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# Satisfaction Level of Patients Visiting Outpatient Department in a Tertiary Care Hospital of Delhi - A Cross-Sectional Study

## Abstract

**Introduction:** Patient satisfaction is considered to be one of the important parameters in the assessment of quality of healthcare and overall performance of a healthcare facility.

**Objectives:** To assess the utilization of health services and patient satisfaction for services provided by this tertiary care center.

**Material and Methods:** The present study was a hospital-based, cross-sectional study conducted in a tertiary care center situated in South Delhi from March 9 to June 8, 2016 (3 months). Patients of age >18 years visiting the OPD who gave their informed written consent were interviewed by using a pre-tested, semi-structured questionnaire. The responses of patients were divided into three categories-satisfied, uncertain and dissatisfied.

**Statistical Analysis:** The surveyed questionnaires were collected and coded in an MS Excel database and analyzed by using the SPSS statistical package, version 21.0. Descriptive statistics were performed on the sociodemographic data.

**Results:** A total of 313 patients had participated in the present study. Most (53.4%) of the patients were of age group 21-40 years. Majority (60.1%) of them were male. Nearly 80% were literate. It was found that 89.9% patients were satisfied with the overall behavior of hospital staff. It was revealed that 87.4% of the patients were satisfied with the good healthcare services provided by the hospital. 7.1% patients were dissatisfied with the healthcare services. They found insufficient healthcare facilities in this hospital. 5.2% patients were uncertain.

**Conclusion:** Dissatisfaction among some patients triggers an alarm for hospital management to work on those components so that quality health services can be provided to all patients to make them satisfied. Periodic patient satisfaction survey should be institutionalized to provide feedback for continuous quality improvement.

**Keywords:** Patient satisfaction, Outpatient department (OPD), Quality care, Tertiary healthcare.

## Introduction

Patient satisfaction is considered to be one of the important parameters in the assessment of quality of healthcare; hence, healthcare facility performance can be best assessed by measuring the level of patient satisfaction. Globally, healthcare quality is an emerging issue.<sup>1</sup> A few decades back, quality of health services was based on professional practice standards only but now, entire scenario has changed. In the current era, quality of healthcare system depends on patients' feedback or, level of their satisfaction.<sup>2</sup> Patient satisfaction has been defined as "the degree of congruency between a patient's expectations of ideal care and his/ her perception of the real care(s) he/ she receives."<sup>3</sup>

It is a multidimensional aspect. It represents a vital key marker for the quality of healthcare delivery. On international platform, it is an issue of utmost consideration for delivering quality healthcare services, which need to be regularly updated. Assessment of patient satisfaction is one of the criteria to judge clinical efficiency, healthcare delivery system and overall quality services of that healthcare system. It is through this feedback mechanism that if any loophole found in system, that can be improved at its earliest point.<sup>4</sup>

Outpatient department (OPD) is the first point of contact of the hospital with patients. From entry of a patient up to their exit, they have to come across at various points such as registration centers, OPD rooms of concerned clinicians, investigation centers and pharmacy centers. The care in the OPD is believed to indicate the quality of services of a hospital and is reflected by patient's satisfaction with the services being provided. The patient satisfaction is influenced by both clinical as well as non-clinical factors, such as quality of clinical services provided, behavior of doctors and other health staff, hospital services, physical comfort, respect for patient preferences, and communication to the patient. Mismatch between patient expectation and the service received is related to decreased satisfaction.<sup>5</sup> Therefore, measuring patient perspectives gives them a voice, which can make public health services more responsive to people's needs and expectations.<sup>6,7</sup> Patients' feedback is necessary to identify problems that need to be resolved in improving the health services. Even if they still do not use this information systematically to improve care delivery and services, this type of feedback triggers a real interest that can lead to a change in their culture and in their perception of patients.<sup>8</sup> A study of this nature is critical to public appreciation of the quality of healthcare operating environment; hence, this study was aimed at assessing patients' satisfaction visiting outpatient departments of this tertiary care center. Data generated from the study could be used by hospital administrators to address gaps in human resources, logistics, infrastructures and other internal procedures toward ensuring an effective healthcare delivery system.

## Materials and Methods

### Setting and Study Design

The present study was a hospital-based, cross-sectional study conducted in a tertiary care center situated in South Delhi. Safdarjung Hospital is one of the largest hospitals of India. Until the inception of All India Institute of Medical Sciences in 1956, Safdarjung Hospital was the only tertiary care hospital in South

Delhi. It is a 1600-bed multi-specialty hospital offering high-quality healthcare facilities for patients free of cost. People living in Delhi along with those from neighboring states such as Haryana, U.P., Bihar and Rajasthan avail services provided in this hospital. It functions under the aegis of MoHFW. In 2013, total OPD attendance (including OPD as well as IPD) was 147,797.<sup>9</sup> The collection of data was made during March to June 2016.

### Sample Size and Study Population

On the basis of previous studies of patient satisfaction and quality of care and using an appropriate statistical formula for estimating minimum sample size in descriptive health studies ( $n=pq/d^2$ ), a sample size of 313 was calculated to detect level of satisfaction among the study participants. The prevalence used for sample size calculation was 73.3%.<sup>10</sup> The sample size was inflated by 10% to take care of non-response, incomplete responses and refusals. Patients of age >18 years (new or referred patients) visiting the OPD of Safdarjung Hospital, who gave their informed written consent, were included. Patients or relatives working in the hospital, pediatric patients and those who were unable to speak were excluded from the study. The selection of patients was through non-probability convenient sampling method.

### Study Tool

A semi-structured, interviewer administered questionnaire was used in the present study. This questionnaire was prepared on the basis of extensive literature search and in-depth interviews of the patients attending the hospital. The questionnaire was standardized by a small-scale pilot test on 30 patients (taking 10% of the estimated sample size). It was based on assessing level of satisfaction of patients at four critical points of health delivery system-at the registration counter, in the concerned OPDs, at the investigation centers and at the pharmacy. At these four points, various parameters were judged to assess their satisfaction level after getting their informed verbal consent. The questionnaire consisted of several questions and the responses of patients were divided into three categories-satisfied, uncertain and dissatisfied. The prescribing doctor and the supporting staff were largely kept unaware of the survey, except in unavoidable circumstances, to avoid the bias in their behavior with the patients. In order to maintain complete confidentiality, no names were recorded on the questionnaire. Prior approval of the ethical board was obtained before beginning the survey.

## Data Analysis

The surveyed questionnaires were collected and coded in an MS Excel database and analyzed by using the SPSS statistical package, version 21.0. Descriptive statistics were performed on the sociodemographic data.

## Results

A total of 313 patients were included in the present study.

From Table 1, most (53.4%) of the patients were of age group 21-40 years. Majority (60.1%) of them were male. Nearly 80% were literate.

Table 2 shows that about 60% patients were dissatisfied with the greater delay in getting OPD slips due to long queues. Nearly 74% patients were satisfied with the cooperative and polite nature of staff. 69.3% patients were advised properly where to go for their consultation by the staff.

It is evident from Table 3 that consultation time was satisfactory for 88.1% of patients while 1.9% were uncertain and 9.6% were dissatisfied with the amount of time given to them by the doctor. 82% of the patients were satisfied that the doctor explained to them the nature of their disease. Nearly 89% patients told that

doctor was polite and cooperative and 86.1% patients were given adequate privacy during their examination. In 83% of patients, dosage and time of medication was explained by the Doctor.

**Table 1. Basic Demographic Status of the Study Participants (N=313)**

Age Group (in completed years)	N (%)
<20	27 (9)
20-29	80 (25.7)
30-39	86 (27.7)
40-49	45 (14.5)
50-59	40 (13.2)
60-69	27 (8.7)
70 and above	4 (1.3)
Sex	
Male	187 (60.1)
Female	124 (39.9)
Educational status	
Illiterate	63 (20.3)
Primary school	46 (14.8)
Middle school	33 (10.6)
Secondary school	54 (17.4)
Senior secondary school	55 (17.7)
Graduate	53 (17)
Postgraduate and above	1 (0.3)
Total	313 (100.0)

**Table 2. Distribution of Study Subjects on the Basis of Level of Satisfaction at the Registration Counter (N=313)**

Question	Dissatisfied N (%)	Uncertain N (%)	Satisfied N (%)
There was not much delay in getting OPD slips due to long queues	189 (60.4)	12 (3.83)	112 (35.8)
Staff at registration counter were co-operative and polite	60 (19.2)	22 (7)	231 (73.8)
Staff described properly where to go for consultation	65 (17.9)	10 (3.2)	217 (69.3)

**Table 3. Distribution of Study Subjects according to Their Level of Satisfaction regarding the Consultation with the Doctor in the Concerned OPDs (n=313)**

Question	Dissatisfied N (%)	Uncertain N (%)	Satisfied N (%)
Are you fully satisfied with the consultation time given by the doctor?	30 (9.6)	6 (1.9)	273 (88.1)
The doctor explained the nature of illness and treatment options	21 (6.8)	33 (10.6)	255 (82)
The doctor was polite and cooperative	26 (8.4)	8 (2.6)	277 (89.4)
The subject has no doubts about ability of doctor	10 (3.2)	9 (2.9)	292 (93.9)
Adequate privacy was given while examination	18 (8.5)	22 (7.1)	271 (86.1)
Dosage and time of medication was explained by the doctor	40 (12.9)	10 (3.2)	261 (83)

**Table 4. Distribution of Study Subjects according to Their Level of Satisfaction during Investigation Procedures at the Investigation Center (N=119)**

Question	Dissatisfied N (%)	Uncertain N (%)	Satisfied N (%)
The hospital staff was cooperative while doing the investigation	11 (9.2)	2 (1.6)	106 (89)
The process of investigation was comfortable to me	7 (5.8)	8 (6.7)	104 (87.3)
None of the hospital staff at the investigation center misbehaved with me during the process	9 (7.5)	3 (2.5)	107 (89.8)

**Table 5. Level of Satisfaction of the Study Subjects at the Pharmacy Center (N=264)**

Question	Dissatisfied N (%)	Uncertain N (%)	Satisfied N (%)
Proper explanation of the dosage of medicines by the pharmacist	7 (3)	35 (13.3)	222 (83.7)
Staff at pharmacy was cooperative and polite	22 (8.2)	6 (2.2)	236 (89.3)
There was not much delay in getting medicines	22 (8.3)	6 (2.3)	236 (89.4)

**Table 6. Satisfaction Level of Patient toward Behaviour of Hospital Staff**

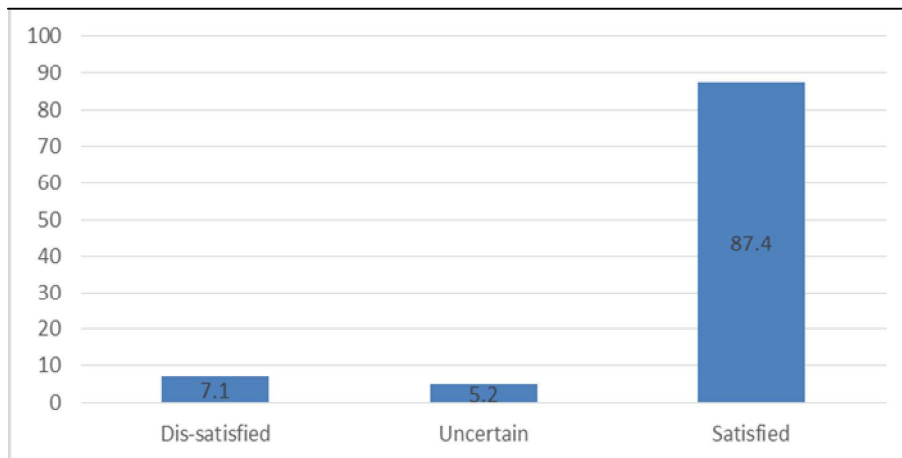
Satisfaction Level	Registration Counter (N=313)	Investigation Center (N=119)	Pharmacy (N=264)	Overall Behavior of staff
Satisfied (%)	91.6	89.1	86	89.9
Dissatisfied (%)	8.4	10.9	14	10.1

Table 4 reveals that at the investigation center, 89% patients were satisfied with the nature of the investigating staff, whole process was comfortable in 87% of patients. 7.5% of patients reported that hospital staff misbehaved during the process.

Table 5 shows that in 83.7% of patients' dosages of medicines were properly explained by the pharmacist

while 13.3% patients were uncertain about this. Staff was cooperative and polite as said by 89.3% patients. 8.3% of patients told that there was more delay in getting medicines at the pharmacy level.

From Table 6, it is clear that 89.9% patients were satisfied with the overall behavior of hospital staff.



**Figure 1. Level of Satisfaction toward Healthcare Services Provided by this Hospital (N=313)**

From Fig. 1, 87.4% of the patients were satisfied with the good healthcare services provided by the hospital. 7.1% patients were dissatisfied with the healthcare services. They found insufficient healthcare facilities in this hospital. 5.2% patients were uncertain.

**Discussion**

In the present study, we have tried to assess the satisfaction level of patients at four critical points in the hospital, i.e., at the registration counter, in the OPDs, investigation centers and at the pharmacy centers. Patient's feedback is an important tool to assess the healthcare services provided by the hospital and to improve health services, if any loopholes are present. Ultimately, the whole process will lead to improvement in quality of the health services.

As regards sociodemographic status of the patients, most (53.4%) of the study participants were 20-39 years age group. 10% patients belonged to 60 years and above. 39.9% were female, rest were male. Nearly 20% patients were illiterate. A similar study conducted at Ambala<sup>11</sup> revealed that the mean age of the respondents came out to be 39 years. Out of total, 66.4% of the study population comprised of males. Over 87% of the respondents were more than 30 years old. Majority of the respondents (44%) were illiterate.

It was found that about 60% patients were dissatisfied with delay in getting OPD slips due to long queues. Nearly 74% patients were satisfied with the cooperative and polite nature of staff. 69.3% patients were advised properly where to go for their consultation by the staff. In the OPDs, the consultation time was satisfactory for

88.1% of patients while 1.9% were uncertain and 9.6% were dissatisfied with the amount of time given to them by the doctor. 82% of the patients were satisfied that the doctor explained to them the nature of their disease. 70.7% of the patients said that preventive measures were explained to them. At the investigation center, 89% patients were satisfied with the nature of the investigating staff, whole process was comfortable in 87% of patients. 7.5% of patients reported that hospital staff misbehaved during the process. At the pharmacy center, 83.7% of patients were properly explained by the pharmacist about dosage of drugs while 13.3% patients were uncertain about this. Staff was cooperative and polite as said by 89.3% patients. 8.3% of patients told that there was much delay in getting medicines at the pharmacy level.

In the current study, it is evident that 89.9% patients were satisfied with the overall behavior of hospital staff. On the contrary, lower level of satisfaction was noted by a similar study done at Ambala<sup>11</sup> in which it was seen that 66.8, 50, 59, 60 and 45% were satisfied regarding behavior of the doctor, registration clerk, supporting staff, pharmacist and nurses and the results were less than in a study by Sultana et al.<sup>12</sup> (95.5, 94.5 and 93.3%). On the other hand, a study conducted by Ariba et al.<sup>13</sup> in 2007 in a Nigerian teaching hospital, found that most of the respondents (38.8%) were displeased with the overall quality and attitude of the healthcare providers.

The findings of the present study reveal that 79.9% of the patients were satisfied with the good healthcare services provided by the hospital. 6.5% patients were dissatisfied with the good healthcare services while 0.6% were strongly dissatisfied. They found insufficient healthcare facilities in this hospital. 5.2% patients were uncertain. In a similar study at Ambala<sup>11</sup>, it was found that the overall satisfaction of patients with services received came out to be (79.3%) which was also similar to the figures reported by Deva et al.<sup>14</sup> in Kashmir (80%), Kumari et al.<sup>15</sup> in Lucknow (81.6%) and Qureshi et al.<sup>16</sup> in Kashmir (72%) whereas it is lower than as reported by Bhattacharya et al. (88%)<sup>17</sup>, SK Jawahar et al.<sup>17</sup> in India (90-95%) and Ofili and colleagues (83%)<sup>18</sup> in Benin city but higher than those reported from Mahapatra et al.<sup>19</sup> in Andhra Pradesh (63%).

### Limitation

Since the findings of the present study are based only on level of satisfaction among OPD patients, for better feedback, indoor patients should also be assessed. And the responses obtained from the patients depend upon their own personality, views, socioeconomic factors, privacy, and freedom of expression. Response could be

different when patients are interviewed outside the hospital. Therefore, to get proper feedback from service users, further study need to be carried out taking care of other influencing factors including larger sample size.

### Conclusion

Overall, majority of the patients were satisfied with the healthcare delivery system of the tertiary care hospital. For further improvement of services, hospital management should focus on quality of care where all patients should feel satisfied and many should be happy with the services. For this, the number of OPD counters should be increased to handle the load of patients and to decrease the amount of time spent at the counter due to longer queues. Online registration can be encouraged to decrease total time spent at hospital. A separate enquiry counter may be instated at every floor in the OPD for guidance of those who cannot locate doctors' rooms, place of investigation or may have any other queries. Periodic patient satisfaction and experience survey should be institutionalized to provide feedback for continuous quality improvement.

**Conflict of Interest:** None

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