
	Promptness of service	3.1	77%
Housekeeping	Regular cleaning of room	3.45	86%
	Courtesy & Helpfulness	3.45	86%
	Response Time	3.34	84%
Security	Professional behaviour	3.47	87%
Discharge	Convenience of discharge	3.21	80%
OSAT	Overall experience at AHI	3.32	83%

CHAPTER – 4

Discussion

Study findings indicate that more than 90% of the patients are satisfied with the admission process and have rated the admission staff as excellent and good on courtesy and helpfulness exhibited by them. The diagnostic services are found quite satisfactory and patients seem to be convinced by the staff behaviour to a great extent. The data suggests that the nursing care needs a lot of improvement as the more than 15% of the respondents have rated the nursing services average and below on various parameters evaluated.

More than 95% of the patients are found satisfied with the physiotherapy services rendered and the percentage of dissatisfied respondents is as low as 5%. It is recorded that more than 90% patients are happy and contented with the services and care rendered by the doctors and only 6% patients felt that they were not actively involved in the decisions made regarding their treatment. It may be because the patients are not visited by the surgical team post-operatively.

The findings also indicate that a significant percentage of patients / relatives are dissatisfied with the billing department and its services which is probably because the department is under staffed and the relatives are not given interim bills regularly. Also, the final bill settlement takes longer time than usual. The data revealed that the dietetics department needs to see a significant improvement as approximately 20% patients are not satisfied with the quality of food and the promptness of service provided by the cafeteria staff.

The data suggests that the housekeeping services are quite satisfactory and the concerned staffs are performing promptly and effectively. Merely 5% patients have rated the housekeeping services as average and below. It is also found that the discharge process is rated as inconvenient by nearly 13% respondents and the discharge process took little longer time than usual.

The data revealed that despite few gaps in some departments the overall satisfaction rates are good. The percentage of patients who have rated the overall experience at AHI as average and poor is as low as 5%. Also, 95% patients have agreed to recommend the hospital to others while only 5% did not feel so.

Hence, it is suggested that that rigorous training to the clinical, paramedical and support staff along with strict monitoring and control mechanisms can lead to increased staff motivation and can drive patient-centric attitude among them. Thus, a subsequent study on Customer Satisfaction Index analysis on similar parameters will see much improved results.

CHAPTER –5
Recommendations

The findings of the present study can be utilized to improve the health services delivery at AHIRC resulting in more satisfied patients and customers. The observations made during the study led me make the following recommendations to the respective departments.

1. Nursing services

- The nurse – patient ratio must be increased in order to provide efficient and quality care to the patients. The ratio should be 1:3 or 1:4 which currently is 1:9.
- The nurses should be given regular training on the communication and soft skills.
- The nursing staff across the board should be instructed not to speak with each other in Malayalam within the hospital premises. They should either communicate in Hindi or English that would enable effective and confident communication of the nurses with the patients.
- The nurses must be refrained from indulging in non – nursing activities and must be devoted to patient care.

2. Doctors

- Although the patients were happy with the treatment and service provided by the doctors but it is strongly recommended that the patients must be visited by the surgical team of doctors once in a day post the procedure which is not being practised so far.
- The floor doctors must be encouraged to have more interactive sessions with the patients and relatives through regular counselling and periodical visits.

3. Billing services

- More number of staff needs to be deployed in the billing department as because of under staffing the billing process gets delayed and this becomes a major reason behind patient dissatisfaction and patients giving negative feedback for the hospital services.

4. Dietary services

- The outsourced agency must be instructed to ensure timely delivery of food to the patients without compromising on the quality. There must be strict monitoring from the management simultaneously.
- The dietician must closely interact with the patients and include variety in the menu served to them.
- The kitchen must be provided with the appropriate cutlery and crockery which the department is presently deficient in so as to improve the service delivery.

5. Housekeeping services

- The contractual staff must be trained on the soft skills regularly with continuous monitoring and feedback on the same.
- The housekeeping and security supervisor must be instructed to ensure delivery of professional behaviour by their staff.

- Pest control treatment along with the closure of drains around the hospital with the support of BMC to combat the persistent problem of mosquitoes.

6. Other Recommendations

- The discharge must be pre decided and planned previous night so that the nurses get sufficient time to prepare the patient file and collecting pending reports avoiding confusion and miscommunication in morning hours, when giving patient care is most important.
- There should be strict monitoring and controlling mechanism in place for every department involved in patient care directly or indirectly in order to provide quality health service to the patients.
- Imparting soft skills, customer focused and process centric training to the front office, billing and support personnel and creating a culture of empathy and compassion for patients in the facility should be high on agenda.

Subsequent repeat study may be conducted to know the satisfaction level.

CHAPTER – 6
Conclusion

Patient satisfaction is a fundamental requirement for the clinical and financial success of any health care organization. The process of meeting or exceeding patient expectations, serves as an antecedent to patient loyalty. Satisfied patients are more likely to be loyal, to refer others to the organization, and to comply more with instructions, and will be less likely to complain or worse, initiate a malpractice suit.

One of the major challenges of the dynamic healthcare environment is keeping up with constantly escalating patient expectations. In order to provide good care and services to the patients admitted in the IPD and win their satisfaction, research- based interventions are needed in areas such as admission and billing department, dietary department and nursing care.

At AHIRC, most of the patients are satisfied with the overall quality of care and services rendered by doctors, surgeons and physiotherapists. One of the major concerns for the patients was the nursing care and the quality of food served to the patients. To make improvements in these areas, management needs to focus on the enhancement of quality of services and human resource management in the facility in the absence of which patients have to suffer from various problems.

Using the feedbacks in a systematic way can enhance the efficiency and patient satisfaction in the hospital's in-patient department. CRM (Customer relationship management) should be followed rigorously as 91% patients do comeback.

CHAPTER –7
Limitations

Despite our high participation rates, the study had its limitations.

- The study is subjected to the understanding, bias and prejudices of respondents.
- Although participants were assured of confidentiality, it may still be possible that they either over or underreported their level of satisfaction.
- Low response rates: this was due to the fact that new patients visiting the organization were reluctant to respond as they were less familiar with the services being provided at the hospital, so most of the respondents were follow up cases as they were more familiar with the services being offered.
- The questionnaires are more often filled in by the relatives who have otherwise not stayed with the patient in the hospital but visited to facilitate the discharge process and hence the responses are subjected to individual experiences.
- Limited sample size: DAMA, death and ICU discharges were not included in the study. Although most of the ICU discharges are DAMA and DOR discharges but small percentage of ICU discharges that are routine discharges could not be included in the study.

CHAPTER -8
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Annexure - Questionnaire

Patient Details	
Name:	_____
Date:	_____
AH No.:	_____
Email Id:	_____
Phone No.:	_____

How did you hear about us?

- | | | |
|--|---|--|
| <input type="checkbox"/> Asian Heart Doctors | <input type="checkbox"/> Family Doctors | <input type="checkbox"/> Corporate |
| <input type="checkbox"/> Website | <input type="checkbox"/> Hospital Employees | <input type="checkbox"/> Relatives/Friends |
| <input type="checkbox"/> Media | <input type="checkbox"/> Any other | |

4 Excellent (Far Above Expectations)	3 Good (Above Expectations)
2 Average (Below Expectations)	1 Poor (Far below Expectations)

Admission Process

Convenience of the admission process:

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
|----------------------------|----------------------------|----------------------------|----------------------------|

Courtesy and helpfulness exhibited by the admission Desk:

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
|----------------------------|----------------------------|----------------------------|----------------------------|

Diagnostics

Clarity of instructions:

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
|----------------------------|----------------------------|----------------------------|----------------------------|

Courtesy and Helpfulness:

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
|----------------------------|----------------------------|----------------------------|----------------------------|

Nursing Care

Care and Attention:

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> 4 | <input type="checkbox"/> 3 | <input type="checkbox"/> 2 | <input type="checkbox"/> 1 |
|----------------------------|----------------------------|----------------------------|----------------------------|

Promptness of nursing care:

4 3 2 1

Professional care:

4 3 2 1

Communication:

4 3 2 1

Physiotherapists

Care and Attention:

4 3 2 1

Gave me confidence in their skills:

4 3 2 1

Doctor's

Care and attention:

4 3 2 1

Clarity provided regarding my treatment and condition:

4 3 2 1

My involvement in the decisions made for my treatment:

4 3 2 1

Billing

Billing counselling:

4 3 2 1

Interim bills provided:

4 3 2 1

Promptness in preparation of final bill:

4 3 2 1

Courtesy & Helpfulness exhibited by the TPA desk:

4 3 2 1

Dietary Service

Information and Guidance provided regarding my diet:

4 3 2 1

Quality of food:

4 3 2 1

Promptness of service:

4 3 2 1

Housekeeping & Security

Regular cleaning of the room:

4 3 2 1

Courtesy & Helpfulness

4 3 2 1

Response Time:

4 3 2 1

Were the security guards professional?

4 3 2 1

Convenience of the Discharge process:

4 3 2 1

How would you rate your overall experience at AHI?

4 3 2 1

Would you recommend this hospital to others?

4 3 2 1

Highlights of your visit _____

Lowlights of your visit _____

Was there any particular employee with whom you were impressed?
