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## A DESCRIPTIVE STUDY ABOUT HOSPITAL ACQUIRED CONDITIONS IN INPATIENT SERVICES IN HOSPITAL

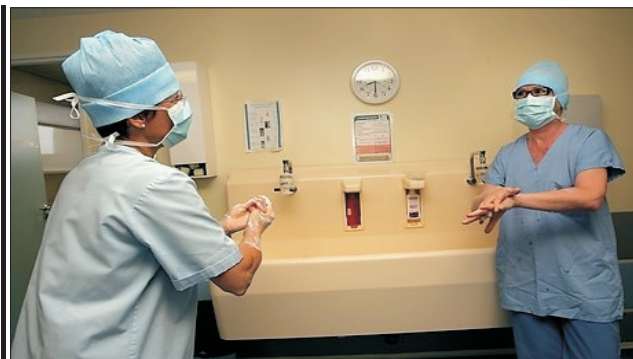
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### ABSTRACT

Inpatient satisfaction is an important measure of quality of services during acquired conditions in a healthcare organization. Other than the medical care issues, the satisfaction and experience involves personal relationships, attention to pain and health education, and the status of hospital environment. Patient's opinion is an important because dissatisfaction suggests opportunities for improvement of health services in the hospital.

Patient satisfaction leads to drift in both new and old patients, which hinders the sustainability of any Hospital in the long run. Hospitals that increase the value of care and patient satisfaction ensure patients will revisit and also increase revenue by taking appropriate steps. The importance of being customer centric has been recently realized by the Health Care sector worldwide.



This study was done with the aim to assess the satisfaction levels in inpatients services at the time acquired conditions. Descriptive methods of analysis were used to analyse the data. The opinions of the respondents on each question were weighed using simple percentages. This is done so as to ascertain the average opinion of the respondents. A total of 100 copies of questionnaires were administered within the scope of selected location, having sorted the returned questionnaires, 100 copies of questionnaires representing 100% were validly used.

The data collected were carefully analyzed using

descriptive statistics to represent the raw data in a meaningful manner. This study highlighted overall patient satisfaction was good regarding the quality of health care services during acquired conditions in the hospital. Areas where patient satisfaction was found to be lowest were patience shown by the nursing staff while communicating with patients and hospital ambiance in terms of peacefulness, both of these are important aspects of health care and there is imperative need to address these problems effectively and urgently in order to improve quality of care.

**KEYWORDS:** Health services, Health education, Hospital environment, Patient satisfaction.

### INTRODUCTION –

Inpatient satisfaction is an important element in care of patient and its management. So assessment of patient satisfaction related to the services provided by the hospital during acquired conditions is an important determinant to take measures in improving health care. Outcome data of such studies help in planning strategies for the inpatient care by the hospital.

The quality of care given by the hospital in acquired condition can be assessed and monitored in a number of ways. Major determinant of inpatients satisfaction are the physical comfort during admission, hospital stay, communication skills, courtesy and respect shown to them and timely care given by nursing staff and doctors.

An important and valid way is to ask the patient themselves about the quality and level of health care given to them at the time of acquired conditions, as assessment and perception of health care services provided may often differ completely from the patient's perception of the same services.

Consumer loyalty is an indispensable performance measurement tool for profit as well as non-profit organizations to sustain competitive advantage (Kotler, 1998) and to enhance business/service performance measures. Nowadays patients, are looking for easy and quick services in this fast growing world. The patients in general develop loyalty towards hospitals based on significant interpersonal experiences they have with the doctors and nurses and about the quality of services of the hospital.

This study was done with an objective to assess in patient satisfaction level during acquired conditions in the hospital and to know about the shortcomings of the care given by nursing staff and doctors, where we need to improve upon. This will also serve the purpose of providing information to the administrators, if there is some scope to adopt and implement some changes in policy in order to provide effective health care services.

#### OBJECTIVES:

- To identify the perception and expectation level of the hospital service.
- To study about the impact of hospital acquired conditions in inpatient services
- To study about the patients care during hospital acquired conditions in hospital
- To study about patients satisfaction in hospital treatment during hospital acquired conditions.
- To suggest the ways to improve the quality of service in hospital

#### II-REVIEW OF LITERATURE

A review of the literature reveals many studies that have shown a positive relationship between service quality perceptions and satisfaction. Researchers have identified several possible variables that may result in inpatient's satisfaction with the hospital services.

**(Fred David, Garner C. Alkin 2006):** These variables have included perceived physician's competence, care and concern towards patients, cost of treatment and communication between physician and patient. Many studies reveal that a lower priority is placed on patient's perception on patient's run clinical expectations of service quality.

According to the American Marketing Association (AMA), customer satisfaction is the degree to which the customer's expectations are fulfilled or surpassed by a product or service. (Oliver 1980), says that customer satisfaction means a mental state of emotions caused by a customer's actual experience.

**(Gilmore Audrey, Goodman Bill Reidstead Man 2006):** A few professionals contend that patients/consumers perception of quality service in health care is not accurate because of the inability of patients to analyze and judge the technical competence of medical practitioners with accuracy. It is further observed that our medical courses focus on imparting technical knowledge to the students and hence doctors do not receive any soft skill training which will enable them to get closer to their patients.

Themes showing patient satisfaction with healthcare delivery in India was conducted by (Sachin Kamble 2007) who has stated that very little emphasis was given by patients on service quality dimensions. The aim of the research was to get an idea of patients interpretations of satisfaction.

The role of government in assuring that our nation's healthcare system provides optimal services for its population has been emphasized upon (The World Health Report, 2000).

Meaning of quality on healthcare system has been interpreted differently by different researchers. (Ovretveit, 1992) Identified three "stake-holder" components of quality: client, professional and managerial. From the client's view point it is the meeting of the patient's unique need and want. (Atkins, Marshall and Javalgi, 1996) at the lowest cost provided with courtesy and on time (Brown et al, 1998) while professional quality involves carrying out of techniques and procedures essential to meet the client's requirement and managerial quality entails optimum and efficient utilization of resources to achieve the objectives defined by higher authorities.

Meeting the objectives of both physicians and patients have been equated with the concept of quality in healthcare by some researchers (Morgan and Murgatrod, 1994) while others have focused on user perception, technical standards and providing care (Bollertal, 2003, Hulton, Mathews and Stones, 2000). Quality of care comprises of structure, process and health outcomes (Peabody et al, 1999); and there are eight dimensions of healthcare service delivery: effectiveness, efficiency, technical competence, interpersonal relations, access to

service, safety, continuity and physical aspects of healthcare.

**(Brown et al, 1998).** The concept of quality notes different meanings to different stakeholders such as government, service provider, hospital administration and patients.

Managing service processes has a very special significance in service industry as it offers a process for delivery of the services. Efficient service offering creates unique customer experiences which would make the consumers use the services.

**(Lovelock and Wright, 1999):** Assert that consumers do believe in moment of truth, it is a point in service delivery where customers meet and there is interaction with the employees of the hospital and the outcome may affect the perceptions of service quality. Hence, the hospitals must ensure that the front end and back end processes are aligned in a manner that they demonstrate a positive moment of truth for the customer.

**(Shostac, 1984):** A customer's service can be regarded as a process that consists of actual steps to satisfy customer requirements. For analyzing customer expectations and designing customer service process model is required. A better service design provides the solution to market success and growth.

**(Alkess L H Cimiotti J, Sloane DM):** Observations from a large study of different countries indicate that organizational behavior and the retention of a qualified and committed nurse work force might be a promising area to improve hospital care safety and quality, both nationally and internationally. Improvement of the hospital work environment can be a relatively low-cost strategy to improve the healthcare and improve patient outcomes.

Patients usually use associated facilities and human factors related to the quality measures to gauge the quality of hospital services and influence customer satisfaction. (Ostwald, Turner, Snipe S and Butler, 1998). Per se, the study has also used four other variables namely physician service performance, nursing service performance, operational quality and overall service quality to supplement the patient loyalty measure to have a better insight into the process.

**(Bennet et al 1997):** In many low and middle income countries, the balance between private and public sector provision of health care over the past decade or so has tilted heavily towards the former.

**(Yesudian 1994, Bhat 1996, Kutty 2000).** Poor quality and lack of public health care are observed and noted, particularly in the treatment of tuberculosis and malaria. (Uplekar and Rangan 1993, Kamat 2001, Uplekar et al 2001). However, despite numerous studies on healthcare systems in India, direct systematic comparisons of the nature of clinical care offered by public and private sector practitioners are lacking. Such evidence is badly needed to inform policies that seek and identify ways in which both sectors might complement each other.

### III-RESEARCH METHODOLOGY

The research design is a plan, structure and strategy to answer a problem. In this study Hospital services is the independent variable and patient satisfaction is the dependent variable. Review of literature was done to study the various developments in inpatient department services. The secondary data was collected by analyzing various professional magazines, research papers by other scholars and research agency reports.

The empirical data for the study were collected through a well-structured questionnaire, which was prepared and distributed among the respondents. Convenience sampling methods were adopted in selecting the participants for this study. The research instrument was divided into two sections, the first tends to obtain the respondent biodata while the second part contains the items regarding the constructs of the subject matter. Descriptive methods of analysis were used to analyse the data. The opinions of the respondents on each question were weighed using simple percentages. This is done so as to ascertain the average opinion of the respondents. A total of 100 copies of questionnaires were administered within the scope of selected location, having sorted the returned questionnaires, 100 copies of questionnaires representing 100% were validly used. The study tends to add to the existing study on hospital acquired conditions in inpatient services in hospital.

**IV-DATA ANALYSIS FINDINGS AND DISCUSSION**

<b>Variables</b>	<b>Frequency</b>	<b>Percentage</b>
<b>SEX</b>		
Male	55	55
Female	45	45
<b>AGE – GROUP</b>		
Below 15 years	10	10
16 to 30	39	39
31 to 45	18	18
46 to 65	17	17
Above 65	16	16
<b>MARITAL STATUS</b>		
Single	29	29
Married	46	46
Divorced	12	12
Widowed	13	13
<b>EDUCATIONAL QUALIFICATION</b>		
Illiterate	10	10
Reading and writing only no formal education		
1 <sup>st</sup> – 8 <sup>th</sup>	14	14
9 <sup>th</sup> - 12 <sup>th</sup>	15	15
Diploma and above	10	10
Others	26	26
	25	25
<b>TOTAL</b>	<b>100</b>	<b>100</b>

**Table 4.1 Socio Demographic Characteristic of the Respondent**

The data obtained from this study were presented using tables with specifications made on the amount of questionnaire distributed. The results were obtained based on the opinions of the respondents.

Following from Table, 55% of the sample size were male while 45% were female, which implies that the population of male respondent is higher than female. Moreover, 46% of the respondents were married, while 29% were single and 12 divorced or separated, though the reason for their present marital status could not be ascertained as at the time of documenting this report.

**CHISQUARE TESTS****Objectives**

To Determine Whether There is Any Significant Relationship between Gender and attitude of doctors during acquired conditions.

**Testing of Hypothesis:**

Ho: there is no significant relationship between Gender and attitude of doctors during acquired conditions.

H1: There is significant relationship between Gender and attitude of doctors during acquired conditions.

			Attitude of doctors during acquired conditions				Total
			Excellent	Good	fair	Bad	
Gender	Male	Count	10	0	0	0	10
		Expected Count	1.7	6.1	1.7	.5	10.0
	Female	Count	7	61	17	5	90
		Expected Count	15.3	54.9	15.3	4.5	90.0
<b>Total</b>		Count	17	61	17	5	100
		Expected Count	17.0	61.0	17.0	5.0	100.0

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	54.248 <sup>a</sup>	3	.000
Likelihood Ratio	41.982	3	.000
Linear-by-Linear Association	25.113	1	.000
N of Valid Cases	100		

a. 4 cells (50.0%) have expected count less than 5. The minimum expected count is .50.

Following from the above table, Asymp. Sig. = .000 Since the Calculated value > Tabulated value; Therefore, Reject the Null Hypothesis. That is, there is significant relationship between Gender and attitude of doctors during acquired conditions.

## V-CONCLUSION AND RECOMMENDATIONS

Patient satisfaction is valid indicator for measurement of service quality. Patient's opinions are important because dissatisfaction suggests opportunities for improvement of health services in the hospital.

This study highlighted overall patient satisfaction was good regarding the quality of health care services. The findings revealed that the 95% of the respondents are said during the hospital acquired conditions the doctors are taking care of the patients were excellent. The important and major short comings observed was the lack of information given to the patient related to their medicine intake. Major improvement is needed for patient education related to drugs used. Patients need to be told about the dose schedule, and most important is about any side effects expected to be informed immediately. Hospital management might put some policies for improving communication skills of the nursing staff focusing on this aspect.

Areas where patient satisfaction was found to be lowest were patience shown by the nursing staff while communicating with patients and hospital ambiance in terms of peacefulness, both of these are important aspects of health care and there is imperative need to address these problems effectively and urgently in order to improve quality of care

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