

Research Article

Essential criteria for quality OPD services as perceived by patients in a tertiary care hospital in Faridabad City

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ABSTRACT

Background: In a health care system, patient's perception about quality is of utmost importance to understand the relationship between quality of care and utilization of health services. It is also treated as an outcome of health care delivery. The current study was planned to improve the quality of services rendered at tertiary care facilities by utilizing the clients' perception regarding the services.

Methods: The present study was a hospital based, cross sectional type of descriptive study. Data collection was done through exit interviews among randomly selected new OPD attendees in a tertiary care hospital using a pre-structured, pretested Performa as the study tool. Likert's scale was used for assessment of client perception on quality of health services and overall satisfaction. Data was analyzed using SPSS 17.0.

Results: Present study was comprised of 402 subjects including 216 males and 184 females. It was observed that 93.9% subjects perceive quality of services as good and 87.8% clients were satisfied with the services rendered at the hospital. Good doctor behavior (51.7%), medicine availability (38.6%) and cleanliness (35.4%) in the hospital were found to be most important reasons behind the satisfaction of the clients as verbally expressed by them. Among dissatisfied (12.2%) study subjects, poor medicine availability (57.1%) and poor investigation facilities were considered (48.9%) as major reasons behind their dissatisfaction.

Conclusions: Majority of our patients were satisfied after availing health services at our hospital. We have identified a few deficient areas in terms of service delivery and the same will be bridged as early as possible in order to achieve universal patient satisfaction.

Keywords: Criteria, Quality, OPD, Patients, Tertiary care hospital

INTRODUCTION

As the health services are getting costlier in contemporary scenario, the assessment of quality of care has become very important. Traditionally, the assessment of quality of care being provided in the health sector has been based on application of professional standards. But,

nowadays it has been found important to integrate measurement of patient perception in assessing the quality of care.¹⁻⁴

Measurement of patient perception presents various advantages for evaluation such as: (i) A patient's opinion directly influences his or her compliance with treatment

and the continuity of the patient– physician relationship, and final outcome of the treatment.⁵⁻⁶ (ii) The measurement of patient perception provides information not only about positive aspects of health care delivery system but also about the negative aspects which needs to be focused for further improvement of the service.

Patient satisfaction reflects the extent to which his service standard expectations have been met and it reflects personal preferences more than rating of specific aspects of qualities. The improving client perception of service quality has become a major concern to health managers, policy makers and researchers in recent years.⁷

OPD is the first point of contact with a patient and serves as the window to any health care services provided to the community. Ultimately the knowledge about quality of services in OPD will serve two purposes: identifying areas of improvement in quality of services so offered, and highlighting the need for corrective actions. Therefore the present study was planned and conducted in a tertiary care hospital in Faridabad to assess quality of OPD services rendered by it.

METHODS

The present study was a hospital based cross sectional study type of descriptive study. It was conducted in a tertiary care hospital in Faridabad city from December 2013 to May 2014. The hospital selected for the present study is 450 bedded, located in rural setting, managed by a trust & serving mainly rural population in and around this region .The hospital has all major clinical departments and super specialty departments like Cardiology, Neurology, Nephrology and Cardiothoracic Surgery. The daily OPD attendance is around 700-800 patients.

The study subjects were selected from new OPD attendees (new OPD attendee was one who was attending the OPD for the 1st time for the presenting complaint) using convenient sampling. Subjects who were excluded from the study were health staff attending OPD, and those who came for follow up.

The data collection was done in the hospital twice a week through exit interviews. Questionnaire developed by Rao KD, et al (8) was used for this purpose. This scale contains 16 questions regarding patient's perception about quality of services rendered at the hospital and 3 questions regarding the overall general patient satisfaction. The pretesting of study tool was done by interviewing 10 patients (fulfilling the entire inclusion criterion). Cronbach's Alpha coefficient was 0.72.

The study included a total sample size of 402 subjects. Each eligible subject was well explained about the purpose of the study by the investigator and an informed consent was obtained, prior to inclusion. The data was entered into Microsoft-Excel 2007 and after cleaning it

was subsequently analyzed using SPSS 17.0. Results were expressed as percentages and proportions. Chi-square test was applied to test gender difference in perceived quality and satisfaction among study subjects. P value less than 0.05 was considered statistically significant.

RESULTS

The present study was conducted among 402 subjects including 216 males and 184 females to assess the quality of services rendered at a tertiary care hospital and utilizing this information for the improvement in the quality of services. In addition, this study also tried to identify factors associated with perception of service quality and overall satisfaction of responders.

Out of total 402 subjects covered in the study, 382 subjects were below 60 years of age and rests 20 were above 60 years. Among all the study subjects, 292 were literate and 110 were illiterate. Marital status suggests that 324 subjects were married and rest 78 were unmarried, divorced or separated. Regarding occupation 86 were engaged in any kind of occupation and 316 were non-working (unemployed, students or housewives) (Table 1).

Table 1: Demographic profile of study subjects (N=402).

Sr. No.	Socio-demographic factors	N
1	Age	
	11-20 years	46
	21-4-30years	192
	31-40 years	78
	41-50 years	37
	51-60 years	29
	61 years & above	20
2	Sex	
	Male	216
	Female	186
3	Literacy level	
	Illiterate	110
	Literate	292
4	Marital status	
	Married	324
	Unmarried and others	78
5	Occupation	
	Non working	86
	Working	316

In the present study, the perception of quality of health services rendered at outpatient department in the hospital consisted of five dimensions. These dimensions were medicine availability, medical information, staff behavior, doctor behavior, and hospital infrastructure.

The overall perception of quality of health services was considered as good by 93.9.0% of the respondents (Table 2).

Table 2: Overall perceived quality among study subjects.

Gender	Perceived quality		Total	P-Value
	Good	Bad		
Male	199(92.7%)	17(7.3%)	216(100%)	0.303
Female	177(95.5%)	9(4.5%)	186(100%)	
Total	376(93.9%)	26(6.1%)	402(100%)	

Current study observed that 87.8% of the respondents were satisfied with the services rendered at the hospital whereas remaining 12.2% were not satisfied with the service delivery of the hospital (Table 3).

Table 3: Overall satisfaction among study subjects.

Gender	Overall satisfaction		Total	P-Value
	Present	Absent		
Male	17(7.3%)	199(92.7%)	216(100%)	0.496
Female	9(4.5%)	177(95.5%)	186(100%)	
Total	353(87.8%)	49(12.2%)	402(100%)	

The strict supervision by hospital administration, regular CME, better interdepartmental coordination's were some of the important factors behind the doctor behavior. The doctors prescribed generic drugs to ensure better medicines availability. The other important reasons for satisfaction of the patients tabulated below (Table 4).

Table 4: Reasons behind satisfaction regarding the services rendered in the hospital (Multiple responses allowed).

Sr. No.	Reason behind the satisfaction	N =353	%
1	Good doctor behaviour	180	51.1
2	Medicine availability	136	38.6
3	Cleanliness in hospital	124	35.4
4	Good sitting arrangement	68	19.3
5	Low cost of treatment	53	15.0
6	Better facilities compared to other hospitals	63	17.8
7	Less time consuming process	36	10.1
8	Good staff behaviour	40	11.3
9	Nearer to the residence	39	11.1
10	Adequate drinking water supply	26	7.3

% is calculated from total satisfied patients=353

Also reasons behind the lack of satisfaction of the OPD attenders were investigated and it was found that poor medicine availability was the main reason behind the lack of satisfaction of 57.1% respondents followed by poor investigation facilities (48.9%), irrelevant referral to the

other hospitals (40.8%), poor doctor behavior (33.3%), time consuming process in hospital (32.7%) and poor staff behavior (12.2%) (Table 5).

Table 5: Reasons behind dissatisfaction regarding the services rendered in the hospital (Multiple responses allowed).

Sr. No.	Reason behind the dissatisfaction	N =49	%
1	Poor medicine availability	28	57.1
2	Poor investigation facilities	24	48.9
3	Poor doctor behaviour	8	33.3
4	Irrelevant referral to other hospitals	20	40.8
5	Time consuming process in hospital	16	32.7
6	Poor staff behaviour	6	12.2

% is calculated from total dissatisfied patients=49

DISCUSSION

Theme of the current study touches a very important aspect of health services i.e. delivery of quality health services. We attempted to assess the quality of services rendered at a tertiary care hospital with a view to improve them by identifying the gaps and bridging them. In addition, this study also tried to identify factors associated with perception of service quality and overall satisfaction of responders.

The result of the present study is quite comparable to study conducted by Quereshi et al where 93.9 % of respondents considered perception of quality as excellent, good or average.⁹ The socio-demographic variable like sex of study subjects was found to be not significantly associated with the perception of service quality. Various other studies also show similar findings. Hansen et al conducted a cross sectional study in 2004 to identify factors associated with client's perceptions regarding the quality of primary health care services in Afghanistan.¹⁰ The sex of the clients and others socio-demographic were not found to be associated with perceived quality of service in that study. However, in India, this field has not been explored by researchers so far and the research in this context should be encouraged for the betterment of health services.

The satisfaction levels of patients are different in different studies. Jawahar SK in his study observed that 95% of patients were satisfied with the services offered in the concerned hospital.¹¹ Kulkarni et al in a study found that only 75% of the clients were satisfied with overall services available in the hospital. In the present study, no socio-demographic variable like sex was found to be significantly associated with the overall satisfaction of the clients.¹²

From the various studies, it has been observed that no consistent pattern of association of socio-demographic factors with client's satisfaction has been established so far. Weiss mentions that it becomes very difficult to pin down the relationship between socio-demographic factors with perception of quality and client's satisfaction.¹³ This may be due to the fact that the different studies had varied broadly in nature of particular sample studied and specific package of background characteristics examined. A particular scale used may also have affected perceived relationship.

Various reasons behind the satisfaction of the OPD attendees were investigated by analyzing multiple verbatim responses of the respondents. Good doctor behaviour (51.7%), medicine availability (38.6%) and cleanliness in the hospital (35.4%) were found to be most important reasons behind the satisfaction of the clients as verbally expressed by them. Various studies conducted by Kulkarni et al and Prasanna KS et al support this finding.^{12,14}

Prasanna KS et al also found that patient were not satisfied regarding the investigation facilities of the outpatient department of Father Muller Medical College Hospital, Mangalore.¹⁴

Despite the instruction of hospital administration, the various doctors prefer branded drugs. The fresh junior doctors were found to be in habit of prescribing branded drugs instead of generic drugs. The radiological investigations like ultrasound, MRI etc. were found to be costly by the patients. The variations in perception regarding doctor behaviour and staff behaviour are very subjective. These perceptions may be varied of different socioeconomic and cultural background of patients.

The study recommends the monthly orientation of junior doctors to prescribing more generic drugs. The branded drugs should be used when there is on alternative. The doctors should give advice on the disease prevention along with the treatment. The health care staff should explain the prescriptions to the patients also. These measures can be helpful in improving the quality of OPD services of other hospitals also.

This study has several strengths. First, we have conducted this study to improve the quality of services rendered at tertiary care center in Faridabad. To our knowledge, such domain has not been analyzes by experts of the field in the city of Faridabad. Second, paucity of literature also warranted this study. Third, data collection was done by single author to reduce inter observer variation.

On the other hand, there have been a few limitations as well. First, the current study catered only the OPD patients. To evaluate actual quality of services it should have included indoor and emergency services also. Second, hospital was considered as a single unit so specialty wise services could not be compared. Third, we

did not use verbatim analysis rather we converted responses of open ended questions into closed ones. We calculated most common responses out of them. Verbatim analysis should have been more fruitful. Fourth, the findings emerging out of the current study cannot be generalized or extrapolated to all the hospitals of India.

CONCLUSIONS

To conclude, majority of our patients are satisfied after availing health services. A small fraction of patients seem dissatisfied with our health care delivery. We have identified a few deficient areas in terms of service delivery and the same will be bridged as early as possible in order to achieve universal patient satisfaction at our hospital.

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