

PATIENTS EXPERIENCES AND SATISFACTION FROM SURGICAL OUT PATIENT DEPARTMENT OF A TERTIARY CARE TEACHING HOSPITAL

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ABSTRACT

Objective: To find out patients experiences and satisfaction from the Surgical Out Patient Department (OPD) of Civil Hospital, Karachi.

Methodology: This cross-sectional study was done in surgical OPD of Civil Hospital, Karachi from January to March 2008. Patients were asked questions regarding general condition of the OPD, administrative procedure, waiting time, consultation time, doctors attitude and ethical behaviour, their professionalism, overall satisfaction, future reutilization and recommendation to others apart some demographic information.

Results: Total 490 patients were interviewed after taking verbal consent. More than three fourth of the patients agreed with good atmosphere (administrative procedure, receptionist attitude, waiting room) of the OPD department, but only 64(13.1%) said that inside the hospital the surgical OPD sign was clearly visible. Mean waiting time was 47.47 ± 15.29 minutes (Range: 15-150). Three hundred one(61.4%) patients were examined and treatment advised by Residents only while 189(38.6) patients received treatment by Consultants. Mean consultation time was 6.03 ± 3.34 minutes (2 - 20) and 246 (50.2%) patients said that consultation time was adequate. From only 287 (58.6%) patients consent was taken before examination but patients privacy was maintained while examining 306 (62.4%) patients. Sixty five (13.2%) patients experienced subsequent visit problem with other units. Four hundred seventy three (96.5) patients said they will utilize the OPD in future and 461 (94.1%) said they will recommend it to other.

Conclusion: Overall patient's experiences and satisfaction from Surgical OPD were fair to good. We have highlighted number of areas in which improvement can be made to increase the quality of care and patient satisfaction.

KEYWORDS: Patients satisfaction, surgical out patient department, patient experiences, quality of care.

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INTRODUCTION

The goal of healthcare team is to provide patient with the best possible health care and service. For most of the patients, a visit to a hospital is often a new and frightening experience. Though interaction with patients seems routine to the hospital staff, the experience of receiving health care is not routine to the patients. The attention, attitude, and the information the hospital staff provide are very

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important to the patients.¹ Satisfaction is one of the core outcome measures for health care.²

Who decides the standards in a hospital - the patients, doctors, nurses, management, medical associations or accreditation organizations? All of them may have some stake in defining the standards of medical care but the patients are the single largest category. They deserve special attention. Therefore, the satisfaction of patients is one of the most important criteria for assessing the quality of care in a health care facility.³ There are quite a few studies from Pakistan⁴ and Iran⁵ about measuring the patient satisfaction in different domains like in-patient, day case surgery satisfaction⁶ but limited local data is available about patient experiences from Out Patients Department (OPD) and their satisfaction.

METHODOLOGY

This cross sectional study was conducted in Surgical Out Patient Department of Civil Hospital, Karachi (CHK). CHK is a 1670-bed tertiary care teaching hospital in the public sector that imparts both undergraduate and post-graduate teaching and training. It is one of the teaching hospitals affiliated with Dow University of Health Sciences (DUHS). CHK attracts patients not only from Karachi but also from the rural areas of the Sindh and Balochistan provinces.

A specially designed proforma was designed to collect data by doctors not working in OPD to minimize the bias. Patients were asked questions regarding general condition of the OPD, administrative procedure, waiting time, doctors attitude & ethical behaviour, their professionalism, future reutilization & recommendation to others apart from some demographic information. Patients were also asked about overall satisfaction with the OPD in a format of a 10-point anchored numerical scale, where '1' indicates not satisfied at all & '10' extremely satisfied. Data was analyzed by SPSS ver. 10. Descriptive statistics was used to analyze variables.

RESULTS

Four hundred ninety patients were interviewed while attending Surgical OPD of Civil

Hospital, Karachi after taking verbal consent during the study period from March to May 2008. Mean age of the patients was 45.0±13.52 years (Range: 12-85). Three hundred ninety seven patients were visiting OPD for the first time. Demographic profile of all patients is shown in Table-I.

More than three fourth of the patients agreed with good atmosphere of the OPD department, but only 64 (13.1%) said that inside the hospital the surgical OPD sign was clearly visible. Mean waiting time was 47.47±15.29 minutes (Range: 15-150). Three hundred one (61.4%) patients were examined and treatment advised by Residents only while in 189 (38.6) patients were examined and treated by the Consultants. Mean consultation time was 6.03±3.34 min (2-20) & 246(50.2%) patients said that consultation time was adequate. From only 287 (58.6%) patients consent was taken before examination but patients privacy was maintained while examining 306(62.4%) patients. (Table-II)

Sixty five (13.2%) patients experienced subsequent visit problem with other units. Four hundred seventy three (96.5) patients said they will utilize the OPD in future and 461 (94.1%) said they will recommend it to other (Table-II). Overall patients were satisfied with the Surgical OPD with mean score of 7.41 ± 0.97 (Range: 3-10).

DISCUSSION

The health care system is basically a service based industry and customer experiences and

Table-I: Demographic profile of the patient attending surgical OPD

| Variable | n (%) |
|-------------|------------|
| Age (years) | |
| <36 | 128 (25.7) |
| 36-50 | 185 (37.8) |
| >50 | 179 (36.7) |
| Gender | |
| Male | 294 (60) |
| Female | 196 (40) |
| Visit | |
| First | 397 (81) |
| Subsequent | 93 (19) |

Table-II: Results of the questionnaire about experiences of Surgical OPD

| Question | n (%) |
|---|------------|
| Inside the hospital the surgical OPD sign was clearly visible | 64 (13.1) |
| Administrative procedures fast and easy | 413 (84.3) |
| Pleasantness and availability of receptionist | 401 (81.8) |
| Waiting room environment was pleasant | 378 (77.1) |
| Is waiting time acceptable | 392 (80.0) |
| Consultation by | |
| Resident | 301 (61.4) |
| Consultant | 189 (38.6) |
| Consultation time was adequate | 246 (50.2) |
| Doctor was welcoming | 255 (52.0) |
| Doctor took interest in you | 311 (63.4) |
| Doctor examined carefully | 462 (94.3) |
| Consent was taken before examination | 287 (58.6) |
| Took care of your privacy | 306 (62.4) |
| Explained what doctor was doing while examining | 71 (14.5) |
| Warned about the side effects of the treatment | 62 (12.7) |
| Your were explained about the decisions | 322 (65.7) |
| You got the information you wanted | 432 (88.2) |
| Agree with Doctor's instruction | 479 (97.8) |
| Faced subsequent visit problem with other units | 65 (13.2) |
| Would reutilize service in future | 473 (96.5) |
| Recommend to others | 461 (94.1) |

satisfaction is of the utmost importance just as in other service-oriented systems.² It becomes an important indirect marketing tool as it has direct impact on improving the quality of the 'product' i.e. health service. Patient compliance is very important for successful treatment outcome and since clinical outcome is always attributed to the provider and never to the patient, the patient compliance with treatment becomes all the more crucial.¹ This study showed overall good experiences of patients with the organizational staff and general atmosphere of the OPD, doctors examination professionalism but lack of ethical concerns like informed consent before examination.

Working over a long period of time in hospitals, the staff becomes insensitive to the pains and anxiety of the patients which is quite natural. There is not much emphasis on the behavioral aspects in our medical colleges.³ Some of the bad experiences of patients in this study were doctors were not welcoming or did not take much interest in them, in taking consent before examination and ensuring privacy, proper explanation about the treatment and their side-effects (Table-II). All of these factors

can be attributed to lack of time available in OPD and high patient to doctor ratio. Within short span of four hours time, each doctor examines an average of 40 patients. Moreover in our set up there is lack of awareness about ethical issues because this is not an important part of surgical training curriculum. Most of the patients received the information they sought for their disease even when doctors were not giving enough time to the patients in OPD. This was a very good quality of our doctor which needs to be highlighted. This study showed that overall patients were satisfied [Mean score: 7.41].

Thomas et al investigated patient satisfaction in oncology outpatient clinic in Middlesex University in Enfield UK and reported that out of 252 patients 92% were reassured as a consequence of their visit. This study also confirmed the fact that clinical staff was most important source of satisfaction.⁷ Similar Italian^{8,9} and British studies¹⁰ also reported strong and weak points of their services that brought out by patient satisfaction surveys and took measures to rectify the problem areas. One important area identified in this study was improper

marking and visibility of Surgical OPD in the hospital premises, which can be easily rectified.

In this study mean waiting time was 47.47 minutes and mean consultation time was 6.03 minutes. Lu SN et al.¹¹ reported in their study that time spent in waiting for registration was 39.8 ± 42.9 minutes. Most (55%) of the patients spent more than one hour in waiting for consultation. The time spent in waiting for filling prescription was 17 ± 6 minutes. Kurata JH et al.¹² compared patient and provider satisfaction with medical care and waiting time in a large family medicine residency program. They reported that approximately 8% of patients and 22% of providers were dissatisfied with waiting time. Patients' estimates of waiting time for care (mean=16.1 min) were significantly shorter than providers' estimates (mean= 27.5 min).

As the frequency of visits increased, patients were weighing physician's attitude and professionalism as the most important determinant of their satisfaction. This is in contrast to the attention paid to the more auxiliary or peripheral dimensions of health care service by patients in their early visits to the hospital.¹³ May be this was the reason in this study that most patients were satisfied with the administrative procedure and environment but not with physicians professionalism, as most of our patients were visiting OPD for the first time.

There are six surgical units in CHK. Each surgical unit runs the OPD once a week. Once a patient was seen by a unit mostly he or she will be followed by the same unit next week, but mostly patients were not briefed about this and when they show up after 2-3 days with investigation etc another unit was running the OPD and patients faced problems. This problem was experienced by 65 (13.2) of patients in this study.

Most of our patients want to reutilize the OPD in future and recommend it to others as well. One reason is good experience and their high satisfaction. But other factor may also contribute like low expectations of patients from the government hospitals as compared to private. As services are free and majority of patients are very poor they didn't have any other

choice. So these factors should be seen in the light of these facts. More work is required in this respect.

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