



## Patient Satisfaction and Their Determinants in Outpatient Department

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### KEYWORDS

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### ABSTRACT:

**Introduction:** Patient satisfaction provides insight into how closely healthcare practitioners adhere to their patients' expectations and preferences, acting as a compass to guide our knowledge of the quality of treatment. It illuminates the worldwide healthcare scene and serves as a universal symbol of patient-centered care.

**Aims:** To analyses the patient satisfaction among OPD Attendees of a tertiary care hospital in northern India. To study the level of satisfaction among OPD Patients, the level of satisfaction among the patients regarding the behavior of the hospital staff, the perception of patients about cleanliness in the OPD of the hospital and the perception of patients about diagnostic services in the OPD of the hospital.

**Materials and method:** The questionnaire for data collection will be prepared after reviewing the existing literature on patient satisfaction studies conducted globally. We shall make a Feedback Form in which various diagnostic facilities of the hospital, staff, cleanliness and overall experience in a hospital will be given a rating from 0 to 10. Data will be collected from various departments of the hospital including OPDs of General Surgery, General Medicine, Gynaecology, Ophthalmology, Dermatology and Orthopedics. Feedback will be stored in MasterCard or forms and results will be drawn from them at the end.

**Result:** In our study, 20 (20%) patients were Literate, 30 (30%) patients were Illiterate, 12 (12%) patients were Primary level, 35 (35%) patients were Secondary level, and 3 (3%) patients were Higher education. The value of z is 5.3033. The value of p is < .00001. . In our study, 55 (55%) patients were Satisfied with OPD time. The value of z is 0. The value of p is 1. The result is not significant at p < .05. In our study, 70 (70%) patients were Willingness to return. The value of z is 8.6603. The value of p is < .00001.

**Conclusion:** The study's findings about the factors that influence patient satisfaction in



outpatient departments emphasize how crucial it is to recognize and cater to patients' wants and preferences in healthcare settings. Healthcare administrators and legislators can adopt targeted reforms to improve the patient experience by identifying critical aspects that impact satisfaction levels, such as waiting times, contact with healthcare staff, and overall facility atmosphere. In addition to providing insightful information on the intricacies of outpatient care, this research lays the groundwork for the creation of patient-centered care delivery systems. Going forward, maintaining focus on these factors will be crucial to encouraging greater patient satisfaction and, eventually, raising the caliber of outpatient services rendered.

## Introduction

Patient satisfaction provides insight into how closely healthcare practitioners adhere to their patients' expectations and preferences, acting as a compass to guide our knowledge of the quality of treatment. It illuminates the worldwide healthcare scene and serves as a universal symbol of patient-centered care. It serves as more than just an indication; rather, it is an essential statistic that illuminates the way toward improved healthcare efficacy and ongoing progress [1]. While affluent countries have long acknowledged patient satisfaction as a fundamental component of high-quality healthcare, its actual relevance has not yet been adequately explored in locations like Nepal, where people frequently prioritize their daily battle for basic needs [2].

As the main point of contact between patients and medical staff, the Outpatient Department (OPD) is a crucial component of the hospital's infrastructure. In addition, because the hospital is heavily utilized by the community, the OPD is a key indicator of the overall operational effectiveness of the facility. Patient perspectives on healthcare have gained significant recognition as a basic standard for evaluating the quality of healthcare, coinciding with the sector's evolution [3].

It is impossible to overestimate the significance of researching patient satisfaction globally as it has a big impact on how continuously healthcare systems throughout the globe are improved. Though Nepal is committed to offering comprehensive healthcare services with a focus on patient satisfaction, making significant progress is still difficult. Furthermore, in the context of Nepal's healthcare system, empirical research on patient satisfaction is noticeably lacking,

especially in tertiary care public institutions. By thoroughly evaluating patient satisfaction ratings among patients receiving treatment at the Outpatient Department of Nepal's government-run tertiary care Mental Hospital, this study seeks to close this research gap. The results of this study have the capacity to shed light on the experiences of patients in public tertiary care institutions as well as add to the larger international conversation about improving the quality of healthcare services [4].

## Materials and Methods

**Study Design:** Cross-sectional study among patients attending OPD of a tertiary care hospital.

**Sample Size:** 100

**Place of Study:** Santosh Medical College & Hospitals, Ghaziabad.

**Time Period:** 12 Months.

### Inclusion Criteria:

- All OPD Patients willing to participate in the study.
- Patients of age group 18-65.

### Exclusion Criteria:

- Patient's refusal to be a part of the study.
- Patients older than 65 years.
- Immuno-compromised patients.
- Very sick patients in ICU/IPD.
- Mentally retarded patients.

**Methodology:** The questionnaire for data collection will be prepared after reviewing the existing literature on patient satisfaction studies conducted globally. We shall make a Feedback Form in which various diagnostic facilities of the hospital, staff, cleanliness and overall experience in a hospital will be given a



rating from 0 to 10. Data will be collected from various departments of the hospital including OPDs of General Surgery, General Medicine, Gynaecology,

Ophthalmology, Dermatology and Orthopedics. Feedback will be stored in MasterCard or forms and results will be drawn from them at the end.

## Result

**Table 1:** Distribution of Gender, Age, Ethnicity and Religion

	Characteristics	Frequency (n = 100)	Percentage (%)
<b>Gender</b>	Male	50	50
	Female	50	50
<b>Age</b>	≤32	47	47
	>32	53	53
<b>Ethnicity</b>	Brahmin/Chhetri	20	20
	Janajati	40	40
	Dalit	20	20
	Madhesi	10	10
	Muslim	5	5
	Others	5	5
<b>Religion</b>	Hindu	40	40
	Buddhist	20	20
	Christian	20	20
	Others	20	20

**Table 2:** Distribution of Residence, Education, Marital status, Occupation, Time to reach health facility, Health insurance

<b>Residence</b>	Urban	51	51
	Rural	49	49
<b>Education</b>	Literate	20	20
	Illiterate	30	30
	Primary level	12	12
	Secondary level	35	35
	Higher education	3	3
<b>Marital status</b>	Married	30	30
	Unmarried/Single	40	40
	Widowed	30	30
<b>Occupation</b>	Agriculture	20	20
	Business	30	30
	Homemaker	12	12
	Service	35	35
	Others	3	3
<b>Time to reach health facility</b>	Less than 30 min	38	38
	30–60 min	60	60
	More than 1 h	2	2



Health insurance	No	49	49
	Yes	51	51

Table 3: Distribution of Hospital related information

	Characteristics	Frequency (n = 100)	Percentage (%)
Source of information to visit hospital	Friends/Family	58	58
	Internet	20	20
	Newspaper	2	2
	Others	20	20
Main reason to visit	Good quality	30	30
	Near to home	12	12
	Relative suggestion	35	35
	Referred	20	20
	Others	3	3
Other hospital before	Private	35	35
	Public	65	65
Visited due to proximity	Yes	47	47
	No	53	53
Satisfied with OPD time	Yes	55	55
	No	45	45

Table 4: Distribution of Reutilization of service

	Characteristics	Frequency (n =100)	Percentage (%)
Willingness to return	Yes	70	70
	No	20	20
	Not sure	10	10
Willingness to recommend others	Yes	75	75
	No	20	20
	Not sure	5	5

In our study, 50 (50%) patients were male and 50 (50%) patients were Female. The value of z is 0. The value of p is 1. The result is not significant at  $p < .05$ . In our study, 47 (47%) patients were  $\leq 32$  years of age and 53 (53%) patients were  $> 32$  years of age. The value of z is 2.8575. The value of p is .00424. The result is significant at  $p < .05$ . In our study, 20(20%) patient was Brahmin/Chhetri, 40 (40%) patients were Janajati, 20 (20%) patients were Dalit, 10 (10%)

patients were Madhesi, 5 (5%) patient was Muslim, and 5 (5%) patient was others. The value of z is 3.2071. The value of p is .00132. The result is significant at  $p < .05$ . In our study, 40 (40%) patients were Hindu, 20 (20%) patient was Buddhist and 20 (20%) patients were Christian. The value of z is 0. The value of p is 1. The result is not significant at  $p < .05$ . In our study, 51 (51%) patients were from rural area and 49 (49%) patients were from urban area. The



value of  $z$  is 0.2828. The value of  $p$  is .77948. The result is not significant at  $p < .05$ . In our study, 20 (20%) patients were Literate, 30 (30%) patients were Illiterate, 12 (12%) patients were Primary level, 35 (35%) patients were Secondary level, and 3 (3%) patients were Higher education. The value of  $z$  is 5.3033. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ . In our study, 30 (30%) patients were married, 40 (40%) patients were unmarried and 30 (30%) patients were widowed. In our study, 20 (20%) patients were Agriculture, 30 (30%) patients were Business man, 12 (12%) patients were Homemaker, 35 (35%) patients were Service man, and 3 (3%) patients were Others Occupation. The value of  $z$  is 5.7679. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ . In our study, 38 (38%) patients were Time to reach health facility in Less than 30 min and 60 (60%) patients were Time to reach health facility in Less than 30 min and 2 (2%) patients were Time to reach health facility in More than 1 h. The value of  $z$  is 8.8676. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ . In our study, 51 (51%) patients had Health insurance. The value of  $z$  is 0.2828. The value of  $p$  is .77948. The result is not significant at  $p < .05$ .

In our study, 58 (58%) patients were Source of information to visit hospital through Friends/Family, 20 (20%) patients were Source of information to visit hospital through Internet, 2 (2%) patients were Source of information to visit hospital through Newspaper and 20 (20%) patients were Source of information to visit hospital through others. The value of  $z$  is 8.641. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ . In our study, 30 (30%) patients were Main reason to visit Good quality, 12 (12%) patients were Main reason to visit Near to home, 35 (35%) patients were Main reason to visit Relative suggestion, 20(20%) patients were Main reason to visit Referred and 3 (3%) patients were Others reason to visit. The value of  $z$  is 5.3033. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ . In our study, 35 (35%) patients were visited the private hospital before coming to this hospital and 65 (65%) patients were visited the Public hospital before coming to this hospital. The value of  $z$  is 4.2426. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ . In our study, 47 (47%) patients were visited due to proximity. The value of  $z$  is 0.8485. The value of  $p$  is .39532. The result is not

significant at  $p < .05$ . In our study, 55 (55%) patients were Satisfied with OPD time. The value of  $z$  is 0. The value of  $p$  is 1. The result is not significant at  $p < .05$ . In our study, 70 (70%) patients were Willingness to return. The value of  $z$  is 8.6603. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ . In our study, 75 (75%) patients were Willingness to recommend others. The value of  $z$  is 10.1036. The value of  $p$  is  $< .00001$ . The result is significant at  $p < .05$ .

## Discussion

The purpose of the current study was to evaluate patient satisfaction with different aspects of healthcare. 52.9% of patients in a comparable patient satisfaction research at Nepal Medical College Teaching Hospital expressed dissatisfaction with outpatient department (OPD) services, which is less than the study's overall satisfaction percentage of 74.8% [5]. Lower satisfaction scores were seen for technical quality, physical environment, and some accessibility and convenience components [6–7]. These findings may have been caused by variables including illness state, the lack of close psychiatric care centers, high patient volume, and a shortage of physicians and paramedics.

We found that, equal number of patients had male and female population [50(50%)]. Male: Female ratio was 4.3:1 but this was not statistically significant ( $p=1$ ).

According to a research done at the Western Regional Hospital in Pokhara, Nepal, the accessibility and convenience domain had the greatest degree of satisfaction [8]. The observed discrepancies in the results within a comparable healthcare environment may be explained by variations in the sample size, data collecting method, and specialized treatment offered by the two tertiary care facilities [9].

In our study, out of 100 patients most of the patients were  $>32$  years old [53(53%)] which was statistically significant ( $p=.00424$ ), ( $z=2.8575$ )

It was found that, most number of patients from Janajati Ethnicity [40(40%)]. It was statistically significant ( $p=.00132$ ), ( $z=3.2071$ )

We found that, majority of the patients had Hindu [40(40%)] and it was statistically significant ( $p=1$ ).



We found that, significantly higher of patients were belong from Urban [51(51%)] and it was not statistically significant ( $p=.77948$ ), ( $z=0.2828$ )

Our study showed that, most of the patients were Secondary level education [35(35%)] which was statistically significant ( $p<.00001$ ), ( $z=5.3033$ )

About 91% of patients expressed satisfaction with the interpersonal contact area, particularly with regard to doctors' time allocation to patients, according to a research done at a private hospital in India [10].

We found that, most number of patients were unmarried [40 (40%)].

We observed that, majority of the patients were Business man [30 (30%)] and it was statistically significant ( $p<.00001$ ), ( $z=5.7679$ )

We found that, majority of the patients were Time to reach health facility in Less than 30 min [60(60%)] and it was statistically significant ( $p<.00001$ ), ( $z=7.2296$ )

The most important and reliable indicators of patient happiness, according to a comprehensive evaluation of patient satisfaction factors conducted globally, were age and proximity to medical facilities [11].

We found that, majority of the patients had Health insurance [51(51%)] and it was not statistically significant ( $p=.77948$ ), ( $z=0.2828$ ) while, Significant correlations between these factors and patient satisfaction have been shown in earlier investigations [12]. Without taking into account religious factors in healthcare services, these differences may be caused by the diversity of ethnic group doctors in hospitals, patients' perspectives on the services provided by healthcare facilities, clinicians' communication and decision-making skills, and the technical quality of the facility, providers, and logistics items.

We found that, majority of the patients were Source of information to visit hospital through Friends/Family [58(58%)] and it was statistically significant ( $p<.00001$ ), ( $z=8.641$ )

We found that, majority of the patients were Main reason to visit for Relative suggestion [35 (35%)] and it was statistically significant ( $p<.00001$ ), ( $z=5.3033$ )

We found that, majority of the patients were Satisfied with OPD time [55(55%)] and it was not statistically significant ( $p=1$ )

We found that, majority of the patients were Willingness to return [70 (70%)] and it was statistically significant ( $p<.00001$ ), ( $z=8.6603$ )

We found that, majority of the patients were Time to reach health facility in Less than 30 min [75 (75%)] and it was statistically significant ( $p<.00001$ ), ( $z=10.1036$ )

## Conclusion

The study's findings about the factors that influence patient satisfaction in outpatient departments emphasize how crucial it is to recognize and cater to patients' wants and preferences in healthcare settings. Healthcare administrators and legislators can adopt targeted reforms to improve the patient experience by identifying critical aspects that impact satisfaction levels, such as waiting times, contact with healthcare staff, and overall facility atmosphere. In addition to providing insightful information on the intricacies of outpatient care, this research lays the groundwork for the creation of patient-centered care delivery systems. Going forward, maintaining focus on these factors will be crucial to encouraging greater patient satisfaction and, eventually, raising the caliber of outpatient services rendered.

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