A STUDY ON SATISFACTION OF PATIENTS ATTENDING OPD OF AGARTALA GOVERNMENT MEDICAL COLLEGE

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ABSTRACT: BACKGROUND: Patient's satisfaction is a measure of the quality of services offered by a hospital. **OBJECTIVES**: To determine the level of satisfaction of patients attending OPD of AGMC & GBP Hospital, to identify the determinants of satisfaction and to formulate recommendations for improvement. **METHODOLOGY**: A hospital based cross-sectional study was conducted during 17th August to 17th September 2013 using a pretested structured interview schedule among 515 patients attending OPD of AGMC and GBP Hospital recruited by concurrent sampling and ensuring probability proportionate to size representation based upon previous three month's turnover. STATISTICAL **ANALYSIS:** Data entry and analysis were performed in computer using SPSS 15. Descriptive statistics and Chi-square test were used for presenting data and testing the significance. **RESULTS**: Cleanliness of OPD was satisfactory to 54.2% patients, 54.8% were satisfied with ventilation, 48.5% were satisfied with queuing and 49.9% were satisfied with the sitting facility of OPD. Clinical care was felt satisfactory by 75.9%, 70.5% were satisfied with the explanation of the disease & prescription given by the doctor, 72.4% patients did not get any medicine from the hospital and 17.5% patients were unaware about the enquiry services. Toilet was unsatisfactory to 26.6%, drinking water was unsatisfactory to 24.7% and the services of RSBY (Rastriya Swasthya Bima Yojana) help desk were unsatisfactory to 50% patients. Overall services of OPD were felt satisfactory by 57.5% patients and 30.3% felt it average. **CONCLUSION**: Cleanliness, ventilation, sitting facility, enquiry services, drinking water, toilet, RSBY help desk etc. of AGMC OPD require improvement. KEYWORDS: Patient's satisfaction, OPD, Hospital.

INTRODUCTION: Govinda Ballabh Pant Hospital is the largest health care centre of Tripura. Since inception in 1961, it is serving as the main state referral hospital. The campus is spread over an area of 40 acres in the northern part of Agartala city. Based up on this hospital Agartala Government Medical College was established in 2005. It attracts patients from Mizoram, lower Assam and neighboring Bangladesh also. The Out Patient Department provides services through 13 different specialties along with Pathological, Microbiological, Biochemical, Radiological and various other investigations. During 2012-13 more than 523537 patients attended this OPD. With the advancement of medical sciences it's services are also modernized from time to time keeping in mind the need and expectation of the people by means of commissioning modern equipment and developing human resource for delivering state of art services. In earlier days satisfaction of patients attending hospital was never given much importance. But with the upcoming of other public and private sector hospitals with modern facilities in Agartala and rising consumer awareness and rights, patient's satisfaction can no longer be ignored. Periodic assessment of patient's satisfaction and searching for the scope of improvement in service delivery is essential for maintaining good acceptability in any health care set up. In recent past few untoward incidences regarding patient care took place in this hospital, which

has put a question mark in the satisfaction of patients attending this hospital. But no study has been conducted yet for knowing the level of satisfaction of patient's attending Agartala Government Medical College & GBP Hospital. In this context the present study was designed to take an account of the consumer's perspective and to identify the determinants of satisfaction of patients attending AGMC and GBP Hospital, so that recommendations can be formulated for making the hospital more hospitable.

METHODOLOGY: It was a hospital based cross-sectional study conducted in the Out Patient Department (OPD) of Agartala Government Medical College & Gobinda Ballabh Pant (AGMC & GBP) Hospital during 17th August to 17th September 2013 among 515 patients. Minimum sample size requirement for this study was determined to be 422 considering maximum variability in the level of patient's satisfaction at 95% confidence, tolerating 5% allowable error and including 10% extra for incomplete responses.¹ But it was possible to enroll as many as 515 OPD attendees including guardians in cases of minor patients during the study period. Patient's satisfaction was defined as subjective contentment of the patients / respondents while seeking health care. Illiterate persons were those, who did not have formal schooling. Primary educated were those, who had any level of education up to standard VIII. Secondary educated were those, who had any level of education starting from standard VIII up to standard XII. A pretested, structured interview schedule containing 23 questions including socio-demographic and satisfaction related questions was used for data collection. Satisfaction was assessed by using Likert's five rating scale (1 = very much dissatisfied, 2 =dissatisfied, 3 = neutral / so so, 4 = satisfied, 5 = very much satisfied). Face validity and content validity of the interview schedule was evaluated by pilot testing up on 15 patients and 3 epidemiologists were also asked to evaluate the clarity and representativeness of the questionnaire regarding patient's satisfaction. The factor analysis was performed for evaluating construct validity of the schedule. Evaluation of internal consistency of the sub-scales for the patient's satisfaction questionnaire was carried out by calculating Cronbach Alpha coefficient. Larger Cronbach Alpha values indicated higher consistency of some of the questions for which sub-scales were constructed. Questions that were reducing internal consistency of the interview schedule were excluded. The repeatability of interview schedule was evaluated by using the Intra-class correlation coefficient. During the study period it was possible to approach 547 patients, 23 patients were attending emergency department; 6 Patients were not willing to participate in this study and 3 patients were considered unfit to make any valid statement so were excluded from the study. OPD attendees were recruited by concurrent sampling ensuring probability proportionate to size representation in the study sample from each of the OPD based up on last three month's turnover. Patients aged 18 years and above and the accompanying guardians in case of minors were approached after they have completed their medical checkup in the OPD and informed consent was sought for participation in this study. The consenting participants were interviewed confidentially. Female medical social workers from the Department of Community Medicine were present while interviewing the female respondents. Equal time was spent in interviewing each respondent. Data were recorded in the pretested, structured interview schedule on the spot and later on entered in computer using SPSS 15. Descriptive statistics like mean & standard deviation and Pearson's χ^2 test were used. P value < 0.05 was considered statistically significant.

Table 1: Socio-demographic profile of the patients attending OPD of AGMC				
Variables	Sub-groups	Number	Percentage	
	18 - <35 yr.	256	49.6	
Age	35 - <60 yr.	210	40.8	
	≥ 60 yr.	49	9.5	
Sex	Male	245	47.6	
Jex	Female	270	52.4	
Residence	Urban	265	51.5	
Residence	Rural	250	48.5	
	Illiterate	73	14.2	
Litorogy	Primary	195	37.9	
Literacy	Secondary	186	36.1	
	Graduate & above	61	11.8	
	Service	85	16.5	
	Business	74	14.4	
	Housewife	231	44.9	
Occupation	Student	43	8.3	
	Retired	17	3.3	
	Unemployed	27	5.2	
	Labourer	38	7.4	

RESULT: Total 515 subjects got enrolled in this study and the response rate was 94.15%.

Table 1 shows that 49.6% of the OPD attendees were aged between 18-35 years, 52.4% were females, 44.9% were housewives, 51.5% were from urban area and 37.9% were primary educated. Majority i.e. 15.3% of the patients attended OPD for the problems of ear, nose and throat, 12% for medical, 11.7% for Orthopedic, 11.1% for Surgical, 10.7% for eye and only 0.4% for surgical problems.

Table 2: Satisfaction of patients regarding the toilet, drinking water and RSBY help desk				
Variables	Patient's perception	Number	Percentage	
	Very much unsatisfactory	34	6.60	
Toilet	Unsatisfactory	137	26.60	
	So so	46	8.90	
	Satisfactory	75	14.60	
	Very much satisfactory	04	0.80	
	Do not Know	219	42.50	

	Very much unsatisfactory	31	6.00
	Unsatisfactory	127	24.70
Duinling	So so	44	8.50
Drinking water	Satisfactory	90	17.50
	Very much satisfactory	03	0.60
	Do not Know	220	42.70
	Very much unsatisfactory	07	1.36
	Unsatisfactory	22	4.27
Eu autima a unitar a	So so	44	8.54
Enquiry services	Satisfactory	151	29.32
	Very much satisfactory	06	1.17
	Do not Know	285	55.34
	Very much unsatisfactory	04	0.80
	Unsatisfactory	25	4.90
RSBY help desk	So so	25	4.90
	Satisfactory	63	12.20
	Very much satisfactory	04	0.80
	Not Applicable	394	76.50

Table 2 shows that 42.5% patients were unaware about the toilet facility in the OPD, 26.6% found it unsatisfactory and 14.6% found it satisfactory. Regarding drinking water facility in the OPD, 42.7% patients were unaware about it and 24.7% found it unsatisfactory. Regarding enquiry services, 55.34% respondents were unaware about it and 29.32% found it satisfactory. Regarding RSBY, 23.5% patients were the beneficiaries but only 50% of them were satisfied with the services of RSBY help desk. About working hour of the OPD, 44.5% of the patients had no idea, 30.5% knew the correct timings and 25% did not know the correct time. Regarding enquiry services, 44.7% attendees knew that there was an enquiry counter, 37.9% knew that there was no enquiry counter and 17.5% had no idea whether there was any enquiry counter in the OPD.

Table 3: Satisfaction regarding cleanliness, ventilation, queuing and sitting facility at waiting space of the OPD						
Variables	iables Patient's perception Number Percenta					
Cleanliness	Very much unsatisfactory	04	8.00			
	Unsatisfactory	73	14.20			
	So so	146	28.30			
	Satisfactory	279	54.20			
	Very much satisfactory	13	2.50			

	Very much unsatisfactory	12	2.30
	Unsatisfactory	111	21.60
Ventilation	So so	98	19.00
	Satisfactory	292	54.80
	Very much satisfactory	12	2.30
	Very much unsatisfactory	11	2.10
	Unsatisfactory	98	19.00
Queuing	So so	152	29.50
	Satisfactory	250	48.50
	Very much satisfactory	04	0.80
Sitting facility	Very much unsatisfactory	18	3.50
	Unsatisfactory	113	21.90
	So so	115	22.30
	Satisfactory	257	49.90
	Very much satisfactory	12	2.30

Table 3 shows that 54.2% patients were satisfied with cleanliness, 54.8% were satisfied with ventilation, 48.5% were satisfied with the queuing and 49.9% were satisfied with the sitting facility of OPD. Regarding first come first serve, 74.35% attendees found it satisfactory and 80.4% of the OPD attendees found the doctors and other service providers in place to serve them. 75.9% of the patients were satisfied with the clinical care & 70.5% were satisfied with the explanation of the diseases & prescription given by the OPD doctor but 72.4% of the OPD attendees did not get any medicine from the hospital.

Table 4: Satisfaction regarding waiting time needed to meet the doctor and dealings of doctors and nurses				
Variables	Percentage			
	Very much unsatisfactory	21	4.10	
	Unsatisfactory	75	14.60	
Waiting time needed to meet the doctor	So so	131	25.40	
	Satisfactory	277	53.80	
	Very much satisfactory	11	2.10	
	Very much unsatisfactory	19	3.70	
	Unsatisfactory	46	8.90	
Dealings of nurses	So so	118	22.90	
	Satisfactory	320	62.10	
	Very much satisfactory	12	2.30	

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	Very much unsatisfactory	06	1.20
	Unsatisfactory	11	2.10
Dealings of doctors	So so	44	8.50
	Satisfactory	408	79.20
	Very much satisfactory	46	8.90

Table 4 shows that 53.8% of the patients were satisfied with the waiting time needed to meet the doctor, 79.2% were satisfied with the dealings of doctors and 62.1% of the patients were satisfied with the dealings of nurses in the OPD. Overall services of AGMC OPD were felt as satisfactory by 57.5% and so so by 30.3% of the OPD attendees.

Table 5: Overall Satisfaction of patients by their gender, age and literacy				
Variables	Unsatisfied	So so	Satisfied	Significance
	Number (%)	Number (%)	Number (%)	
		Gender		
Male	30 (12.30)	83 (33.90)	131 (53.50)	
Female	19 (7.10)	73 (27.00)	178 (66.00)	$\chi^2 = 12.097$
I cillaic	17 (7.10)	75 (27.00)	170 (00.00)	p = 0.033
		Age group		
18-35 years	21 (8.30)	87 (34.00)	147 (57.50)	
36-59 years	21 (10.00)	58 (27.60)	131 (62.40)	$\chi^2 = 12.153$
60 yr. & above	07 (14.30)	11 (22.40)	31 (63.20)	p = 0.275
	·	Literacy	·	
Illiterate &				
primary	23 (8.58)	77 (28.73)	168 (62.69)	
educated				$\chi^2 = 1.536$
Secondary				p = 0.4639
educated	26(10.53)	79(31.98)	142(57.49)	
& above				

Table 5 shows that level of satisfaction was significantly higher among the female patients (p = 0.033). Patients aged 60 years or above and lesser educated patients were more satisfied with the OPD services though these were not significant. The present study has identified service of the registration and enquiry counters, sitting arrangement, provision of medicines, drinking water, toilet, cleanliness and ventilation of the waiting space of OPD etc. as important determinants of patient's satisfaction.

DISCUSSION: The patients are often dissatisfied when their felt needs are not fulfilled. Here, felt need is what the patient feels, wants and thinks need to be done. Studies have shown that expectations of patients are based on their experiences, environment, social background and personality.^{2, 3} Present study shows that majority of the respondents were female and were housewives. This is at par with Galhotra et al 2013.⁴ In this study level of satisfaction was significantly higher among the female

patients, which was similar to the findings of Umar I et al 2011.⁵ Present study detected that only 14.6% respondents were satisfied with the toilets whereas Galhotra et al 2013⁴ found that 81% of the respondents were satisfied with the toilets. In this study majority of the respondents were primary educated like Sodani et al. 2010.6 Sodani et al. 2010 6 found that 54% respondents were satisfied with the sitting arrangement similarly in the present study 49.9% respondents were satisfied with the sitting arrangement. But Galhotra et al 2013 ⁴ found it to be 100%. There is now a common consensus that care cannot be viewed as high quality unless the patient is satisfied.⁷ In the present study, higher age group and lesser educated patients were more satisfied with the OPD services, which were at par with the findings of Das P et al, 2010.8 Customer evaluation of a product, for example, is known to be influenced by both customer effort and expectation.⁹ Nevertheless, the findings of this study are of interest, and although patient satisfaction with care at a Govt. hospital in Tripura has not been previously researched, there are some indications that a differential in patient satisfaction according to the type of practice does exist. Patients may be more satisfied with care by private hospitals with their interpersonal skills, time availability and comprehensive nature of care. Anecdotally, appointments at government hospitals are longer for given procedures than with private hospitals for the same procedure, and this may be an important factor in influencing patient satisfaction, although there is no evidence to support this, and this may be an interesting avenue for further research.

CONCLUSION AND RECOMMENDATION: Despite various limitations like time and other resource constraints, questionable sample size due to non-availability of representative studies, lack of comparison across different institutions and inclusion of limited number of study variables, the present study could throw some light upon areas of hospital services which require further improvement. Based upon findings of present study the following recommendations are suggested for improvement. Registration counter and enquiry services should be made more patient friendly. More sitting arrangement should be made in the OPD. Drinking water facility, toilet, cleanliness and ventilation of the OPD require improvement. Supply of essential drugs to the OPD patients requires strengthening and Patients' feedback mechanism should be set up in the OPD.

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