A STUDY OF PATIENT'S SATISFACTION TOWARDS SERVICES RECEIVED AT ADMISSION & PERCEPTION OF QUALITY OF LABORATORY SERVICES

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***Abstract*—**
Objective: **The main objective of the study is to measure the satisfaction of Admitted patients and perception of quality of Lab services**
Materials and methods: The present cross sectional study was conducted among 450 patients Admitted in hospital during 6 months. Questionnaire used for analysis.
Results: Maximum number of patients i.e. 216(48%) were in the age group of 21-40. About 52% patients were females. Difficult to locate the laboratory department. Only 4% patients were found unsatisfied.
Conclusion: According to the patient's opinion, the study showed good satisfaction with respect to registration services, doctor services, lab services and pharmacy staff services.
Keywords: Patient's satisfaction, IPD Services, Laboratory services.

I. INTRODUCTION

TODAY the hospital is a place for the diagnosis and treatment of human ailments and restoration of health and well being. The basic function of a hospital is to give proper treatment to the injured and sick without having any social, economic and racial discrimination. Some of the other important functions and services of modern hospitals are training of the doctors and nurses, support to medical research and assistance to all activities carried out by public health and voluntary agencies to prevent disease.

Nowadays, patient's satisfaction is an integral part of hospital management across the world. The health care industry in recent years has restructured its service delivery system. The restructuring has focused on finding effective ways to satisfy the needs and desires of the patients. Patient's satisfaction is a basic requirement for healthcare provider because the satisfaction related to quality of healthcare is provided by hospitals.

Hospitals are characterized by having wide diversity of objectives and goals for different personnel, professional groups and subsystems. For example: The house keeping department works towards maintaining cleanliness and sanitation, the clinical team focus on patient care, the Administration team works on problem solving and hospital betterment, the marketing team works towards brand building and better marketing of services. The hospital is in continuous operation which requires high operating costs and substantial personnel and scheduling problems.

This research attempts to provide direction for the advancement of knowledge and practice in the field based on a number of considerations: first, it is possible to provide a more consistent definition of competition in health care in relation to patient satisfaction; second, it is important to identify and understand the mechanism of competition in the health care industry if premium services and products are to be offered to patients; third, it is possible to apply theories, concepts, and principles from other disciplines to gain insight concerning competition in health care; and fourth, there is a need for greater comprehension in delineating the impact of increased competition via the use of a more precise definition as well as the knowledge from other disciplines.

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Patient care services in India have undergone a vast change over the last few decades and encompass the entire nation. The industry is expected to supersede China by 2030 in terms of population expansion. The rapidly increasing health care industry of India is one of country's largest sectors, both in terms of revenue and employment. It has been estimated that the healthcare industry of India is will grow by & 40 billion. The continuous increase in the population of India is considered one of the principal reasons for the growth in the patient care services in India. The rise in the infectious as well as chronic degenerative diseases has contributed to the rise in the patient care services.

In spite of the fact that the Indian healthcare industry is rapidly expanding, healthcare infrastructure in India is very poor. A noticeable percentage of India suffers from poor standard of healthcare services. Most of the healthcare facilities of India provided by the various

healthcare services are limited and of low standard. In order to understand the current status of the healthcare services in India, it is important to know about the different healthcare services found in the country. Public health services, essential public health services, preventive health services, mental healthcare services, home health services, Magellan health service and school health services are some of the healthcare services found in India. It has been found out that while the private health services have been rising for meet the needs of the rich citizens and foreigners, public health services in India are lagging behind and suffering in a major way. It has also been found out that less than 1% of the GDP is spent on the public health care services in India. Surveys made throughout India points out that 65% of the Indian population cannot access to modern medicines. In addition, a number of drugs and even many diagnostic tests are still unavailable in the public health care sector of India. Most of the hospitals, one of the prime healthcare services in India, are located in the urban areas, thereby making it almost impossible for the rural people to access.

Hospitals deal with problems of life and death. This has psychological and physical stress on personnel at all levels in the hierarchy. Thus measuring the quality of product [healthy and satisfied patient] is a problem because patient care delivered has no precise measurement. Hospitals provide services. Unlike the production industry where productivity and quality may be easily defined, hospitals productivity and quality cannot be quantified easily. Hospitals should always comply by the medical ethics. [e.g.: patient confidentiality].

Thus the importance management of patient care services in hospitals in an essential element of hospital management which would lead to high degree of patient satisfaction and thereby reducing the health burden in India. The study being undertaking will help in streamlining the process of healthcare services in hospitals.

II. PRINCIPLES OF HOSPITAL PLANNING

High Quality Patient Care:
The hospital must be designed, staffed and equipped to meet the stated objectives in addition to providing high quality medical care. There must be a good organizational structure. The quality of patient care delivered should be strictly monitored through continuous review of existing facilities, services offered etc. The hospital should have adequate number of competent staff who would ensure a high quality patient care. The medical staff should be provided continuous medical education that keeps them informed about the latest trends and technology.

Community Orientation:
The needs of the population should be borne in mind while planning the hospital. The hospital should be located at a convenient and easily accessible location. While outlining the charges for the healthcare facilities, the following factors should be taken into consideration i.e. the population mix, social status, and education and earning capacity of the target population. The hospitals Governing Board may have people representatives from the community. The hospital should also involve itself in community outreach programs that might not only promote the hospital services, but will also help in developing goodwill and helps in understanding the needs of the community.

Economic Viability:
The hospital may not be profit making at all times. Hence there should be a sound Financial management system in place. The healthcare facility should be able to identify and adopt means to be self sustaining. Any renovation and expansions planned should be done rationally, taking the views of the community into consideration.

Sound Architecture:
The design adopted in putting up a hospital should consider efficient use of the facility and personnel. Flexibility should be adopted during designing, ensuring proper circulation space for movement of staff, patients, relatives and friends. The space should also accommodate movement of goods and materials used for patient care. Identifying areas prone to infection and adopting infection control measures at preliminary stage of planning contribute to a sound architecture. In short Design should follow function and not vice versa. Design should accommodate and consider future expansion. Disaster planning should be done simultaneously with the planning and design of the hospital structure.

Analysis:
In this study we collected data from 450 patients who were discharged during the study period were included in the study. The researcher was uses questionnaire to collect the data from the respondents.
Data was entered in Microsoft Excel sheet and analyzed using the software SPSS version 17. Discrete data was analyzed using Pearson's Chi-square test for normal distribution, values<0.05 were considered significant.

Table 1: The description about Socio and demographic profile:

Respondent	n = 450
a Enduring	51%
b Attendant	49%
Age of the enduring	
a < 20	9%
b 21-40	48%
c 41-60	29%
d > 60	14%
Sex/ Gender of the enduring	
a Male	48%
b Female	52%
Duration of stay/admission	
a < 2 days	1%
b 2-5 days	18%
c > 5 days	81%
Education of enduring	
a Illiterate	14%
b Primary	20%
c Matriculation	52%
d Sen. Secondary	9%
e Graduate	5%
Occupation of enduring	
a Skilled	23%
b Unskilled	36%
c Unemployed	10%
d Housewife	28%
e Student	3%
Family Income/ month	
a < Rs. 2000	23%
b Rs. 2000- 5000	44%
c Rs. 5000- 10,000	26%
d > Rs.10,000	7%

Table 2 : Services available at Admission

Respondent	n = 450
Mode of admission	
a Through emergency	72%
b Through outdoor	28%
Helpfulness of the person at Registration desk	
a Unsatisfactory	4%
b Average	26%
c Satisfactory	62%
d Good	8%
Availability of Wheel chair / Stretcher	
a Available	88%
b Not available	12%
Ward attendant/ Support employee for assistance at entrance	
a Available	96%
b Not available	4%
Ward location	
a Approachable	82%
b Difficult to approach	18%
Sign Boards	
a Adequate & helpful	86.75%
b Inadequate	13.25%
Time taken between Admission and Initiation of treatment	
a Immediate	20%
b < 10 mins	51%
c 10-30 mins	16%
d >30 mins	13%

III. Results

The Socio and demographic outline from table 1 demonstrates about the significance of the sanatorium for the reason that preponderance of the respondent were in the age group between 20 to 60 years which is inexpensively productive age group for the families belonging to underserved, needy part of the society. In the midst of them 44 % were not conversant and only 14% were having education beyond matriculation. 36% were unskilled personnel; 10 % were unemployed and 28 % were housewives. 67 % belonged to families having income lesser than Rs.5000/ month. This lower par is largely dependent on the Govt. sector sanatorium and these needy

people do not have large expectations from the sanatorium besides their medical treatment and condition of basic amenities during the stay at sanatorium. At least this much is the right of every human being which should be well considered and provided by the Government.

Table 3: Perception of Quality of Laboratory services

	n = 450
Have you been told about the location / room no. / Department where investigation were advised	
a Yes	91%
b No	9%
Location of Labs for investigations	
a Easily approachable / locatable	73%
b Difficult to locate/ Approach	27%
Time to reach lab/ department for investigations	
a <10 mins	22%
b 10-30 mins	71%
c > 30 mins	7%
Availability of Lab Technician	
a Yes	98%
b No	2%
Approach/ behavior of Lab Technician	
a Satisfactory	89%
b Unsatisfactory	11%
Availability of Investigations results	
a Available on scheduled time	84%
b Delayed	16%

The findings in the table 3 interpret a good contentment levels with the services provided at the laboratories of the sanatorium but the problem lies with the difficulty to locate the labs taking much time to reach the labs for investigations which was ascribed by the enduring due to absence of sign boards and in some of the cases samples have to be taken to some of the departments like pathology and microbiology situated in medical college building on other side of the road. This should be taken care of with adequate boards indicating direction of departments and room no. of designated labs at the entrance gate of the sanatorium and medical college.

Concerning services obtainable in laboratories of the sanatorium table 3 interpret a high-quality contentment levels. Accessibility of lab technician was found to be 98% and 89 % were pleased with their approach towards enduring. But the problem lies with the difficulty to locate the labs and time taken to reach the labs for investigations which was 10-30 mins in 71% of cases and more than 30 mins in 7 % of the cases with 27 % admitting that they had a problem in locating the labs.

IV. Conclusion

"The hospital, a major social institution, offers considerable advantage to both patient and society. It is the place where a large number of professionally and technically skilled people apply their knowledge and skill with the help of world class expertise, advanced and sophisticated equipment and appliances. The rapidly changing health care environment characterized by its high level of complexity, uncertainty and dynamic nature, is faced with increased pressures to improve internal efficiency by cutting cost. Where overcrowded medical and hospital buildings, shortages of medical staff and lack of funds are the reality of today's health care system, it is ultimately the patient who suffers the highest cost."

"Importance of service Quality, direct relationship between service quality and profitability, helps in defensive and offensive marketing i.e. patient repeat dependability and increase of assurance on the specific hospital is done, striking a balance between patients perception and expectations, increasing visits on to the specific hospital, free advertising through word of mouth."

"This study was the systematic study of the specific impact of linkage between expectations and perceived performance relating to the importance of service quality in the selection of a hospital. While the study results can by no means be considered the only ones that can accurately predict patients' likelihood of selecting a hospital, it does give a reasonable expectation of how patients will react with regard to their decision-making based upon service quality levels being observed / practiced in these selected hospitals."

According to the patient's opinion, the study showed good satisfaction with respect to registration services, doctor services, nurse services, lab services and pharmacy staff services.

Limitations of the study:

"The scope of this study was limited only to Healthcare industry. The study was restricted to leading hospitals in Delhi & NCR. The findings of the study may be solely based on the information provided by the respondents. The findings of the study are subjected to bias and prejudice of the respondents."

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